



Health Profile of England 2007

Health Profile of England

Prepared by Health Improvement Analytical Team – Monitoring Unit

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Executive summary

What the Health Profile of England 2007 shows – the general picture

▶ **A general improvement in health outcome**

- The report shows recent improvements in a number of critical areas, eg:
 - declining mortality rates in targeted killers (cancers, all circulatory diseases and suicides)
 - increasing life expectancy, now at its highest ever level
 - reducing infant mortality, now at its lowest ever level

▶ However in some areas **particular challenges remain** to achieve and sustain progress, eg:

- rising rates of diabetes

▶ Similarly for the **determinants of health**,

- although we are **making improvements** in some **important areas**, eg:
 - the number of people who smoke
 - quality of housing stock
- there are a **areas of concern**, eg:
 - increasing levels of obesity in adults and children

▶ And even where we are seeing improvements, **health inequalities** are often present

- The report illustrates various geographical inequalities across the UK

▶ **International comparisons** give a wider context presenting national progress in comparison to countries of the European Union (EU), or to the 15 countries that were members of the EU prior to 2004 (EU-15), eg:

- Premature mortality rates from the two biggest killers, circulatory diseases and cancer are reducing faster in England than the average for the EU
- Death rates from motor vehicle traffic accidents in the United Kingdom are amongst the lowest in EU
- The prevalence of obesity in England is the highest in the EU
- Death rates for chronic liver disease and cirrhosis have risen markedly, particularly since the mid-1990s, and for females latest data show England has risen above the EU-15 average
- The percentage of all live births to mothers under age 20 in the United Kingdom remains the highest when compared to other EU-15 countries.

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Introduction

The aims and structure of the document.

The first Health Profile of England was published in October 2006. The Health Profile of England 2007 now provides an updated collection of national and regional data to be used as a benchmark against which local areas can compare their own Health Profile data. The Health Profile of England 2007 builds on and complements various information presented in the related Local Health Profiles³⁰¹. Local profiles for 2007 are available from www.communityhealthprofiles.info.

For 2007, the Health Profile of England has been limited to production of a web-based update of key data plus a short section presenting selected international comparisons. For more substantial commentary and a set of charts illustrating a broad range of trends, readers are recommended to refer to the 2006 publication⁴⁰⁹.

The Health Profile of England is intended to be of use to public service professionals and officials working at national, regional and local levels. It should assist people working within the local community - such as local councillors and Primary Care Trust (PCT) directors of public health - who are in a position to exert influence over the planning, commissioning, procurement and delivery of programmes which will support health improvement. But the document will also be of interest to a much wider audience – anyone with an interest in the profile of health and health determinants in this country.

The context of the document.

Amongst the plans set out in *Informing Healthier Choices*⁴¹³ is the production of Health Profiles annually for all Local Authorities and for England. Information presented in the Health Profile of England should serve as a valuable tool to help to:

- describe and quantify the burden of disease and the factors that determine it
- aid the commissioning process by identifying areas for action
- identify which health outcomes and determinants will be associated with greatest impact on health, and social, gains
- identify, in association with associated research, key interventions and quantify their potential impacts
- support health economic analyses, eg. regarding cost effectiveness etc.
- monitor progress
- model outcomes

Related documents and products.

The Health Profile of England should not be looked at in isolation. A component of *Informing healthier choices: Information and intelligence for healthy populations*,⁴¹³ it is part of a wider family of products, which taken together will facilitate access to key information about health and health determinants nationally and locally.

The family of health profile products comprises – the Health Profile of England, 386 Local Health Profiles (of Local Authority Areas) [301](#) and an associated web-site and web-based tool. The Local Health Profile reports have been produced by the Association of Public Health Observatories [101](#), and there has been close liaison in the development of the local and national profiles.

There is also a broader family of reports and indicator sets that together form a valuable resource for assessing trends in the health of the nation. These include annual reports such as the Chief Medical Officer's Annual Report [403](#) on the state of the nation's health, the Department of Health's Departmental Report [405](#) and an array of reports produced by organisations such as the Office for National Statistics (ONS) [107](#), the Healthcare Commission [103](#), the Association of Public Health Observatories (APHO) [101](#) and individual public health observatories, and the Information Centre for Health and Social Care. [105](#) As part of the Clinical and Health Outcomes Knowledge Base, the National Centre for Health Outcomes Development produce an extensive Compendium of Clinical and Health Indicators. [205](#)

In addition to these reports, much information on population health is now readily available via web-links and publications of organisations such as those listed. There are also a number of sites that present information on health and its determinants, as part of comprehensive databases and indicator sets.

Links to some of these reports and web-sites are signposted in annex F.

The rationale for inclusion of particular indicators.

The detailed rationale for the inclusion of particular indicators is presented in annexes C and D. The diversity of the indicators selected is a reflection of the many and varied factors which impact on health.

The coverage of the indicators in various parts of this document is not intended to be comprehensive but to illustrate the broad range of factors determining health outcome, for example:

- "wider determinants" – eg. occupation, education, income, housing etc.
- lifestyle factors – eg. smoking, diet, alcohol, drug misuse, etc.
- preventative health care – eg. screening, immunisation

It is important to look at various factors in combination rather than in isolation. Generally, it needs to be understood that there are multiple linkages between different indicators and so changing trends in one indicator may be caused by, or have implications for, other indicators.

The layout of the document.

In order to provide an informative description of the health profile of the country, it is important to look at a number of different aspects of the selected indicators. Across the document will be

found tabulations illustrating trends over time and between places (between different regions and also international comparisons)

In understanding trends it is important to recognise that some changes can be expected to occur rapidly eg, the impact of treatment on survival from diseases such as heart attacks, but often health improvements take longer before they become apparent. A review of trends needs to focus not only on health outcomes, but also on processes, risk factor changes and intermediate (early) outcomes. This enables us to develop an earlier indication of progress (or problems), and see a much fuller picture. In the Health Profile of England, the indicators cover this spectrum of measures.

The approach taken has been to:

- provide information across each of the domains of health and its determinants, using the framework established for the Local Health Profiles [301](#)
- assess a broad range of trends, highlighting the international dimension

In terms of structure of the document there are 3 main sections, each intended to fulfil a different function:

Section 1:

The national perspective on the indicators presented in the Local Health Profiles [301](#). Tables of regional variation are included. Where related data are accessible at national level, the national time trends have also been presented.

Section 2:

A snapshot summary of health and well-being in England – a high level summary tabulation of social and demographic indicators (with a major focus on health).

Section 3:

International comparisons. Charts illustrating a selection of international data and trends to put into a wider context the progress made on health improvement in England.

In addition to the three main sections there are:

- weblinks and source notes, signposted throughout the document
- a list of additional links and sources in annex F to facilitate access to key data sources
- further annexes that present definitions and rationales for the indicators used.

To enhance the role of the Health Profile as a signpost to a range of information and data sets, rather than a traditional bibliography of sources, the numerical signposts throughout the document refer to annex F. This contains a list of selected key weblinks to further information – source publications, data and indicator sets and organisations. Each weblink is preceded by a brief description of the nature of signposted information.

Conclusion.

This document is focused on a limited set of indicators that, taken together, provide a good indication of progress and challenges in critical areas. It is not a comprehensive review of health and its determinants.

Monitoring these trends identifies progress in important areas – eg: cancer and circulatory disease mortality. There is an underlying trend towards improving life expectancy, and there is good evidence of progress in a number of key areas. However in a number of areas opportunities still exist to achieve or consolidate progress and to address inequalities.