

Census 2011: General health status and long-term health problems and disability: age and sex-specific and age-standardised percentages

November 2013

Introduction

The Office for National Statistics (ONS) published local authority-level data from the 2011 Census in December 2012 covering the topics of general health status, long-term health problems and disability, and provision of unpaid care. Subsequent data releases have made these data available by age and sex and for smaller geographical areas. This report presents data on general health status and long-term health problems and disability by age and sex at district and ward level for Cambridgeshire, including age-standardised percentages.

Many health conditions are strongly associated with old age, and so areas with higher proportions of older people are likely to have higher proportions in poor health. Age-standardisation of the data allows more valid comparison between areas by adjusting for the confounding effect of age. The age-standardised percentages presented are standardised to the European Standard Population, using the direct method, and Byar's method for the calculation of confidence intervals; they represent the percentage which each area would have should it have the same age structure as the standard population.

The data presented in this report relate to all usual residents *in households* (i.e. excluding residents in communal establishments such as hospitals, care homes and prisons); previous data releases and local reports for health-related topics have related to the total usual resident population and so figures are not directly comparable to those presented previously.

An Excel file containing all of the tables and figures included here, several appendices, and population denominators accompanies this report.

KEY POINTS

GENERAL HEALTH:

- 84.2% of household residents in Cambridgeshire reported good or very good health
- The percentage varied by age, from 97.7% in 0-15s to 31.1% in 85s and over, and by sex, with a slightly lower percentage in females than males.
- After adjusting for age, the percentage was statistically significantly lower than the England average in Fenland but statistically significantly higher in all the other districts and for county as a whole
- At ward level, the age-standardised percentage reporting good or very good health was statistically significantly lower than the Cambridgeshire average in:
 - Abbey, East Chesterton and King's Hedges wards in Cambridge
 - Clarkson, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, Staithe and Waterlees wards in Fenland
 - Huntingdon North ward in Huntingdonshire

LONG-TERM HEALTH PROBLEMS AND DISABILITY:

- 90,420 people, 15.1% of household residents in Cambridgeshire, reported a long-term activity-limiting illness (all extents of limitation)
- The percentage varied by age, from 3.5% in 0-15s to 82.7% in 85s and over
- The percentage also varied by sex, with generally higher percentages in females than males, however, the percentage was notably higher in boys aged 0-15
- Percentages were generally higher in Fenland compared to the other districts and national average, even in the young.
- The number and percentage of 85s and over with a long-term activity-limiting illness were highest in South Cambridgeshire
- After adjusting for age, the percentage was statistically significantly higher than the England average in Fenland but significantly lower in all other districts and for the county as a whole
- At ward level, the age-standardised percentage reporting a long-term activity-limiting illness was statistically significantly higher than the Cambridgeshire average in:
 - Abbey, Arbury, Cherry Hinton, East Chesterton, King's Hedges and Romsey wards in Cambridge
 - Littleport West ward in East Cambridgeshire
 - Birch, Clarkson, Doddington, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, St Marys, Staithe, Waterlees, Wenneye and Wimblington wards in Fenland
 - Huntingdon East, Huntingdon North, Ramsey, St Neots Eaton Socon, St Neots Eynesbury and Yaxley and Farcet wards in Huntingdonshire
- 41.6% of people reporting a long-term illness described their illness as limiting their day-to-day activities a lot. Demographic and geographic patterns were similar to those for all extents of limitation, with Fenland again the only district with a percentage significantly higher than the national average (see main text)

General Health

Self-assessed general health reflects an individual's perception of all aspects of their health, wellbeing and quality of life. This perception may be influenced by both physical health and social and cultural factors and so differences between areas may reflect a combination of these features.

Age and sex

84.2% of all household residents in Cambridgeshire reported themselves to be in good or very good health (Table 1.1, Figure 1.1). This varied notably with age: 97.7% of those aged 0-15 years reported good or very good health, declining to 31.1% of those aged 85+. Variation is also seen by sex: a slightly smaller percentage of females reported good or very good health compared with males (83.3% v 85.1%); this gap was widest among those aged 75 years and over.

Table 1.1 Number of people and percentage of the population reporting good or very good health by age group and sex, Cambridgeshire, 2011

Age group (years)	Males		Females		Persons	
	Number	%	Number	%	Number	%
0-15	56,100	97.4	53,566	98.0	109,666	97.7
16-24	30,217	95.4	28,511	94.5	58,728	95.0
25-34	37,767	93.7	37,298	92.8	75,065	93.2
35-49	59,368	89.0	58,974	88.1	118,342	88.6
50-64	43,572	78.1	44,522	78.3	88,094	78.2
65-74	17,044	65.9	17,782	66.2	34,826	66.0
75-84	7,088	49.0	8,049	45.1	15,137	46.8
85+	1,410	33.3	2,357	30.0	3,767	31.1
All ages	252,566	85.1	251,059	83.3	503,625	84.2

Similar patterns by age were seen across all districts within Cambridgeshire and nationally (Tables 1.2 and 1.3), and patterns were similar for both sexes (Appendices 1.1-4). However, the percentages were consistently lower in Fenland compared with the other districts and the national average, even in the young. In those aged 0-15 years, for example, 96.7% reported good or very good health in Fenland compared with 98.3% in South Cambridgeshire. The inequality generally widens with increasing age: for example, 39.5% of those aged 75-84 years reported good or very good health in Fenland compared with 50.7% in South Cambridgeshire (43.3% being the average for England).

At ward level, patterns were again similar by age; the pattern by sex was also similar but greater differences between the sexes were seen in particular wards (Appendix 1.5). Some of this variation could be related to the age structures of those populations and so data and patterns are discussed further following age-standardisation.

Figure 1.1 Percentage of the population reporting good or very good health by age group and sex, Cambridgeshire, 2011

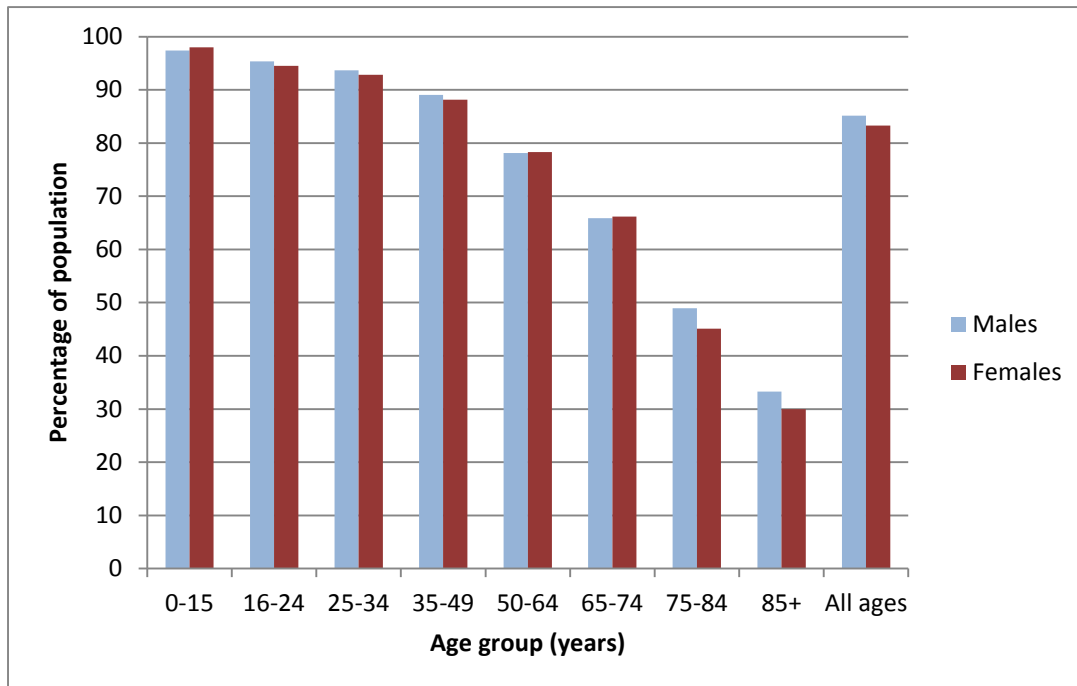


Table 1.2 Number of people reporting good or very good health by local authority district and age group, Cambridgeshire, 2011

Local authority	Age group (years)								All ages
	0-15	16-24	25-34	35-49	50-64	65-74	75-84	85+	
Cambridge	17,151	13,807	21,095	19,765	12,429	4,585	2,403	797	92,032
East Cambridgeshire	15,904	7,176	9,821	17,122	12,394	4,914	2,149	506	69,986
Fenland	16,212	9,067	9,589	16,159	13,126	5,774	2,570	607	73,104
Huntingdonshire	31,494	16,183	18,357	34,146	26,446	10,281	3,950	839	141,696
South Cambridgeshire	28,905	12,495	16,203	31,150	23,699	9,272	4,065	1,018	126,807
Cambridgeshire	109,666	58,728	75,065	118,342	88,094	34,826	15,137	3,767	503,625
England	9,698,359	5,584,937	6,523,691	9,609,133	6,910,058	2,705,345	1,227,422	293,925	42,552,870

Table 1.3 Percentage of the population reporting good or very good health by local authority district and age group, Cambridgeshire, 2011

Local authority	Age group (years)								All ages
	0-15	16-24	25-34	35-49	50-64	65-74	75-84	85+	
Cambridge	97.5	95.0	93.7	86.9	77.5	67.6	49.7	34.8	85.7
East Cambridgeshire	98.1	95.3	93.6	89.8	78.5	65.5	45.2	29.9	84.3
Fenland	96.7	93.7	90.4	83.3	69.8	57.6	39.5	28.1	77.8
Huntingdonshire	97.6	95.2	93.2	89.2	79.6	66.9	48.0	29.2	84.9
South Cambridgeshire	98.3	95.3	94.3	91.3	82.4	70.8	50.7	33.1	86.4
Cambridgeshire	97.7	95.0	93.2	88.6	78.2	66.0	46.8	31.1	84.2
England	97.2	94.6	92.2	85.5	72.6	59.9	43.3	29.5	81.7

Age-standardised percentages

Age-standardisation of the data provides a comparable summary measure for each area by removing the potentially confounding effects of their differing age structures.

After adjusting for age, the percentage reporting good or very good health was statistically significantly lower than the England average in Fenland in males (82.9% v 84.6%), females (82.5% v 84.2%) and for all persons combined (82.6% v 84.4%) (Table 1.4, Figure 1.3). In all other districts and for Cambridgeshire as a whole, these percentages were statistically significantly higher than the England average.

Table 1.4 Directly age-standardised percentage of the population reporting good or very good health, by sex and district, Cambridgeshire, 2011

Local authority	Males		Females		Persons	
	%	95% CI	%	95% CI	%	95% CI
Cambridge	86.6	(85.8 to 87.4)	86.7	(85.9 to 87.6)	86.7	(86.1 to 87.2)
East Cambridgeshire	87.4	(86.5 to 88.4)	87.1	(86.2 to 88.1)	87.3	(86.6 to 87.9)
Fenland	82.9	(82.0 to 83.7)	82.5	(81.6 to 83.3)	82.6	(82.0 to 83.3)
Huntingdonshire	87.6	(86.9 to 88.2)	87.1	(86.5 to 87.8)	87.3	(86.9 to 87.8)
South Cambridgeshire	89.4	(88.7 to 90.1)	88.7	(88.0 to 89.4)	89.0	(88.5 to 89.5)
Cambridgeshire	87.1	(86.8 to 87.4)	86.7	(86.4 to 87.1)	86.9	(86.6 to 87.1)
England	84.6	(84.6 to 84.6)	84.2	(84.2 to 84.2)	84.4	(84.4 to 84.4)

CI – confidence interval

At ward level, the percentage reporting good or very good health was statistically significantly lower than the Cambridgeshire average in:

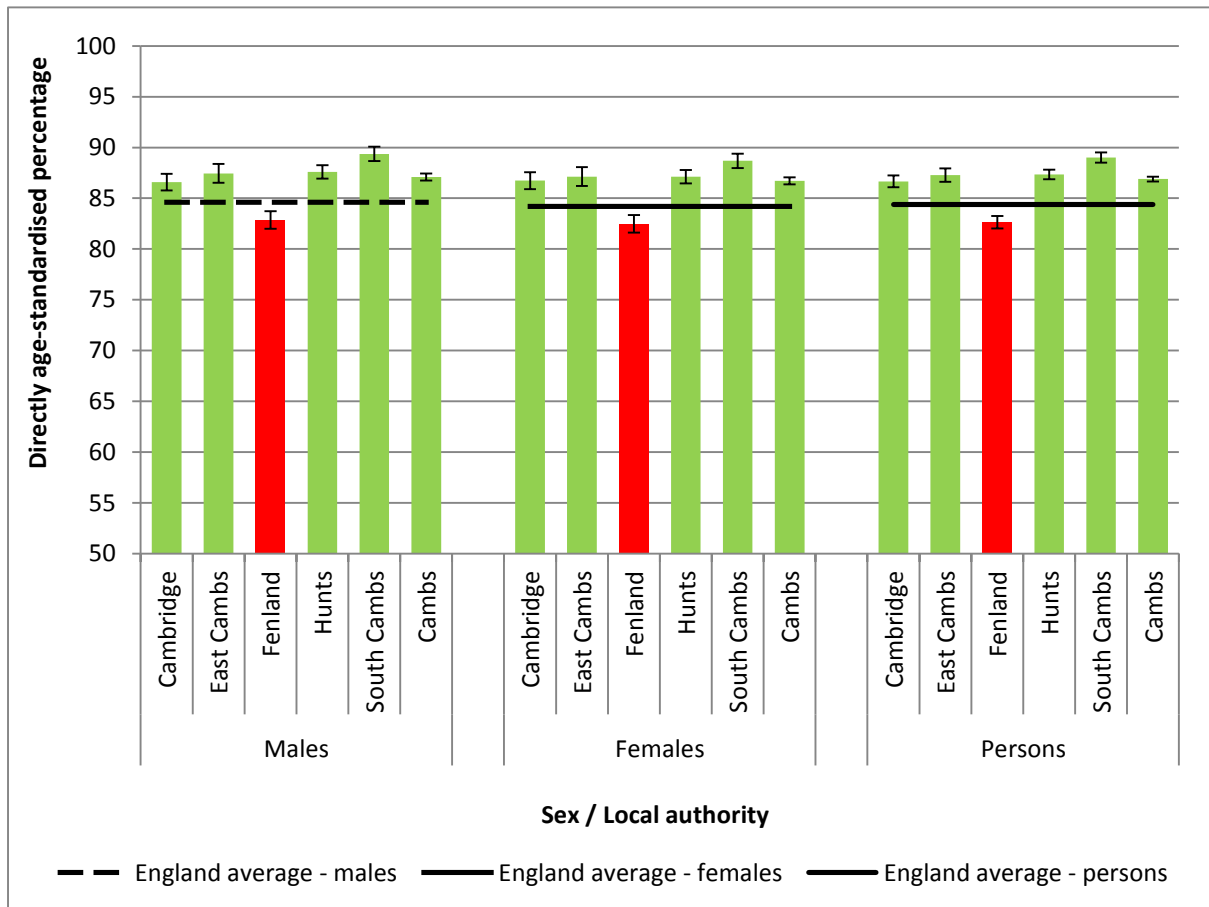
- Abbey, East Chesterton and King's Hedges wards in Cambridge
- Clarkson, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, Staithe and Waterlees wards in Fenland (16 of the 27 wards)
- Huntingdon North ward in Huntingdonshire

(Figures 1.3a-e, Appendix 1.6). Age-standardised percentages by ward are mapped in Figure 1.4.

In March East, Medworth, Parson Drove and Wisbech St Mary, Staithe, Waterlees and Huntingdon North, the percentages were also statistically significantly lower than the England average.

The more notable differences by sex in some wards became less apparent after age-standardisation and none of the differences were statistically significant (see Appendix 1.6).

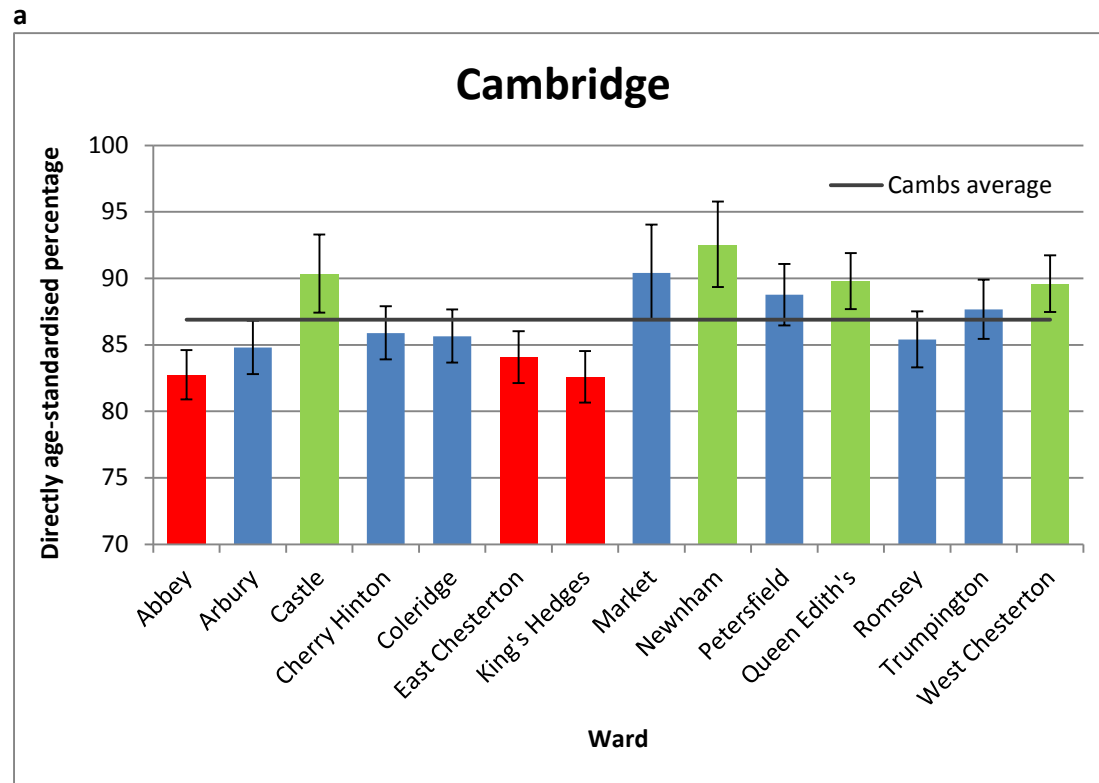
Figure 1.2 Directly age-standardised percentage of the population reporting good or very good health, by sex and district, Cambridgeshire, 2011



Error bars represent 95% confidence intervals. Cambs – Cambridgeshire. Hunts – Huntingdonshire. Assessment of significance is based on overlapping confidence intervals of both the local authority and England values but the England confidence intervals are not shown on the figure.

- Significantly higher than the England average
- Not significantly different to the England average
- Significantly lower than the England average

Figures 1.3a-e Directly age-standardised percentage of the population reporting good or very good health by ward, Cambridgeshire (district by district), 2011

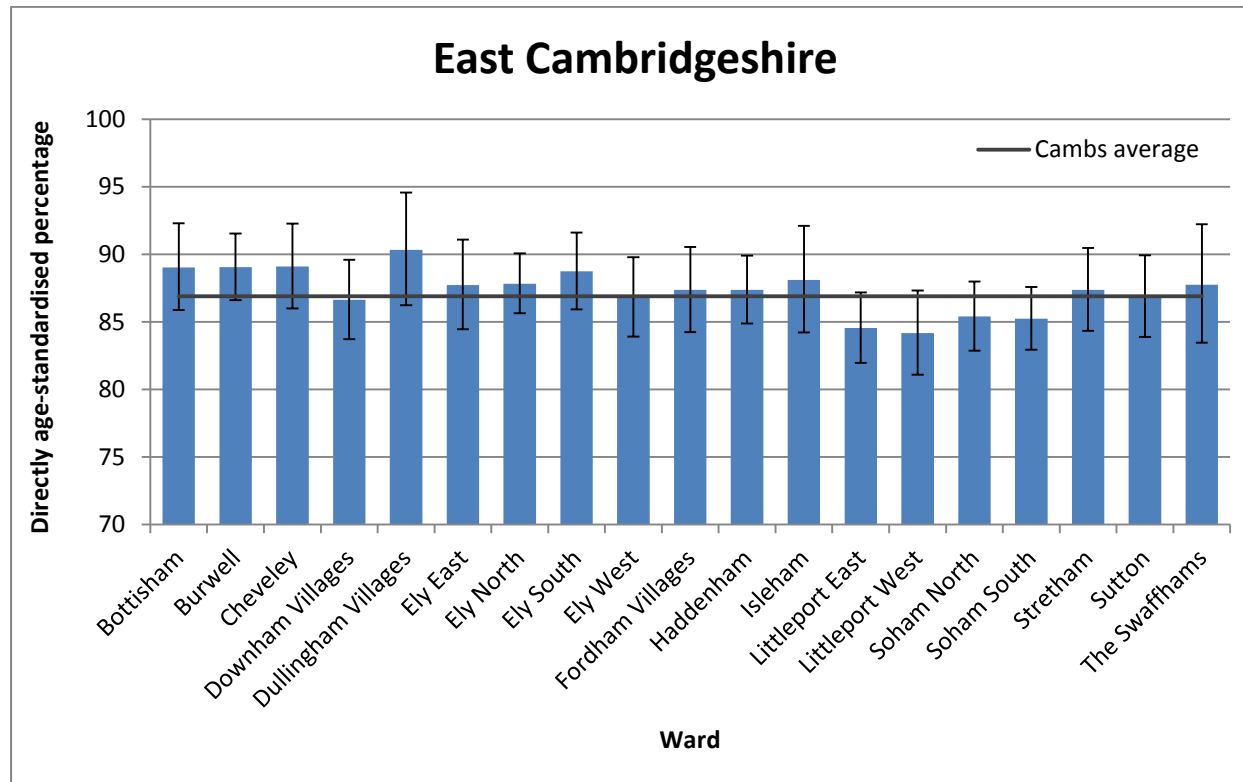


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly higher than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly lower than the Cambridgeshire average

b

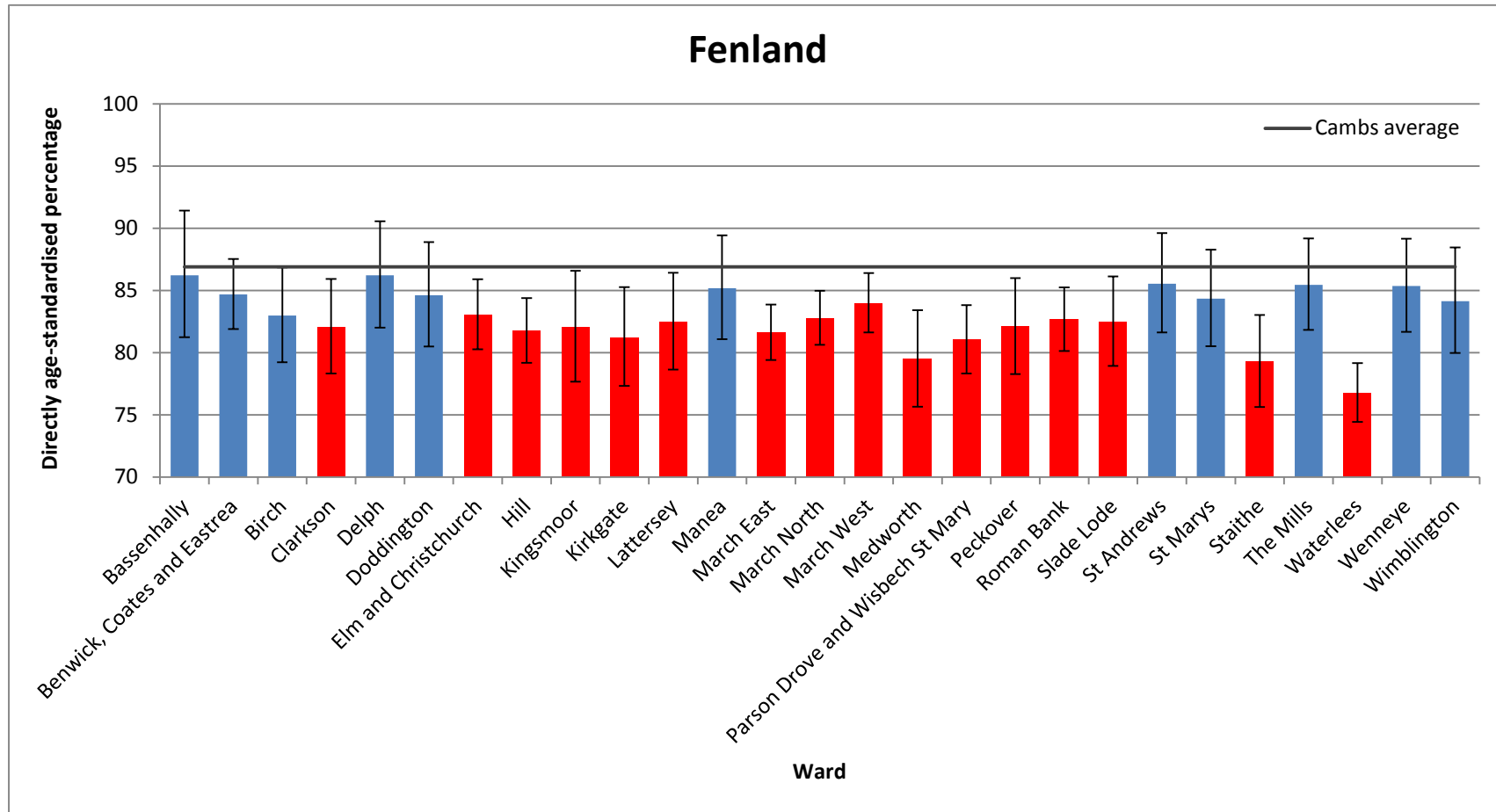


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly higher than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly lower than the Cambridgeshire average

c

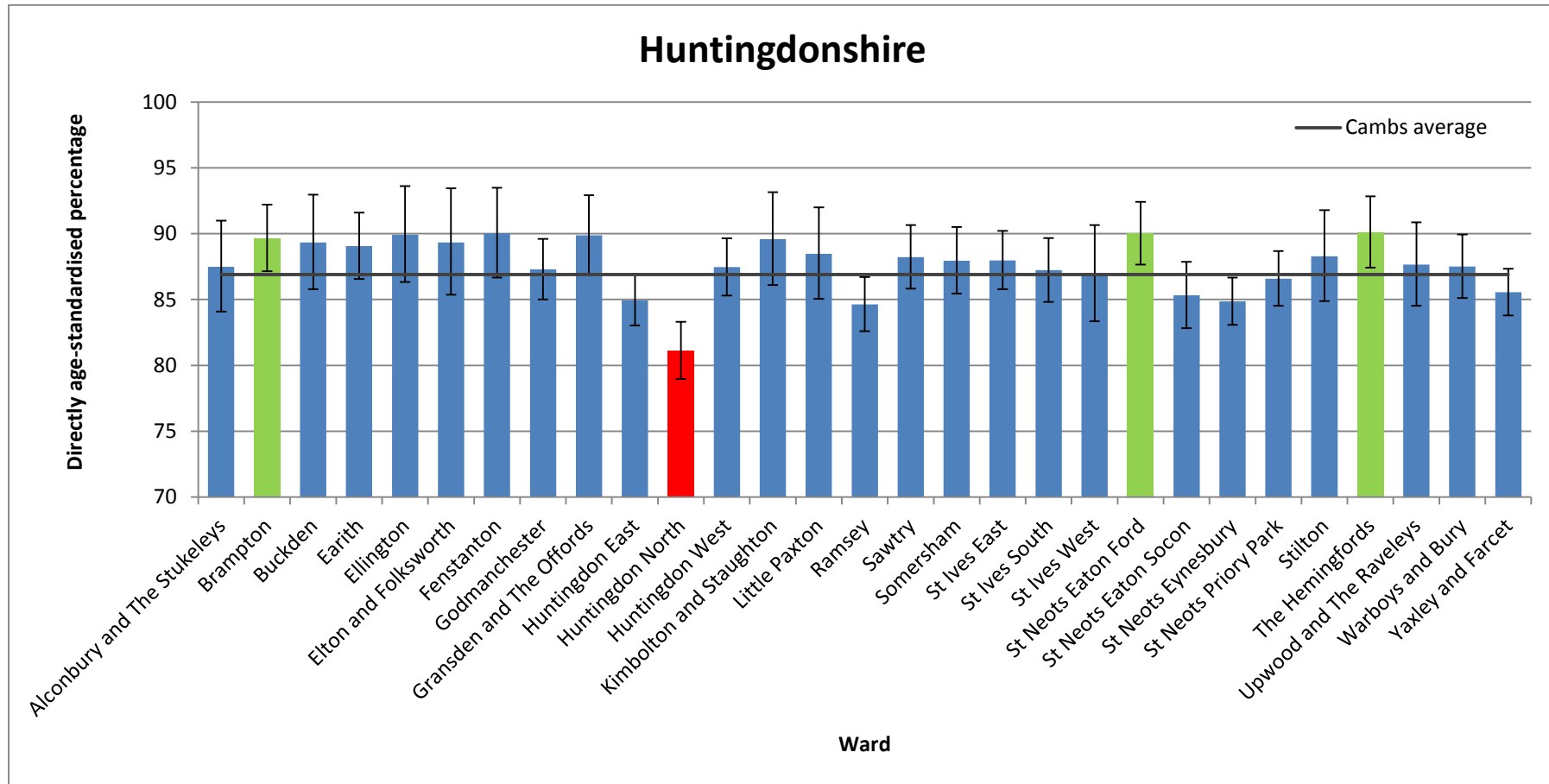


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly higher than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly lower than the Cambridgeshire average

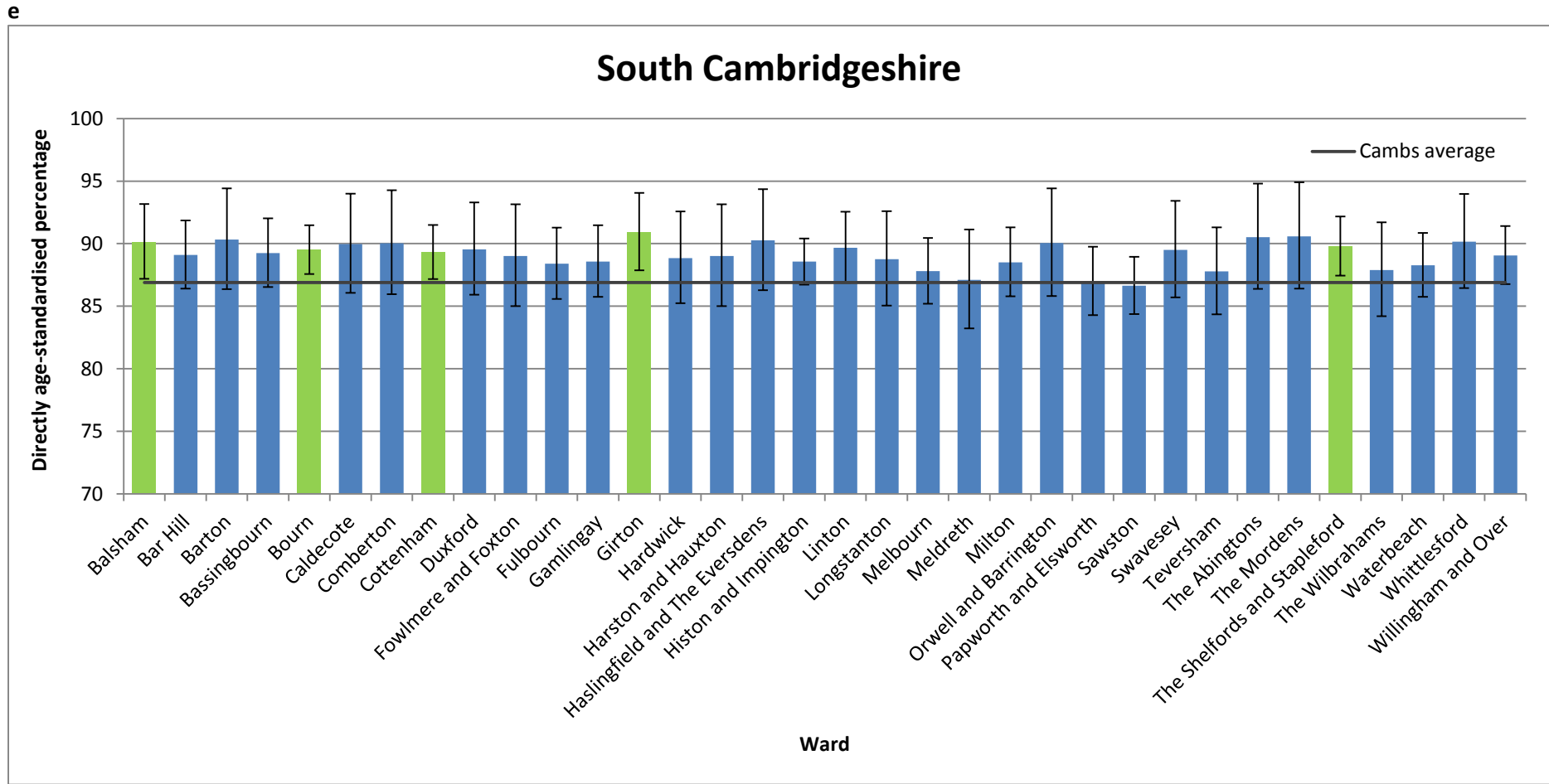
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Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly higher than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly lower than the Cambridgeshire average



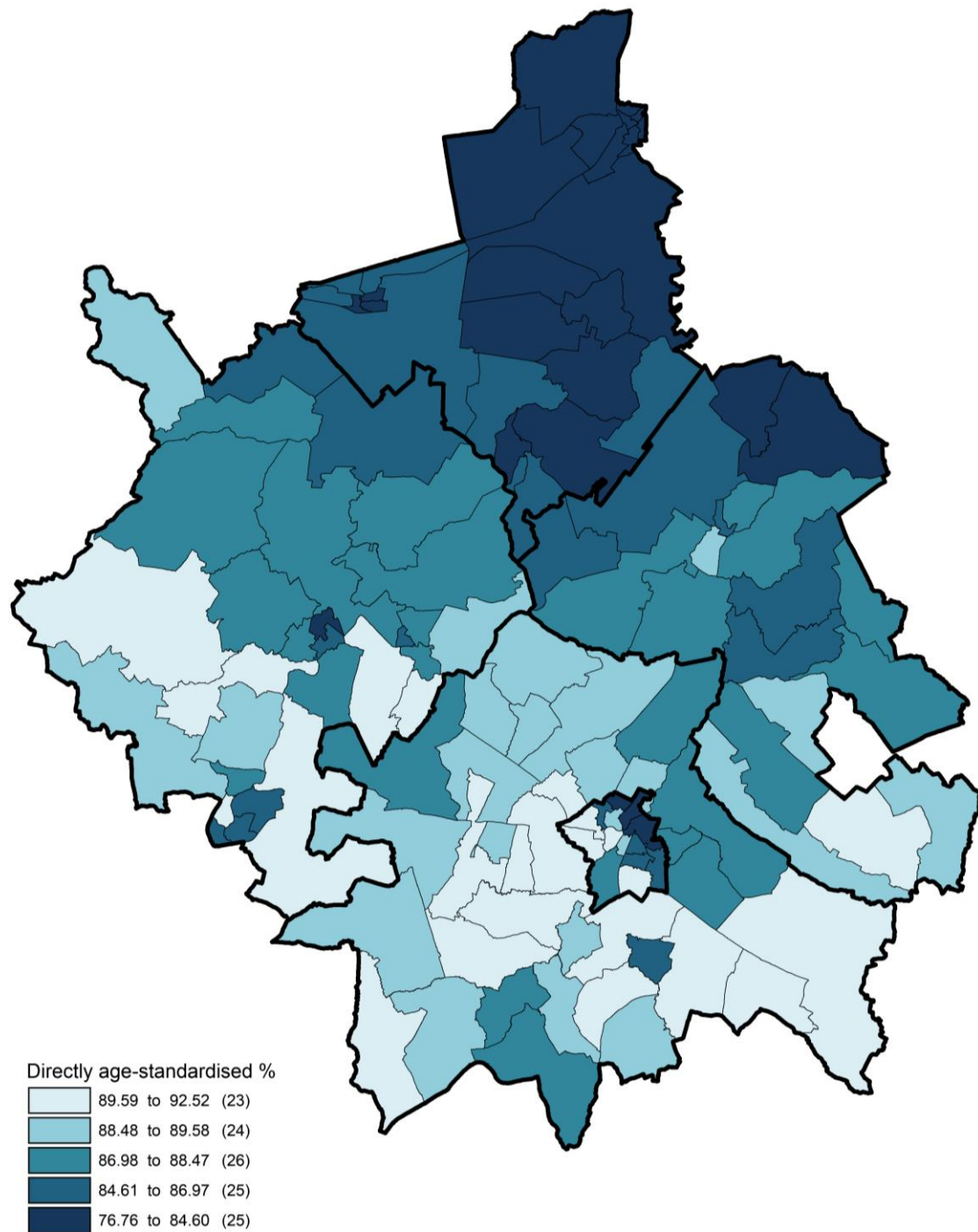
Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly higher than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly lower than the Cambridgeshire average

Figure 1.4

Directly age-standardised percentage of the population reporting good or very good health, by ward, Cambridgeshire, 2011



District
Ward

Source: 2011 Census - Table DC3302EW. Office for National Statistics © Crown Copyright 2012
Age-standardised percentages calculated by Cambridgeshire County Council Public Health Intelligence
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2. Long-term health problems and disability

2.1. All extents of limitation of day-to-day activities

Age and sex

90,420 people, 15.1% of all household residents in Cambridgeshire, reported having a long-term activity-limiting illness (Table 2.1.1, Figure 2.1.1). This varied notably with age: 3.5% of those aged 0-15 years reported a long-term health problem, rising to 82.7% of those aged 85 years and over; the increase being particularly noticeable from age 50-64 years. Although the percentages reporting long-term illness are highest in the oldest age groups, it should be noted that 45% of all people with a long-term illness in the county are of working age (aged 16-64 years) (40,248/90,420).

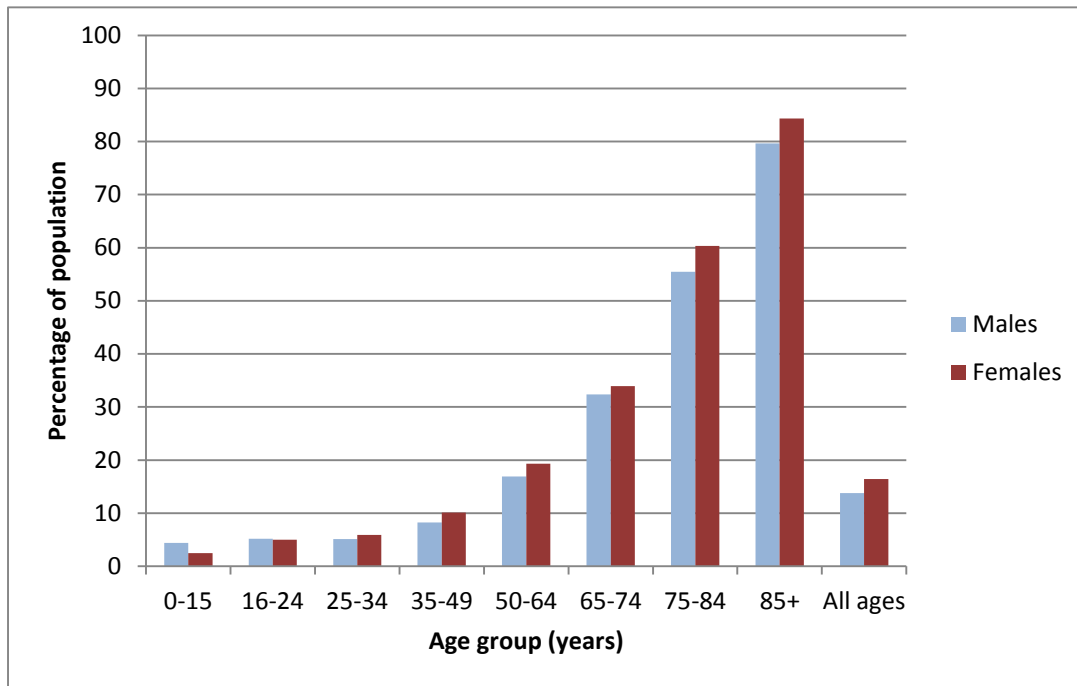
Overall, a higher percentage of females than males reported a long-term illness (16.4% v 13.8%) but this varied by age: in children aged 0-15, the percentage was higher in boys than girls (4.4% v 2.5%) but in those aged 25-34 years and above, the percentages were higher in females.

Table 2.1.1 Number of people and percentage of the population with a long-term activity-limiting illness by age group and sex, Cambridgeshire, 2011

Age group (years)	Males		Females		Persons	
	Number	%	Number	%	Number	%
0-15	2,520	4.4	1,363	2.5	3,883	3.5
16-24	1,646	5.2	1,505	5.0	3,151	5.1
25-34	2,067	5.1	2,366	5.9	4,433	5.5
35-49	5,494	8.2	6,743	10.1	12,237	9.2
50-64	9,431	16.9	10,996	19.3	20,427	18.1
65-74	8,371	32.3	9,112	33.9	17,483	33.1
75-84	8,031	55.5	10,770	60.3	18,801	58.2
85+	3,376	79.7	6,629	84.3	10,005	82.7
All ages	40,936	13.8	49,484	16.4	90,420	15.1

Similar patterns by age were seen across all districts within Cambridgeshire and nationally (Tables 2.1.2 and 2.1.3), and patterns were similar for both sexes (Appendices 2.1.1-4). However, the percentages were generally higher in Fenland compared with the other districts and the national average, even in the young. In those aged 0-15 years, for example, 4.6% reported a long-term activity-limiting illness in Fenland compared with 2.8% in South Cambridgeshire. The inequality was widest in those aged 65-74 years, with 40.1% of Fenland household residents reporting long-term health problems compared to 29.1% in South Cambridgeshire (38.7% being the average for England). Both the number and percentage of people with long-term illness in the 85+ years age group is highest in South Cambridgeshire – this may be related to higher life expectancy in this district and greater proportions living longer in poor health.

Figure 2.1.1 Percentage of the population with a long-term activity-limiting illness by age group and sex, Cambridgeshire, 2011



At ward level, patterns were again similar by age and sex. There were greater differences between the sexes in some wards (Appendix 2.1.5) but some of this variation could be related to the age structures of those populations; data and patterns are therefore discussed further following age-standardisation.

Table 2.1.2 Number of people with a long-term activity-limiting illness by local authority district and age group, Cambridgeshire, 2011

Local authority	Age group (years)								All ages
	0-15	16-24	25-34	35-49	50-64	65-74	75-84	85+	
Cambridge	574	651	1,226	2,360	3,079	2,154	2,767	1,886	14,697
East Cambridgeshire	493	363	507	1,558	2,773	2,532	2,792	1,402	12,420
Fenland	771	596	758	2,489	4,618	4,023	4,132	1,795	19,182
Huntingdonshire	1,214	890	1,107	3,351	5,685	4,969	4,649	2,342	24,207
South Cambridgeshire	831	651	835	2,479	4,272	3,805	4,461	2,580	19,914
Cambridgeshire	3,883	3,151	4,433	12,237	20,427	17,483	18,801	10,005	90,420
England	372,138	305,761	446,876	1,317,350	2,196,897	1,746,642	1,723,800	827,490	8,936,954

Table 2.1.3 Percentage of the population with a long-term activity-limiting illness by local authority district and age group, Cambridgeshire, 2011

Local authority	Age group (years)								All ages
	0-15	16-24	25-34	35-49	50-64	65-74	75-84	85+	
Cambridge	3.3	4.5	5.4	10.4	19.2	31.8	57.2	82.4	13.7
East Cambridgeshire	3.0	4.8	4.8	8.2	17.6	33.8	58.8	82.9	15.0
Fenland	4.6	6.2	7.1	12.8	24.6	40.1	63.6	83.0	20.4
Huntingdonshire	3.8	5.2	5.6	8.8	17.1	32.4	56.5	81.4	14.5
South Cambridgeshire	2.8	5.0	4.9	7.3	14.9	29.1	55.7	83.8	13.6
Cambridgeshire	3.5	5.1	5.5	9.2	18.1	33.1	58.2	82.7	15.1
England	3.7	5.2	6.3	11.7	23.1	38.7	60.9	83.0	17.2

Age-standardised percentages

Age-standardisation of the data provides a comparable summary measure for each area by removing the potentially confounding effects of their differing age structures.

After adjusting for age, the percentage reporting long-term activity-limiting illness was statistically significantly higher than the England average in Fenland in males (15.2% v 14.1%), females (15.8% v 14.6%) and for all persons combined (15.5% v 14.4%) (Table 2.1.4, Figure 2.1.2). In all other districts and for Cambridgeshire as a whole, these percentages were statistically significantly lower than the England average; the lowest percentages were seen in South Cambridgeshire.

Table 2.1.4 Directly age-standardised percentage of the population with a long-term activity-limiting illness, by sex and district, Cambridgeshire, 2011

Local authority	Males		Females		Persons	
	%	95% CI	%	95% CI	%	95% CI
Cambridge	12.2	(11.9 to 12.5)	12.7	(12.4 to 13.0)	12.5	(12.3 to 12.7)
East Cambridgeshire	11.5	(11.2 to 11.8)	12.1	(11.8 to 12.5)	11.8	(11.6 to 12.0)
Fenland	15.2	(14.8 to 15.5)	15.8	(15.5 to 16.1)	15.5	(15.3 to 15.8)
Huntingdonshire	11.6	(11.4 to 11.8)	12.4	(12.2 to 12.6)	12.0	(11.9 to 12.2)
South Cambridgeshire	10.2	(9.9 to 10.4)	11.2	(11.0 to 11.4)	10.7	(10.6 to 10.9)
Cambridgeshire	11.9	(11.8 to 12.0)	12.7	(12.5 to 12.8)	12.3	(12.2 to 12.4)
England	14.1	(14.1 to 14.2)	14.6	(14.6 to 14.6)	14.4	(14.4 to 14.4)

CI – confidence interval

By ward, the percentage reporting a long-term health problem was statistically significantly higher than the Cambridgeshire average in:

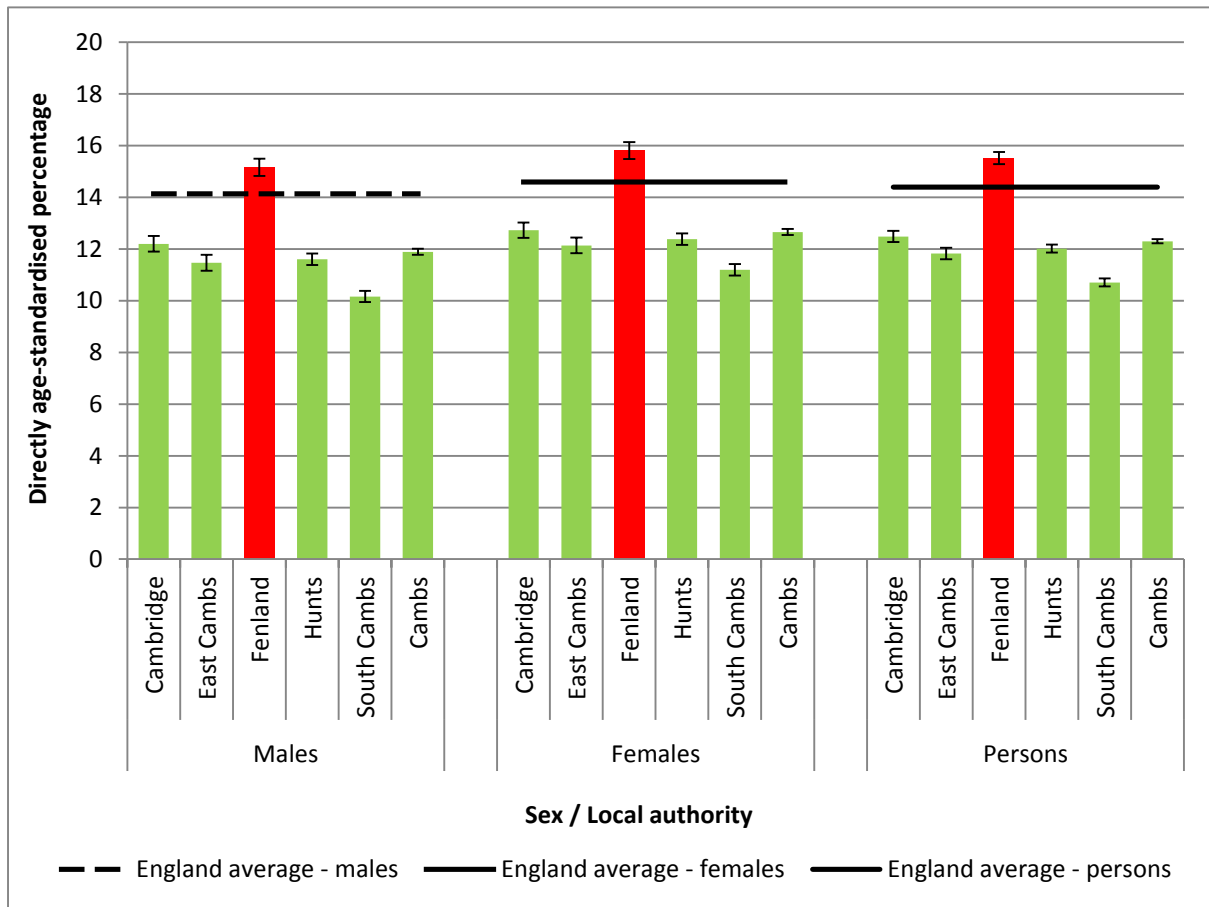
- Abbey, Arbury, Cherry Hinton, East Chesterton, King’s Hedges and Romsey wards in Cambridge
- Littleport West ward in East Cambridgeshire
- Birch, Clarkson, Doddington, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, St Marys, Staithe, Waterlees, Wenneye and Wimblington wards in Fenland (21 of the 27 wards)
- Huntingdon East, Huntingdon North, Ramsey, St Neots Eaton Socon, St Neots Eynesbury and Yaxley and Farcet wards in Huntingdonshire

(Figures 2.1.3a-e, Appendix 2.1.6). Age-standardised percentages by ward are mapped in Figure 2.1.4.

In Abbey, King’s Hedges, Birch, Clarkson, Elm and Christchurch, Hill, Kirkgate, March East, March North, Medworth, Parson Drove and Wisbech St Mary, Roman Bank, Staithe, Waterlees and Huntingdon North wards, the percentages were also statistically significantly higher than the England average.

The more notable differences by sex in some wards became less apparent after age-standardisation. The percentage was statistically significantly higher in females than males in Histon and Impington ward, but still not statistically significantly different to the national average (Appendix 2.1.6).

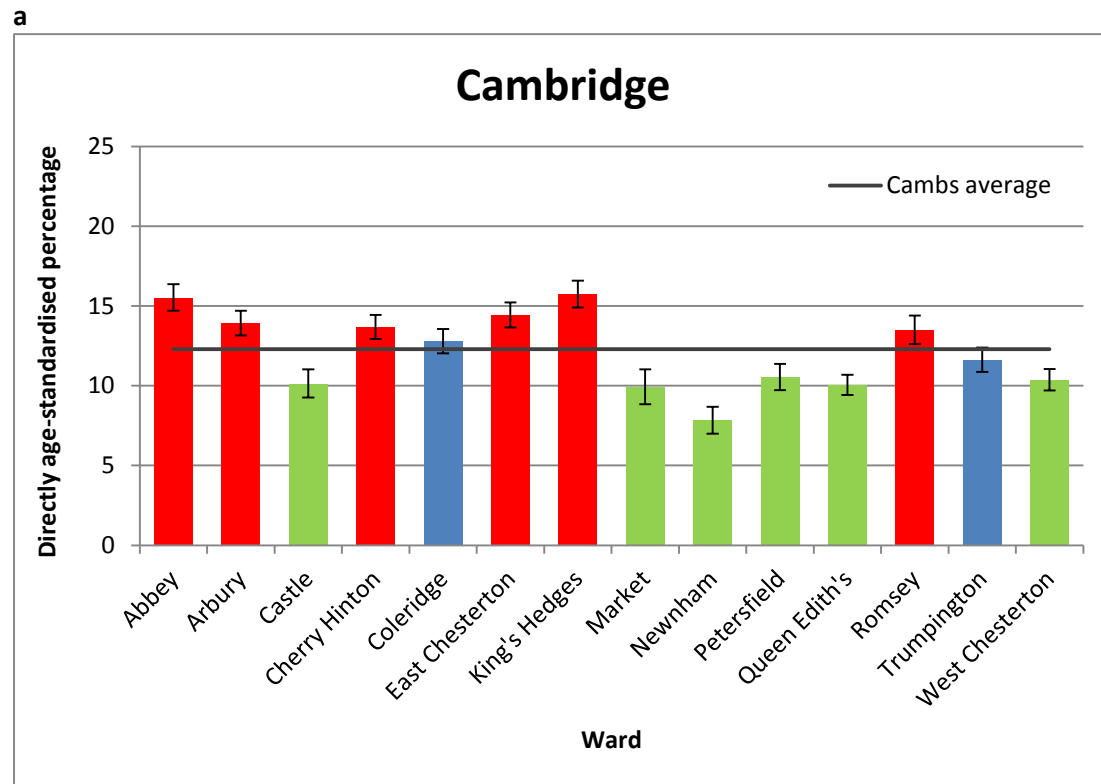
Figure 2.1.2 Directly age-standardised percentage of the population with a long-term activity-limiting illness, by sex and district, Cambridgeshire, 2011



Error bars represent 95% confidence intervals. Cambs – Cambridgeshire. Hunts – Huntingdonshire. Assessment of significance is based on overlapping confidence intervals of both the local authority and England values but the England confidence intervals are not shown on the figure.

- Significantly lower than the England average
- Not significantly different to the England average
- Significantly higher than the England average

Figures 2.1.3a-e Directly age-standardised percentage of the population with a long-term activity-limiting illness by ward, Cambridgeshire (district by district), 2011

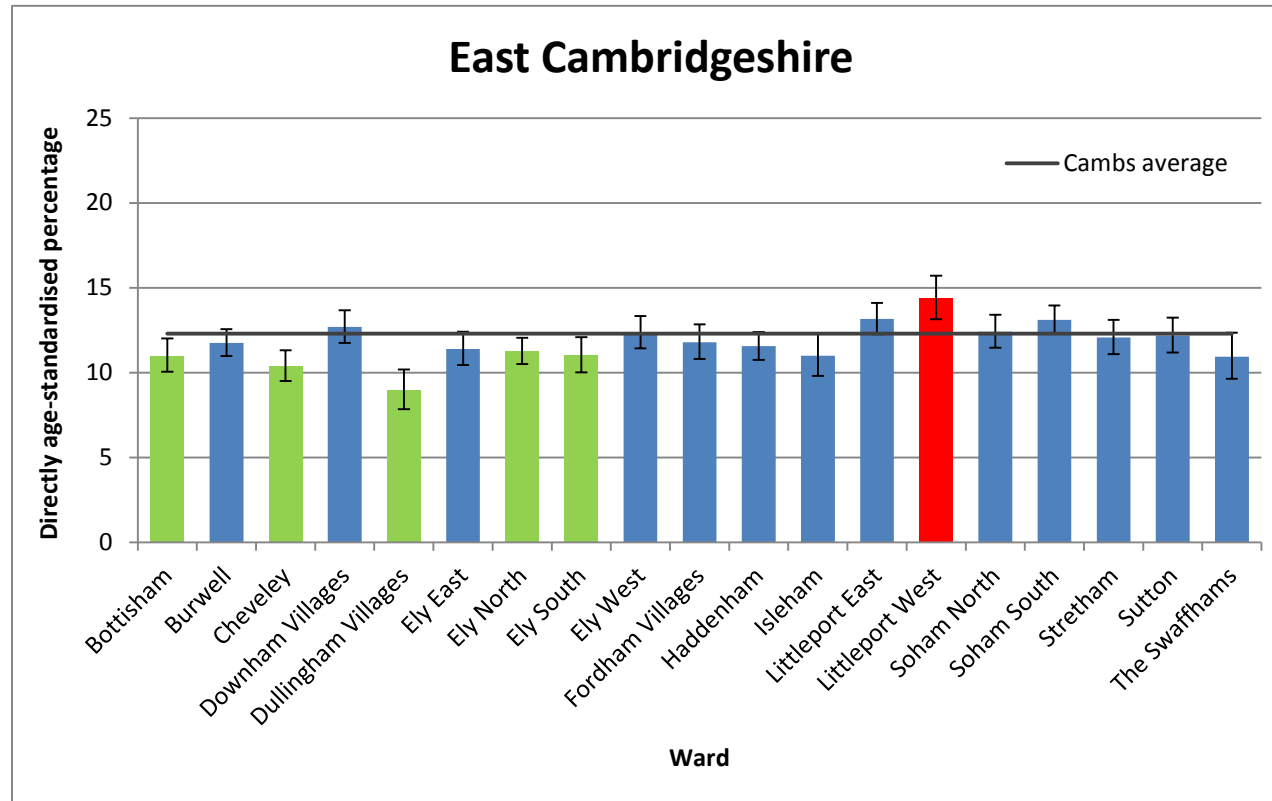


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly lower than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly higher than the Cambridgeshire average

b

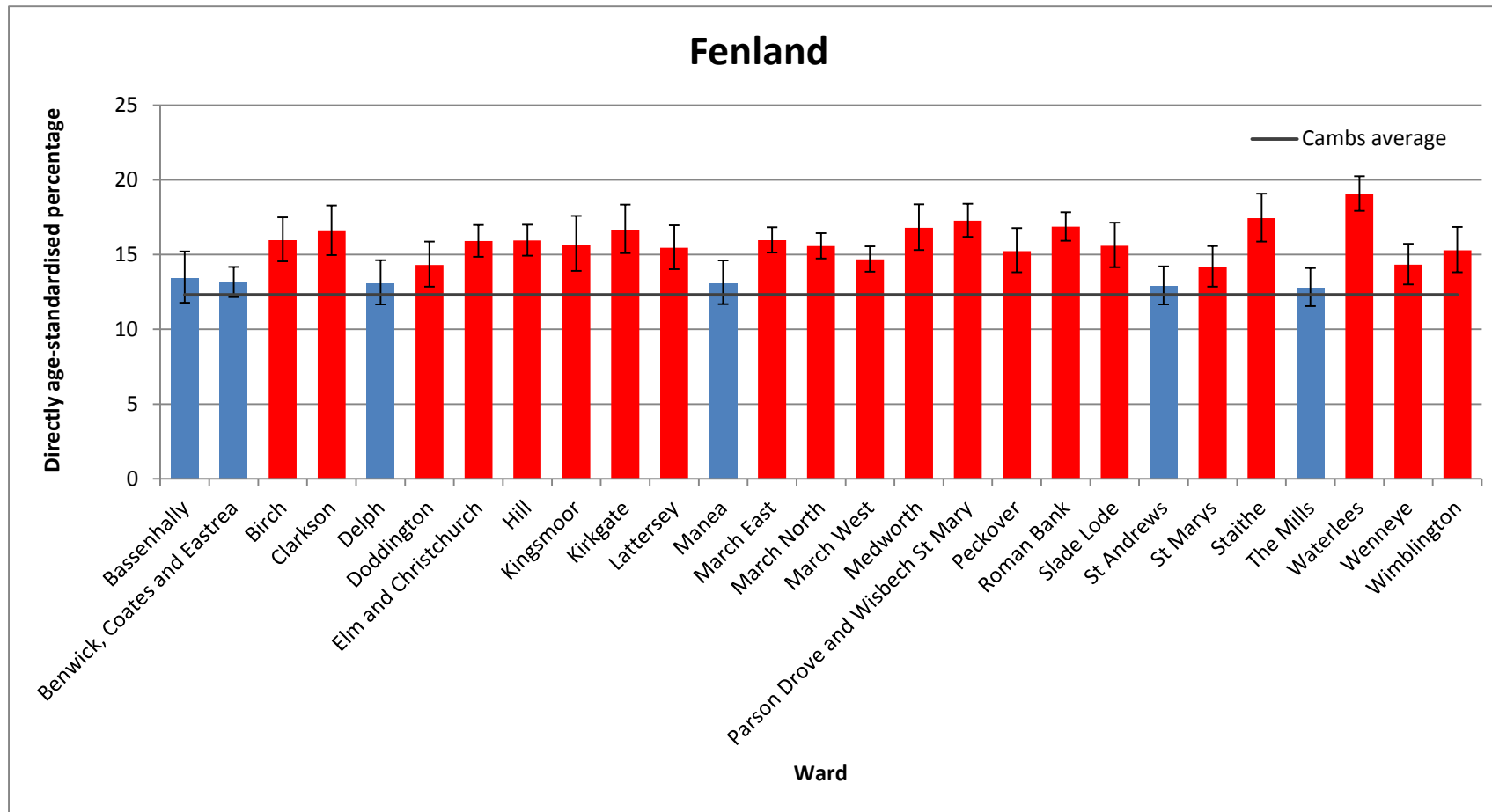


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly lower than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly higher than the Cambridgeshire average

c

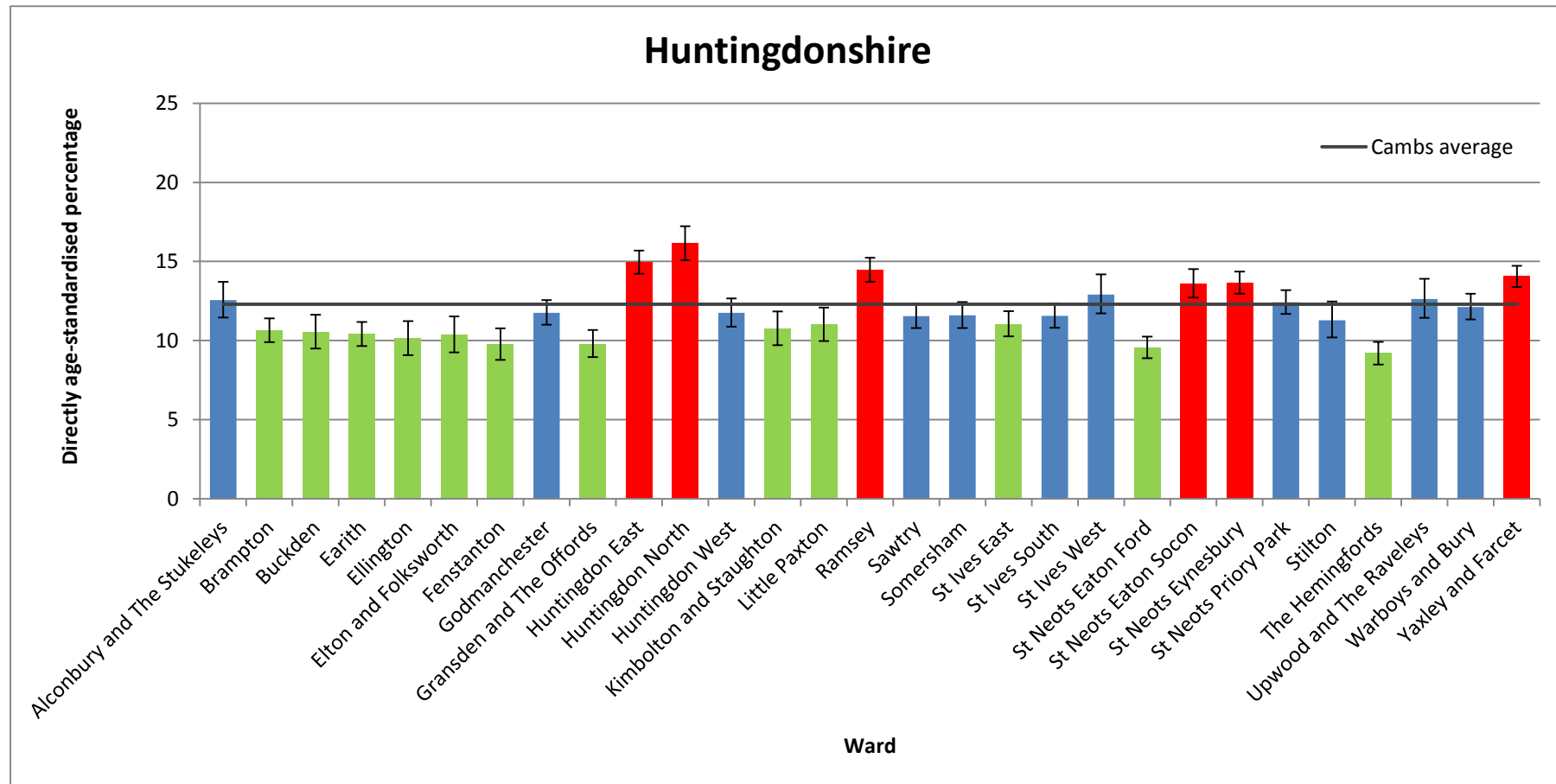


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly lower than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly higher than the Cambridgeshire average

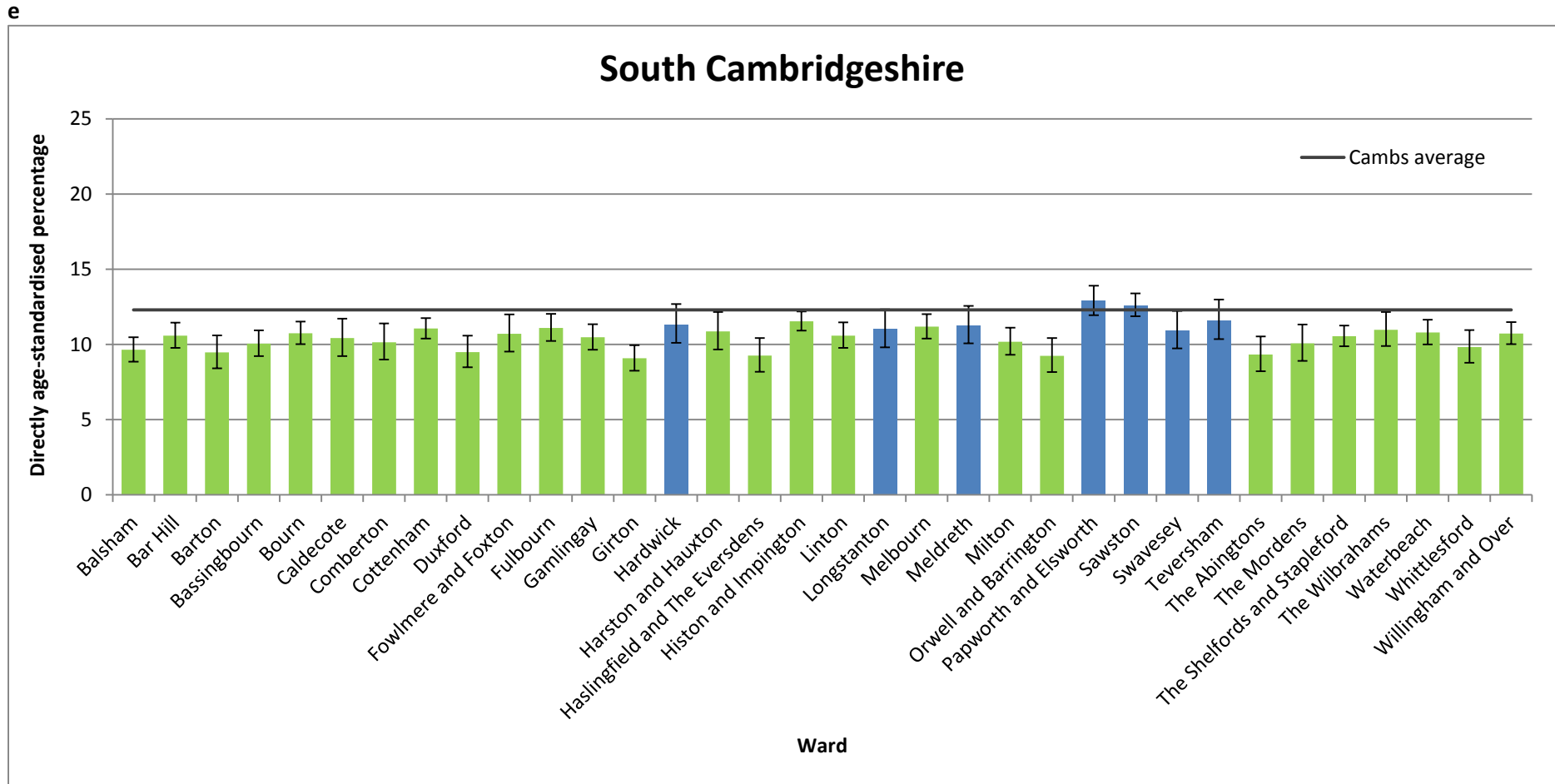
d



Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly lower than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly higher than the Cambridgeshire average



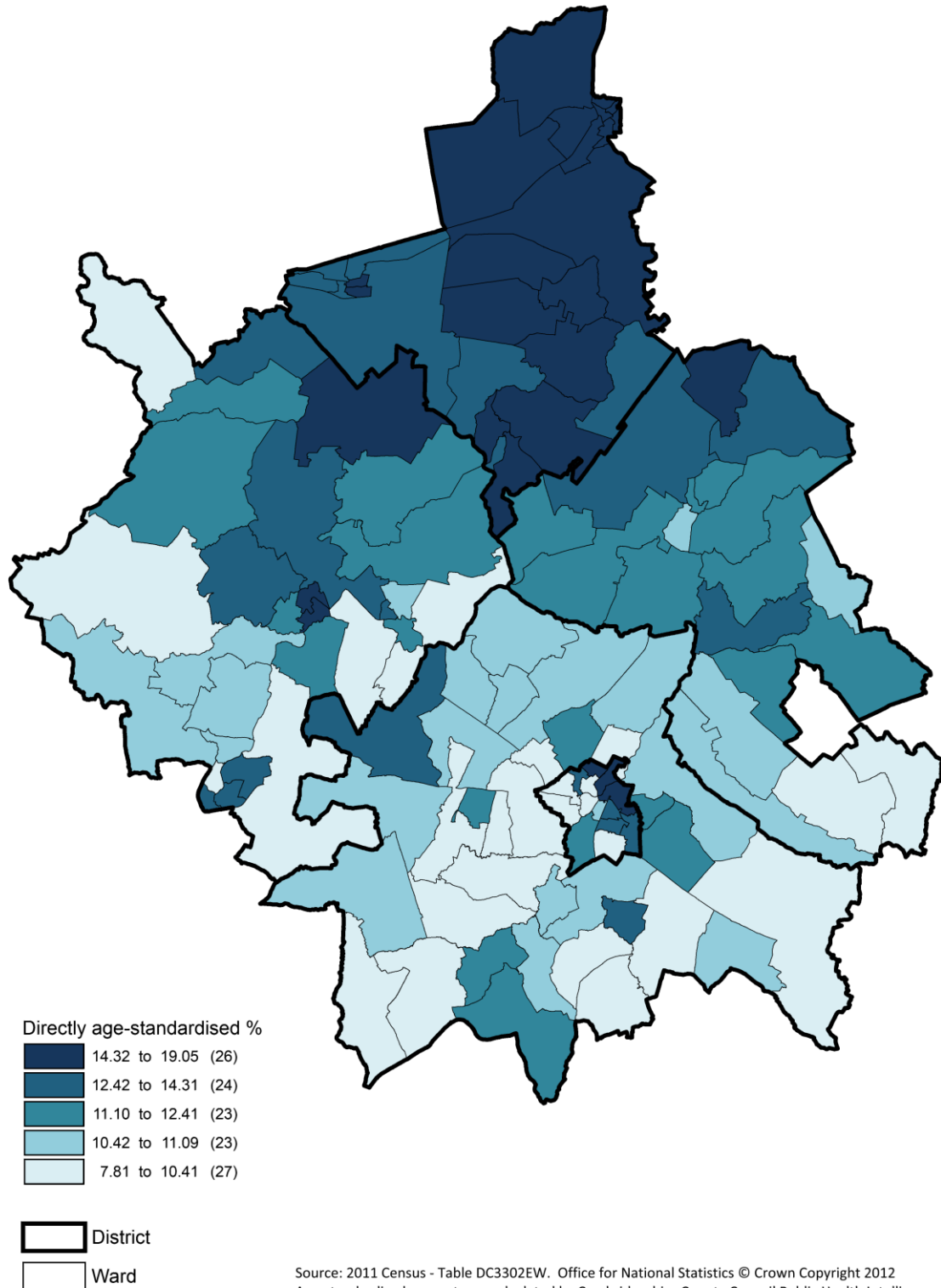
Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly lower than the Cambridgeshire average
- Not significantly different to the Cambridgeshire average
- Significantly higher than the Cambridgeshire average

Figure 2.1.4

Directly age-standardised percentage of the population with a long-term activity-limiting illness, by ward, Cambridgeshire, 2011



2.2. Day-to-day activities limited a lot

Age and sex

Of the 90,420 people in Cambridgeshire reporting a long-term activity-limiting illness, 37,652 (41.6%) described their illness as limiting their day-to-day activities a lot, 6.3% of the total population resident in households (Table 2.2.1, Figure 2.2.1). The distributions by age and sex follow the same pattern as that for all extents of limitation: percentages increase with age (1.3% in 0-15 year olds to 50.6% in those aged 85+ years), and percentages are slightly higher in females than males (6.9% v 5.7%), except in 0-15 year olds where the percentage is higher in boys (1.7% v 1.0%). A slightly smaller percentage of people limited a lot by their illness are of working age (16-64 years) compared to all extents of limitation (41%, 15,480/37,652).

Table 2.2.1 Number of people and percentage of the population with a long-term illness which limits day-to-day activities a lot by age group and sex, Cambridgeshire, 2011

Age group (years)	Males		Females		Persons	
	Number	%	Number	%	Number	%
0-15	960	1.7	525	1.0	1,485	1.3
16-24	626	2.0	518	1.7	1,144	1.8
25-34	783	1.9	784	2.0	1,567	1.9
35-49	2,191	3.3	2,598	3.9	4,789	3.6
50-64	3,804	6.8	4,176	7.3	7,980	7.1
65-74	3,000	11.6	3,357	12.5	6,357	12.1
75-84	3,478	24.0	4,725	26.5	8,203	25.4
85+	2,014	47.5	4,113	52.3	6,127	50.6
All ages	16,856	5.7	20,796	6.9	37,652	6.3

Again, similar patterns by age were seen across all districts within Cambridgeshire and nationally (Tables 2.2.2 and 2.2.3), and patterns were similar for both sexes (Appendices 2.2.1-4). However, the percentages were consistently higher in Fenland compared with the other districts and the national average, even in the young. In those aged 0-15 years, for example, 1.8% reported a long-term activity-limiting illness which limits daily activities a lot in Fenland compared with 1.0% in South Cambridgeshire. The inequality is widest in those aged 65-74 years, with 40.1% of Fenland household residents reporting long-term health problems compared to 29.1% in South Cambridgeshire (38.7% being the average for England). Data for wards are provided in Appendix 2.2.5.

Figure 2.2.1 Percentage of the population with a long-term illness which limits day-to-day activities a lot by age group and sex, Cambridgeshire, 2011

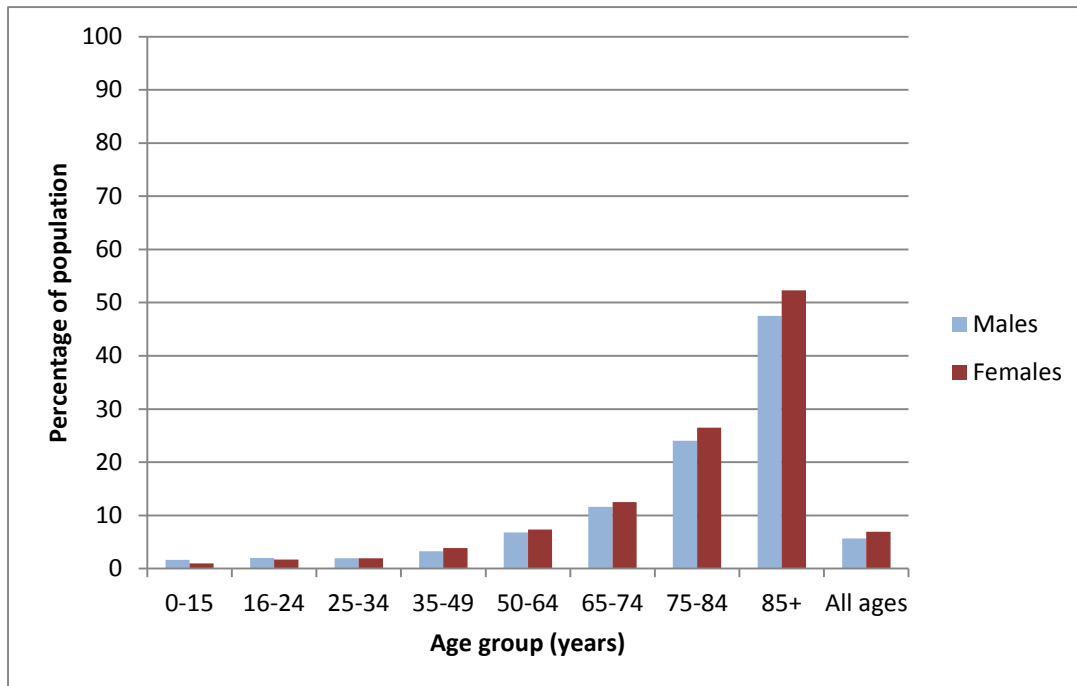


Table 2.2.2 Number of people with a long-term illness which limits day-to-day activities a lot by local authority district and age group, Cambridgeshire, 2011

Local authority	Age group (years)								All ages
	0-15	16-24	25-34	35-49	50-64	65-74	75-84	85+	
Cambridge	222	199	378	933	1,310	781	1,212	1,125	6,160
East Cambridgeshire	192	123	162	576	1,039	885	1,256	869	5,102
Fenland	306	224	310	1,104	2,103	1,666	1,960	1,151	8,824
Huntingdonshire	466	347	426	1,291	2,156	1,765	2,004	1,460	9,915
South Cambridgeshire	299	251	291	885	1,372	1,260	1,771	1,522	7,651
Cambridgeshire	1,485	1,144	1,567	4,789	7,980	6,357	8,203	6,127	37,652
England	153,101	116,091	173,933	577,402	993,162	739,346	823,863	521,910	4,098,808

Table 2.2.3 Percentage of the population with a long-term illness which limits day-to-day activities a lot by local authority district and age group, Cambridgeshire, 2011

Local authority	Age group (years)								All ages
	0-15	16-24	25-34	35-49	50-64	65-74	75-84	85+	
Cambridge	1.3	1.4	1.7	4.1	8.2	11.5	25.1	49.1	5.7
East Cambridgeshire	1.2	1.6	1.5	3.0	6.6	11.8	26.4	51.4	6.1
Fenland	1.8	2.3	2.9	5.7	11.2	16.6	30.2	53.2	9.4
Huntingdonshire	1.4	2.0	2.2	3.4	6.5	11.5	24.4	50.7	5.9
South Cambridgeshire	1.0	1.9	1.7	2.6	4.8	9.6	22.1	49.4	5.2
Cambridgeshire	1.3	1.8	1.9	3.6	7.1	12.1	25.4	50.6	6.3
England	1.5	2.0	2.5	5.1	10.4	16.4	29.1	52.3	7.9

Age-standardised percentages

After adjusting for age, the percentage reporting long-term activity-limiting illness which limits day-to-day activities a lot was statistically significantly higher than the England average in Fenland in males (6.8% v 6.5%), females (7.0% v 6.4%) and for all persons combined (6.9% v 6.5%) (Table 2.2.4, Figure 2.2.3). In all other districts and for Cambridgeshire as a whole, these percentages were statistically significantly lower than the England average; the lowest percentages were seen in South Cambridgeshire.

Table 2.2.4 Directly age-standardised percentage of the population with a long-term illness which limits day-to-day activities a lot, by sex and district, Cambridgeshire, 2011

Local authority	Males		Females		Persons	
	%	95% CI	%	95% CI	%	95% CI
Cambridge	5.1	(4.9 to 5.3)	5.0	(4.8 to 5.2)	5.1	(4.9 to 5.2)
East Cambridgeshire	4.6	(4.4 to 4.8)	4.7	(4.5 to 4.9)	4.6	(4.5 to 4.8)
Fenland	6.8	(6.6 to 7.0)	7.0	(6.8 to 7.3)	6.9	(6.8 to 7.1)
Huntingdonshire	4.7	(4.6 to 4.8)	4.9	(4.8 to 5.0)	4.8	(4.7 to 4.9)
South Cambridgeshire	3.7	(3.6 to 3.9)	4.1	(4.0 to 4.3)	4.0	(3.9 to 4.0)
Cambridgeshire	4.8	(4.8 to 4.9)	5.0	(5.0 to 5.1)	5.0	(4.9 to 5.0)
England	6.5	(6.4 to 6.5)	6.4	(6.4 to 6.4)	6.5	(6.4 to 6.5)

CI – confidence interval

By ward, the percentage reporting a long-term health problem limiting daily activities a lot was statistically significantly higher than the Cambridgeshire average in:

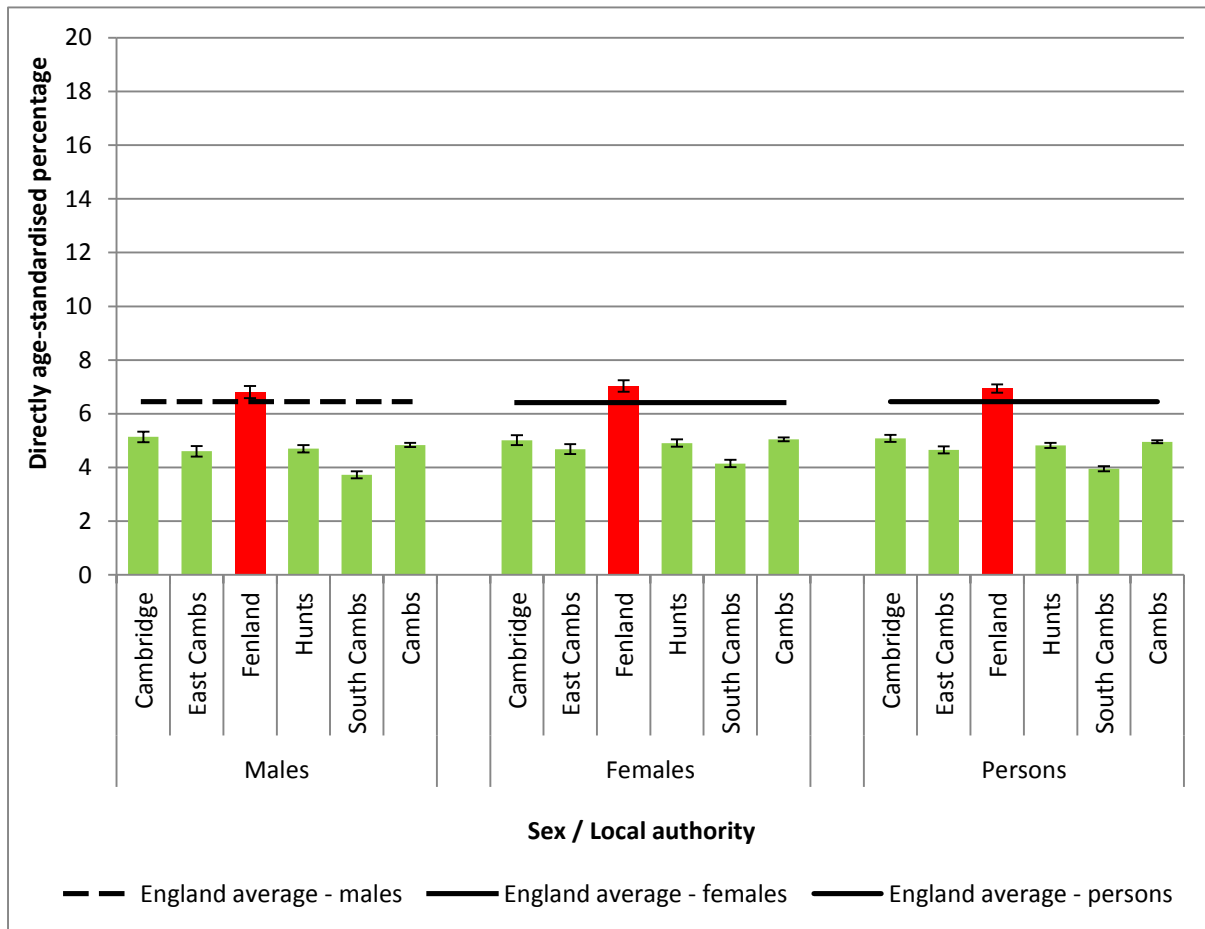
- Abbey, Arbury, Cherry Hinton, East Chesterton, King’s Hedges and Romsey wards in Cambridge
- Littleport West and Soham South wards in East Cambridgeshire
- Benwick, Coates and Eastrea, Birch, Clarkson, Doddington, Elm and Christchurch, Hill, Kingsmoor, Kirkgate, Lattersey, March East, March North, March West, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Slade Lode, St Marys, Staithe, Waterlees, Wenneye and Wimblington wards in Fenland (22 out of the 27 wards)
- Huntingdon East, Huntingdon North, Ramsey, St Neots Eaton Socon, St Neots Eynesbury and Yaxley and Farcet wards in Huntingdonshire

(Figures 2.2.4a-e, Appendix 2.2.6)

In Hill, Kirkgate, March East, Medworth, Parson Drove and Wisbech St Mary, Peckover, Roman Bank, Staithe, Waterlees and Huntingdon North wards, the percentages were also statistically significantly higher than the England average.

Figure 2.2.3 Directly age-standardised percentage of the population with a long-term illness which limits day-to-day activities a lot, by sex and district, Cambridgeshire, 2011

Note: Axis scale is set to 0-20 to maintain consistency with Figure 2.1.2 (all extents of limitation of day-to-day activities)



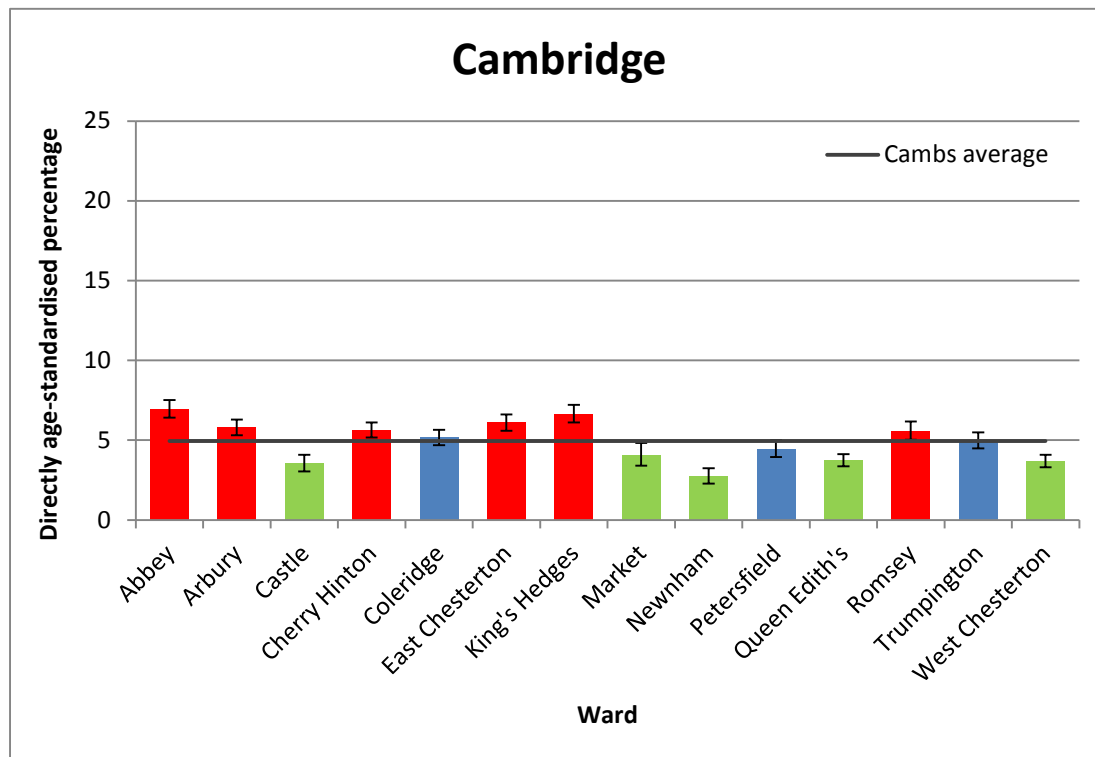
Error bars represent 95% confidence intervals. Cambs – Cambridgeshire. Hunts – Huntingdonshire. Assessment of significance is based on overlapping confidence intervals of both the local authority and England values but the England confidence intervals are not shown on the figure.

- Significantly lower than the England average
- Not significantly different to the England average
- Significantly higher than the England average

Figures 2.2.4a-e Directly age-standardised percentage of the population with a long-term illness which limits day-to-day activities a lot by ward, Cambridgeshire (district by district), 2011

Note: Axis scales are set to 0-25 to maintain consistency with Figures 2.1.4a-e (all extents of limitation of day-to-day activities)

a

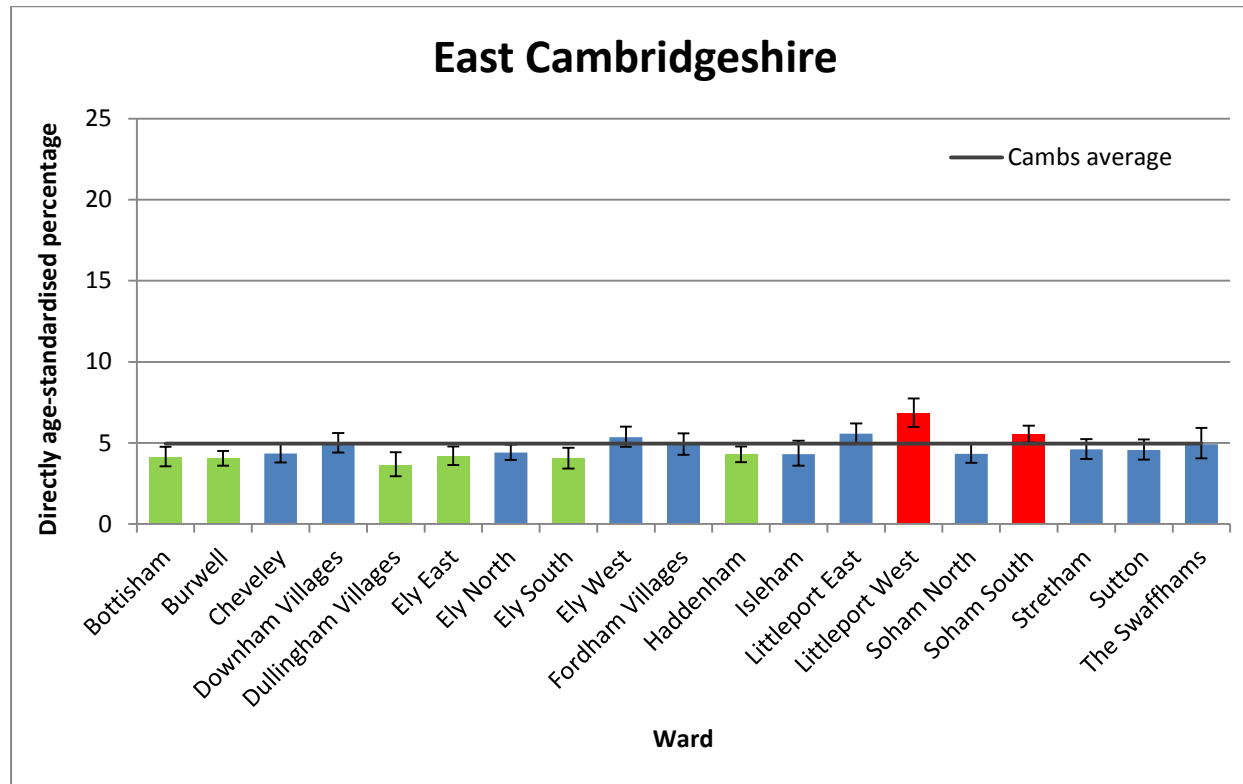


Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

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b

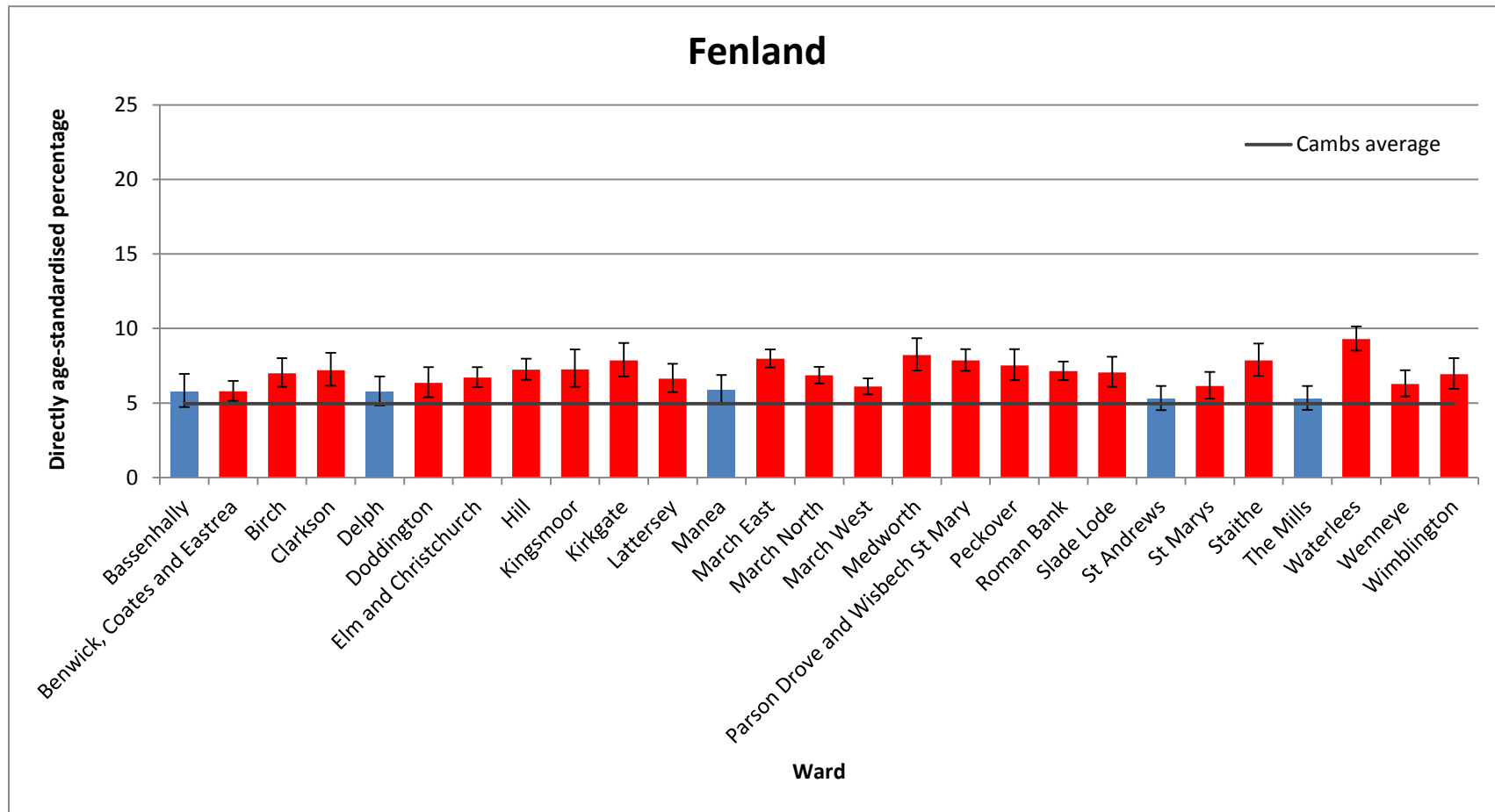


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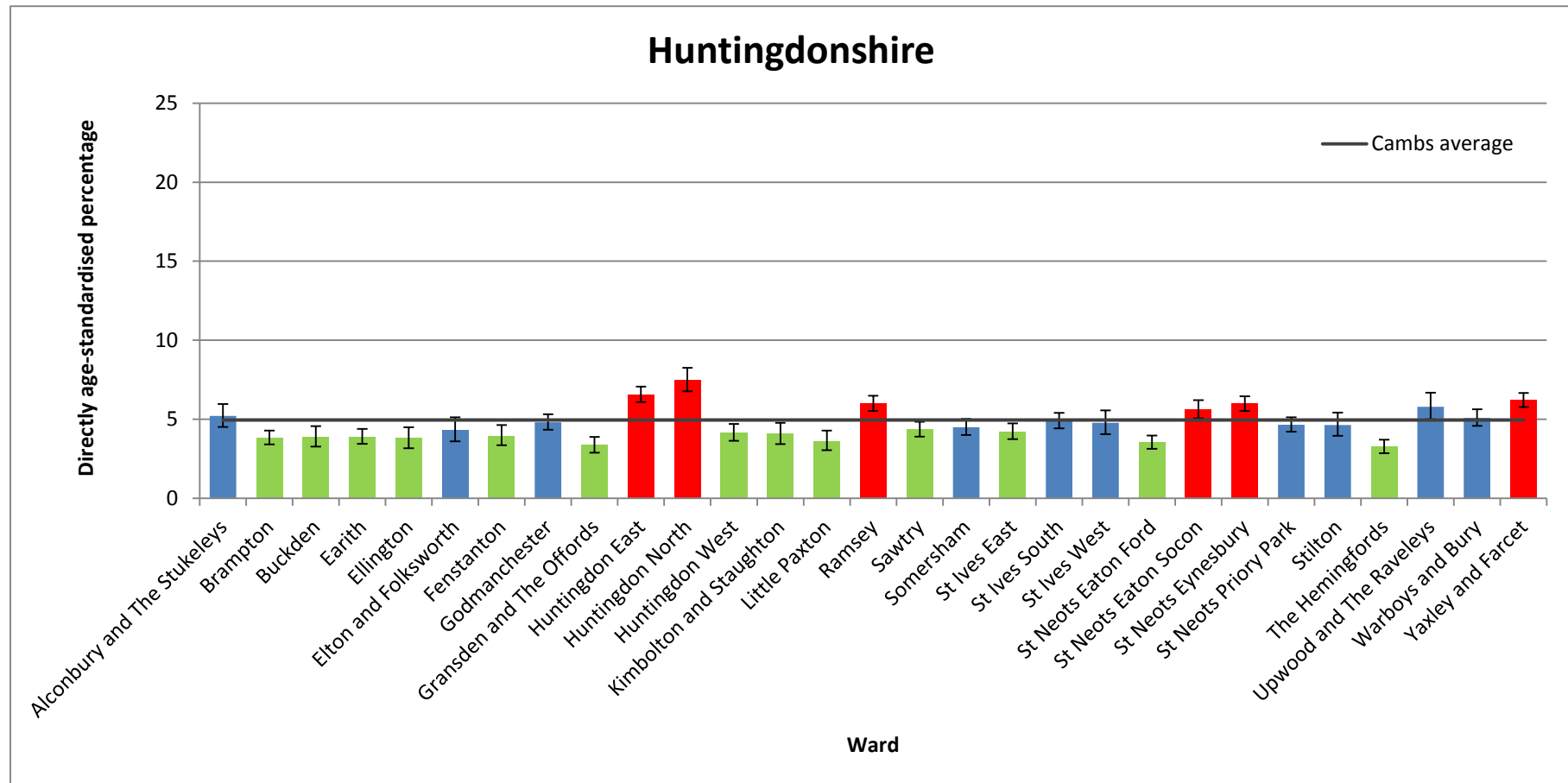


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d

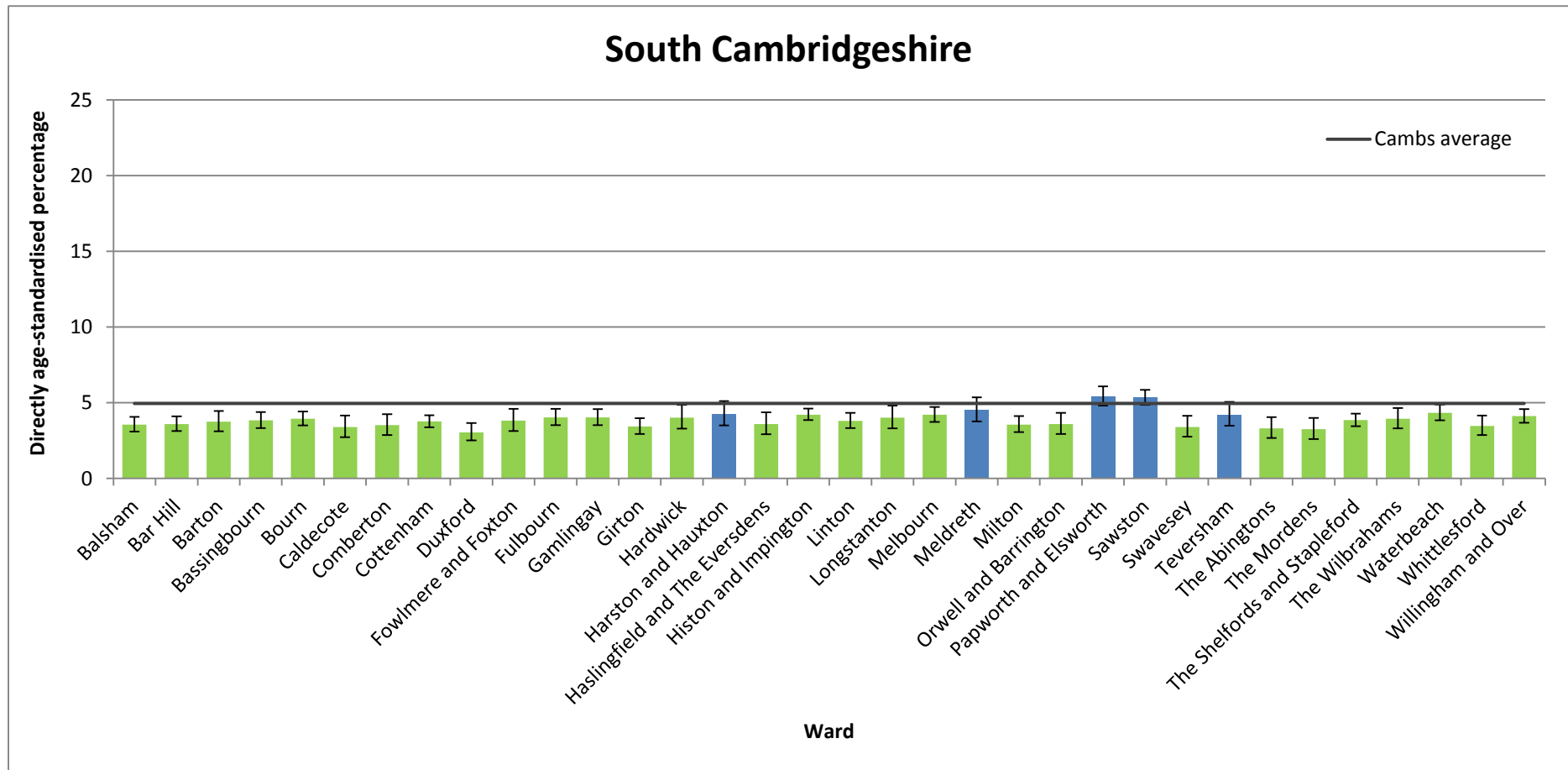


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Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

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e



Error bars represent 95% confidence intervals. Cambs – Cambridgeshire.

Assessment of significance is based on overlapping confidence intervals of both the ward and county values but the county confidence intervals are not shown on the figure.

- Significantly lower than the Cambridgeshire average
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- Significantly higher than the Cambridgeshire average

Source

2011 Census – Table DC3302EW. Office for National Statistics © Crown Copyright 2012
Accessed via Nomis – <http://www.nomisweb.co.uk/census/2011/dc3302ew>

Age-standardised percentages calculated by Cambridgeshire County Council Public Health Intelligence.

Further information

Data for Cambridgeshire on themes other than health are analysed by Cambridgeshire County Council's Research and Performance Team:

<http://www.cambridgeshire.gov.uk/business/research/populationresearch/census2011/default.htm>
<http://www.cambridgeshireinsight.org.uk/Census2011>

More detail on the 2011 Census is available on the Office for National Statistics website:
<http://www.ons.gov.uk/ons/guide-method/census/2011/index.html>

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