

# King's Lynn and Marshland North

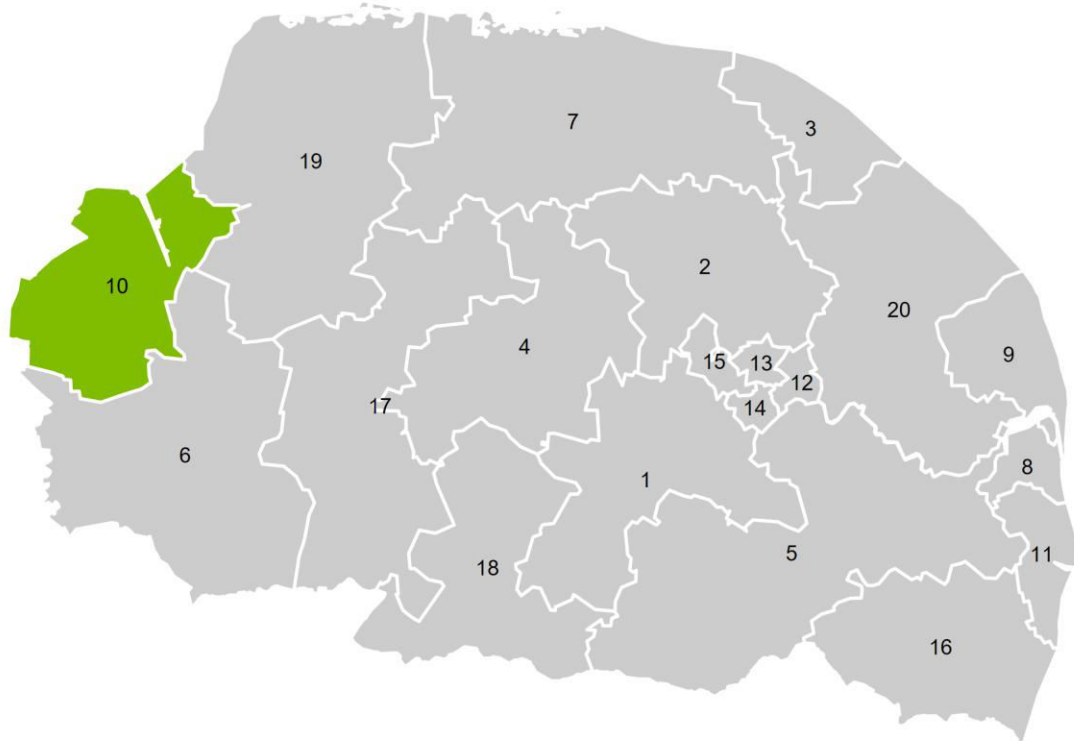
I&A Public Health Intelligence

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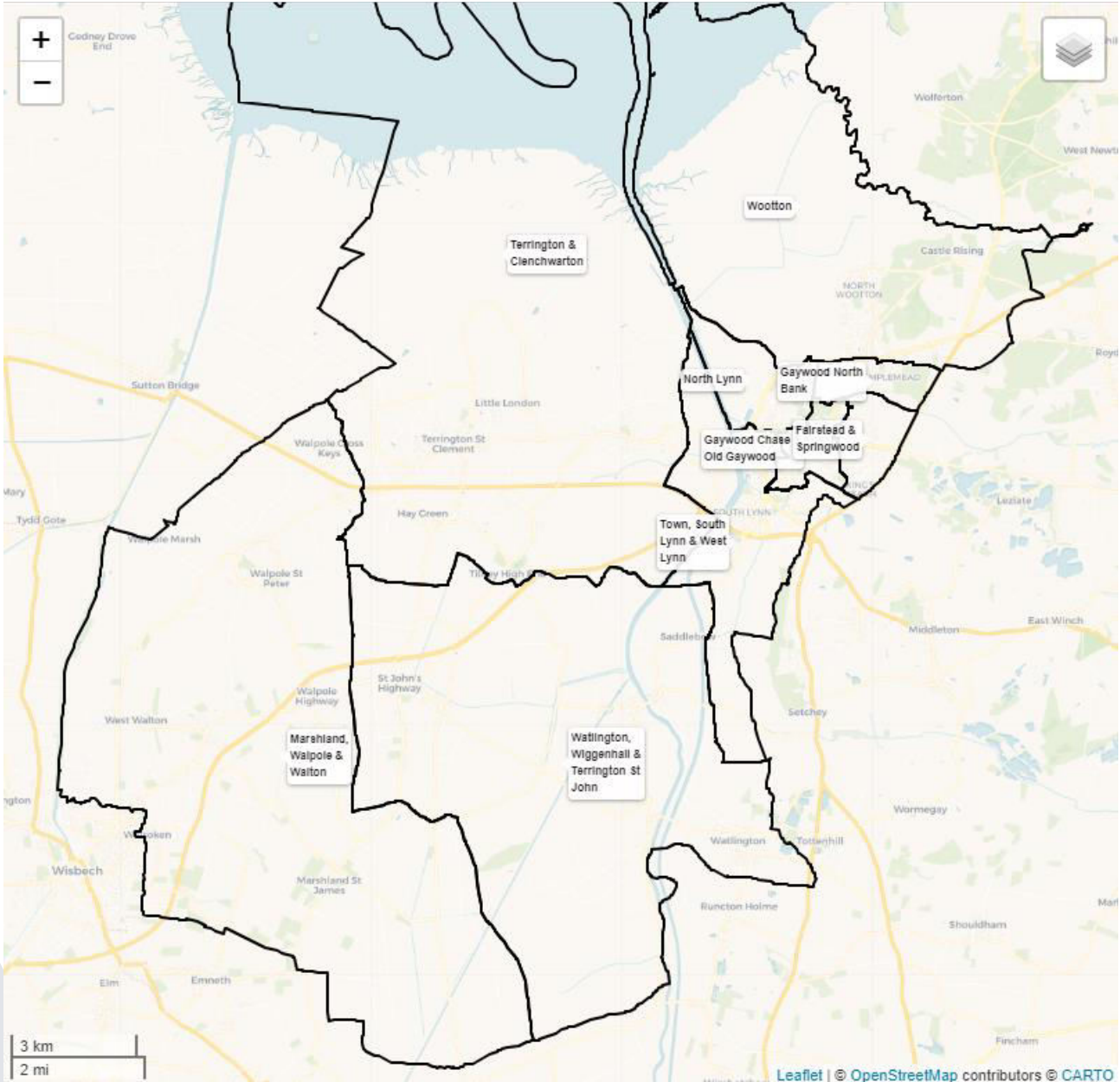
# Neighbourhood areas



Nr	Name	Resident Population <sup>1</sup>
1	A11 Attleborough and Wymondham	75,007
2	Aylsham, Coltishall and Reepham	43,737
3	Cromer and North Walsham	34,257
4	Dereham	50,190
5	Diss, Long Stratton, Loddon Waveney Valley	74,657
6	Downham Market and Villages	47,112
7	Fakenham, The Raynhams, Holt and Sheringham	45,873
8	Gorleston	44,337
9	Great Yarmouth and Northern Villages	56,192
<b>10</b>	<b>King's Lynn and Marshland North</b>	<b>72,760</b>
11	Lowestoft	78,700
12	Norwich East	54,275
13	Norwich North	53,717
14	Norwich South	64,785
15	Norwich West	52,943
16	South Waveney	37,456
17	Swaffham and Villages	26,241
18	Thetford and Watton	52,313
19	West Norfolk Coastal	34,604
20	Wroxham, Stalham and the Broads	55,629
<b>Total</b>		<b>1,054,785</b>

<sup>1</sup>2024 mid-year-estimates for small areas (ONS)

# Local areas (MSOAs)



# Neighbourhood Profiles

## What they are:

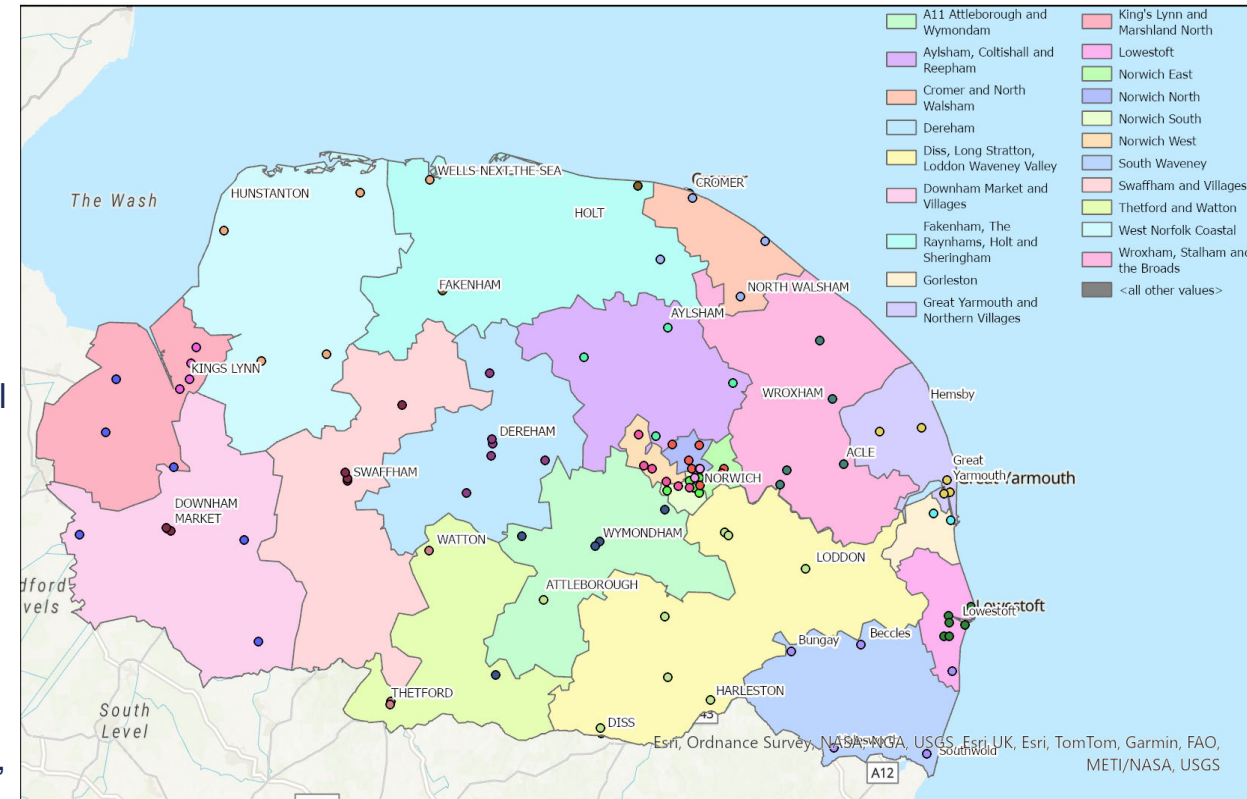
- Summaries of health, wellbeing, and wider determinants in each neighbourhood
- Draw on local data, insights, and community context
- Highlight key challenges and opportunities for improving population health

## Why they matter:

- Provide a shared evidence base for health, care, and community partners
- Support integrated planning and decision-making at neighbourhood level
- Help identify inequalities and target resources where they're most needed
- Research shows neighbourhood characteristics significantly influence health and wellbeing outcomes and advocates for 'natural' neighbourhood that reflect local perceptions and activity

## How they'll be used:

- Inform health and social care, Integrated Neighbourhood Teams (INTs) and wider system partners to guide service design, prevention initiatives, and community engagement and enable monitoring of progress over time

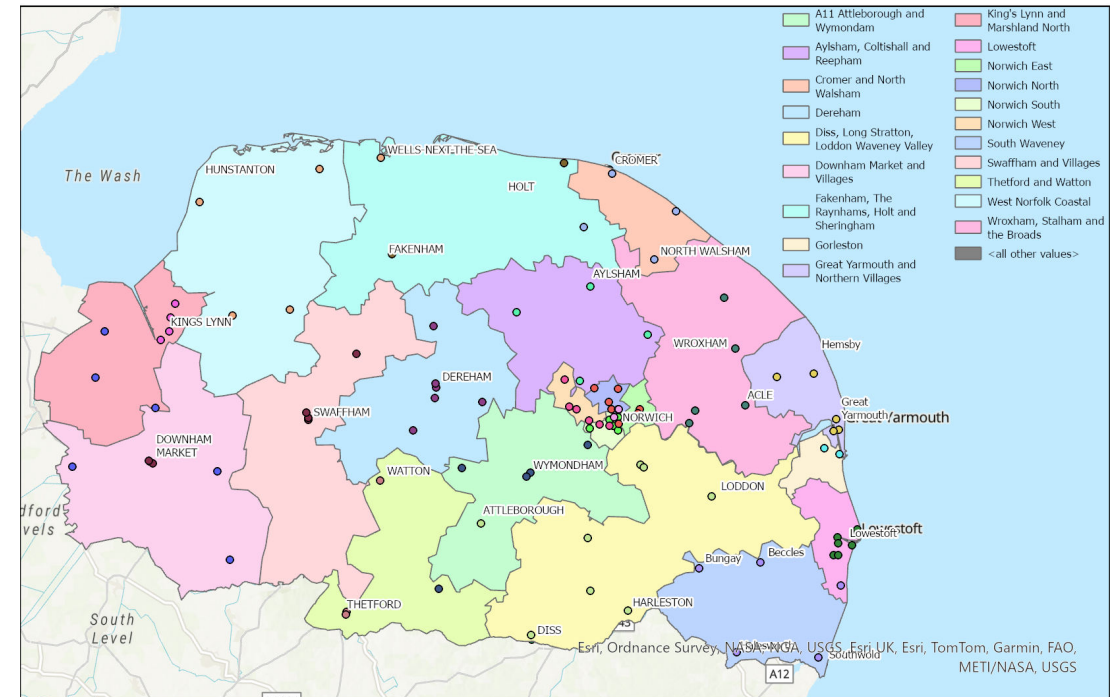


# How do we define neighbourhoods?

There is no single definition of a neighbourhood in the NHS and local authority planning context. Neighbourhoods can be understood in several ways:

- Administrative or statistical boundaries such as wards, parishes, or Middle Layer Super Output Areas (MSOAs), which provide stable geographies for data analysis.
- Economic centres like market towns or main urban areas, reflecting where people live, work, and access services.
- Functional service areas, for example, GP practice or NHS trust catchments, which align with how health and care services are delivered.
- Collaborative structures such as Primary Care Networks (PCNs) or integrated care partnerships, which represent groups of organisations working together to serve a defined population.

These neighbourhood profiles draw on recorded data for these areas - whether by GP practice population, PCN, or statistical geography - to provide a shared evidence base for planning, resource allocation, and addressing health inequalities.



# Methods

Most of the data used in this profile is based on information available at local (MSOA) level and thus calculated for the neighbourhood or local areas within the neighbourhood.

There are several exceptions:

- Slide 27: Life expectancy inequality is based on difference between the most and least deprived small areas (LSOAs). Because neighbourhood areas are relatively small, life expectancy inequality at the **Partnership (lower tier local authority)** or **Place (formerly CCG)** level that best matches the neighbourhood area was used ([Population - JSNA - Norfolk Insight](#)).
- Slide 34: The contribution of behavioural risk factors to mortality and morbidity is calculated by the Institute for Health Metrics and Evaluation and is available at no smaller than **county** level ([VizHub - GBD Compare](#)).
- Slides 38 and 46: Behavioural risk factors were estimated for **Partnership (lower tier local authority)** level for Norfolk's Health and Wellbeing Profiles ([Health & wellbeing profiles - JSNA - Norfolk Insight](#)).
- Slides 41 & 42: Estimates of long-term conditions are estimated based on GP NHS Quality Outcomes Framework records. Here, we show estimates for the **Primary Care Network** encompassing the largest number of GP practices at which Neighbourhood residents are registered.



# Population and deprivation

- This section introduces demographic and deprivation data for King's Lynn and Marshland North, highlighting population structure and socioeconomic challenges.

# Population and deprivation summary

King's Lynn and Marshland North is characterised by contrasting rural and urban areas. The area's age distribution is younger than Norfolk and Waveney overall, but there is considerable variation between urban and rural areas.

Socioeconomic deprivation is high, encompassing urban and rural areas. But there is also stark contrast with areas that are among the nationally least deprived.



	Period	England	Fairstead & Springwood	Gaywood Chase & Old Gaywood	Gaywood North Bank	Marshland, Walpole & Walton	North Lynn	Terrington & Clenchwarton	Town, South Lynn & West Lynn	Watlington, Wiggenhall & Terrington St John	Wootton
Resident population (aged 0 to 15)	2022	18.5	23.1	18.6	17.3	17.2	24.4	16.2	18.7	16.6	15.6
Resident population (aged 65 and over)	2022	18.6	12.7	19.1	22.6	24.3	11.4	27.7	16.3	24	30.2
Resident population (aged 85 and over)	2022	2.5	1.34	3.38	3.76	3.13	1.31	3.42	1.99	3.34	4.24
Population density: people per square kilometre	2022	438	3000	3020	2990	94.4	1530	99.8	737	103	168
Poverty: Index of Multiple Deprivation	2019	21.7	25.7	27.9	16.4	29.2	47.3	23.4	36.4	22.3	7.28
Poverty: English Indices of Deprivation	2019	12.9	14.6	14.7	7.98	13.6	26.3	12	19.7	12.1	4.25
Children in poverty: Income Deprivation Affecting Children Index (IDACi) (aged 0 to 15)	2019	17.1	19.7	17.7	9.19	18.6	32.5	14.6	24.8	14.4	6.14
Older people in poverty: Income Deprivation Affecting Older People Index (IDAOPI) (aged 60 and over)	2019	14.2	15.9	16.5	11.1	14.8	31.4	13.2	23.1	13.9	4.96
Fuel poverty (low income, low energy efficiency methodology)	2023	11.4	8.31	13.6	7.25	11.6	15	14.1	14.2	13.1	7.17
Unemployment: people claiming out of work benefit (aged 16 to 64)	2024/25	4.07	3.39	3.29	1.9	2.6	5.74	2.14	5.64	2.54	1.49
Long-term unemployment: people claiming out of work benefit for over 12 months (aged 16 to 64)	2024/25	0.51	0.21	0	0	0	0	0	0	0	0

Indicators are based on the Local Health summary (OHID Fingertips)

# Demography in King's Lynn and Marshland North

King's Lynn and Marshland North population compared to Norfolk and Waveney 2024



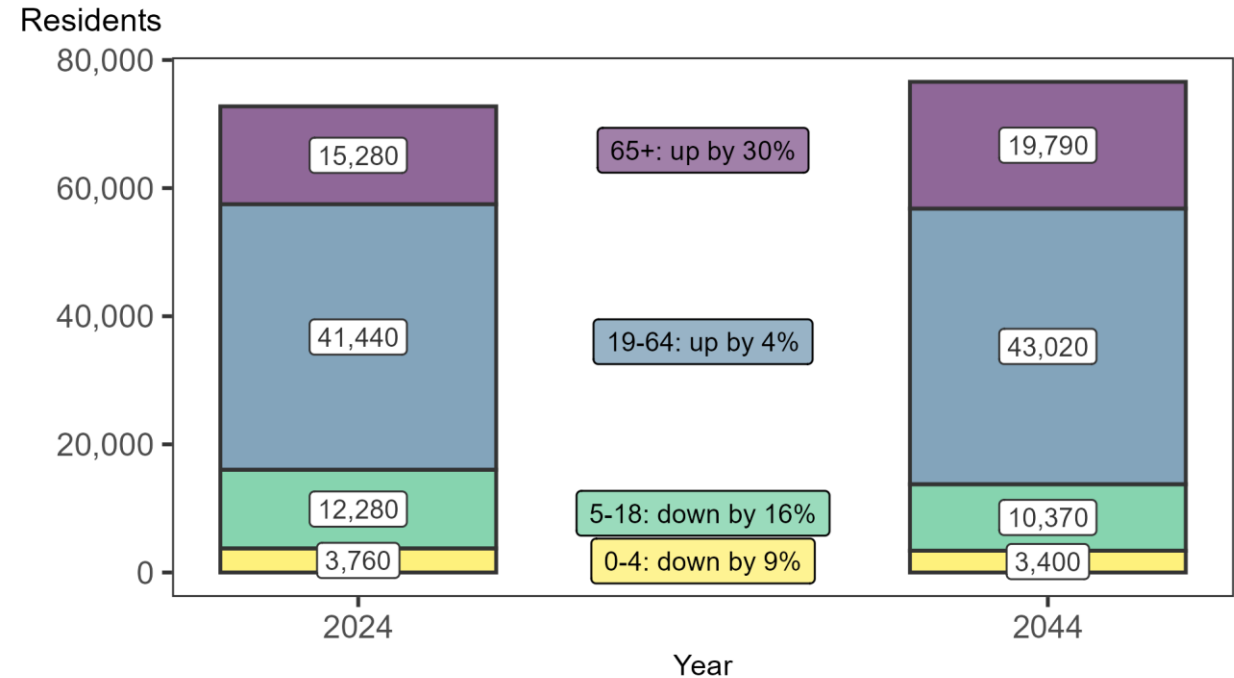
Source: ONS 2024 mid-year estimates

The area's age distribution is younger than Norfolk and Waveney overall, but there is considerable variation between urban and rural areas.

The age group with the largest projected population growth by 2044 in King's Lynn and Marshland North is people aged 65+.

Locally, the MSOA with the largest estimated overall population growth is Wootton with a 9.1% population increase by 2044.

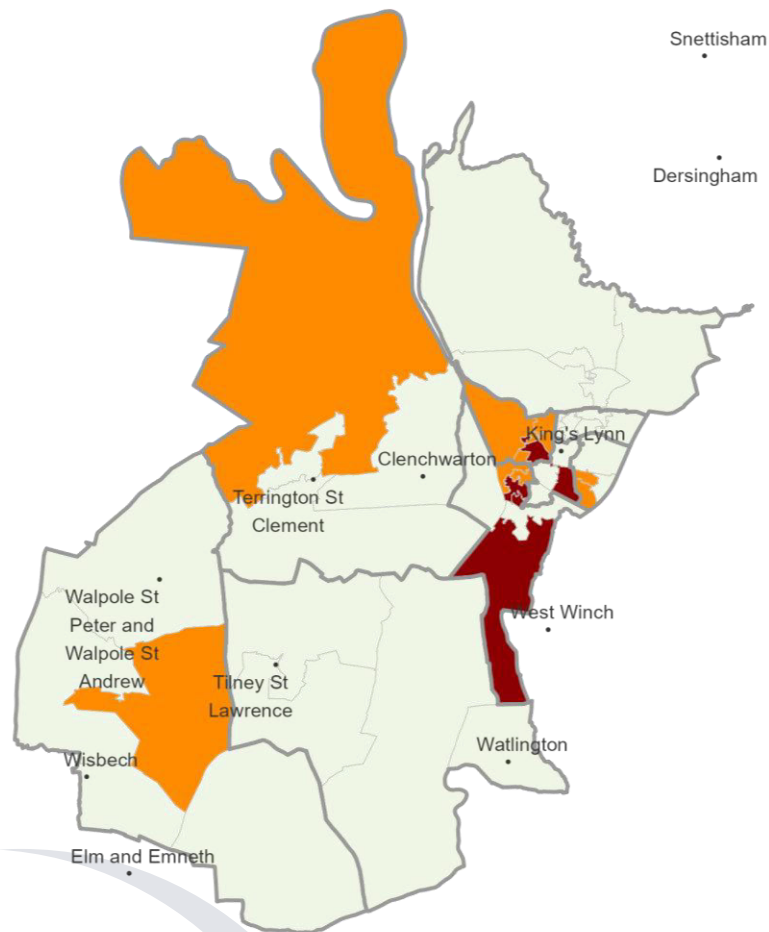
Population projections by age groups for King's Lynn and Marshland North



Source: ONS population projections (2025); Age-specific LTLA projections applied to MSOA SYOA mid-2024 populations

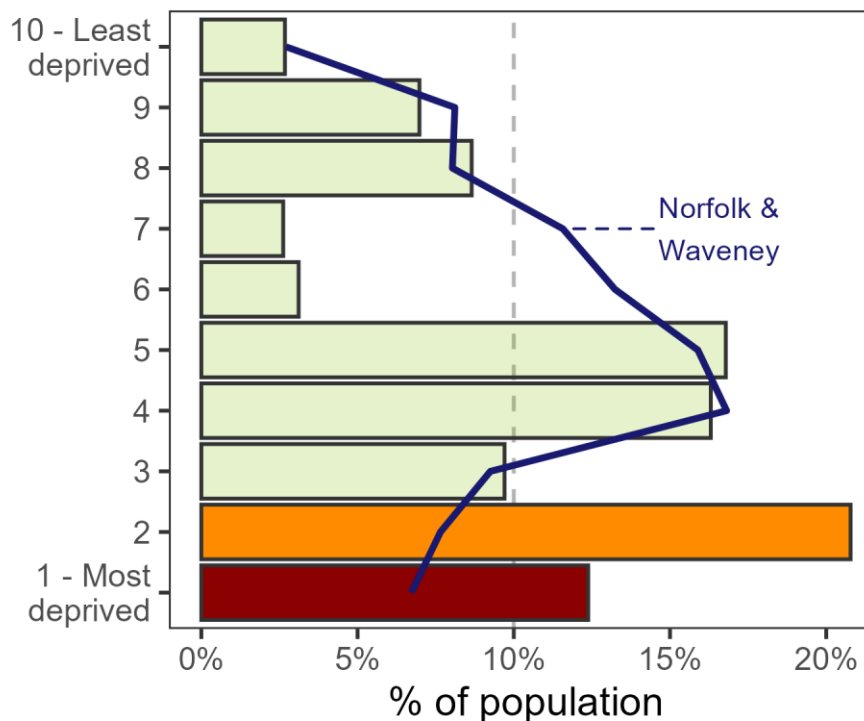
# Deprivation in King's Lynn and Marshland North

Core20 LSOAs in King's Lynn and Marshland North



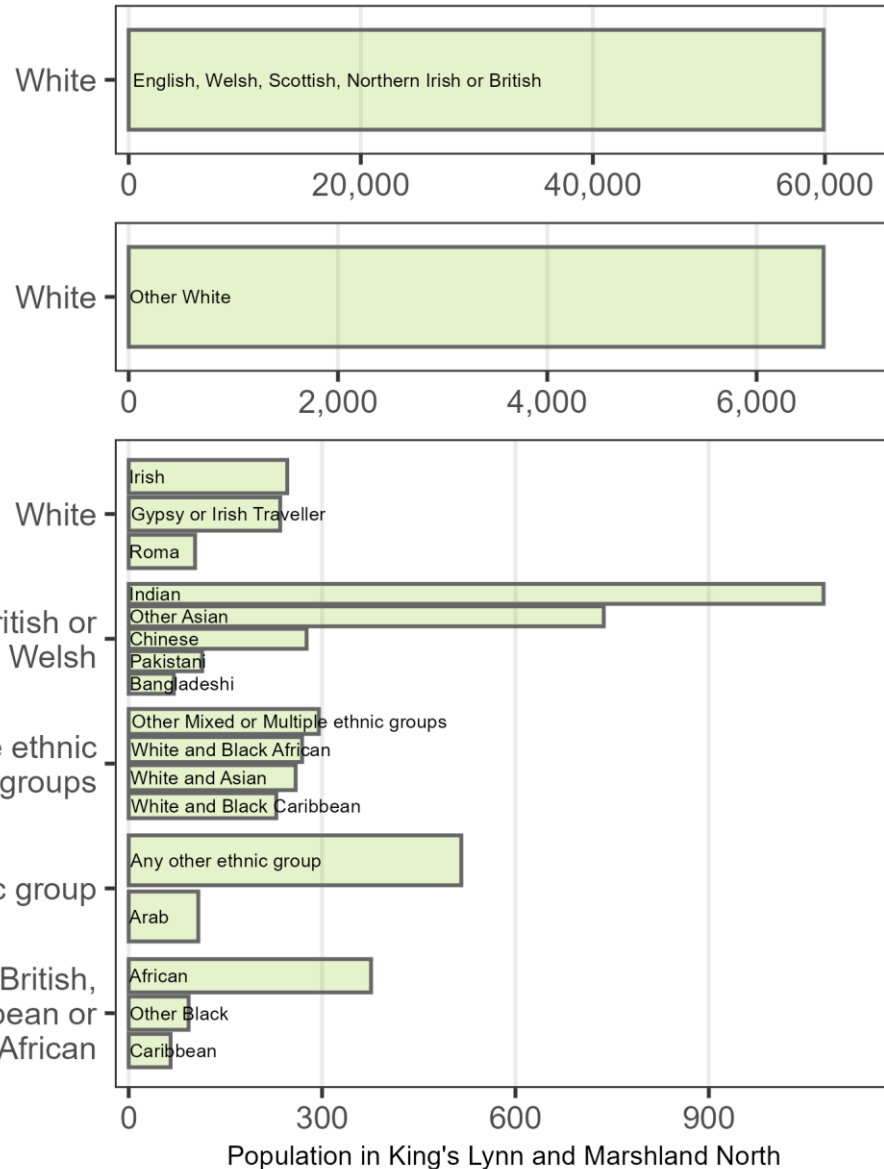
33.2% of the population of King's Lynn and Marshland North live in small areas that are among the 20% most deprived areas in England (Core20 areas). Across Norfolk and Waveney, 14.4% live in Core20 areas.

IMD 2025 Decile



Index of Multiple Deprivation 2025, Department for Levelling Up, Housing and Communities; ONS 2024 mid-year population estimates

# Ethnicity in King's Lynn and Marshland North



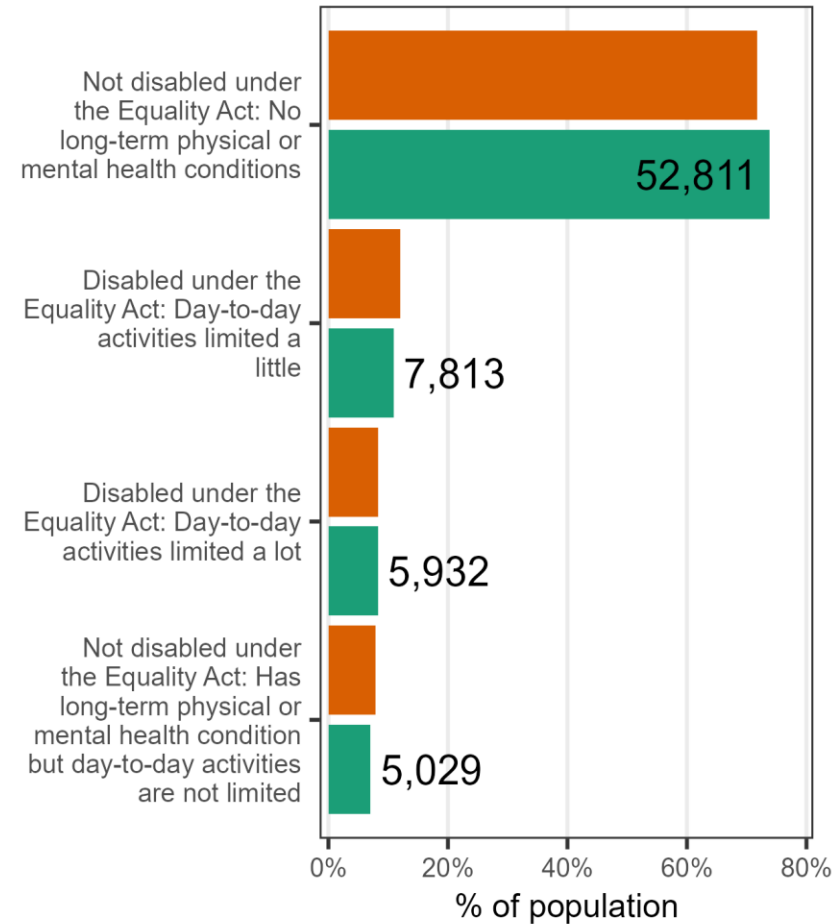
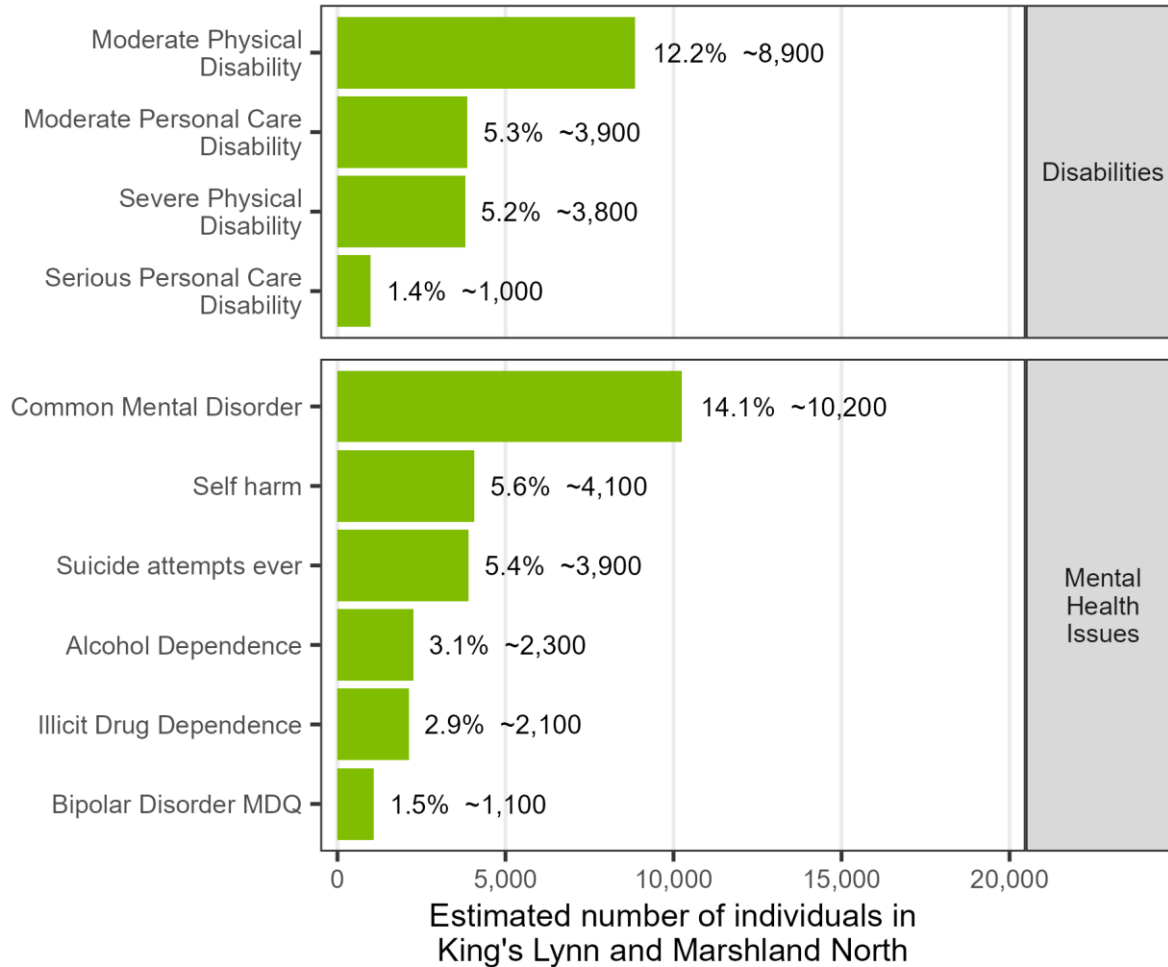
Source: Census 2021 (obtained through NOMIS)

Ethnicity group	Population	Proportion
White	67,105	93.7%
Asian Asian British Or Asian Welsh	2,275	3.2%
Mixed Or Multiple Ethnic Groups	1,052	1.5%
Other Ethnic Group	624	0.9%
Black Black British Black Welsh Caribbean Or African	534	0.7%

Source: Census 2021 (obtained through NOMIS)

Small areas (MSOAs) with the highest proportions of non-White residents in King's Lynn and Marshland North include Fairstead & Springwood (18.0%) and North Lynn (7.0%).

# People with disabilities and vulnerable populations

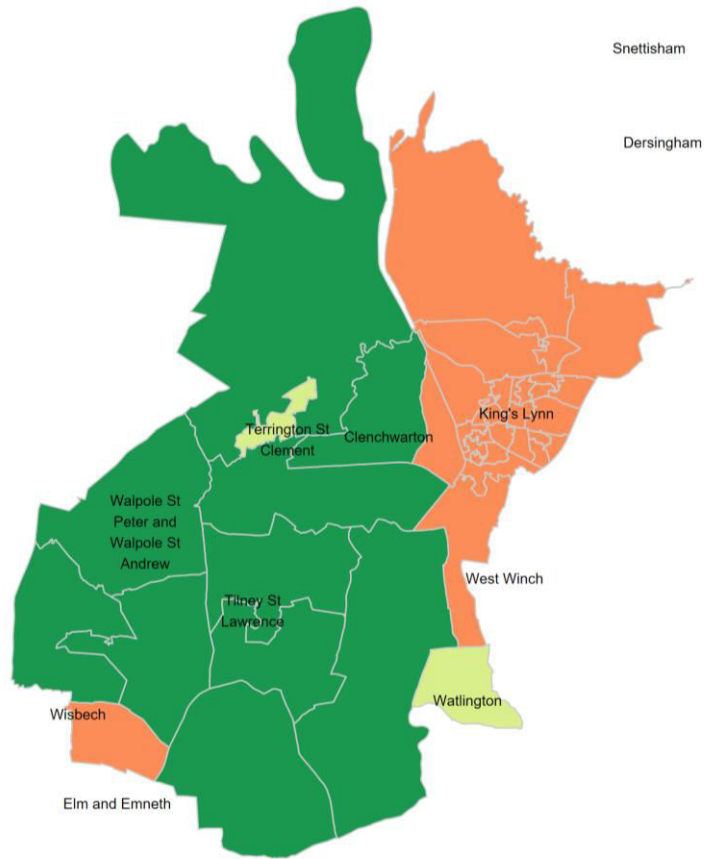


Sources:  
 PANSI/POPPI, Psychiatric Morbidity Survey  
 ONS 2024 mid-year population estimates

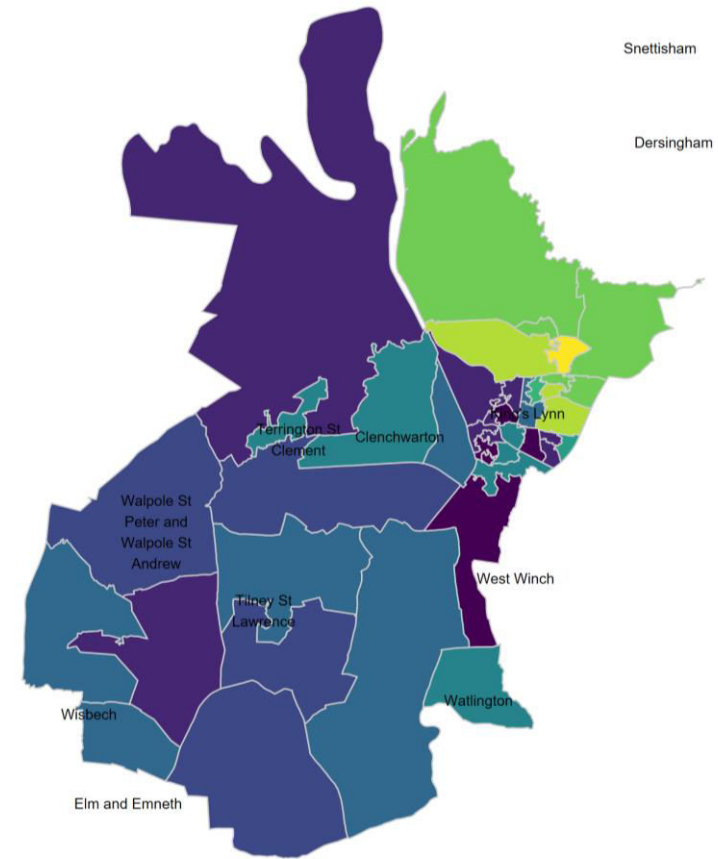
Source: 2021 Census (ONS)

# Rurality and Deprivation in King's Lynn and Marshland North

ONS Rural Urban Classification



Index of Multiple Deprivation deciles



- Urban: Nearer to a major town or city
- Urban: Further from a major town or city
- Larger rural: Nearer to a major town or city
- Larger rural: Further from a major town or city
- Smaller rural: Nearer to a major town or city
- Smaller rural: Further from a major town or city

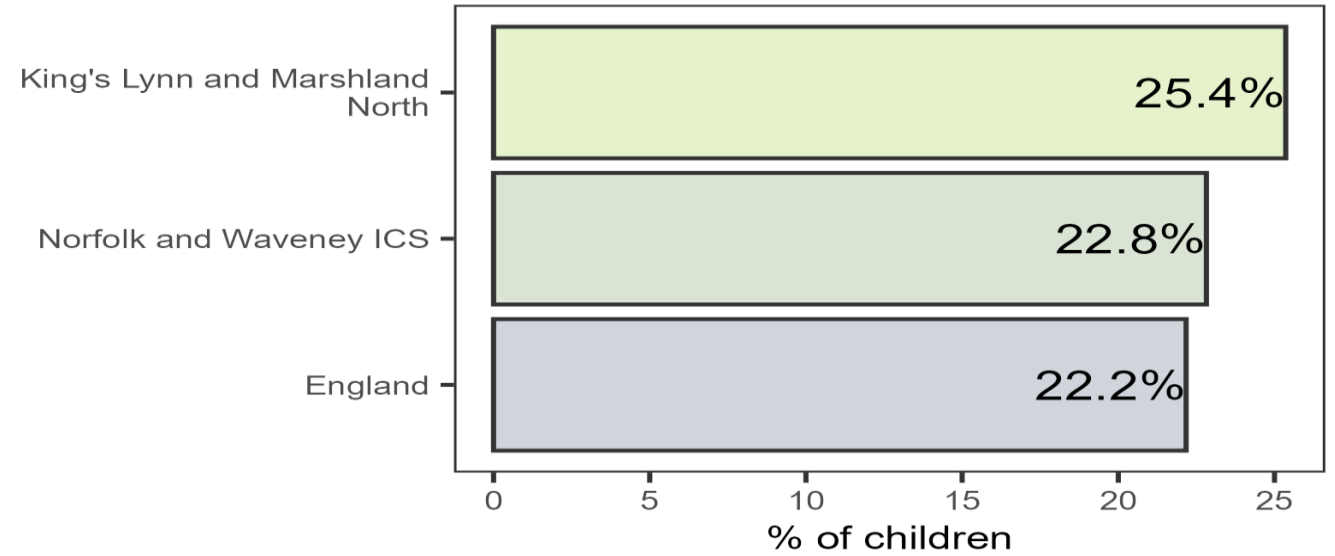
# Children in Poverty

In King's Lynn and Marshland North, 25.4% of children aged 0-19 live in low-income families, compared to 22.8% across Norfolk and Waveney and 22.2% across England.

34.3% of children aged 0 to 15 in King's Lynn and Marshland North are estimated to live in poverty according to the Income Deprivation Affecting Children Index (IDACI). In England overall, this is 36.25%.

In King's Lynn and Marshland North, 24.5% of pupils from Reception to Year 13 are eligible for free school meals. This is similar to across all schools in Norfolk, where 23.7% of pupils are eligible.

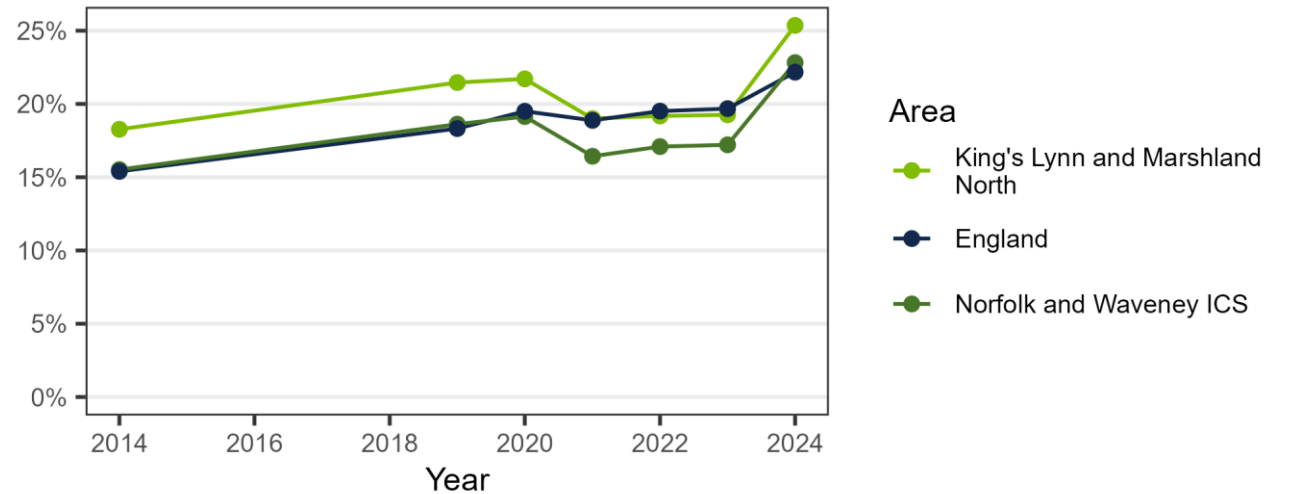
### Children aged 0-19 in relative low-income families



Source: Local Insight (OCSI)

### Children aged 0-19 in relative low-income families

% of children



Source: Local Insight (OCSI)

# Economy, employment and housing

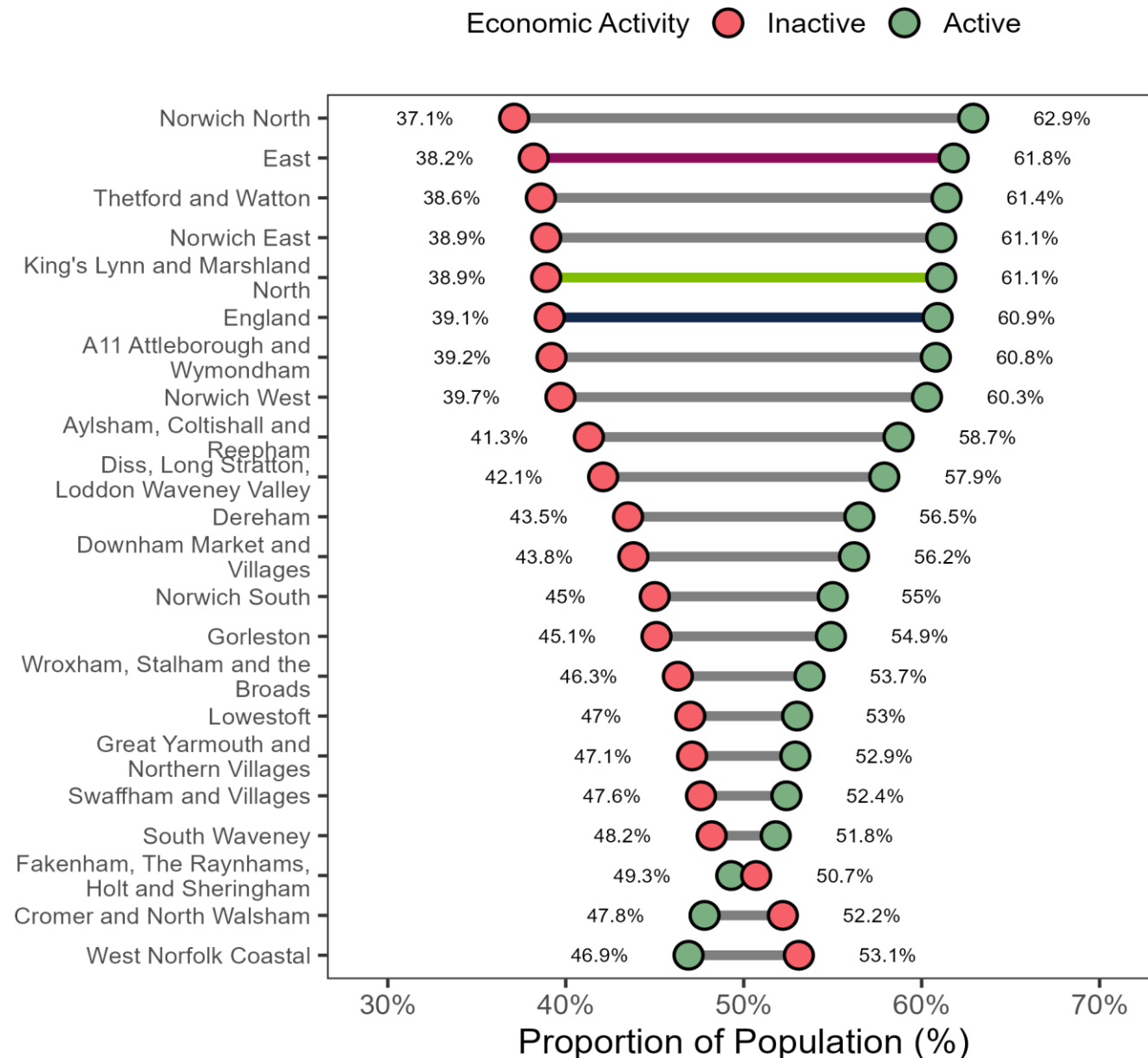
# Economy and Employment

**Economically Active Definition:** Aged between 16-64 and either in employment, unemployed but looking for work and could start within two weeks of an offer, or unemployed but waiting to start a job that had been offered and accepted.

During the **2021 Census**, the proportion of residents (aged 16-64) who were economically active within the Norfolk and Waveney neighbourhoods was generally lower than both the East of England (61.8% economically active) and England average (60.9% economically active).

Within the Kings Lynn and Marshland North neighbourhood, 61.1% of working-age residents were economically active, while 38.9% were economically inactive. This placed the area among the more economically active neighbourhoods, above the national average but below the regional average.

Economic Activity Across Areas (Census 2021)



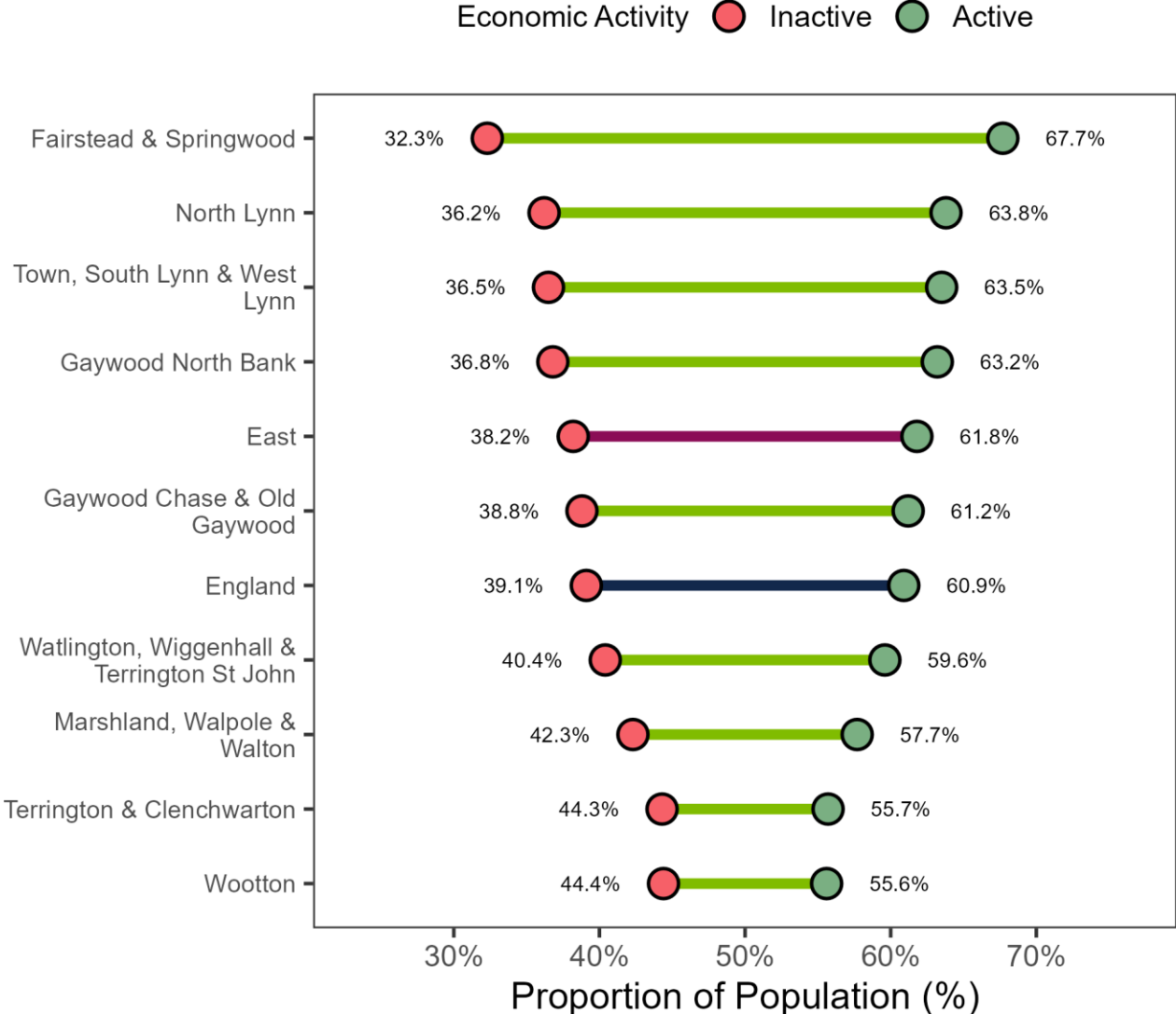
# Economy and Employment

Levels of economic activity reported across MSOAs within the King’s Lynn and Marshland North neighbourhood during the 2021 Census varied considerably.

Within the neighbourhood, Wootton recorded the lowest proportion of economically active residents aged 16–64 at 55.6%, indicating high levels of economic inactivity among the working-age population.

In contrast, Fairstead and Springwood recorded the highest proportion of economically active residents (67.7%) among MSOAs within the neighbourhood. This MSOA, along with North Lynn (63.8%), Town, South Lynn and West Lynn (63.5%) and Gaywood North Bank (63.2%), exceeded both the East of England average (61.8%) and the England average (60.9%). This suggests that economic activity in these areas is notably higher than regional and national benchmarks.

Economic Activity Across Areas (Census 2021)



# Economy and Employment

Occupation, as recorded in the 2021 Census, is derived from an individual's main job title and the activities associated with that role. Values are based on the proportion of usual residents aged 16 and over in employment.

In the King's Lynn and Marshland North neighbourhood, Professional occupations represented the largest occupational group, with 14.1% of usual residents aged 16 years and over in employment engaged in these roles. Although professional roles were the most common within the local area, their prevalence remained below both the Norfolk and England averages, indicating that Gorleston has a comparatively smaller professional workforce despite this being its dominant occupational category. However, the proportions of residents employed in Skilled Trades and Elementary occupations exceeded the averages for Norfolk and/or England, highlighting a relatively high presence of practical, manual, and operational roles within the local labour market.

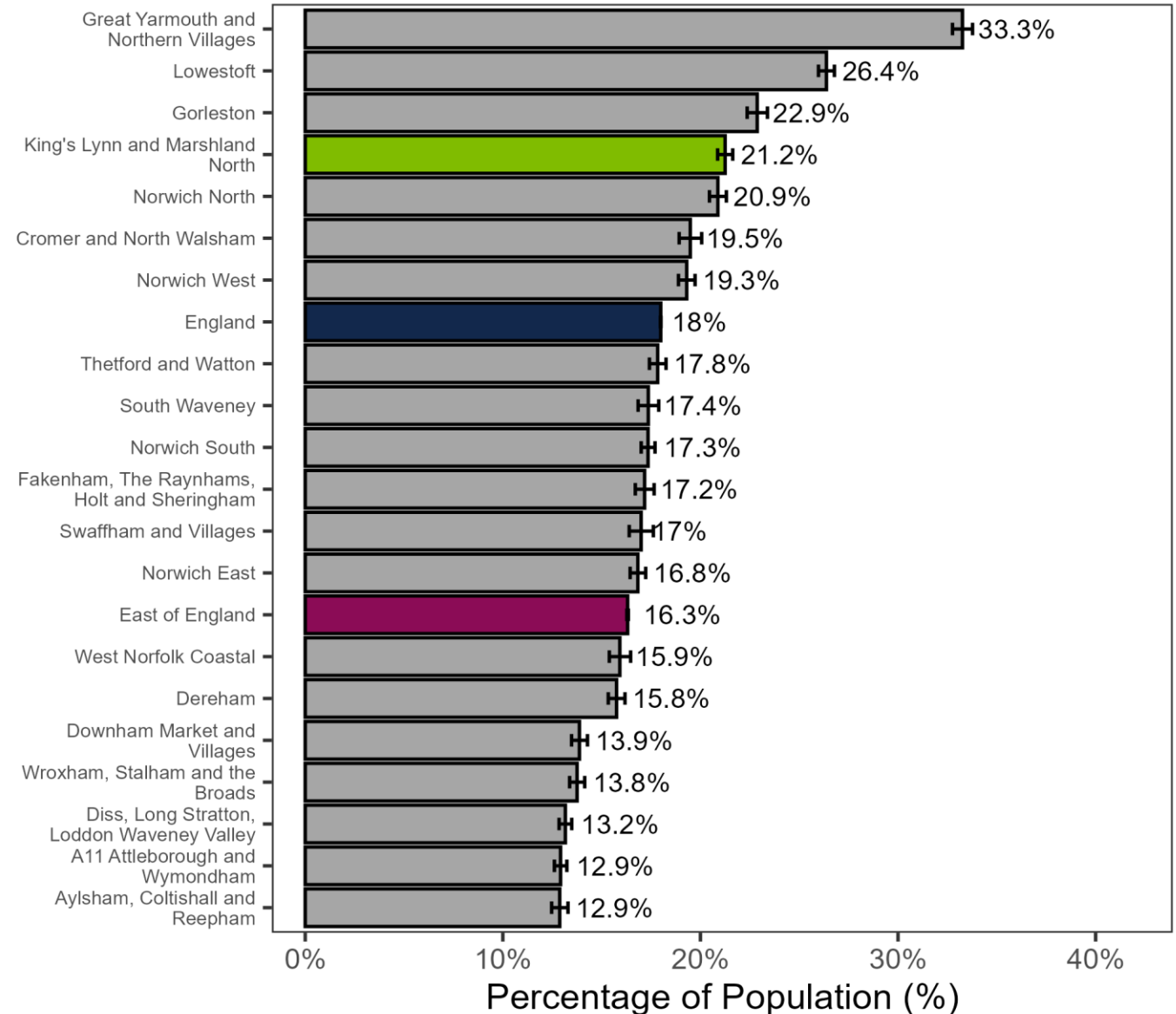
In contrast, employment in Managerial and Associate Professional occupations was consistently below the Norfolk and England averages. This suggests a relatively low concentration of individuals engaged in leadership, decision-making, and mid-level technical specialist roles within the neighbourhood, compared with county and national patterns.

Occupational Groups						
Indicator	King's Lynn and Marshland North		Norfolk		England	
	Count	Rate	Count	Rate	Count	Rate
Managers, Directors & Senior Officials	3,276	9.6%	49,365	11.9%	3,403,916	12.9%
Professional	4,818	14.2%	68,653	16.6%	5,356,649	20.3%
Associate Professional & Technical	3,209	9.4%	48,630	11.8%	3,499,749	13.3%
Administrative & Secretarial	2,834	8.3%	37,330	9.0%	2,446,565	9.3%
Skilled Trades	4,369	12.8%	52,732	12.8%	2,683,139	10.2%
Caring, Leisure & Other Service	3,961	11.6%	43,994	10.6%	2,447,148	9.3%
Sales & Customer Service	2,752	8.1%	33,402	8.1%	1,972,553	7.5%
Process, Plant & Machine Operatives	4,184	12.3%	33,235	8.0%	1,832,666	6.9%
Elementary	4,635	13.6%	46,376	11.2%	2,762,829	10.5%

# Economy and Employment

Percentage of Population Claiming Universal Credit by Area (Aug 2025)

**Universal Credit** is a monthly payment from the government to help with living costs for individuals on a low income or out of work. Eligible individuals must be between 18 and 66 years of age and have less than £16,000 in money, saving and investments.



The Graph shows the proportion of the population (aged 18-66) claiming Universal Credit across different neighbourhoods in Norfolk during August 2025.

The proportion of residents claiming Universal Credit varies significantly across neighbourhoods. King's Lynn and Marshland had a significantly higher proportion of individual claimants (21.2%) than 16 of the 19 other neighbourhoods during August 2025. In addition, the proportion of claimants was significantly higher than both the East of England (16.3%) and England (18%) averages. This suggests that King's Lynn and Marshland may experience comparatively higher levels of financial vulnerability or reliance on welfare support than seen regionally or nationally.

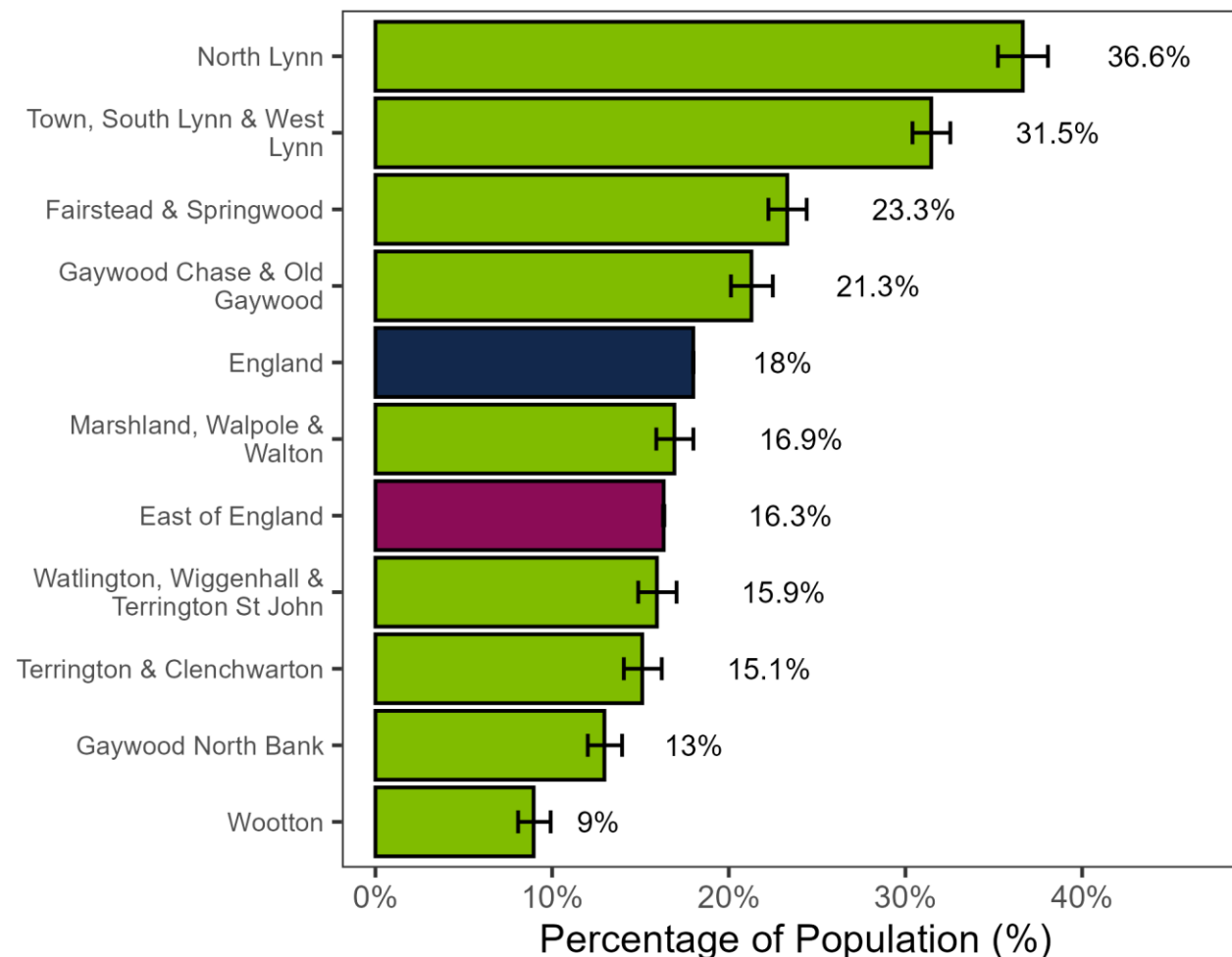
# Economy and Employment

In August 2025, the proportion of residents (aged 18 to 66) claiming Universal Credit varied significantly across MSOAs within the King's Lynn and Marshland North neighbourhood (ranging from 9%-36.6%).

North Lynn recorded the highest proportion of claimants at 36.6%, significantly more claimants than all other MSOAs within the neighbourhood. This figure was also significantly higher than the East of England (16.3%) average and the England average (18%).

Wootton reported the lowest proportion of claimants at 9%, significantly fewer claimants compared to all other MSOAs within the area and both the East of England and England average.

Universal Credit Claimants by MSOA in King's Lynn and Marshland North (Aug 2025)



Source: Stat-Xplore, ONS 2024 mid-year population estimates

# Economy and Employment

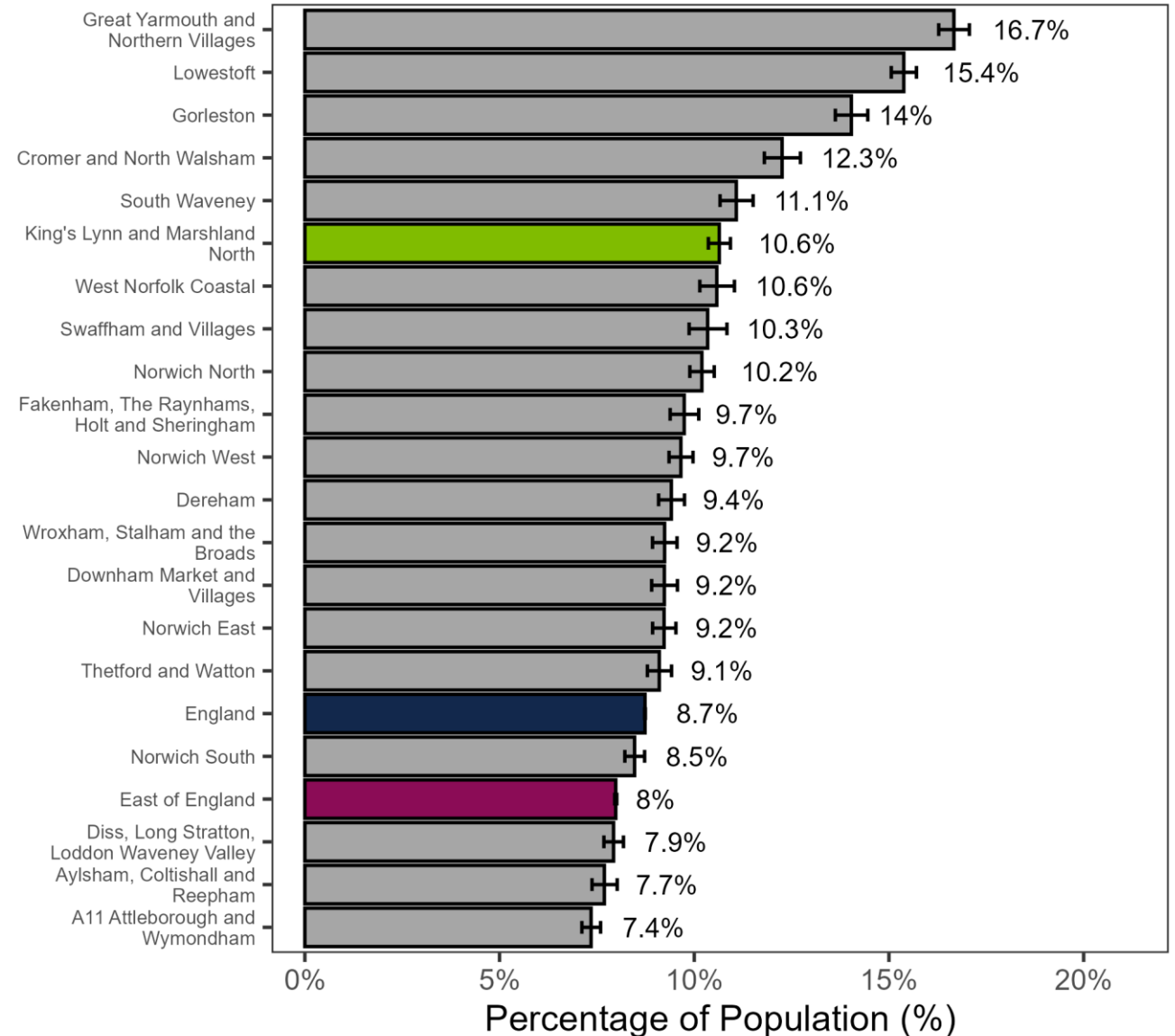
**Personal Independence Payments (PIP)** entitlement statistics covers individuals currently receiving PIP and those whose payments are temporarily suspended (e.g., during a hospital stay).

To be eligible for PIP an individual needs to be between 16-66 and have a long-term condition which makes everyday tasks or mobility difficult. PIP provides support through two components: daily living (help with everyday activities) and mobility (help with getting around).

The graph shows the proportion of individuals (aged 16-66) entitled to PIP across neighbourhoods during June 2025, alongside regional and national benchmarks.

During June 2025, the King's Lynn and Marshland North neighbourhood had a significantly higher proportion of individuals entitled to PIP (10.6%) than 10 of the other 19 neighbourhoods. Entitlement was also significantly higher than the East of England (8%) and England average (8.7%) indicating significantly higher levels of PIP entitlement in this area compared with regional and national averages.

Percentage of Population Entitled to PIP by Area (June 2025)



Source: Stat-Xplore, ONS 2024 mid-year population estimates

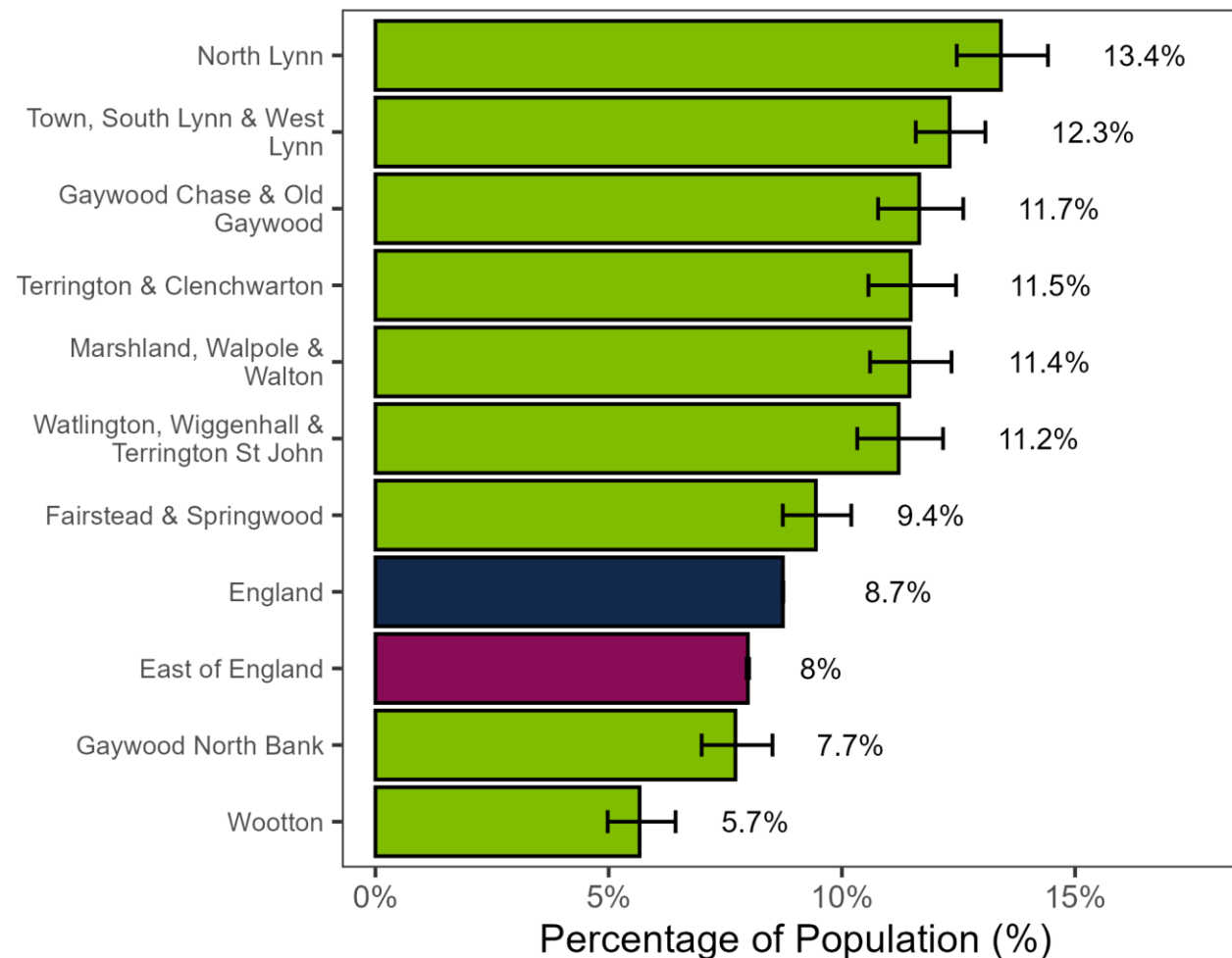
# Economy and Employment

In June 2025, the proportion of residents aged 16 to 66 entitled to Personal Independence Payment (PIP) across MSOAs within the King's Lynn and Marshland North neighbourhood varied significantly (ranging from 5.7%-13.4%).

North Lynn recorded the highest entitlement rate at 13.4%. significantly higher than six of the other eight MSOAs within the neighbourhood. This figure was also significantly higher than the East of England (8%) average and the England average (8.7%).

Wootton reported the lowest PIP entitlement rate at 5.7%, which was significantly lower than all other MSOAs within the area as well as the East of England and England average. This suggests that PIP entitlement in Wootton is low compared with other MSOAs locally and regional and national benchmarks.

Population Entitled to PIP by MSOA in King's Lynn and Marshland North (June 2025)



Source: Stat-Xplore, ONS 2024 mid-year population estimates

# Housing

The table shows the percentage breakdown of housing tenure types across neighbourhoods compared to England, as reported in the 2021 Census.

Compared to England, King's Lynn and Marshland North has a higher proportion of homes owned outright (35% vs 32.5%) and a slightly lower proportion with a mortgage (27.9% vs 28.8%). Its combined social renting rate (council and housing association) is 17.1%, which is comparable to the national average of 17.1%. The private renting rate (Landlord/rent free/other) at 19.5% is slightly lower than the England average (20.6%).

Compared to the average across neighbourhoods, the King's Lynn and Marshland North neighbourhood has a higher proportion of homes mortgaged and rented (from social housing or the private sector) and a lower proportion of homes owned outright.

Area	Owned outright	Owned with mortgage or loan	Private rented with landlord	Rented from housing association	Rented from council	Private rented other	Shared ownership	Non owner occupied housing rent free
<b>England</b>	<b>32.5%</b>	<b>28.8%</b>	<b>18.2%</b>	<b>8.8%</b>	<b>8.3%</b>	<b>2.2%</b>	<b>1.0%</b>	<b>0.1%</b>
<b>King's Lynn and Marshland North</b>	<b>34.9%</b>	<b>27.9%</b>	<b>17.0%</b>	<b>12.5%</b>	<b>4.7%</b>	<b>2.3%</b>	<b>0.6%</b>	<b>0.1%</b>
A11 Attleborough and Wymondham	40.1%	32.9%	12.4%	9.0%	2.0%	2.2%	1.4%	<0.1%
Aylsham, Coltishall and Reepham	44.8%	29.3%	12.2%	9.3%	1.2%	2.3%	0.8%	0.0%
Cromer and North Walsham	48.4%	19.9%	15.4%	11.2%	1.9%	2.4%	0.7%	<0.1%
Dereham	43.1%	27.1%	13.1%	10.4%	2.5%	3.2%	0.5%	<0.1%
Diss, Long Stratton, Loddon Waveney Valley	44.5%	28.3%	12.1%	9.2%	2.5%	2.3%	1.0%	<0.1%
Downham Market and Villages	43.9%	26.8%	14.4%	7.9%	2.0%	4.6%	0.4%	<0.1%
Fakenham, The Raynams, Holt and Sheringham	48.6%	18.9%	14.6%	11.6%	2.2%	3.2%	0.8%	<0.1%
Gorleston	39.5%	27.6%	13.6%	3.7%	12.7%	2.3%	0.3%	0.3%
Great Yarmouth and Northern Villages	37.1%	20.6%	23.3%	4.1%	11.9%	2.5%	0.3%	0.2%
Lowestoft	40.0%	24.8%	18.4%	7.1%	7.3%	2.0%	0.3%	<0.1%
Norwich East	33.9%	26.8%	18.3%	8.7%	9.6%	1.9%	0.7%	<0.1%
Norwich North	30.2%	26.9%	17.3%	6.9%	15.9%	2.2%	0.5%	0.1%
Norwich South	25.7%	18.5%	25.6%	7.8%	19.5%	2.2%	0.5%	0.2%
Norwich West	28.4%	27.7%	16.8%	9.9%	14.3%	1.7%	1.0%	0.1%
South Waveney	47.0%	21.8%	14.2%	5.5%	8.6%	2.3%	0.6%	<0.1%
Swaffham and Villages	45.3%	24.0%	12.8%	12.1%	2.4%	2.8%	0.6%	0.0%
Thetford and Watton	34.5%	27.2%	18.4%	12.8%	3.6%	2.7%	0.8%	<0.1%
West Norfolk Coastal	50.9%	19.2%	14.2%	9.7%	2.0%	3.4%	0.4%	<0.1%
Wroxham, Stalham and the Broads	47.4%	27.3%	11.3%	9.3%	1.4%	2.2%	0.9%	<0.1%

# Life expectancy and mortality

- This section focuses on life expectancy and mortality trends, key indicators of overall health and inequality

# Life expectancy and mortality

Life expectancy is broadly a little lower than Norfolk and England averages, and strong inequalities exist between MSOAs.

Overall, premature and preventable mortality are only moderately higher than England, but there are small areas with severely worse mortality outcomes compared to national benchmarks.

	Period	England	Fairstead & Springwood	Gaywood Chase & Old Gaywood	Gaywood North Bank	Marshland, Walpole & Walton	North Lynn	Terrington & Clenchwarton	Town, South Lynn & West Lynn	Watlington, Wiggenhall & Terrington St John	Wootton
Life expectancy at birth - Female	2019 - 23	83	84.9	80.3	82.6	83.4	78.2	84	81.6	83.9	85.2
Life expectancy at birth - Male	2019 - 23	79.1	77.9	76.9	78.1	78.3	72.5	80.7	74.6	80.2	81.5
Mortality from all causes	2019 - 23	100	99.2	109	111	101	155	85.4	120	90.1	83.4
Mortality from all causes (aged under 75)	2019 - 23	100	113	134	96.3	103	189	88.9	148	91	56.4
Mortality from cancer	2019 - 23	100	123	117	91.7	103	133	91.3	120	104	77.1
Mortality from cancer (aged under 75)	2019 - 23	100	115	133	88.9	107	153	95.9	126	97.7	57.5
Mortality from cardiovascular disease	2019 - 23	100	91.3	106	99	97.1	135	97	130	96.2	74.4
Mortality from cardiovascular disease (aged under 75)	2019 - 23	100	111	143	78.9	104	167	76.5	164	102	56.1
Mortality from coronary heart disease	2019 - 23	100	113	78.5	97.2	115	151	81.3	137	90	59.4
Mortality from stroke	2019 - 23	100	61.8	120	123	95.3	161	84.7	144	55.2	126
Mortality from respiratory diseases	2019 - 23	100	100	127	109	130	210	87.3	146	98	63.8
Mortality from causes considered preventable (aged under 75)	2019 - 23	100	117	147	95.9	106	228	77.9	160	80.6	50.8



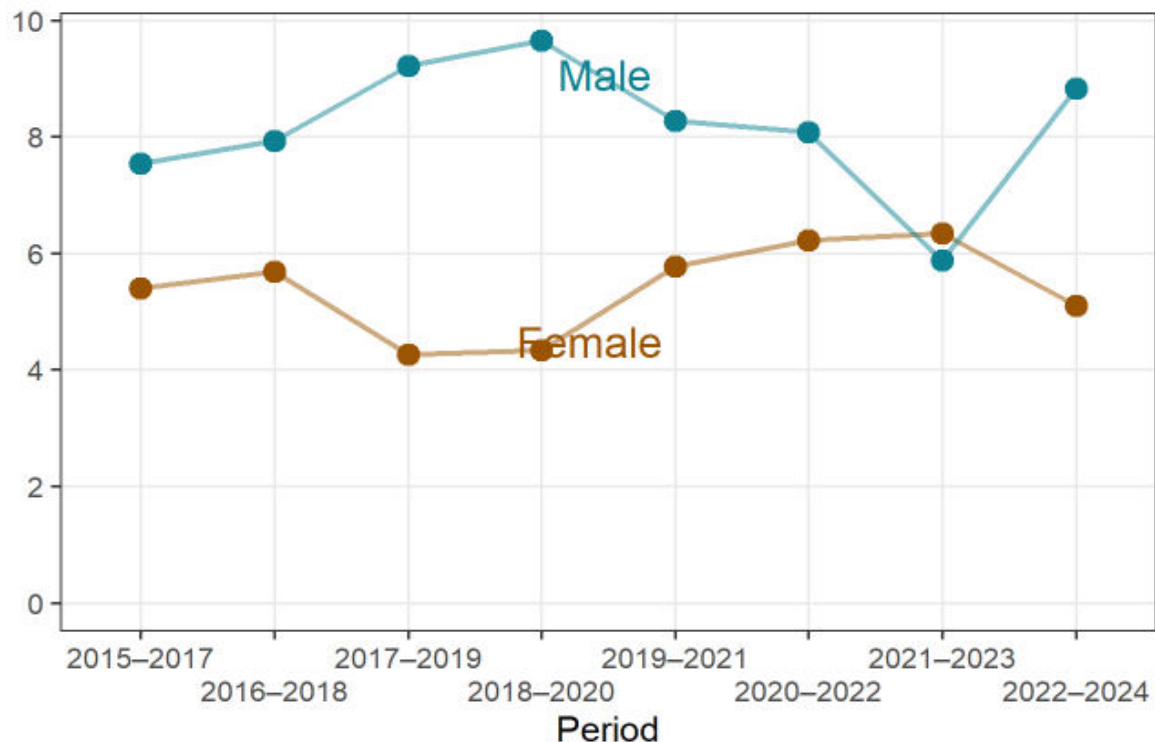
Indicators are based on the Local Health summary(OHID Fingertips)

# Life expectancy inequalities

There is a considerable gap in life expectancy between people living in the most and least deprived areas of King's Lynn & West Norwich district. The leading causes of premature death - cancer, circulatory and respiratory conditions - are more prevalent in relatively more deprived small areas. Targeted prevention and improved access to care are essential.

Change in life expectancy gap (3 year average) between most and least deprived deciles within King's Lynn and West Norfolk

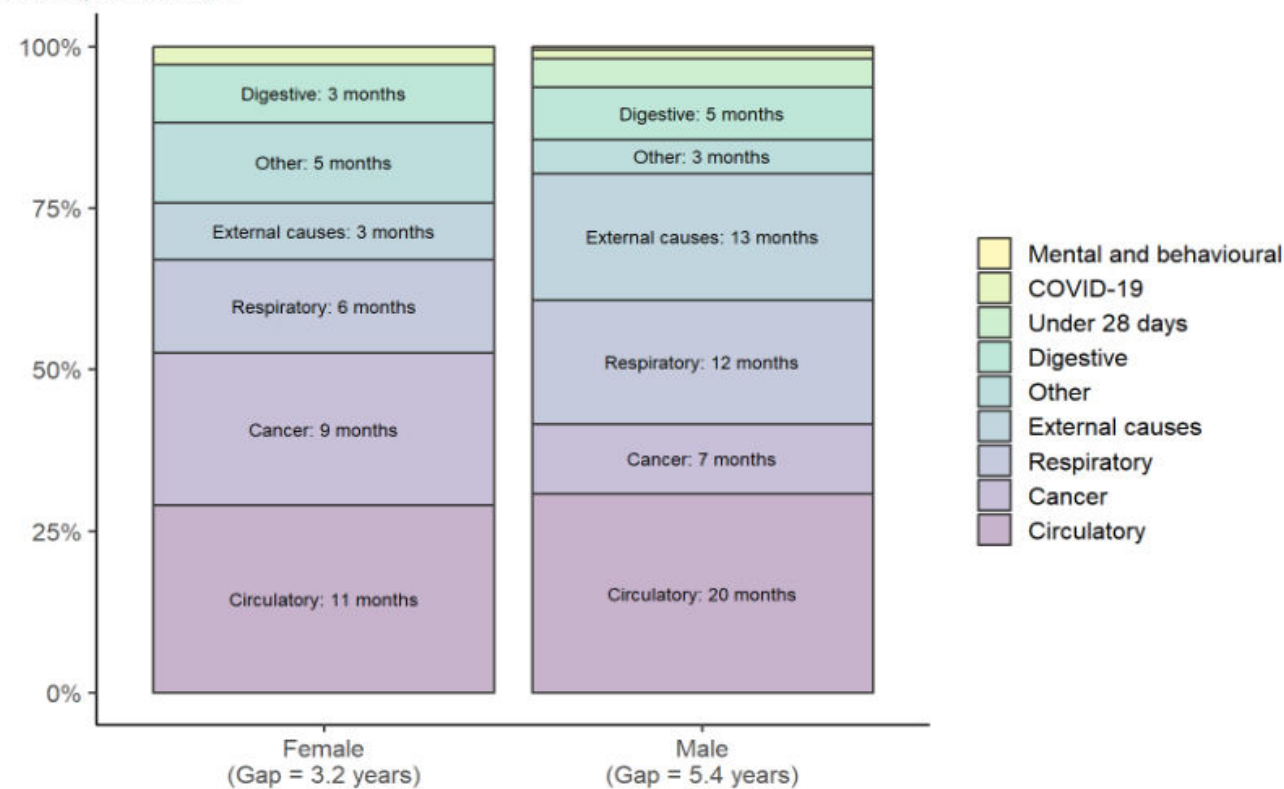
Gap in life expectancy at birth (years)



Sources: CRD (NHS Digital) and ONS mid-year estimates  
NB: Small area deprivation scores based on IMD 2025

Contributors to life expectancy gap between most and least deprived quintiles within King's Lynn and West Norfolk in 2022-2024

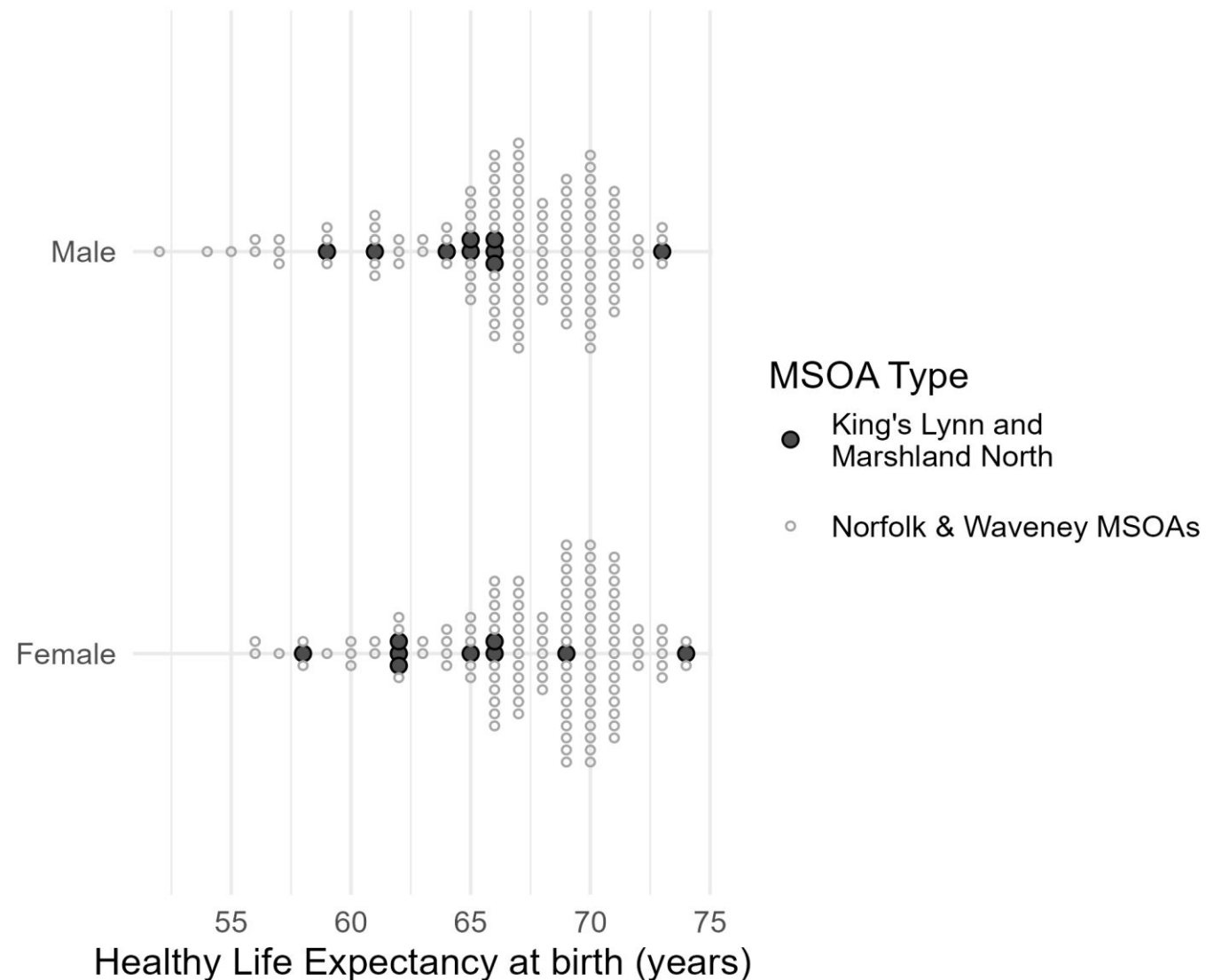
Percentage contribution



Sources: CRD (NHS Digital) and ONS mid-year estimates  
NB: Small area deprivation scores based on IMD 2025

# Healthy Life Expectancy

Healthy life expectancy is generally lower in King's Lynn and Marshland North compared to other areas in Norfolk. There is stark variation between the most (North Lynn) and least (Wootton) deprived small areas.

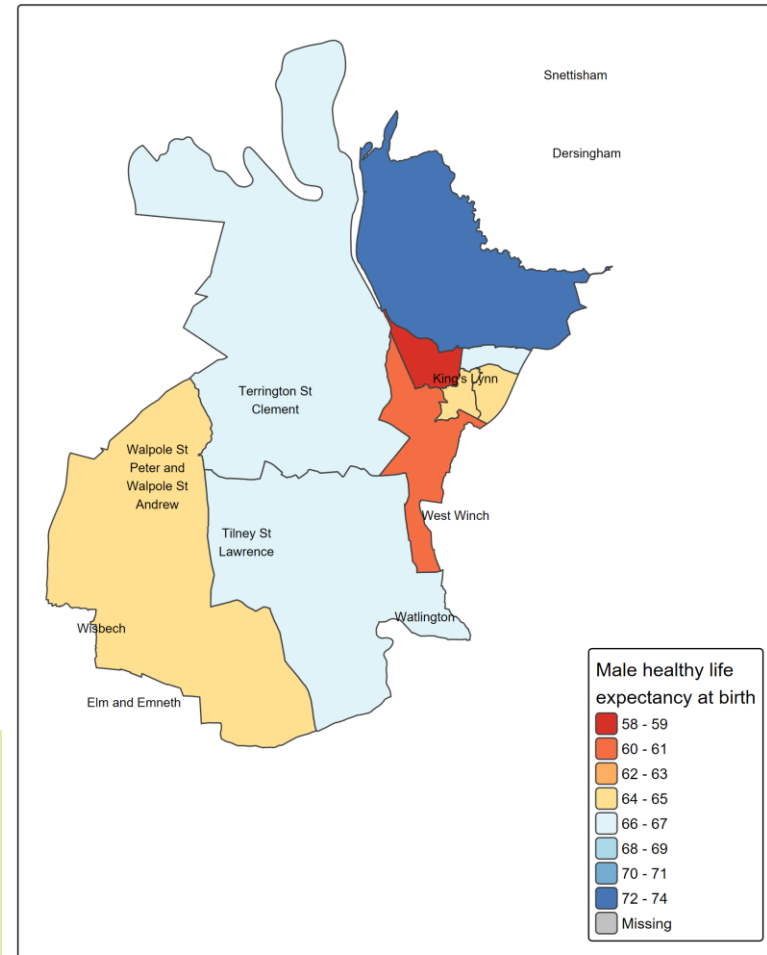
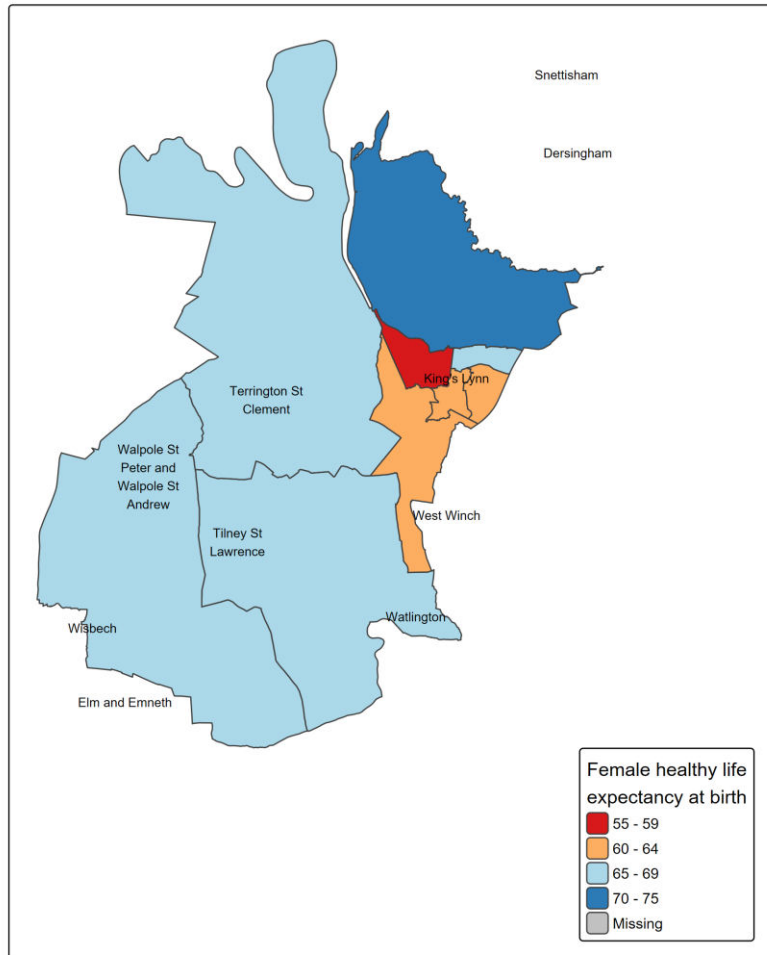


Source: HDIG report 1. Healthy life expectancy and prevention opportunities (2023)

# Healthy Life Expectancy in King's Lynn and Marshland North

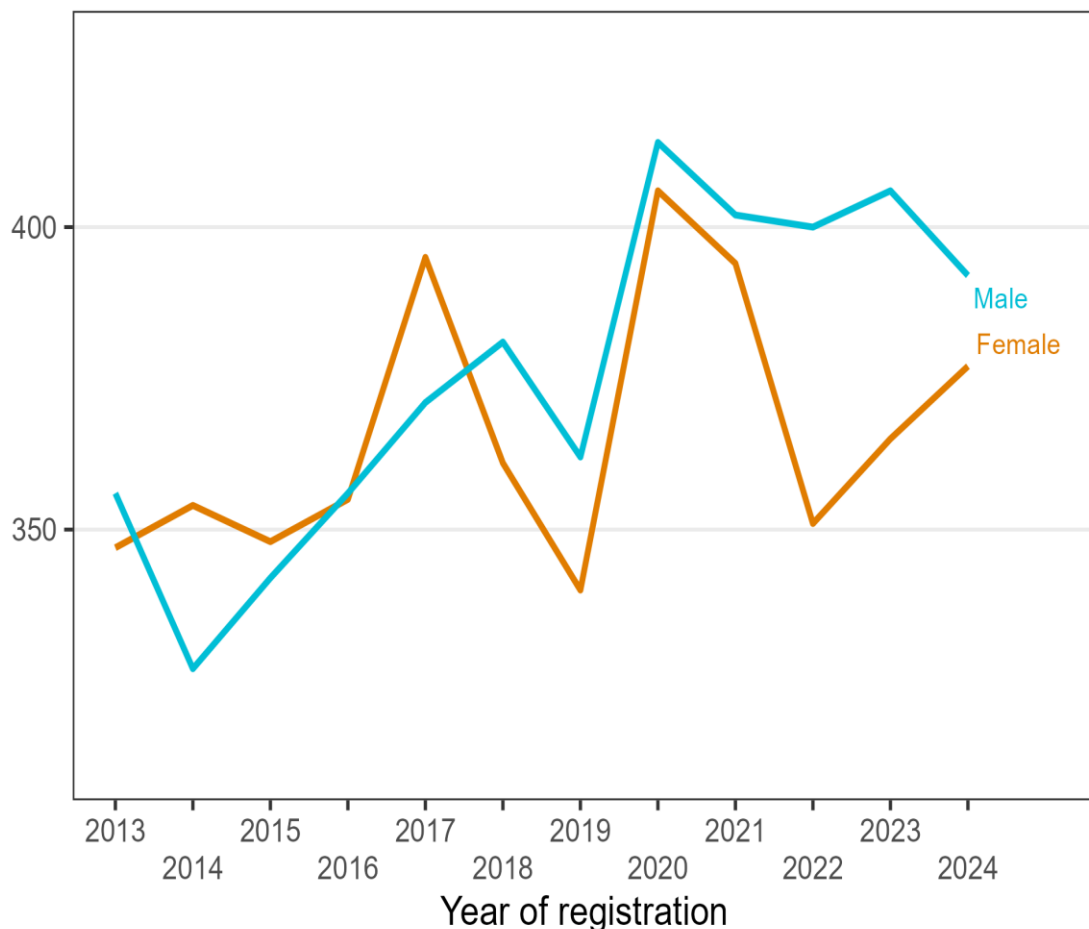
Within the King's Lynn and Marshland North neighbourhood area, female healthy life expectancy was lowest in North Lynn and highest in Wootton in 2021.

Male healthy life expectancy was lowest in North Lynn and highest in Wootton in 2021.



# Deaths

Deaths in King's Lynn and Marshland North

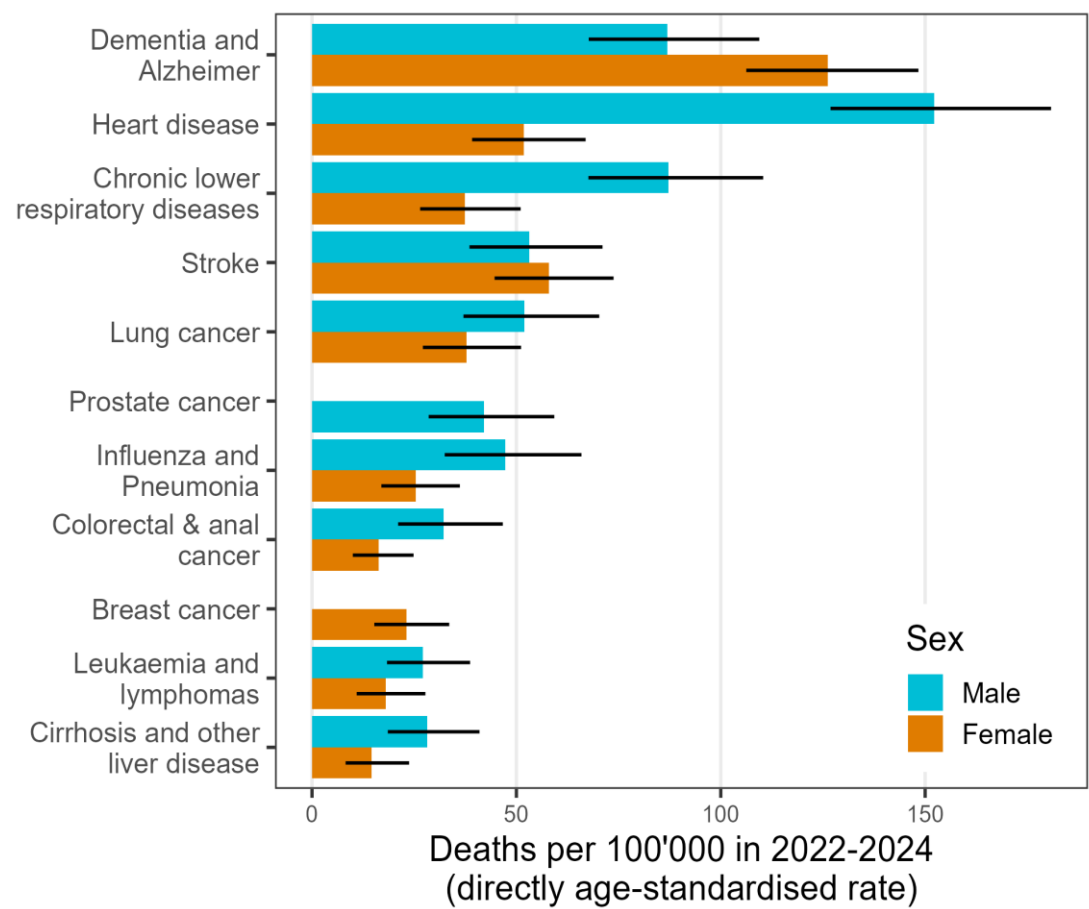


Source: NOMIS



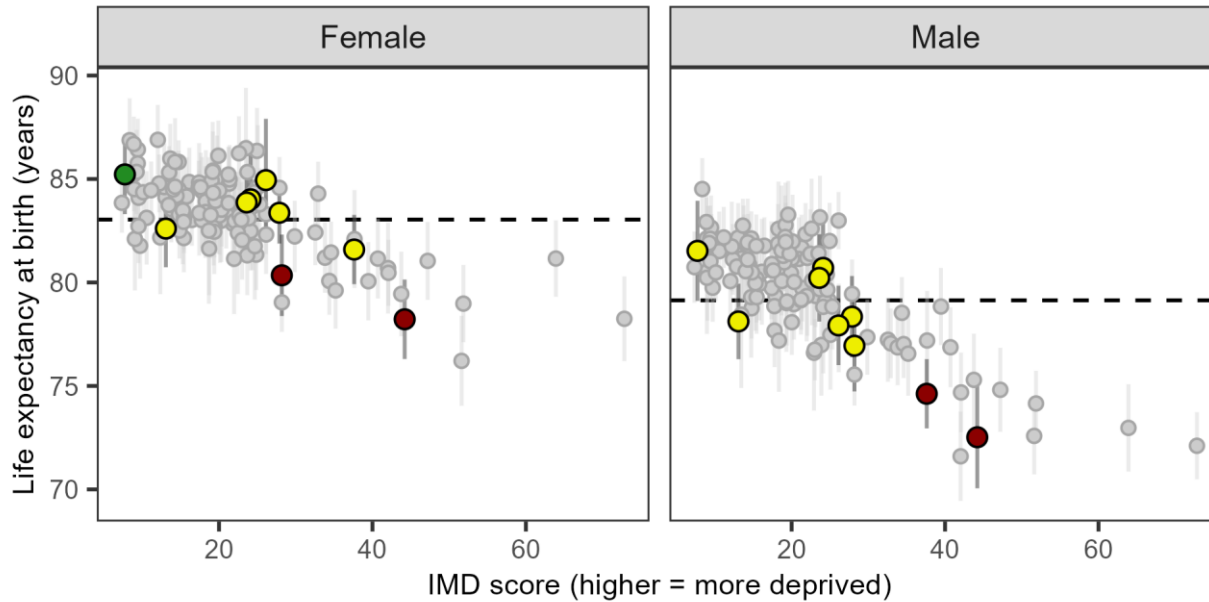
Leading causes of death in King's Lynn and Marshland North

Leading cause of death

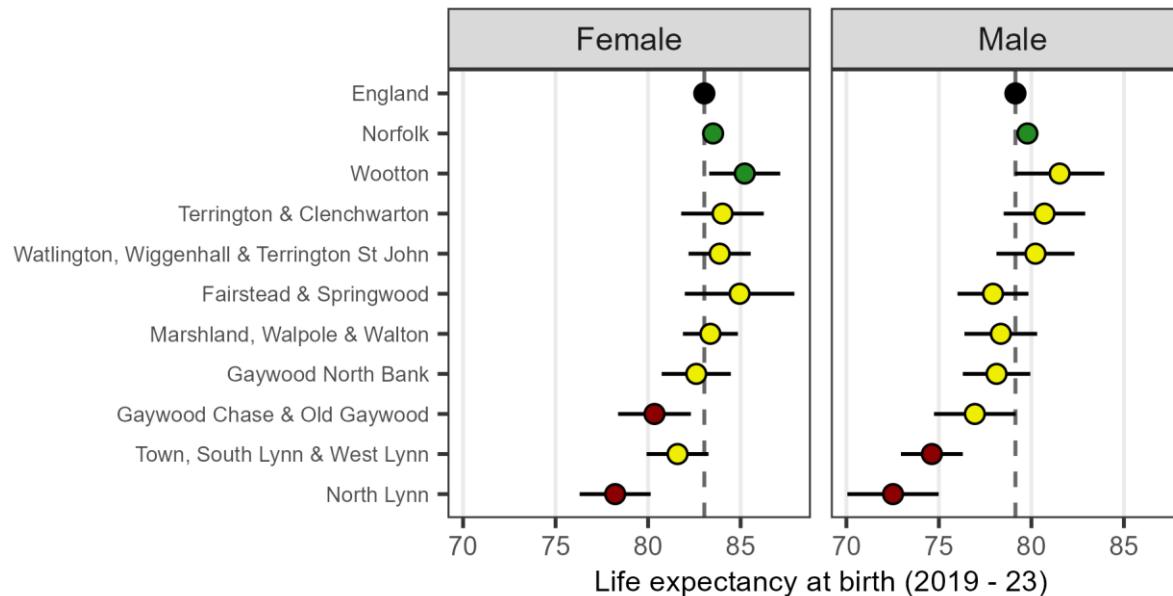


Source: CRD (NHS Digital) and ONS mid-year population estimates

# Life expectancy in King's Lynn and Marshland North



- There is wide local variation alongside variation in deprivation – local areas show a difference more than 8 years in male life expectancy and 6 years in female life expectancy.
- North Lynn has the lowest life expectancies.
- Females live longer than males in all areas.



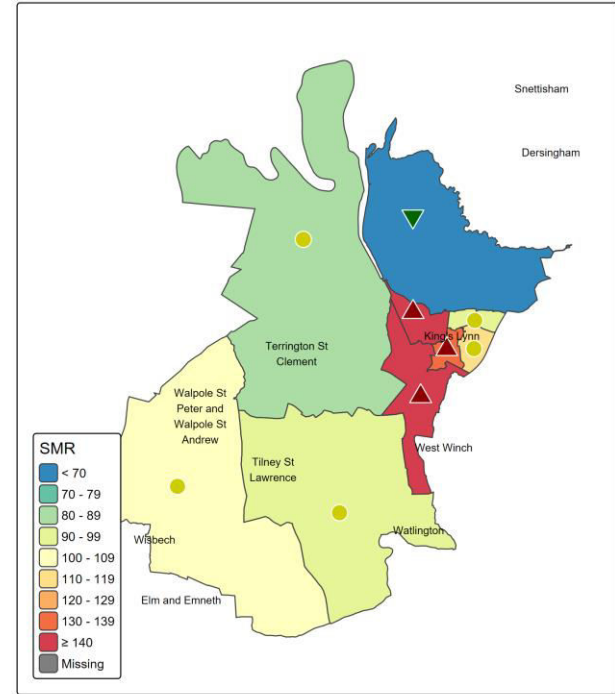
Source: OHID Fingertips

# Premature mortality

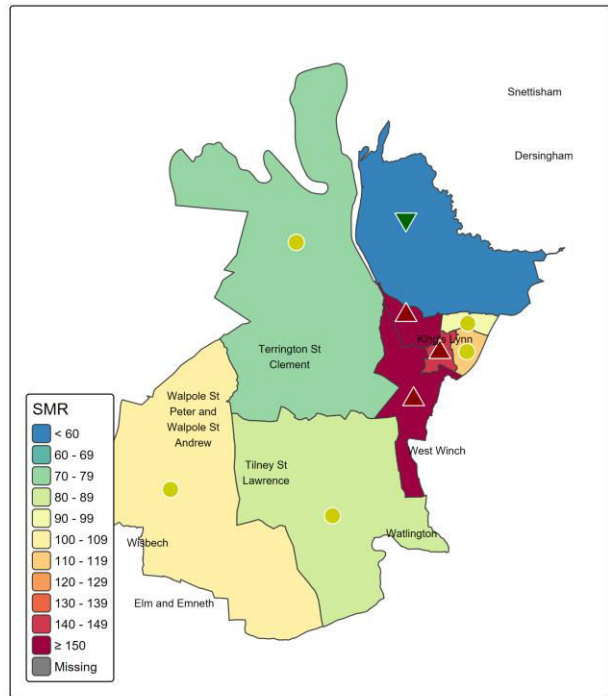
There were 1,238 deaths of people under the age of 75 in King's Lynn and Marshland North in 2019 - 23. Overall, the rate of premature mortality was 9% higher than the England average.

Locally, the highest rate of premature mortality was in North Lynn (Standardised Mortality Ratio = 188.6). The lowest rate was in Wootton. Three local areas (MSOAs) had a significantly worse premature mortality rate than the England average (red triangles).

Mortality from all causes (aged under 75) in King's Lynn and Marshland North (Standardised Mortality Ratio [England = 100], 2019-2023)



Mortality from causes considered preventable (aged under 75) in King's Lynn and Marshland North (Standardised Mortality Ratio [England = 100], 2019-2023)



# Preventable mortality

In 2019 - 23, 594 deaths of people under the age of 75 in King's Lynn and Marshland North were from causes considered preventable. Overall, there was a 13% higher rate of preventable mortality compared to the national average.

Locally, the highest rate of preventable mortality was in North Lynn (Standardised Mortality Ratio = 228.3), more than twice the national average rate. The lowest rate was in Wootton. Three local areas (MSOAs) had a significantly worse preventable mortality rate than the England average.



# Behavioural determinants of health

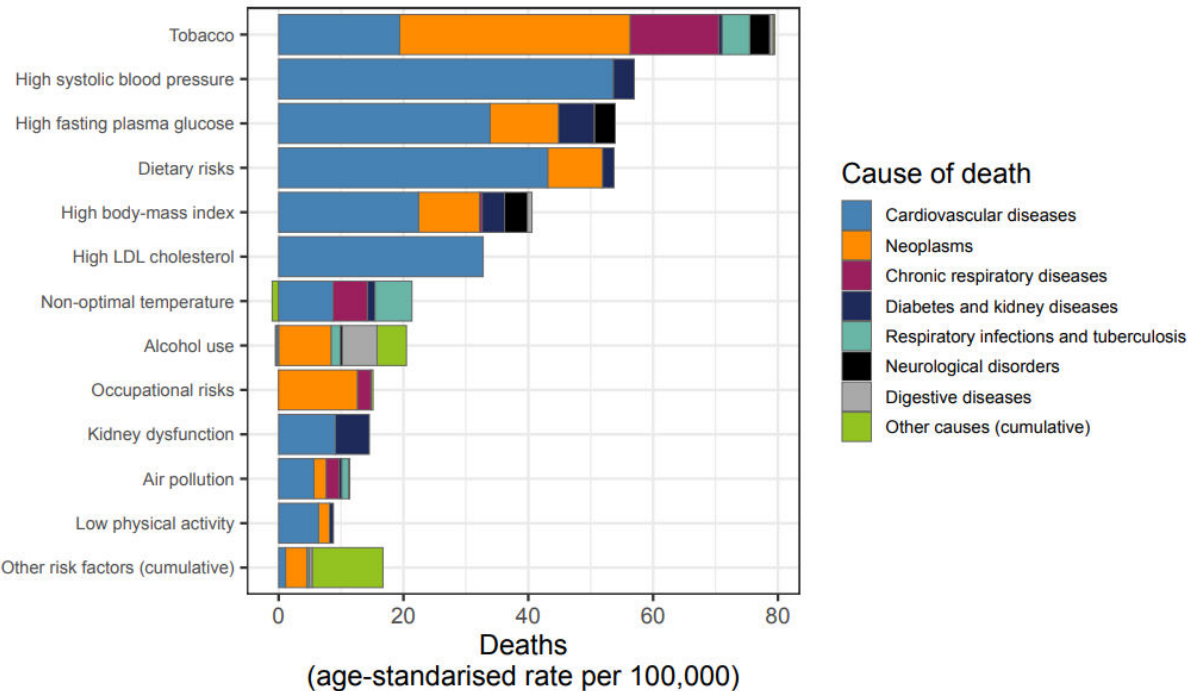
- This section examines lifestyle and behavioural risk factors such as smoking, diet, and physical activity, which contribute to preventable disease.

# How can we improve health in Norfolk?

Preventable behavioural risk factors have an important impact on ill health and constitute a major challenge for health and social care. Of concern are our rates of smoking, poor diet and exercise, and alcohol consumption.

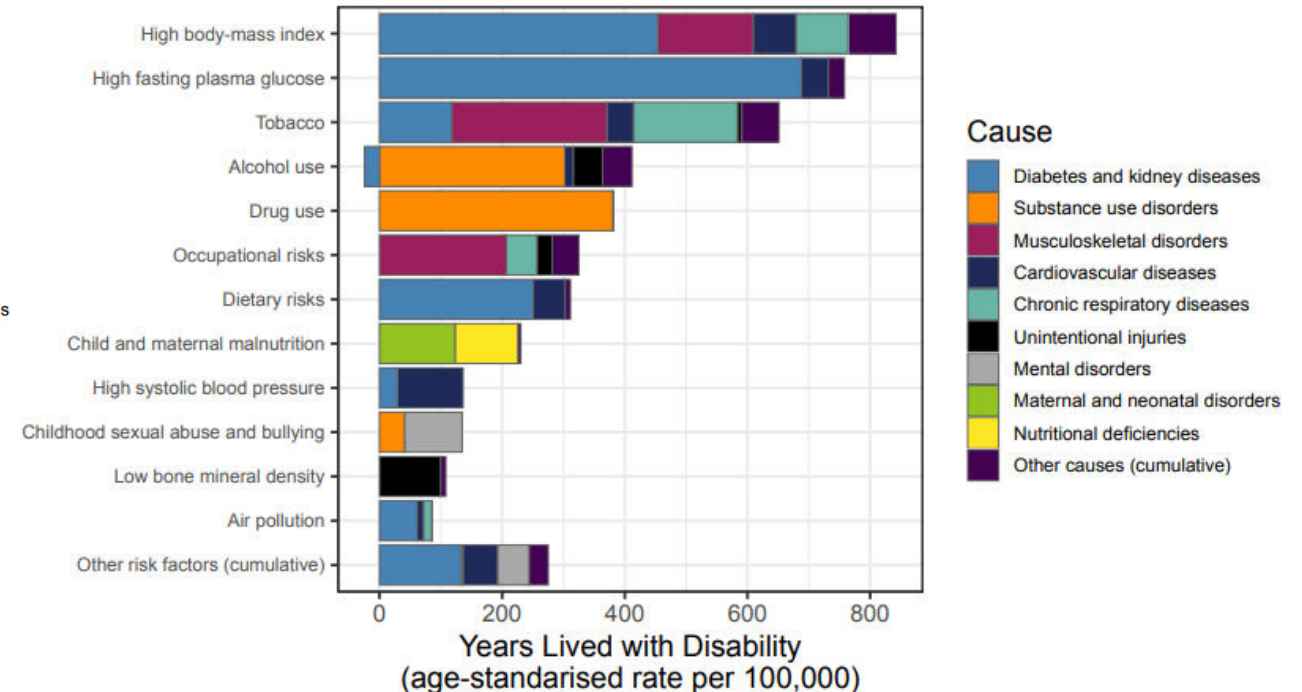
## Deaths

Attribution of risk factors to cause of death in Norfolk



## Years lived with disability

Attribution of risk factors to causes of years lived with disability in Norfolk



# Behavioural risk factors

Smoking and alcohol-related risks are generally higher in King's Lynn & West Norfolk than Norfolk and England averages. And adult obesity prevalence is a little higher than average.

Childhood overweight prevalence in some local areas is considerably higher than average.

	Period	England	Fairstead & Springwood	Gaywood Chase & Old Gaywood	Gaywood North Bank	Marshland, Walpole & Walton	North Lynn	Terrington & Clenchwaton	Town, South Lynn & West Lynn	Watlington, Wiggenhall & Terrington St John	Wootton
Reception prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	9.64	8.57	16.3	11.6	12.8	11.1	10.8	11	9.52	6.67
Reception prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	21.9	22.9	30.2	25.6	25.5	24.1	24.3	24.7	21.4	23.3
Year 6 prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	22.7	28.9	30.8	23.5	26.5	35.7	26.2	28.8	30.2	21.1
Year 6 prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	36.7	43.4	42.3	41.2	38.8	46.4	42.9	40.9	41.9	36.8
General fertility rate (women aged 15 to 44)	2018 - 22	54.6	56.7	51.1	56.9	64.9	62.4	48.8	61.6	58.3	43.2
Low birth weight of live babies	2018 - 22	6.84	6.57	6.32	8.58	5.63	8.14	7.06	9.15	3.87	2.38
Emergency hospital admissions: all causes (aged under 5)	2016/17 - 20/21	141	241	157	171	221	222	149	157	163	191
Unintentional and deliberate injuries: emergency hospital admissions in children (aged under 5)	2016/17 - 20/21	119	144	98.3	141	139	175	136	127	134	142
Unintentional and deliberate injuries: hospital admissions in children (aged under 15)	2016/17 - 20/21	92	118	82.3	86.2	117	123	90.7	77.7	79.1	112
Unintentional and deliberate injuries: hospital admissions in young people (aged 15 to 24)	2016/17 - 20/21	128	155	182	96.6	184	251	133	221	130	99.5

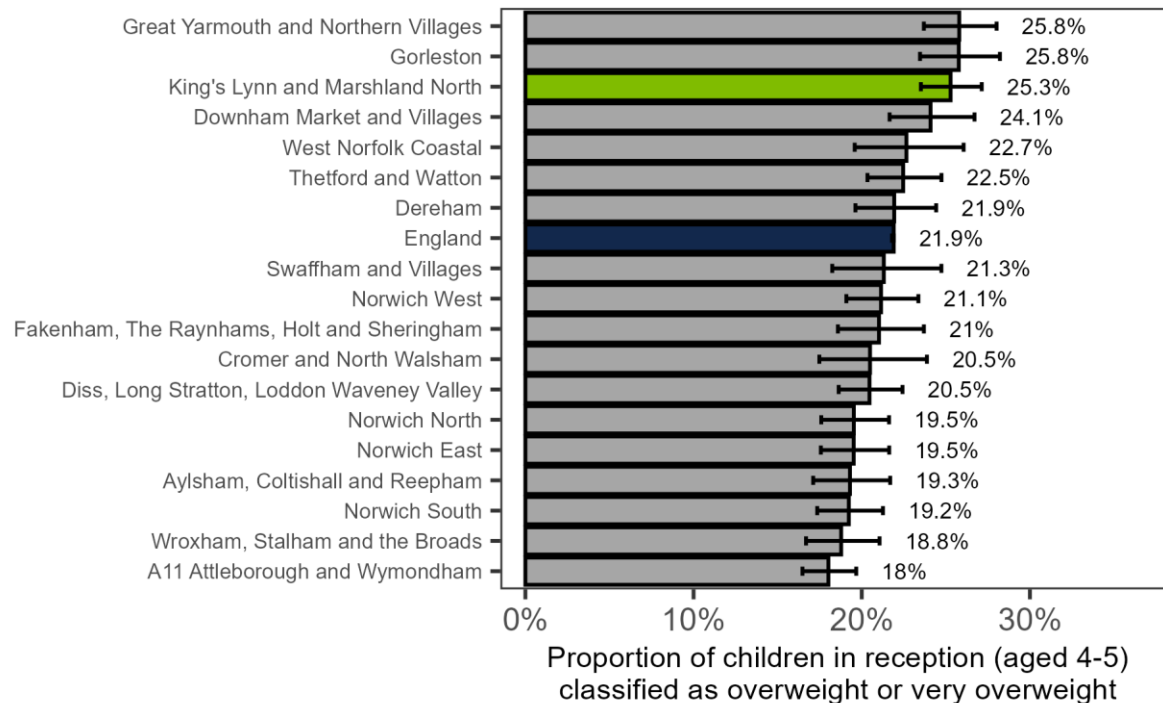
# Behavioural risk factors - children

The National Child Measurement Programme (NCMP) measures the height and weight of children in Reception class (aged 4 to 5) and Year 6 (aged 10 to 11), to assess overweight and very overweight levels in children within primary schools.

Analysis of aggregated NCMP data from 2021/22 to 2023/24 reveals that the prevalence of overweight or very overweight children varies across neighbourhoods, with rates typically lower in Reception (ranging from 18% to 26%) and higher in Year 6 (ranging from 30% to 42%).

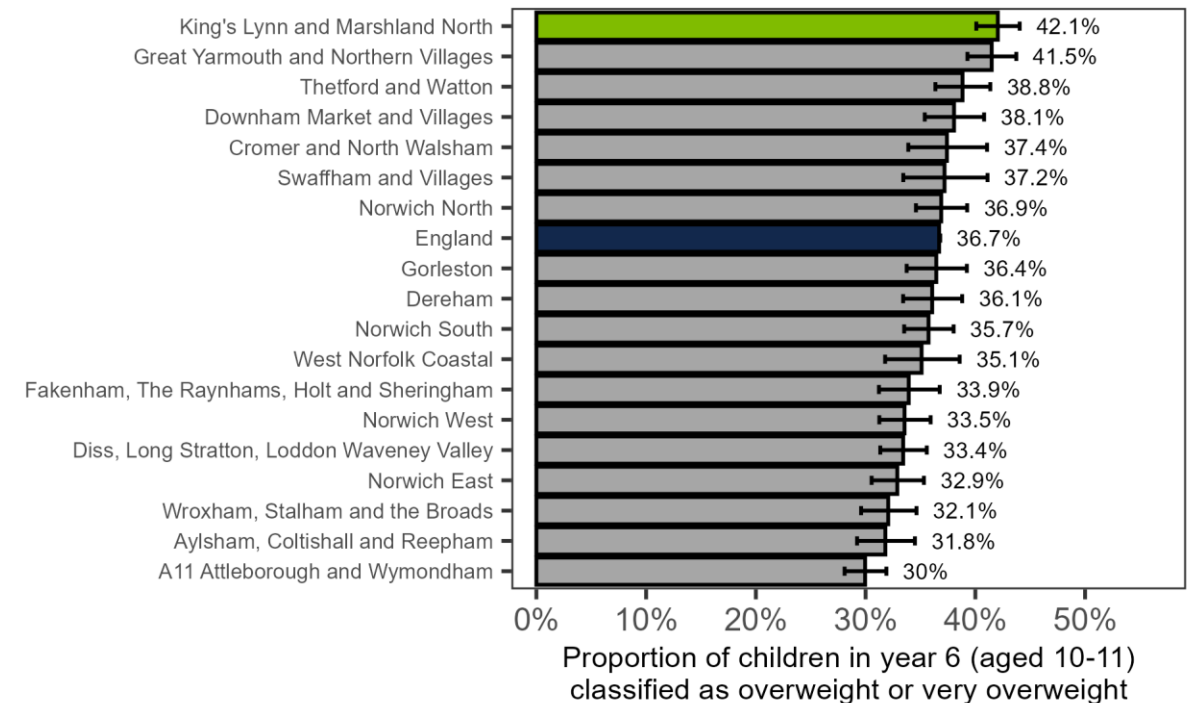
In the King's Lynn and Marshland North neighbourhood, 25.3% of Reception children and 42.1% of Year 6 children were classified as overweight or very overweight. These figures rank among the highest across all neighbourhoods and are significantly above the England averages, indicating that childhood excess weight in this area is notably higher than the national level.

Reception: 3-Year Combined Prevalence of Overweight or Very Overweight Children by Area



Source: NCMP data, 2021/22-2023/24

Year 6: 3-Year Combined Prevalence of Overweight or Very Overweight Children by Area



Source: NCMP data, 2021/22-2023/24

# Behavioural risk factors - children

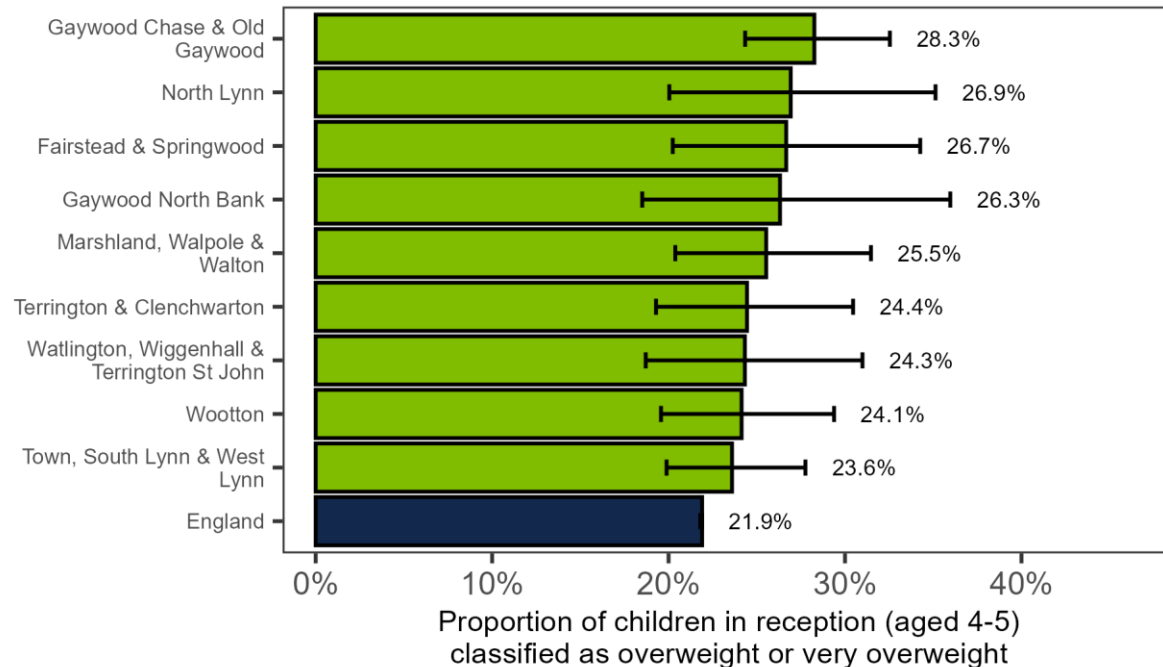
Within the King's Lynn and Marshland neighbourhood, the proportion of Reception and Year 6 children classified as overweight or very overweight varied marginally across MSOAs during the 21/22-23/24 period.

Among Reception-age children, Gaywood Chase and Old Gaywood recorded the highest prevalence (28.3%), however this was not significantly higher than any of the other eight MSOAs within the Neighbourhood. Though the rate in Gaywood Chase and Old Gaywood was significantly higher than the national average (21.9%).

Among Year 6 children, North Lynn reported the highest prevalence (50%). Again, this was not significantly higher than any of the other eight MSOAs within the Neighbourhood but was significantly higher than the national average (36.7%).

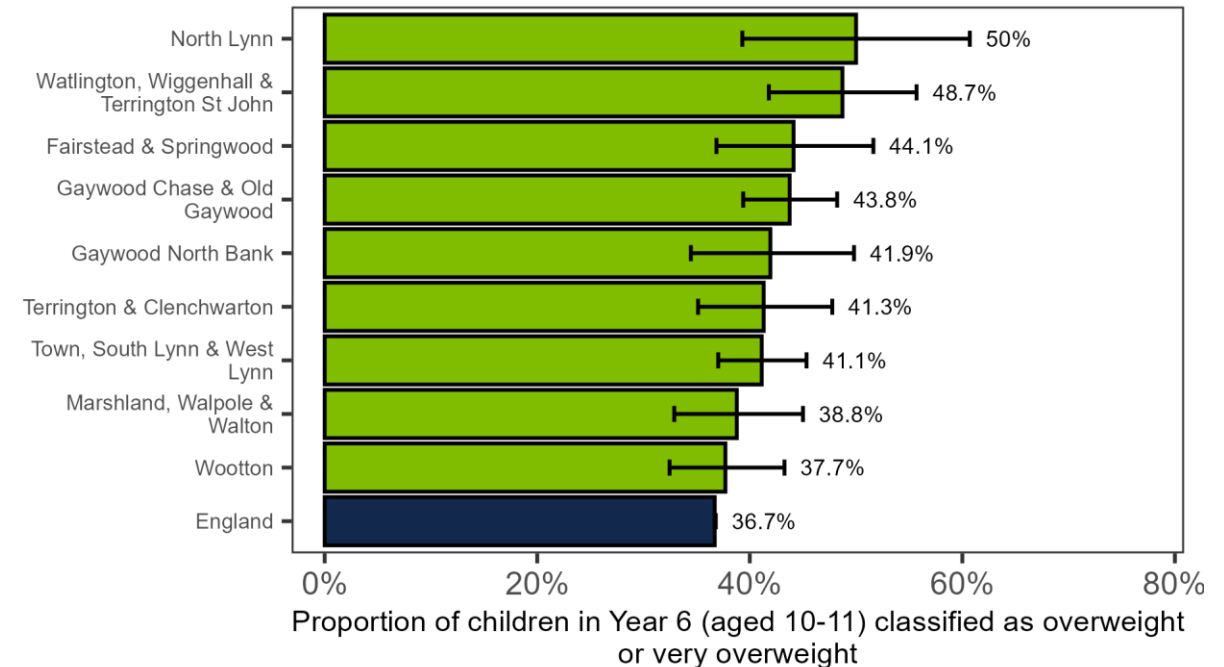
Overall, this suggests that childhood weight issues in this area may be more pronounced than seen nationally.

Reception: Prevalence of Overweight or Very Overweight Children Across MSOAs in King's Lynn and Marshland North Compared to National Average (3-Year Combined)



Source: NCMP data, 2021/22-2023/24

Year 6: Prevalence of Overweight or Very Overweight Children Across MSOAs in King's Lynn and Marshland North Compared to National Average (3-Year Combined)



Source: NCMP data, 2021/22-2023/24

# Behavioural risk factors - adults

In King's Lynn and West Norfolk, alcohol-specific hospital admissions are higher than the Norfolk average but remain below the England rate. Smoking prevalence in the area is notably higher than both the Norfolk and England averages, indicating a greater local burden of smoking-related health risks. The proportion of adults estimated to be obese is also above the Norfolk and England averages, suggesting that weight-related health challenges are more pronounced in this area compared with wider regional and national patterns.

## Norfolk Health and Wellbeing Profiles Adult Lifestyle

There are approximately 83,580 adults aged 20-64 living in this area, who make up 54% of the population (the Norfolk average is 55% of the population).

The central government's prevention plan says that making healthy choices is not always easy or clear. Local authorities and their partners have a role in creating an environment that makes healthy choices easier.

Select your district or Norfolk: King's Lynn and West Norf...  
Select your electoral division or district or Norfolk: King's Lynn and West Norf...



### Alcohol

Alcohol is an increasing cause of early deaths in England. Drinking alcohol is linked to increased hospital admissions and deaths from different health conditions.

533

hospital admissions for alcohol specific conditions per 100,000 people



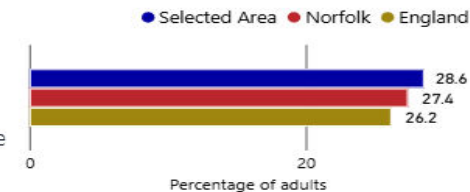
In the most recent 3-year period there were approximately 2,470 hospital admissions for alcohol specific conditions in this area.

### Healthy Weight

Excess weight in adults is recognised as a major cause of early death and avoidable ill health.



29%  
of adults are predicted to be obese



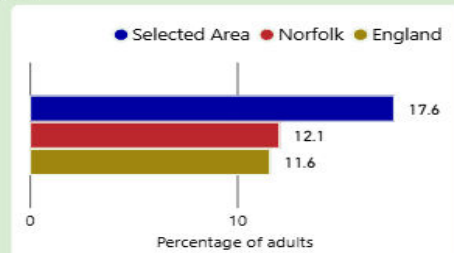
In this area there are approximately 35,950 adults who are predicted to be obese and approximately 41,620 adults who are physically inactive.

### Smoking

Smoking increases the risk of diseases like lung cancer, chronic obstructive pulmonary disease (COPD), and heart disease. Smoking is a leading cause of early deaths.

18%

of adults currently smoke



There are approximately 22,340 people who are smokers in this area.

# Disease and poor health

- This section summarises the prevalence of long-term conditions and other health burdens in the neighbourhood.

# Disease and poor health

The burden of long-term conditions is high and will rise further with ageing demographics. Diet-related conditions, cardiovascular disease and respiratory conditions remain priorities for prevention and management.

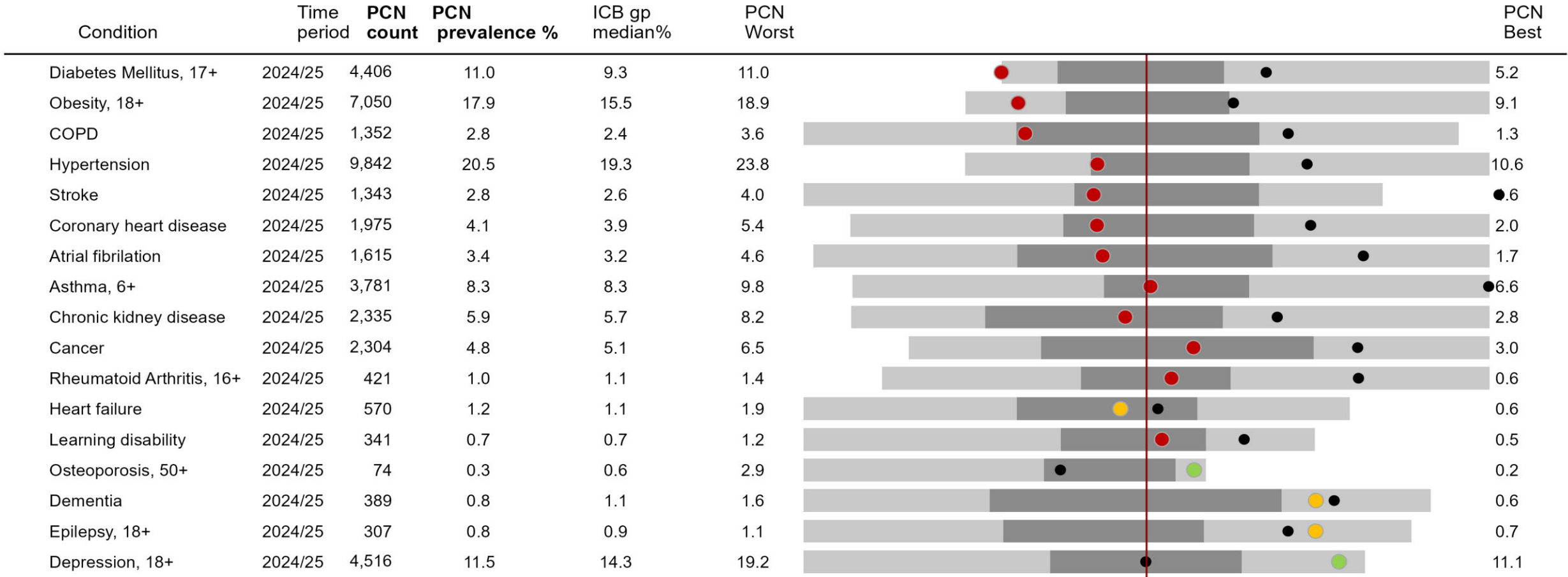
Generally, unplanned hospital admissions are higher than average, especially in the most deprived local areas.

	Period	England	Fairstead & Springwood	Gaywood Chase & Old Gaywood	Gaywood North Bank	Marshland, Walpole & Walton	North Lynn	Terrington & Clenchwarton	Town, South Lynn & West Lynn	Watlington, Wigganhall & Terrington St John	Wootton
Emergency hospital admissions: all causes	2016/17 - 20/21	100	146	146	141	133	187	113	154	124	97.1
Coronary heart disease: emergency hospital admissions	2016/17 - 20/21	100	171	128	141	194	240	133	152	145	83.5
Stroke: emergency hospital admissions	2016/17 - 20/21	100	107	113	142	141	141	100	125	87	86.6
Heart attack (myocardial infarction): emergency hospital admissions	2016/17 - 20/21	100	114	114	112	162	200	106	131	126	87.5
Chronic obstructive pulmonary disease (COPD): emergency hospital admissions	2016/17 - 20/21	100	177	169	180	192	363	114	183	113	46.1
Intentional self-harm: emergency hospital admissions	2016/17 - 20/21	100	145	229	59.6	106	237	114	284	95.4	137
Hip fracture: emergency hospital admissions (aged 65 and over)	2016/17 - 20/21	100	63	123	168	96.2	119	94.8	101	96.8	72.1
Alcohol-related conditions: admission episodes (all primary and secondary diagnoses)	2016/17 - 20/21	100	123	160	147	119	210	114	187	105	99.5
Hospital admissions for alcohol attributable conditions, narrow definition	2016/17 - 20/21	100	130	199	142	129	187	87.5	190	100	95.3

# Long-term conditions

## Fens & Brecks PCN

This spine chart shows how Fens & Brecks PCN compares with other PCNs in Norfolk and Waveney across a range of indicators. The median values for GP practices across all PCNs in Norfolk and Waveney are aligned to form one central line or 'spine' on the chart. The summary information for each measure is scaled and displayed on each 'vertebra' of the spine. The vertebrae show the range of values (light grey) and the 25th and 75th percentiles (dark grey). Values specific to Fens & Brecks PCN are placed on top of these summaries, allowing the viewer to compare it with other areas for that measure. The symbol is RAG rated to represent the significance compared to the national value (black circle).



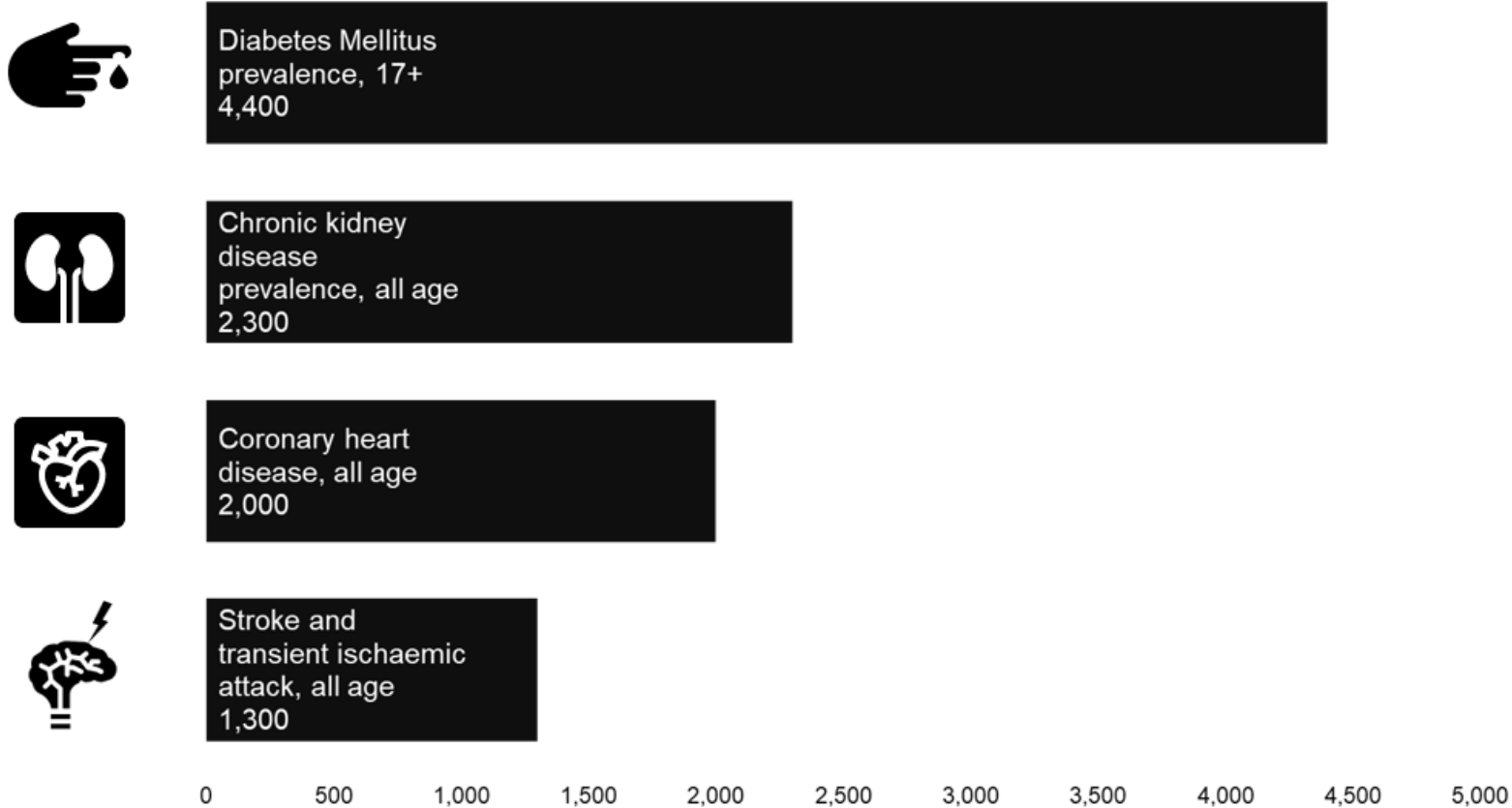
Prevalence here is a crude proportion of registered patients in the PCN recorded with conditions out of total registered patients in PCN. This is aggregated from GP NHS Quality Outcomes Framework records. Where a threshold age (e.g. 16+) is absent, the proportions refer to patients of all ages for the respective condition. The statistics are not age standardised so where frequency of conditions are strongly associated with age, prevalence may reflect differences in age structures of the PCN's patients, rather than a comparatively greater risk compared to ICB median or the England average prevalence.

Prevalence of PCN (%) compared to England: ● Worse ● Same ● Better

● Black circle is prevalence across England's registered population in total  
 | Vertical red line is N&W ICB's median of all GP practices

# Long-term conditions

## Fens & Brecks PCN



This chart shows the estimated number of patients with major long-term conditions within the Fens and Brecks PCN.

Diabetes affects around 4,400 adults, and chronic kidney disease affects 2,300 people.

Stroke and transient ischaemic attack affect approximately 1,300 people.

These figures highlight a significant burden of metabolic and cardiovascular disease, reinforcing the need for integrated prevention and management strategies.

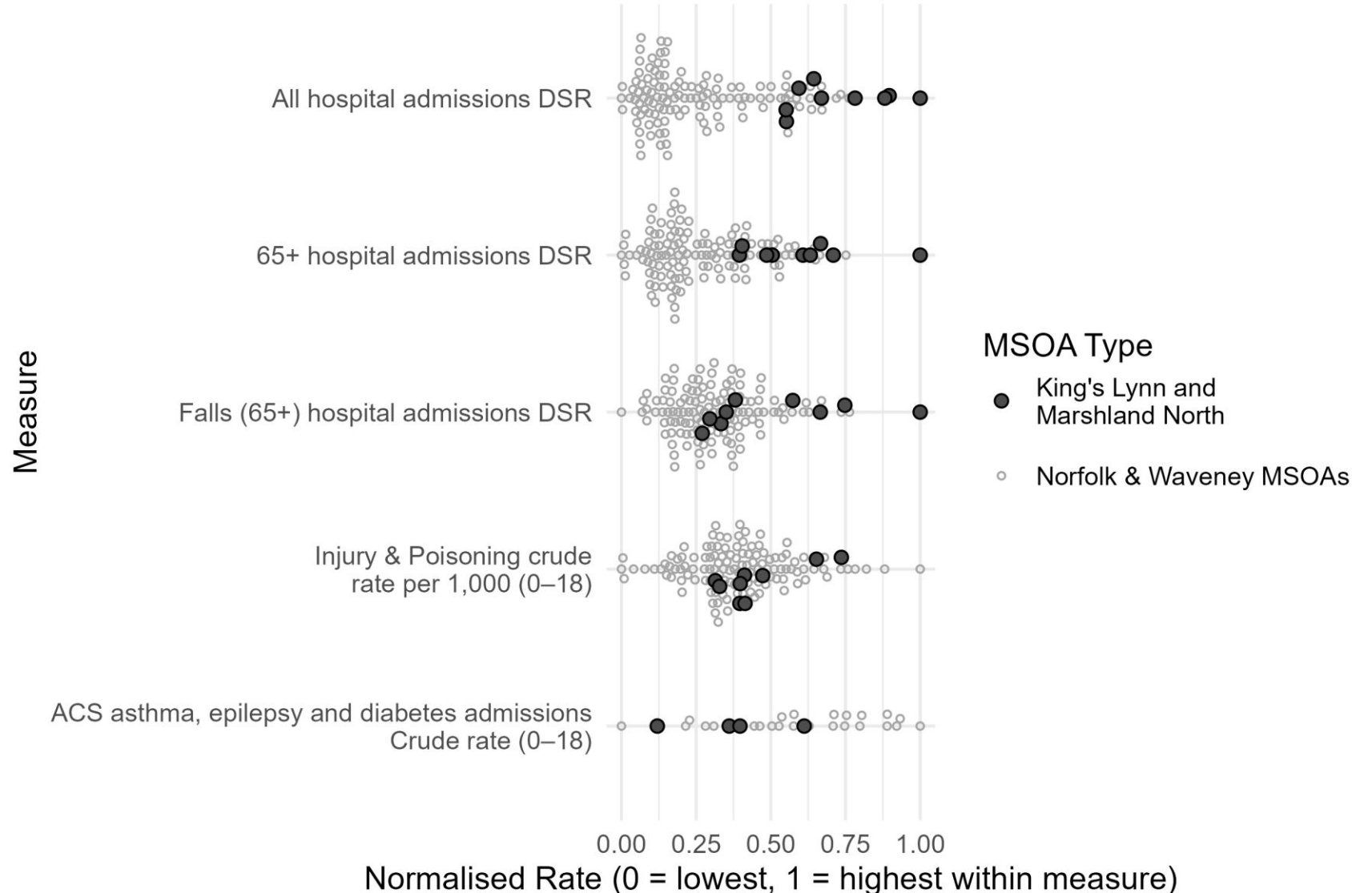
# Healthcare - unplanned hospital admissions

Generally, unplanned hospital admission rates in the area are much higher than average.

Admissions for more specific conditions such as falls and injuries are a little closer to the Norfolk and Waveney averages but very high in some local areas.

Numbers of ACS asthma, epilepsy and diabetes admissions were too small for rates to be reliably calculated for some small areas.

Neighbourhood MSOA emergency hospital admission rate comparison



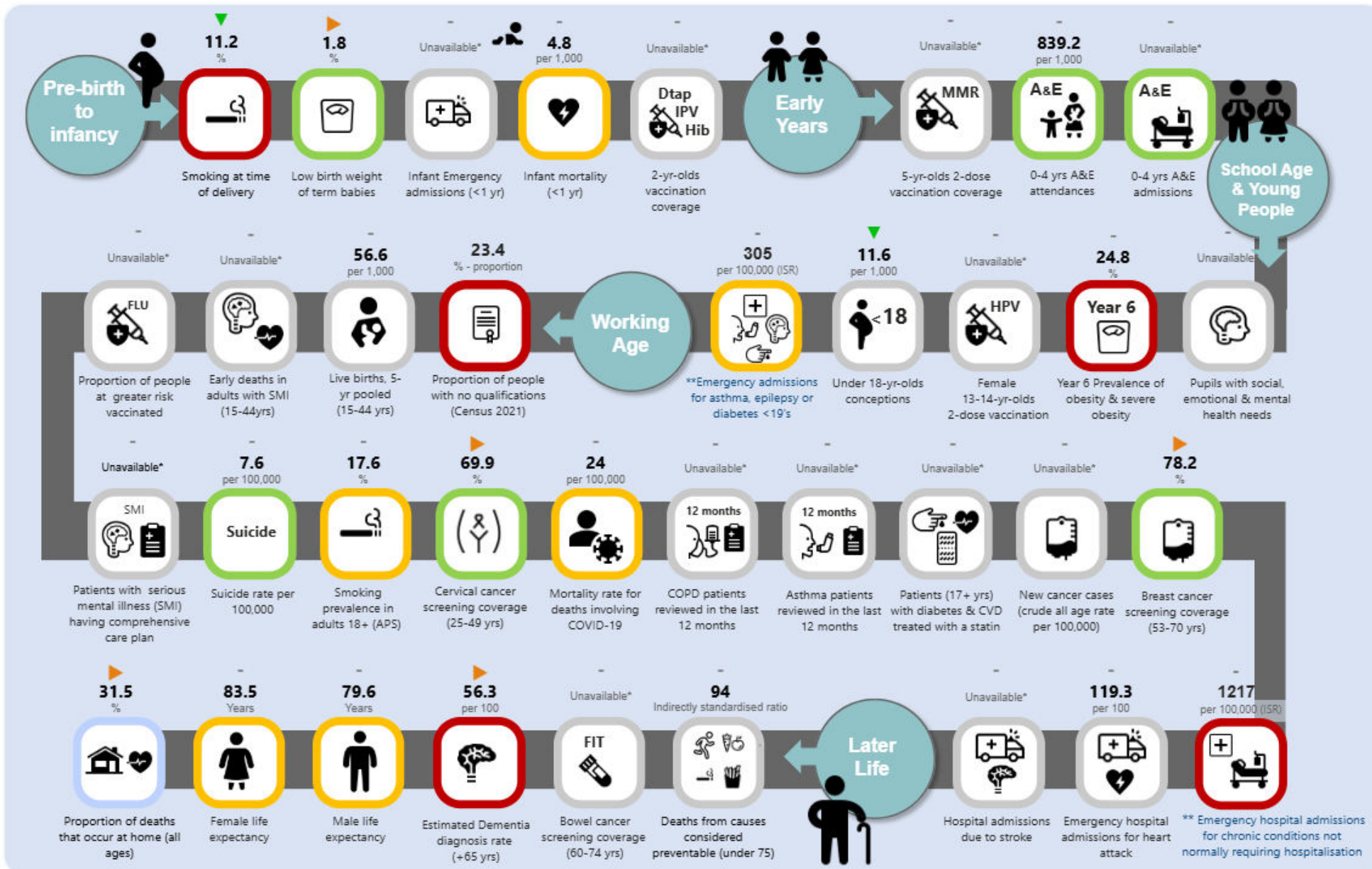
# Healthcare - unplanned hospital admissions

Measure	North Lynn	Town, South Lynn & West Lynn	Fairstead & Springwood	Gaywood Chase & Old Gaywood	Gaywood North Bank	Marshland, Walpole & Walton	Watlington, Wiggshall & Terrington St John	Wootton	Terrington & Clenchwarton
All hospital admissions DSR	9,341	8,685	8,593	7,965	7,255	7,093	6,778	6,514	6,508
65+ hospital admissions DSR	17,658	14,439	13,968	13,318	13,586	12,177	11,972	10,960	11,064
Falls (65+) hospital admissions DSR	3,174	2,413	1,766	2,203	2,600	1,514	1,657	1,571	1,696
Injury & Poisoning crude rate per 1,000 (0–18)	16.2	12.2	12.5	13.4	12.5	17.5	11.0	11.2	12.3
ACS asthma, epilepsy and diabetes admissions Crude rate (0–18)			1.3	2.9	2.1		2.2		

# Local strategy measures summary

- This section links local health outcomes to strategic priorities within Norfolk & Waveney's Integrated Care System.

# Healthcare life-course measures – King's Lynn & West Norfolk



Compared to England in same period\*\*

Better Worse Similar Higher Lower N/A, Not compared

◻
◻
◻
◻
◻
◻

Recent trends

▲ Increasing & getting worse
 ▲ Increasing & getting better

▼ Decreasing & getting worse
 ▼ Decreasing & getting better

▲ Increasing
 ▼ Decreasing

▶ No significant change
 - Could not be calculated

These measures track health outcomes across different life stages, providing insight into where interventions may have the greatest impact.

\*The indicator is not published or is unavailable for the area type selected.

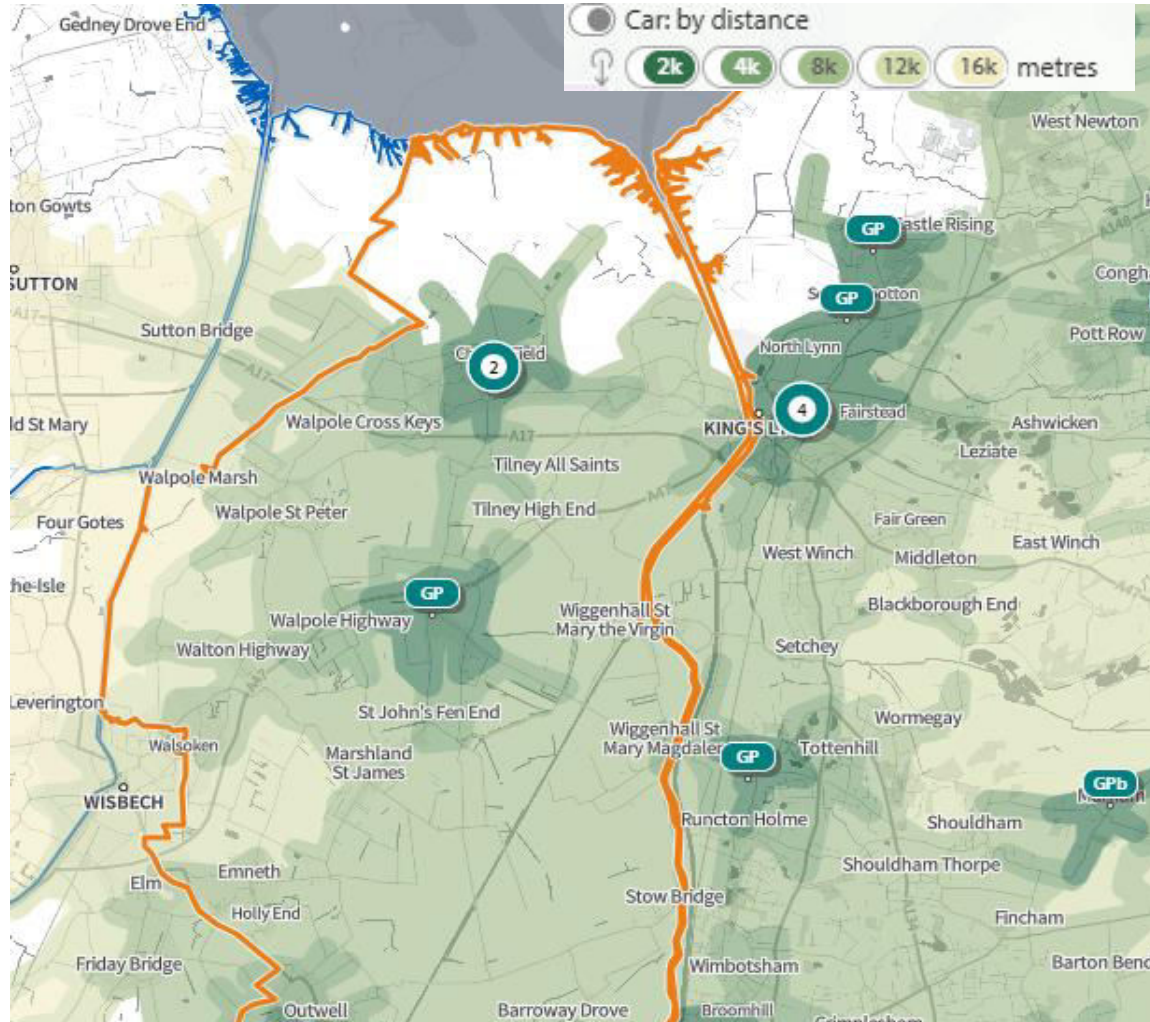
\*\*There is an exception for NHS Outcome metrics marked with asterisks which compare to a 2012 England baseline.

# Services and access

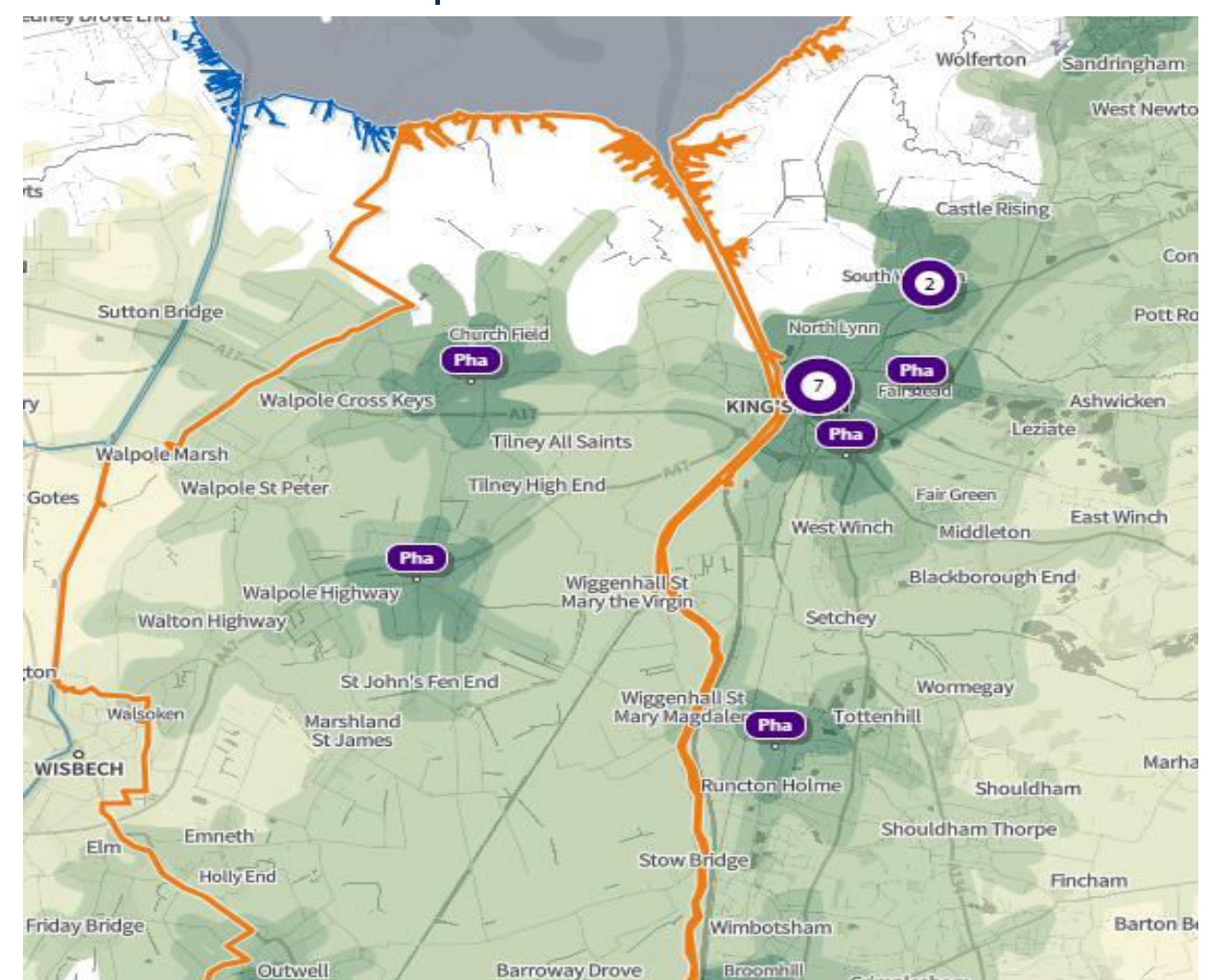
- This section looks at access to health and community services, which is critical for addressing inequalities.

# Access to primary care and pharmacies

## Travel distance to GPs

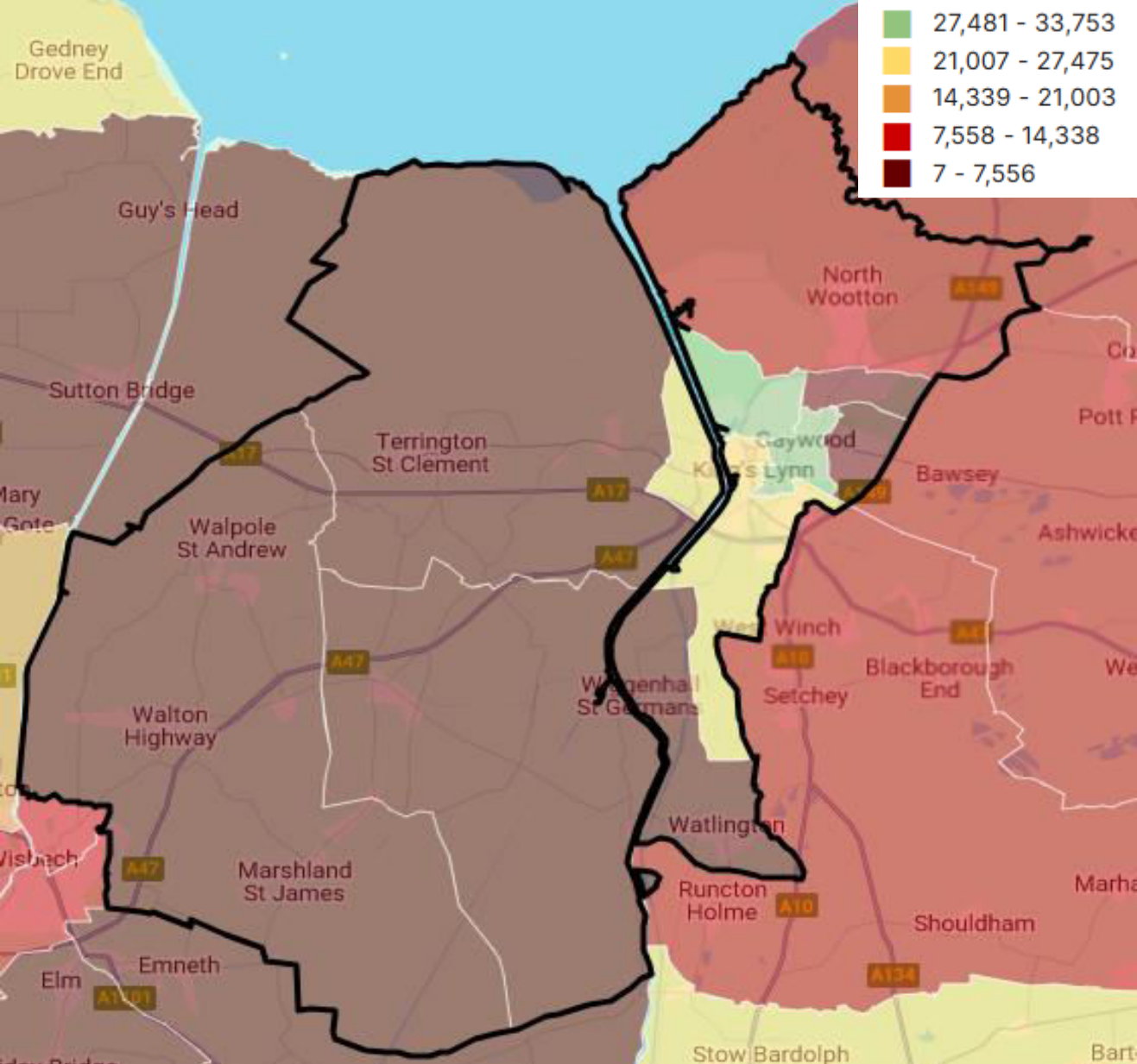


## Travel distance to pharmacies



These maps show average travel distances to GP practices and pharmacies, highlighting potential barriers to timely care.

# Civic Assets



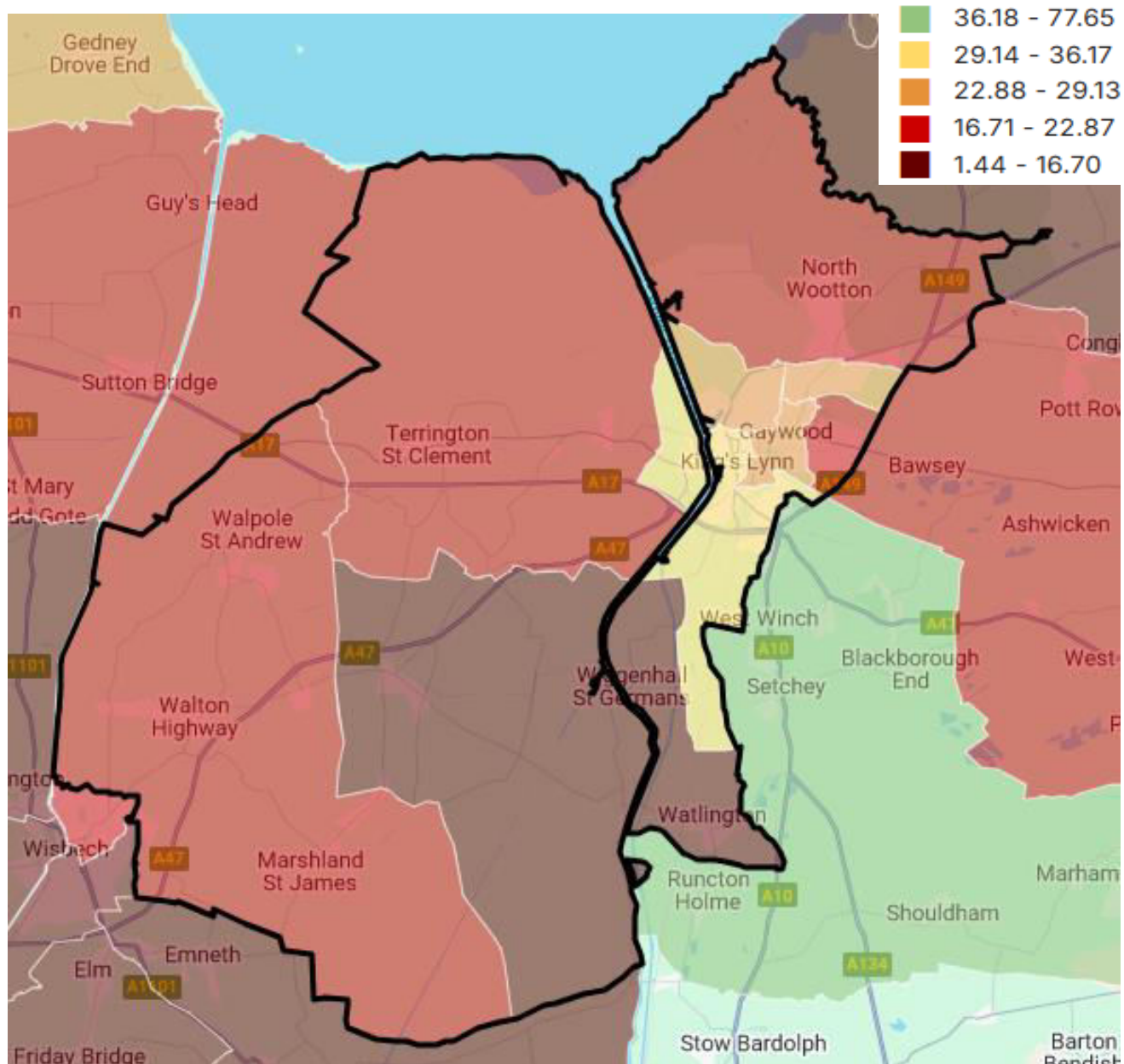
This map shows the Community Needs Index and civic assets ranking, which reflect the availability of community infrastructure and its role in wellbeing.

The Community Needs Civic Assets rank measures the presence of key community, civic, educational and cultural assets in a close proximity of the area. These include pubs, libraries, green space, community centres, swimming pools facilities that provide things to do often, at no or little cost, which are important to how positive a community feels about its area.

<https://norfolk.localinsight.org/#/map>

<https://localtrust.org.uk/wp-content/uploads/2023/05/Community-Needs-Index-2023-Technical-Methodology-Paper.pdf>

# Accessible childcare



This indicator shows the availability of childcare places per 100 children aged 0–7, an important factor for family wellbeing and workforce participation.

<https://norfolk.localinsight.org/#/map>

# Summary

# King's Lynn and Marshland North – Key Headlines

## **Population & Deprivation:**

- Ageing population; large areas of significant deprivation.

## **Health Outcomes:**

- Life expectancy lower than England average overall, with large inequalities between MSOAs.

## **Behavioural Risks:**

- High smoking obesity rates, considerable harm from drinking and excess weight; child health indicators poor in many of the local areas.

## **Disease Burden:**

- Relatively average LTC prevalence overall; high burden in most deprived areas, and ageing trend will further increase demand.

## **Wider Determinants:**

- Average economic activity; high benefit dependency; average housing stability.

# Additional sources of health and wellbeing information for communities:

- **Norfolk's Joint Strategic Needs Assessment** – <https://www.norfolkinsight.org.uk/jsna> – A picture of the health and wellbeing of the people of our county and the issues which affect their needs, inequalities and services.
- **Health and Wellbeing Electoral Division Profiles** – <https://www.norfolkinsight.org.uk/jsna/health-and-wellbeing-profiles> – Information on health and wellbeing of populations at electoral division community level
- **ONS/Census – 2021 Census data** – <https://www.ons.gov.uk/census/maps/choropleth> – Census statistics help paint a picture of the nation and how we live. They provide a detailed snapshot of the population and its characteristics and underpin funding allocation to provide public services.
- **NOMIS – Official labour market statistics** – <https://www.nomisweb.co.uk> – Nomis is a service provided by the Office for National Statistics, ONS, to give you free access to the most detailed and up-to-date UK labour market statistics from official sources.
- **Local Insight – OCSI** – <https://norfolk.localinsight.org/#/map> – Data mapping platform that brings together small-area socio-economic data to help organisations make informed decisions for communities.
- **Fingertips – Public Health Profiles** – <https://fingertips.phe.org.uk> – These profiles are a rich source of indicators across a range of health and wellbeing themes that has been designed to support JSNA and commissioning to improve health and wellbeing and reduce inequalities.
- **NHS Digital** – <https://digital.nhs.uk> – The national information and technology partner to the health and care system. NHS Digital process and publish data and information from across the health and social care system in England. Search for publications and indicators.