



Isle of Wight JSNA work programme



JSNA - Overview

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Current JSNA

The JSNA work programme was temporarily placed on hold due to additional COVID-19 work but restarted in January 2022. A number of data reports and products are now available. The Isle of Wight Council's web development programme is ongoing. In the interim, this page will act as a place holder to provide the JSNA resources.

The Isle of Wight Public Health Intelligence Team works jointly with the Hampshire team. This means some of the data resources will be available via the [Hampshire County Council JSNA landing page](#).

The JSNA is structured on the [ONS Health Index domains](#). It provides a resource with a written high-level summary and [PowerBI data report](#). Which enables data to be analysed at smaller geographies, where data is available, such as GP, PCN, MSOA and LSOA.

[JSNA - Overview - Service Details \(iow.gov.uk\)](#)

Structured on the [ONS Health Index domains](#) and provides as a resource with a written high-level summary and PowerBI data report which enables data to be analysed at smaller geographies such as GP, PCN, LSOA, District.

Completed reports

COVID-19 Health Impact Assessment – a retrospective view of the first two waves of the pandemic and what has meant to our local populations, reviews national guidance and policy to date and what the potential impacts have been and will be on our populations.

JSNA Demography -This chapter focuses on the age structure of our population and future projections and the socio demographic and protected characteristics of our population.

JSNA Vital Statistics - This chapter provides births and deaths data and trends analysis

JSNA Healthy Places - This chapter focuses on the social and commercial drivers for health – includes district reports

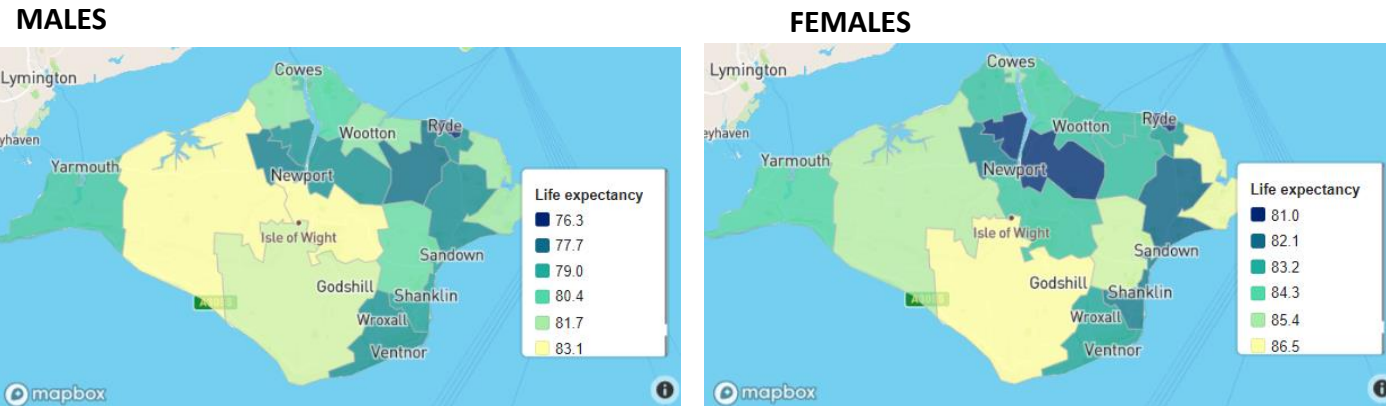
JSNA Inclusion Health Groups- This chapter considers inclusion health groups across Hampshire and Isle of Wight and where possible aims to quantify these communities in our population, where they live, their demographics and describe the potential health outcomes and challenges they may face - – includes district summary

JSNA Healthy Lives - This chapter focuses on risk factors including behavioural risk factors and the wider determinants of health.

JSNA Healthy People - This chapter focuses on the health outcomes of our population and the health inequalities which are evident.

How healthy were the population of Isle of Wight before the pandemic?

Life expectancy at birth by Middle Super Output Area, 2015 to 2019

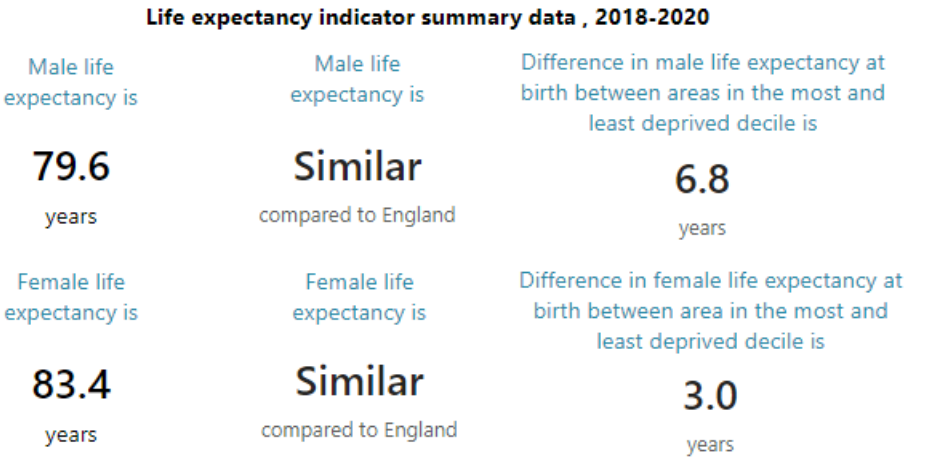
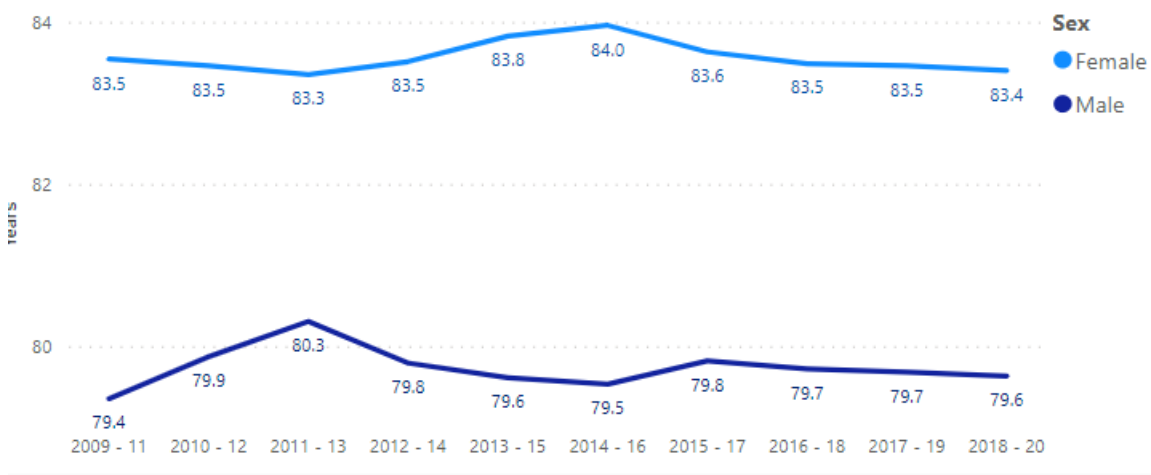


Life expectancy shows the overall trends in major population health measures which can set the context in which local authorities can assess the other indicators and identify the drivers of inequalities.

Life expectancy (all age) is similar on the Isle of Wight when compared to England however, improvements have been slowing and for the more deprived areas and females, life expectancy estimates have been worsening.

Small area estimates, shown in the map, also suggest variation in life expectancy across the island with lower estimates suggested in the area around Newport

Life expectancy at birth



Data source: JSNA Demography

Right now, people in our poorest neighbourhoods are dying much earlier than people in the wealthiest areas. When we don't have what we need to heat our homes, buy healthy food and are constantly worrying about making ends meet, it can lead to chronic stress, poor health and lives being cut short.



Opportunities

Isle of Wight residents are much older however their overall population health may be good. Trend data for life expectancy and healthy life expectancy of people aged 65 years are comparable to or statistically better than England.

However, we know that people of all ages who live in poorer areas die earlier and live in poorer health than those living in wealthier areas and areas, such as Newport, Pan and Ryde. These areas should continue to be focused on capitalising on the assets such as the strong community spirit.

History has demonstrated changes in infrastructure, housing provision, jobs many of these trends are reflected nationally. Legacies of this time such as old railway line footpath networks, gardens are assets to the island and positively promote and enhance tourism.

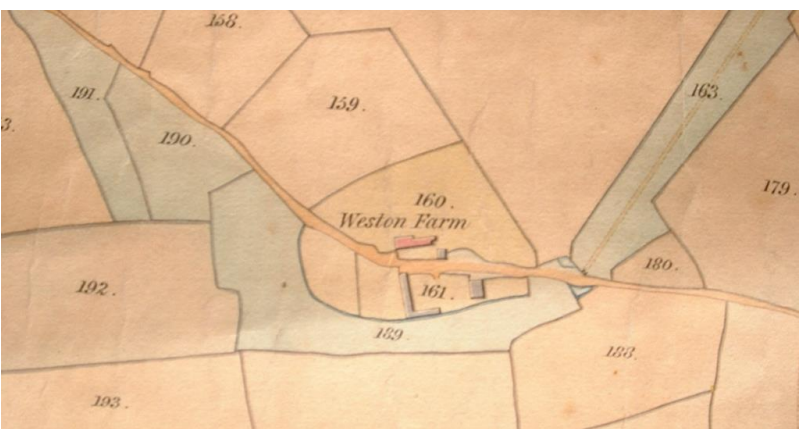
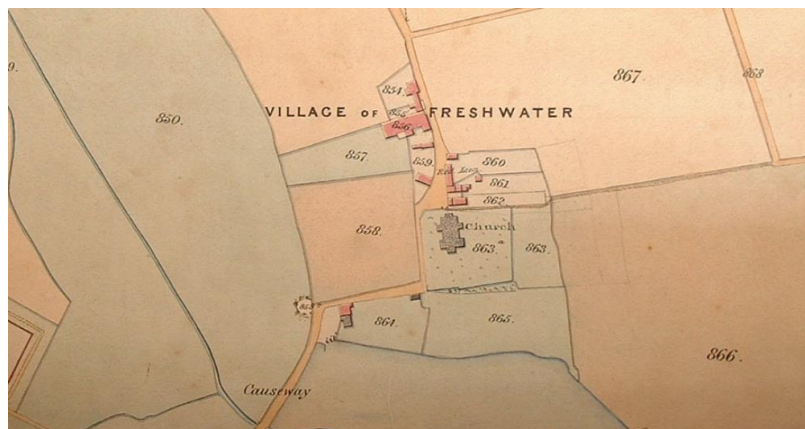
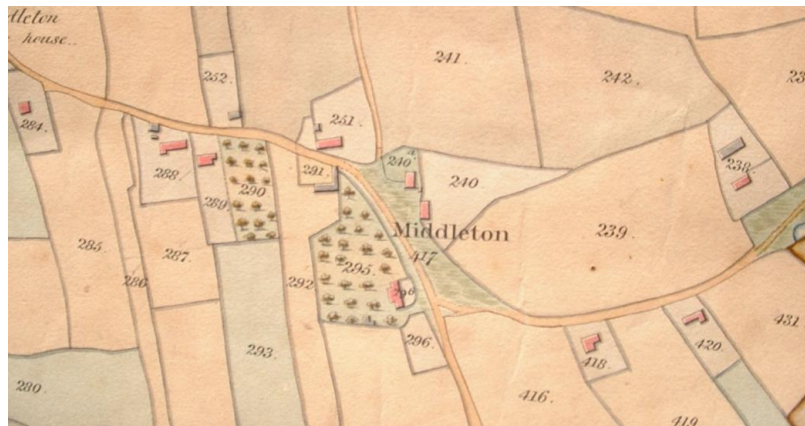
Geography approximately one half of the Island lies within an Area of Outstanding Natural Beauty (AONB); Designated a UNESCO Biosphere Reserve

Focussing on our surroundings to promote positive mental wellbeing, social connectivity and inclusion will further enrich our older population's lives. **Recognising and respecting people's choices** providing alternatives for those who do not wish engage with the internet or online services will enable a more inclusive quality of care and social connectiveness.

Air quality on the Isle of Wight is good, enabling good respiratory health.

Tourism industry provide job opportunities and experiences for local people but are seasonal and were vulnerable during the pandemic. **Year-Round Destination** is a sustainable approach and will reduce the vulnerabilities in this job market

Four Anchor institutions: IOW Council, IOW College, HMP Isle of Wight and St Mary's Trust. These are sizeable assets which are rooted in our communities and can be used to support local community's health and wellbeing, providing good quality employment and training opportunities for local people



Isle of Wight Population over the history of time

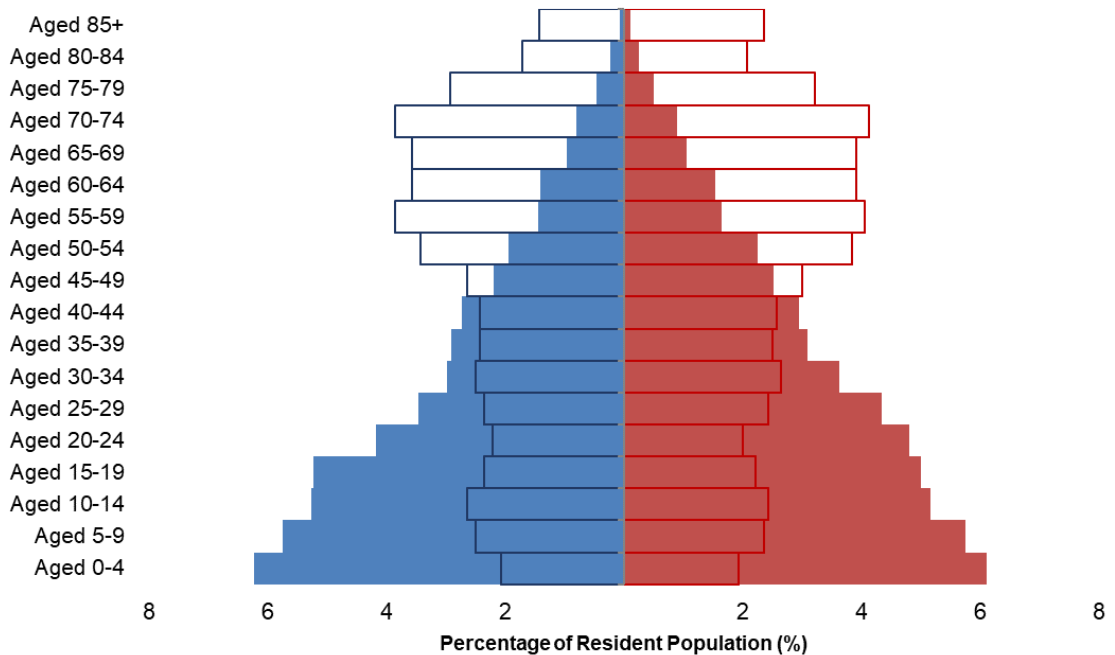
Maps from the Tithe Commutation Act 1836 to present day



Census over time 1861 to 2021: 160 years of population change

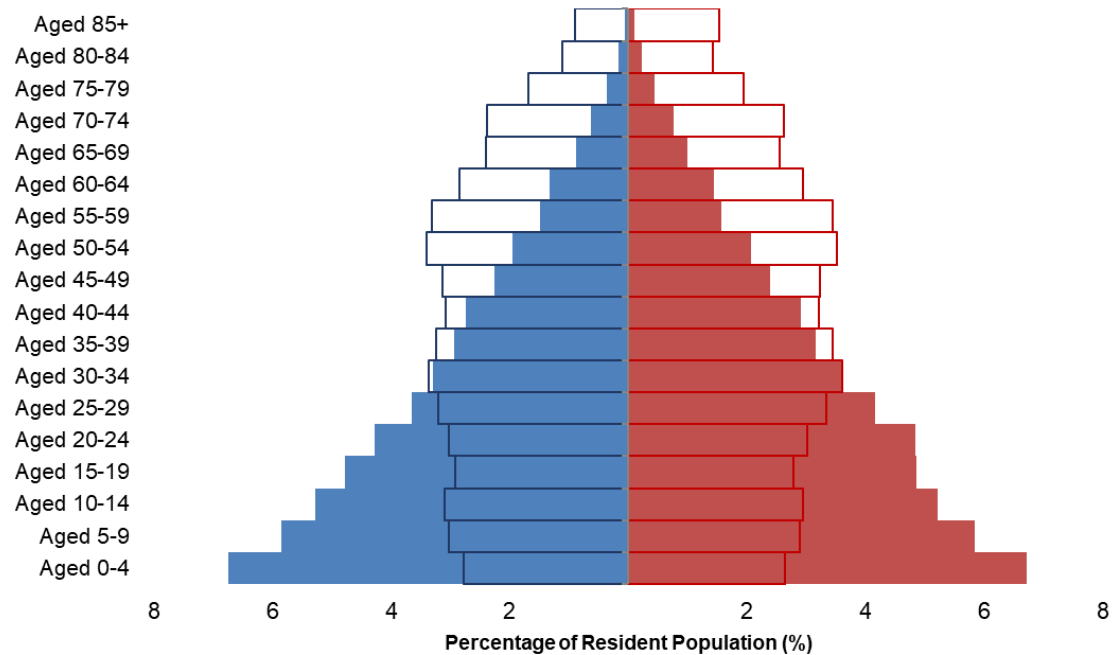


Isle of Wight Council estimated resident 1861 compared to 2021 by sex.



Isle of Wight Females 2021 Isle of Wight Males 2021
Isle of Wight Females 1861 Isle of Wight Males 1861

England & Wales estimated resident 1861 compared to 2021 by sex.



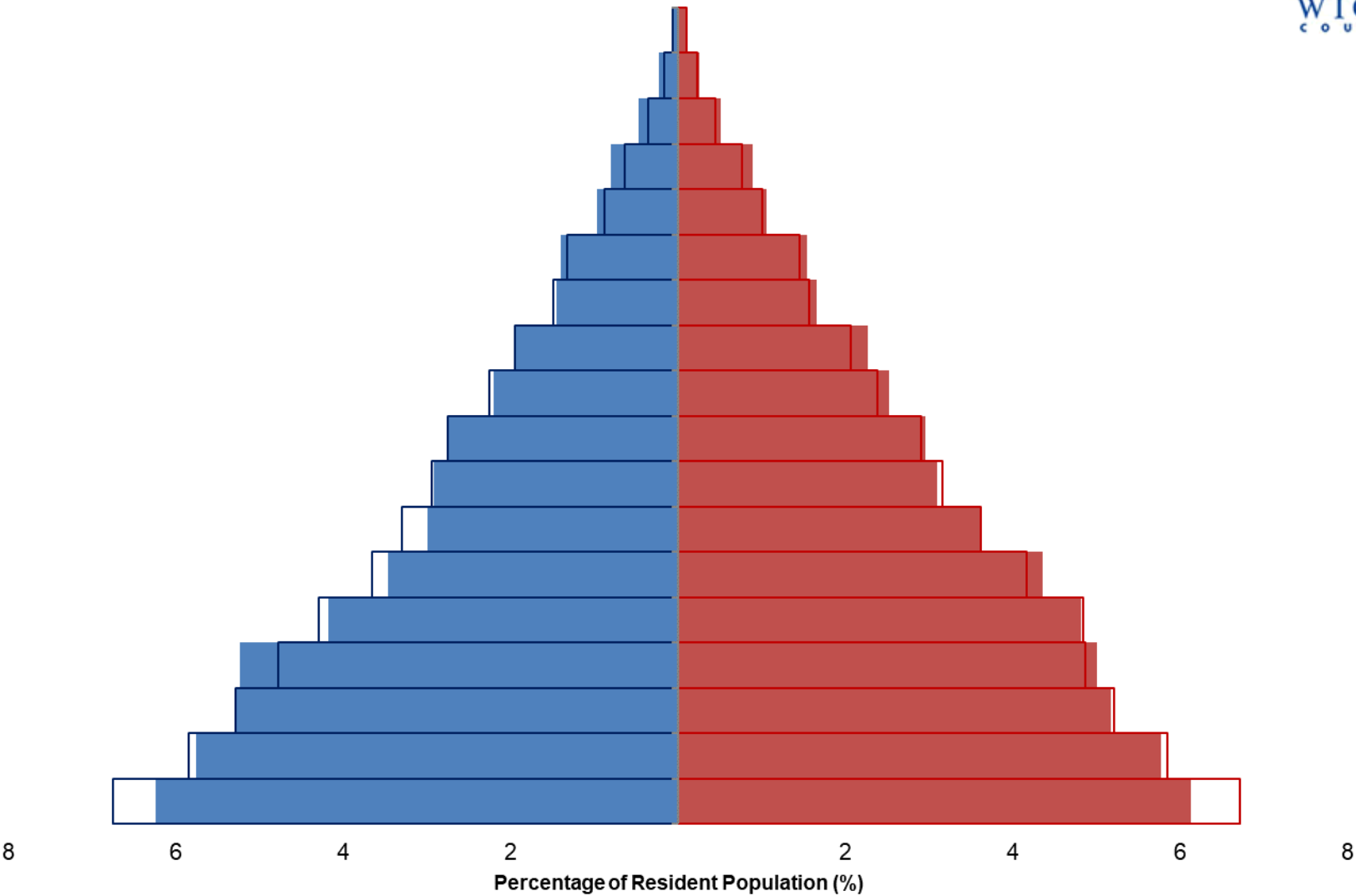
England & Wales Females 2021 England & Wales Males 2021
England & Wales Females 1861 England & Wales Males 1861

Isle of Wight and England & Wales have a similar ageing population structure however the charts illustrate the significantly older proportion of older people on the Isle of Wight compared England & Wales

1861 Census



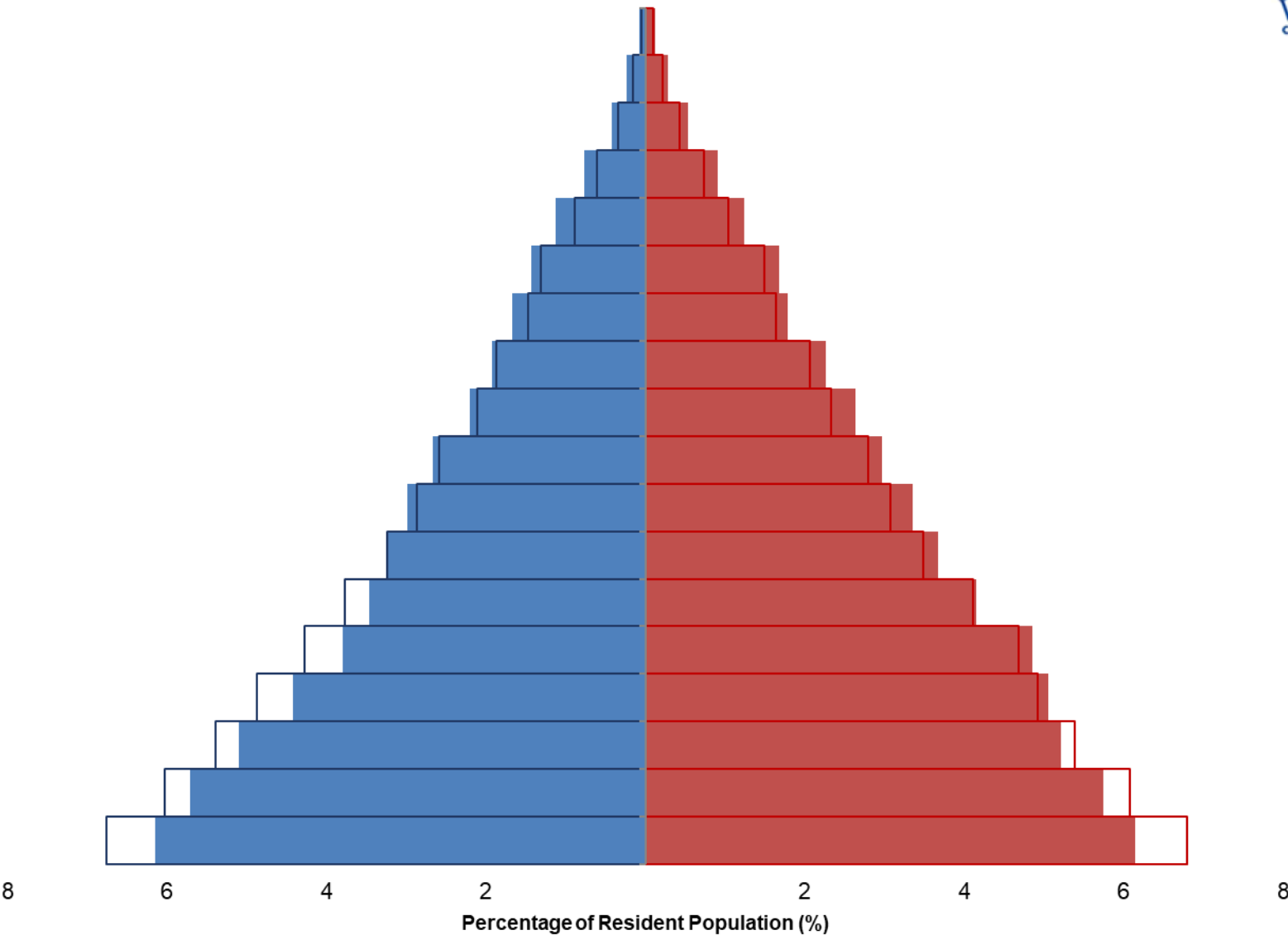
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1881 Census



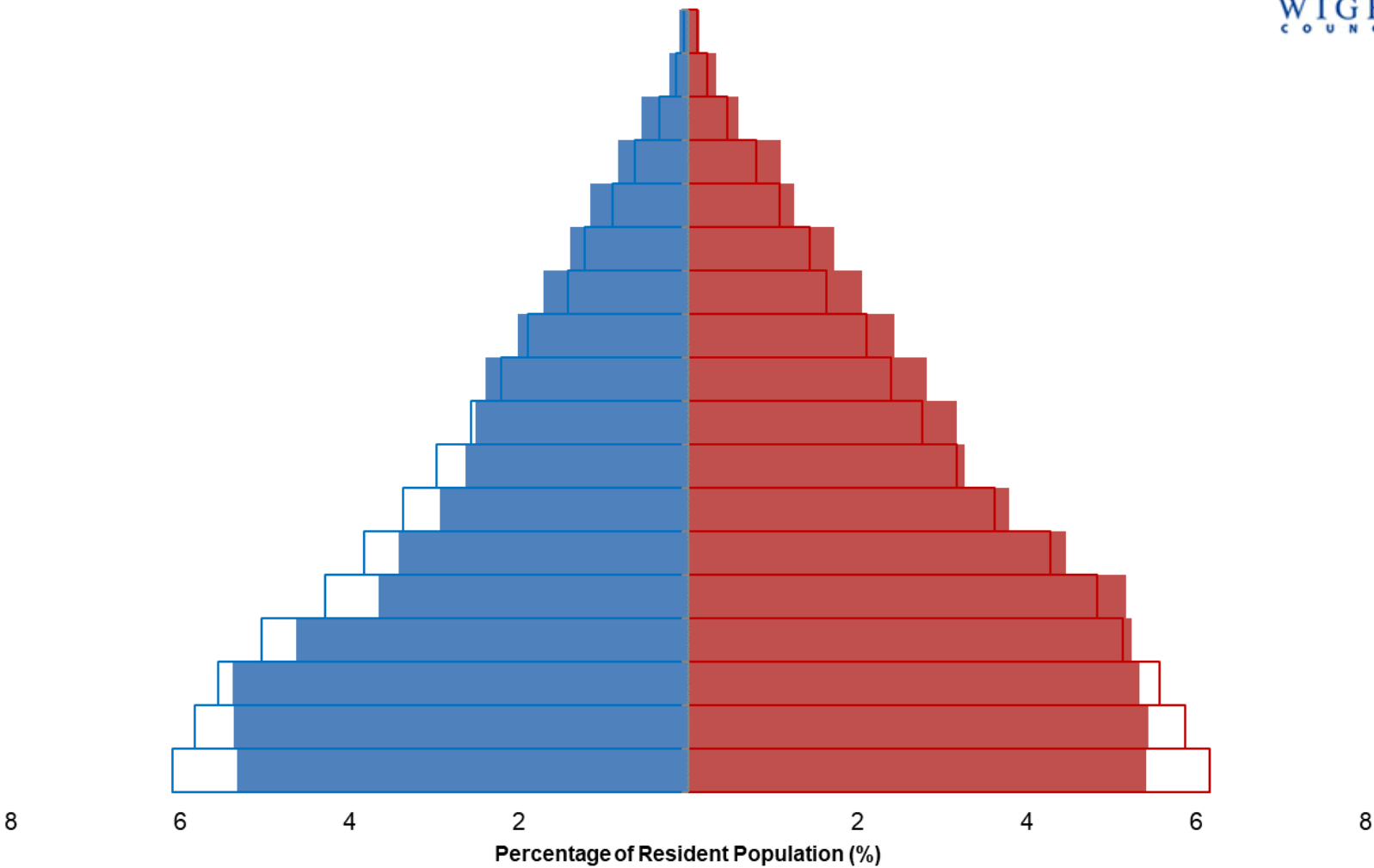
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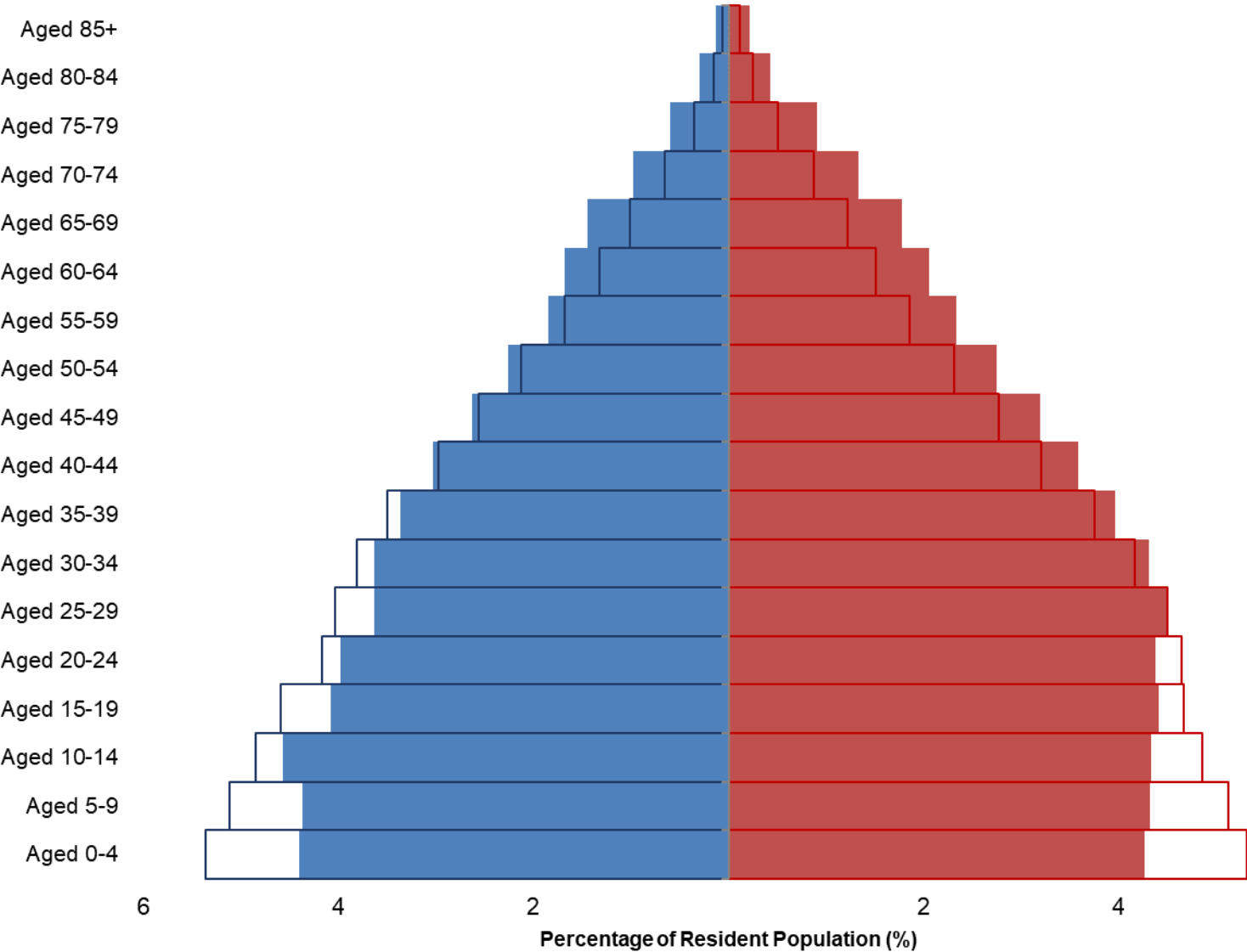
1891 Census



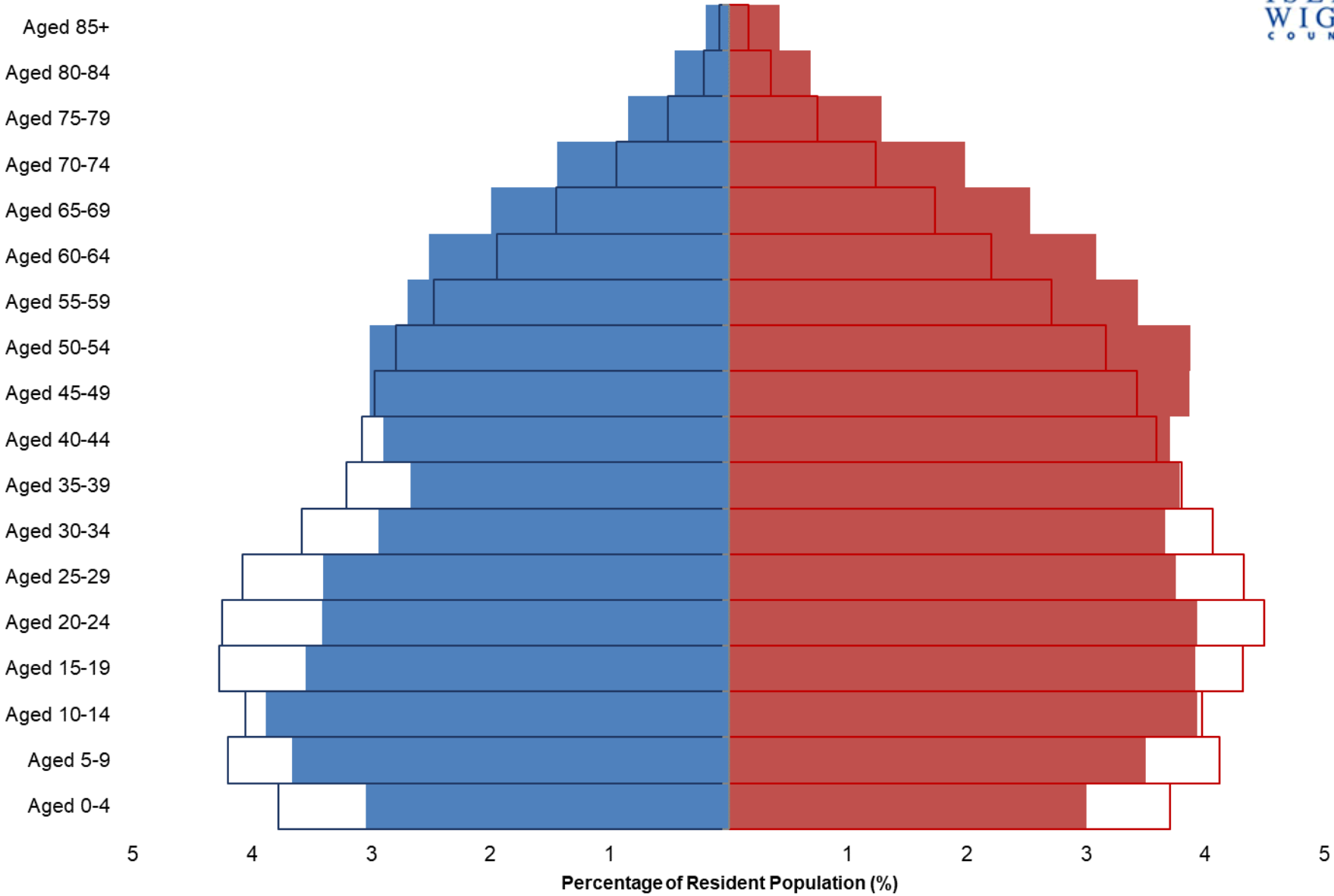
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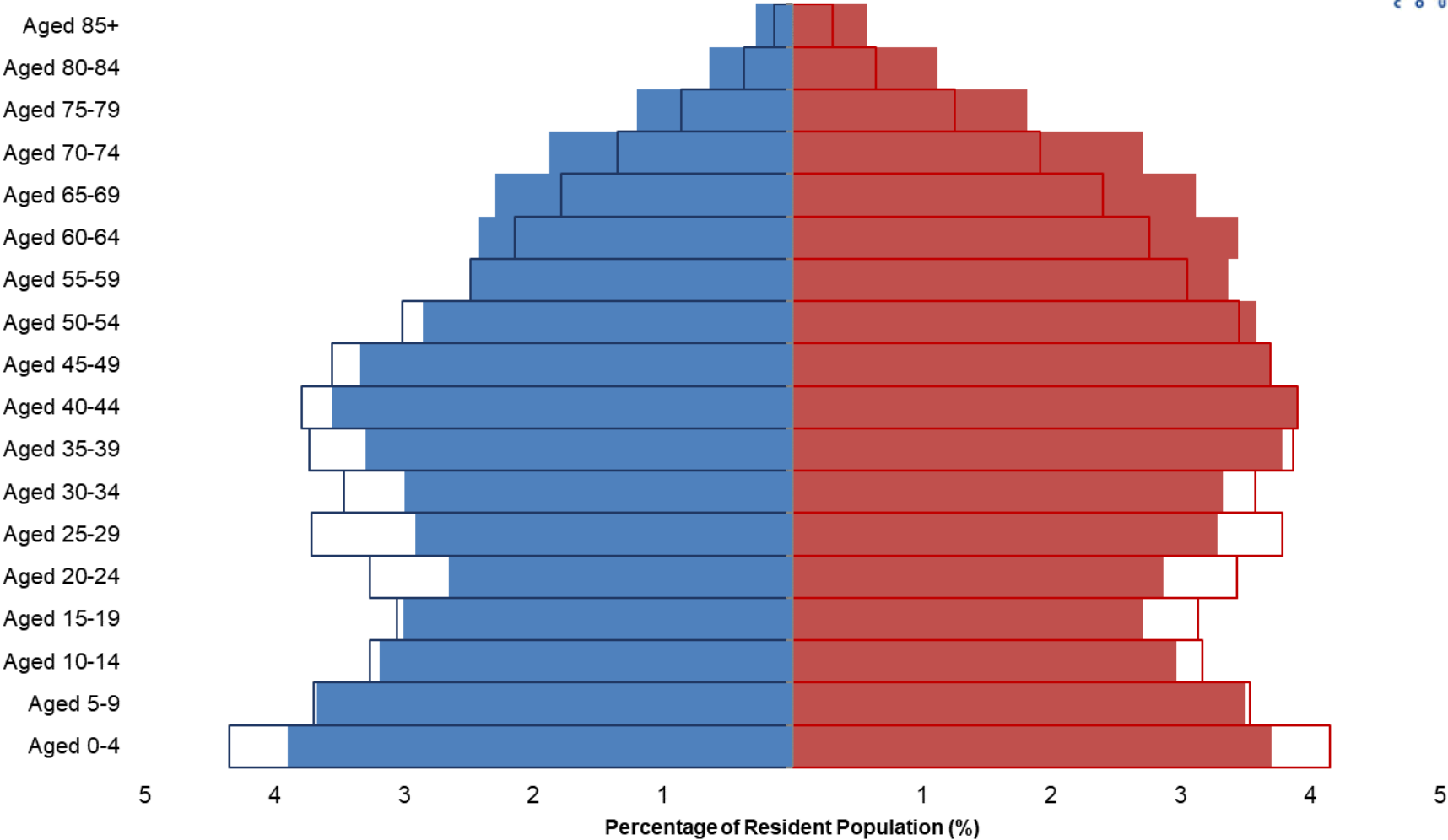
1911 Census



1931 Census



1951 Census



1961 Census



Aged 85+

Aged 80-84

Aged 75-79

Aged 70-74

Aged 65-69

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Aged 50-54

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Aged 40-44

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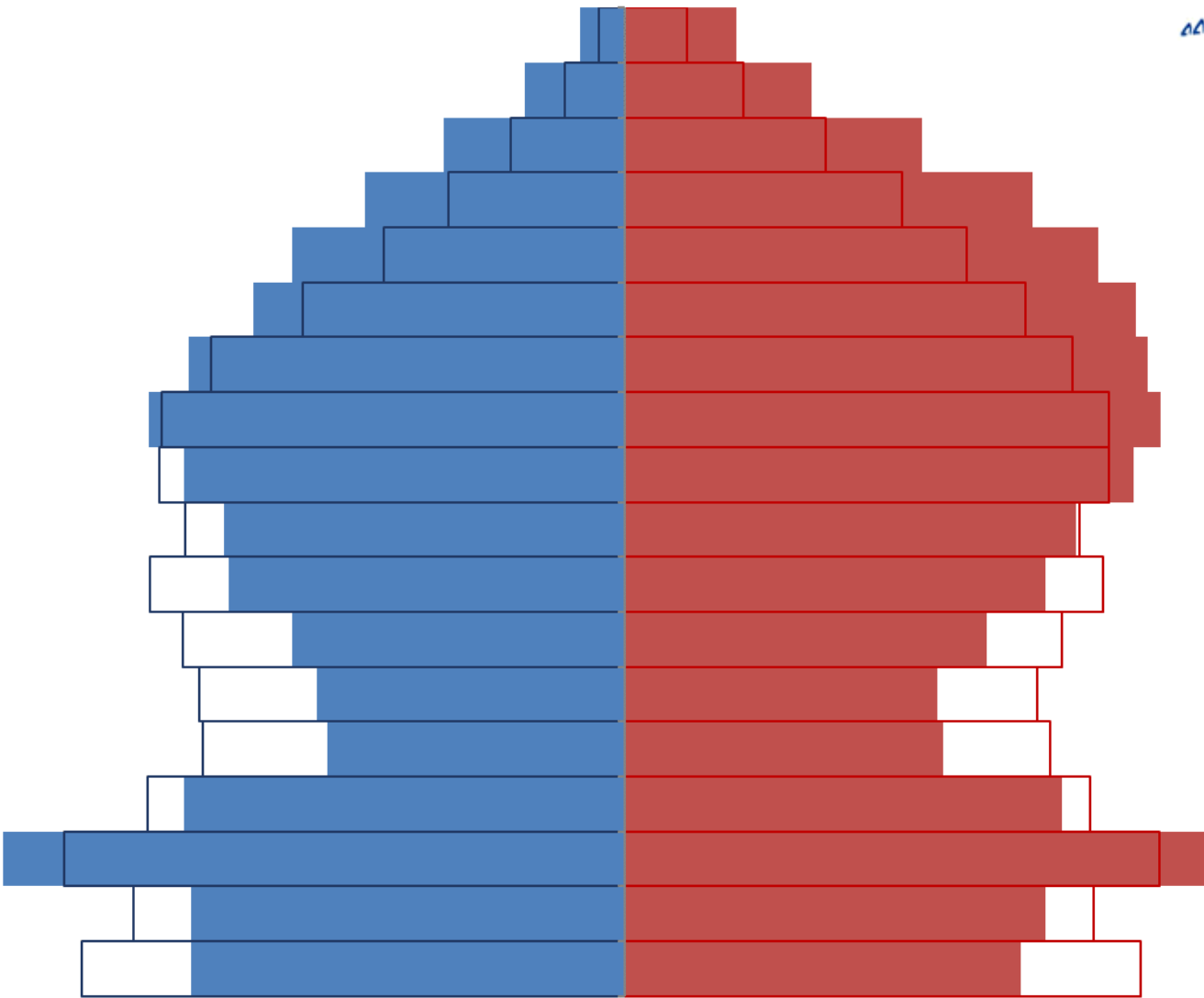
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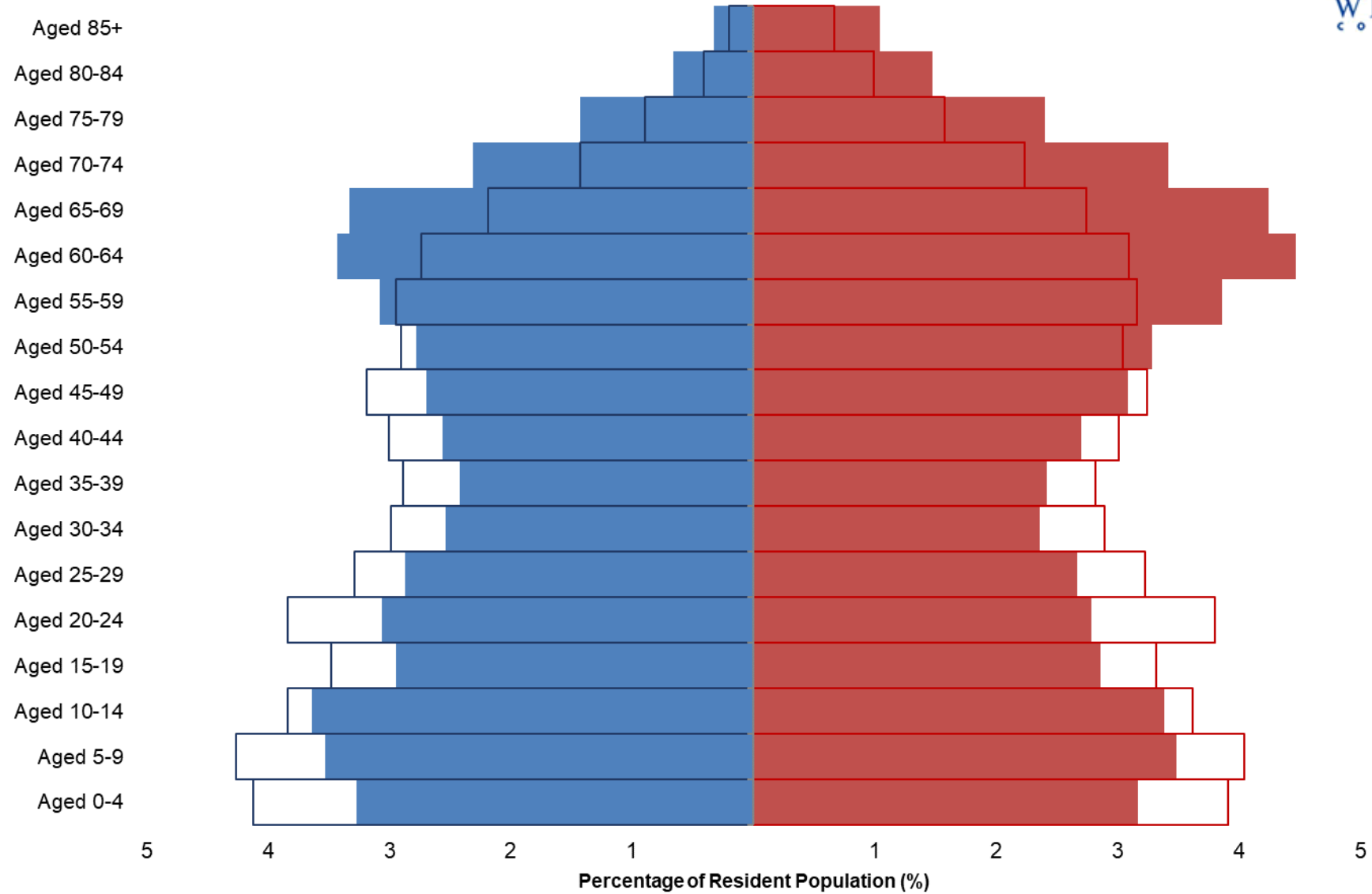
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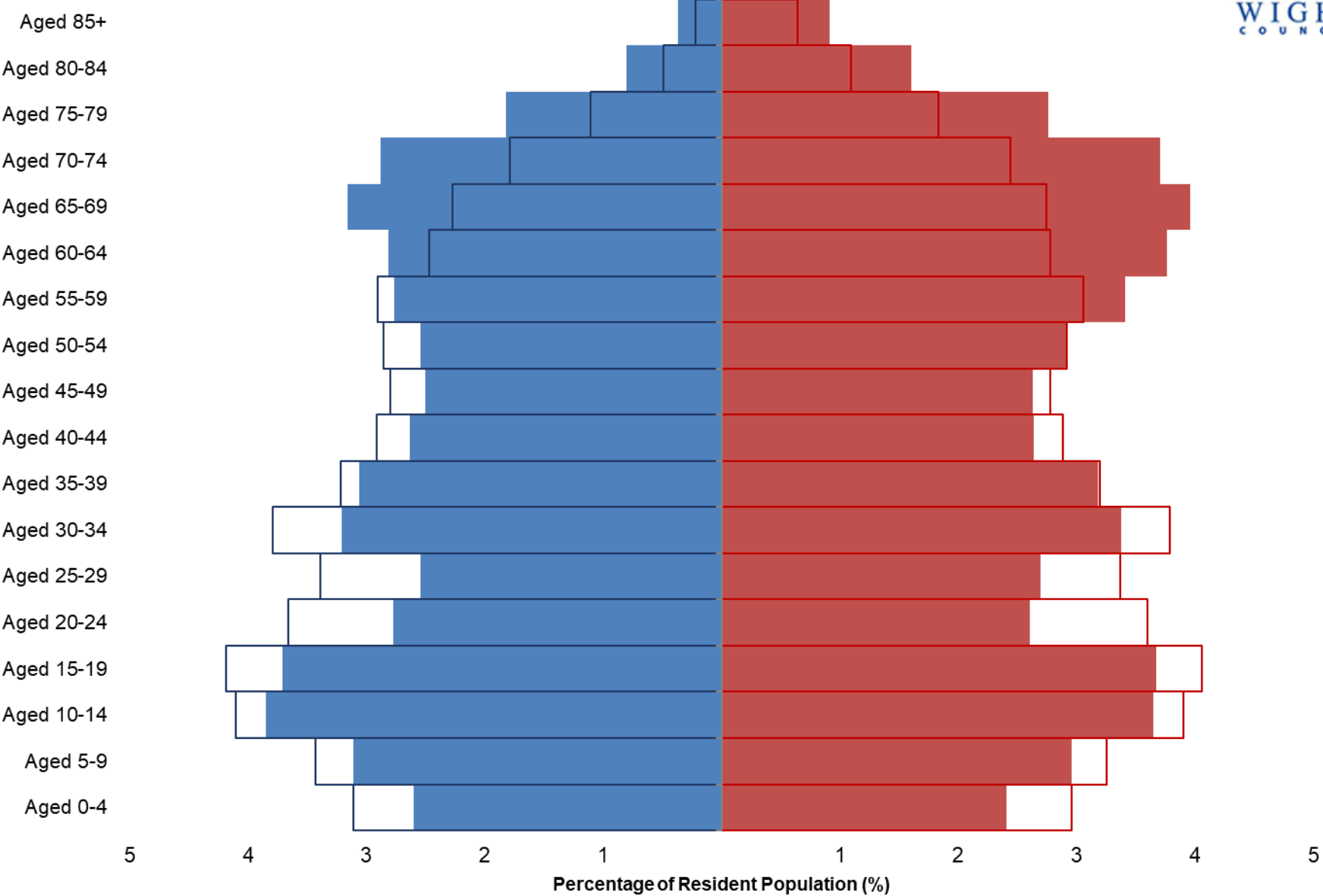
Percentage of Resident Population (%)



1971 Census



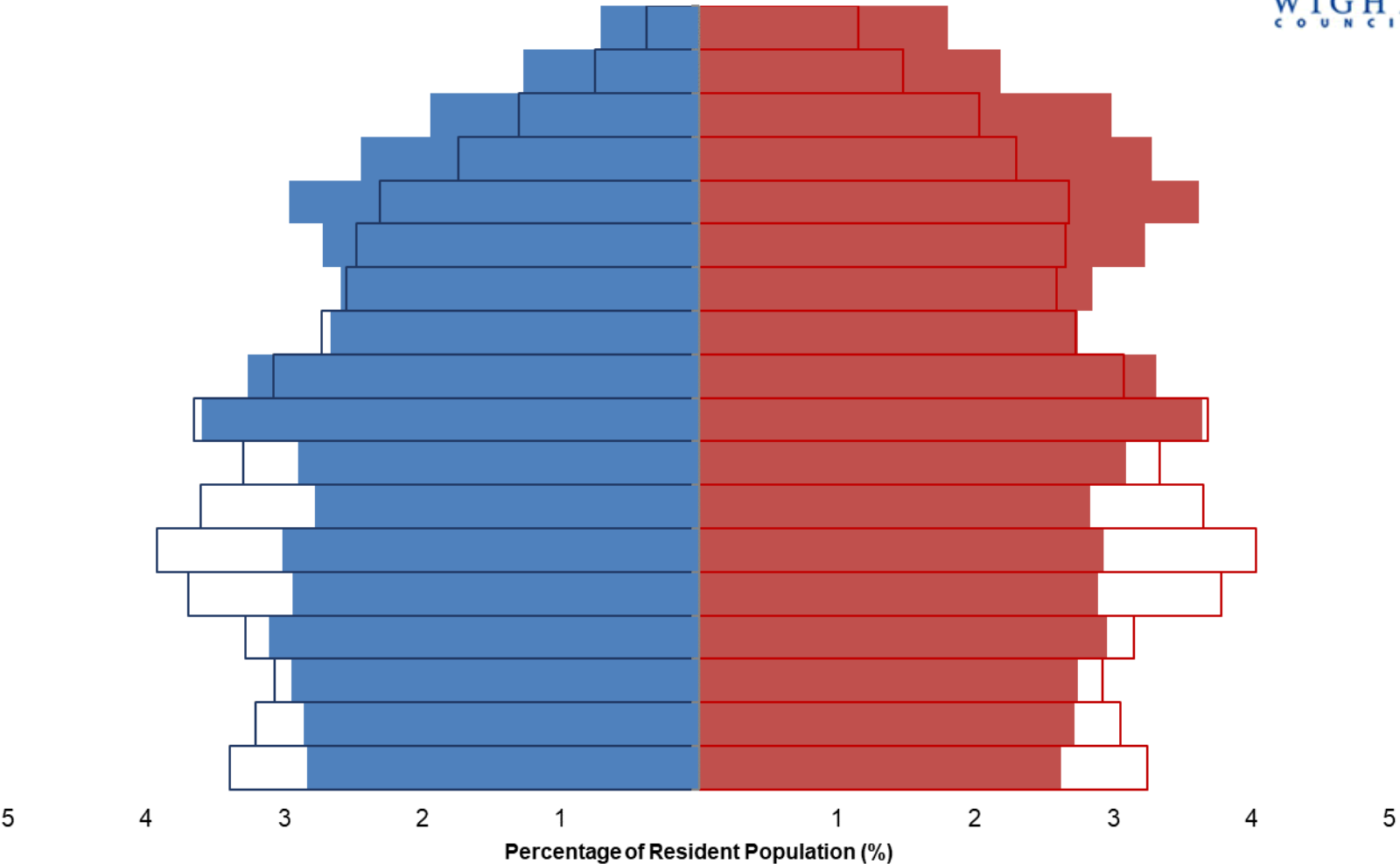
1981 Census



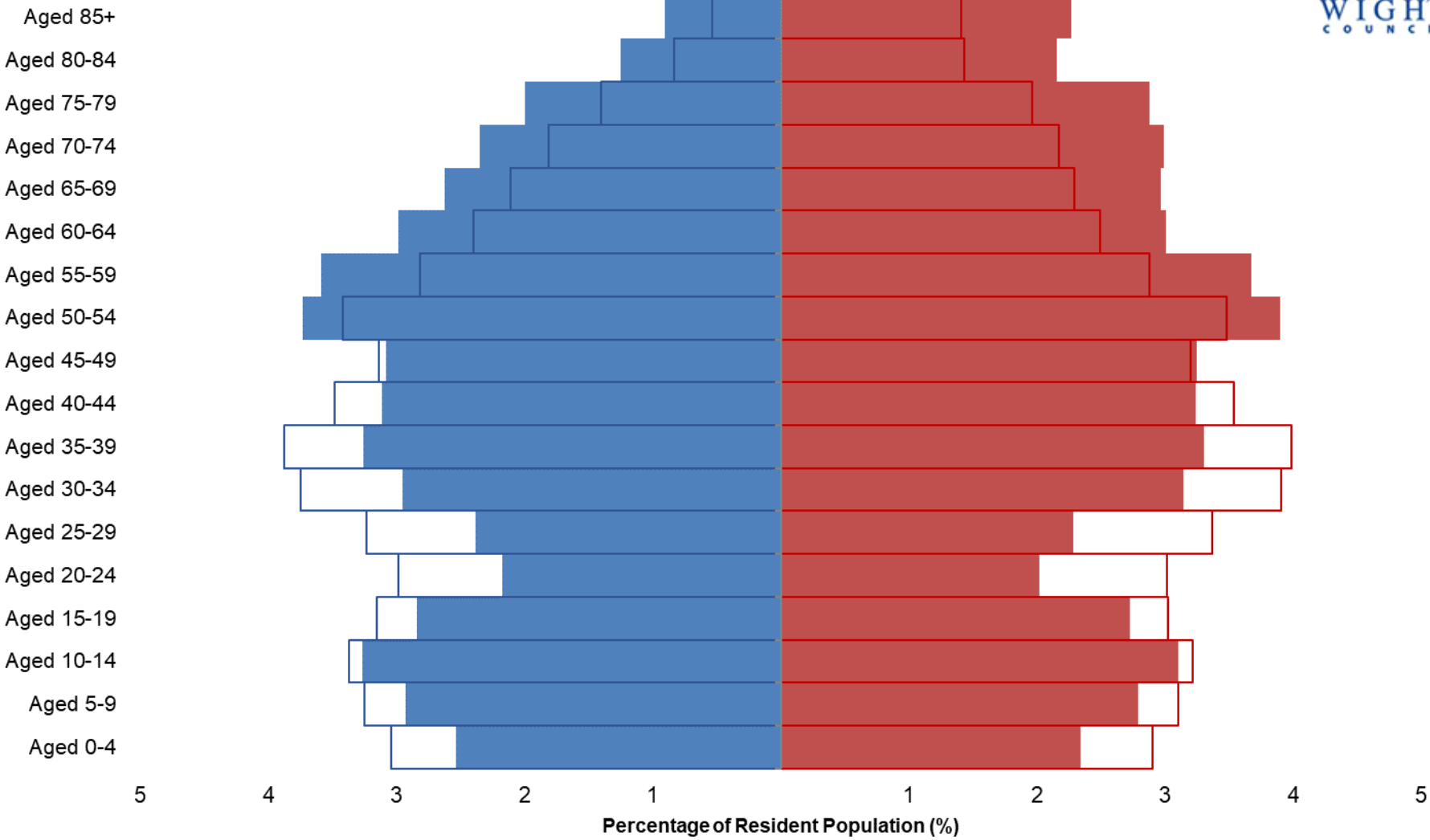
1991 Census



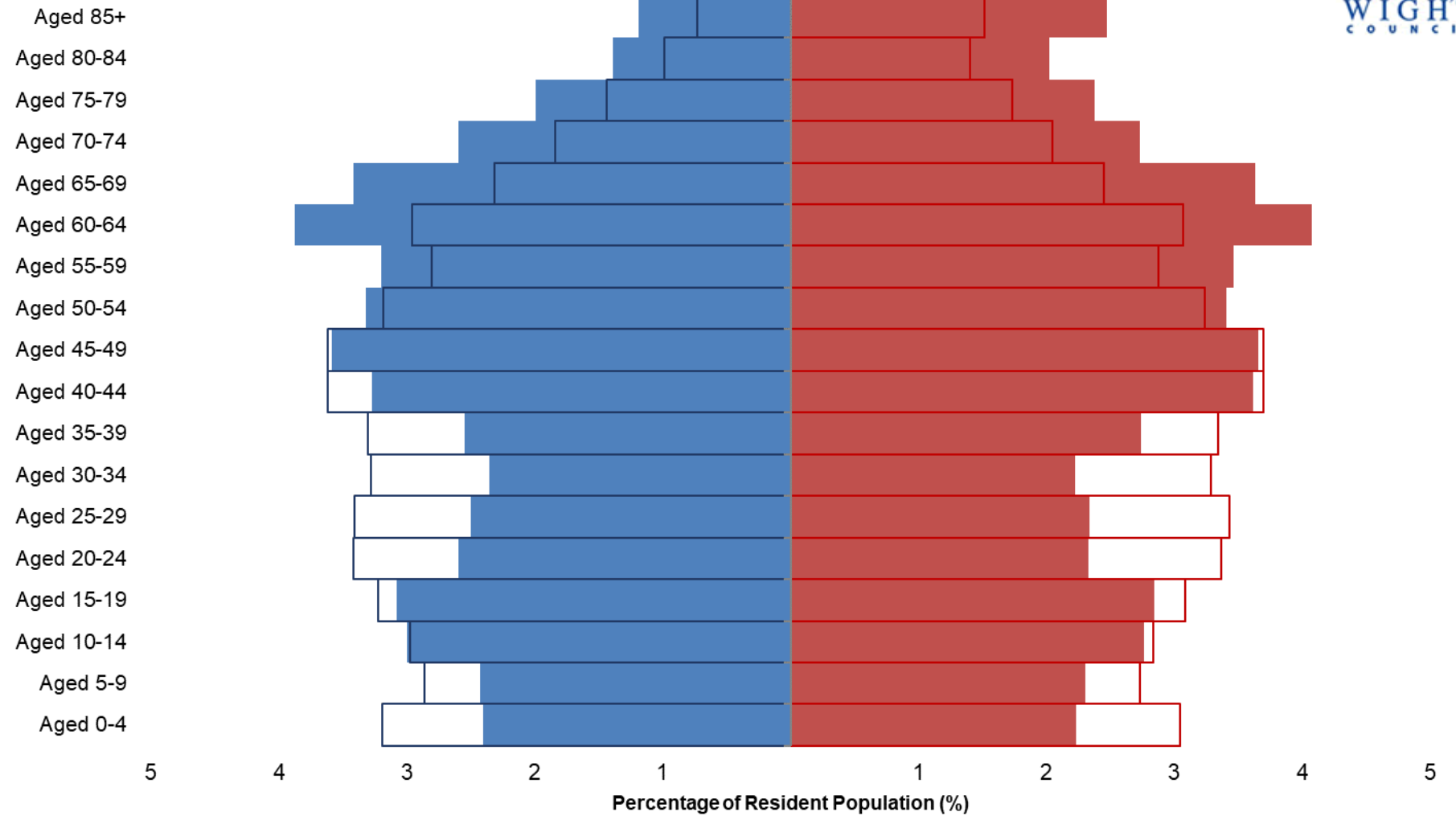
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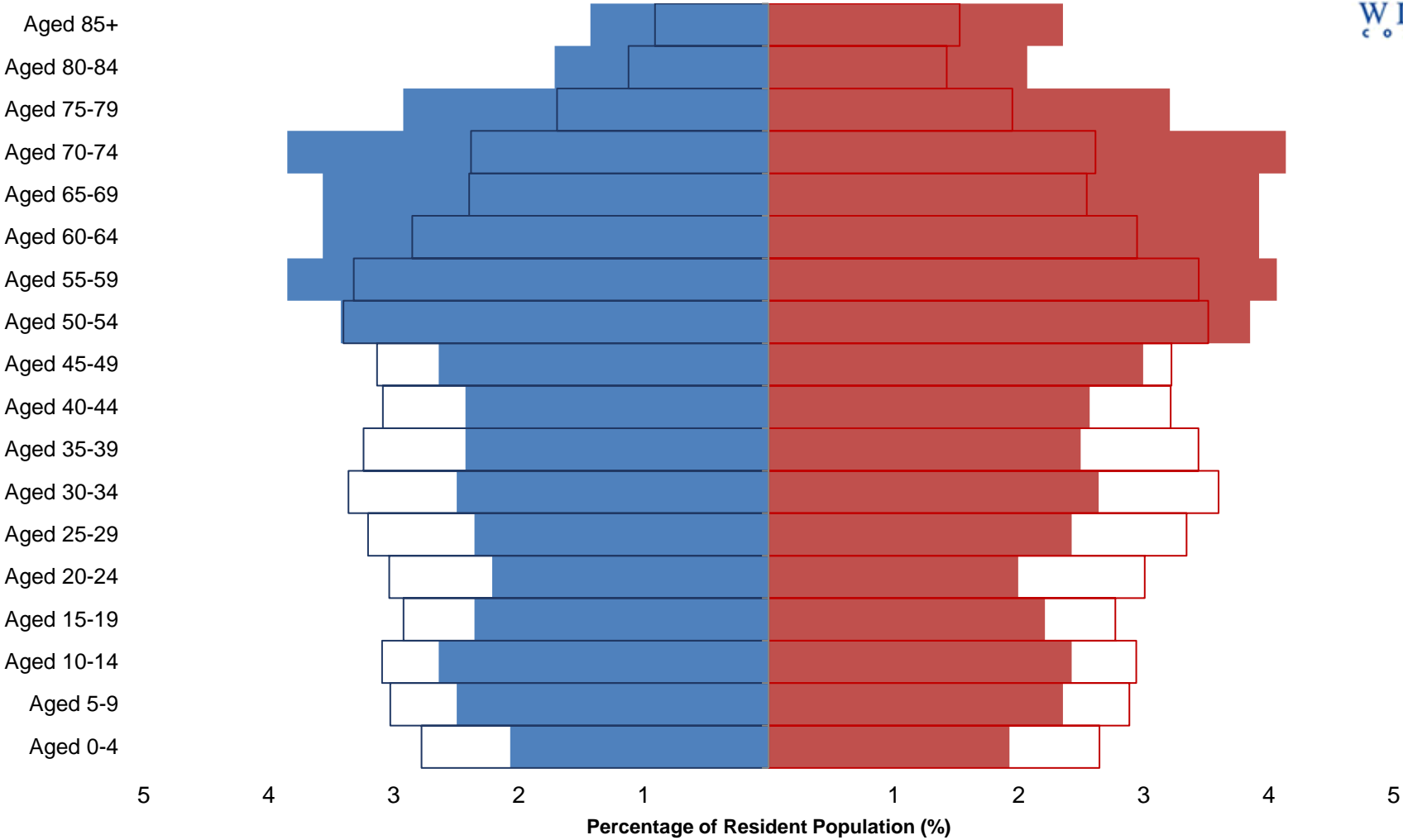
2001 Census



2011 Census



2021 Census



Understanding local challenges— population is a strong predictor of future health and care needs.



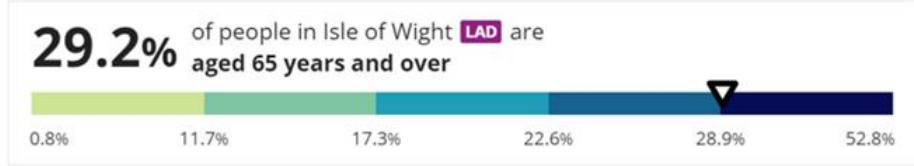
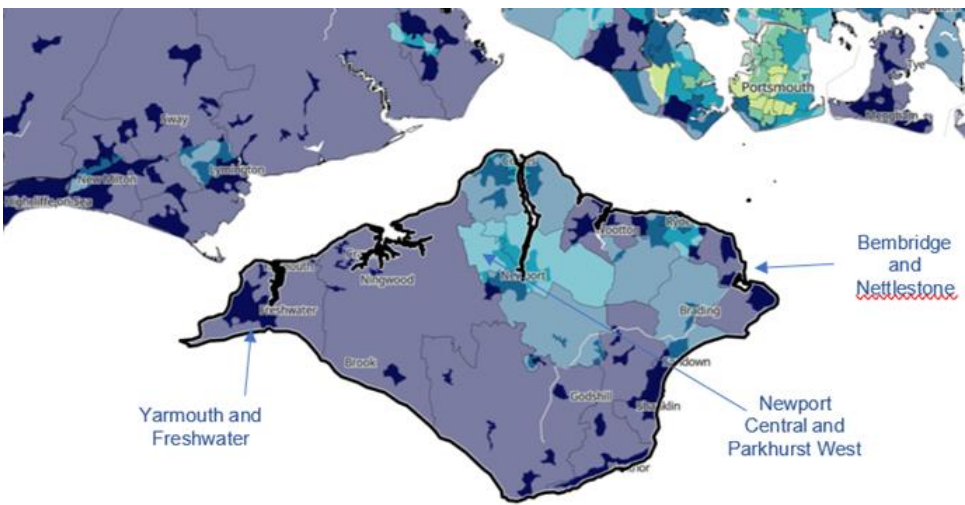
IOW has a significantly older population compared to England

- 37% are aged over 60 years compared to 24% nationally
- During the pandemic advancing age (>60 years) was a strong predictor of poor outcomes - increasing hospital admission rates and deaths.
- Older people were disproportionately affected by severe COVID-19 outcomes

Changes over the last two censuses:

- In the Isle of Wight, the population size has increased by 1.5%. This is lower than the overall increase for England (6.6%) and Southeast (7.5%).
- There has been an increase of 24.7% in people aged 65 years and over, a decrease of 5.3% in people aged 15 to 64 years, and a decrease of 6.3% in children aged under 15 years. Conversely, in England, there has been an increase of 20.1% in people aged 65 years and over, an increase of 3.6% in people aged 15 to 64 years, and an increase of 5.0% in children aged under 15 years.

Census 2021: resident population aged 65



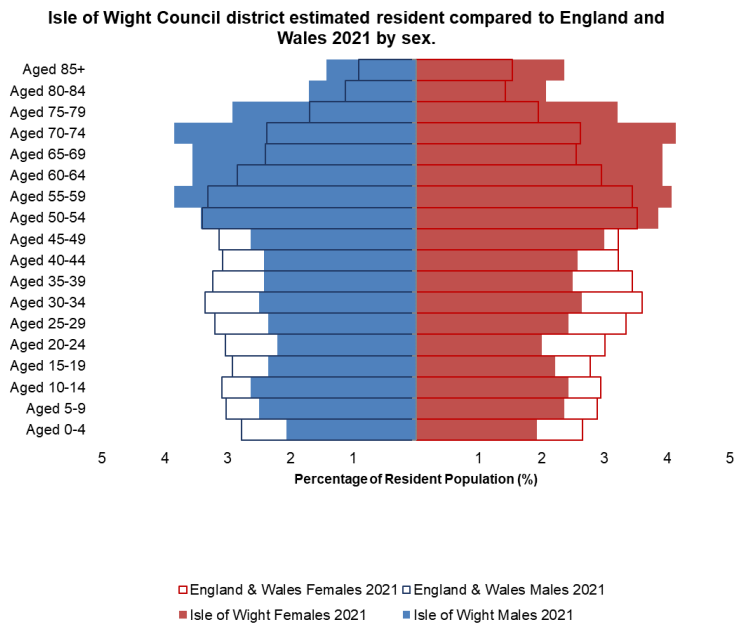
Bembridge and Nettlestone, 42.6 % of residents are aged over 65 years and in Yarmouth and Freshwater 41.1% are aged over 65 years. This is in contrast to other areas such as Newport Central and Parkhurst West where 17.7% are aged over 65 years

Isle of Wight population continues to age at a significant pace with an observed decrease in the 0-64 years populations between the two Censuses.

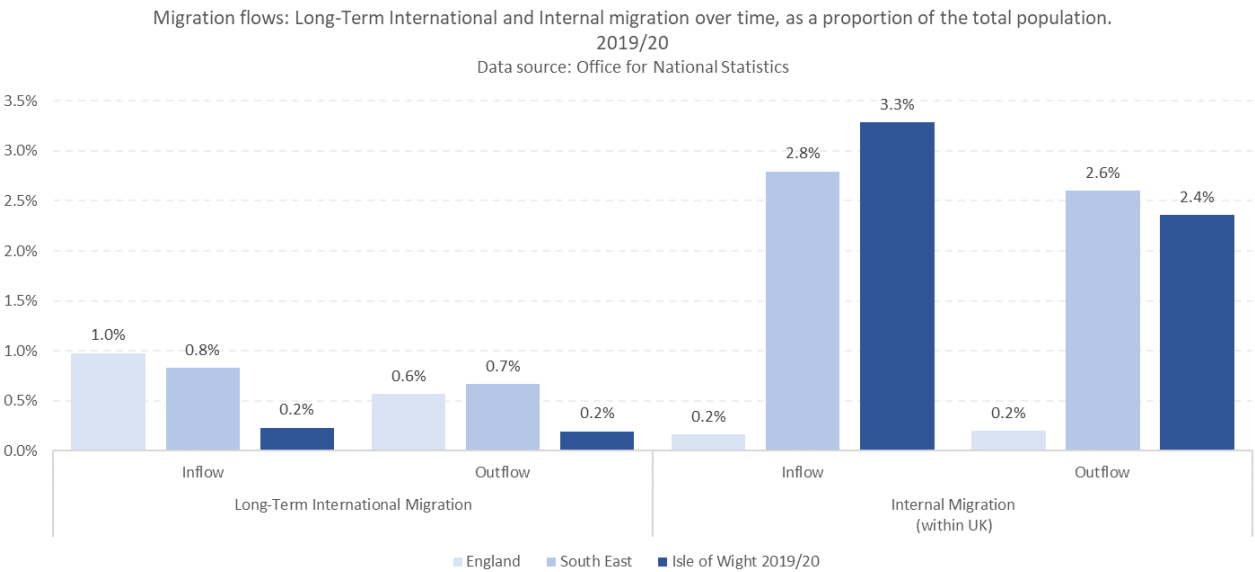
Coastal communities include a disproportionately high burden of ill health, particularly heart disease, diabetes, cancer, COPD and mental health. National data, show that life expectancy, healthy life expectancy and disability-free life expectancy are all lower in coastal areas for males and females.

92.7% of the IOW population are living in a coastal community. Over nine out of ten of the island's 65 years and over population live in a coastal area.

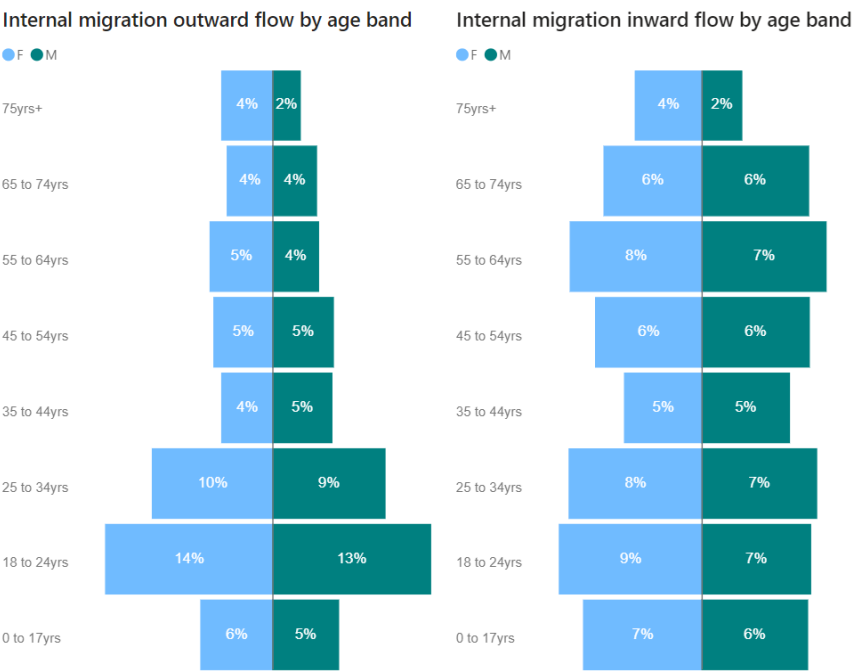
Data source: JSNA Healthy Places



Understanding population change: migration flows.



Isle of Wight Internal Migration Flows , 2019



Larger proportion of internal migration influencing population structure compared to England. This is reflective of the regional trend.

- Outward flow – young university/ working age population
- Inflow – older working age/older population and possible returning younger population

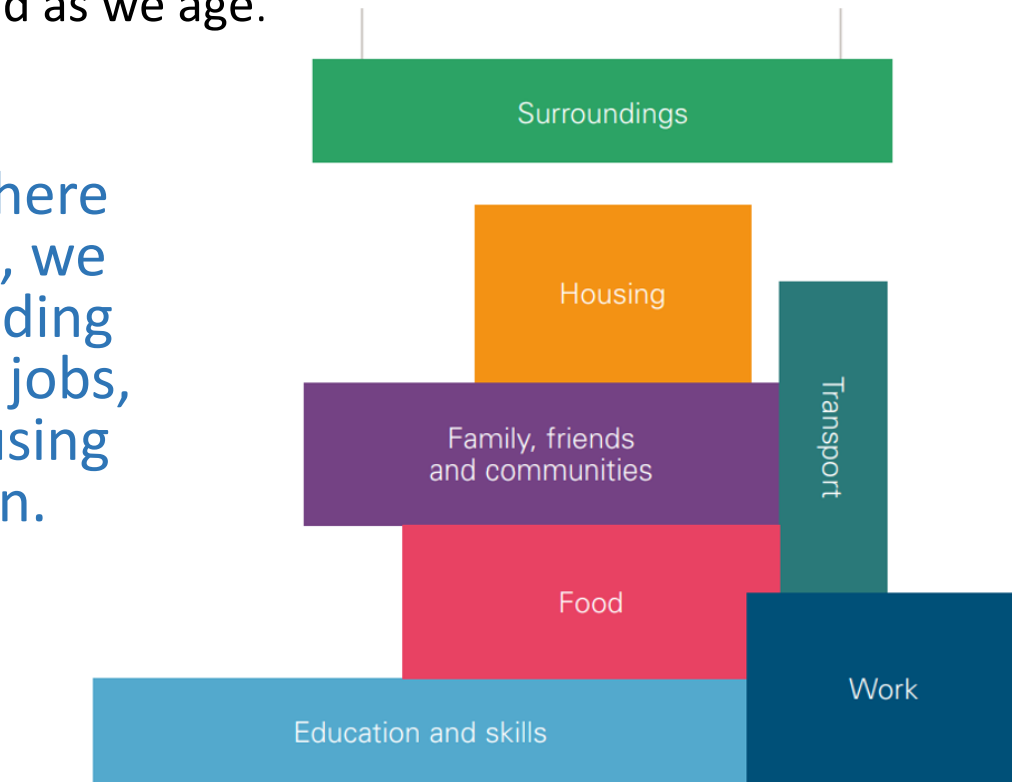
What are the building blocks of good mental and physical health?

Access to good health care is important.

However, it accounts for as little as 10% of a population's health and wellbeing.

Socio economic factors such as education and employment, **health behaviours** such as smoking, and diet and the **built environment** are the strongest influences on how healthy we are now and as we age.

To create a society where everybody can thrive, we need all the right building blocks in place: stable jobs, good pay, quality housing and good education.



The Health Foundation

What are the building blocks of good mental and physical health?

Transport & Work

Hospitals on the Isle of Wight c1936

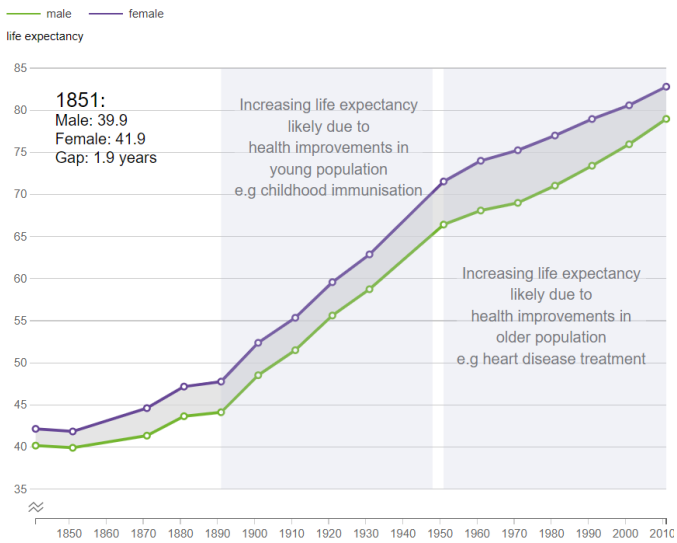
Hospital	Function	Beds	Admissions	Management	Medical Staff	Nursing Staff
Royal County Hospital	General	72	1121	Voluntary	resident	Matron 7 staff nurses 25 Probationers
Frank James	General	23	282	Voluntary	Visiting	Matron 2 Sisters 4 nurses
Arthur Webster	Cottage Hospital	9	110	Voluntary	Visiting	Matron 4 nurses
Scio House & Surgical Home	Children's	10	178	Voluntary	Visiting	Matron 3 nurses
Royal National Hospital Ventnor	Tuberculosis	157	314	Voluntary	3 Residents + Visiting Staff	Matron 10 Sisters 25 nurses 15 Assistant Nurses
St Mary's	Chronic	128	184	County Council	Visiting M.O.	1 Sister 2 Charge Nurses
St Mary's	Maternity	9	47	County Council	Visiting M.O.	15 Assistant Nurses
Whitecroft Hospital	Mental Illness	339	158	County Council	3 Residents + Visiting Staff	Matron 69 nurses
Longford	Tuberculosis	28	63	County Council	Visiting M.O.	Matron 4 nurses
Fairlee Hospital	Infectious Diseases	31	51	Joint Hospital Board	Visiting M.O.	Matron 1 Sister 4 nurses
Ventnor & Undercliff Hospital	Infectious Diseases	8	25	Ventnor U.D.C.	Private G.P.s	1 + help

HMP Isle of Wight prison combined the two island prisons, Albany and Parkhurst. The two former prisons along with Camp Hill were merged in 2009. Across the three sites there were nearly 1,700 prisoners making it one of the largest prisons in the country. The reorganisation took effect on 1 April 2009. In March 2013 Camp Hill closed, reducing the overall prison population by 595. The prison remains a large employer.



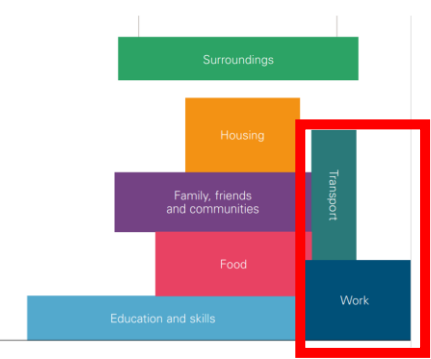
Royal National Hospital Ventnor
The National Cottage Hospital for Consumption and Diseases of the Chest opened in 1869.

Life expectancy at birth, England and Wales, 1841 to 2011



As well as a changes in transport and work. These examples illustrate the complexity of health and medical practice in 1936. Clean air and sunshine drove national policy and patients were brought to the national hospital in Ventnor for treatment. Medical advances and a better understanding of human health and evidence based care pathways enable a centralised service. Increasing life expectancy creates an ageing population and long term condition management becomes priority.

Anchor institutions are large organisations that are unlikely to relocate and have a significant stake in their local area. They have sizeable assets that can be used to support their local community’s health and wellbeing and tackle health inequalities, for example, through procurement, training, employment, professional development, and buildings and land use.

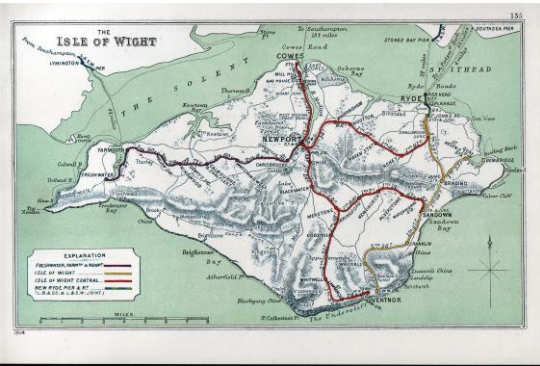


Hospitals on the Isle of Wight 2020

Hospital	Function	Beds	Admissions	Management	Staff
IOW Hospital Trust, St Mary's Hospital	General and A&E and MH	246	22,685 a year	NHS	Approx. 3,000

Railway lines on the Isle of Wight before 1950s

Until the 1950’s the island boasted **55 miles of railway line**. Of these the ‘main line’ from Ryde Pier Head to Ventnor was the busiest, also serving the principal holiday resorts of Sandown and Shanklin.



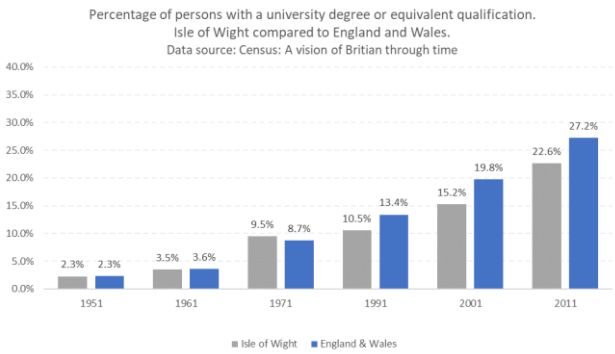
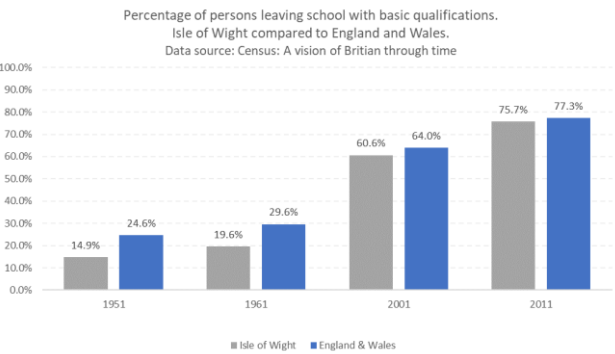
Railway lines on the Isle of Wight 2020

One main line 8.5 miles of railway line– ‘The Island Line’ - runs along the East coast connecting Ryde, Pierhead with Shanklin via 6 stations.



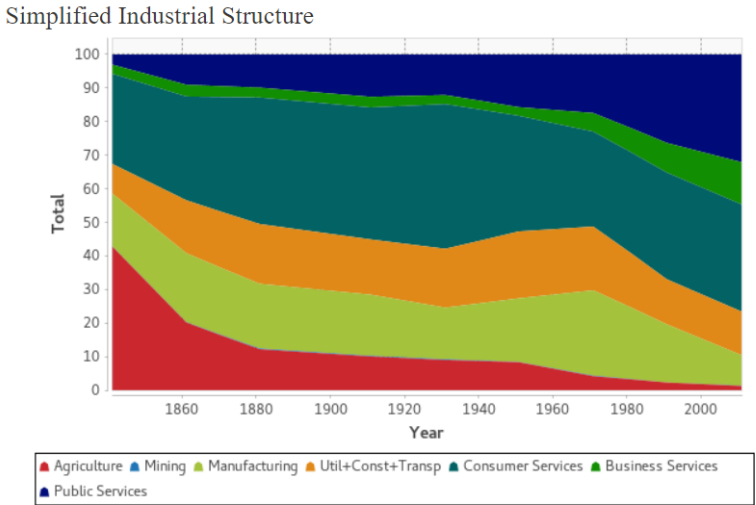
What are the building blocks of good mental and physical health?

Work, Education & Skills



Job opportunities but also qualification constraints are apparent over time

A decline in agriculture and more recently manufacturing has been observed. Consumer services (including Tourism) has always been a significant industry on the Isle of Wight. The public services industry has increased by over 200%



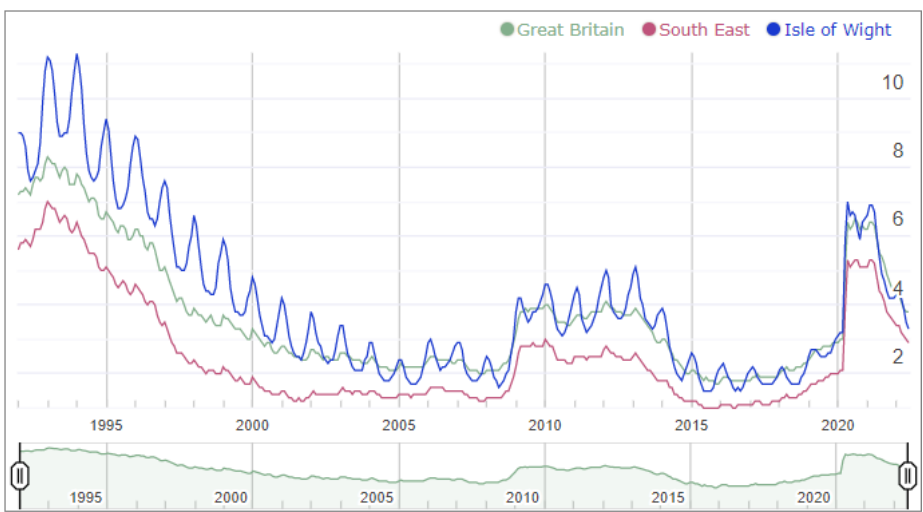
Anchor institutions are large organisations that are unlikely to relocate and have a significant stake in their local area. They have sizeable assets that can be used to support their local community’s health and wellbeing and tackle health inequalities, for example, through procurement, training, employment, professional development, and buildings and land use.

The accommodation and food sector are one of the most prominent industry sector on the Isle of Wight.

Overall the IOW has a higher claimant count than Great Britain or South East. The chart clearly demonstrates the seasonality of employment across the Island with claimants counts increasing out of season. The impact of COVID-19 policy is also evident.

Year Round Destination programme will provide an established tourist industry less reliant on traditional school holidays and provide stable longer term employment and opportunities.

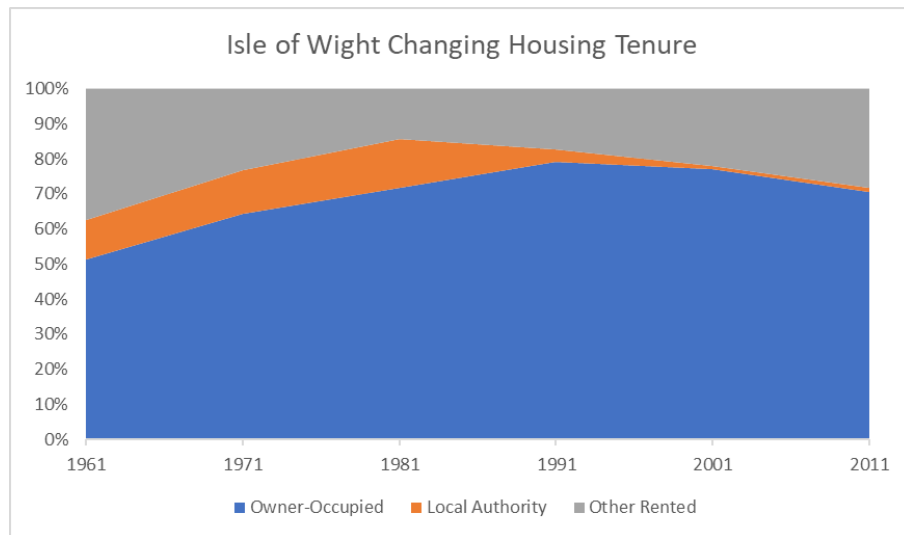
Claimant Count By Sex - Time Series



What are the building blocks of good mental and physical health?

Housing.

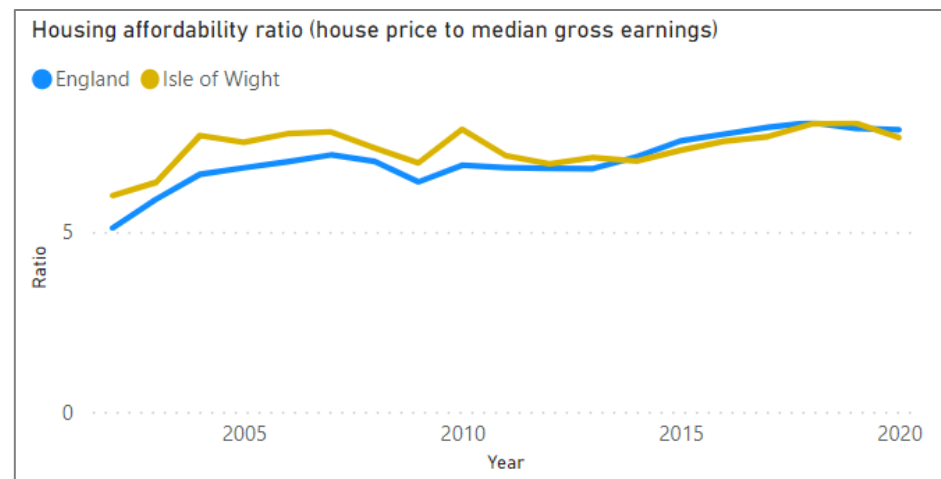
Housing tenure changes observed across the Isle of Wight reflect the national trends. Since 1991 there has been a decrease in Owner Occupied and Local Authority housing. **Other rented, which includes private rentals have increased and in 2011 accounted for 28% of the housing** (26% across England & Wales)



Number of properties with an energy efficiency rating of bands D, E or F



The **housing affordability ratio** shows how affordable housing is compared with median gross earnings - **the higher the ratio, the less affordable housing has become**. This may lead to increased numbers of people living in insecure rented accommodation or overcrowded conditions. It can also result in an increase in homelessness. Poor quality housing or fuel poverty leads to people living in cold homes during the winter which increases the number of excess winter deaths. **Across the Isle of Wight homes have become less affordable since 2002**. Need to recognize the Island's **unique housing market circumstances**/ delivery limitations for e.g, non viability of new development, projected population growth dependent on internal migration, land overvalued, AONB, drinking water supply and sewerage capacity etc., and so national policy may not be applicable



There are higher numbers of households with lower energy ratings in the Freshwater, Yarmouth and Seaview and the majority of homes with low energy ratings are owner-occupied and likely to be older buildings



Household are calculated to be living in fuel poverty when the energy efficiency rating of their home is in bands D, E, F or G and when their income after housing costs is below the poverty line. It is therefore driven by three factors: energy costs, energy efficiency of the home and income. Cold homes have been linked to an increased risk of developing a wide range of health conditions including, asthma, arthritis and pneumonia, as well as unintentional injury.

What are the building blocks of good mental and physical health?

Surroundings: Food, Family, Friends & Community.



Food bank locations



5 food banks plus 3 additional sites for pantries

The extent people use the internet can impact on life aspects such as social connections, access to services such as groceries, banking, employment, and information or access to health services. Internet access, the means and ability to use online services became very important during the pandemic as many services moved to a digital offer potentially isolating people further

Food insecurity on the Island is high due to high levels of deprivation and additionally reduced access to shops for large areas of the Island. Central Shanklin and Newport are the areas with the highest concentrations of fast-food outlets.

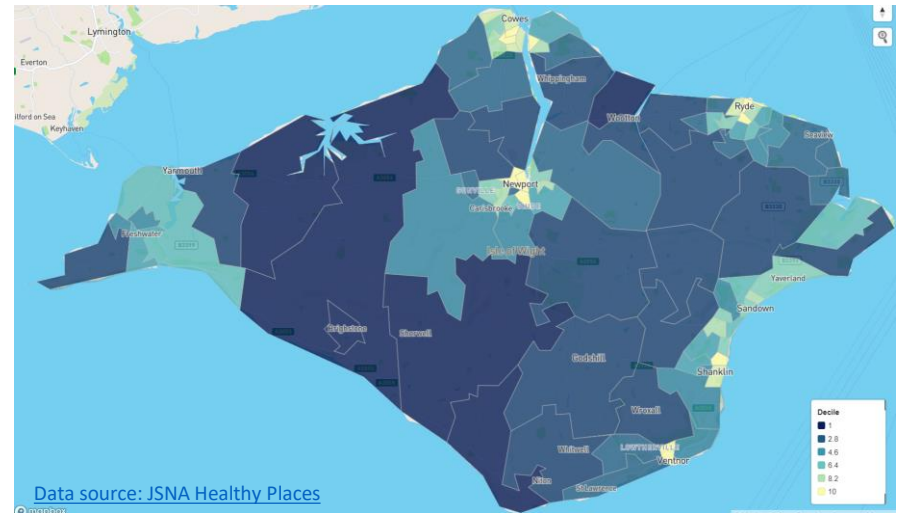
There is also low **access to leisure facilities**, higher levels of social isolation and low internet engagement.

The Isle of Wight has a number of areas where people are at increased risk of **social isolation** including Shanklin, Newport and Ventnor. However, the ONS Opinion and Lifestyle survey reported that between October 2020 and February 2021 4.7% of people on the Isle of Wight felt always or often lonely, compared to 7.3% in England

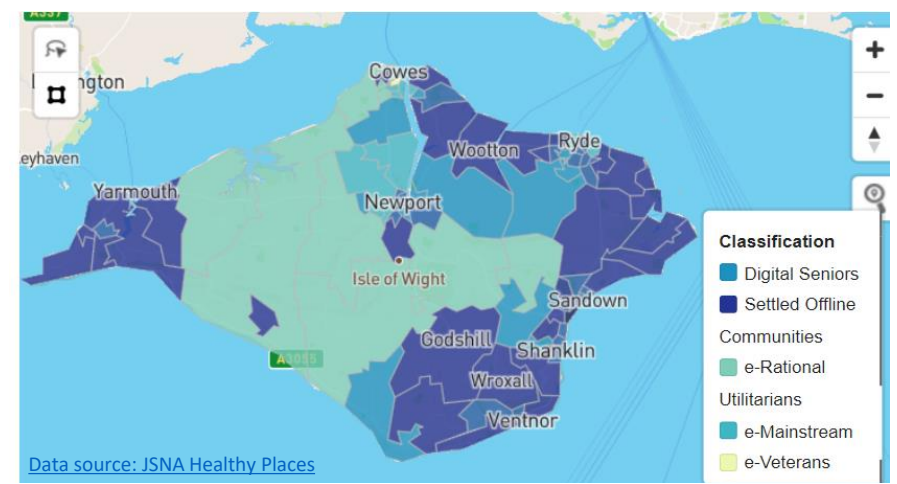
There were very few areas where there was high **internet engagement** (only one within Cowes). The Isle of Wight also showed low rates of electronic returns for the census which suggests that alternative methods may be necessary for some communications.

Food Insecurity: Structural index

Includes bus stops, distances to employment / food stores and internet speeds



Internet User Classifications



Passive and Uncommitted: Limited or no engagement, suburbs / semi rural, semi-skilled or blue-collar occupations
Settled Offline Communities: Limited use, elderly, White British, semi-rural.

Understanding health and social care outcomes: Ill Health and Multi-morbidity

Multimorbidity is often associated with reduced quality of life, higher mortality, polypharmacy and high treatment burden, higher rates of adverse drug events, and much greater health services use (NICE Guidance QS153)

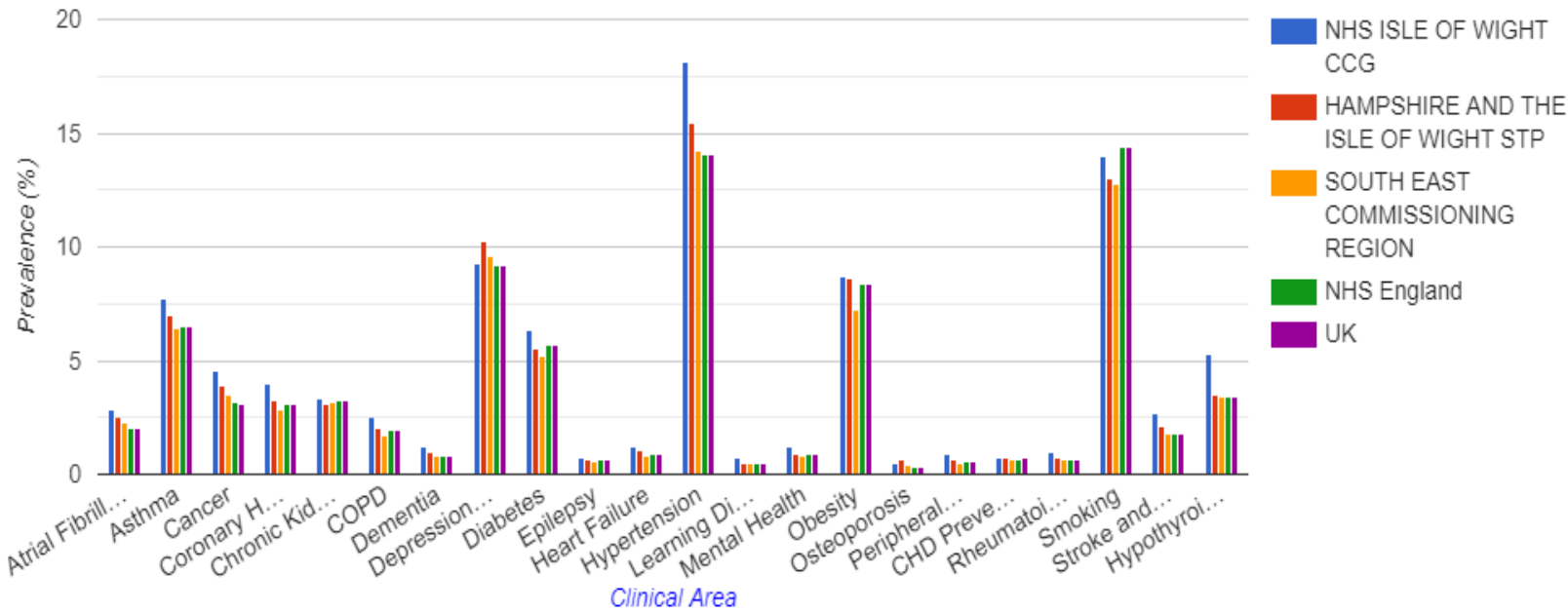
The number of long-term conditions increases steadily with age.

Health Profile for England (2017) reported;

- at age 40, 44% of people had 1 or more long-term condition.
- at age 60, 64% of people had 1 or more long-term condition and over 30% had 2 or more.
- at age 80, nearly 90% of people had 1 or more long-term condition and 44% had 3 or more.

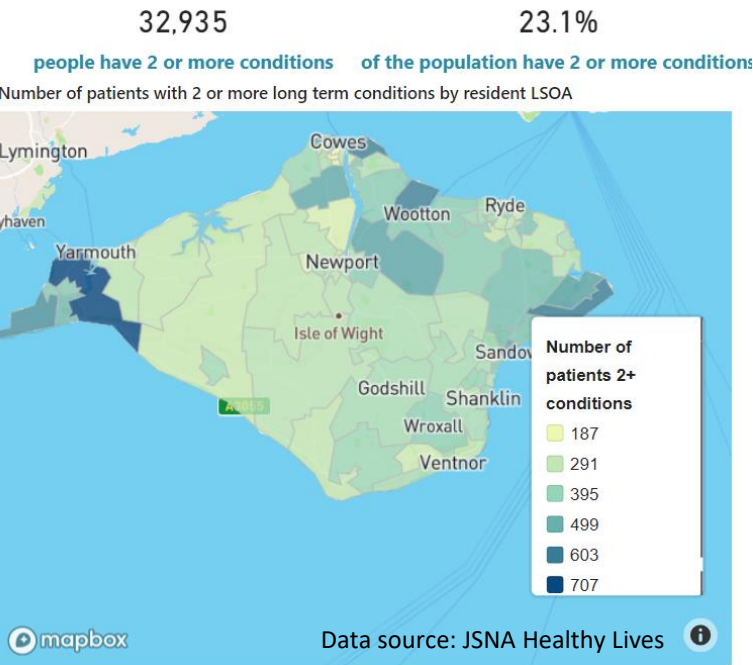
In Census 2011, almost one in five residents on the Isle of Wight reported having a limiting long term illness or disability this was significantly higher than England. Huge variation was observed across the island from 17.6% in Newport to 30.3% in Sandown.

NHS Isle of Wight CCG Prevalence, 2020



Data source: [NHS Isle of Wight CCG - QOF Database \(gpcontract.co.uk\)](https://gpcontract.co.uk)

Estimated number of people with 2+ long term conditions

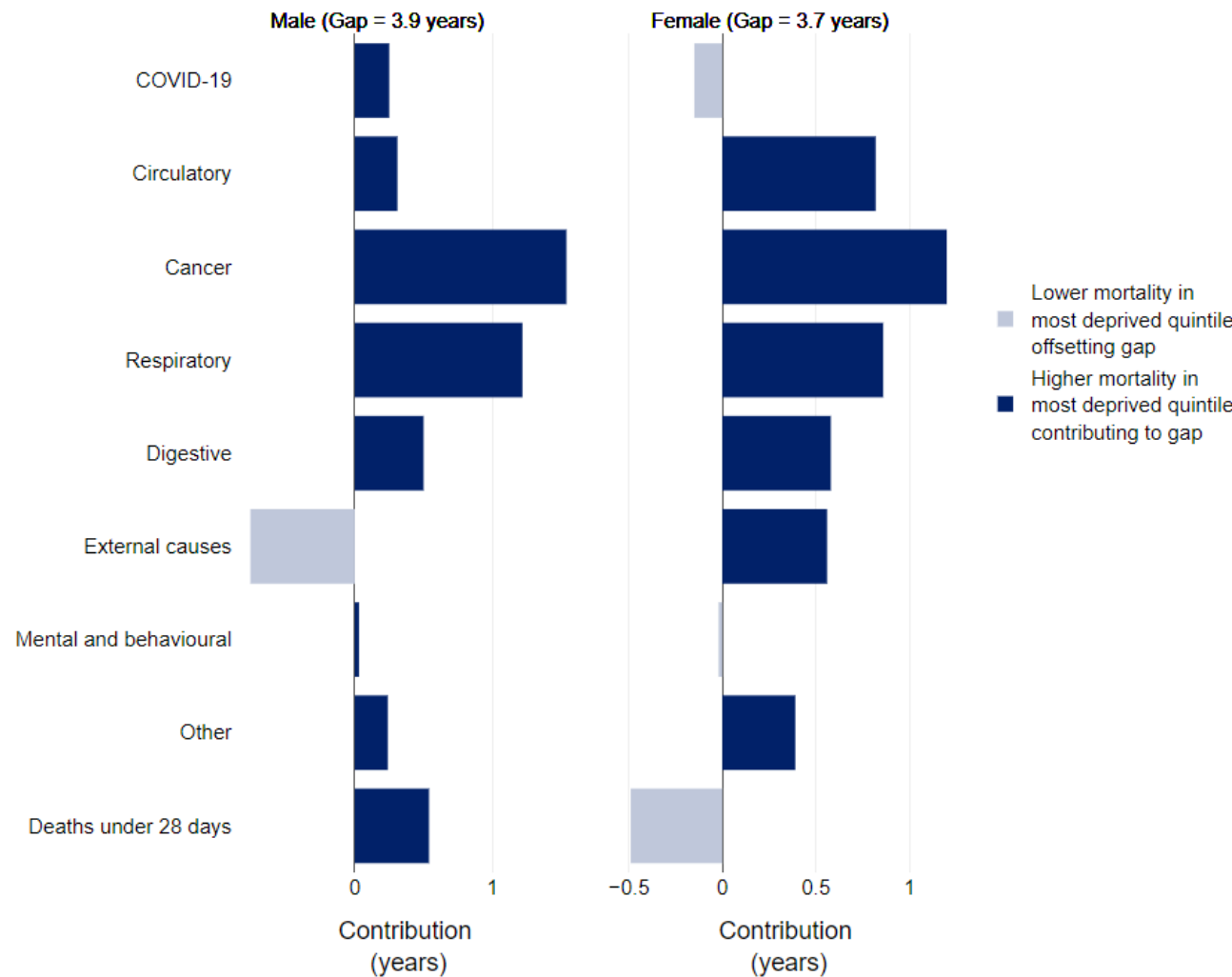


CHD, Hypertension, Stroke, Heart failure, Atrial Fibrillation, Diabetes, COPD, Asthma, Cancer prevalence is above the HIOW ICS, England and increasing. But management is suboptimal in some areas. Access to care and mode of access will be a concern (given the IOW geography) and multiple appointments with different services increases the burden of treatment, compromising the overall quality of care that people receive.

An expanding elderly population with multimorbidity means a rising demand for healthcare services and increasing reliance on access to care from the mainland. At the same time, the contracting working age population to look after and support this elderly population poses significant challenges.

Understanding health and social care outcomes: Premature Mortality

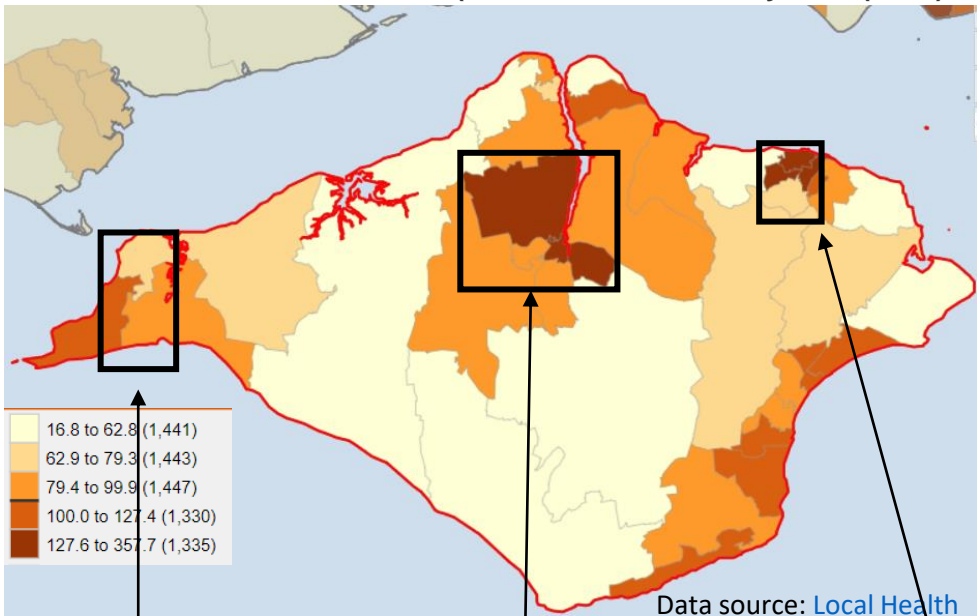
Breakdown of the life expectancy gap between the most and least deprived quintiles of Isle of Wight by cause of death, 2020 to 2021 (Provisional)



Source: Office for Health Improvement and Disparities based on ONS death registration data (provisional for 2021) and 2020 mid year population estimates, and Department for Levelling Up, Housing and Communities Index of Multiple Deprivation, 2019

People in our poorest neighbourhoods are dying much earlier than people in the wealthiest areas. For males the differences are greatest in deaths from cancer and respiratory diseases for females it is deaths from circulatory, cancer and respiratory diseases.

Deaths from causes considered preventable, under 75 years, Indirectly standardised ratio, 2016 to 2020 (Standardised mortality ratio (SMR))



Data source: [Local Health](#)

Newport and Ryde have the highest preventable, premature death rates

Place Story 1

Place Story 2

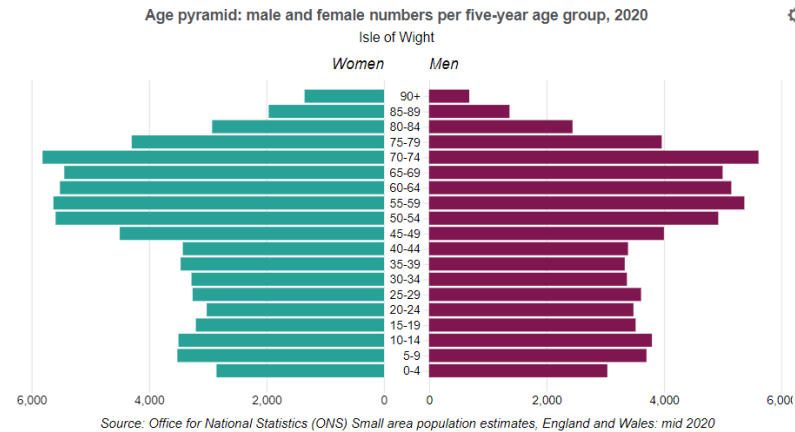
Place Story 3

Place Story 1: Freshwater South & Freshwater North & Yarmouth wards

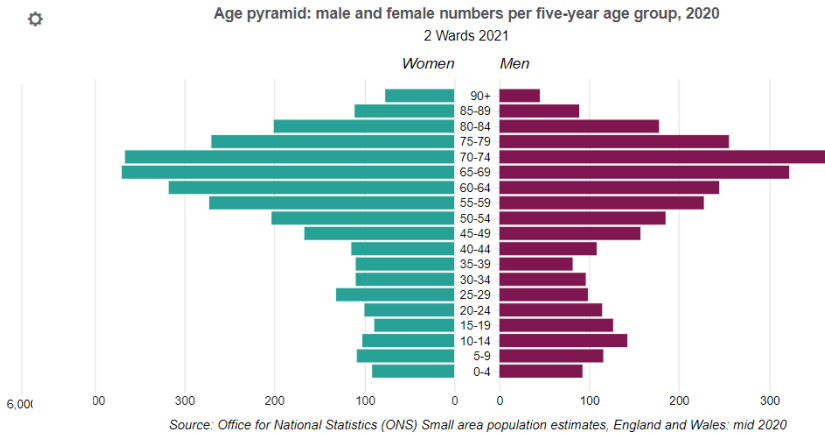
What building blocks of good mental and physical health can we identify within these communities?



Isle of Wight



Freshwater South & Freshwater North & Yarmouth wards



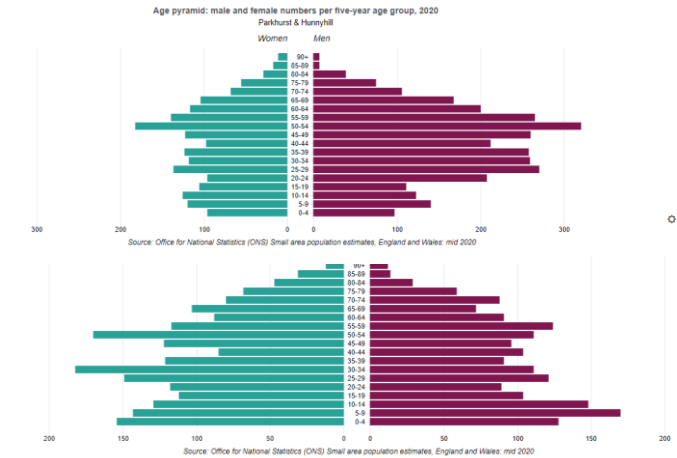
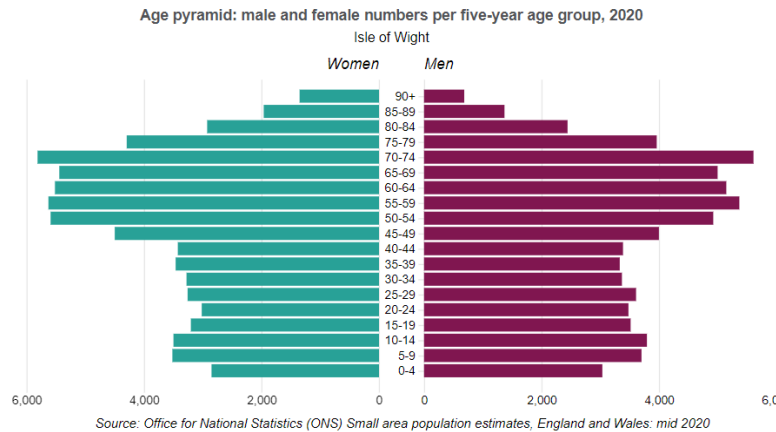
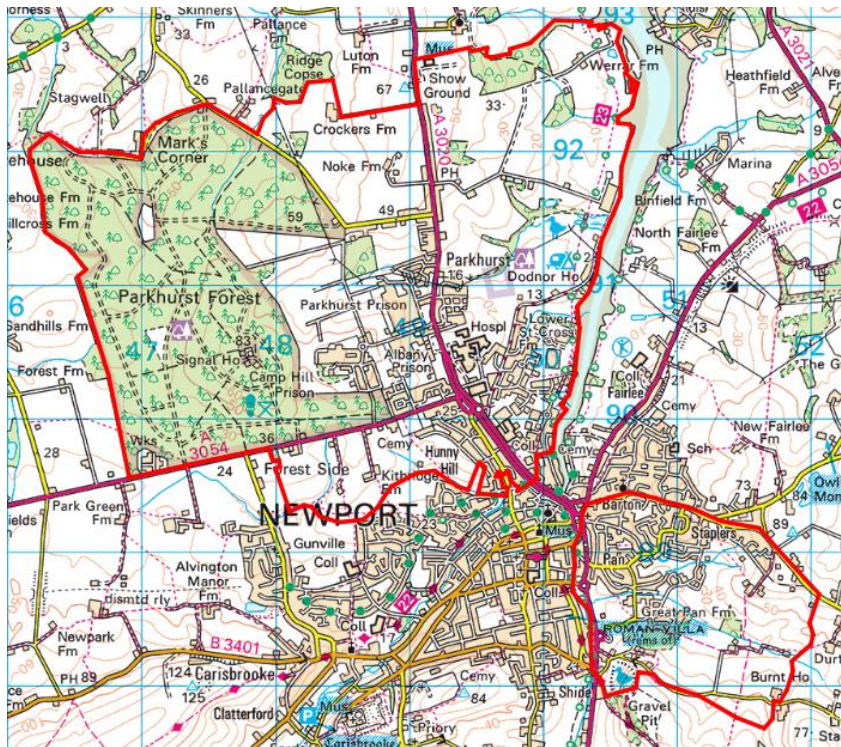
- Acutely older population
- **Significantly better or comparable deprivation levels** (15% IDACI, 10% IDOPI compared to 18% and 13% IOW)
- **LLTI or disability** – significantly worse than England, higher than IOW
- **Significantly better or comparable emergency admissions rates**
- Significantly worse incidence of breast and prostate cancer
- **Comparable to England premature mortality rates**, all causes, circulatory diseases, all cancer and conditions considered preventable.
- **Significantly worse all age deaths** from circulatory disease

Place Story 2: Parkhurst and Hunnyhill ward & Pan and Barton ward

What building blocks of good mental and physical health can we identify within these communities?

Isle of Wight

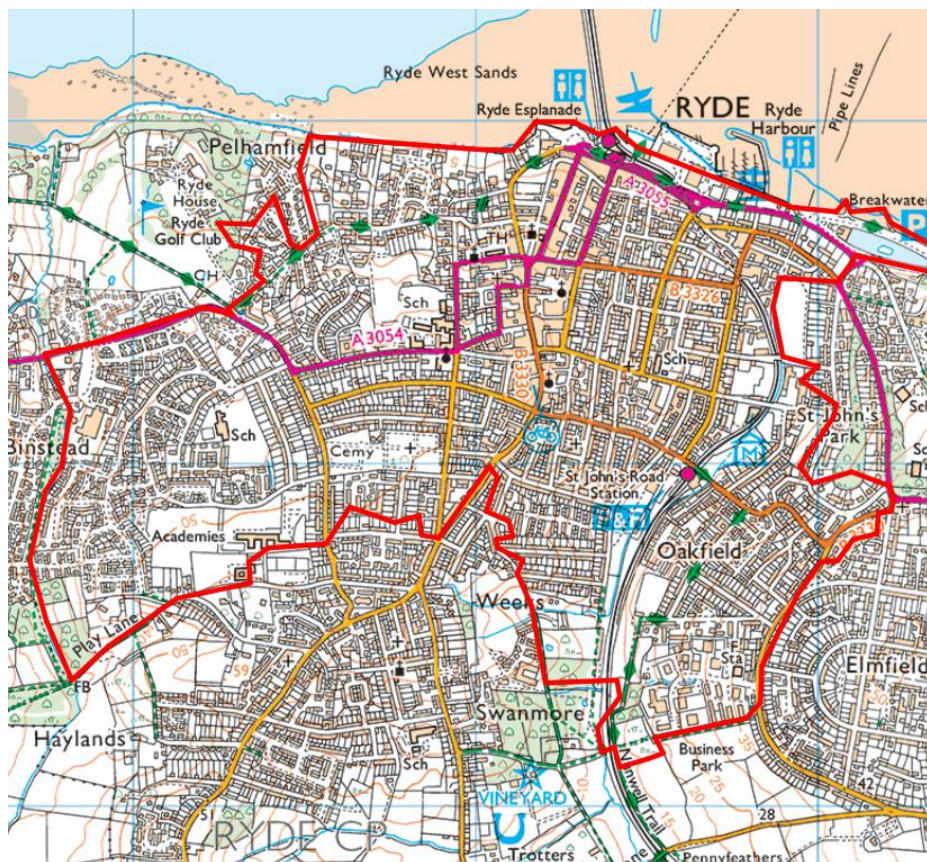
Parkhurst and Hunnyhill ward & Pan and Barton ward



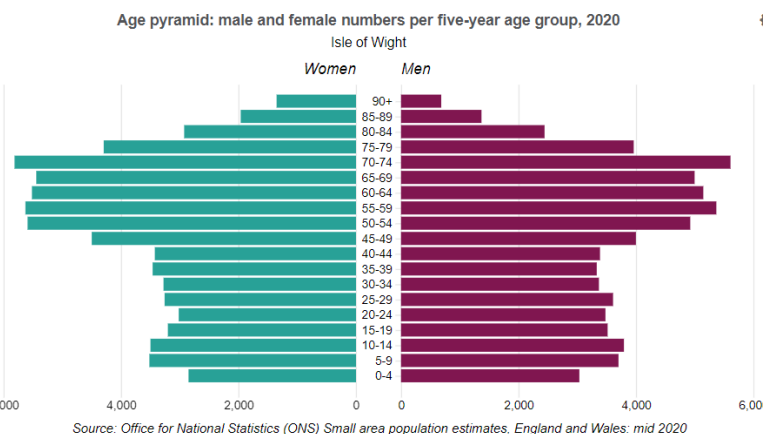
- Younger middle aged male population – reflective of the prison population
- Much younger population and more deprived in Pan and Barton
- **High deprivation levels in 10% most deprived areas** (25% IDACI, 20% IDOPI compared to 18% and 13% IOW)
- **LLTI or disability** – significantly worse than England, comparable to IOW
- Higher fertility rate than IOW and England
- **Significantly worse emergency admissions rates** for intentional self harm than England
- **Significantly worse admissions rates** for alcohol attributable conditions and emergency COPD admissions than England
- **Not significantly different incidence of cancer**
- **Significantly worse premature mortality rates**, all causes, circulatory diseases, and conditions considered preventable.
- **Significantly worse all age deaths** from circulatory disease

Place Story 3: Ryde North West ward, Ryde West Ward, Ryde Monktonmead ward and Ryde South East.

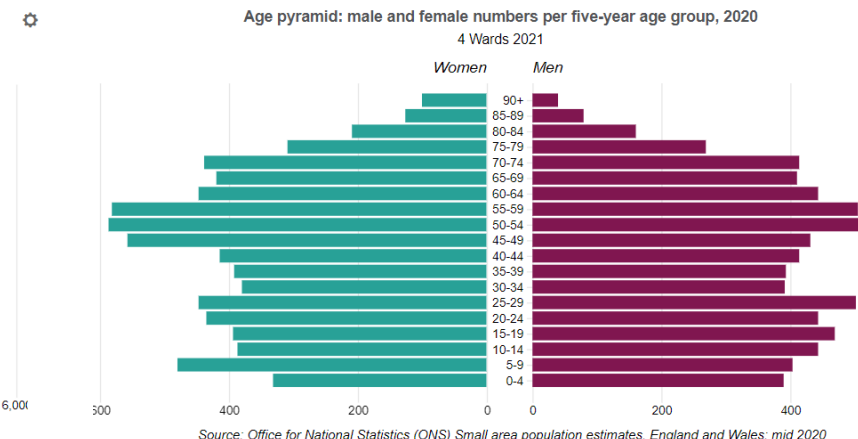
What building blocks of good mental and physical health can we identify within these communities?



Isle of Wight



Ryde North West ward, Ryde West Ward, Ryde Monktonmead ward and Ryde South East



- Younger population – larger proportion older working age and primary school age.
- Much younger and more deprived population in Ryde South east ward
- **High deprivation levels in 20% most deprived areas** (23% IDACI, 18% IDOPI compared to 18% and 13% IOW)
- **LLTI or disability** – significantly worse than England, comparable to IOW
- **Higher proportion of older people living alone** than England and IOW
- **Higher proportion of overcrowded houses, very high population density and fuel poverty** than England and IOW
- **Significantly better or comparable emergency admissions rates**
- **Significantly worse admissions rates** for intentional self harm and alcohol harm
- **Significantly worse incidence of all cancers and prostate cancer**
- **Significantly worse premature mortality rates**, all causes, all cancer, circulatory diseases, and conditions considered preventable.
- **Significantly worse all age deaths** from circulatory disease, all cancers and all causes