

Health and Lifestyle Research

Tower Hamlets Primary Care Trust

August 2009

Legal notice

© 2011 Ipsos MORI – all rights reserved.

The contents of this report constitute the sole and exclusive property of Ipsos MORI.

Ipsos MORI retains all right, title and interest, including without limitation copyright, in or to any Ipsos MORI trademarks, technologies, methodologies, products, analyses, software and know-how included or arising out of this report or used in connection with the preparation of this report. No license under any copyright is hereby granted or implied.

The contents of this report are of a commercially sensitive and confidential nature and intended solely for the review and consideration of the person or entity to which it is addressed. No other use is permitted and the addressee undertakes not to disclose all or part of this report to any third party (including but not limited, where applicable, pursuant to the Freedom of Information Act 2000) without the prior written consent of the Company Secretary of Ipsos MORI.

Executive Summary

The Tower Hamlets Health and Lifestyle Survey was carried out by Ipsos MORI on behalf of Tower Hamlets Primary Care Trust. Between October 2008 and April 2009, 2,772 residents of Tower Hamlets aged 16 or older took part in a quantitative survey that collected data on self-reported health and well-being, lifestyle factors and demographic factors to create a detailed portrait of health in the borough.

It was important for the PCT to look in detail at key demographic subgroups, notably the White and Bangladeshi populations in the area. As such, an additional booster survey of Bangladeshi residents was devised based on 2008 GLA population estimates.

Behaviours and lifestyle factors

Composite indicator

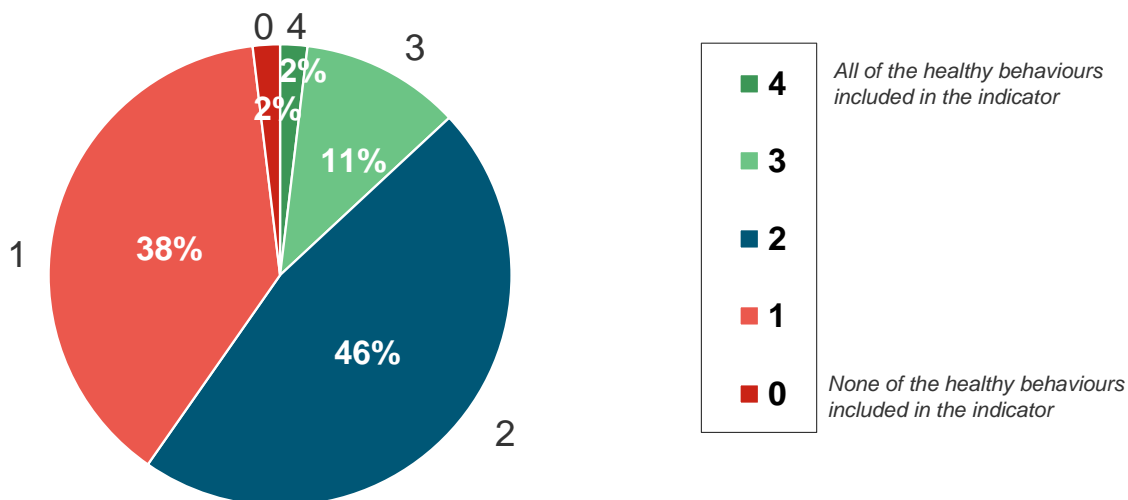
A composite score of healthy lifestyle behaviours was calculated by compiling data about each resident's self-reported eating, drinking, smoking and physical activity.

The following healthy behaviours each earned a 'point' in the score:

- Not currently smoking (regardless of past tobacco usage): 73% of residents fulfil this criterion.
- Consuming at least five portions of fruit or vegetables on an average day: 12% of residents say they do this.
- Abstaining from alcohol (reported by 50% of Tower Hamlets residents) or moderate drinking (between once a year and four times per month: 29%).
- Taking part in the recommended minimum 30 minutes of physical activity at least five times a week (31%).

Lifestyle composite indicator

Based on questions around smoking habits, fruit and vegetable consumption, alcohol intake and physical activity



Base: All Tower Hamlets respondents aged 16+ (1480); fieldwork dates 6th Oct 2008 to 27th April 2009

Ipsos MORI



Only one in fifty residents (2%) shows all four indicators of healthy behaviour, while the majority display **one (38%)** or **two (46%)**. White residents are more likely to display these behaviours than their Bangladeshi counterparts, though they are also far more likely to drink alcohol to excess.

Smoking

Just over a quarter (27%) of Tower Hamlets residents currently smoke (compared to 23% nationally), and the majority of smokers (69%) would like to quit. While three in five (60%) of White smokers would like to quit, this proportion rises to four in five Asian smokers (80%). Over a third (37%) of people who have ever smoked began doing so before the age of 16. **One in five households with children (21%) are exposed to cigarette smoke.**

Bangladeshi men are the demographic group most likely to smoke, while Bangladeshi women are least likely. A small minority of residents, almost exclusively from Asian ethnic groups, use forms of tobacco other than cigarettes, including paan (4%) and sheesha (2%).

Diet

Almost nine in ten Tower Hamlets residents (88%) say they do not consume the recommended five portions of fruit and vegetables each day (compared to 72% nationally). **One in eleven (9%) eat less than one portion per day.** More than two in five residents (44%) consume fast food at least once per week, with the heaviest consumers being younger people aged 16 to 24. One in twenty members of this age group eat fast food at least once a day. Asian residents are slightly more likely to eat takeaway food at least three times a week compared to White residents. Residents from socioeconomically deprived groups tend to consume fewer portions of fruit and vegetables than their wealthier counterparts.

Alcohol

Using measurements from AUDIT-C (see section 3.4 for a full explanation), it has been calculated that **4% of Tower Hamlets residents are classed as 'harmful drinkers'**, 18% are at possible risk of harm and 78% are low risk drinkers (including those who say they abstain from alcohol altogether). Abstention from alcohol is closely linked with ethnicity: while 96% of Asian residents say they do not drink alcohol, only 18% of White residents abstain. Likewise, while only 2% of Asian residents are harmful drinkers or at risk of harm, this figure rises to 38% among all Whites. **One in twenty residents (5%) binge drinks at least weekly.**

Physical activity

Nearly half of residents (47%) do not complete half an hour of exercise at least three times per week. One in five (20%) say they have not done any exercise in the month prior to interview. However, about three in five adults who are in work say they are at least fairly active at their job. While working Asian residents are more likely than their White counterparts to say their work is physically demanding, there are no overall ethnic differences in physical activity levels.

More than half of Tower Hamlets residents are overweight (33%) or obese (30%). The obesity figure is higher than the 2008 national figure of 24%.

Self-reported health and wellbeing

General health

Three-quarters (77%) of residents feel their health is good, which is on a par with the national figure (80%), but with a clear difference: younger people in Tower Hamlets tend to report better health than people of the same age elsewhere in the country, while people aged over 55 years report poorer health than their counterparts outside the borough. LAP 8 is the part of Tower Hamlets with the best self-reported health, which may be related to the relative youth of residents in this area.

Limiting long-term illness

One in five Tower Hamlets residents (22%) has a self-reported long-term illness, condition or disability. Of these, three-quarters (76%) are limited by it, meaning that **17% of all residents have a long-term limiting health problem**. It appears that health problems *for those who have them* are more severe in Tower Hamlets than across Britain as a whole: nationwide, a greater proportion report having a long-term illness (38%), but of these a smaller proportion say it limits their activities (54%). White British residents of Tower Hamlets are more likely than those from Asian or other White backgrounds to report a limiting long-term illness, but this may be due to the higher than average representation of White British people in the oldest age groups. Low socioeconomic status is correlated with increased incidence of limiting long-term illness.

Self-reported mental health

Questions from the Warwick-Edinburgh Mental Well-being Scale (WEMWBS, see section 4.3 for a full explanation), relying on respondents' self-reporting of different feelings over the last two weeks, were asked of residents to gain an idea of their general mental health. The mean score for Tower Hamlets was 52, roughly equivalent to the mean score found in the first usage of the WEMWBS (though under a different methodology) in Scotland in 2006. Mental well-being is strongly linked with increasing age: while only 10% of Tower Hamlets residents aged 16-34 obtained scores in the 'very low' range, this proportion increased to 37% of

residents aged 75 or older. Social renters also tend to report lower scores than owner occupiers or private renters.

Poor physical health is correlated with poor mental health, as 51% of respondents who say their physical health is poor also had WEMWBS scores in the 'very low' range compared to only 16% of the overall population of the borough. However, there are no significant differences in the mental health of Tower Hamlets residents from different income brackets.

Individual and household data

The Tower Hamlets Health & Lifestyle survey also collected individual and household data about education, employment status, income, ethnicity, literacy, housing tenure and home condition.

Education and literacy

A similar proportion of Tower Hamlets residents are educated to degree level (30%) as have no formal qualifications (29%). Just under two in five residents aged 16 or older (39%) are in paid full-time work, and seven per cent are in part-time work. Tower Hamlets' overall employment rate is lower than the national average. About one in ten residents are self-employed. Working age Bangladeshi residents are least likely to be in full-time work (21%), while residents who describe themselves as White but not British are most likely (60%).

Just over one in ten residents (12%), regardless of first language, describe their ability to read and understand English as below average or poor.

Furthermore, among the half of residents who have English as a second language, one in ten say they have below average or poor ability to read their first language. One in five (21%) of those with English as a second language say they have a below average or poor grasp of spoken English. Men and White residents are most likely to have high functional literacy.

Housing

Overcrowding is a significant problem in Tower Hamlets: **while a quarter (24%) of the general population lives in homes that are below the acceptable bedroom**

standard, this figure rises to 45% of Bangladeshis in Tower Hamlets. Nearly half (46%) of residents live in properties where there are problems with condensation, and three in ten (30%) live in properties with significant mould or fungus. Nationwide, problems with condensation and mould or fungus are less widespread than in Tower Hamlets (34% and 13% respectively).

Indicating the density of the population in the borough, four in five Tower Hamlets residents live in flats or maisonettes (81%), while fewer than one in five (17%) live in houses or bungalows. This is essentially the reverse of the figures for Britain as a whole, where 81% of residents live in houses or bungalows and 19% are in flats. Living spaces in Tower Hamlets also tend to have fewer bedrooms than elsewhere in the country. The majority of residents live in one- (21%) or two-bedroom (39%) accommodation. Nearly four in five Tower Hamlets residents rent their property (78%), compared to a national figure of 27%. About one in five residents either owns their home outright or is buying it with a mortgage or loan.

Regarding resident mobility, 11% of residents have lived at their current address for less than six months. The same proportion have lived in their home for over twenty years. A quarter of Bangladeshi residents have lived at their current address for between ten and twenty years, which coincides with times of mass immigration. About one in seven recent in-movers come from outside the United Kingdom, but no specific country stands out as a major source of immigrants. Only 1% of people who have moved into Tower Hamlets in the past year came from Bangladesh, indicating that the largest minority ethnic group in the borough is a largely settled population.

Income and benefits

Nationwide, three-quarters (73%) of adults have income from employment or self-employment, but in Tower Hamlets this proportion is only 46%. Of those respondents in paid work, mean annual reported income in Tower Hamlets is £31,504. About a quarter of Tower Hamlets residents claim Child Benefit and/or Housing Benefit. Bangladeshi households are on average larger than those of White residents and with more children so it follows that a larger proportion of Bangladeshis claim Child Benefit.

