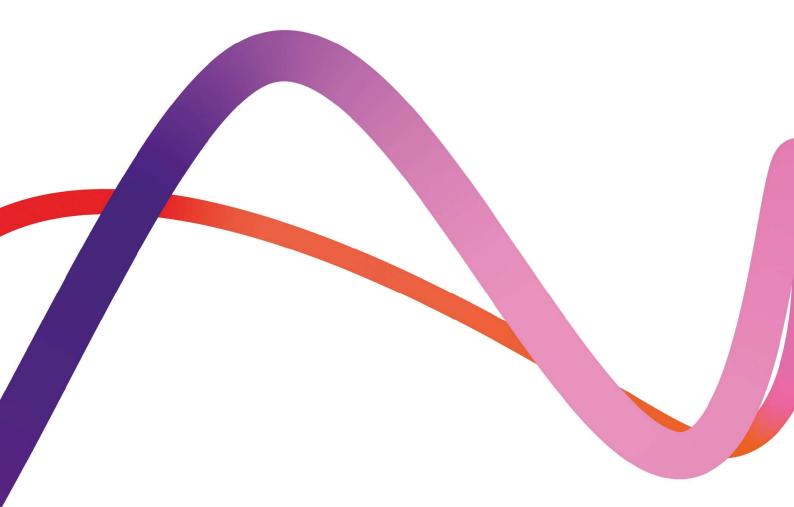
Canford Energy from Waste Combined Heat and Power Facility





Environmental Statement Technical Appendix 14.1

Population and Human Health Baseline

February 2023

We inspire with energy.

Appendix 14.1: Health Baseline Dashboard for Canford EfW

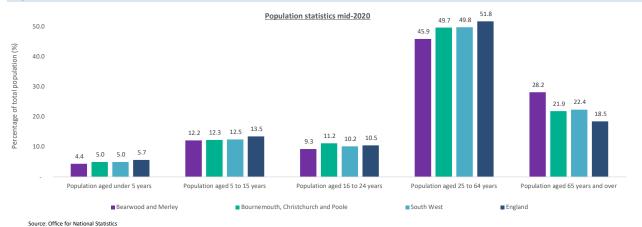
Introduction

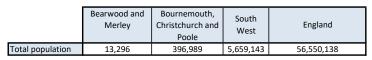
Communities have varying susceptibilities to health impacts and/or benefits as a result of differing demographic structure, physical and mental health, lifestyle and behavioural risk factors and socio-economic circumstances.

The aim of this health baseline is to put into context the local health and socio-economic circumstance of the communities surrounding the proposed development at Canford Resource Park.

The study area comprises the Unitary Authority ward of Bearwood and Merley, which is situated within the Unitary Authority of Bournemouth, Christchurch and Poole in the South West region. Available data for regional (South West), national (England) and the Unitary Authority of Bournemouth, Christchurch and Poole have been used as relevant comparators against Bearwood and Merley. Where data was unavailable for Bearwood and Merley, data from Bournemouth, Christchurch and Poole have been used as a relevant proxy.

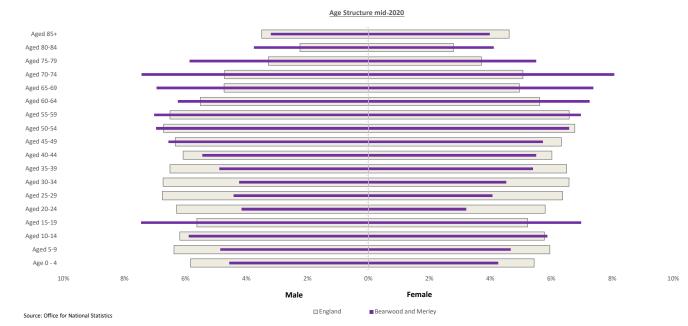
Population





Source: Office for National Statistics

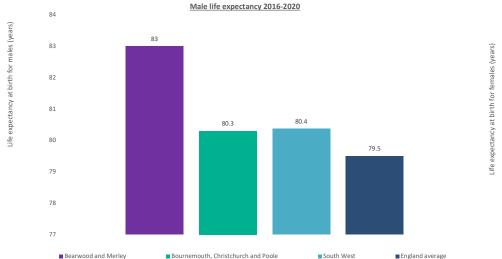
The graph to the left shows the distribution of different age groups as a percentage of the total population. Compared with Bournemouth, Chirstchurch and Poole, and the regional and national data, in mid-2020 Bearwood and Merley had a lower percentage of people in all age categories except for the population aged 65 years and older; meaning Bearwood and Merley have a comparably older population.

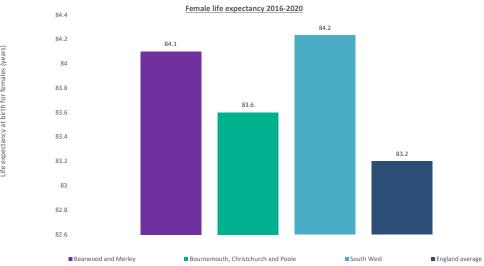


The age structure breaks down the demographic into age categories and gender. Once again, it is shown that the demographic trend was relatively elderly in mid-2020, with higher proportions of 55-84 year olds compared to England. Conversely, Bearwood and Merley had a lower proportion of of 20-44 year olds compared to the national average.

Life expectancy

In the years 2016-20, Bearwood and Merley had a higher life expectancy for males (83 years) compared to Bournemouth, Christchurch and Poole, the South West and the England average. Bearwood and Merley also had a higher female life expectancy (84.1 years) compared to Bournemouth, Christchurch and Poole and the England average, however this was marginally lower when compared to the South West (84.2 years).



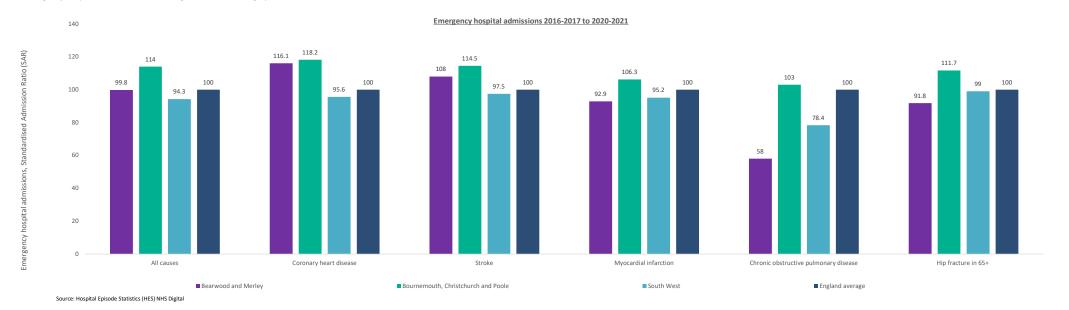


Source: Office for Health Improvement and Disparities Local Health

Source: Office for Health Improvement and Disparities Local Health

Physical health

The following graph shows the emergency hospital admissions from 2016-2017 to 2020-2021 for a range of illnesses and injuries. Emergency hospital admissions for all causes, coronary heart disease and stroke were higher in Bearwood and Merley when compared to the South West. When compared to the England average, Bearwood and Merley also had more emergency hospital admissions for coronary heart disease and stroke. For myocardinal infarction, chronic obstructive pulmonary disease and hip fractures in those aged 65+,
Bearwood and Merley had the lowest number of emergency hospital admissions when compared to Bournemouth, Christchurch and Poole, the South West and the England averages. The Unitary Authority of Bournemouth, Christchurch and Poole had the highest number of emergency hospital admissions for all categories in the below graph.

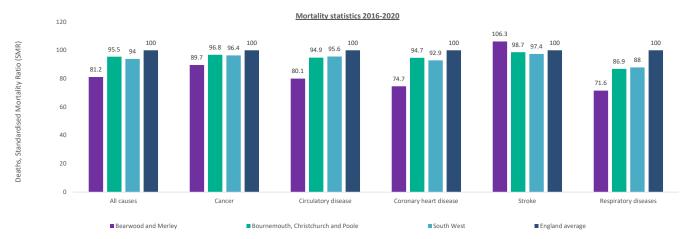


	Bearwood and Merley	Bournemouth, Christchurch and Poole	South West	England
Incidence of all cancer, Standardised Incidence Ratio (SIR per 100)	99.7	101.9	99.6	100

Not significantly different than the England average
Significantly worse than the England average

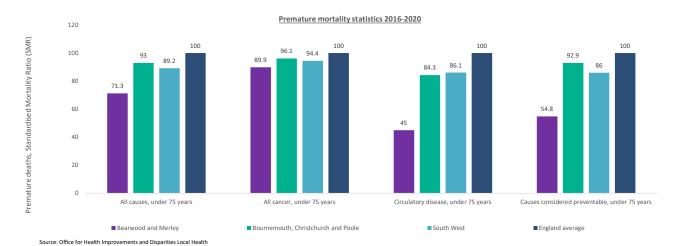
Source: English cancer registration data from the NHS Digital Cancer Analysis System

From 2015-2019, Bearwood and Merley had a lower incidence of all cancer (SIR per 100) compared to Bournemouth, Christchurch and Poole and the England average, but had a marginally higher incidence of all cancer in comparison to the South West.



Bearwoord and Merley had lower mortality from all causes, cancer, circulatory disease, coronary heart disease and respiratory diseases compared to the Unitary Authority, the regional and the national averages from 2016-2020.





Premature mortality from all causes, cancer, circulatory disease and causes considered preventable were lower for Bearwood and Merley in comparison with Bournemouth, Christchurch and Poole, the South West and England. However, mortality from stroke was highest in Bearwood and Merley when compared with the three comparators.

	Bearwood and Merley	Bournemouth, Christchurch and Poole	South West	England average	Significantly worse than the England average	
Hospital stays for self-harm (SAR)	141.2	174.9	138	100	Source: Hospital Episode Statistics (HES) NHS Digital	
Suicide rate (per 100,000 population)	n/a	12.4	11.6	10.4	Source: Office for Health Improvement and Disparities Local Health	

From 2016-2017 to 2020-2021, hospital stays for self-harm were significantly higher, and therefore significantly worse, than the England average for Bearwood and Merley. They were also higher than the South West average, but lower than the Unitary Authority of Bournemouth, Christchurch and Poole.

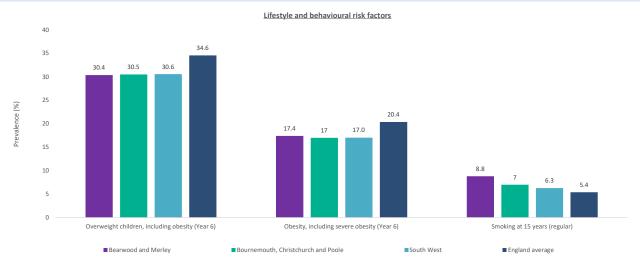
Bearwood and Merley do not have data for suicide rate and therefore Bournemouth, Christchurch and Poole is used as a representative proxy. From 2018-2020, the Unitary Authority had a higher suicide rate per 100,000 of the population compared to both the South West and England averages.

Lifestyle

Lifestyle factors play a large role in preventing or intensifying physical health risks.

From 2017-2018 to 2019-2020, the prevalence of overweight children, including obesity, in year 6 was lower in Bearwood and Merley than Bournemouth, Christchurch and Poole, the South West and the England average. However, the prevalence of overweight children, including severe obesity, in year 6 was higher in Bearwood and Merley than the Unitary Authority and regional data, but still lower than the national average.

In 2014, the prevalence of regular smoking at 15 years old was higher in Bearwood and Merley than the other three comparators.



Source: National Child Measurement Programme (NCMP), NHS Digital; Office for National Statistics

	Bearwood and Merley	Bournemouth, Christchurch and Poole	South West	England average
Hospital stays for alcohol-related harm, narrow definition (new method) (per 100,000 population)	n/a	591	474	456
Percentage of adults classified as overweight or obese (%)	n/a	63.9	61.9	63.5
Percentage of physically active adults (%)	n/a	70	70.5	65.9

Significantly better than the England average
Not significantly different than the England average
Significantly worse than the England average

For the information in the table on the left, data for Bearwood and Merley was not available. Therefore, the data for Bournemouth, Christchurch and Poole will be used as a representative proxy.

From 2020-21, Bournemouth Christchurch and Poole had a higher number of hospital stays for alcohol-related harm per 100,000 of the population when compared to both the South West and the England average.

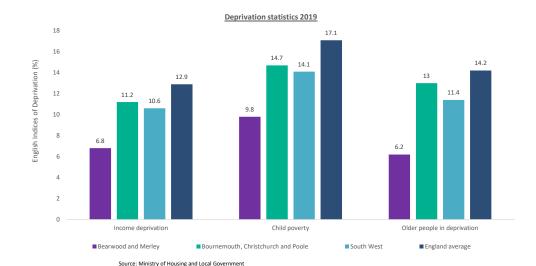
The Unitary Authority had a higher percentage of adults who are classified as overweigt or obese compared to the regional and national averages.

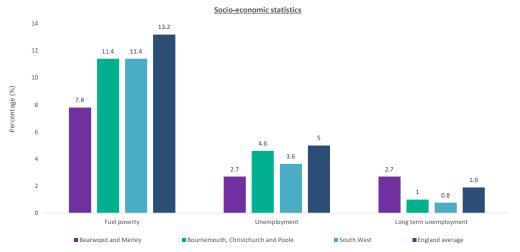
Deprivation and socio-economic circumstance

The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation in England. In 2019, Bearwood and Merley had a lower IMD score compared to Bournemouth, Christchurch and Poole, the South West and the England average; thus it is not considered to be as deprived as the three comparators.

	Bearwood and Merley	Bournemouth, Christchurch and Poole	South West	England average
Index of Multiple Deprivation (IMD) score	11.7	18.2	18.1	21.7

Source: Ministry of Housing and Local Government





Source: NOMIS Labour Market Statistics; Department for Business, Energy and Industrial Strategy

Bearwood and Merley scored the lowest on the English Indices of Deprivation for income deprivation, child poverty and older people in deprivation compared to Bournemouth, Christchurch and Poole, the South West and the England average. Child poverty measures the proportion of children aged 0-15 years living in income-deprived families, whilst older people in deprivation is defined as adults aged 60 or older living in income-deprived households as a percentage of all adults aged 60 or over.

In 2020, Bearwood and Merley also had the lowest percentage of people in fuel poverty and in 2021-22, had the lowest percentage of people who were unemployed compared to the three comparators. However, in 2021-22, Bearwood and Merley had the highest percentage of people in long term unemployment compared to the Unitary Authority, the regional and national data. Unemployment is defined as the percentage of working age population claiming out of work benefit, and long term unemployment defined as the rate per 1,000 working age population.

Conclusion

Overall, the population of Bearwood and Merley are relatively elderly with a higher life expectancy for both males and females than the Unitary Authority and national average.

The Ward performs better than the Unitary Authority for all physical health categories; better than the Unitary Authority and England for incidence of all cancer; and better than the Unitary Authority, the South West and England for mortality and premature mortality; thus showing the population of Bearwood and Merley to be relatively healthy in comparison.

Bearwood and Merley also perform better than the national average for the majority of lifestyle indicators, and score the lowest for all deprivation indicators (except long-term unemployment), showing the ward to be less deprived than the three comparators.

However, mental health indicators show Bearwood and Merley to be below the regional and national averages, with more hospital stays for self-harm and a higher suicide rate (although Bournemouth, Christchurch and Poole was used as a proxy for this indicator). On this basis, individuals could be more vulnerable to changes to the environment and so this should be taken into consideration with the proposed development.

