

In Focus: Health in London

Annual Report of the London Local Knowledge and Intelligence Service, Public Health England, October 2020

Introduction and Executive Summary

We are pleased to introduce In Focus: Health in London. This is the first annual report from the London Local Knowledge and Intelligence Service to focus on the health and wellbeing of the population of London.

A range of indicators tell the story of the important issues facing the capital at the present time, with a focus on those that measure health inequalities and the impact of the wider determinants of health. Eight sections follow the natural order of the life course as follows.

Section 1: A demographic overview of the population of London

Section 2: Infancy and childhood

Section 3: The health of young adults

Section 4: The health and wellbeing of adults - behaviours and risk factors

Section 5: The health outcomes of adults - life expectancy, mortality and morbidity

Section 6: The health of people growing older

Section 7: The impact of the wider environment

Section 8: Emerging threats to the population of London

Appendix: Inequality in outcomes in London boroughs

Glossary of main sources

There is a focus on indicators that measure health inequalities and the impact of the wider determinants of health. Please note: This report is not intended to focus on coronavirus, but presents the most recent data for the period before the pandemic.

Key messages from each section are as follows:

Section 1: A demographic overview of the population of London

- London has a younger profile than England, with highest growth in the younger age groups
- London is the most ethnically diverse region in England and over a third of women and men are from an ethnic minority background

Section 2: Infancy and childhood

- Although infant mortality rates are lower for London than England, improvements have stalled. There is variation in rates between local authorities.
- Childhood vaccination coverage in London is far below the 90% target and lags significantly behind England
- The proportion of children who achieve a good level of development at the end of reception has improved over time. However, inequalities persist for those who are most deprived.

- There remain high levels of excess weight in London's child population. There has been some improvement for younger children, but not older children, where rates remain higher than for England.
- The proportion of children in low income families in London is no longer decreasing, and remains higher than the England average
- The percentage of 5-year olds with dental decay in London remains consistently higher than England and rates are not currently improving

Section 3: The health of young adults

- The proportion of young people not in education, employment or training in London is lower than in England, but inequalities exist within London and between males and females
- Teenage conception rates are lower in London than in England. The proportion of conceptions which end in abortion is higher than in England.

Section 4: The health and wellbeing of adults - behaviours and risk factors

- Smoking, high BMI, and high fasting blood glucose are the three risk factors that contribute most to the burden of disease (disability and mortality) in London according to Global Burden of Disease estimates
- Levels of excess weight continue to increase from childhood. By adulthood, more than half of London's population is overweight or obese, and although rates are lower than for England, they have not improved in recent years
- Smoking prevalence has decreased to an all-time low of 12.9% London, but rates remain significantly higher in routine and manual socio-economic group occupations and in males
- Alcohol-related and alcohol-specific mortality are lower in London than for England, but alcohol-related hospital admissions (broad) are higher, and the recent trend is worsening
- Despite increases for England, the rate of deaths due to drug misuse has not changed significantly in London since 2013-15, although rates remain almost three times higher in males than females
- The rate of new diagnoses of sexually transmitted infections is significantly higher in most London local authorities than in England, and the rate for London is twice that of England

Section 5: The health outcomes of adults - life expectancy, mortality and morbidity

- London continues to enjoy longer and healthier life expectancy compared to England, and inequalities do not appear to be widening
- Circulatory disease, followed by cancer and respiratory disease, contribute most to the difference in life expectancy based on deprivation for both sexes
- Healthy life expectancy is higher in London than England but has not improved as much as life expectancy
- Although over time London's population overall is living longer, years spent in poor health remain high, especially for women
- Preventable mortality rates in London continue to fall for cancer and cardiovascular disease, but there remains inequality between the sexes

- Leading causes of death include external factors in the younger population, heart disease for males, and breast and lung cancer in older females. Breast cancer is a leading cause for most female adult age groups.
- The top ranked causes of death and disability in London are lower back pain, ischemic heart disease and depressive disorders. Changes since 2009 include increases for neck pain, diabetes and falls.
- There have been changes since 2009 in the causes of death and disability. The biggest increases are for neck pain, diabetes and falls. Diagnosed diabetes rates have increased steadily, though remain lower than for England, but with variation between boroughs.
- London has the lowest rate of suicide in England, but higher rates of common mental disorders

Section 6: The health of people growing older

- The rate of disability increases with age
- The proportion of people with multiple long-term conditions is higher among older people and is likely to increase as the population ages
- Mortality rates from most of the main causes of death have decreased in recent years

Section 7: The impact of the wider environment

- The conditions in which we live and work have a significant impact on our health and wellbeing, and there are significant inequalities within London
- There is wide variation in levels of deprivation at small area level across London
- The percentage of the working age population in employment in London is significantly worse (lower) than the national average
- Statutory homeless rates are far higher in London than the national average, and are not improving
- Rates of violent crime in London are rising

Section 8: Emerging threats to the population of London

- COVID-19 cases and deaths in London increased rapidly through March, reaching a peak in early April
- London had both the highest case and mortality rates for COVID-19 for males, and highest mortality rate for females, when age is taken into account
- Nationally there are disparities in COVID-19 risks and outcomes
- London has the highest mortality rate due to particulate air pollution of all English regions
- Increases in the frequency and intensity of flooding and heatwaves are two of the most likely impacts associated with climate change in England
- There has been a downward trend in deaths from terrorism since the 1980s. However, in 2005 and 2017 there were higher than average deaths:
 - in 2005 this was due to the 7 July bombings in London
 - there were two attacks in London that contributed to the higher than average number of deaths in 2017: Westminster Bridge and Palace, and London Bridge