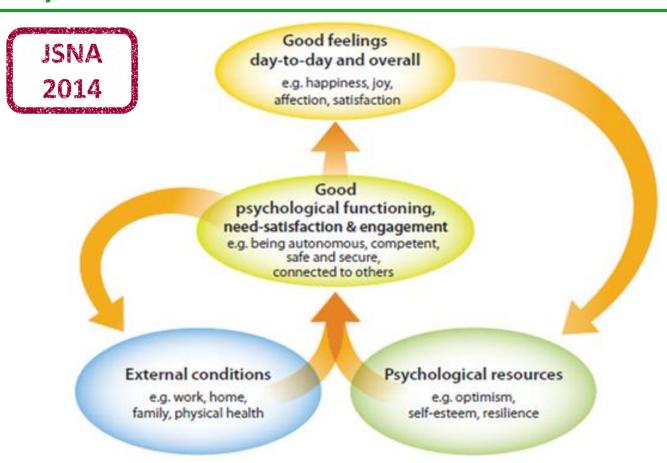
LAMBETH Wellbeing factsheet April 2014



This profile brings together wellbeing data to provide standard statistics for Lambeth.

Key facts



Source: Dynamic model of Wellbeing, Government Office for Science (2008)¹

Lambeth has fewer residents with no qualifications than London average.

Lambeth residents' survey showed that wellbeing scores were slightly higher than England average. Lambeth residents
who are
unemployed,
disabled or sick
report poorer
wellbeing.

In Lambeth, noise complaints, hospital admissions for violence and children living in deprivation are all higher than the London average.

Defining Wellbeing

Wellbeing

Wellbeing is a broad concept including happiness, satisfaction with life, autonomy and sense of purpose. "To feel positive about the present, feeling hopeful about the future; feeling confident about being able to handle life's stresses and problems; and feeling that mostly life is fulfilling and rewarding²".

| Social Feeling | Connections and relationships with friends, family and community; sense of belonging, support, fairness and trust. | |
|----------------------|--|--|
| | | |
| Social Functioning | Contribution made through work and altruism to care for others, the community and the planet; includes volunteering and participation in group activities. | |
| | | |
| Personal Feelings | Sense of fulfilment, satisfaction and optimism, adaptability and thoughts about life and self. | |
| | | |
| Personal Functioning | Skills and competency; ability to take decisions, learn, be resilient, find meaning and purpose in life, and do things for themselves. | |
| | | |

Source: New Economics Foundation, four quadrants of wellbeing³

Factors affecting wellbeing

The National Centre for Social Research identified domains affecting wellbeing to varying degrees⁴ which are summarised in the figure opposite. These domains contribute to overall wellbeing reports by individuals and encompass ill health as well as wider determinants of health and wellbeing.

There is a role for everyone in improving wellbeing through policy making, commissioning, service delivery and on an individual level.

Housing
Working conditions
Warital status
Sexuality
Housing
Marital status
Sexuality
Housing
Marital status
Sexuality
Housing
Health
Partnerships
Financially
Partnerships
Neighbourhood

Risk factors for poor wellbeing

Analysis of existing national datasets has produced information about potential risk factors for poor wellbeing and indicates which groups may be particularly vulnerable⁴.

Groups most as risk

Older women
Older teenagers, particularly
girls
People with a disability
People with a chronic illness
People in significant financial
hardship
People who are
unemployed, particularly
men

Risk factors

Lack of positive neighbourhood social capital
Absence of positive, supportive personal
relationships
Living in a less affluent area
Having a poorly maintained home
Living in a cold home
Having an over-demanding job
A disruptive school environment
Age: lowest wellbeing scores are in the mid
teenage years, at midlife, and amongst the very old

Why wellbeing matters to you

Importance to the Public's Health

- Wellbeing integrates mental health and physical health, resulting in more holistic approaches to disease prevention and health promotion.
- Wellbeing is a valid population outcome measure that tells us how people perceive their life is going
- Wellbeing is an outcome that is meaningful to the public
- Wellbeing is associated with numerous health-, economy-, and family-related benefits⁹.
- Higher levels of wellbeing are associated with improved educational outcomes, greater productivity
 and continuing employment, improved cognitive ability and quality of life and improved social
 connectedness. There is also an association with reduced mortality, reduced criminal behaviour, risktaking behaviour and sickness absence.

Policy approaches for improving wellbeing¹

A life-course approach, which looks at wellbeing at all stages of life, has been advocated in previous mental health frameworks as providing the most effective method of formulating a set of policies and initiatives.



- Promotion of self-efficacy, emotional/social skills and resilience, intrinsic motivation and sense of purpose, empathy and pro-social behaviour.
- Promoting lifestyles that enhance and protect mental health, such as physical activity, nutrition, drinking moderately and maintaining social networks

Strengthening communities

- Increasing social inclusion and participation, improving community safety and neighbourhood environments, promoting childcare and self-help networks
- Developing health and social services to support mental health, and improving mental health within schools and workplaces

Reducing structural barriers to mental health

- Initiatives to reduce poverty, discrimination and inequalities
- Promoting access to education, good-quality employment and housing
- Services and support for those who are vulnerable

Improving quality of the physical environment

 Facilitating access to the natural environment and better design of products, the built environment and transportation systems.

Risks & Opportunities

Benefit cuts and the impact of recession make this a critical time to consider the opportunities to protect and promote the wellbeing of residents. 'In work poverty', growing economic inequality and a budget gap between Government funding and the anticipated demand on public services are all risks to the wellbeing of populations as the undermine capacity for resilience. Action to promote wellbeing will have an impact on outcomes that are important to Health and Wellbeing partners including increased educational attainment and employment, and reductions in crime and antisocial behaviour.

Copies of this factsheet are available from the Lambeth JSNA website web address for download www.lambeth.gov.uk

www.lambeth.gov.uk

Measures of Wellbeing

There are challenges with measuring wellbeing at a local level however there are frameworks, tools and measures that can be looked to and used to help form a fuller picture of wellbeing in our area.

Measuring National Wellbeing Programme (ONS)

Interactive Wellbeing Wheel

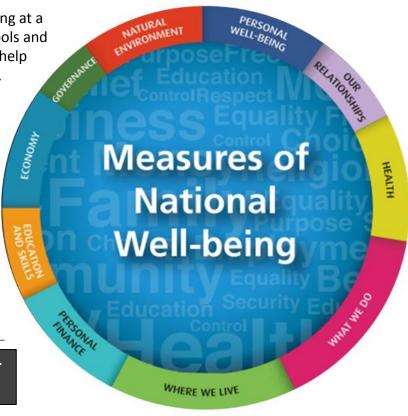
The ONS brought together an indicator set for wellbeing on a national level. 42 measures were identified across 10 domains. Only some of these data are available at a local level. An interactive version of the wellbeing wheel is available at the link above^{5,6}.

Wellbeing Probability Score (Greater London Authority)⁷

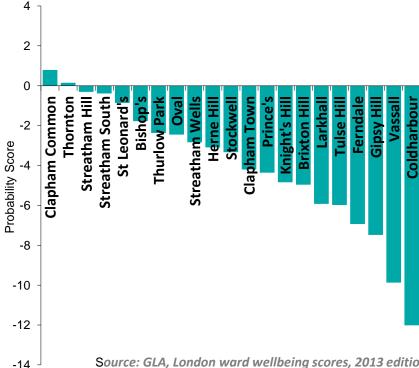
Wellbeing probability scores have been calculated using 12 measures available at a local level including:

- Life expectancy,
- Incapacity benefit claimant rate,
- Unemployment and income support claimant rate,
- Crime rate and deliberate fire setting,
- GCSE point scores, unauthorised pupil absence,
- Children living in out of work households,
- Public transport accessibility scores,
- Access to public open space and nature,
- Happiness (composite wellbeing score).

The England and Wales average is shown as 0, scores above zero indicate a higher probability of higher wellbeing whilst scores below zero indicate a higher probability of lower wellbeing. All but two wards in Lambeth have wellbeing scores below the England and Wales average.







Source: GLA, London ward wellbeing scores, 2013 edition

Measures of Wellbeing Available Locally

Lambeth residents' survey findings on mental wellbeing

Residents' surveys were conducted in Lambeth in 2012-2013 using the Short Warwick-Edinburgh Mental Wellbeing Scale (sWEMWBS)⁸ in order to understand levels of wellbeing in the borough. The sample size with completed sWEMWBS scores was 656.

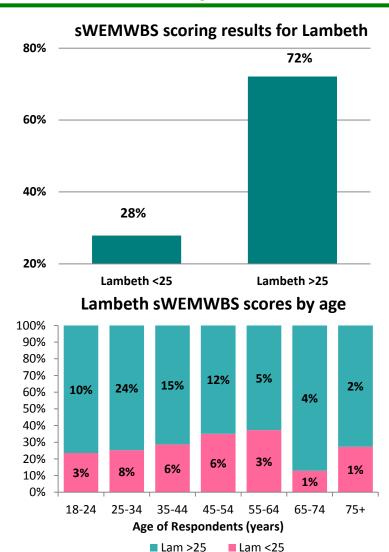
Click the link to find out your personal wellbeing score: My Wellbeing Score

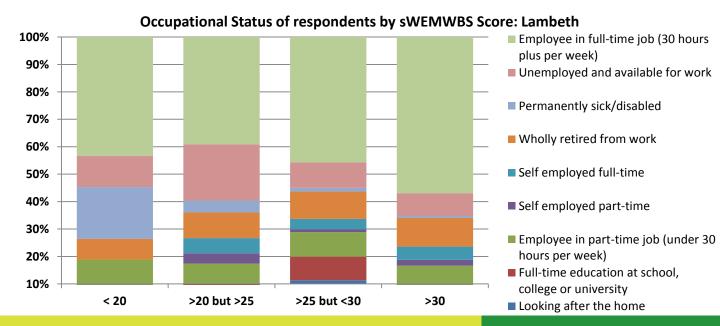
Mean scores

England = 25.3 Lambeth = 27.0 Scores higher than 25 indicate higher reports of wellbeing.

Descriptive analysis of the data suggests:

- Age and Employment status are linked to wellbeing
- Lower reported wellbeing can be seen in those who are unemployed, or permanently sick/disabled





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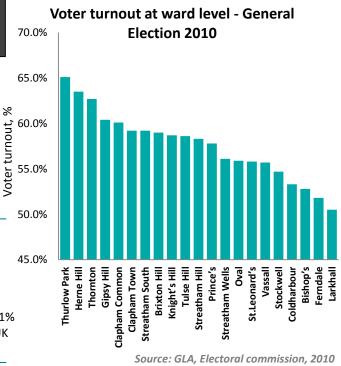
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Measures of Wellbeing Available Locally*

| Compared [†] to | | |
|--------------------------|---------|--------|
| London | England | 2 2 |
| Amber | Red | - |
| Amber | Amber | - |
| Amber | Amber | - |
| Amber | Amber | - |
| | | • |

Annual Population survey (ONS): 4 self report questions on personal wellbeing; 2012/13

- 27.5% report high anxiety (22.4% in London, 21.1% in England).
- 11.0% report low happiness, (10.3% in London, 10.4% in England).
- 7.8% report low satisfaction with life (6.3% in London, 5.8% in England).
- 4.4% report not feeling like actions are worthwhile (4.2% in London, 4.4% in England).



Voter turnout in Lambeth; 2010

Voter turnout is an indicator of community engagement with those with higher levels of wellbeing being more likely to engage. Voter turnout was 57.5% in Lambeth compared to 63.1% across London boroughs and 65.1% across the UK (% of registered electorate).

Environment and Community

Red Red Red Red Amber Amber Amber Amber Amber Amber

White

Noise

29.3 per 1000 noise complaints [8925 complaints](16.4 in London, 7.5 in England.

Crime

- 86.9 per 100,000 Hospital admissions for violence (57.7 in London, 57.6 in England.

Green Space

- 12.2% use outdoor space for exercise or health reasons (10.5% in London, 15.3% in England.

Social Isolation

- 39.4% of adult carers report having as much social contact as they would like (36.5% in London, 41.3% in England).
- 39.8% of adult social care users report having as much social contact as they would like (39.8% in London, 43.2% in England).

Education and economy

Amber Red Green White Amber Green Red Red Red Red

Qualifications

- 62.0% achieved 5 A* C grades at GCSE (61.3% in London, 58.4% in England; 2011/12).
- 6.4% of 16-64 year olds have no qualifications (7.8% in London, 9.3% in the UK; 2013).
- 4.7% unauthorised pupil absence [383,202 half days missed](4.8% in London, 5.1% in England.

Income deprivation

- 31.6% of children live in deprivation [17400 children] (26.5% in London, 20.6% in England.
- 6.1% of children live in households with no adults in work [7950 children] (5.7% in London, 4.2% in England; 2011).

[†]Red indicates scores worse than London, green indicates scores which are better, amber indicates equivalent scores, and white indicates scores where comparable data is unavailable††.

References

- 1. Government Office for Science (2008). Mental Capital and Wellbeing: Making the most of ourselves in the 21st century. The Government Office for Science; London.
- 2. Lambeth First (2009), Wellbeing and Happiness Programme: The Lambeth mental wellbeing programme 2009-2012
- 3. New Economic Foundation (2012). Measuring Well-being. A guide for practitioners. NEF; London.
- 4. NatCen (2013). Predicting wellbeing. DH, London.
- 5. ONS (2013a). Statistical Bulleting. Personal Wellbeing in the UK, 2012/2013. ONS; London.
- 6. ONS (2013b). Measuring National Well-being-Review of domains and measures, 2013. ONS; London.
- 7. Greater London Authority (2013) London Ward Well-being Scores. GLA; London.
- 8. Tennant, R., Hiller, L., Fishwick, R., Platt, S., Joseph, S. et al. 2007. The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation. Health and Quality of Life Outcomes, 3, 63.
- 9. DH (2010). Confident Communities, Brighter Futures. A framework for developing wellbeing. DH, London.

Data Sources

National Centre for Social Research

Greater London Authority (data store)

Public Health Outcomes Framework

Public Health Observatory (APHO)

Department for Education

Neighbourhood Statistics

Nomisweb

FURTHER INFORMATION & FEEDBACK

This factsheet has been created by Lambeth & Southwark's Public Health Intelligence Team.

Email: JSNA@southwark.gov.uk Tel: 02075255000

We welcome your comments on these factsheets and how they could better suit your requirements, please do contact us with your ideas.

^{*}Some ONS wellbeing measures available at local level have been omitted for brevity as the data have already been published in accompanying JSNA factsheets.

^{††}Red indicates scores worse than London, green indicates scores which are better, amber indicates equivalent scores, and white indicates scores where comparable data is unavailable. These ratings where not available from the Public Health Outcomes Framework have been calculated by looking at confidence intervals to calculate significant difference.