

JSNA Annual Report 2023

Southwark's Joint Strategic Needs Assessment

OVERVIEW OF HEALTH & WELLBEING

PUBLIC HEALTH DIVISION

CHILDREN & ADULTS DEPARTMENT

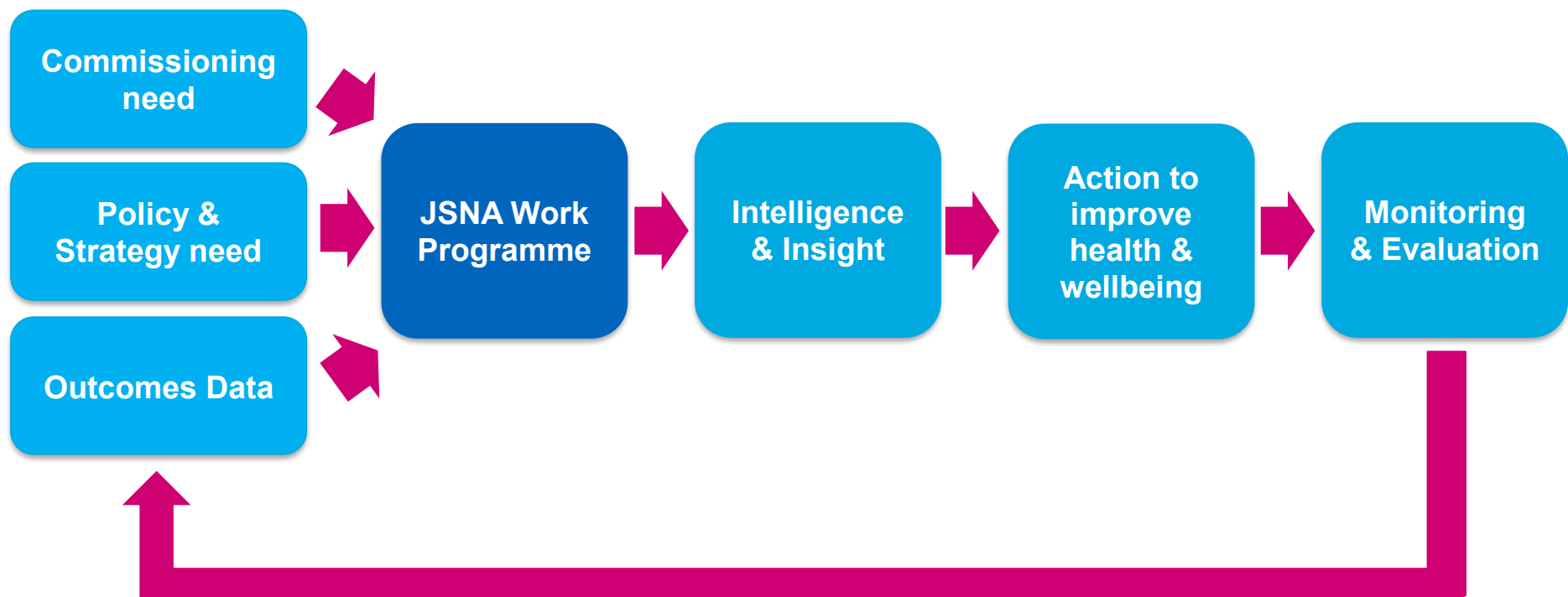
LONDON BOROUGH OF SOUTHWARK



1. BACKGROUND

The JSNA Annual Report provides a broad overview of health and wellbeing in Southwark. It seeks to provide an analysis of our changing population, along with details of the health inequalities that exist in the borough. These quantitative data are intended to complement the Annual Public Health Report (APHR), which this year focuses on the impact of poor air quality on health. The APHR is available via: www.southwark.gov.uk/aphr.

This report forms part of the borough's Joint Strategic Needs Assessment (JSNA) work programme, and supports the monitoring of key health and wellbeing outcomes set out in the Joint Health & Wellbeing Strategy (JHWS) and other local strategies and plans.



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3. SUMMARY

3.1 Overview of Southwark

Southwark is a densely populated and diverse inner-London borough situated on the south bank of the River Thames, with Lambeth to the west and Lewisham to the east. The borough is made up of a patchwork of communities: from leafy Dulwich in the south, to bustling Peckham and Camberwell, and the rapidly changing Rotherhithe peninsula. Towards the north, Borough and Bankside are thriving with high levels of private investment and development. Yet there remain areas affected by high levels of disadvantage, where health outcomes fall short of what any resident should expect.

Our population is a young, diverse and growing, with large numbers of young adults and residents from a wide range of ethnic and social backgrounds.

- The average age (32.4 years) is more than two years younger than London, and almost seven years younger than England.
- Around half (51%) of people living in Southwark have a White ethnic background compared to 81% nationally.
- The largest ethnic group other than White is 'Black, Black British, Caribbean or African', accounting for one-quarter (25%) of Southwark residents.
- Over 80 languages are spoken in the borough, with 79% of the population speaking English as their main language.

- There were over 40 distinct religions identified among Southwark residents.
- Southwark has the 4th largest LGB+ population in England, with 8% of residents (nearly 21,000 people) aged 16+ identifying as non-heterosexual. Southwark also has the 5th largest trans/non-binary population in England.
- Over 18,000 residents provide some level of unpaid care, equivalent to 6% of Southwark's population.

3.2 Achievements

Across the borough there have been significant improvements in health and wellbeing over the last decade and there are many areas of success that should be celebrated:

- Our residents are living longer lives than ever before, with life expectancy comparable or better than the national average.
- Levels of relative deprivation in the borough continue to reduce.
- Child vaccination rates are generally comparable or better than the London average.
- Key risk factors such as smoking, alcohol and physical inactivity are comparable or better than the national average.
- Preventable mortality has reduced by almost half since 2001, narrowing the gap with England.

3.3 Assets

Southwark benefits from a wide range of social and physical assets that help our communities to maintain and sustain good health and wellbeing.

- The borough has an active and large range of community, voluntary and faith organisations working to support local residents. Embedded within our communities, these groups are key partners in efforts to tackle the inequalities we see in Southwark.
- There are a diverse range of high quality open spaces in Southwark, from the Thames pathway, to our extensive network of parks and community gardens. These outdoor spaces are complimented by a range of modern leisure facilities such as the Castle Centre and Peckham Pulse. Such assets provide opportunities for physical activity, sport and play, helping reduce stress and prevent the development of long-term conditions.
- Southwark also has a network of modern libraries located across the borough. These facilities provide spaces for the whole community to use, whether that be through baby sensory sessions, community group activities, or accessing local council services.
- The borough is also home to a number of world-class health and care facilities, from our large hospital trusts, through to our community based clinics and hubs. These services provide our residents with access to high quality support and care for those in need.

These are just some examples of the social and physical assets in Southwark that partners and residents can draw on as we seek to improve health and reduce inequalities in our borough.

3.4 Challenges

Although there have been substantial improvements in health outcomes in Southwark, many challenges remain. The lasting impact of the COVID-19 pandemic and the on-going cost of living crisis continues to exacerbate the inequalities that too many people experience. These inequalities are both avoidable and unfair. While inequalities vary across different issues, there are a number of communities and population groups within the borough that consistently experience poorer outcomes than others.

Geographic Inequalities

Across a wide range of health, social and economic measures, from child poverty through to obesity, hospital admissions and life expectancy, outcomes are poorer in central and northern parts of Southwark. In particular, communities in Faraday and Peckham wards. However, it is important to acknowledge that pockets of disadvantage also exist within areas of affluence, such as the Kingswood estate in Dulwich Wood and Downtown estate in Surrey Docks.

Population Inequalities

There are also significant gaps in outcomes between population groups in Southwark. These often mirror the inequalities we see at a

national level, with those from Black, Asian and minority ethnic groups experiencing poorer outcomes compared to those from a White ethnic background. In particular, residents from a Black African and Black Caribbean background are more likely to live in communities with high levels of disadvantage, develop a greater number of long-term conditions, have poorer mental health, and experience discrimination and racism when accessing services.

While we have indications and examples of the inequality in outcomes between different ethnic groups, there remain gaps in our understanding at a local level. A number of national reviews have identified the continued need to improve the recording and the analysis of ethnicity data. Locally, as nationally, additional work is required to improve the quality of ethnicity data, to ensure we support those most in need and reduce inequalities. This is particularly the case for groups that are too often excluded from national data collections, such as residents with a Latin American background.

Southwark has one of the largest LGBTQI+ communities in the country. There is increasing academic evidence that key public health challenges disproportionately impact this population group, with higher levels of smoking, alcohol use, incidence of some cancers and mental ill-health. LGBTQI+ individuals also experience discrimination and homophobia when accessing health, care and other services. An in-depth needs assessment for this population group will be undertaken in 2023, building on the new data released through the 2021 Census. As with ethnicity, additional work is required to collect data on sexual orientation within local services to enable better monitoring and tackle local inequalities.

There are also a number of notable health inclusion groups in Southwark. These are groups that are often socially excluded, have multiple risk factors for poor health, and experience stigma and discrimination, including:

- People with learning disabilities
- Carers
- Rough sleepers
- Asylum seekers and refugees

In-depth needs assessments for these groups are accessible via www.southwark.gov.uk/jsna.

Intersectionality

The national and local evidence base regarding the health inequalities experienced by different population groups continues to improve. However it is important to acknowledge that these groups are not homogenous. The experiences and outcomes of specific ethnic groups, or those with the same sexual orientation are not equal. As we plan interventions, services and strategies to improve outcomes and reduce inequalities within the borough it is important to consider how different demographic and social characteristics overlap and intersect, magnifying disadvantage.

Further work will be undertaken this year to understand the extent of the intersection and overlap between vulnerable population groups in the borough.

Wider Determinants of Health

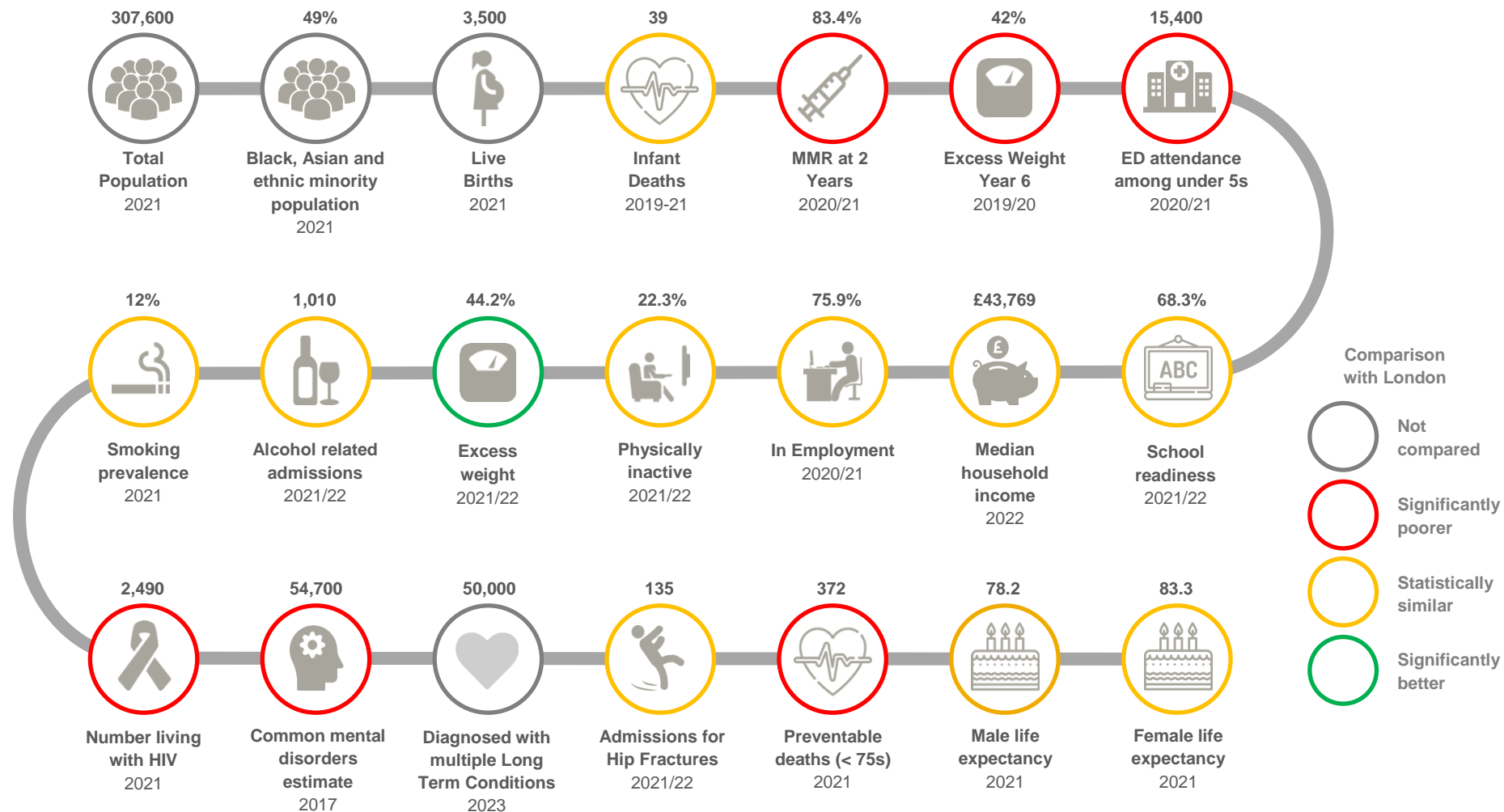
Despite the COVID-19 pandemic and cost of living crisis, many of the socio-economic outcomes in Southwark are comparable to the either the London or national average. However, this masks significant inequalities experienced by many of our residents. A third of our children live in poverty, and significant numbers live in homes suffering from food insecurity – exacerbated by the cost of living crisis.

The importance of addressing the wider determinants of health was clearly outlined in the Marmot Review in 2010: “*This link between social conditions and health is not a footnote to the ‘real’ concerns with health – health care and unhealthy behaviours – it should become the main focus.*” What was true in 2010 remains true today. Only by improving the social and economic conditions in which our residents live can we make meaningful and sustainable improvements in health and reduce inequalities.

The following sections of this report provide and update on health and wellbeing outcomes in Southwark, along with the inequalities in the borough. In addition to this summary report additional in-depth needs assessments are underway, or planned this year, including:

- Children & Young People’s Mental Health & Wellbeing
- LGBTQI+
- Neighbourhood Profiles
- On-going monitoring of the cost of living crisis

4. SOUTHWARK HEALTH & WELLBEING INFOGRAPHIC



5. HEALTH & WELLBEING GEOGRAPHIC INEQUALITY INFOGRAPHIC

There is a wide and growing range of data that highlight the geographical inequality in health and wellbeing outcomes in the borough, often linked to socio-economic disadvantage.

Our poorest outcomes are concentrated in our most deprived neighbourhoods

Faraday
has the highest
level of socio-
economic
deprivation



64%
are from a non-
White ethnic
background



£35,000
median
income



33%
of children
under 16 live
in poverty



9.6%
of adults are
unemployed



52%
social renters



25% above
the average
crime rate for
London



71 per 1000
residents have 3
or more long term
health conditions



4% above
the national
average for
emergency
hospital
admissions



78.8
male life
expectancy
84.5 female
life expectancy



**Dulwich
Village**
has the lowest
level of socio-
economic
deprivation

21%
are from a non-
White ethnic
background

£74,000
median
income

5%
of children
under 16 live
in poverty

2.6%
of adults are
unemployed

13%
social renters

23% below
the average
crime rate for
London

34 per 1000
residents have 3
or more long
term health
conditions

45% below
the national
average for
emergency
hospital
admissions

87.1
male life
expectancy
89.5 female
life expectancy

6. HEALTH & WELLBEING ETHNICITY INEQUALITY INFOGRAPHIC

Local data on inequalities between demographic groups highlight the poorer outcomes among those from Black African and Black Caribbean backgrounds. However this data is limited at a local level, often relying on bespoke data collection or research projects.

Residents from Black African and Black Caribbean backgrounds have amongst the poorest outcomes in the borough

Black African & Black Caribbean residents have amongst the poorest health & wellbeing outcomes



72% of households comprised solely of Black residents experience disadvantage



47% Black children in Year 6 are overweight or obese



56% Black students achieve a strong pass in English & Maths



28% Black adults experience food insecurity



53% Bowel cancer screening uptake in Black population



11% Black residents have 3 or more long-term health conditions



White residents have amongst the best health & wellbeing outcomes

45% of households comprising solely of White residents experience disadvantage

31% White children in Year 6 are overweight or obese

62% White students achieve a strong pass in English & Maths

9% White adults experience food insecurity

62% Bowel cancer screening uptake in White population

7% White residents have 3 or more long-term health conditions

HEALTH & WELLBEING WARD MATRIX

Ward Code	Multi Ward Area	Electoral Ward	People									Place				Start Well			Live Well					Age Well						
			Total Population	Population aged under 20	Population aged 20-64	Population aged 65+	Non White-British Population	Residents unable to speak English well or at all	Residents providing unpaid care	Residents with a disability	IMD Score	Fuel Poverty	Unemployment	Long-term unemployment	Breast Feeding Continuation	Emergency admissions in under 5s	Excess Weight - Year 6	Cancer Incidence	Emergency hospital admissions	Emergency hospital admissions	Emergency hospital admissions for	Emergency hospital admissions for	Emergency hospital admissions for all causes	Deaths from cancer	Deaths from CVD	Deaths from resp. diseases	Male L.E.	Female L.E.		
			2021	2021	2021	2021	2021	2021	2021	2021	2019	2020	2021/22	2021/22	2018/19-2021/22	2018/19-2020/21	2019/20-2021/22	2015-2019	2016/17-2020/21	2016/17-2020/21	2016/17-2020/21	2016/17-2020/21	2016-2020	2016-2020	2016-2020	2016-2020	2016-2020			
			Number	Number	Number	Number	%	%	%	%	Score	%	%	%	%	Rate per 1,000	%	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Years	Years		
E05011106	North East	North Bermondsey	15,300	2,600	11,400	1,300	60.0	2.3	5.9	13.5	22.4	8.6	4.9	0.6	81.1	93	42.9	89	91	104	259	93	103	102	97	85	79.0	83.2		
E05011112		Rotherhithe	15,600	3,000	11,500	1,200	66.8	2.8	5.7	13.4	24.6	9.1	5.6	1.3	79.6	92	40.3	97	91	90	265	103	97	87	81	105	79.9	83.5		
E05011116		South Bermondsey	15,900	3,300	11,400	1,300	64.6	4.1	7.4	15.4	28.3	11.6	7.9	1.3	80.2	113	42.4	102	107	87	213	80	91	95	96	100	79.1	85.3		
E05011117		Surrey Docks	13,000	2,000	10,100	900	60.6	1.9	5.6	11.0	16.8	4.1	4.9	0.6	85.5	118	37.0	98	83	72	70	79	78	104	74	69	83.2	85.5		
E05011095	North West	Borough & Bankside	9,000	1,700	6,600	700	64.8	1.8	5.6	13.6	21.1	9.2	4.6	0.8	81.8	113	37.0	120	97	74	169	113	87	118	80	72	81.2	84.3		
E05011098		Chaucer	15,000	3,100	10,800	900	74.6	3.5	5.8	12.4	26.4	12.1	6.3	0.6	86.0	121	40.8	94	97	94	157	46	75	99	70	72	83.8	85.3		
E05011104		L.Bridge & W.Berm.	15,100	2,400	11,700	1,000	65.4	2.2	5.5	12.3	23.3	9.7	5.1	1.1	85.2	92	44.3	107	99	82	157	139	128	118	107	143	75.6	80.0		
E05011114		St George's	8,500	1,600	6,300	500	69.3	2.8	6.1	14.1	32.6	13.1	7.5	1.8	83.3	145	42.9	81	126	91	94	67	106	82	138	70	78.3	84.0		
E05011108	East Central	Nunhead & Q. Road	15,600	3,200	10,900	1,500	64.6	3.0	7.5	17.3	33.9	15.2	8.2	0.8	85.4	82	43.8	98	98	86	165	122	143	106	133	143	75.3	80.4		
E05011109		Old Kent Road	19,000	4,600	12,900	1,500	76.7	7.0	6.7	14.4	32.0	12.8	9.7	1.8	79.1	99	50.0	105	105	79	166	95	100	120	95	107	78.8	83.3		
E05011110		Peckham	14,800	3,400	10,200	1,200	81.2	5.1	7.2	14.6	34.0	14.1	11.1	1.6	84.3	89	47.2	97	101	73	128	64	112	109	92	99	77.2	81.3		
E05011111		Peckham Rye	10,200	2,600	6,700	900	50.0	1.6	7.3	13.1	21.3	11.3	6.3	1.1	91.5	72	28.8	105	71	65	104	68	86	99	84	83	79.5	86.3		
E05011113		Rye Lane	14,500	3,000	10,200	1,300	59.3	3.1	6.6	14.9	27.2	12.5	7.5	1.1	89.2	79	42.5	109	79	67	136	57	88	100	97	98	79.7	85.3		
E05011096	West Central	Camberwell Green	15,500	3,200	11,000	1,400	73.0	5.2	6.1	13.9	31.2	15.4	9.2	1.9	85.6	81	47.4	108	88	76	115	77	97	100	114	76	79.3	84.3		
E05011102		Faraday	12,500	3,100	8,400	1,000	76.6	7.2	6.1	12.4	34.3	14.3	9.6	1.8	82.9	93	47.8	101	104	74	183	104	91	101	84	87	78.8	84.5		
E05011105		Newington	13,400	2,900	9,300	1,300	71.7	3.6	7.7	16.7	30.0	11.0	9.0	2.4	81.2	111	40.9	109	109	64	203	99	91	107	87	80	78.0	85.8		
E05011107		North Walworth	15,800	3,000	11,800	1,000	72.0	4.4	5.7	13.3	33.6	14.0	7.7	1.7	83.7	124	50.0	110	112	93	178	110	102	99	125	122	77.9	84.1		
E05011115		St Giles	15,900	3,400	11,200	1,300	64.7	4.2	6.0	13.2	27.2	11.6	7.7	0.9	87.7	81	49.4	108	85	73	126	47	92	108	103	79	79.4	85.0		
E05011097	South	Champion Hill	9,200	2,100	6,400	800	62.7	2.6	6.4	12.9	18.2	11.0	5.7	1.9	89.9	101	34.5	105	70	49	66	82	68	91	61	49	82.0	89.8		
E05011099		Dulwich Hill	9,600	2,100	6,600	900	43.8	2.1	6.8	12.5	18.1	9.2	5.4	0.8	88.8	82	27.7	99	78	76	134	103	97	101	84	106	80.0	83.6		
E05011100		Dulwich Village	10,300	2,800	6,000	1,500	34.8	0.9	7.3	11.1	9.8	7.1	2.6	0.5	90.9	67	19.4	90	55	42	46	59	54	67	55	39	87.1	89.5		
E05011101		Dulwich Wood	10,600	2,800	6,500	1,300	56.9	1.7	7.3	13.5	20.3	9.2	6.1	1.8	90.5	64	38.2	98	72	56	62	105	82	100	86	79	80.1	86.4		
E05011103		Goose Green	13,600	2,800	9,600	1,200	43.4	1.4	6.6	12.4	16.4	7.4	4.9	1.1	88.6	83	22.8	102	67	59	82	62	78	90	76	65	80.8	87.5		
E09000028	Southwark		307,600	64,700	217,300	25,700	64.5	3.4	6.0	18.0	25.8	11.1	6.9	1.2	84.6	93	41.2	102	91	75	148	85	94	101	92	90	79.4	84.3		

Outcome significantly poorer than Southwark	Outcome poorer than Southwark, but not significantly	Outcome better than Southwark but not significantly	Outcome significantly better than Southwark	Statistical significance not applicable
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7. PEOPLE

Southwark is a densely populated and diverse inner London borough situated on the south bank of the River Thames, with Lambeth to the west and Lewisham to the east. The borough is made up of a patchwork of communities: from leafy Dulwich in the south, to bustling Peckham and Camberwell, and the rapidly changing Rotherhithe peninsula. Towards the north, Borough and Bankside are thriving with high levels of private investment and development. Yet there remain areas affected by high levels of socio-economic disadvantage, where health outcomes fall short of what any resident should expect.

7.1 Current population

Home to some 307,600 people, Southwark has a comparatively young population. The average age (32.4 years) is more than two years younger than London, and almost seven years younger than England.

307,600

Population in 2021

32.4 years

Average age in 2021

Figure 1: Southwark census population estimate, 2021

Source: [ONS 2022. Census 2021 - Population and household estimates, England & Wales](#)

Figure 2 shows the age structure of Southwark compared to England (black outline). The chart demonstrates that the low average age in the borough stems not from a large number of children, but from a large number of young working age residents: 41% of the Southwark population is aged 20 to 39.

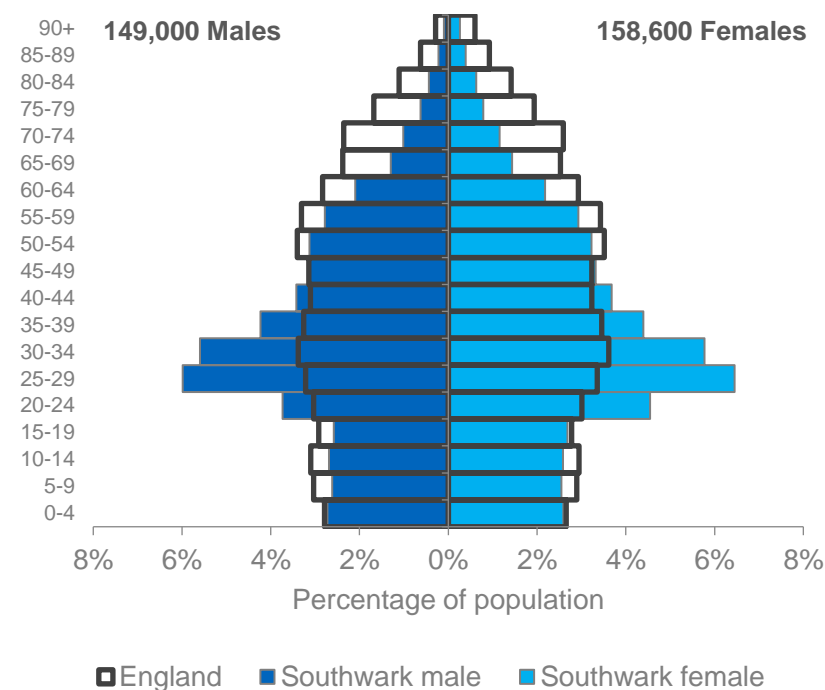


Figure 2: Age structure of Southwark compared to England, 2021

Source: [ONS 2022. Census 2021 - Population and household estimates, England & Wales](#)

7.2 Population Change

The population of Southwark grew by 7% between 2011 and 2021, in line with both the London and national average. However, the change over the decade has not been uniform. Over the ten-year period, the most significant changes in the age structure within Southwark has been among adults aged between 55 and 70, and children aged under 5.

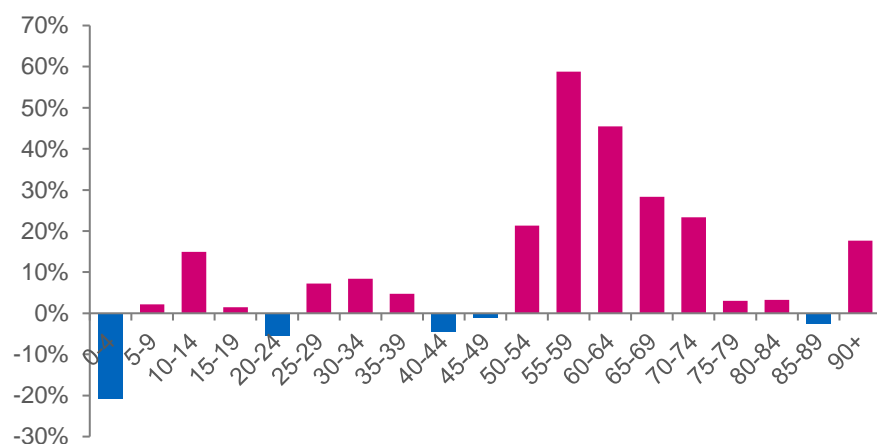


Figure 3: Percentage change in Southwark population by age, 2011 to 2021
Source: [ONS 2022. Census 2021 – Population and household estimates, England & Wales](#)

The latest population projections suggest that our population will continue to grow over the next decade. Population growth is set to take place across almost all parts of the borough, but the largest increases are expected in redevelopment areas around Old Kent Road, Canada Water, and Elephant and Castle.

7.3 Ethnicity, languages and country of birth

Southwark is a diverse borough with residents from a wide range of ethnicities and backgrounds.

Data from the 2021 Census shows that 51% of people living in Southwark have a White ethnic background compared to 81% nationally. Just over a third (36%) of residents identify as 'White: English, British, Welsh, Scottish or Northern Irish' ethnicity.

The largest ethnic group other than White is 'Black, Black British, Caribbean or African', with one-quarter (25%) of Southwark residents reporting this as their ethnicity compared to only 14% of residents across London and 4% of residents nationally. Almost one-fifth (16%) reported 'African' ethnicity and 6% reported a 'Caribbean' ethnicity.

For the first time the 2021 Census provided data on the number of residents identifying as Hispanic or Latin American. In total, 9,200 people in Southwark recorded this as their ethnicity.

The diversity of Southwark is much greater among our children and young people, with roughly equal proportions of young people from White and Black ethnic backgrounds, and 14% with mixed or multiple ethnicities.

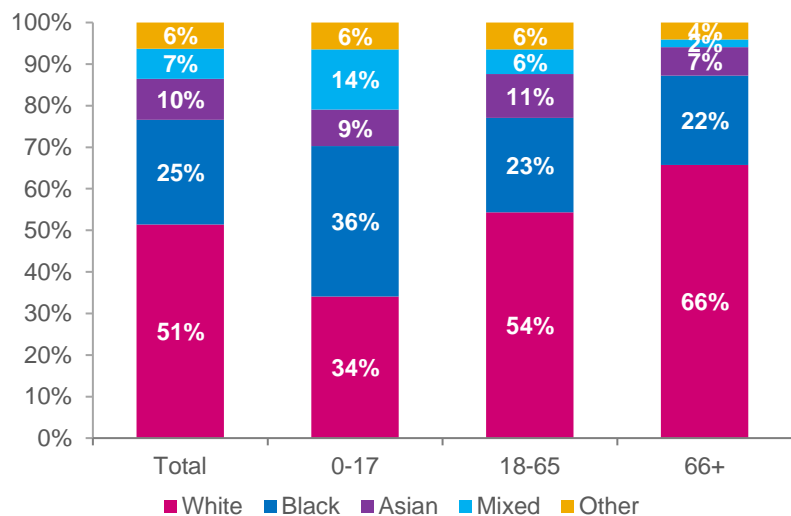


Figure 4: Southwark population by broad ethnic group and age, 2021

Source: [ONS 2023. Census 2021 – Age and ethnic group](#)

Over 80 languages are spoken as main languages in Southwark, with 79% of the population speaking English as their main language. The most common language after English was Spanish, which has almost doubled since 2011 and spoken as a main language by over 13,000 residents. Somali was the most common African language spoken.

The top five main languages (other than English) spoken at the time of the 2021 Census were:

- Spanish (13,000)
- Italian (4,300)
- Portuguese (3,600)
- French (3,500)
- Chinese (excl. Cantonese and Mandarin) (2,200)

Of the 53,700 Southwark residents whose main language is not English, 10,200 (19%) cannot speak English well or have no English proficiency.

A large proportion of our residents were also born overseas, with 40% of Southwark's residents born outside the UK, Channel Islands and Ireland. The top country of birth outside the UK and Ireland was Nigeria, making up around 4% of Southwark residents. Italy, Jamaica, Spain and Ghana also made up a notable proportion of Southwark's population. Around 8% of residents were born in the Americas or the Caribbean, with over half of these residents being born in countries in South America.

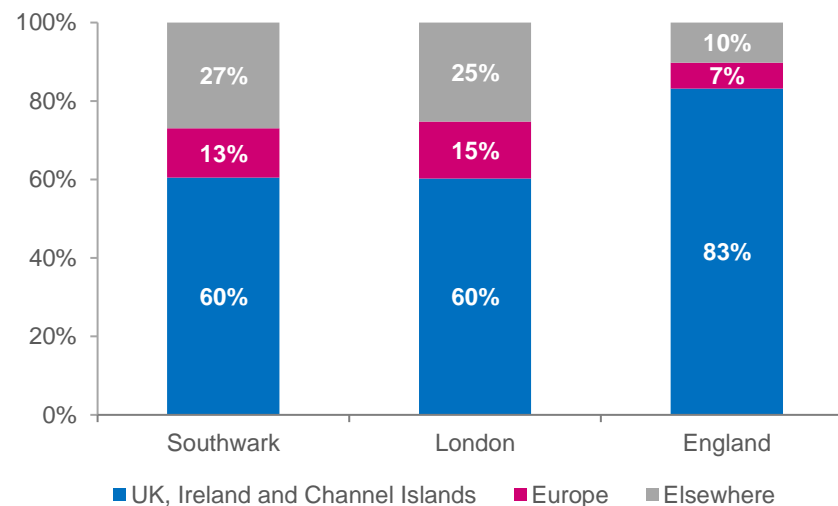


Figure 5: Residents' country of birth as a proportion of total population, 2021

Source: [ONS 2022. Census 2021 - International migration, England and Wales](#)

7.4 Religion & Faith

There were over 40 distinct religions identified among Southwark residents by the 2021 Census.

In 2021, 43% of residents reported their religion to be Christian, a drop of 10% since the 2011 Census.

'No religion' was the second most common option reported among Southwark residents, representing over one third (36%) of the population, substantially larger than across London (27%), but similar to the proportion nationally (37%).

Over 29,600 Southwark residents reported their religion to be Muslim, equating to approximately 10% of the population. Those with Muslim or Hindu religion made up a notably smaller proportion of the population in Southwark than was seen across London.

7.5 Sexual Orientation

New, voluntary, questions in the 2021 Census on sexual orientation provide the most recent local data on residents' sexual orientation.

Southwark is ranked the 4th in England for residents identifying with a non-heterosexual orientation, frequently lesbian, gay or bisexual. In Southwark, 8% of residents (nearly 21,000 people) aged 16+ have a non-heterosexual sexual identity. Within this population, 56% identified as lesbian or gay and 40% identified as bisexual or pansexual. 6% of Southwark women identify as LGB+ overall, though this reaches 12% within the 16-24 age bracket. More men identify as LGB+: 10% of male residents overall, peaking at 13% within the 35-44 age bracket. The Burgess Park area of Southwark has the largest LGB+ population within the borough.



Figure 6: Residents identifying with a non-heterosexual sexual identity
Source: [ONS 2023. Census 2021 - Sexual orientation, England and Wales](#)

7.6 Gender Identity

The 2021 Census also asked residents optional questions about their gender identity. Southwark ranked the 5th highest local authority in England for trans or non-binary identities. Within the borough 3,200 residents reporting a gender identity different from their sex registered at birth. Half of these used no specific gender identity term, the rest used 'trans woman', 'trans man' or 'non binary'. Despite having a relatively high proportion of the population with gender identities that differed from sex assigned at birth, the numbers are likely to be underestimates as many residents declined to answer the question.

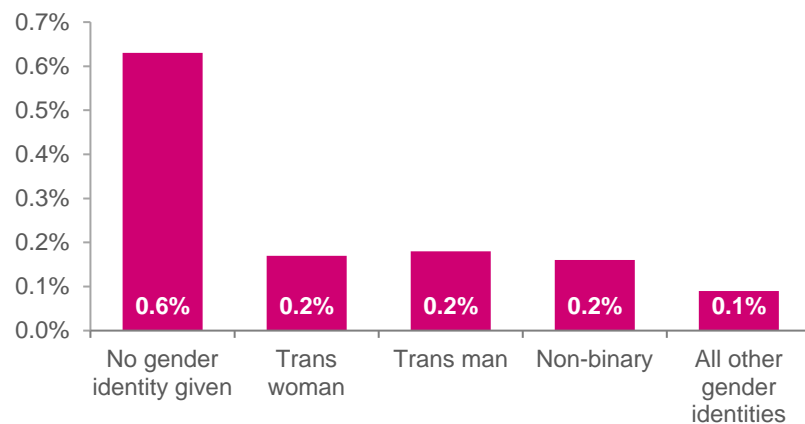


Figure 7: Proportion of Southwark residents who reported a gender identity different to their sex assigned at birth.

Source: [ONS 2023. Census 2021 – Gender identity, England and Wales](#)

7.7 Disability & Impairment

The 2010 Equality Act defines a disability as a physical or mental impairment which has a substantial and long-term negative effect on a person's ability to do normal daily activities.

The 2021 Census collected information on residents' disability status, with over 42,000 Southwark residents (14%) recording a disability. This is a similar proportion to London but slightly less than the national average of 17%. Almost a quarter of households (33,000) had at least one resident with a disability.

The neighbourhoods with higher proportions of disability are Old Kent Road, South Bermondsey and Nunhead & Queen's Road, where in some areas 17-23% of residents were disabled.

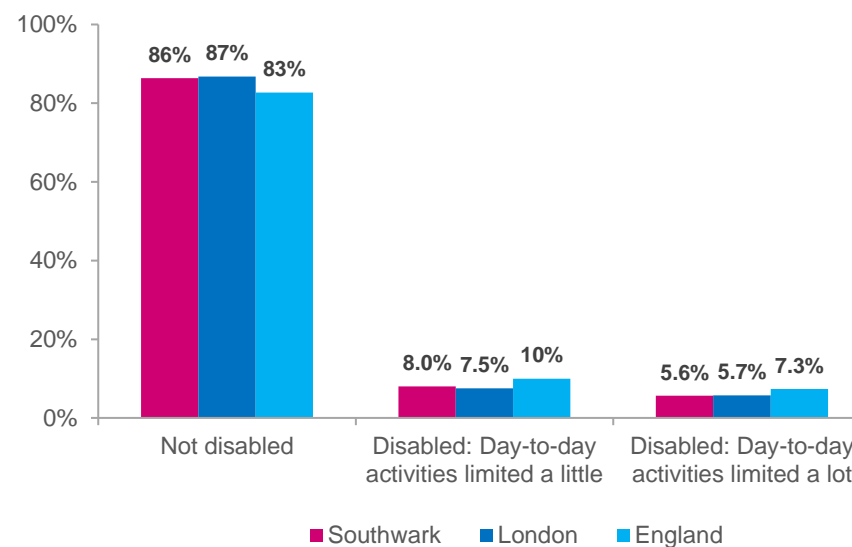


Figure 8: Proportion of Southwark, London and England residents who were disabled at the time of the census.

Source: [ONS, 2023. Census 2021 – Health, disability and unpaid care, England and Wales.](#)

Of those in Southwark who were disabled at the time of the Census, half were aged 50 or over. Levels of disability among residents of different ethnicities broadly mirror that of the general population in the borough.

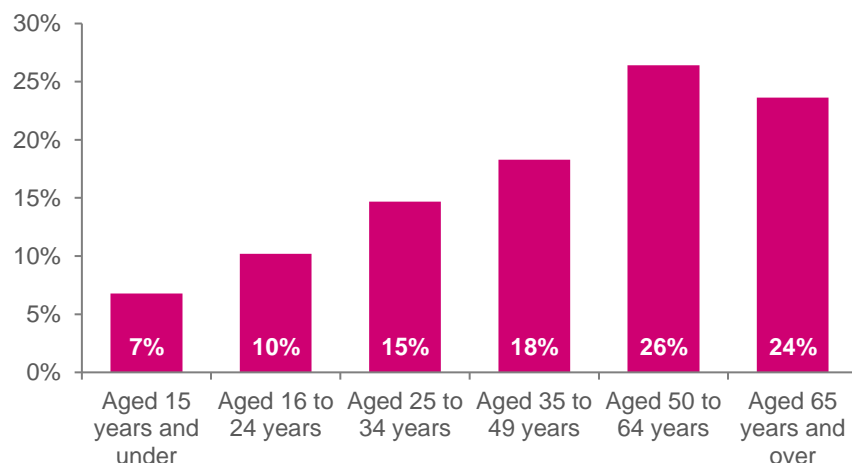


Figure 9: Disabled residents of Southwark by age group.

Source: [ONS 2023. Census 2021 – Age and disability](#)

The Family Resource Survey by the Department of Work and Pensions, collects data on what disability/disabilities people have. The most common disabilities reported in inner-London in 2021/22 were:

- Mobility Issues (23% of all disabilities)
- Mental Health (17%)
- Stamina / Fatigue (16%)

These are likely to be the top issues within Southwark's disabled population.

7.8 Carers

Unpaid or informal carers play an integral role in supporting the family members and friends they care for. According to data gathered by the 2021 Census, over 18,000 residents provide some level of unpaid care, equivalent to 6% of Southwark's population.

While this is similar to the 2011 Census, there has been an increase in the hours of care provided over the decade. In 2021, around a quarter (26%) of unpaid carers provided 50+ hours of care per week, equivalent to nearly 5,000 residents.

Never has the importance of carers been emphasised more than during the COVID-19 pandemic. The increased demand for care during the pandemic disproportionately affected women, people from Black African ethnic backgrounds, and those who themselves live with disability and complex care needs.

7.9 Housing and households

A 'household' is defined as one person living alone, or a group of people living at the same address who share cooking facilities and a living room or dining area. In Southwark, there are approximately 130,800 households, an increase of over 10,000 since 2011.

Data from the 2021 Census recorded data on housing tenure: Southwark ranks highest out of all local authorities in England for the proportion of households which are rented from the council, at 27%. When including households rented from the council and housing associations, (i.e. all socially rented households) this increases to 40%. This totals to 52,000 socially rented households in the borough.

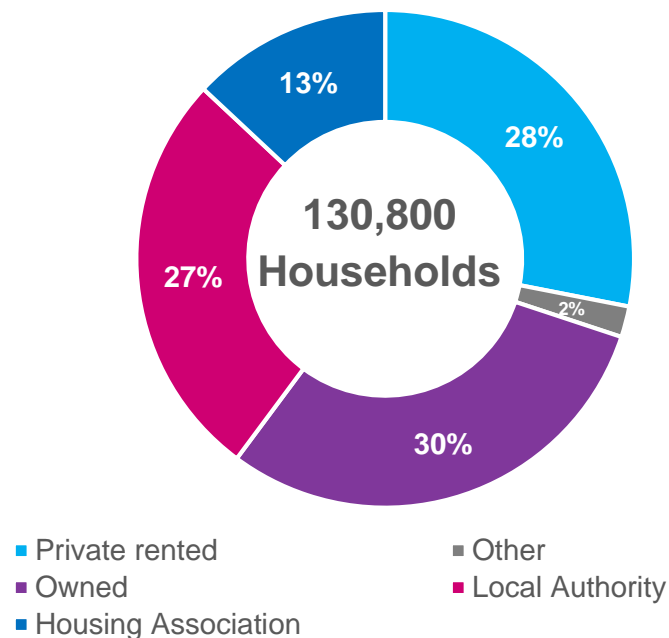


Figure 10: Housing tenure profile in Southwark in 2021
Source: [ONS 2023. Census 2021 – Housing, England and Wales](#)

There has been an increase of 9,000 privately rented households since 2011, making up 28% of households in the borough.

At the time of the 2021 Census around one-third of Southwark residents were living alone; slightly higher than both the London and national average. This includes over 9,500 households (7%) of a person aged 66 or over living alone.

One quarter of households included at least one dependent child with a tenth of households being lone parent households with dependent children, equivalent to 12,000 households.

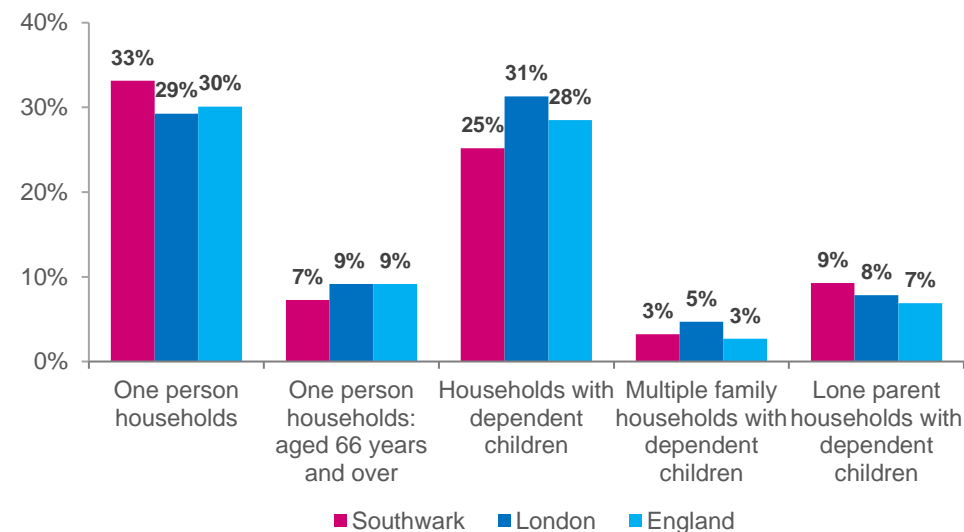


Figure 11: Proportion of households with selected household compositions, in Southwark, London and England.
Source: [ONS 2022. Census 2021 – Household and resident characteristics, England and Wales.](#)

Household disadvantage measured by taking a number of factors into account, including employment, education, health and disability and housing quality (overcrowding, shared dwelling or no central heating). At the time of the 2021 Census, 51% of Southwark households were classed as disadvantaged, similar to the London and England averages. In Southwark, 12% of households (approximately 16,000) are classed as overcrowded, higher than the London and England averages.

8. PLACE

8.1 Deprivation

The Indices of Deprivation (IoD) is the official measure of relative deprivation in England, encompassing a wide range of indicators assessing living conditions.

Southwark has seen an improvement in its' ranking relative to other local authorities since 2015, yet remains one of the most deprived in the country.

Table 1: Indices of Deprivation – Southwark ranking in 2015 & 2019

Source: [Ministry of Housing, Communities & Local Government](#)

Measure	Ranking out of 317 local authorities	
	IoD 2015	IoD 2019
Rank of average rank	23 rd	43 rd
Rank of average score	40 th	72 nd

It is important to acknowledge that the Indices of Deprivation measures relative deprivation. While the ranking of Southwark has improved relative to other local authorities, this does not necessarily indicate that there has been a reduction in absolute levels of deprivation.

Approximately 21% of Southwark's population live in communities ranked within the most deprived nationally. This increases to 23% among those aged under 18.

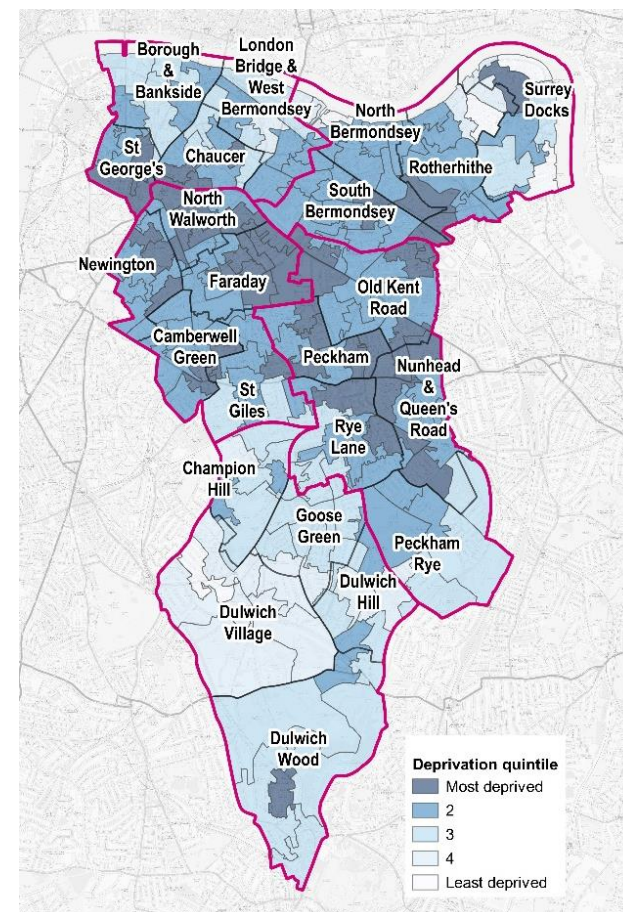


Figure 12: Indices of Multiple Deprivation across Southwark 2019.

Source: [Ministry of Housing, Communities and Local Government 2019. English Indices of Deprivation](#). © OS crown copyright and database rights 2021. Ordnance Survey (0)100019252.

8.2 Employment & Income

The 2021 Census shows that economic activity levels in Southwark are higher than both London and England. At the time of the Census in March 2021, just over 70% of the population aged 16+ were economically active, 92% of whom were in employment.

Economic inactivity in Southwark is below regional and national levels. The main group of those who are economically inactive and not seeking work are students, with 16,500 in the borough, followed by those who are long-term sick, with over 10,000 in this group.

Table 2: Economic activity of the population aged 16+ in Southwark, London and England 2021

Source: [ONS 2022. Census 2021 – Economic activity status, England and Wales.](#)

Measure	Southwark		London	England
	Number	%		
Economically active	181,200	71%	66%	61%
In employment	167,000	65%	61%	57%
Unemployed	14,200	6%	5%	4%
Economically inactive	74,900	29%	34%	39%

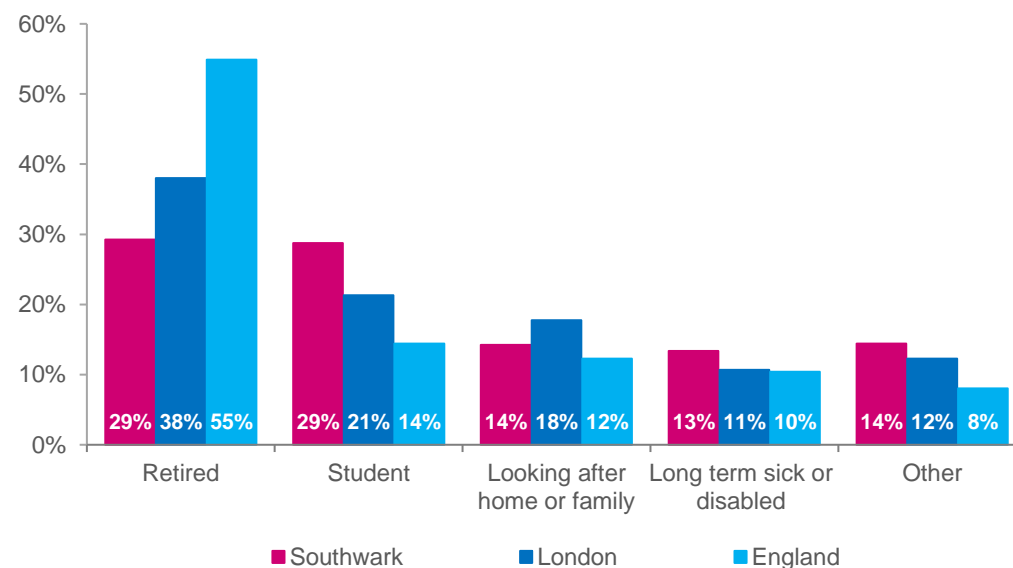


Figure 13: Reasons for economic inactivity across Southwark, London and England, as a proportion of the economically inactive population.

Source: [ONS 2022. Census 2021 – Economic activity status, England and Wales.](#)

At the time of the 2021 Census, one third of Southwark residents who were economically inactive had never worked, similar to the proportion across London; this was equivalent to 31,000 residents.

The median (average) household income in Southwark in 2022 was £43,769 broadly comparable to the national average of £38,984. However, there is a wide range of incomes in Southwark with around 1 in 10 households in the borough having a total income of less than £15,000 per year.



Figure 14: Percentage of Southwark households by income bracket, 2022

Source: CACI Paycheck Directory, 2023.

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While average income in Southwark is in line with national levels there are significant geographical inequalities within the borough, with median income highest in Dulwich Village (£73,990) and lowest in Old Kent Road (£32,731).

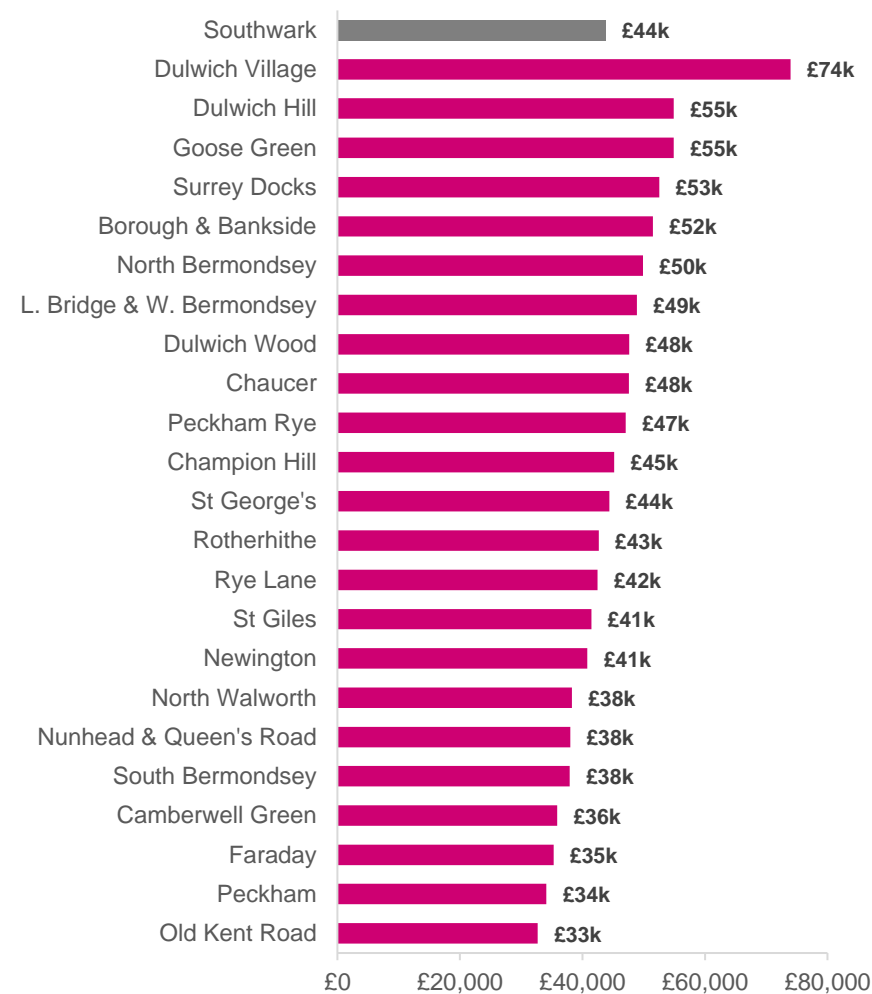


Figure 15: Median gross household income by ward, 2022.

Source: CACI Paycheck Directory, 2023.

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8.3 Child Poverty

Children are classed as growing up in poverty if their family income is below the poverty line: earning 60% below the median income. The data here examines child poverty after housing costs of rent, water rates, mortgage interest payments, buildings insurance payments, ground rent and service charges are taken into account.

In 2021/22 approximately 23,000 children aged 0-15 in Southwark were living in poverty, after housing costs were factored in, equating to 36% of children in the borough. This is higher than the London average of 33%. Southwark ranked 8th highest of the London boroughs for child poverty after housing costs in 2021/22.

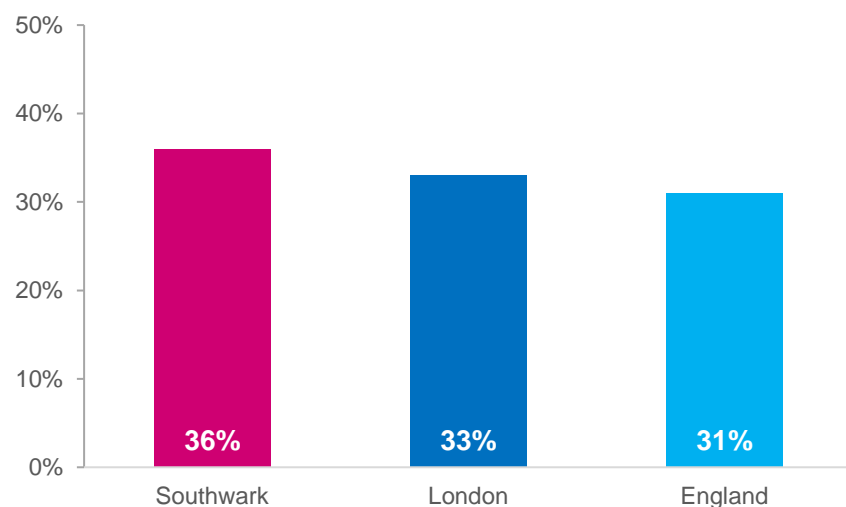


Figure 16: Percentage of children (aged 0-15) living in poverty after housing costs are taken into account, in Southwark, London and England, 2021/22.
Source: [End Child Poverty, 2023. Local child poverty rates, After Housing Costs.](#)

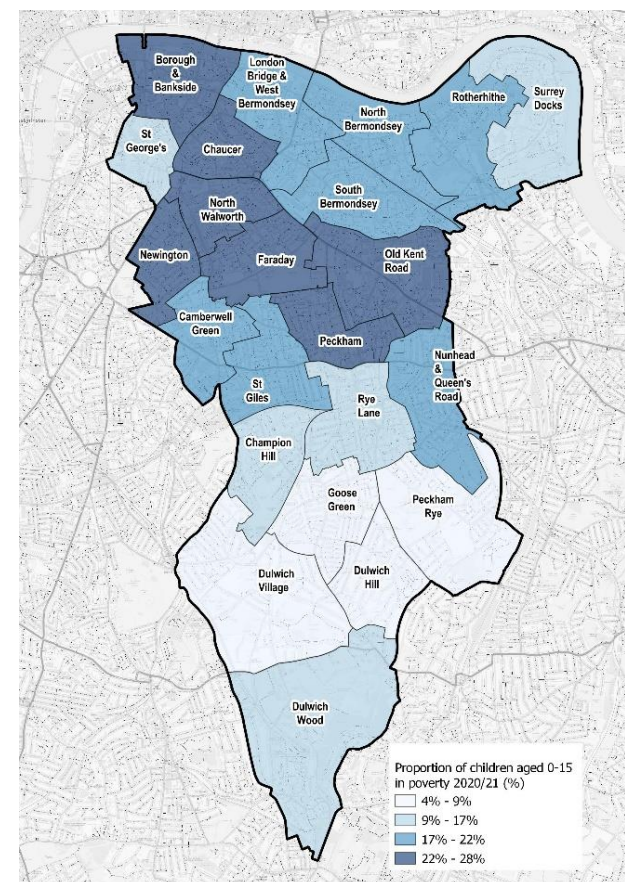


Figure 17: Percentage of children aged 0-15 living in poverty (relative low income families) by ward, before housing costs 2020/21

Source: [Department for Work and Pensions 2023. Children in low income families: Relative low income 2021/22. Accessed via StatXplore.](#)
[ONS, 2022. 2021 Census – Population and household estimates, England and Wales.](#)

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8.4 Cost of Living Crisis

What is the cost of living crisis?

The on-going cost of living crisis has been defined by large and rapid increase to peoples' day-to-day costs across almost all spending categories, most notably housing, fuel and food costs.

Russia's invasion of Ukraine and subsequent sanctions limited supply of gas across Europe. This contributed to a rise in fuel costs for transport, homes and businesses. Increased fuel costs have since had a knock-on effect, increasing prices of goods and services across multiple industries.

Who is most affected by the crisis?

While prices have risen for everyone, those on lower incomes are more affected, as a greater proportion of their expenditure is spent on essentials such as household bills and food. Furthermore, fuel and food have also seen some of the highest price rises, above the average inflation rate. Those on low incomes are less likely to have room to cut back, as many will have already been limiting their spending before the cost of living crisis. Within Southwark, Old Kent Road, Faraday, Peckham and Camberwell Green wards have the highest proportions of residents on low incomes. Polls by the Greater London Authority have found that those on incomes of less than £20,000; those who are deaf or disabled and those who live in socially rented properties are more likely to be struggling financially than the average Londoner. Those who are on low-incomes but above the threshold for means-tested cost of living support as well as those without recourse to public funds are also likely to have been impacted more heavily by the crisis.

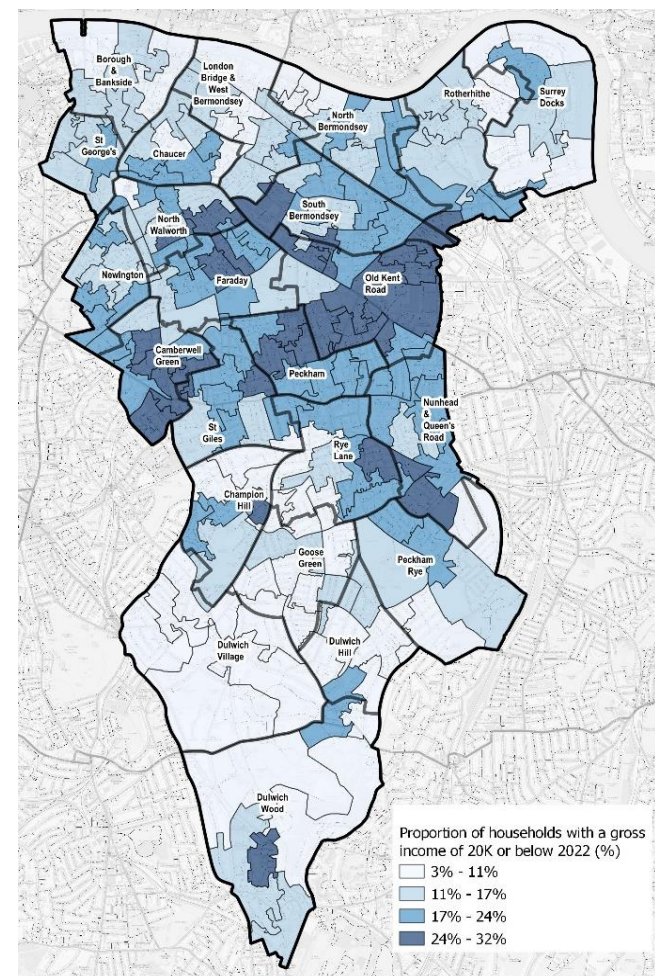


Figure 18: Proportion of households with a gross annual income of 20K or below in 2022.

Source: CACI Paycheck Directory, 2023.

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What is the impact on food security?

The cost of living crisis has exacerbated food insecurity, with food prices rising by an average of 25% between March 2021 and March 2023. This is likely to have impacted low income households the most, as they spend a greater proportion of their income on essentials such as food.

A study by Trust for London estimated that on average, low income households spend 17% of their weekly expenditure on food compared to only 8% of high income households. Furthermore, costs have risen above the average inflation rate for many essentials such as milk, bread, oils and fats making higher costs unavoidable for many.

Surveys by the Greater London Authority provide insights on how the cost of living crisis is affecting Londoners. Of respondents who report as financially struggling, 60% said they were buying less food and essentials to manage living costs. 13% of Londoners in January 2023 said they had regularly or occasionally gone without food or relied on outside support such as from food banks.

The Survey for Londoners estimated adult food insecurity to be 16% in Southwark in 2021/22, equivalent to 41,000 residents aged 16+. The survey also found that approximately 2% of residents across Southwark and Lambeth had used a food bank in the past 12 months to collect food, and 1% had used food banks for other services such as counselling.






Product		Average price March 2022	Average price March 2023	Annual growth
	A dozen eggs	£2.42	£3.19	↑ 32%
	White sliced bread	£1.07	£1.38	↑ 29%
	Butter	£1.81	£2.36	↑ 30%
	Baked beans	£0.76	£1.05	↑ 39%
	Semi-skimmed milk (2 pints)	£0.96	£1.33	↑ 39%

Table 3: Cost of common grocery items in March 2022 and March 2023, plus percentage change in price.

Source: [ONS 2023. Shopping prices comparison tool.](#)

8.5 Homelessness

Southwark has the sixth largest population of rough sleepers in London. Over the year 2021/22, 388 individuals were identified by outreach teams as rough sleepers in the borough, a decrease of 32% compared to 2020/21. Of the rough sleepers identified, 61% were new rough sleepers, 13% were returners and 26% were classed as living on the street, having been seen for a minimum of two consecutive years. Levels of rough sleeping are generally highest in the north west of the borough, around London Bridge, with pockets around Burgess Park and Peckham.

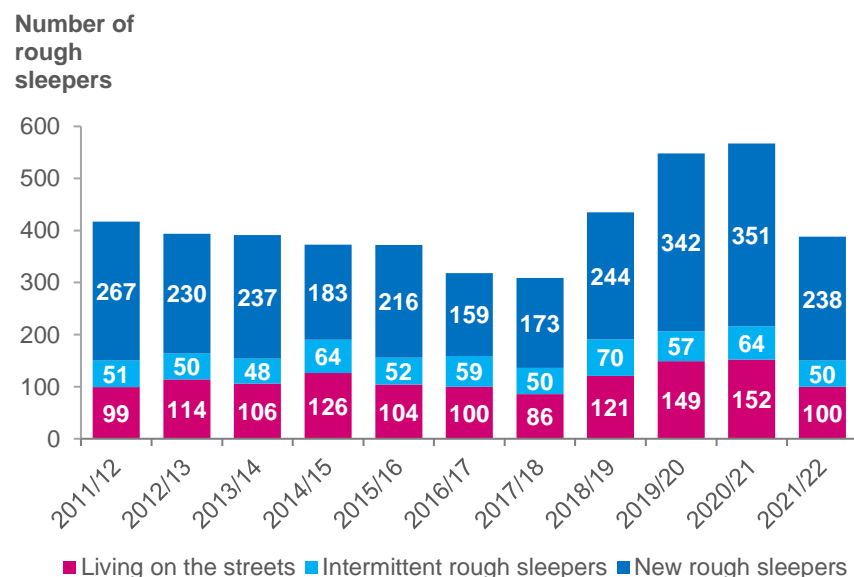


Figure 19: Numbers of rough sleepers identified by outreach teams in Southwark 2011/12 to 2021/22.

Source: GLA, 2022. [Rough sleeping in London \(CHAIN reports\), Borough Annual Reports: Southwark 2021/22.](#)

The majority of rough sleepers identified in Southwark in 2021/22 were male (87%). About a third (30%) were 26-35 years old, with a further third (34%) aged 36-45 years old. The main ethnic groups were White (59%, including 36% White-British) and Black (23%).

Support needs related to alcohol, drugs and mental health were recorded by needs assessments of rough sleepers. Over three-quarters (78%) of rough sleepers had one or more support need recorded, and 43% had more than one of alcohol, drugs and mental health support needs. It is worth noting that 29% of rough sleepers did not have a support needs assessment recorded.

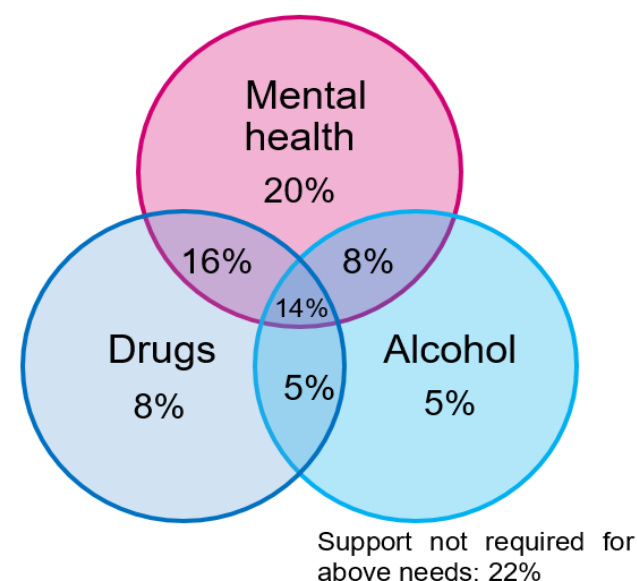


Figure 20: Recorded support needs of rough sleepers in Southwark, 2021/22
Source: GLA, 2022. [Rough sleeping in London \(CHAIN reports\), Borough Annual Reports: Southwark 2021/22.](#)

Note: Percentages are taken of those who have been assessed

8.6 Crime

Crime can have a significant impact on the health and wellbeing of our residents and communities. From April 2022 to March 2023, there were nearly 40,000 recorded offences in Southwark. This was equivalent to 124 offences per 1,000 population, a rate significantly higher than the London average of 110 offences per 1,000 population.

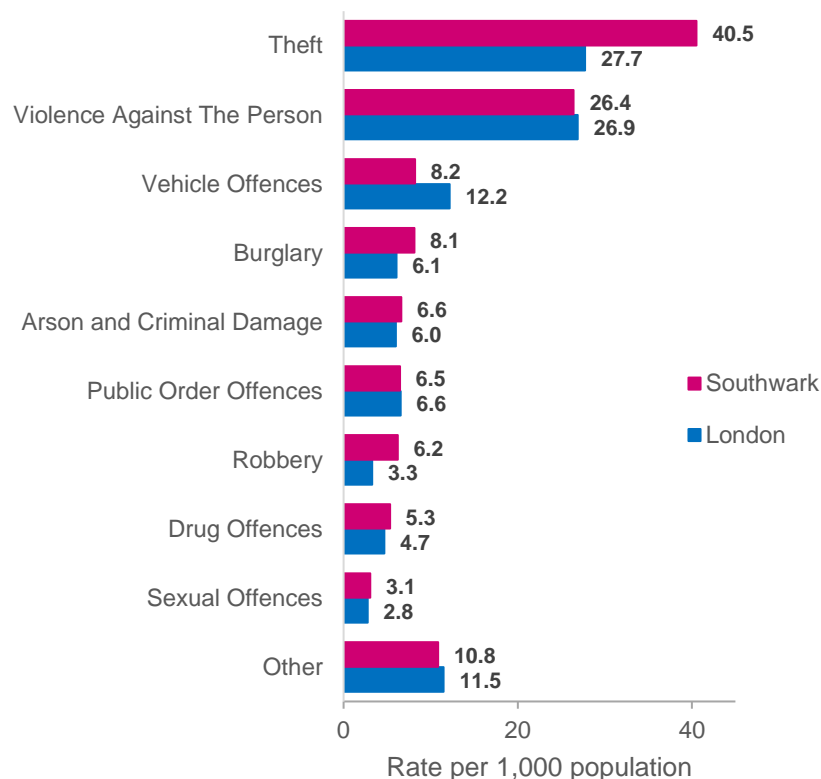


Figure 21: Top ten recorded offences by Southwark 2022-23

Source: Metropolitan Police, 2023. [Crime Dashboard- Overview of Crimes](#)

The pattern of recorded offences in Southwark mirrors that for London as a whole, with violence against the person and theft being the most common.

In 2022/23 there were 13,000 recorded cases of theft in Southwark and 8,500 cases of violence against the person. Across the borough, the highest crime rates are in London Bridge and West Bermondsey, Borough and Bankside and North Walworth.

Emergency hospital admissions for violence (including sexual violence) are comparable to the London and England average. Over the three-year period 2018/19 to 2020/21, there were 450 such emergency admissions in Southwark.

8.7 Air Quality

There is strong evidence to show the impacts of air pollution on health. This ranges from exacerbation of respiratory conditions such as asthma and chronic respiratory disease, through to an increase in emergency admissions to hospital.

Across London, the pollutants nitrogen dioxide (NO₂) and particulate matter (PM₁₀) exceed the levels set as the national air quality standards. The largest single source of air pollution in Southwark is road transport, contributing around a third of PM_{2.5} emissions. Domestic and commercial fuels, which come mostly from cooking and heating, also contribute to levels of NO₂, PM₁₀ and PM_{2.5}.



Figure 22: Main sources of outdoor air pollution

While short-term exposure to air pollution is known to adversely affect health, the relative risk associated with long-term exposure is much greater, contributing to the initiation, progression and exacerbation of disease. NO₂ is linked to lung irritation and damage, while particulate matter is linked to increased risk of respiratory disease, lung damage, cancer and premature death.

As well as impacting health conditions, long-term exposure to air pollution can increase the risk of premature death. It is estimated that the average reduction in UK life expectancy associated with air pollution is six months. The effect of particulate matter PM_{2.5} on mortality is higher in Southwark than in London or England, but rates have fallen since 2010 following reductions in emission rates.

Southwark has seven Air Quality Focus Areas which have specific targets set for air pollution levels.



Figure 23: Percentage of adult deaths attributable to particulate air pollution (PM_{2.5}) in 2021

Source: [OHID, 2023. Public Health Profiles](#)

Further information on the impact of air quality on health is available in the 2023 Annual Public Health Report, available via: www.southwark.gov.uk/aphr.

9. COMMUNITY VOICE

There has been a wide range of community engagement over the course of the last two years, through which local residents have raised their views and concerns regarding health and wellbeing in the borough.

This on-going engagement has highlighted a number of common themes, building on those identified in the last JSNA Annual Report. These include:

- Residents continue to experience discrimination and structural racism when accessing local services.
- Residents want to be meaningfully involved and for their voices, insight and experience to be valued in the development of plans and local services.
- Services must be culturally appropriate and accessible to all.
- Residents often struggle to access services, such as GP appointments; due to demand, or because they feel excluded, unsure of where to go or unable to interact with services.
- Residents want to be able to access services in their neighbourhoods as much as possible.
- There is ongoing concern regarding rising cost of living, food poverty and affordable housing.
- Mental health and wellbeing for children, young people and adults is a priority.
- There is a concern that vulnerable people continue to fall through gaps in support.

Partners across the health and care system must ensure the concerns and priorities raised by residents are addressed through development of local services and plans. Partners need to work together and with communities, to address the extent of inequalities that exist in health care and health outcomes.

9.1 Rebuilding Trust through Community Engagement and Empowerment

Southwark Council commissioned Social Finance and Centric to develop and test approaches to community engagement and co-production with seldom-heard communities. A focus of this work was on building trust with Black, Asian and minority ethnic communities through community engagement, reflecting that this is necessary to reduce health inequalities in Southwark.

A set of recommendations were developed through one-to-one engagement and workshops, led by community researchers. This work re-iterated the importance of:

- Embedding community engagement throughout the work of health and care organisations, with processes that prioritise accountability and transparency.
- Connecting engagement across organisations, meaning residents can engage with the wider health and care system.
- Helping communities to engage through prioritising accessible language and outreach to existing community spaces.

9.2 Southwark Stands Together

Southwark Stands Together is a borough wide initiative, established in 2020 in response to the killing of George Floyd and the Black Lives Matter movement. It aims to put tackling racial inequalities at the forefront of our work to deliver a fairer and more equal society for all.

The initiative made a number of recommendations, including some centred on addressing inequalities faced by Black, Asian and minority ethnic groups in the health and care sectors. These were:

- Develop a strong partnership approach across the whole health sector addressing the wider health inequalities that disproportionately impact Black, Asian and minority ethnic communities, and their physical, mental and emotional wellbeing.
- Recognise that discrimination can occur in many different ways, from front line to backroom functions; adopt and embed organisation wide approaches to improve the experience of Black, Asian and minority ethnic communities.
- Work with key partners to ensure health services and initiatives are culturally appropriate and accessible for Black, Asian and minority ethnic residents.
- Increase uptake of preventative programmes such as screening, health improvement and education (i.e. awareness, myth busting and health literacy) amongst Black, Asian and minority ethnic communities.

In March 2023, a workshop was held between health and care partners and local residents to reflect on what improvements they had seen in their communities and workplaces and where further

work is required. Positive changes included the introduction of community health ambassadors, a network of local volunteers that provide accurate health information and resources to their local communities. A common discussion point throughout the workshop revolved around the need to strengthen communication about Southwark Stand Together, and identifying opportunities to do this.

9.3 Southwark 2030

Southwark 2030 is an engagement programme aimed at gathering views of Southwark residents on their vision for the future of Southwark. The programme has sought views from a wide range of groups, providing opportunities for local people, community groups, business and public services to share their ambitions for the borough.

The engagement work to date has taken place through a range of formats including a survey with over 1,200 respondents, who could raise topics important to them, including family, health, housing, services, green spaces, money and having a say.

A wide range of community groups have also hosted listening events focused on hearing from friends, neighbours and communities about how they felt Southwark could be made a better place. There have been 38 listening sessions, attended by over 800 people. In addition, a school toolkit was developed to involve children and young people in the process.

One of the emerging themes from this engagement relates to the importance of health & wellbeing, ensuring residents are supported to live longer, healthier lives. Further testing of themes and ambitions with the public and partners will take place through the rest of 2023.

10. STARTING WELL

10.1 Births

The total number of babies born in Southwark has been decreasing year on year over the past 10 years. There were 3,250 live births in 2022, down from over 5,000 in 2011, a 35% decrease. The birth rate in Southwark was 38.4 births per 1,000 women aged 15-44 in 2022.

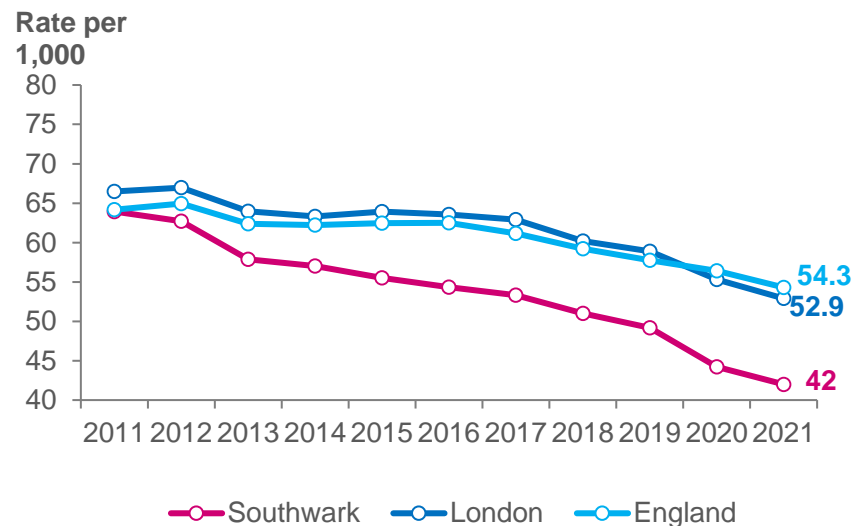


Figure 24: General fertility rate: birth rate per 1,000 females aged 15-44

Source: [OHID, 2022. Child & Maternal Health Profiles](#)

The decline in the fertility rate in Southwark is seen across all age groups, but particularly among younger women. The average age of mothers giving birth in Southwark in 2022 was around 33 years. Across the borough there is substantial variation in the number of births each year, with rates highest in Dulwich and Peckham Rye.

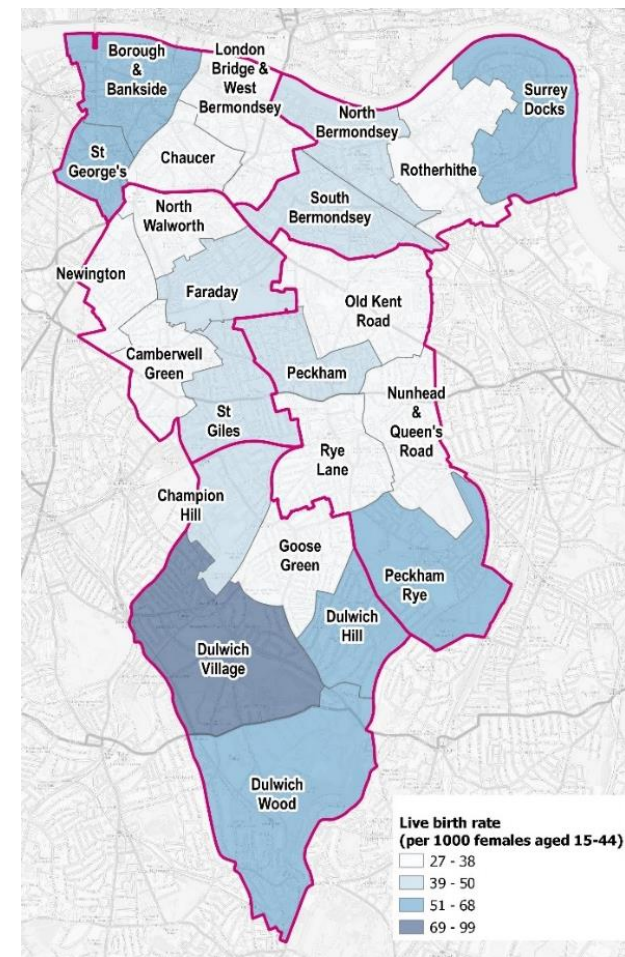


Figure 25: General fertility rate by ward, 2021.

Source: NHS Digital: Local birth files.

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New mothers in Southwark come from a diverse range of backgrounds, with 55% being from outside the UK. The most common non-UK countries of birth of mothers are Nigeria, Sierra Leone, Ghana, Poland and Somalia.

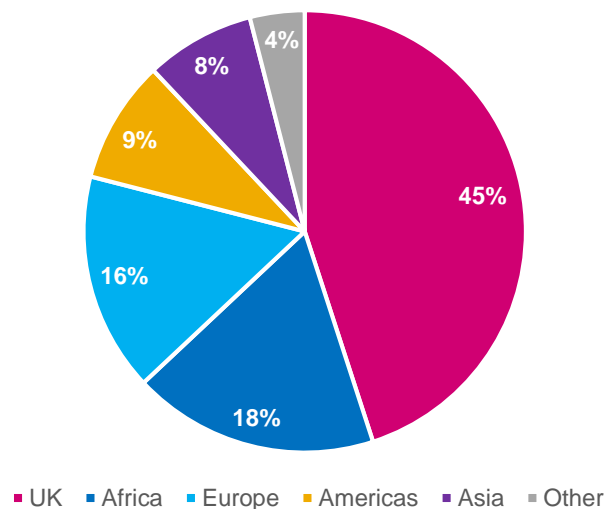


Figure 26. Births in Southwark (2018-2020) by maternal country of birth (%).
Source: NHS Digital: Local birth files

Stillbirths are thankfully rare, with 52 cases in the three-year period 2019-21 and rates comparable to London and England. However, there are significant inequalities, with almost two-thirds (62%) of stillbirths among women and people not born in the UK, and almost half of these were to mothers and people born in African countries.

10.2 Infant mortality

Infant mortality refers to deaths within the first year of life. It includes:

- Perinatal mortality - deaths within the first 7 days
- Neonatal mortality - deaths under 28 days
- Post-neonatal mortality - deaths between 28 days and one year.

There has been a significant reduction in infant mortality in Southwark since 2001, though improvements have slowed in recent years. Levels of infant mortality in the borough are similar to those of London and England overall.

Between 2019 and 2021 there were 39 infant deaths registered in Southwark, a rate of 3.5 infant deaths per 1,000 live births, the same as the rate across London. The majority of these deaths occurred within the first 7 days of life.

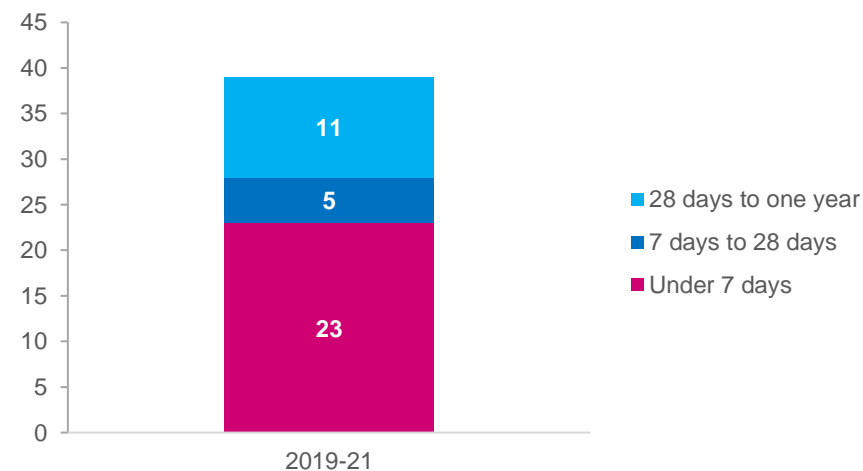


Figure 27: Infant deaths in Southwark, by age of infant, 2019-2021
Source: [ONS, 2022. Deaths Registered in England & Wales](#)

10.3 Childhood vaccinations

Vaccination is the safest and most effective way of protecting individuals and communities from vaccine preventable diseases. National immunisation programmes have led to exceptional reductions in the incidence of previously common disease, and related deaths.

Uptake of childhood vaccinations in Southwark is generally above London as a whole, although fall below target and England levels.

Vaccination	Southwark	London	England
DTaP/IPV/Hib/HepB at 1yr	88.2%	86.5%	91.8%
MMR1 at 2yrs	83.4%	79.9%	89.2%
MMR1 at 5yrs	88.7%	87.8%	93.4%
MMR2 at 5yrs	82%	74.2%	85.7%
DTaP/IPV/Hib at 5yrs	90%	90%	94.4%

Table 4: Childhood vaccination coverage, 2021/22

Source: NHS Digital, 2022. Child Vaccination Coverage Statistics 2021/22

Whilst efforts have been made to improve uptake among vulnerable groups, inequalities may remain: children with additional health, social or safeguarding needs; new migrants to Southwark, and later-born children of large families are all thought to be at risk of going unimmunised.

10.4 Healthy weight

Excess weight in childhood typically persists into adulthood and is associated with increased risk of a range of health consequences such as type 2 diabetes, hypertension and heart disease. Levels of excess weight in Southwark are consistently above London and national levels. In Southwark schools, approximately 1 in 4 children in Reception are overweight or obese, with levels increasing significantly by Year 6.

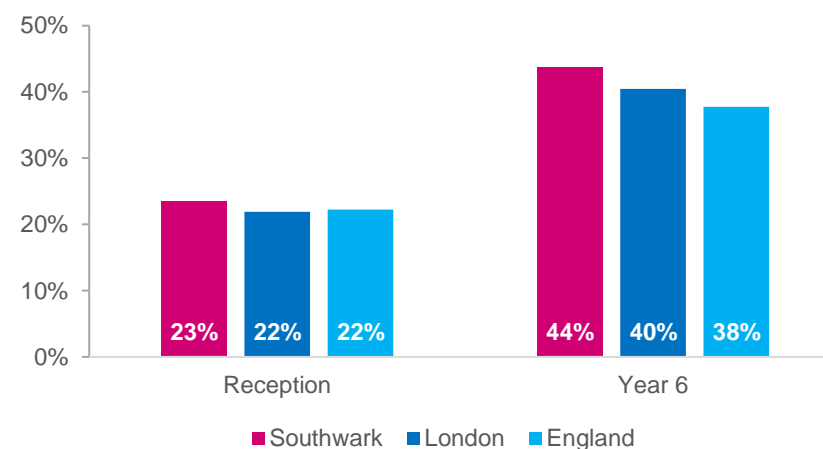


Figure 28: Prevalence of excess weight (overweight or obesity) in Reception and Year 6 pupils across Southwark, London and England 2021/22.

Source: NCMP Enhanced Datasets 2021/22.

Within the borough there are significant inequalities in the prevalence of excess weight, with children from Black ethnic groups significantly more likely to be overweight or living with obesity compared to the Southwark average. Those living in more disadvantaged areas are also more likely to be overweight or living with obesity than those living in more affluent communities.

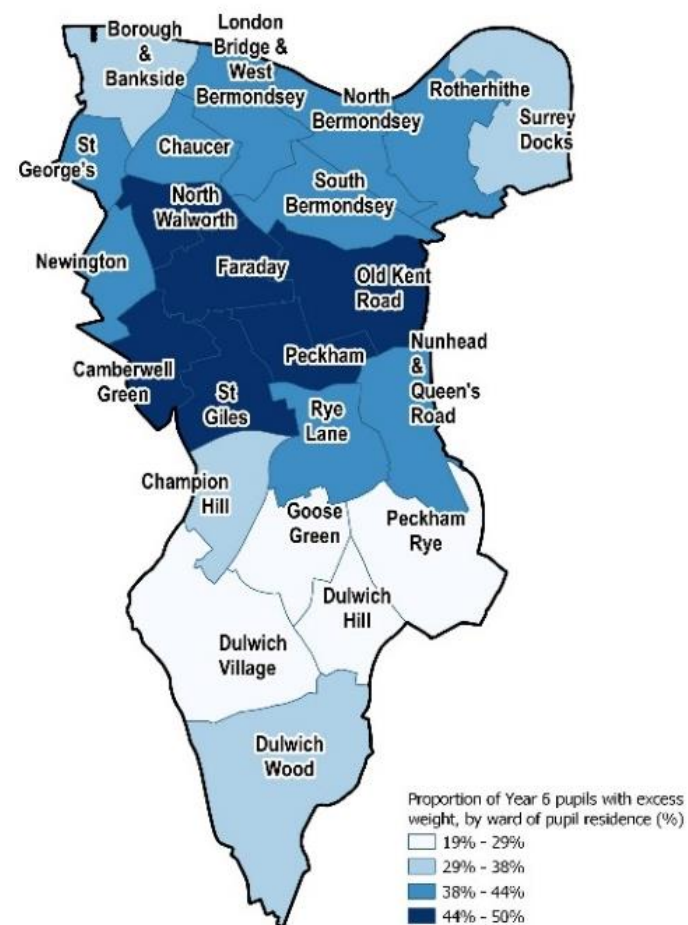
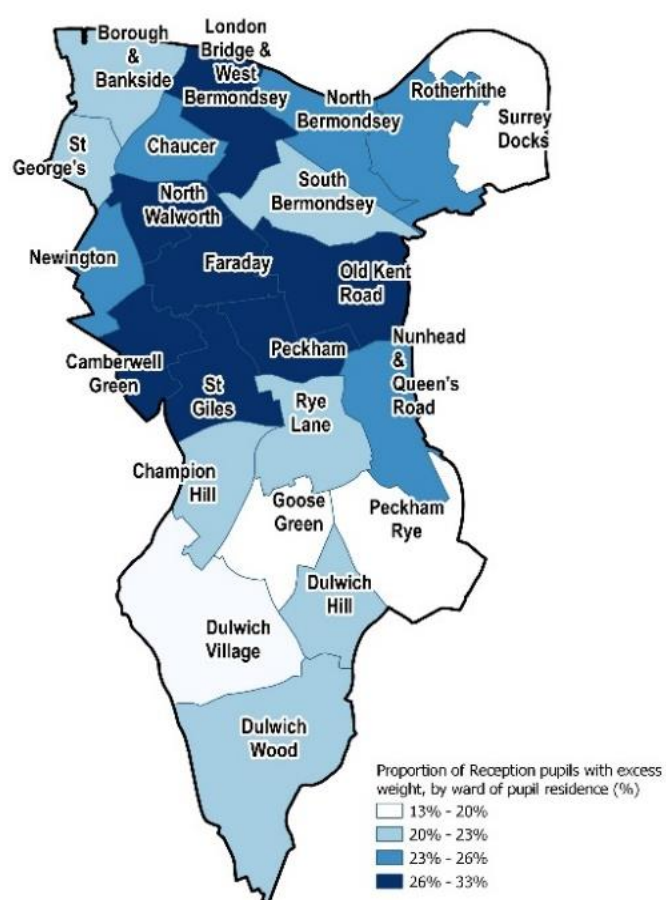


Figure 29: Excess weight (overweight or obese) prevalence in Reception (left) and Year 6 (right), 2017/18 to 2021/22.

Source: NCMP Enhanced Datasets 2017/18 - 2021/22.

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10.5 Vulnerable Children

Children in Need

A child in need is defined as “...a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired without the provision of services, or the child is disabled.”

At the end of March 2022 there were 2,800 children in need in Southwark, with levels above both London and England. This is up slightly from 2,771 at the end of March 2021. The most common primary need of assessed children in Southwark was abuse or neglect, mirroring the national picture. The graph opposite shows the different primary needs at assessment; in addition to the needs below a small number of children were identified as being in need due to low income.

In addition to the primary need, a range of factors that contribute to the child being in need are recorded as part of the assessment. The top five factors identified in Southwark in 2022 were:

- Domestic Abuse (1,490 cases)
- Mental Health (1,280 cases)
- Drug or Alcohol Misuse (685 cases)
- Emotional Abuse (590 cases)
- Physical Abuse (560 cases)

Each factor can be linked to the child themselves, a parent or another person but have an effect on the child’s wellbeing and therefore is recorded on the child’s in need assessment.

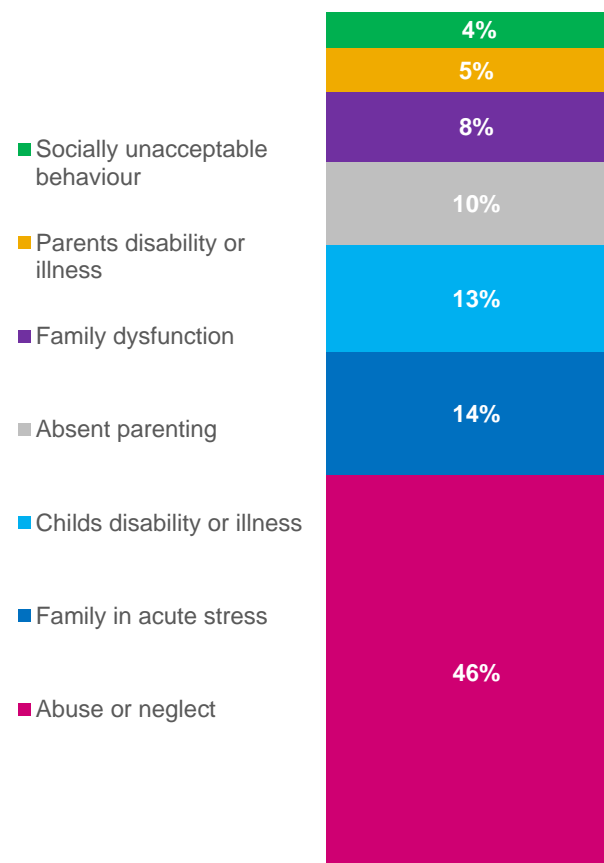


Figure 30: Percentage of children in need in Southwark, March 2022, by primary need at assessment

Source: [Department for Education, 2022. Characteristics of Children in Need, Reporting year 2022.](#)

Child Protection Plans

Children at risk of significant harm have a child protection plan, the aim of which is to:

- To ensure the child is safe and prevent any further significant harm by supporting the strengths of the family, by addressing the risk factors and vulnerabilities and by providing services to meet the child's assessed needs
- To promote the child's welfare, health and development
- Provided it is in the best interests of the child, to support the family and wider family members to safeguard and promote the welfare of their child.

At the end of March 2022 there were 329 children in Southwark with a child protection plan. The most common underlying cause was emotional abuse, followed by neglect, mirroring the national pattern.

Locally and nationally, three factors have combined to place children at greater risk of abuse: increase in stressors to parents and care givers, increase in children's vulnerabilities and changes in access to universal services as a result of the COVID-19 pandemic.

10.6 Healthcare use

Over the five-year period 2016/17 to 2020/21 there were 5,575 emergency hospital admissions among Southwark children under the age of 5. Admission rates in the borough are significantly lower than the averages for London and England. However, there are substantial inequalities, with significantly higher levels seen in the north of the borough.

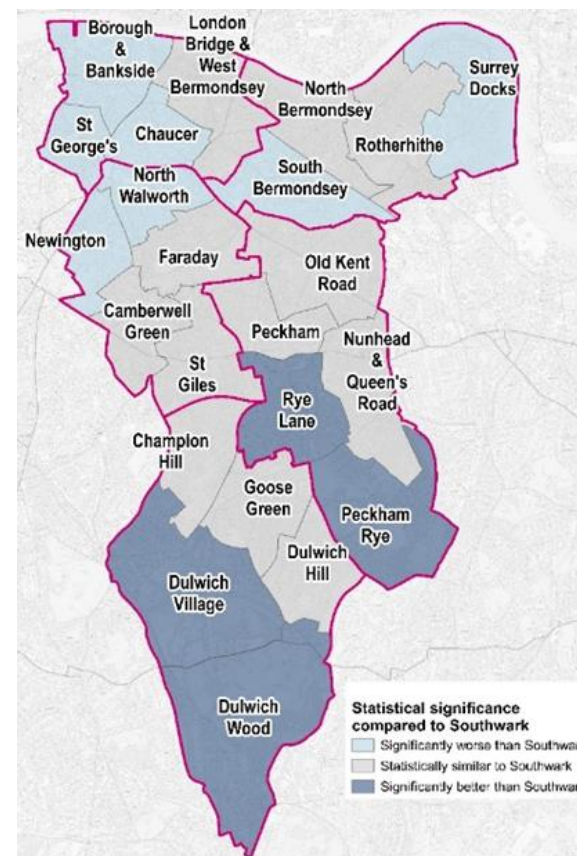


Figure 31: Emergency admissions among under 5s, 2019/20.

Source: [OHID 2023. Local Health - Small Area Public Health Data.](#)

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A&E attendances in young children are often preventable, and commonly caused by accidental injury or by minor illnesses which could have been treated in primary care. In 2021/22, there were 15,410 attendances to A&E by Southwark children aged 0-4, with rates significantly worse than both London and England.

11. LIVING WELL

11.1 Risk factors

Data from the Global Burden of Disease study outlines the top ten risk factors for poor health. Southwark mirrors the national picture, with smoking, obesity, poor diet among the top risks impacting on healthy life in our borough.

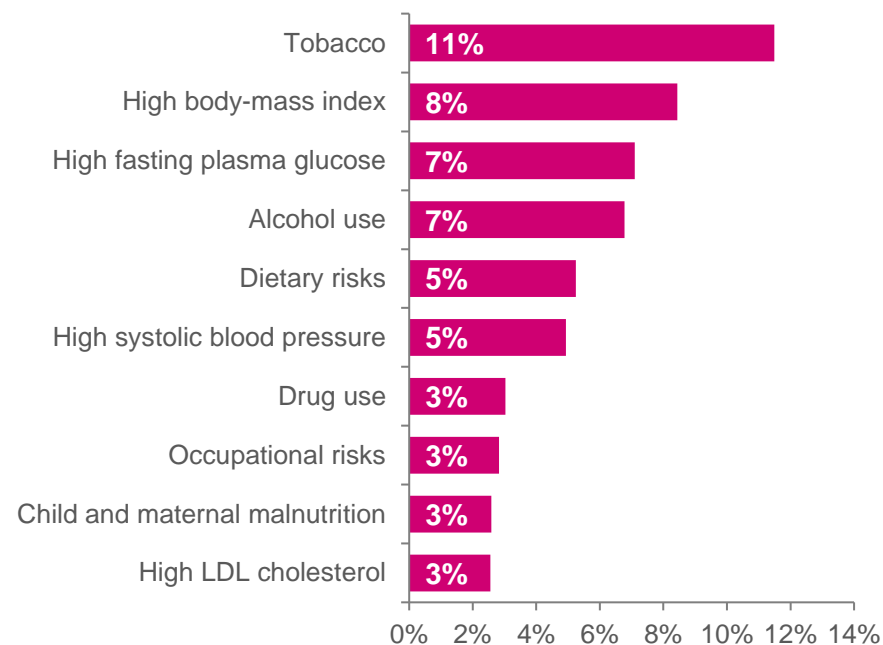


Figure 32: Percentage of years of life lost to disability or premature death (DALYs) in Southwark by risk factor, 2019.

Source: [IHME 2019. Global Burden of Disease Compare](#)

The figure opposite illustrates the latest prevalence of key risk factors among adults in Southwark compared to London and England.

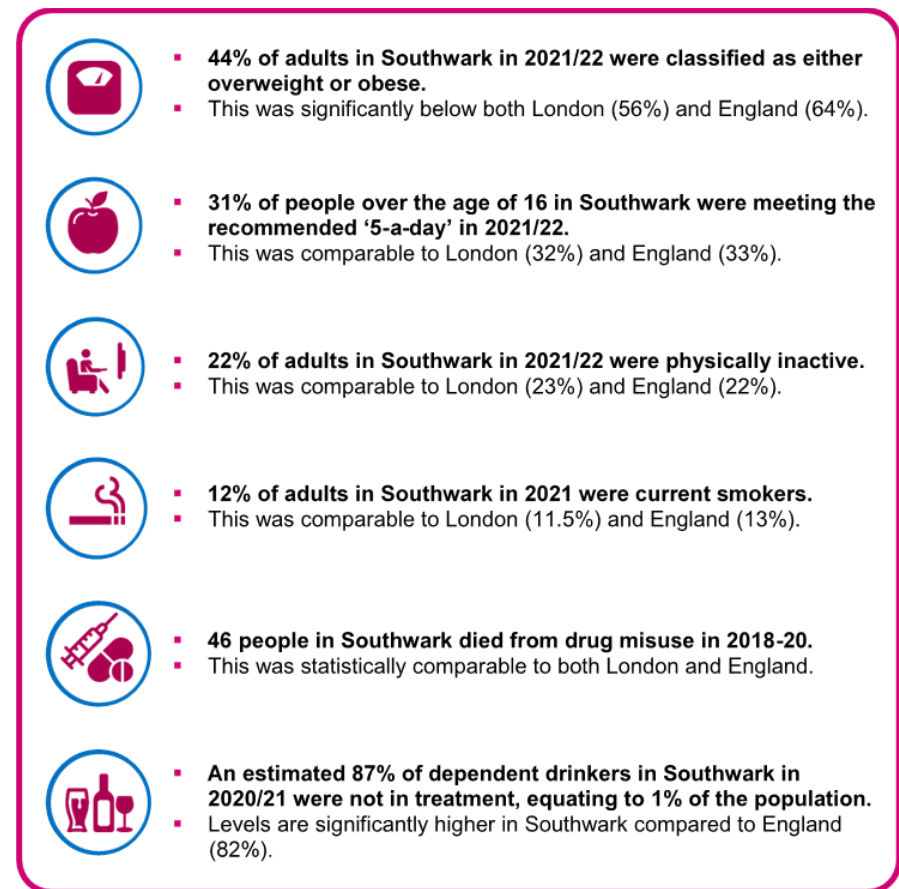


Figure 33: Behavioural risk factors associated with poor health in Southwark

Source: [OHID 2023. Public Health Profiles.](#)

11.2 Sexual health

In addition to obesity, poor diet and smoking, poor sexual and reproductive health has a significant impact on health and wellbeing in Southwark. The borough has the second highest levels of sexually transmitted infections in England, just behind Lambeth. Levels of diagnosed infections Southwark are over twice the London average and more than four times the national average.

In 2022 there were nearly 9,300 new STI diagnoses among residents, a 24% increase compared to 2021. Within the last year in Southwark there has been:

- 37% increase in gonorrhoea diagnoses
- 28% increase in syphilis diagnoses
- 19% increase in chlamydia diagnoses
- 37% increase in genital herpes

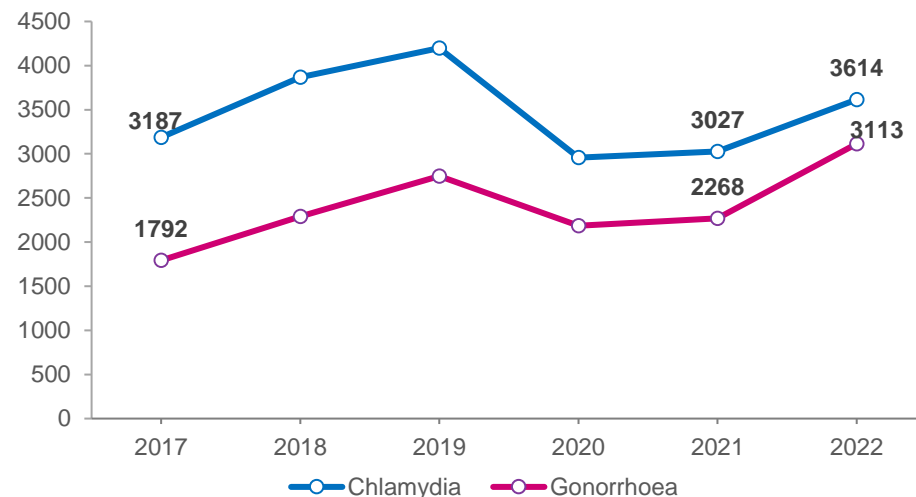


Figure 34: Number of diagnosed cases per year of Chlamydia and Gonorrhoea of Southwark residents 2017-2022

Source: [OHID 2023. Sexual and Reproductive Health Profiles.](#)

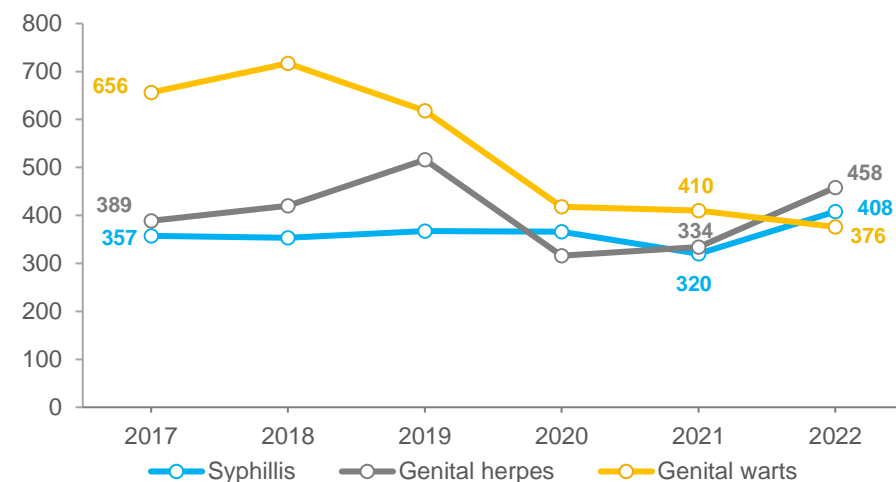


Figure 35: Number of diagnosed cases per year of Syphilis, Genital herpes and Genital warts of Southwark residents 2017-2022

Source: [OHID 2023. Sexual and Reproductive Health Profiles.](#)

There was a 17% increase of STI testing in the borough between 2021 and 2022 (excluding testing for chlamydia in those under 25), however the increased diagnosis of STI's cannot be attributed to higher rates of testing alone, and does suggest an increasing population prevalence of STI's to pre-pandemic levels.

When looking at inequalities in sexual health, infection rates in Southwark are highest in the following groups:

- Men: accounting for almost 70% of cases
- 15-24 year olds: accounting for over a quarter of cases
- Gay, bisexual and men who have sex with men: accounting for two-thirds of cases

Rates of new diagnoses are also unequal across the borough, with the highest levels seen in the north-west corner of the borough.

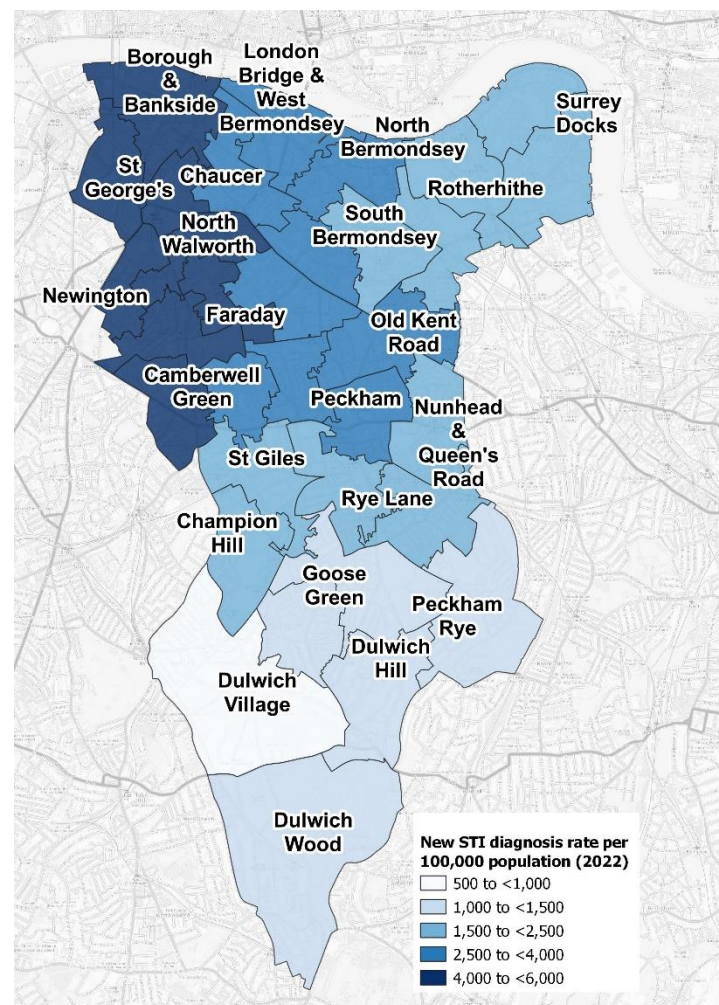


Figure 36: Rate of new STI diagnoses across the borough, per 100,000 resident population in 2022.

Source: UKHSA 2023.

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HIV

In addition to high levels of sexually transmitted infections, levels of HIV in Southwark are also high, with the borough having the second highest prevalence in England, behind neighbouring Lambeth. Rates of diagnosis of HIV in Southwark are over double the London average and 4.5 times higher than the England average.

Figures for 2021 show there are 2,881 people currently living in the borough who have been diagnosed with HIV, with the highest prevalence in the north-west of the borough. There were 71 new diagnoses in 2021, the highest in London.

Levels of HIV testing in the borough are comparable to London and higher than across England as a whole, with 56% of eligible attendees at specialist sexual health services accepting a HIV test in 2021.



Figure 38: HIV testing coverage out of those considered eligible for an HIV test when attending specialist sexual health services.

Source: [OHID 2023. Sexual and Reproductive Health Profiles.](#)

Late diagnosis of HIV is an important predictor of poor health and premature death. Recent figures show that 40% of adults (aged 15+) diagnosed with HIV received a late diagnosis. Levels of late diagnosis in Southwark are comparable to London (39%) and England (43%).

Just over a quarter (27%) of gay, bisexual and other men who have sex with men received a late diagnosis, lower than for heterosexual and bisexual women (53%) and heterosexual men (60%).

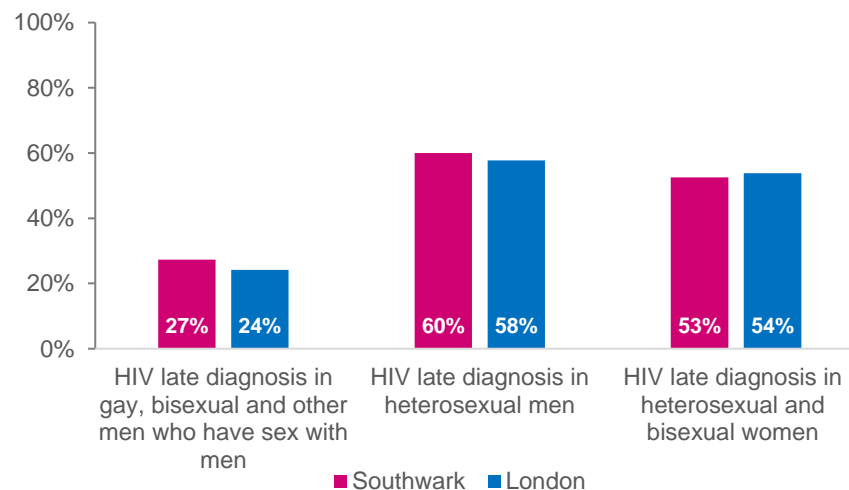


Figure 37: Percentage of HIV cases with a late diagnosis, 2019-21. Only counts those aged 15+ and who were first diagnosed in the UK

Source: [OHID 2023. Sexual and Reproductive Health Profiles.](#)

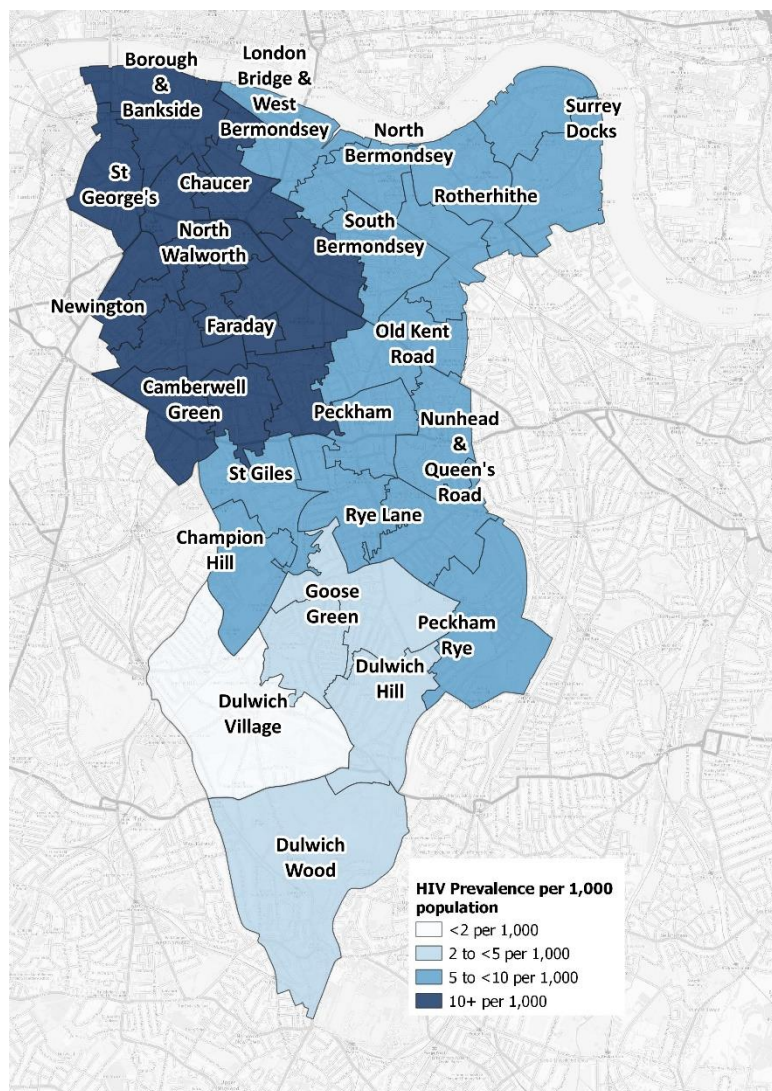


Figure 39: Diagnosed HIV prevalence among people of all ages, 2021.
Source: UKHSA 2023.

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11.3 Long-term conditions

The Department of Health & Social Care defines a long-term condition as: “...one that cannot currently be cured but can be controlled with the use of medication and/or other therapies.”

Long-term conditions are the main driver of cost and activity in the NHS, and have a significant impact on people’s health and wellbeing.

Using data gathered from Southwark GP’s, we know that there are over 107,000 patients registered at Southwark GP’s who are living with one or more long-term condition, 25,000 of these patients are living with three or more conditions.

The most commonly diagnosed long-term conditions are hypertension, depression and obesity. These are the most prevalent conditions in both the North and South Primary Care Networks in Southwark, as well as being the most diagnosed conditions across England.

Hypertension (high blood pressure) is the most prevalent long-term condition in the borough, and is a key risk factor for life threatening conditions such as heart attacks and strokes. Hypertension disproportionately affects those from a Black ethnic background: 18% of the GP registered population who are Black have hypertension, compared to 9% of the White population, 8% of the Asian population, 5% of the mixed ethnicity population and 4% of those from other ethnicities.

Non-diabetic hyperglycaemia (elevated blood sugar levels) and diabetes mellitus are the next most prevalent conditions. Diabetes mellitus covers those with a diabetes diagnosis of both types 1 and 2, and cases where the type is yet to be determined. Within Southwark, there are over 900 patients registered with a Southwark

GP's with type 1 diabetes, and 17,700 patients with type 2 or other forms of diabetes. Type 2 diabetes disproportionately affects those from a Black ethnic background, 45% of diabetic patients are from a Black ethnic background, despite only 25% of the overall population being Black. Type 2 diabetes also disproportionately affects those living in more deprived areas in the centre of the borough.



Figure 40: Most common diagnosed conditions in Southwark, 2021/22
Source: [NHS Digital 2021, Quality & Outcomes Framework, 2021/22](#)

Multi-morbidity

Multi-morbidity refers to those living with multiple conditions. Our knowledge of development and progression to multiple long-term conditions continues to develop, however key findings from national and local research indicates that:

- People in the UK are developing multiple long-term conditions at an increasingly younger age.
- Nationally, those from a Black, Asian and minority ethnic backgrounds are more likely to develop multiple long-term conditions, and develop them at a younger age than those from a White background.
- Multiple long-term conditions are more common in communities experiencing higher levels of socio-economic disadvantage. Those living in the most disadvantaged areas of the country can expect to develop two or more long-term conditions up to 10 years earlier than those living in the most affluent communities.
- Certain long-term conditions are linked, so having one increases the likelihood of developing multiple conditions.

Locally, 55% of those with one or more long-term conditions are female and 45% are male. Of those with three or more long-term conditions, 57% are female and 43% are male.

Those from a Black ethnic background in Southwark are overrepresented among those with long-term health conditions. Black patients make up 33% of those with one or more long-term conditions and 39% of those with 3 or more long-term conditions, despite making up only 25% of the population.

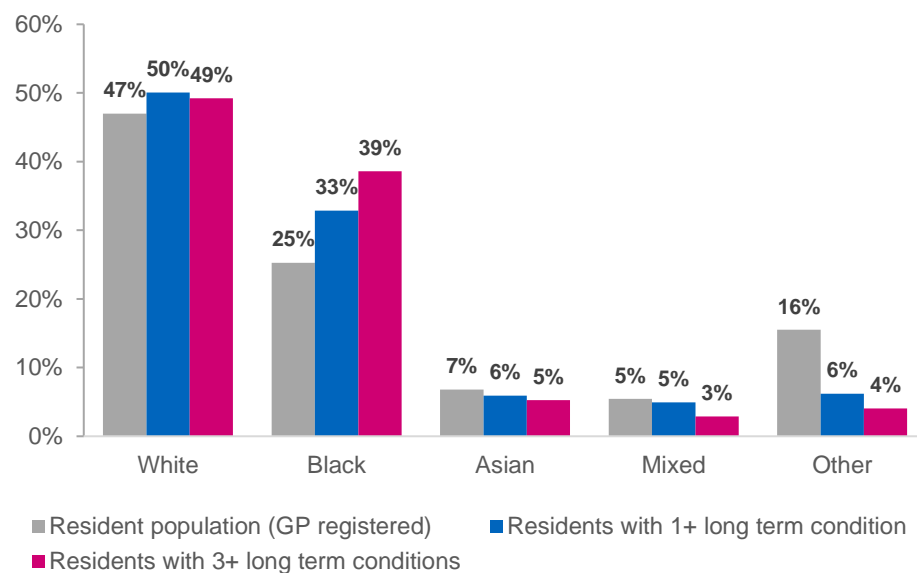


Figure 41: Proportion of GP registered Southwark residents with long-term conditions, by ethnic group, compared to Southwark's GP resident population by ethnic group.

Source: South East London Integrated Care System 2023. Comorbidities Dashboard.

An ageing population means there has been an increase in the number of people with multiple long-term conditions. This change requires a greater shift towards co-ordinated and holistic care, rather than the provision of unconnected episodes of care. Research increasingly points to the importance of addressing both the social and economic context in which residents live in order to prevent and slow the progression to multiple long-term conditions.

Ambulatory care sensitive conditions

The term 'ambulatory care sensitive conditions' refers to long-term conditions that should not normally require hospitalisation. These include conditions such as diabetes and high blood pressure, which can effectively be managed within the community.

Reducing the number of hospital admissions for ambulatory care sensitive conditions is a key ambition of the NHS. Figures for 2022/23 show there were 1,950 unplanned hospital admissions in Southwark for these conditions. This was higher than the average for South East London of 809 admissions per 100,000 residents.

The rate of admissions for London was 548 in 2020/21 compared to 662 per 100,000 in England.

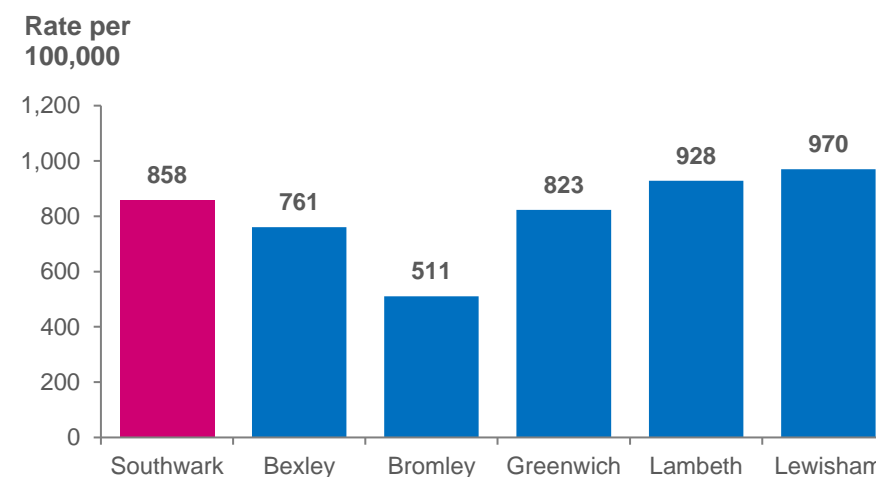


Figure 42: Unplanned admissions for ambulatory care sensitive conditions per 100,000 residents, indirectly standardised rates, 2022/23.

Source: South East London Integrated Care System 2023. Unplanned ACSC Admissions Report Dashboard.

11.4 Hospital Waiting Times

'Incomplete pathways' are the waiting times for patients waiting to start treatment. These patients will be at various stages of their care, for example, waiting for diagnostics, an appointment with a consultant, or for admission for a procedure. These are sometimes referred to as the NHS waiting list. The NHS Constitution standard states that 92% of patients on 'incomplete pathways' should be seen within 18 weeks from time of referral.

While the number of people on hospital waiting lists was increasing before the pandemic, we know the situation has deteriorated further over the last few years. Figures for March 2023 published by NHS England show there are over 7 million patients waiting to start treatment, with 59% of patients wait times being 18 weeks or less.

Our local hospital trusts perform better than the national average for waiting times, with a much larger percentage of patients waiting within the standard set out in the NHS Constitution. However, over 180,000 people are waiting for treatment at our two main hospital trusts, Kings College and Guy's & St Thomas' hospitals.

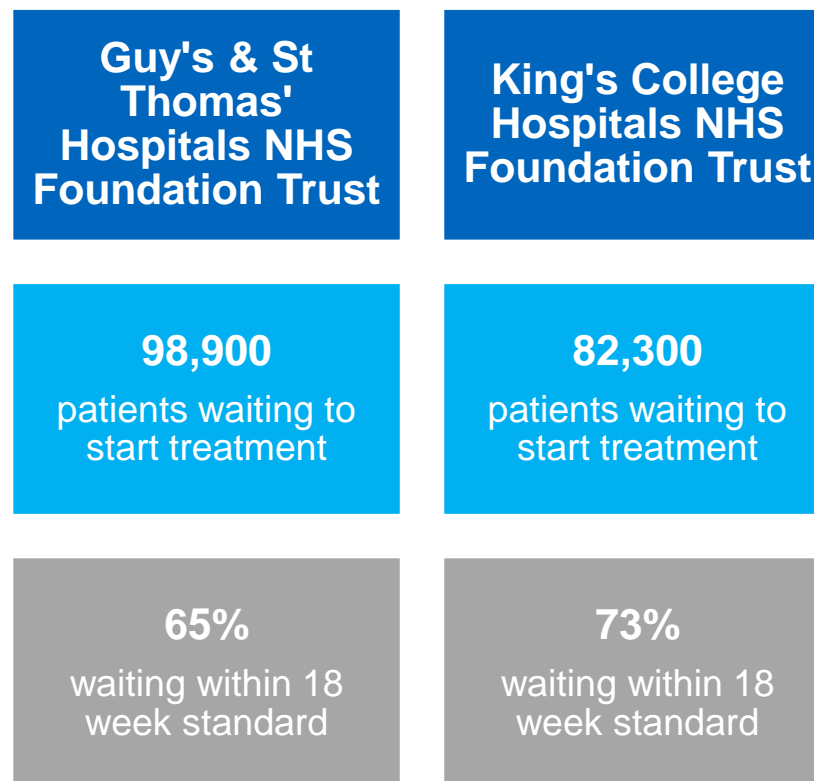


Figure 43: Consultant-led Referral to Treatment Waiting Times Data, for King's College and Guy's and St Thomas' hospital trusts, March 2023
Source: [NHS England, 2023. Consultant-led Referral to Treatment Waiting Times Data 2023/24](#)

11.5 Cancer

In 2020, there were approximately 8,350 people in Southwark who were diagnosed or had previously been diagnosed with cancer (living with or beyond cancer). This was lower than the rates nationally and across South East London. Cancer prevalence has been increasing since 2010, when fewer than 5,000 residents of Southwark were living with or beyond cancer.

It is important to know how many people are both living with and beyond cancer, in order to plan for ongoing care needs. Within the South East London, the majority (15,000 people) were first diagnosed 5-9 years ago, while a further 12,000 people were diagnosed between 2-4 years ago.

Within Southwark, the most prevalent forms of cancer are breast (26%) and prostate (21%). The prevalence of cancers differed between men and women, however blood and colorectal cancer had a high prevalence in each.

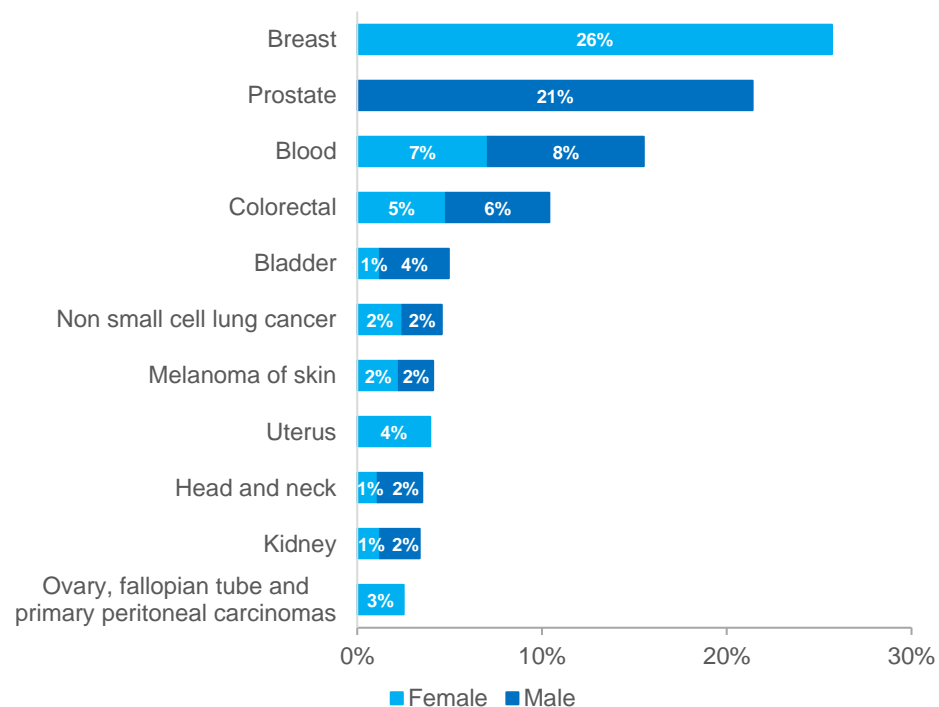


Figure 44: Percentage prevalence of cancers by site, in men and women living with and beyond cancer in Southwark 2020.

Source: [National Cancer Registration & Analysis Service 2020. Cancer Prevalence.](#)

The overall incidence of new cancer cases in Southwark is comparable to England, however rates of both lung cancer and prostate cancer are significantly higher than the national average.

National evidence shows that age is one of the largest risk factors for the development of cancer, with more than a third of all cancers occurring in those aged 75 and over. There is also a strong association between cancer incidence and socio-economic

disadvantage. Evidence from Cancer Research UK points to almost 17,000 additional cases of cancer each year in England due to socio-economic inequalities.

There are also disparities in cancer prevalence between different ethnic groups. In 2023, 64% of cancer patients registered at Southwark GP's are White, 23% are Black, 4% are Asian, 3% Mixed ethnicity and 7% are listed as 'Other' ethnicity.

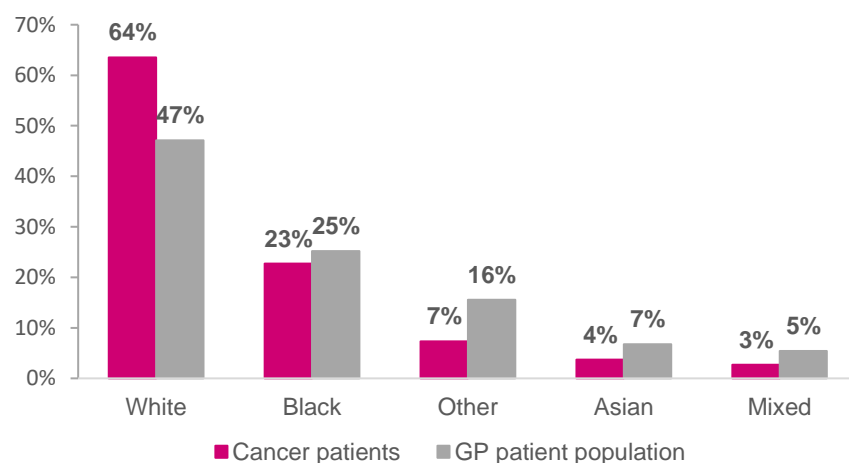


Figure 45: Prevalence of cancer by ethnicity of patient, among patient's registered at Southwark GP's, compared to the overall GP patient population by ethnicity.

Source: South East London Integrated Care System 2023. Cancer population insights dashboard.

Cancer screening is a vital tool to diagnose cancers in early stages. Currently, screening is available for bowel, breast and cervical cancers. Uptake of screening in Southwark is highest for cervical cancer.

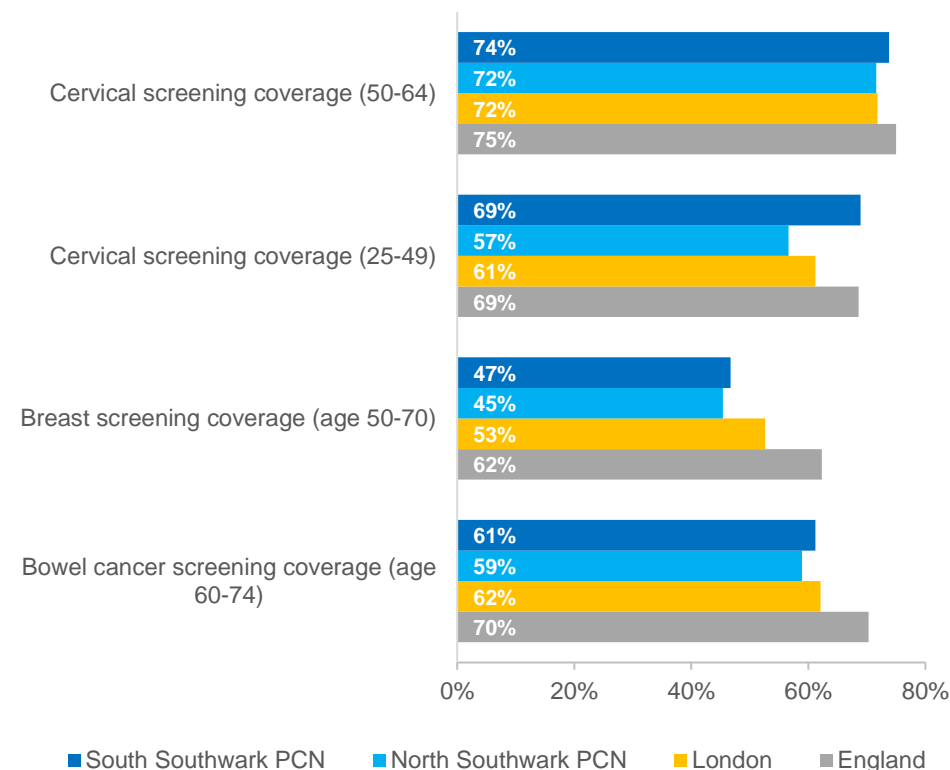


Figure 46: Coverage of cancer screening programmes in 2021/22 by Primary Care Network

Source: [OHID, 2023. Cancer Services Profile.](#)

When examining screening uptake by ethnic group, uptake is highest among those of a White ethnic background for bowel and breast cancer, and those of a Black ethnic background for cervical cancer. Breast cancer has the lowest uptake, with less than 50% coverage for each of the ethnic groups.

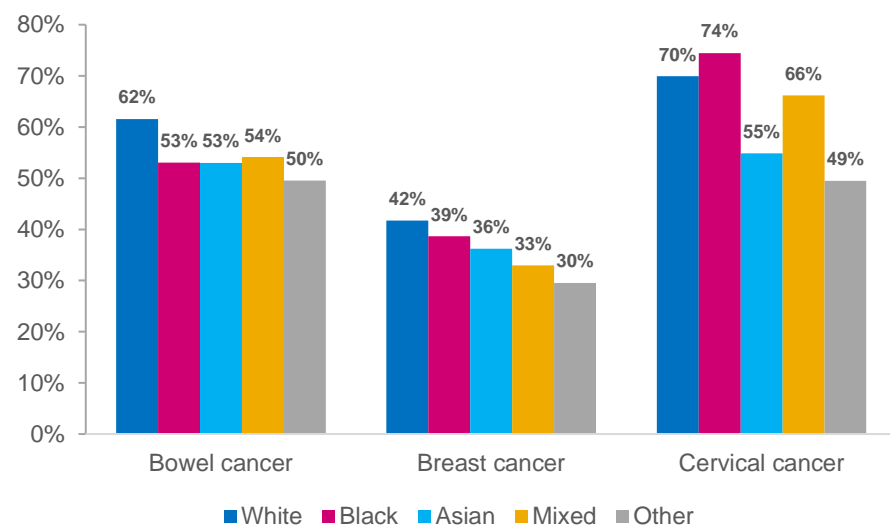


Figure 47: Percentage of eligible patients from each major ethnic group, who have been screened for bowel cancer in the last 2.5 years, breast cancer in the last 2.5 years and cervical cancer in the past 3.5 years (for those aged 25-49) or 5.5 years (for those aged 50-64).

Source: South East London Integrated Care System 2023. Cancer population insights dashboard.

The early diagnosis of cancer is an important factor in ensuring the best health outcome. There is a national ambition for 75% of cancers in England to be diagnosed at Stage 1 or Stage 2 by 2028. Figures for 2019 show 55% of cancers in South East London are diagnosed at this point, though this varies by cancer type. For example, percentages for the following cancers diagnosed in stage 1-2:

- Breast cancer: 84%
- Bladder cancer: 78%
- Cervical cancer: 70%
- Prostate cancer: 59%
- Colon cancer: 42%

11.6 Mental Health

Mental illness covers a wide range of conditions such as depression, anxiety disorders and obsessive compulsive disorders, through to more severe conditions like schizophrenia. It is thought one in four people will experience a mental health problem in any given year.

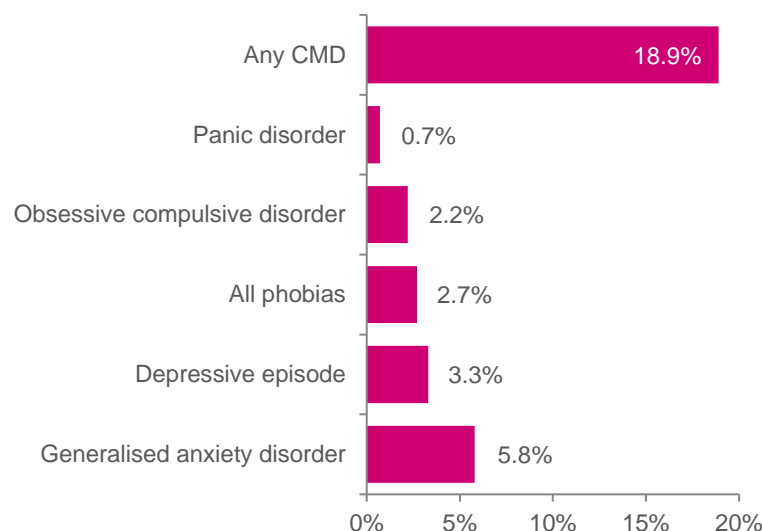


Figure 48: Prevalence of common mental disorders among adults in London
Source: [NHS Digital, 2016. Adult Psychiatric Morbidity Survey, 2014.](#)

Results from the 2014 Adult Psychiatric Morbidity Survey show that 1 in 6 adults had a common mental disorder (CMD) in the week prior to the survey, rising to almost 1 in 5 adults in London. Applying the London prevalence to Southwark would equate to almost 48,700 adults in the borough experiencing a CMD.

All types of common mental disorders are more prevalent in women than among men: 1 in 5 women report experiencing CMD, compared

to 1 in 8 men. The gender gap is particularly pronounced among those aged 16-24, where more than three times the number of women have a common mental disorder than men.

Figures for 2021/22 show that just over 13,000 people in Southwark were referred to psychological therapy services. Of those referred, 52% were from a White ethnic background, 19% from a Black ethnic background, 7% from a mixed ethnic background and 6% from an Asian ethnic background.

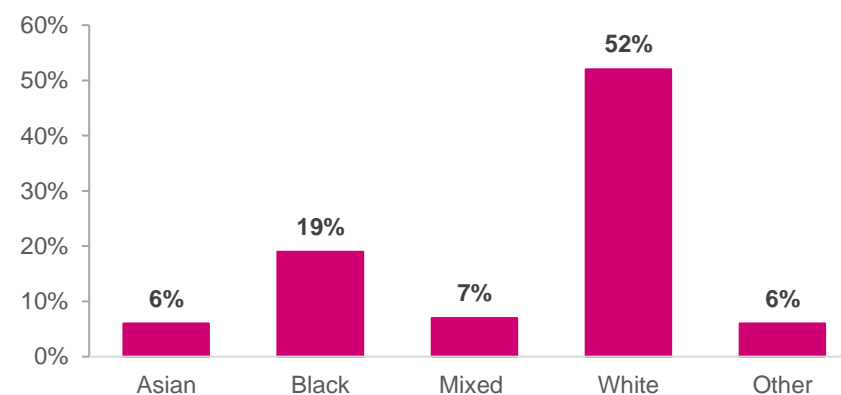


Figure 49: Referrals to Southwark psychological therapy services (IAPT), by major ethnic group.

Source: [NHS Digital, 2022. Psychological Therapies, Annual Reports on the use of IAPT services 2021/22.](#)

The most represented groups referred in terms of gender and age were females aged 26 to 64 (49% of referrals); men aged 26-64 (23% of referrals) and females aged 18-25 (17% of referrals).

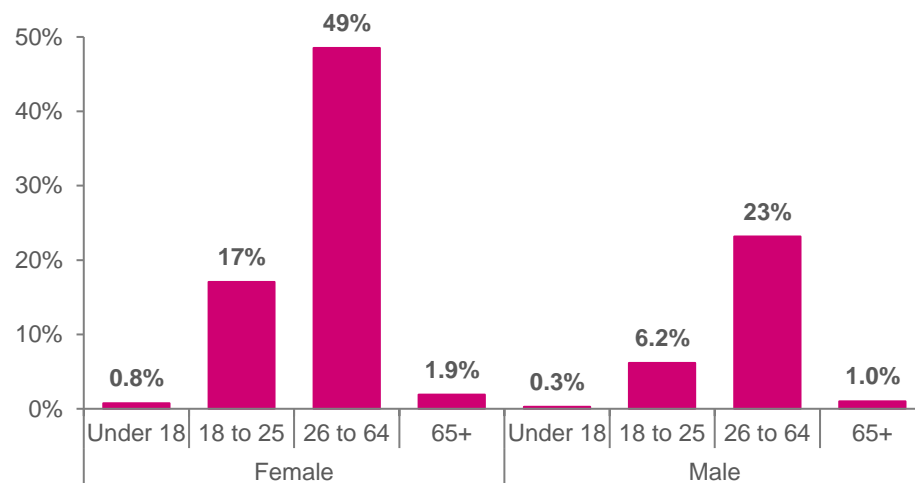


Figure 50: Number of referrals to Southwark IAPT in 2020/21 by group

Source: [NHS Digital, 2022. Psychological Therapies, Annual Reports on the use of IAPT services 2021/22.](#)

Severe Mental Illness (SMI) refers to a range of conditions which include schizophrenia, bipolar affective disorder and depression with psychosis. Figures for 2022/23 show nearly 4,000 patients registered with a Southwark GP have been diagnosed with severe mental illness.

This cohort has significant health needs and also experiences great socio-economic disadvantage, with 63% of those with severe mental illness living in areas in the highest 30% of deprivation in the borough.

There are also strong ethnic inequalities in severe mental illness

prevalence, with 39% of severe mental illness patients being of a Black or Black British ethnicity; those from a Black ethnic background make up 25% of Southwark's general population. In terms of age, severe mental illness is most prevalent in the 41-60 age range, making up 45% of all severe mental illness patients.

In 2018-2020, the rate of premature mortality in adults with severe mental illness in Southwark was 127 per 100,000 population. This was worse than both the London rate (103) and the England rate (104).

12. AGEING WELL

12.1 Adult Social Care

Adult Social Care provide information, advice and services to local residents to support them to remain independent. In 2022/23 there were 251 people who requested and started using a service.

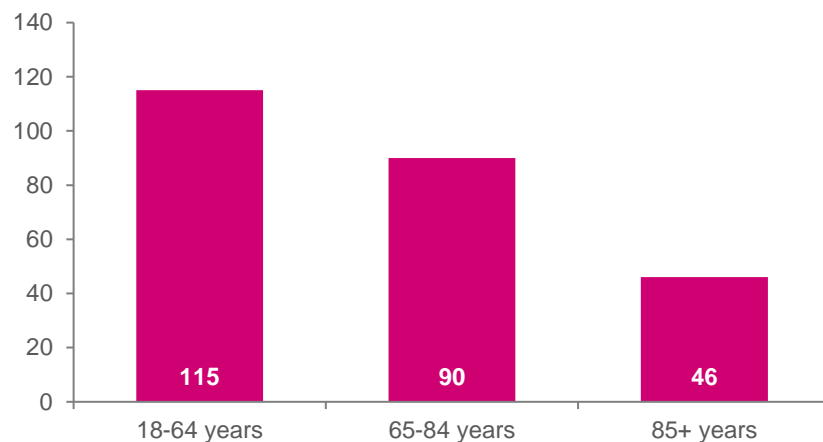


Figure 51: New service users who started between April 2022 and March 2023, by age group

Source: Southwark Adult Social Care Division

In 2022/23, slightly more new users were over the age of 65 (136 users) compared to under 65 (115 users).

Adult Social Care provided support to nearly 3,340 long-term service users in 2022/23. The most common primary support reason was for older people and physical disability (67%). The next most common reason for support was learning disability, with the majority of these service users being in the 18-64 age category.

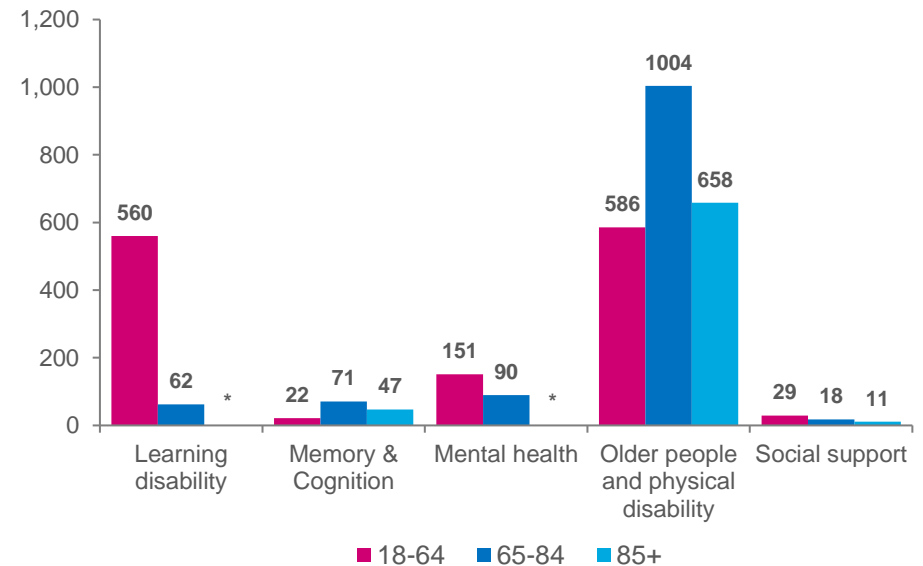


Figure 52: Primary support reason for long-term service users in 2022/23, by age group

Source: Southwark Adult Social Care Division

*denotes small numbers which have been suppressed

Adult social care also provides support to those providing unpaid care. In 2022/23 Southwark supported 167 newly identified unpaid carers.

12.2 Falls

Falls are the largest cause of emergency hospital admissions among older people and can significantly affect longer term outcomes. Those aged over 65 are at greatest risk of falling, with around a third of this group falling at least once a year, increasing to around half among those aged 80 and over.

Emergency hospital admissions for injuries due to falls in older people in Southwark are consistently above national and regional levels, despite Southwark having a relatively young population. Latest figures show there were 560 admissions in Southwark between during 2021/22, with the borough consistently having amongst the highest admission rates in South East London.

Admission rates also increase significantly with age, mirroring the national pattern. Rates among those aged 80 and over are more than four times those under 80.

In 2021/22, 135 Southwark residents aged 65+ suffered from hip fractures, similar to the rate of hip fractures seen across London and England.

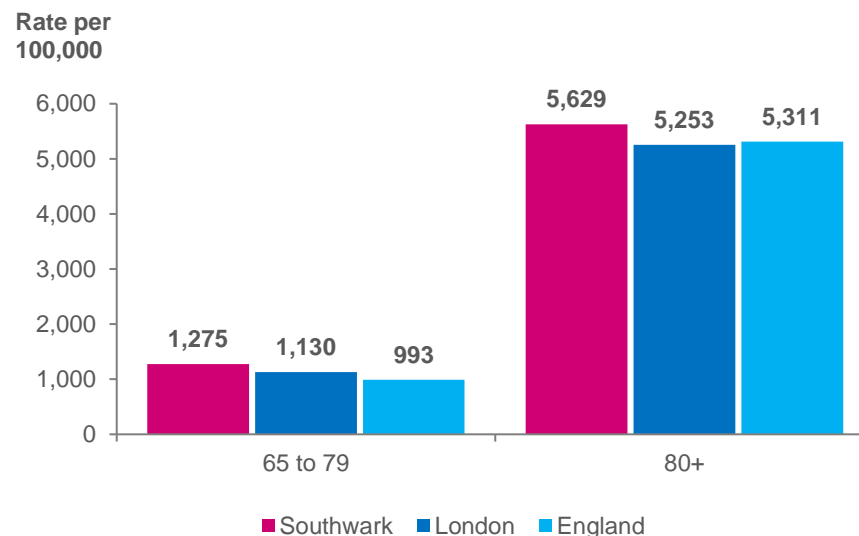


Figure 53: Emergency admissions due to falls in those aged 65-79 and 80+ 2021/22.

Source: [OHID, 2023. Productive & Healthy Ageing Profile.](#)

12.3 Dementia

Dementia is a group of symptoms characterised by difficulties with one or more areas of mental function. These areas may include memory, language, ability to complete activities of daily living, behavioural changes including self-neglect and out of character behaviour and psychiatric problems. Because they are less able to perform activities of daily living, people with dementia often require additional community support and long-term care.

Figures for 2023 show over 1,800 people in Southwark have been diagnosed with dementia. Our diagnosed prevalence in 2020 was 4%, comparable to both London (4.2%) and England (4%).

Research shows a timely diagnosis of dementia can have a significantly positive impact on a person's quality of life. Latest estimates suggest that just over two thirds of those thought to be living with dementia in Southwark have received a diagnosis; comparable to regional and national levels.

In 2019/20 there were over 1,620 emergency hospital admissions by Southwark residents with a diagnosis of dementia. The borough has the highest rate of emergency hospital admission for dementia in the capital with rates significantly above both London and England.

12.4 Mortality

Deaths are considered preventable if, in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause could mainly be avoided by public health and primary prevention interventions

In 2021 there were 372 deaths among those aged under 75 in Southwark that were considered preventable. At a rate of 210 per 100,000 (age standardised); the under 75 preventable mortality rate in Southwark was significantly worse than both London and England.

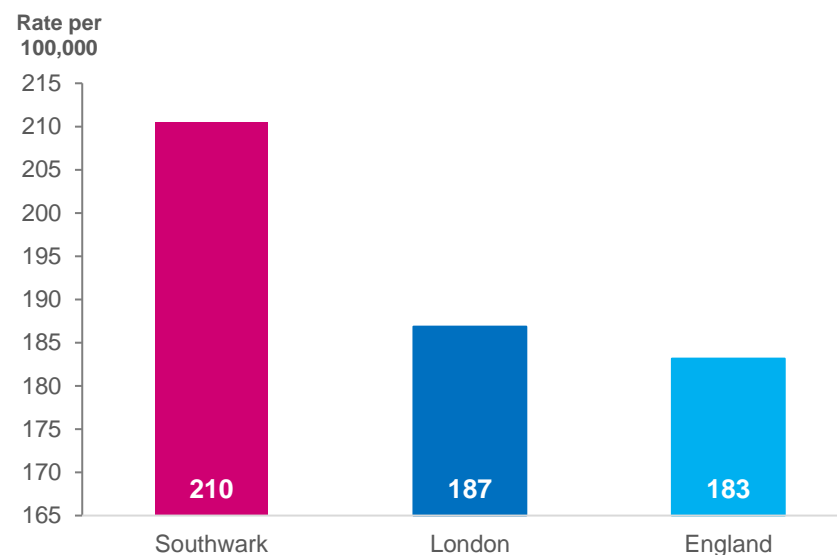


Figure 54: Preventable mortality: under 75 mortality rate from all causes considered preventable, per 100,000 population. Age standardised mortality rate.

Source: [OHID, 2023. Public Health Outcomes Framework.](#)

Preventable mortality rates are also broken down by 4 key disease groups: cardiovascular, cancer, liver and respiratory diseases. For each of these, rates of preventable mortality are higher in Southwark than London and England, with cancer being the leading cause of preventable mortality in those under 75. Despite being slightly higher, preventable mortality in Southwark is statistically similar to both London and England for all four disease groups.

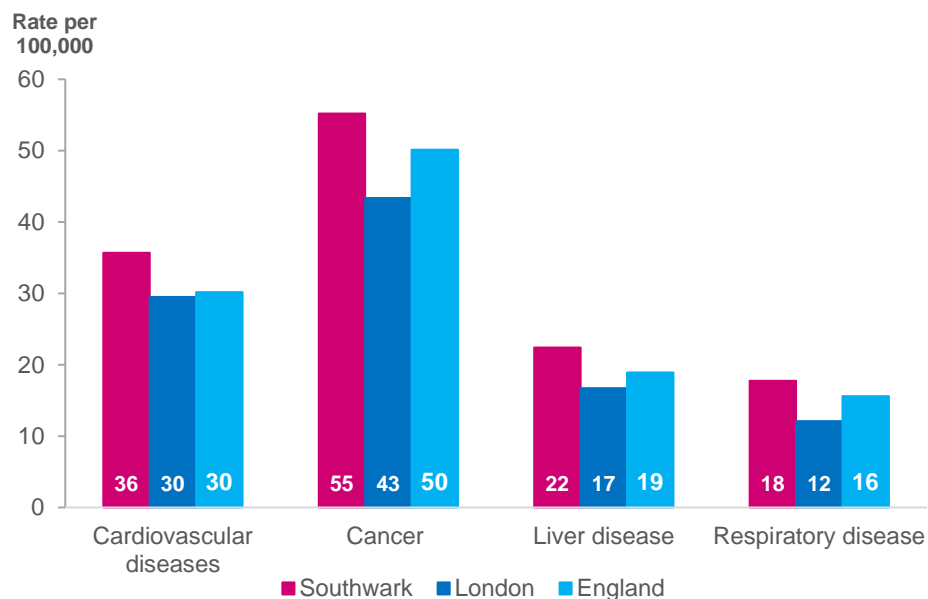


Figure 55: Preventable mortality among those aged under 75 per 100,000 residents, by condition in 2021. Age standardised mortality rate.
Source: [OHID, 2023. Public Health Outcomes Framework.](#)

Geographical inequalities in preventable mortality mirror many of the underlying health issues in the borough, with levels often highest in our more disadvantaged communities. Dulwich Village has the lowest rates of preventable mortality in the borough.

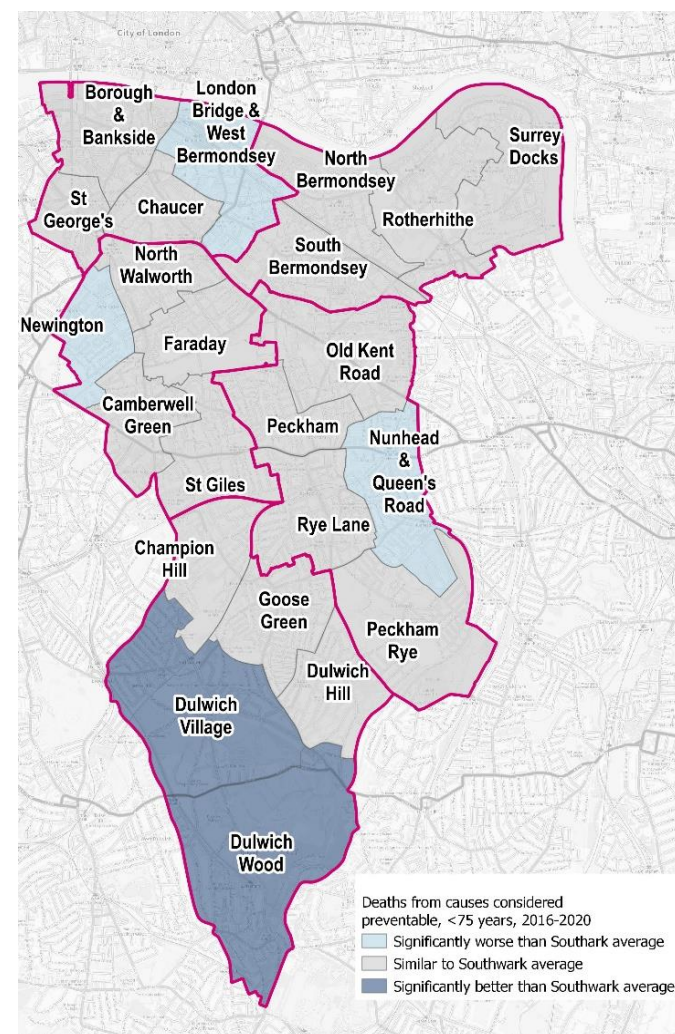


Figure 56: Significance of mortality rate from all causes considered preventable in residents under 75 years old, by ward of residence in comparison to the Southwark average (2016-2020).

Source: [OHID 2023. Local Health – Small Area Public Health Data.](#)
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12.5 Mortality and COVID-19

From 2020, the preventable mortality definition includes deaths where COVID-19 is listed as an underlying cause of death. COVID-19 was the leading cause of death in England in 2020. Mortality statistics for COVID-19 are described in two sets of statistics:

- Deaths **involving** COVID-19: where COVID-19 was mentioned on the death certificate, but not necessarily an underlying cause of death.
- Deaths **due to** COVID-19: where COVID-19 was listed directly as an underlying cause of death.

Mortality rates in London were higher than those of England, both for deaths involving, and due to, COVID-19. The under 75 mortality rate was significantly lower than the overall rate, as expected, since older people are more vulnerable to COVID-19.

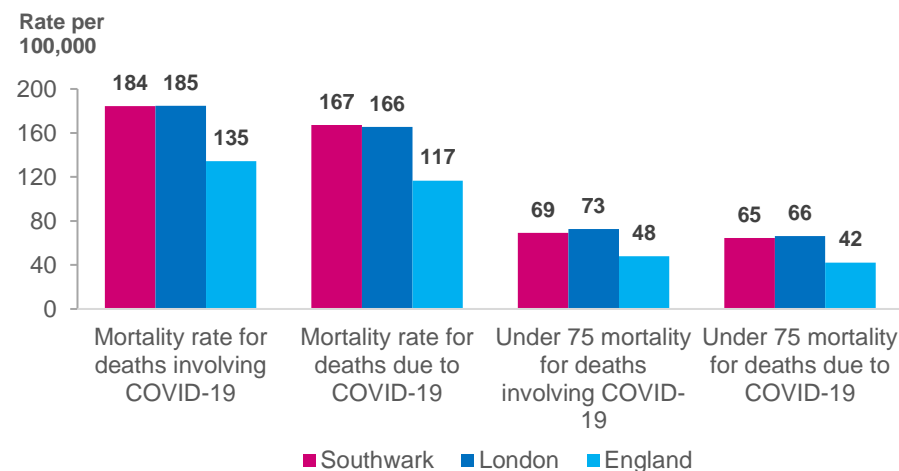


Figure 57: Mortality rates for deaths involving or due to COVID-19 for all ages and those aged under 75, 2021.

Source: [OHID 2023. Mortality profile.](#)

Mortality due to and involving COVID-19 are also skewed heavily towards men, a pattern seen across Southwark, London and England. The under 75 mortality rates due to COVID-19 in Southwark in 2021 was 81 per 100,000 for males compared to 49 for females.

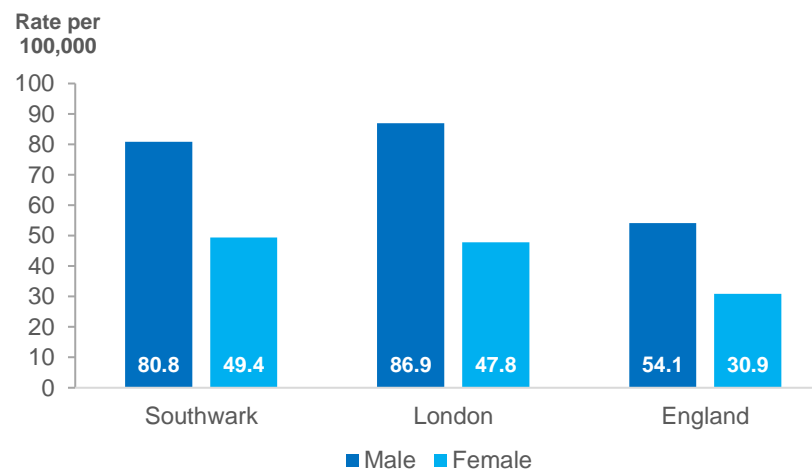


Figure 58: Under 75 mortality rate for deaths due to COVID-19 for males and females in Southwark, London and England, 2021.

Source: [OHID 2023. Mortality profile.](#)

12.6 Life expectancy

Life expectancy at birth has been increasing steadily over time. This is true across London and England, but the improvement has been more pronounced in Southwark. In 2021, life expectancy at birth was 78.2 years for men and 83.3 years for women in Southwark. These are comparable to the London and England life expectancies for both men and women.

While life expectancy in Southwark is increasing, this improvement has not been the same across the borough. Male life expectancy is highest in Dulwich Village and Chaucer wards, and lowest in London Bridge & West Bermondsey and Nunhead & Queen's road wards. Similarly for women, life expectancy is high in Dulwich Village, and neighbouring Goose Green and Champion Hill. Women's life expectancy is also lowest in London Bridge & West Bermondsey and Nunhead & Queen's Road wards as well as Peckham.

Whilst our residents are living longer, the length of the time spent living in good health is also an important factor. Healthy life expectancy is often considered a measure of whether we are adding life to years, as well as years to life.

Figures for 2017-19 show that while life expectancy among females in Southwark is higher than their male counterparts, these extra years are too often are spent in poor health.

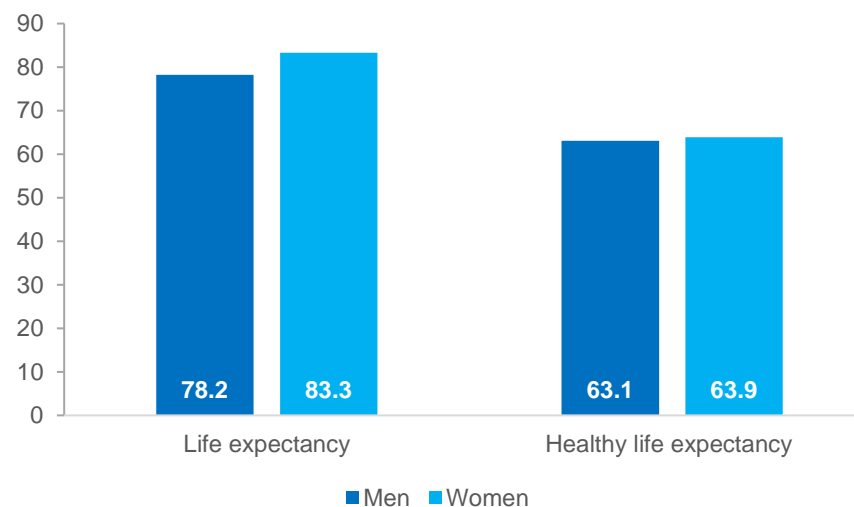


Figure 59: Life expectancy at birth (2021) vs healthy life expectancy (2018-2020) of men and women in Southwark.

Source: [OHID 2023. Productive Healthy Ageing Profile.](#)

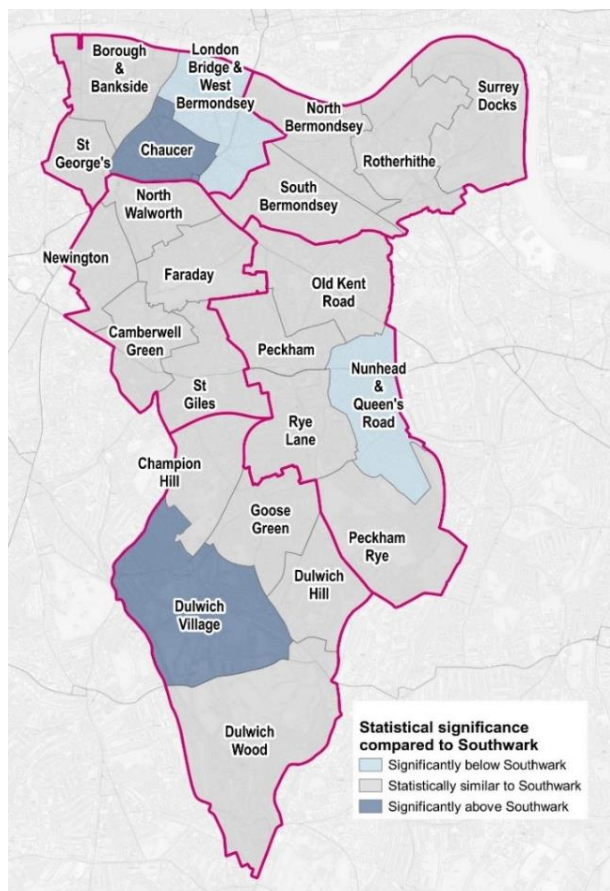


Figure 60: Significance of male life expectancy at birth, by ward, compared to the average male life expectancy in Southwark, 2016-20

Source: [OHID, 2023. Local Health.](#)

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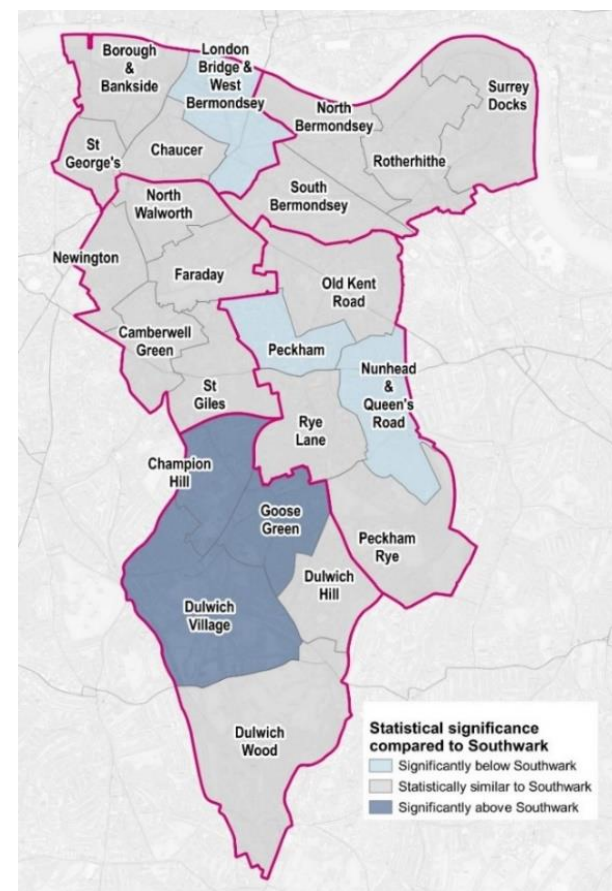


Figure 61: Significance of female life expectancy at birth, by ward, compared to the average female life expectancy for Southwark, 2016-20. Source: [OHID, 2023. Local Health.](#)

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