





NHS Greater Glasgow and Clyde 2017/18 Adult Health and Wellbeing Survey

East Dunbartonshire HSCP Summary Report

Prepared for NHS Greater Glasgow and Clyde by Traci Leven Research

April 2019

Contents

1	Int	roduction	1
	1.1	Background	1
	1.2	Sample	2
2	Pe	rceptions of Health and Illness	3
	2.1	Summary of Key Messages - Perceptions of Health and Illness	4
	2.2	Key Indicators - Perceptions of Health and Illness	6
3	He	ealth Behaviours	7
	3.1	Summary of Key Messages – Health Behaviours	8
	3.2	Key Indicators – Health Behaviours	10
4	So	cial Health	11
	4.1	Summary of Key Messages – Social Health	12
	4.2	Key Indicators – Social Health	14
5	So	cial Capital	15
	5.1	Summary of Key Messages – Social Capital	16
	5.2	Key Indicators – Social Capital	17
6	Fin	nancial Wellbeing	18
	6.1	Summary of Key Messages – Financial Wellbeing	19
	6.2	Key Indicators – Financial Wellbeing	21
7	De	emographics	22
	7.1	Summary of Key Messages – Demographics	23
	7.2	Key Indicators – Demographics	24

1 Introduction

This report contains summary findings of a research survey on the health and wellbeing (HWB) of NHS Greater Glasgow and Clyde (NHSGGC) residents in East Dunbartonshire carried out in 2017/18.

The survey has been conducted every three years since 1999 and is the seventh in the series of studies; initially covering the NHS Greater Glasgow area it was expanded in 2008 to cover the new NHSGGC area.

The survey offers flexible solutions for monitoring the health of the population in a range of geographies within NHSGGC.

1.1 **Background**

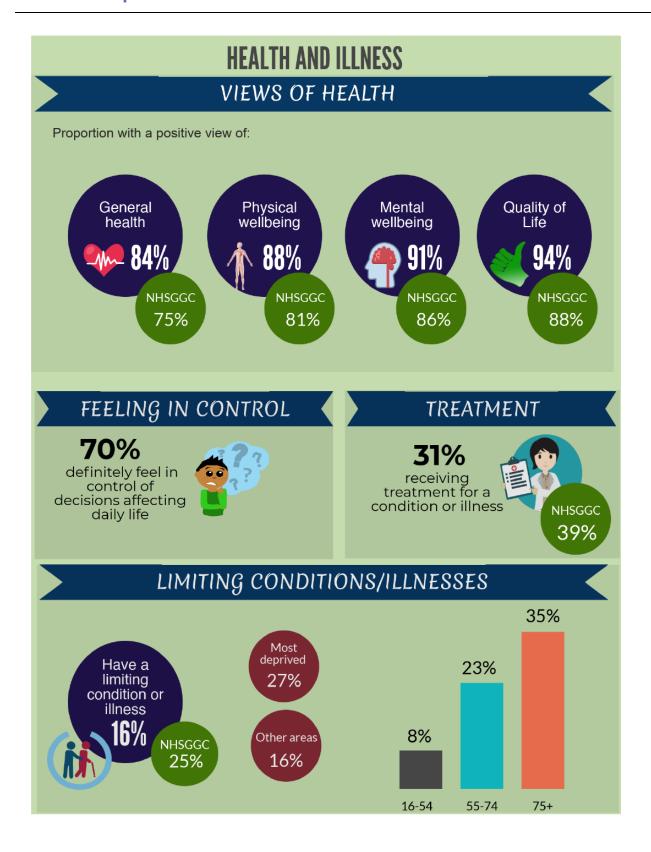
- The survey provides valuable information on the self perceived health and wellbeing of our residents, their health behaviours, attitudes, social health/social capital and financial wellbeing
- Cross sectional a 'snapshot in time'
- Random Stratified Sample
 - o representative of the Health and Social Care population and sub-areas to allow the exploration of area, age, gender and deprivation
- Large sample which has grown significantly over time
- Includes core set of questions with new questions introduced to reflect local priorities and changing national targets

1.2 Sample

Total Sample - East Dunbartonshire	1,134
Deprivation (SIMD 2016)Most Deprived Areas	5%
 Other Areas 	96%
Local Authority Area	
 East Renfrewshire 	194
 Glasgow City 	4,520
 Inverclyde 	1,196
 Renfrewshire 	600
 West Dunbartonshire 	190
Total Sample - NHSGGC	7,834

NHS Greater Glasgow and Clyde 2017/18 Adult Health and Wellbeing Survey (East Dunbartonshire HSCP Final Report)

https://www.stor.scot.nhs.uk/handle/11289/579887



2.1 **Summary of Key Messages - Perceptions of Health and Illness**

Comparisons with NHSGGC - those in East Dunbartonshire were:

- more likely to have a positive rating of their general health
- more likely to have a positive view of their physical wellbeing or mental/emotional wellbeing
- more likely to have a positive view of their quality of life
- less likely to have a limiting condition/illness and less likely to be receiving treatment for any conditions or illnesses.

Differences by Age and Gender

- Those in the youngest age group were the most likely to have a positive perception of their general health, physical wellbeing, mental/emotional wellbeing and quality of life.
- Men were more likely than women to have a positive perception of their mental/emotional wellbeing.
- Those in the youngest age group were the least likely to feel in control of the decisions affecting their life.
- Those in the oldest age group were the most likely to have a limiting condition/illness or to be receiving treatment for at least one condition.
- Women were more likely than men to be receiving treatment.

Differences by Deprivation

Those in the most deprived areas were:

- less likely to have positive views of their general health, physical wellbeing, mental/emotional wellbeing or quality of life
- more likely to have a long term limiting condition or illness or be receiving treatment for at least one condition.

Trends

- There was no significant change between 2014/15 and 2017/18 in the proportion who had a positive perception of their general health, physical wellbeing, mental/emotional wellbeing or quality of life.
- There was no significant change between 2014/15 and 2017/18 in the proportion who felt in control of the decisions affecting their life.
- Between 2014/15 and 2017/18 there was no significant change in the proportion who had a limiting condition/illness, but there was a decrease in the proportion who were in receipt of treatment for at least one condition.

Key Indicators - Perceptions of Health and Illness 2.2

	Positive View of General Health	Positive Perception of Physical Wellbeing	Positive Perception of Mental/ Emotional Wellbeing	Definitely feel in control of decisions affecting life
NHSGGC	75.0%	81.5%	86.2%	72.7%
Glasgow City	72.9%	79.1% *	83.9%	71.9%
East Dunbartonshire	84.4%*	88.0%*	90.9%*	70.1%
Inverclyde	73.8%	81.3%	84.5%	76.3%
Renfrewshire	79.7% *	86.0%*	89.4%*	74.8%

	Positive Perception of Quality of Life	Long-term Limiting Condition or Illness	Receiving Treatment for at Least One Condition
NHSGGC	87.5%	25.5%	39.2%
Glasgow City	85.1%*	28.6%*	41.4%
East Dunbartonshire	93.8%*	16.3%*	30.6%*
Inverclyde	87.1%	29.9%*	40.9%
Renfrewshire	91.3%*	19.5%*	35.3%



3.1 **Summary of Key Messages – Health Behaviours**

Comparisons with NHSGGC - those in East Dunbartonshire were:

- less likely to smoke or to use e-cigarettes
- less likely to be exposed to second-hand cigarette smoke, and among non-smokers, less likely to be exposed to cigarette smoke in homes
- less likely to have an AUDIT score which indicated alcohol-related risk
- (among those who drink alcohol) less likely to drink before a night out
- more likely to agree that getting drunk is perfectly acceptable, or that it is easier to enjoy a social event with a drink of alcohol
- more likely to agree that it was acceptable to drink alcohol on local train services or buses
- more likely to meet the target of consuming five or more portions of fruit/vegetables per day
- less likely to consume cakes/biscuits/pastries, or takeaways at least weekly
- more likely to consume puddings/desserts or shop bought coffee at least weekly
- less likely to meet the target of 150 minutes of physical activity per week
- exhibiting lower mean levels of sedentary behaviours.

Differences by Age and Gender

- Those aged 25-34 were the most likely to be smokers.
- Exposure to second hand smoke was most common among those aged under 35.
- Those aged 35-54 were the most likely to drink alcohol, but those aged under 25 were the most likely to have an AUDIT score which indicated alcohol-related risk.
- Men were more likely than women to drink alcohol and more likely to have an AUDIT score which indicated alcohol-related risk. Among those who drank alcohol, men

were more likely than women to binge drink. Men were also more likely than women to agree that getting drunk was perfectly acceptable or that it was acceptable to drink on intercity trains.

- Drinkers aged under 35 were more likely to drink before a night out.
- Those aged 35 or over were more likely to meet the target of consuming five or more portions of fruit/vegetables per day. Women were more likely than men to meet this target.
- Those aged under 25 were those most likely to meet the target of 150 minutes of physical activity per week.

Differences by Deprivation

Those in the most deprived areas were:

- more likely to smoke and more likely to be exposed to second hand smoke
- less likely to agree it was acceptable to drink on intercity train services
- more likely to feel there were too many places selling alcohol in their area
- less likely to consume sweets/chocolate, puddings/desserts, shop bought coffee or readymade meals at least weekly
- more likely to meet the target of 150 minutes of physical activity per week.

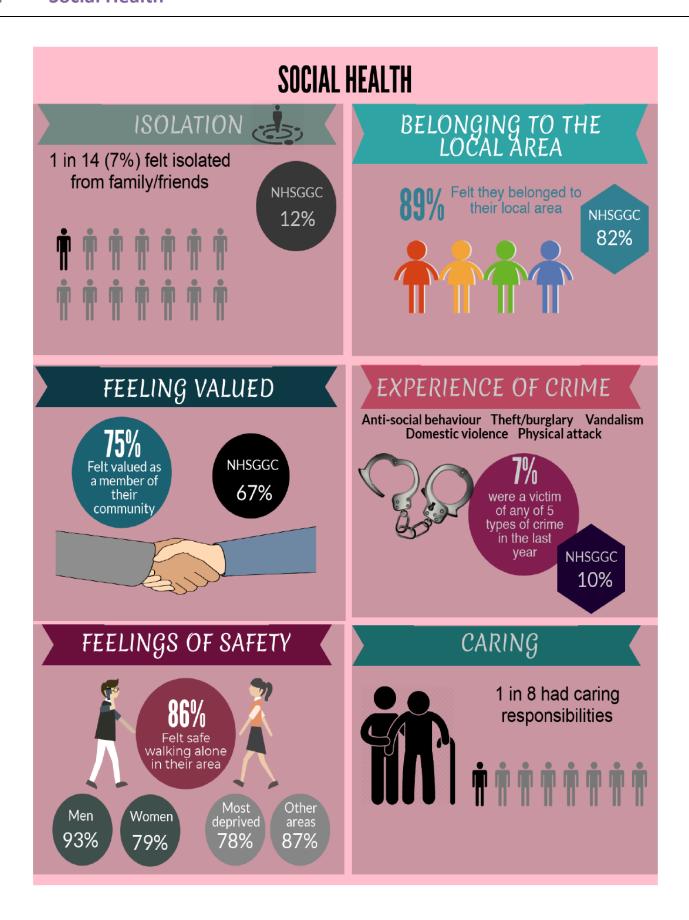
Trends

There was a continued reduction in smoking rates observed since 2008.

Key Indicators – Health Behaviours 3.2

	Current smokers	Exposed to second hand smoke	Drink alcohol	AUDIT score indicating risk
NHSGGC	20.4%	26.5%	64.7%	14.5%
Glasgow City	24.4%*	29.9%*	65.7%	17.0%*
East Dunbartonshire	12.2%*	23.5%*	61.6%	8.3%*
Inverclyde	20.3%	25.8%	67.9%	12.5%
Renfrewshire	15.4% *	28.4%	52.3%*	9.1%*

	Binge drinks (as % of drinkers)	Consumes 5+ portions fruit/veg per day	150 mins+ per week of physical activity
NHSGGC	57.9%	41.4%	57.5%
Glasgow City	61.6%*	38.8%*	64.8%*
East Dunbartonshire	54.7%	51.6%*	53.1%*
Inverclyde	56.2%	42.4%	48.3%*
Renfrewshire	47.2%*	45.9% *	47.4%*



4.1 Summary of Key Messages – Social Health

Comparisons with NHSGGC - those in East Dunbartonshire were:

- less likely to feel isolated from family/friends
- more likely to feel they belonged to their local areas, feel valued as a member of the community and feel that local people working together can influence local decisions
- less likely to have experienced discrimination or been the victim of crime in the last year
- more likely to feel safe using public transport or walking alone in their area
- less likely to be concerned about social or environmental issues in the area
- more likely to have positive perceptions of local services.

Differences by Age and Gender

- Those aged 75 or over were the most likely to be lonely.
- Those aged 65 or over were more likely to feel they belonged to their local area, feel valued as a member of their community, or feel that by working together local people could influence local decisions.
- Women were more likely than men to have experienced discrimination in the last year.
- Men were more likely than women to feel safe walking alone in their area even after dark.
- Women were more likely than men to be carers.

Differences by Deprivation

Those in the most deprived areas were:

- less likely to feel they belonged to their local area
- less likely to feel that local people could influence local decisions
- more likely to have been discriminated against, or to have been a victim of crime in the last year
- less likely to feel safe walking alone in their area
- more likely to have concerns about social issues and environmental issues in their area
- less likely to have positive perceptions of leisure/sports facilities or activities for young people in their area.

Trends

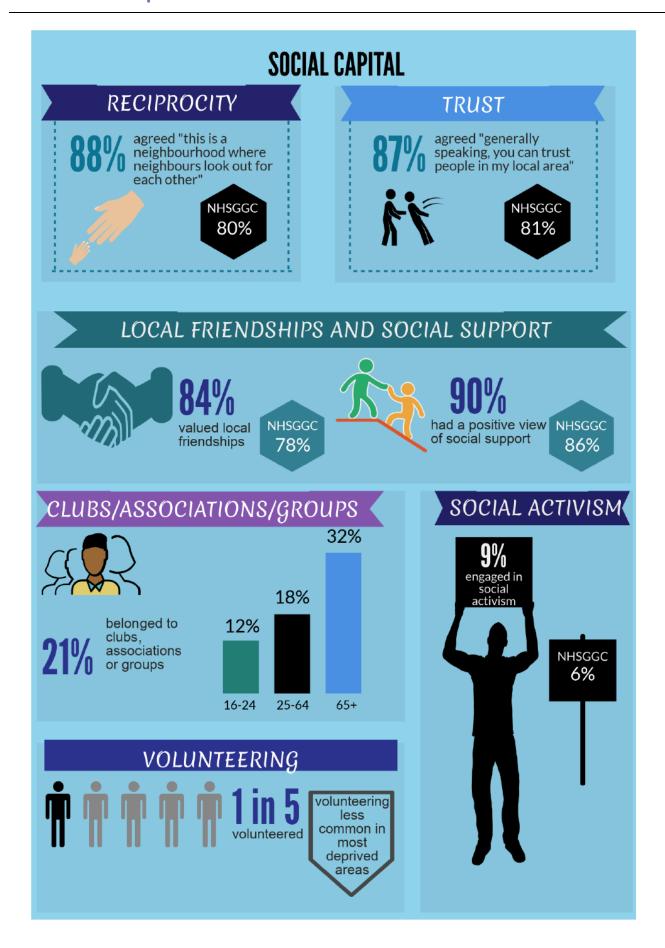
- There was no significant change between 2014/15 and 2017/18 in the proportion who felt isolated, who felt they belonged to their local area, who felt valued as a member of their community or who felt that local people could influence local decisions.
- There was an increase between 2014/15 and 2017/18 in the proportion who felt safe using local public transport or walking alone in their area.

Key Indicators – Social Health 4.2

	Isolated from family and friends	Felt Lonely in last 2 weeks (at least some of the time)	Feel belong to the local area
NHSGGC	11.8%	17.3%	81.5%
Glasgow City	15.2%*	19.5%*	75.9%*
East Dunbartonshire	7.2%*	15.9%	88.8%*
Inverclyde	9.2%*	17.5%	88.1%*
Renfrewshire	6.9%*	17.3%	88.0%*

	Feel valued as a member of the community	Feel local people can influence local decisions	Experienced discrimination
NHSGGC	66.7%	74.8%	4.7%
Glasgow City	61.2%*	69.5%*	6.7%*
East Dunbartonshire	75.5% *	84.2%*	2.1%*
Inverclyde	73.2%*	75.8%	2.0%*
Renfrewshire	73.8%*	80.7%*	2.6%*

	Feel safe using local public transport	Feel safe walking alone in local area even after dark	Has caring responsibilities
NHSGGC	91.4%	76.5%	13.8%
Glasgow City	90.2%	74.6%	14.4%
East Dunbartonshire	94.8%*	86.1%*	12.5%
Inverclyde	92.4%	76.2%	13.5%
Renfrewshire	92.5%	78.2%	15.5%



5.1 **Summary of Key Messages – Social Capital**

Comparisons with NHSGGC - those in East Dunbartonshire were:

- more likely to have positive views of reciprocity and trust
- more likely to value local friendships
- more likely to have a positive view of social support.

Differences by Age and Gender

- Those aged 25-34 were the least likely to have positive views of reciprocity or trust or to value local friendships.
- Women were more likely than men to value local friendships.
- The youngest and oldest age groups were the most likely to have a positive perception of social support, but the least likely to engage in social activism.
- Women were more likely than men to volunteer.
- Those aged 65 or over were the most likely to belong to clubs, associations or groups.

Differences by Deprivation

Those in the most deprived areas were:

- less likely to volunteer
- less likely to belong to clubs, associations or groups.

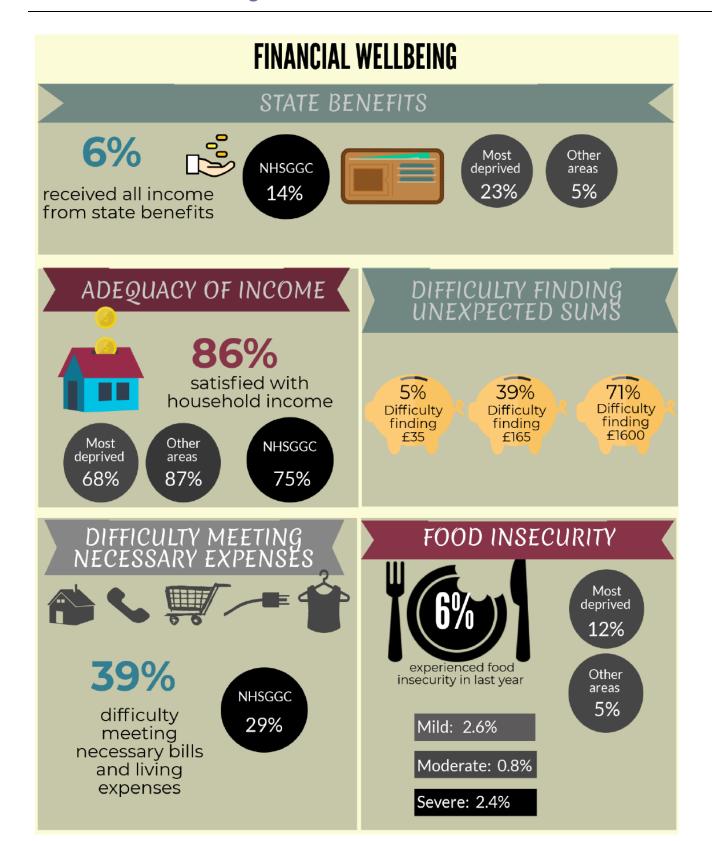
Trends

• There was no significant change between 2014/15 and 2017/18 in the proportion who were positive about reciprocity or trust, the proportion who valued local friendships or the proportion who were positive about social support.

Key Indicators – Social Capital 5.2

	Positive perception of reciprocity	Positive perception of trust	Value local friendships	Positive perception of social support
NHSGGC	79.5%	80.9%	77.7%	86.1%
Glasgow City	74.3%*	77.0%*	72.9%*	82.6%*
East Dunbartonshire	87.9%*	86.8%*	84.3%*	90.0%*
Inverclyde	85.7%*	83.8%*	81.2%*	89.8%*
Renfrewshire	85.2%*	84.6%*	79.6%	87.6%

	Volunteered in last year	Belong to clubs, associations or groups	Engaged in social activism in last year
NHSGGC	17.8%	23.0%	6.5%
Glasgow City	20.0%*	26.0%*	6.9%
East Dunbartonshire	20.2%	20.8%	9.4%*
Inverclyde	14.9%*	17.0%*	6.2%
Renfrewshire	9.9%*	17.4%*	3.3%*



Summary of Key Messages – Financial Wellbeing 6.1

Comparisons with NHSGGC - those in East Dunbartonshire were:

- less likely to receive all income from benefits and less likely to have been affected by benefits changes
- more likely to have positive views of the adequacy of their household income
- more likely to report difficulty meeting essential expenses
- less likely to report having difficulty meeting unexpected expenses of £35, £165 or £1,600
- less likely to report experiences which indicate food insecurities
- less likely to spend money on gambling.

Differences by Age and Gender

- Those aged 25-34 were the least likely to have a positive perception of the adequacy of their income.
- Those in the youngest age group and women were more likely to report difficulties meeting essential expenses.
- Those aged 35-44 were the most likely to report experiences which indicate food insecurities.
- Those aged 45-54 were the most likely to gamble, and men were more likely than women to gamble.

Differences by Deprivation

Those in the most deprived areas were:

- more likely to receive all household income from benefits
- less likely to have a positive view of the adequacy of their household income
- less likely to say there was no-one living in poverty in their area and more likely to attribute poverty to lack of jobs or laziness/lack of willpower
- more likely to report difficulties meeting unexpected costs of £35, £165 or £1,600
- more likely to report experiences indicating food insecurities
- more likely to gamble.

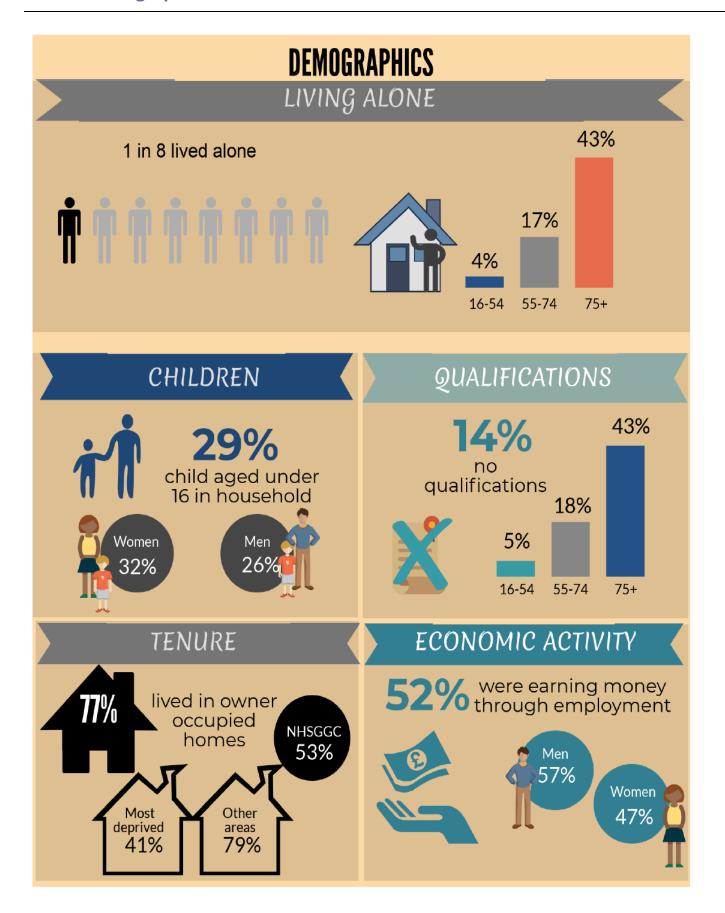
Key Indicators – Financial Wellbeing 6.2

	All household income from state benefits	Positive perception of adequacy of household income	Difficulty meeting essential living costs
NHSGGC	13.8%	75.3%	29.4%
Glasgow City	17.2%*	68.1% *	30.1%
East Dunbartonshire	6.0%*	86.3%*	39.4%*
Inverclyde	17.2%*	78.3% *	32.0%
Renfrewshire	7.5%*	84.1%*	28.0%

	Problem	Problem	Problem finding
	finding £35	finding £165	£1,600
NHSGGC	10.3%	43.8%	80.0%
Glasgow City	12.5%*	46.4%*	83.7%*
East Dunbartonshire	5.0%*	38.9%*	71.4%*
Inverclyde	10.3%	43.0%	83.2%
Renfrewshire	8.4%	48.2%	81.8%

	Experienced benefits sanctions (based on those who receive benefits)	Experienced delay in benefit payments (based on those who receive benefits)
NHSGGC	4.5%	6.6%
Glasgow City	5.3%	7.7%
East Dunbartonshire	2.0%	7.2%
Inverclyde	1.1%*	2.3%*
Renfrewshire	4.8%	5.9%

	Experienced food insecurity in last year	Experienced severe food insecurity in last year
NHSGGC	8.6%	3.7%
Glasgow City	10.8%*	4.6%*
East Dunbartonshire	5.7%*	2.4%*
Inverclyde	7.0%	2.7%
Renfrewshire	6.0%*	2.8%



Summary of Key Messages – Demographics 7.1

Comparison with NHSGGC - those in East Dunbartonshire were:

- less likely to live alone
- more likely to live in owner-occupied homes and less likely to rent their home
- less likely to say they had no qualifications

Differences by Age and Gender

- The likelihood of living alone increased with age. Men were more likely than women to live alone; women were more likely to live with children.
- Those in the oldest age groups were the most likely to say they had no qualifications.
- Those aged 35 or over were more likely to live in owner-occupied homes.
- Those aged 35-54 were the most likely to be economically active, and men were more likely than women to be economically active.

Differences by Deprivation

Those in the most deprived areas were:

- more likely to say they had no qualifications
- less likely to live in owner-occupied homes and more likely to live in rented homes

Trends

There was an increase between 2014/15 and 2017/18 in the proportion who had no qualifications.

7.2 **Key Indicators – Demographics**

	No qualifications
NHSGGC	17.8%
Glasgow City	19.2%
East Dunbartonshire	14.1%*
Inverclyde	19.4%
Renfrewshire	20.6%*