Hull Public Health Profiles 2022: Drypool Ward
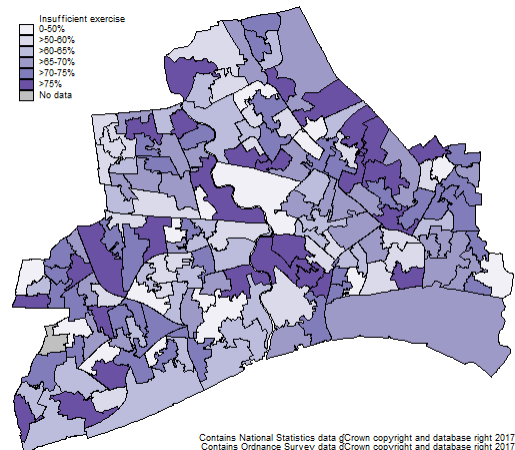

Smoking prevalence
0-10%
>10-20%
>20-30%
>30-40%
>40-50%
>50%
No data

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Problem drinking prevalence
0-20%
>20-30%
>30-40%
>40-50%
>50%
No data

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Obesity prevalence
0-10%
>10-20%
>20-30%
>30-40%
>40%
No data

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Insufficient exercise
0-50%
>50-60%
>60-65%
>65-70%
>70-75%
>75%
No data

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Public Health Intelligence, Hull City Council (www.hulljsna.com), May 2022

About this profile

This public health profile presents the most up to date information on a range of topics, to help us understand who lives in each area of Hull, and what their needs might be. We have also included comparisons with the Hull average, the Yorkshire and Humber average and the England average where data were available

The sources of the information, as well some explanatory notes, are provided in the Data Sources section towards the end of the report.

We hope you find this profile useful. If you have questions or feedback, please use the contact details at the end of this profile.
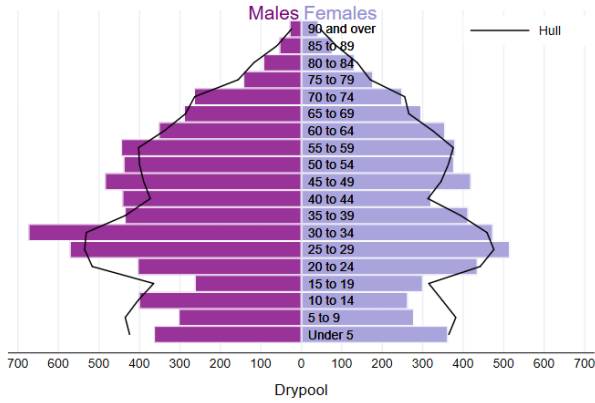
Please do explore the rest of the www.hulljsna.com website, which contains information on health, lifestyles, and attitudes to these, of Hull residents. The website forms the Joint Strategic Needs Assessment for Hull. (See the last page of this report for further information.)

Also included on the website are the annual Director of Public Health Reports for Hull, as well as in-depth survey reports from Health and Wellbeing surveys conducted across Hull among adults (in 2003, 2007, 2009, 2011-12, 2014 and 2019) and young people at secondary schools (in 2008-09, 2012 and 2016), as well as Social Capital surveys conducted in 2004 and 2009.
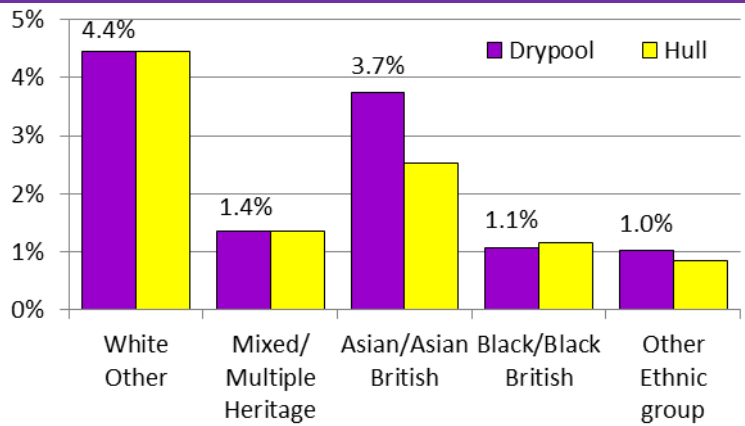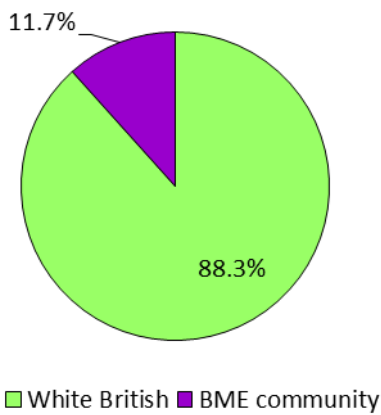
Summary

- In 2020 there were 12,317 residents in Drypool, of whom 2,534 (21%) were aged under 20, and 1,847 (15%) were aged 65+. The population of Drypool is projected to increase by 0% by 2043 to 12,328, with the largest increase seen for those aged 65+, increasing by 22% to 2,247.
- At 88.3%, Drypool had a lower percentage of White British residents than the Hull average (89.7%), from the 2011 Census; a lower percentage of non-British White residents (mostly Eastern Europeans) (4.4%) to the Hull average (4.4%); and at 7.2%, a higher percentage of other Black and Minority Ethnic (BME) residents than the Hull average (5.9%).
- From the 2011 Census, 2,681 households in Drypool were single person households (43%), higher than the Hull average (35%). There were 952 pensioner (65+) households in Drypool of which 70% were single person households. At 9% Drypool had a lower percentage of lone parent households than the Hull average (13%).
- From the 2011 Census, 3,138 households in Drypool were living in owner occupied accommodation (51%), similar to the Hull average (50%); while 16% were renting from the council or other social landlords, with a further 31% renting from private landlords.
- Drypool is the 11th most deprived ward in Hull (out of 21) and only 6% of wards nationally are more deprived. 51% of the areas in Drypool fall within the most deprived fifth (20%) of areas nationally.
- 16% of households in Drypool were in fuel poverty in 2020, compared with the Hull average of 21% and the England average of 13%.
- 31% of dependent children in Drypool were living in child poverty in 2020/21, compared with the Hull average of 33% and the England average of 18%.
- 77% of survey respondents from Drypool were satisfied with their neighbourhood as a place to live, similar to the average for Hull (73%).
- 60% of survey respondents from Drypool reported that their neighbourhood was one where people looked out for each other, similar to the average for Hull (55%); while 21% trusted most of the people in their neighbourhood.
- The overwhelming majority of survey respondents in Drypool (92%) felt safe (very safe or fairly safe) walking alone in their local area during the daytime with a similar percentage feeling safe when alone in their homes after dark (89%). However, 13% felt very unsafe walking alone in their local area after dark, similar to the Hull average (19%).
- In March 2022 the claimant count (those claiming Job Seekers Allowance or Universal Credit with requirement to seek work) for Drypool was 8.5% among men and 7% among women; this compares with 8.7% and 6% for Hull men and women, and 5% and 3.6% for men and women across England.
- Life expectancy at birth in 2017-21 in Drypool was 75.7 years among men and 80.7 years among women; this was 0.7 years higher than the Hull average for men, and 1.0 years higher than the Hull average for women.
- Life expectancy at age 65 in 2017-21 in Drypool was 17.6 years among men and 19.7 years among women; this was 1.5 years higher than the Hull average for men, and 1.0 years higher than the Hull average for women.
- Of the 562 deaths among residents of Drypool during 2017-2021 8% were from lung cancer, 21% were from other cancers, 20% were from cardiovascular diseases and 20% were from respiratory diseases; this compares with 8%, 19%, 24% and 19% respectively for Hull, and 5%, 21%, 24% and 19% respectively for England.
- The rate of preventable deaths in Drypool was 89% higher than for England in 2015-19, this difference was statistically significant.
- Smoking prevalence in Drypool is 24%, similar to the Hull average of 25%, but higher than the England rate of 16%. An estimated 2,300 people aged 16+ in Drypool are smokers.
- An estimated 2,500 people aged 16+ living in Drypool are 'problem drinkers', with 19% of survey respondents binge drinking, 20% drinking more than 14 units a week, including 13% doing both. At 25% the percentage of 'problem drinkers' was similar to the Hull average (26%).
- Around 2,800 people aged 16+ living in Drypool are obese, while a further 4,300 are overweight. At 69%, the percentage of overweight or obese individuals in Drypool was similar to the average for Hull (70%), but lower than England (64%).
- In Drypool 30% of children in Reception Year during the 2017/18-2019/20 academic years, as well as 35% in Year 6, were overweight or very overweight. This was not significantly different to the Hull average for children in both Reception Year (29%) and Year 6 (37%).
- Around 1,200 people aged 16+ living in Drypool are estimated to be at risk of social isolation (defined here as living alone and not speaking to family, friends or neighbours each day). At 11%, the percentage of potentially socially isolated individuals living in Drypool is similar to the average for Hull (10%).
- The birth rate in 2021 in Drypool was 60 births per 1,000 women aged 15-44 years, which was similar to the average for Hull (58 births per 1,000), as well as similar to the England average of 58 births per 1,000.
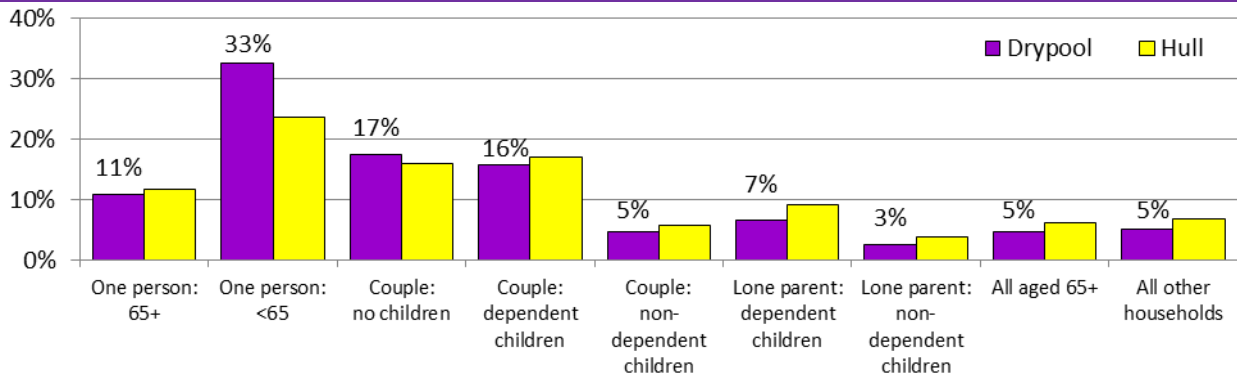
Population structure (2020)[1]

Males   Females

Hull

Drypool

2020 mid-year population estimates from the Office for National Statistics

Age (yrs)	Males	Females	Total
Under 10	667	640	**1,307**
10-19	664	563	**1,227**
20-29	976	950	**1,926**
30-39	1,110	885	**1,995**
40-49	927	740	**1,667**
50-59	884	757	**1,641**
60-69	642	651	**1,293**
70-79	408	426	**834**
80+	177	250	**427**
Total	**6,455**	**5,862**	**12,317**

Ethnicity (from 2011 census)[2]

11.7%

88.3%

☐ White British   ■ BME community

	White Other	Mixed/ Multiple Heritage	Asian/Asian British	Black/Black British	Other Ethnic group
Drypool	4.4%	1.4%	3.7%	1.1%	1.0%

Household composition (2011 census)[3]

■ Drypool ☐ Hull

One person: 65+	One person: <65	Couple: no children	Couple: dependent children	Couple: non-dependent children	Lone parent: dependent children	Lone parent: non-dependent children	All aged 65+	All other households
11%	33%	17%	16%	5%	7%	3%	5%	5%

Household tenure (from 2011 census)[4]

■ Drypool ☐ Hull

Owned outright	Owned with mortgage	Shared ownership	Rented from council	Other social rented	Private rented	Living rent-free
18.3%	32.4%	0.2%	9.8%	6.6%	31.4%	1.4%
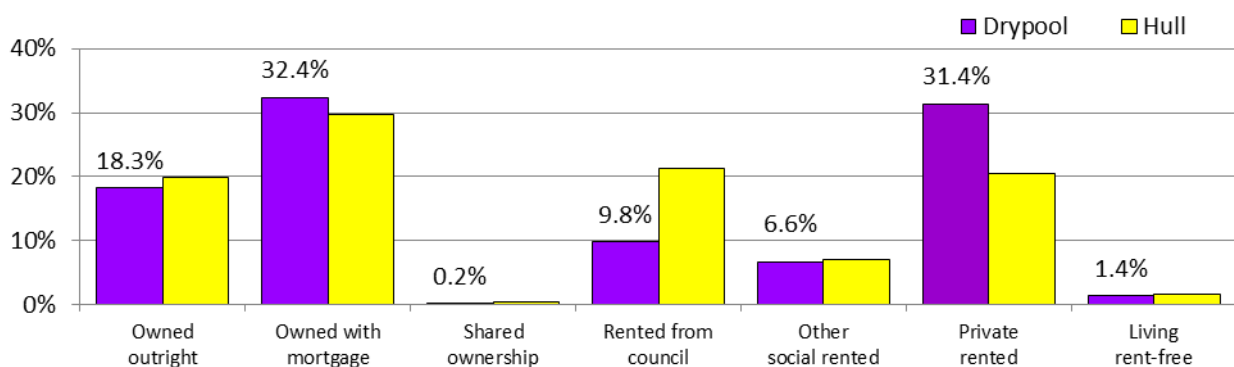
National quintiles of Index of Multiple Deprivation 2019[5]

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IMD 2019 national quintiles (fifths)

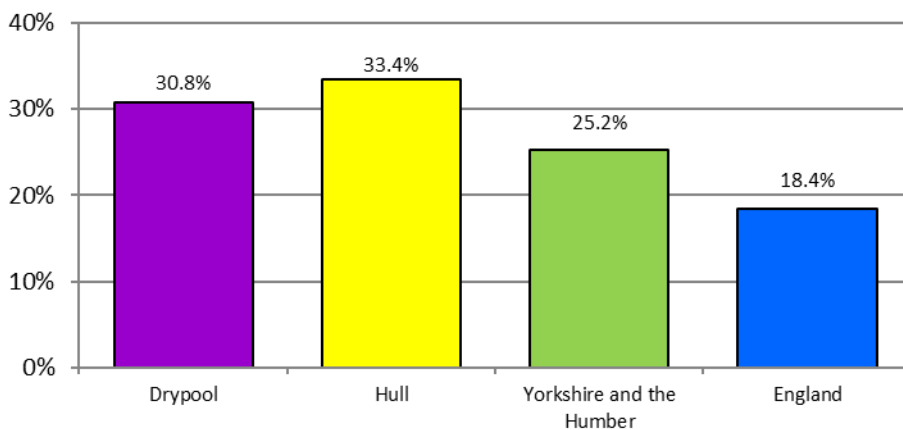■ Most deprived ■ 2 ■ 3 ■ 4 □ Least deprived
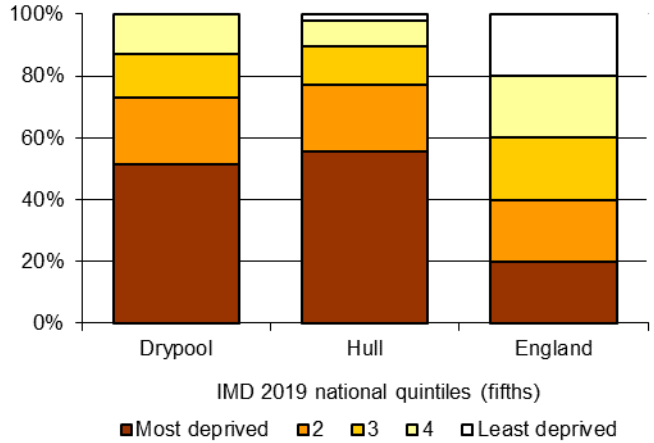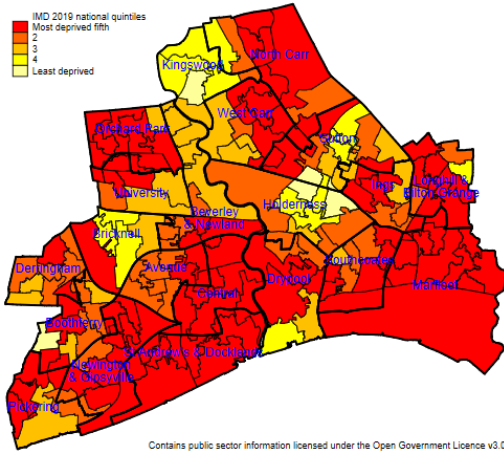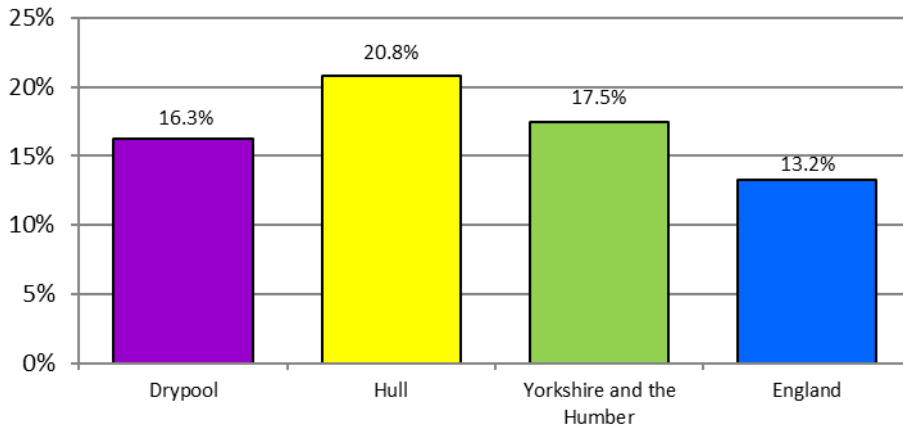
Fuel Poverty 2020[6]

A household is said to be fuel poor if it needs to spend more than 10% of its income on fuel in order to maintain an adequate standard of warmth.

Child Poverty 2020/21[7]

The proportion of dependent children under 20 years living in families in receipt of CTC whose reported income is less than 60 per cent of the median income or are in receipt of IS or (Income-Based) JSA.
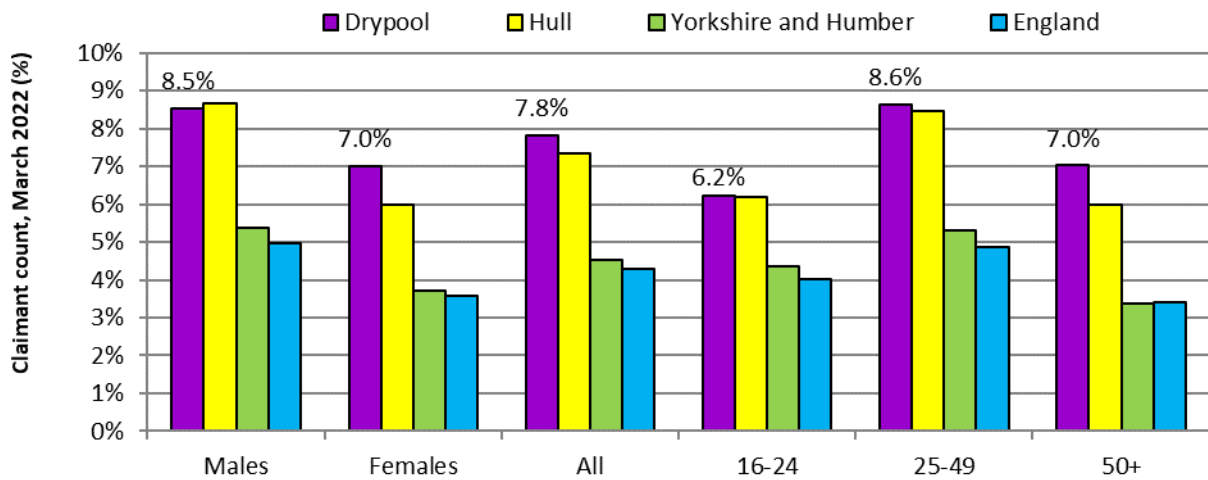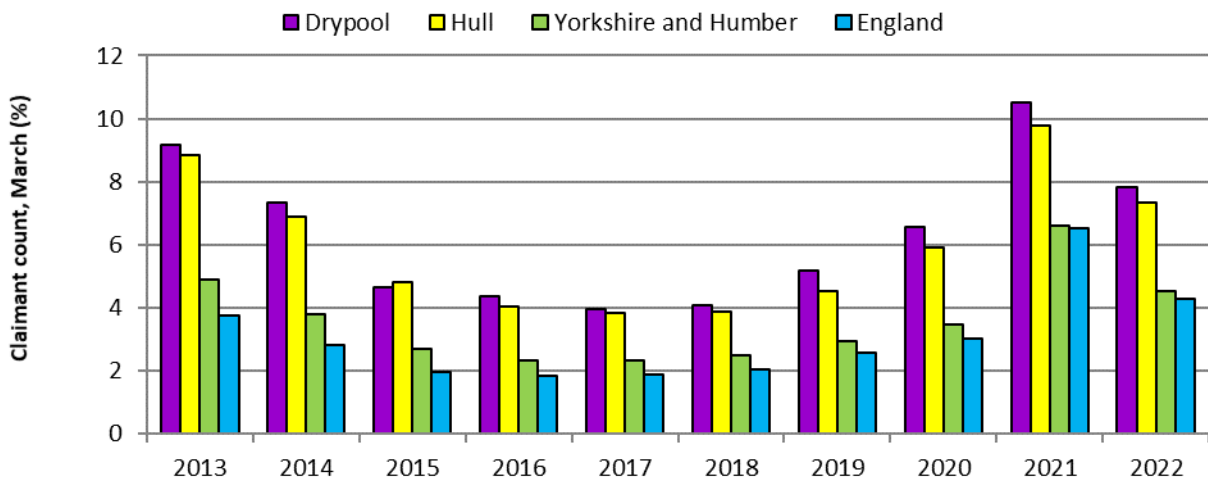
Income-deprived older people (60+)[8]
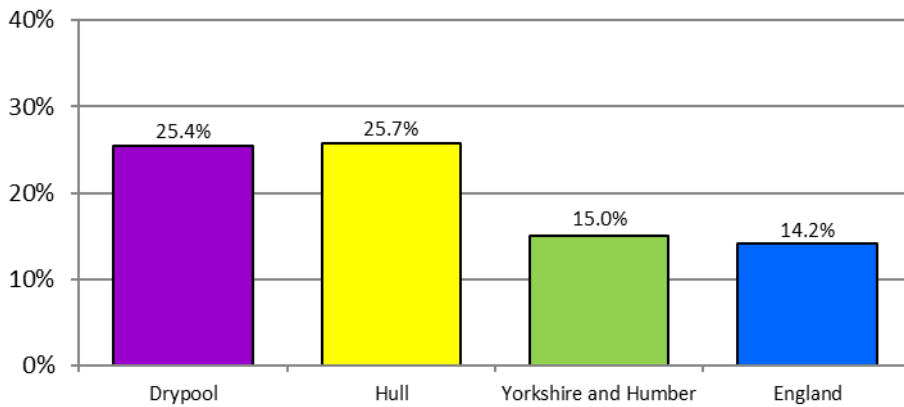
The proportion of adults aged 60+ in receipt of income support, income based JSA, pension credit or child tax credits.
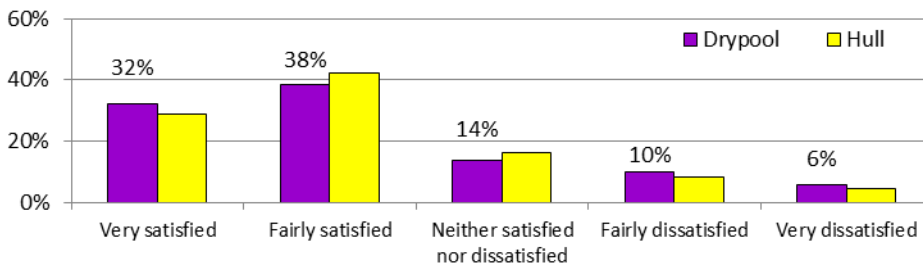
Working age benefits[9]

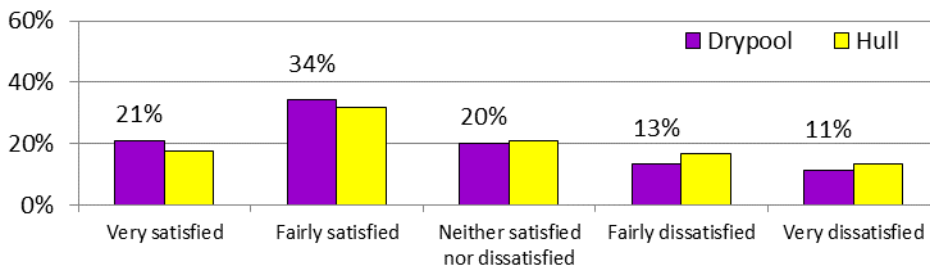### Claimant count, March 2022 (% of working age population)

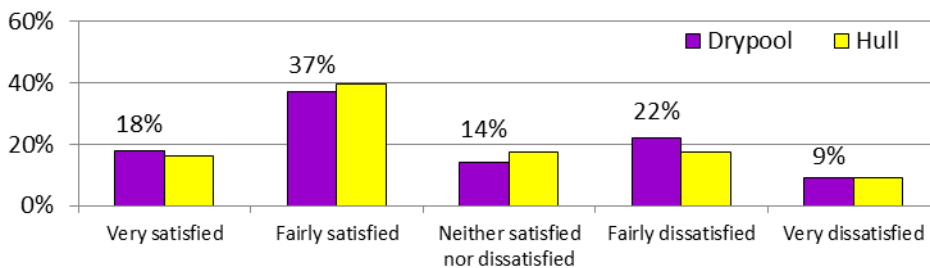### Trends in claimant count, March 2013 to March 2022 (% of working age population)
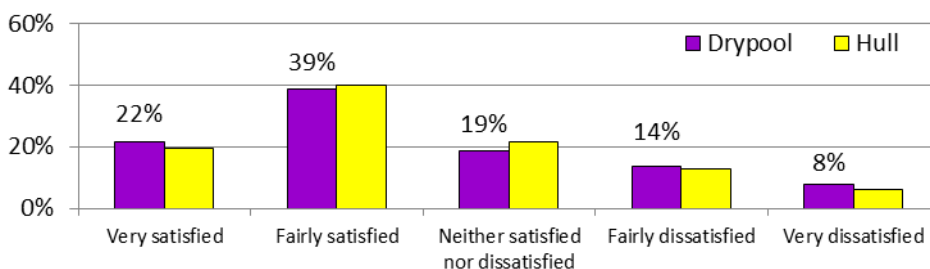
Satisfaction with aspects of the local area[9]

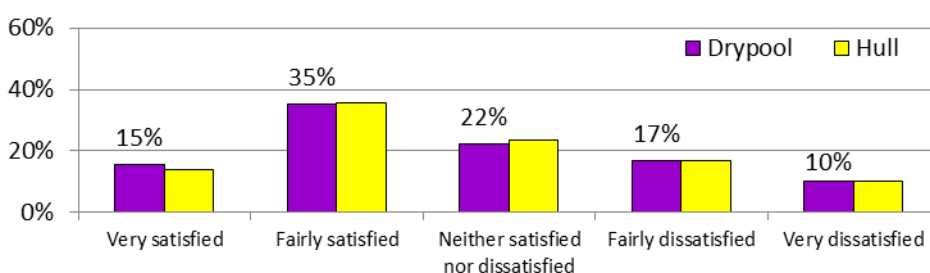
Satisfaction with open spaces in the local area

Very satisfied: Drypool 32%, Hull
Fairly satisfied: Drypool 38%
Neither satisfied nor dissatisfied: 14%
Fairly dissatisfied: 10%
Very dissatisfied: 6%

Satisfaction with parking in the local area

Very satisfied: 21%
Fairly satisfied: 34%
Neither satisfied nor dissatisfied: 20%
Fairly dissatisfied: 13%
Very dissatisfied: 11%

Satisfaction with the street appearance in the local area

Very satisfied: 18%
Fairly satisfied: 37%
Neither satisfied nor dissatisfied: 14%
Fairly dissatisfied: 22%
Very dissatisfied: 9%

Satisfaction with traffic in the local area

Very satisfied: 22%
Fairly satisfied: 39%
Neither satisfied nor dissatisfied: 19%
Fairly dissatisfied: 14%
Very dissatisfied: 8%

Satisfaction with level of anti-social behaviour and crime in the local area

Very satisfied: 15%
Fairly satisfied: 35%
Neither satisfied nor dissatisfied: 22%
Fairly dissatisfied: 17%
Very dissatisfied: 10%

Satisfied with neighbourhood as a place to live

Very satisfied: 32%
Fairly satisfied: 46%
Neither satisfied nor dissatisfied: 17%
Fairly dissatisfied: 6%
Very dissatisfied: 1%
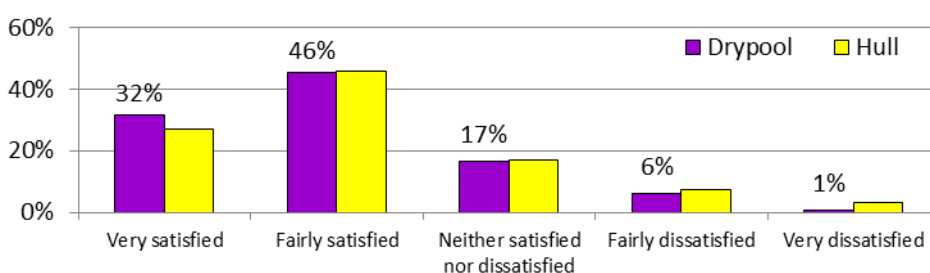
Neighbours look out for one another[10]
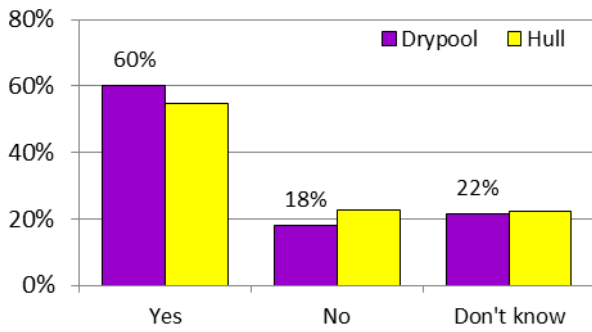
Is this a neigbourhood where neighbours look out for each other?

Trust in neighbours[11]
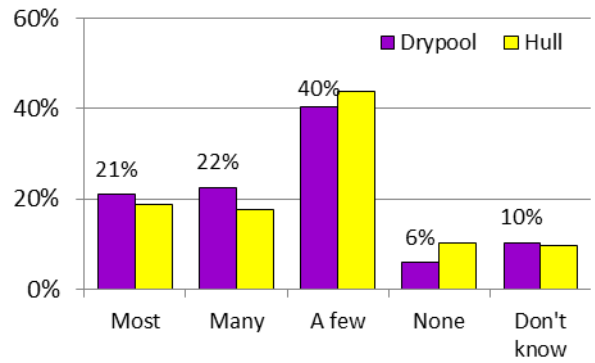
How many people in your neighbourhood do you trust?

Feelings of safety when . . . .[12]

. . . . walking alone in area during the daytime
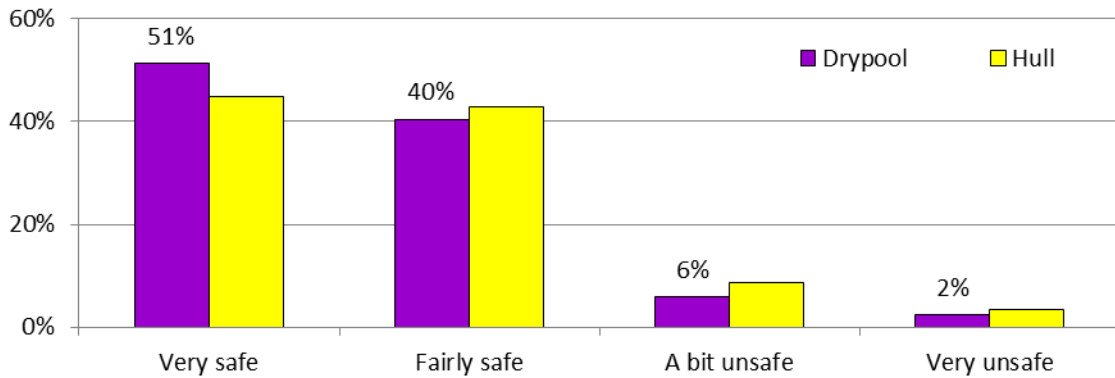
. . . . walking alone in area after dark
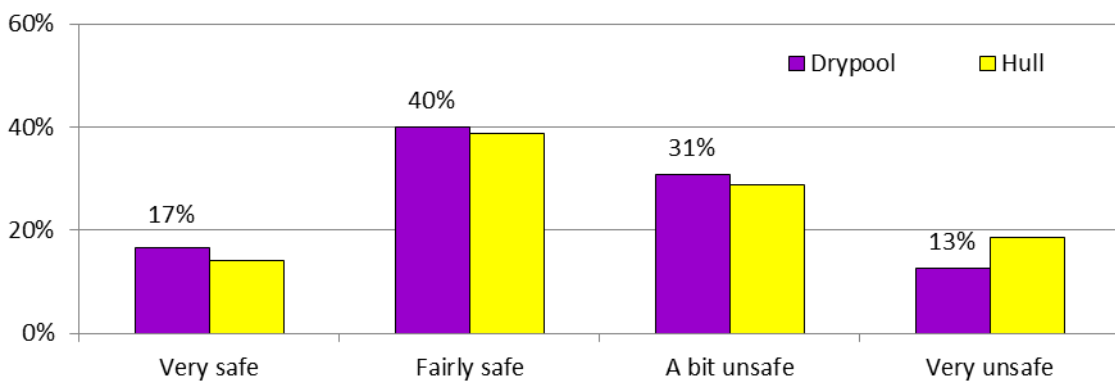
. . . . alone in own home at night

ife expectancy at birth (years)[14]

Life expectancy at age 65 (years)[15]

Under 75 Standardised Mortality Ratios 2017-2021[16]

Under 75 SMRs* 2017-2021: Drypool Ward

× Hull   ◆ Wadr (with 95% confidence interval**)

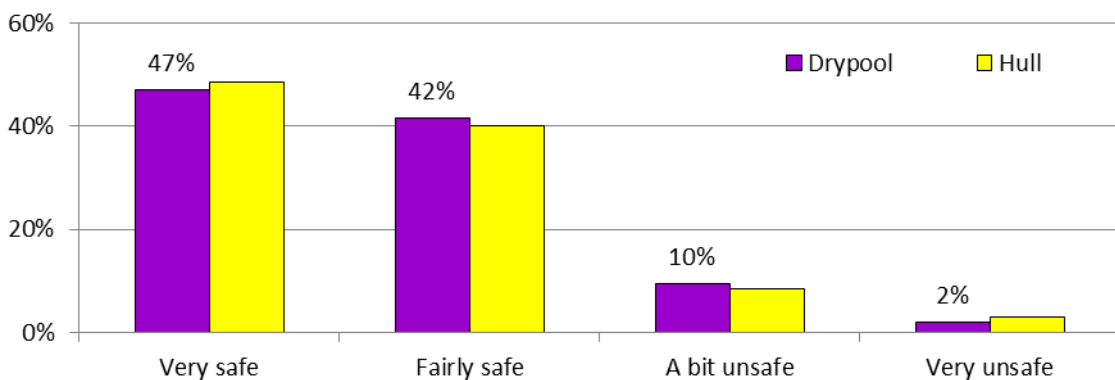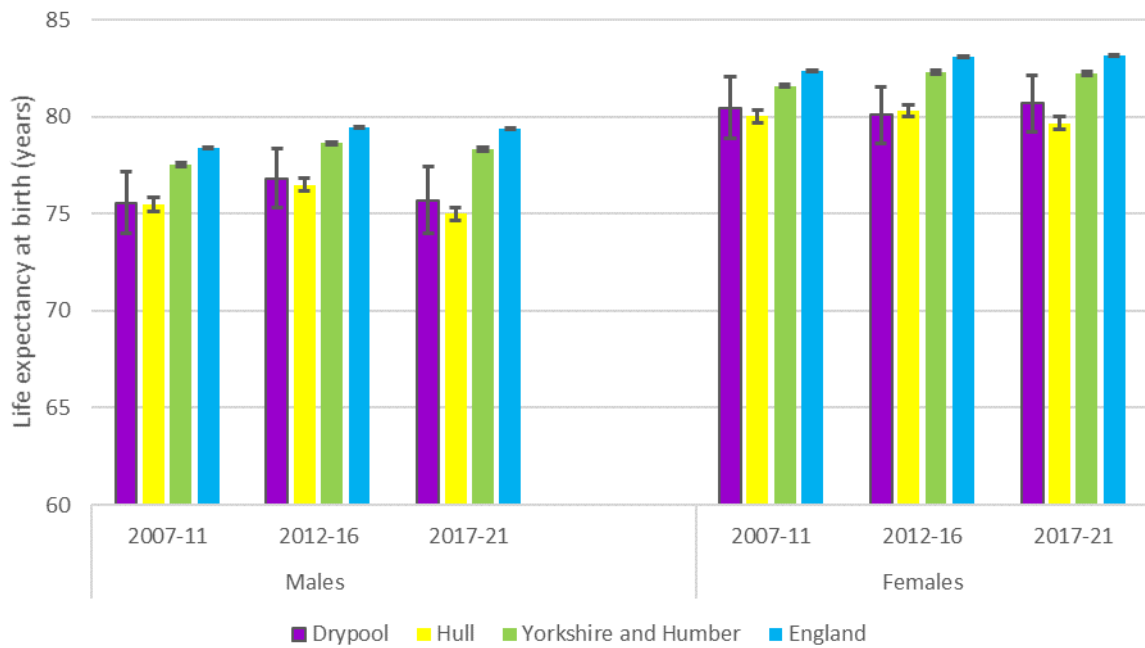| Cause	Deaths
All deaths: men	181 deaths
All cancers: men	52 deaths
Lung cancer: men	18 deaths
All respiratory disease: men	16 deaths
COPD: men	7 deaths
All circulatory disease: men	43 deaths
Coronary heart disease: men	25 deaths
Stroke: men	.
All deaths: women	85 deaths
All cancers: women	39 deaths
Breast cancer: women	9 deaths
Lung cancer: women	9 deaths
All respiratory disease: women	11 deaths
COPD: women	7 deaths
All circulatory disease: women	10 deaths
Coronary heart disease: women	.
Stroke: women	.
COVID-19: persons***	29 deaths

England=100

*Standardised Mortality Ratios, not produced if fewer than 5 deaths during 2017-2021. **Upper confidence limit truncated at 500.
***All age SMR for COVID-19

Most common causes of death 2017-2021[17]

Drypool (562 deaths) — Hull — England

8%, 21%, 10%, 10%, 7%, 5%, 7%, 32%

Preventable deaths[18]

England

Drypool, Hull, Yorkshire & Humber
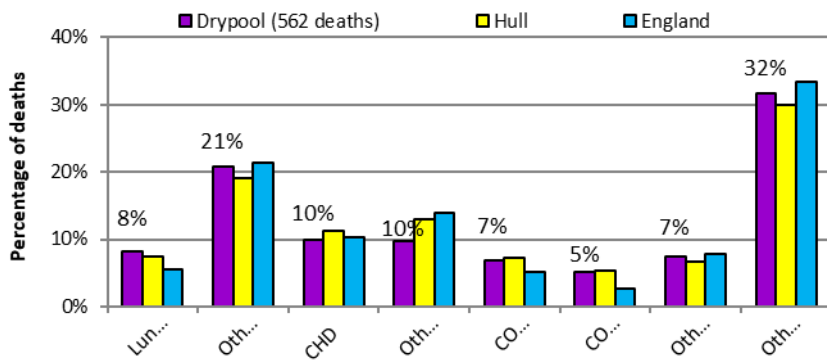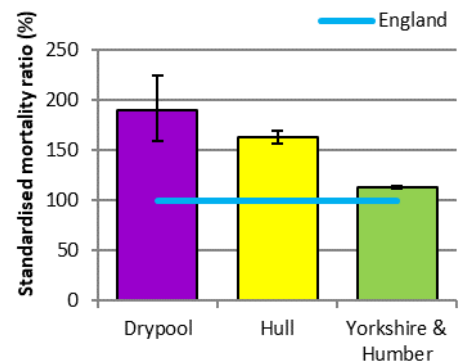
Most common types of cancer diagnosed 2014-2018[19]

Drypool (332 cancers) — Hull — Yorkshire and Humber — England

All cancers, Lung cancer, Colorectal cancer, Breast cancer, Prostate cancer
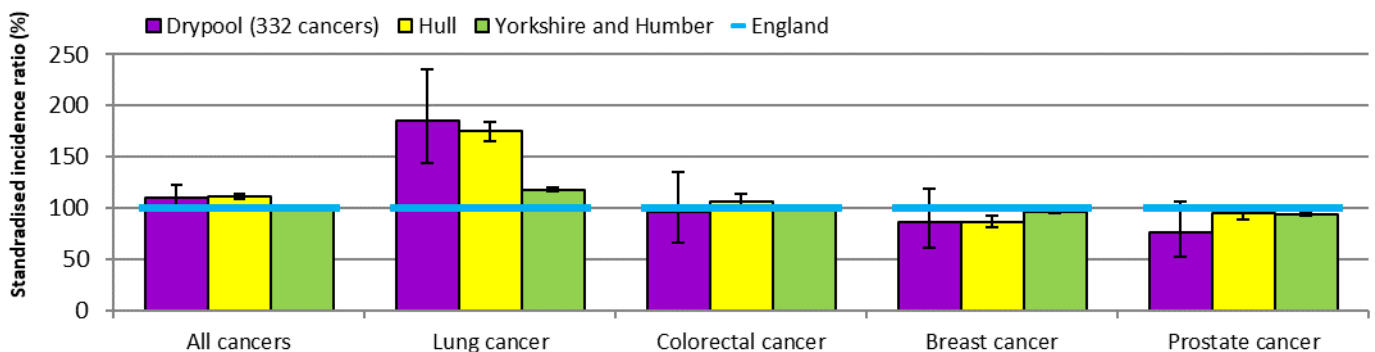
Emergency hospital admissions by common cause 2015/16-2019/20[21]

Legend: Drypool, Hull, England

Categories: All emergency admissions, CHD, Stroke, MI (heart attack), COPD, Hip fracture (65+)

Y-axis: Standardised admission ratio (%)
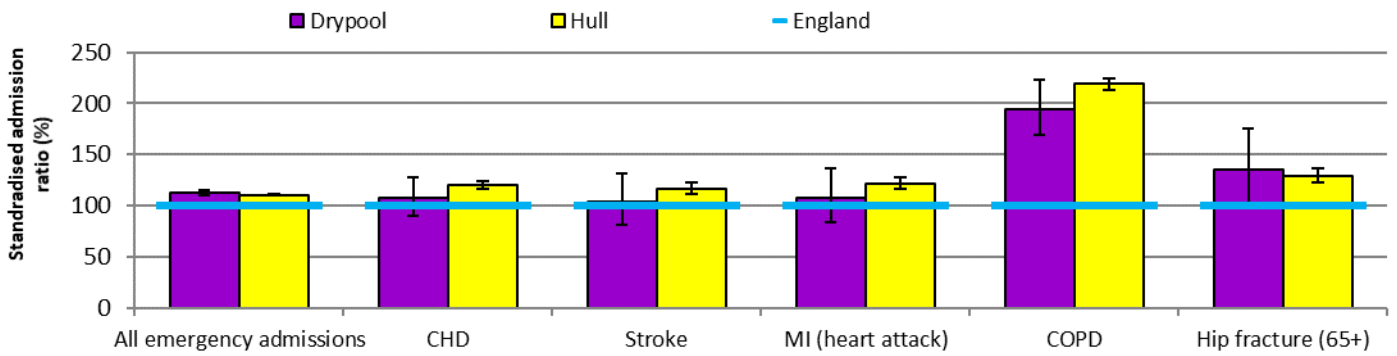
Hospital stays due to harm and injury by reason 2013/14-2017/18[22]

Legend: Drypool, Hull, Yorkshire and Humber, England

Categories: Self-harm, Alcohol (narrow definition), Alcohol (broad definition)

Y-axis: Standardised admission ratio (%)
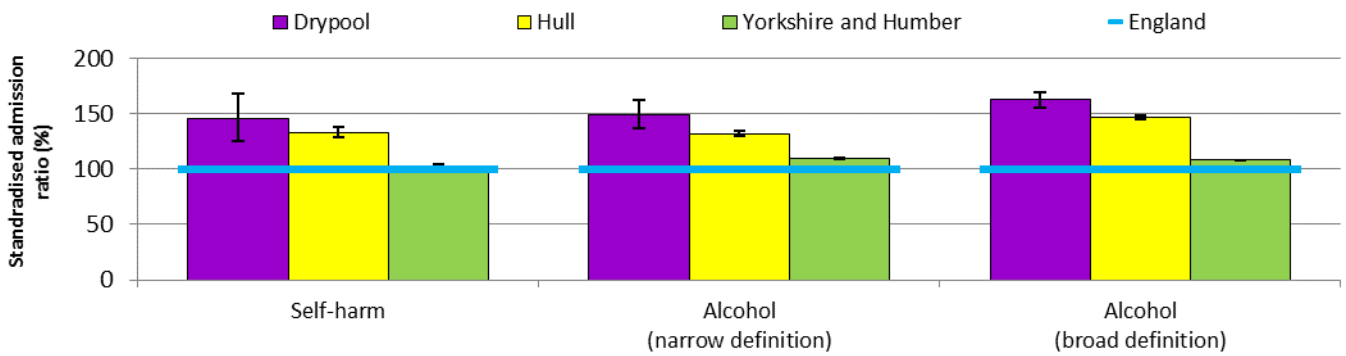
Limiting long-term illness/disability[23]

Drypool ward

Adults 2019: Ward 25.7, Hull 29.9
All ages (2011 census): Ward 19.6, Hull 19.7, Y&H 18.8, England 17.6

Y-axis: Long-term limiting illness or disability (%)
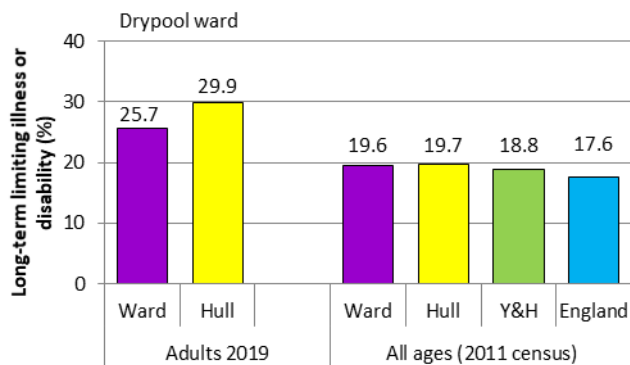
Estimated back pain prevalence 2012[24]

Legend: Drypool, Hull, Yorkshire and Humber, England

Back pain: 16.9
Severe back pain: 10.6

Y-axis: Estimated prevalence (%)
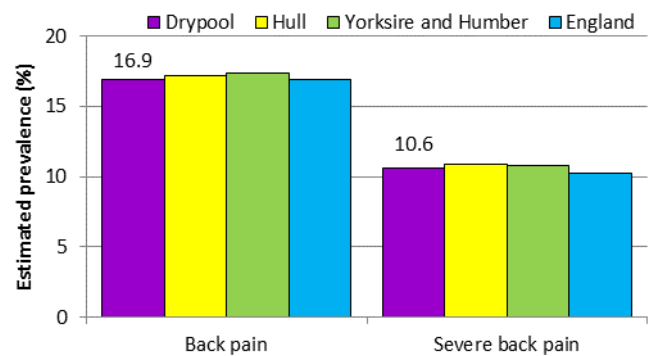
Selected results from the 2019 health and wellbeing survey[25]

Hull 2019 Health and Wellbeing Survey: Drypool Ward

Legend: ■ Hull   ◆ Ward (with 95% confidence interval)

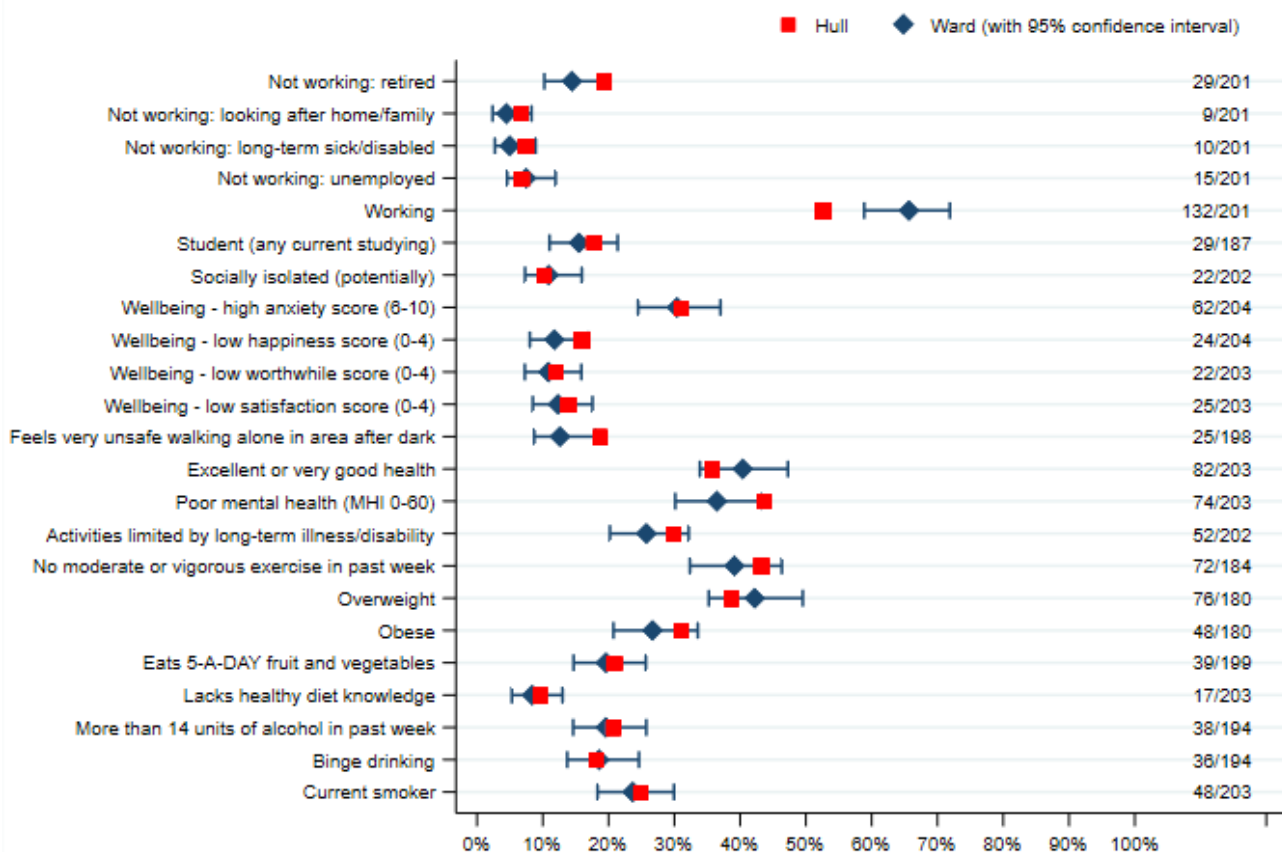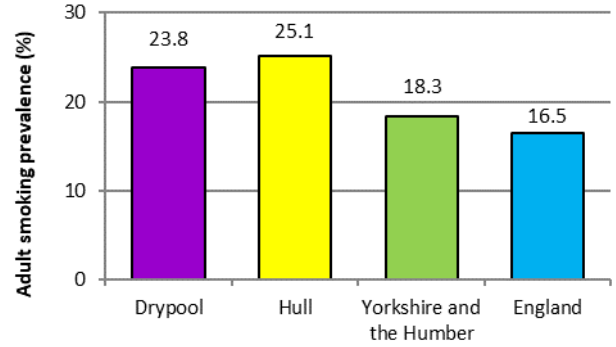| Indicator	Value
Not working: retired	29/201
Not working: looking after home/family	9/201
Not working: long-term sick/disabled	10/201
Not working: unemployed	15/201
Working	132/201
Student (any current studying)	29/187
Socially isolated (potentially)	22/202
Wellbeing - high anxiety score (6-10)	62/204
Wellbeing - low happiness score (0-4)	24/204
Wellbeing - low worthwhile score (0-4)	22/203
Wellbeing - low satisfaction score (0-4)	25/203
Feels very unsafe walking alone in area after dark	25/198
Excellent or very good health	82/203
Poor mental health (MHI 0-60)	74/203
Activities limited by long-term illness/disability	52/202
No moderate or vigorous exercise in past week	72/184
Overweight	76/180
Obese	48/180
Eats 5-A-DAY fruit and vegetables	39/199
Lacks healthy diet knowledge	17/203
More than 14 units of alcohol in past week	38/194
Binge drinking	36/194
Current smoker	48/203

Estimated prevalence of risk factors for poor health (results of the 2019 health and wellbeing survey applied to 2020 adult (16+) populations)[26]

Risk factor	Men (N=5,334)	Women (N=4,897)	All (N=10,231)
Smokes	1,300	1,000	2,300
Binge drinks	1,600	500	1,800
Excessive weekly alcohol	1,700	500	2,000
Problem drinking	2,100	700	2,500
Does not eat 5-A-DAY	4,100	4,000	8,300
Overweight	2,600	1,800	4,300
Obese	1,400	1,400	2,800
Overweight or obese	3,900	3,200	7,100
Insufficient exercise	2,600	3,300	6,000
No moderate/vigorous exercise in last week	2,300	1,900	4,200
Activities limited by long-term illness or disability	1,100	1,500	2,800
Poor mental health (SF36 0-60)	1,600	1,900	3,600
Feels very unsafe walking alone in area after dark	400	800	1,300
Wellbeing - low satisfaction score (0-4)	700	500	1,200
Wellbeing - low worthwhile score (0-4)	500	500	1,000
Wellbeing - low happiness score (0-4)	300	700	1,100
Wellbeing - high anxiety score (6-10)	1,400	1,600	3,100
Socially isolated (potentially)	600	600	1,200

Multiple risk factors (smoking, drinking excessive amounts of alcohol or binge drinking, obesity, insufficient exercise) from the 2019 health and wellbeing survey[27]

Number of adults with risk factors

Percentage of adults with risk factors

Wellbeing among adults[28]

Legend: Drypool, Hull, Yorkshire and the Humber, England

Wellbeing (%)

- Low satisfaction score (0-4): 12.3
- Low worthwhile score (0-4): 10.8
- Low happiness score (0-4): 11.8
- High anxiety score (6-10): 30.4

Adult smoking prevalence[29]

Adult smoking prevalence (%)
- Drypool: 23.8
- Hull: 25.1
- Yorkshire and the Humber: 18.3
- England: 16.5
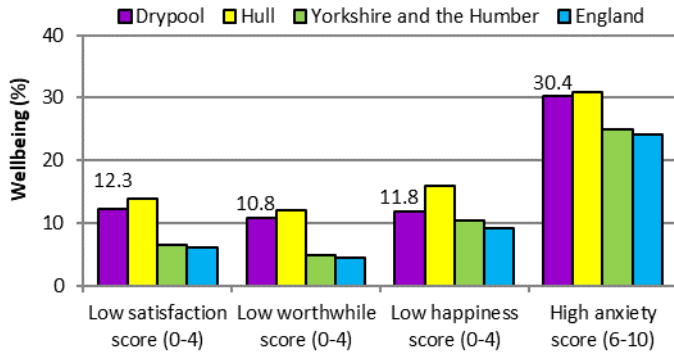
Excess weight among adults[30]

Excess weight prevalence among adults (%)
- Drypool: 68.9
- Hull: 69.7
- Yorkshire and the Humber: 62.5
- England: 64.2
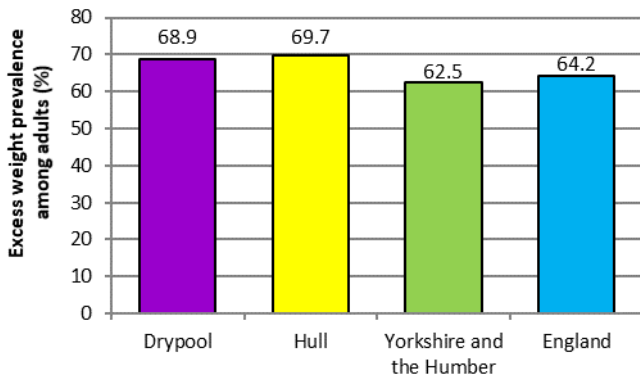
Excess weight among children[31]

Legend: Drypool, Hull, Yorkshire & Humber, England

Excess weight prevalence among children aged 4-5 years (Year R) and 10-11 eayrs (Year 6) (%)
- Year R (Drypool): 30.3
- Year 6 (Drypool): 34.8
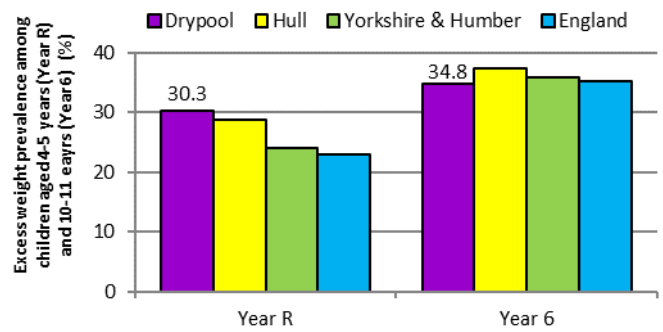
Good level of development at 5, 2013/14[32]

Good level of development at age 5 (%)
- Drypool: 47.3
- Hull: 51.1
- Yorksire and Humber: 58.7
- England: 60.4
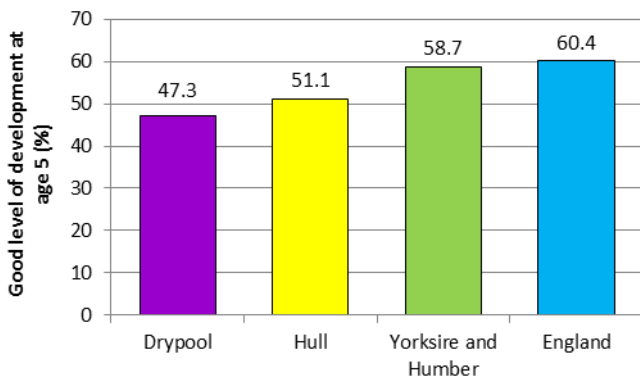
5+ A*-C GCSE passes, 2013/14[33]

5+ A*-C grades at GCSE (%)
- Drypool: 43.0
- Hull: 45.0
- Yorksire and Humber: 53.9
- England: 56.6
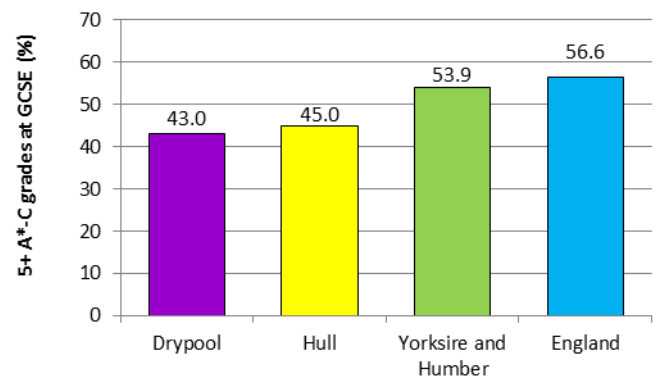
Potential social isolation among residents aged 65+ years[34]

Percentage potentially socially isolated
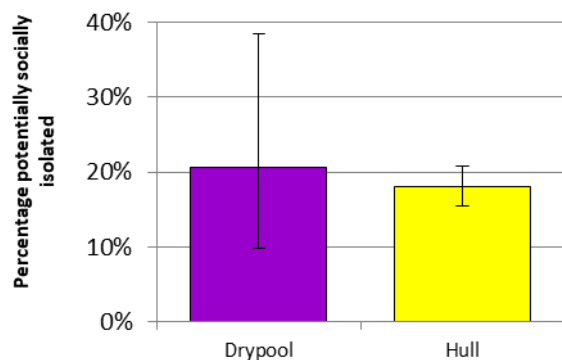
	Percentage (95% CI)	Estimated number (range)
Drypool	20.7 (9.8, 38.4)	182 to 709
Hull	18.0 (15.5, 20.9)	6,125 to 8,228

Births[35]

Birth rate in 2021
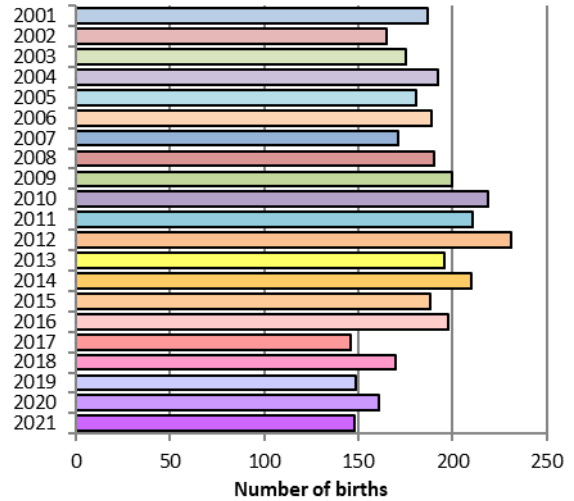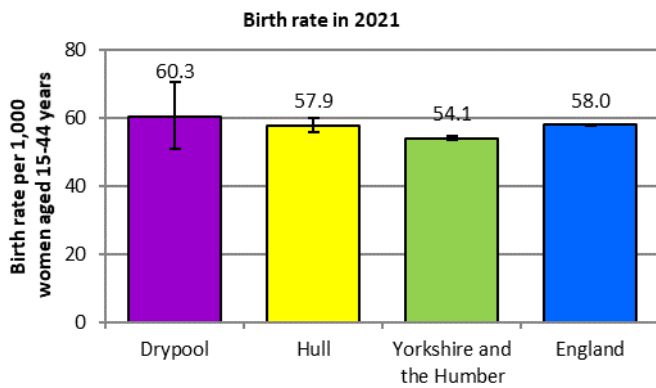
Population projections to 2043[36]
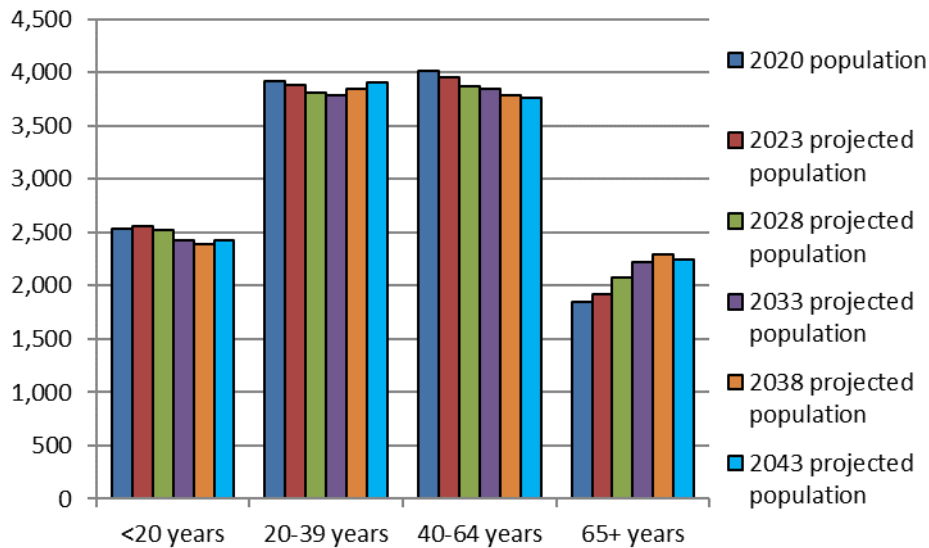
Percentage of population registered to each GP practice, January 2022[37]

Primary Care Network
(% of patients from this area)

- HASP 6%
- Marmot 2%
- Medicas 61%
- Modality 3%
- Nexus 23%
- Symphonie 5%
- Non-Hull practice 0.3%

N=12,877

- East Hull Family Practice — 55%
- CHP Lts - Southcoates & Marfleet — 7%
- Haxby - Burnbrae — 6%
- CHCP - City Centre (KMC, Riverside & Story St) — 5%
- Marfleet Group Practice — 5%
- CHCP - East Park — 3%
- Modality — 3%
- Kingston Health (Hull) — 3%
- Wilberforce Surgery — 2%
- Delta Healthcare — 2%
- 10%

Data sources	
1	Population data from Office for National Statistics (ONS) mid-year population estimates for 2020 (www.ons.gov.uk).
2,3,4	Data from the 2011 census (http://www.ons.gov.uk/ons/guide-method/census/2011/index.html).
5	The Index of Multiple Deprivation (IMD) 2019 is produced by the Department for Communities and Local Government (https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019). The map also uses boundary files supplied by ONS.
6	Fuel poverty data is produced by the Department for Energy and Climate Change (https://www.gov.uk/government/statistics/sub-regional-fuel-poverty-data-2022). The latest data release is for 2020. This is also indicator B17 in the Public Health outcomes Framework (https://fingertips.phe.org.uk/profile/public-health-outcomes-framework).
7	Child Poverty data are produced by HM Revenue and Customs. Data is for 2020/21 financial year, published in March 2022. (Children in low income families: local area statistics 2014 to 2021 - GOV.UK (www.gov.uk)). This is also indicator B01 in the Public Health outcomes Framework (https://fingertips.phe.org.uk/profile/public-health-outcomes-framework).
8	Data are for 2019, from data produced by the Department for Communities and Local Government (https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019).
9	Data for satisfaction with open spaces, parking, street appearance, traffic, anti-social behaviour & crime are from Hull's 2011-12 Health and Lifestyle Survey; data for satisfied with neighbourhood as a place to live are from the 2019 Health and Wellbeing survey (see www.hulljsna.com)
10,11,12	Data are from Hull's 2019 Adult Health and Wellbeing Survey of more than 4,000 adults in Hull aged 16 years and over (see www.hulljsna.com)
13	Benefits data were extracted from NOMIS (https://www.nomisweb.co.uk/home/detailedstats.asp) which is a service provided by ONS for detailed up-to date labour market statistics.
14,15	Life expectancy was produced using mortality data from the Primary Care Mortality Data (PCMD), supplied by NHS Digital, and mid-year population estimates, rebased after the 2011 census, supplied by ONS. Life expectancy at birth and at age 65 form indicator A01b in the Public Health outcomes Framework (https://fingertips.phe.org.uk/profile/public-health-outcomes-framework).
16	Under 75 SMRs indicate whether local premature mortality rates are higher or lower than would be expected if national (England) rates applied to the local population. Death data are from the PCMD, supplied by ONS, and the population data are from ONS mid-year estimates. National mortality rates were produced using data extracted from NOMIS (https://indicators.ic.nhs.uk/webview/).
17	Death data are taken from the PCMD.
18	Deaths from causes considered preventable 2015-19, published by the Office for Health Improvement and Disparities (OHID) on the Local Health website (http://www.localhealth.org.uk).
19	Data are published by OHID on the Local Health website (http://www.localhealth.org.uk).
20	Hospital admission data are taken from Hospital Episode Statistics (HES). Rates were produced using HES data and population data (from GP registered populations, supplied through the Primary Care Information System).
21,22	Hospital inpatient data published by OHID on the Local Health website (http://www.localhealth.org.uk)
23	Local data are from Hull's 2019 Health and Wellbeing Survey (see www.hulljsna.com). Census data were extracted from OHID's Local Health website (http://www.localhealth.org.uk).
24	Modelled estimates produced by Arthritis UK and OHID, using Health Survey for England data, published by OHID on the Local Health website (http://www.localhealth.org.uk).
25,26,27	Data are from Hull's 2019 Health and Wellbeing Survey (see www.hulljsna.com). Population data were the 2020 mid-year estimated population produced by ONS. Estimated numbers are rounded to the nearest 100 (www.ons.gov.uk).
28,29,30	Local data are taken from Hull's 2019 Health and Wellbeing Survey (see www.hulljsna.com). Regional and national data are taken from the Public Health Outcomes Framework (https://fingertips.phe.org.uk/profile/public-health-outcomes-framework) of which these are indicators C16 (excess weight), C18 (smoking prevalence) and C28 (wellbeing).
31	Local data are taken from Hull's extract of the National Child Measurement Programme. Regional and national data, also derived from the National Child Measurement Programme, are taken from the Public Health Outcomes Framework (www.phoutcomes.info) of which this is indicator C09.
32,33	Data are for 2013/14, published by OHID on the Local Health website (http://www.localhealth.org.uk).
34	The definition of potentially socially isolated used here is an adult who is the only adult living in the household, and does not speak to at least one of family, friends or neighbours every day. Data are from Hull's 2019 Health and Wellbeing Survey of Adults (see www.hulljsna.com). Population data are from the 2020 ONS mid-year population estimates (www.ons.gov.uk).
35	Births data are supplied by NHS Digital. The birth rate per 1,000 is produced using the birth data and the ONS mid-year population estimates for 2020 (www.ons.gov.uk). Regional and national birth rates were calculated using births data from NHS Digital (https://digital.nhs.uk) and ONS mid-year population estimates for 2017 (www.ons.gov.uk).
36	Population projections were produced by applying the 2018-based ONS projected population changes by single year of age to the most recent ONS mid-year estimated populations, then aggregating the results by broad age band.
37	Figures are produced from the January 2022 GP populations by lower layer super output area published by NHS Digital (https://digital.nhs.uk). The number of residents quoted in the figure may be higher than in the population table, as it comes from the GP registration file which historically tends to be higher than the mid-year population estimates presented in the population table.

Hull's Joint Strategic Needs Assessment (JSNA)

What is a JSNA?

The JSNA assess the current and future health, care and well-being needs of the people of Hull.

- **J**oint - The JSNA is carried out jointly by NHS Hull and Hull City Council. It is the joint responsibility of the Director of Public Health, Director of Children's Services and the Director of Adult Social Services.

- **S**trategic - Intended to give the information that allows decision makers to make sound strategic decisions.

- **N**eeds **A**ssessment - Gives a scientifically robust understanding of the health and wellbeing needs of a local population for more focused commissioning and service delivery.

What will you do with the JSNA?

The JSNA will be used to inform the way in which services are organised and delivered in Hull to meet the needs of the local population. Available for strategic planning, but also micro-implementation.

What is different about the Hull JSNA?

- The JSNA is regularly updated and is a living and interactive web based resource for all the people of Hull, the Voluntary Sector, the Council, all the NHS Organisations and Trusts, the Police and Fire Service.

- The JSNA draws on information gained through local surveys, allowing for 'real' trends to be analysed based on Hull's epidemiological profile as opposed to synthetic or modelled data from national sources.

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