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**To: Renfrewshire Integration Joint Board**

**On: 25 January 2019**

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**Report by: Chief Officer**

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**Subject: Adult Health and Wellbeing Survey 2017/18**

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## **1. Summary**

- 1.1 This report summarises the results from the NHS Greater Glasgow and Clyde 2017/18 Adult Health & Wellbeing Survey for Renfrewshire.
- 1.2 As this is the fourth Adult Survey carried out in Renfrewshire, we are able to compare some of the results with previous surveys carried out in 2008, 2011 and 2014. The Health and Wellbeing Survey is formed around a set of core questions to allow monitoring of trends over time where possible. However, in a few cases, core questions have been modified and therefore cannot be used for monitoring trends.
- 1.3 In Renfrewshire, 600 face-to-face, in-home interviews were conducted with adults (aged 16 and over). Adults were randomly selected within each sampled household using the last birthday technique.
- 1.4 The full survey report provides information on people's health behaviours and perceptions of their health and wellbeing. It also covers their views on the local environment including experiences of crime, feelings of safety and the quality of local services, as well as feelings of trust, local friendships, volunteering and social activism.
- 1.5 The Adult Health and Wellbeing Survey 2017/18 Renfrewshire Summary Report is attached as Appendix 1.

The full report is available online at:

<https://www.renfrewshire.hscp.scot/media/9026/NHS-GGC-HW-Survey-1718/pdf/..pdf?m=1546964774013>

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## **2. Recommendation**

It is recommended the IJB:

- Note the Adult Health & Wellbeing Survey 2017/18 for Renfrewshire HSCP and its implications for the Strategic Plan 2019-22.
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### **3. Survey Results**

- 3.1 The objectives of the survey are to examine trends in key indicators since 2008; monitor and compare changes amongst those living in the most deprived areas with other areas; and provide health and wellbeing information at HSCP level and determine change over time.
- 3.2 Some results show improvement over time. Examples include:
- Percentage of people smoking has reduced from 35% in 2008 to 15% in 2018
  - Percentage of people exposed to second hand smoke has reduced from 43% in 2008 to 28% in 2018
  - Percentage of people consuming 5 or more portions of fruit/vegetables per day has increased to 46% from 41% in 2014
- 3.3 The survey also shows that only 47% of people in Renfrewshire met the physical activity target to be active for at least 150 minutes per week. This is lower than the Greater Glasgow and Clyde average of 58%.
- 3.4 One in five (20%) of respondents said they had a long-term condition or illness that substantially interfered with their day to day activities. Those aged 65 and over were the most likely to have a limiting condition or illness and those in the most deprived areas were twice more likely than those in other areas to have a limiting long-term condition or illness.
- 3.5 The survey results will be presented to the Strategic Planning Group and shared with our partners and the wider community. We will also use the results to inform the Strategic Plan for 2019-22. In working to achieve our vision that Renfrewshire is a caring place where people are treated as individuals and are supported to live well, the Partnership will use the survey results to improve services and focus specifically on reducing inequalities.

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### **Implications of the Report**

- 1. Financial** – None
- 2. HR & Organisational Development** – None
- 3. Community Planning** – None
- 4. Legal** – Meets the obligations under clause 4/4 of the Integration Scheme.
- 5. Property/Assets** – None
- 6. Information Technology** – None
- 7. Equality & Human Rights** – The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement have been identified arising from the recommendations

contained in the report. The Survey results do however evidence that those living in the most deprived communities have far poorer health outcomes than those living in other areas of Renfrewshire.

- 8. **Health & Safety** – None
- 9. **Procurement** – None
- 10. **Risk** – None
- 11. **Privacy Impact** – None

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**List of Background Papers** – None.

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## Adult Health and Wellbeing Survey 2017/18 Renfrewshire Summary Report

### 1. Introduction

The Health and Wellbeing Survey was carried out in 2017/18 on behalf of NHS Greater Glasgow & Clyde and is the fourth study to be conducted in Renfrewshire.

### 2. Purpose

The 2017/18 survey provides an update for the Renfrewshire area on progress towards performance assessment targets and national health behaviour targets against 2008 baseline data. The Health and Wellbeing Survey is formed around a set of core questions to allow monitoring of trends over time where possible. However, in a few cases, core questions have been modified and therefore cannot be used for monitoring trends. The information helps build a picture of the public's health in Renfrewshire. Results can also be compared to the Greater Glasgow & Clyde average.

### 3. Summary of Methodology

In Renfrewshire, 600 face-to-face, in-home interviews were conducted with adults (aged 16 and over). Adults were randomly selected within each sampled household using the last birthday technique.

The 7,834 completed interviews across the NHS Greater Glasgow & Clyde area were weighted to account for under/over representation of groups within the sample to ensure the 2017/18 sample was as representative as possible of the adult population in the Greater Glasgow & Clyde NHS Board area.

#### Most Deprived 15% Datazones versus other Datazones

Base: All Renfrewshire (600)

Group	% in sample	Renfrewshire % of population (aged 16+)
Most deprived 15% datazones	19.8%	19.6%
Other datazones	80.2%	80.4%

#### Age and Gender Breakdown

Base: All Renfrewshire (587 weighted sample)

Age	% of Sample Male	% of Sample Female	Total % of Sample	Renfrewshire % of population (aged 16+)
16-24	6.5%	6.5%	13.0%	13.0%
25-34	7.5%	7.5%	15.0%	15.2%
35-44	6.8%	7.5%	14.3%	14.4%
45-54	8.9%	10.2%	19.1%	19.0%
55-64	7.8%	8.3%	16.1%	16.1%
65-74	5.8%	6.8%	12.6%	12.4%
75+	4.0%	6.0%	10.0%	8.0%
Total:	47.3%	52.8%	100.1%	98.1%

## 4. Findings

The survey covered many health and wellbeing issues and this summary report focuses on key findings in the following areas:

- Health Behaviours
- People's Perceptions of their Health and Wellbeing
- Social Health
- Social Capital

The survey report which includes the full analysis can be found at: <https://www.renfrewshire.hscp.scot/media/9026/NHS-GGC-HW-Survey-1718/pdf/..pdf?m=1546964774013>

## 5. Health Behaviours

### 5.1 Smoking

Indicator	% of sample in Renfrewshire 2017/18	% of sample in Renfrewshire 2014	% of sample in Renfrewshire 2011	% of sample in Renfrewshire 2008
Current smoker	15%	19%	24%	35%
Exposed to second hand smoke most or some of the time	28%	26%	44%	43%

The rate of smoking in 2017/18 of 15% is significantly less than the rate of 24% in 2011, and has more than halved from the rate of 35% in 2008.

The numbers of people exposed to second hand smoke has reduced from 43% in 2008 to 28% in 2017/18.

### 5.2 Drinking Alcohol

Respondents were asked how often they drank alcohol. Just under half (48%) said they never drank alcohol. One in ten (10%) drank alcohol at least twice per week. Questions about alcohol consumption differed to previous NHSGGC health and wellbeing surveys, so it is not possible to examine trends.

**Binge Drinking** - those who drank alcohol were asked how often they had 6 or more units if female, or 8 or more if male on a single occasion in the last year. In total, 47% of drinkers had drunk alcohol at this level in the last year – 1% had done so daily/almost daily, 12% weekly, 12% monthly, and 22% less than monthly.

Drinkers aged under 35 were the most likely to have binged in the last year and those aged 65 and over were the least likely. Drinkers in the most deprived areas were more likely to have binged.

**Attitudes to Alcohol** - respondents were asked the extent to which they agreed or disagreed with the statement 'getting drunk is a perfectly acceptable thing to do'. Two in five (39%) agreed with this (37% agreed and 2% strongly agreed), while 22% neither agreed nor disagreed and 39% disagreed/strongly disagreed (24% disagreed and 15% strongly disagreed).

### 5.3 Physical Activity

Respondents were asked on how many days in the last week had they taken a total of 30 minutes or more of physical activity which was enough to increase their heart rate, make them feel warmer and made them breathe a little faster. Fifteen percent said that they had not done this on any day in the last week, but one in four (26%) had done this on five or more days in the last week. The mean number of days was 3.1.

Subsequently, respondents who had been active for 30 minutes or more on one to four days were asked whether they had done this type of activity for at least a total of two and a half hours (150 minutes) over the course of the last week. Combining the responses to both questions, just under half (47%) met the target of at least 150 minutes of exercise per week (where at least one day included 30 minutes or more).

A different measurement was used for the 2014 survey therefore the results cannot be compared.

Indicator	% of sample in Renfrewshire 2017/18	% of sample in NHSGGC 2017/18
Takes at least 150 minutes of moderate exercise per week	47%	58%

Compared to those in the NHS Greater Glasgow & Clyde area as a whole, those in Renfrewshire were less likely to meet the target of 150 minutes or more of physical activity per week. Those aged under 35 were the most likely to meet the target for physical activity, and men were more likely than women to meet the target.

### 5.4 Fruit and Vegetable Consumption

The national target for fruit and vegetable consumption is to have at least five portions of fruit and/or vegetables per day. Respondents were asked how many portions of fruit and how many portions of vegetables they had consumed on the previous day. Just under half (46%) met the target of five portions; an increase from 41% in 2014. One in thirteen (8%) had consumed no fruit or vegetables in the previous day.

Men were less likely than women to meet the target for fruit/vegetable consumption (39% male; 52% female). Those in the most deprived areas were less likely to meet the target of consuming five or more portions of fruit/vegetables per day (34% most deprived; 49% other areas).

Indicator	% of sample in Renfrewshire 2017/18	% of sample in Renfrewshire 2014
Consumes 5 or more portions of fruit/vegetables per day (national target)	46%	41%

## **6. Health and Wellbeing**

### **6.1 General Health**

Respondents were asked to describe their general health over the last year on a five point scale (very good, good, fair, bad or very bad). Overall, four in five (80%) gave a positive view of their health, with 23% saying their health was very good and 57% saying their health was good. However, 20% gave a negative view of their health, with 13% saying their health was fair, 7% saying it was bad and 1% saying it was very bad.

Those in Renfrewshire were more likely to have a positive view of their general health than the NHSGGC average (80% Renfrewshire; 75% NHSGGC).

### **6.2 Long Term Conditions or Illness**

One in five (20%) said they had a long-term condition or illness that substantially interfered with their day to day activities. Of these:

- 61% had a physical disability
- 18% had a mental or emotional health problem
- 63% had a long-term illness

Those aged 65 and over were the most likely to have a limiting condition or illness while those in the most deprived areas were twice more likely than those in other areas to have a limiting long-term condition or illness.

## **7. Social Health**

### **7.1 Isolation**

One in fourteen (7%) said that they felt isolated from family and friends. Those in Renfrewshire were less likely to feel isolated than the NHSGGC average (7% Renfrewshire; 12% NHSGGC).

Those in the most deprived areas were much more likely to feel isolated (15% most deprived; 5% other areas).

### **7.2 Loneliness**

Respondents were asked how often they had felt lonely in the past two weeks. Two percent said that had felt lonely all the time, 4% said often, 11% said some of the time, 31% said rarely and 52% said never.

Those in the most deprived areas were more likely to feel lonely at least some of the time (24% most deprived; 16% other areas).

### **7.3 Caring Responsibilities**

One in six (16%) said that they looked after, or gave regular help or support to family members, friends, neighbours or others because of long-term physical or mental ill-health or disability, or problems relating to old age. Those aged under 35 were less likely to have caring responsibilities.



## **7.4 Belonging to the Local Area**

Respondents were also asked to indicate the extent to which they agreed or disagreed with the statement “I feel I belong to this local area”. In total, 88% agreed with this (22% strongly agreed and 66% agreed), while 6% neither agreed nor disagreed and 6% disagreed (5% disagreed and 1% strongly disagreed).

## **8. Social Capital**

In Renfrewshire 85% of respondents agreed that they lived in a ‘neighbourhood where neighbours look out for each other’. 85% also had a positive view of trust in their area. Those aged under 65 were less likely than older respondents to have positive views of reciprocity or trust.

80% of respondents valued local friendships and 88% had a positive view of social support. 17% belonged to clubs, associations or groups and one in 10 volunteered although volunteering is less common in the most deprived areas.

## **9. Next Steps**

The survey results will be presented to the Strategic Planning Group and shared with our partners and the wider community. We will also use the results to inform the Strategic Plan for 2019-22. In working to achieve our vision that Renfrewshire is a caring place where people are treated as individuals and are supported to live well, the Partnership will use the survey results to improve services and focus specifically on reducing inequalities.

## **10. Contact Details**

If you require more information on the Health and Wellbeing Survey, please contact:

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