

Norwich East

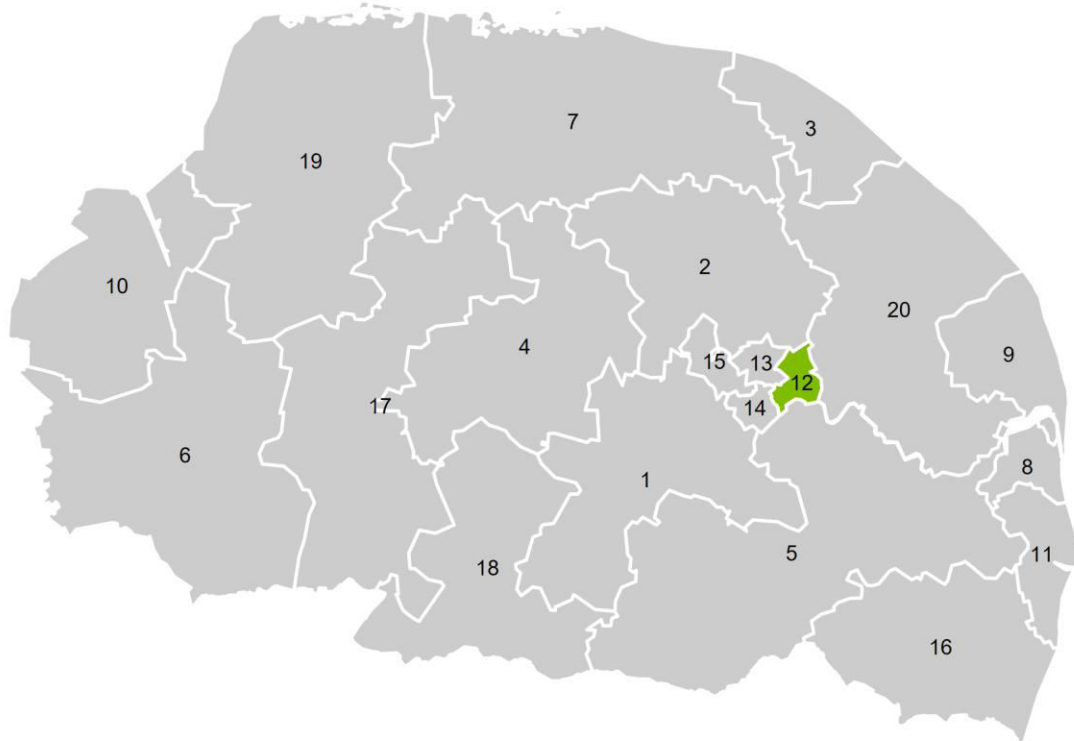
I&A Public Health Intelligence

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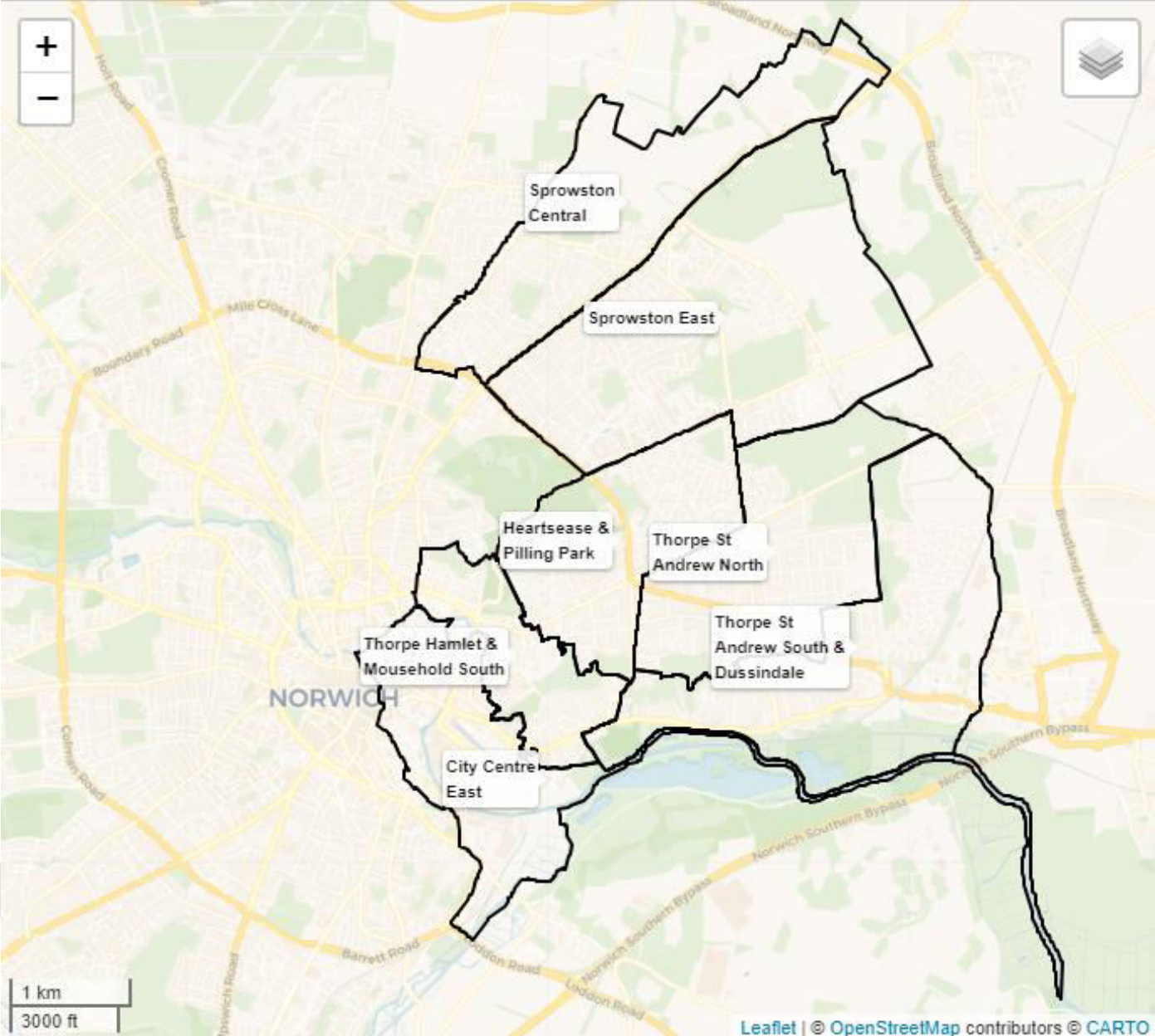
Neighbourhood areas



Nr	Name	Resident Population ¹
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
10	King's Lynn and Marshland North	72,760
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
Total		1,054,785

¹2024 mid-year-estimates for small areas (ONS)

Local areas (MSOAs)



Neighbourhood Profiles

What they are:

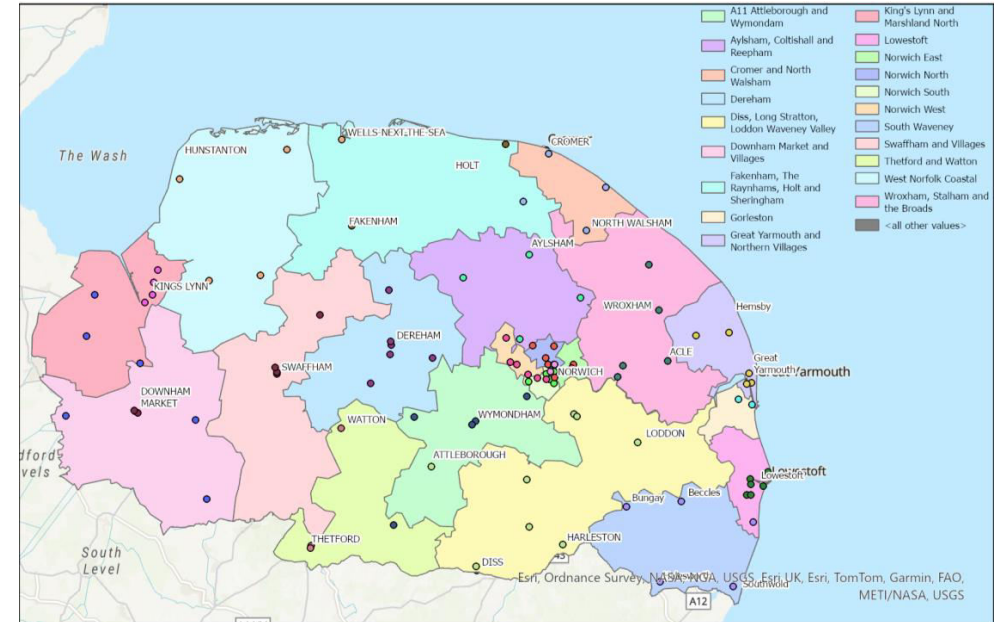
- Place-based summaries of health, wellbeing, and wider determinants in each neighbourhood
- Draw on local data, insights, and community context
- Highlight key challenges and opportunities for improving population health

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

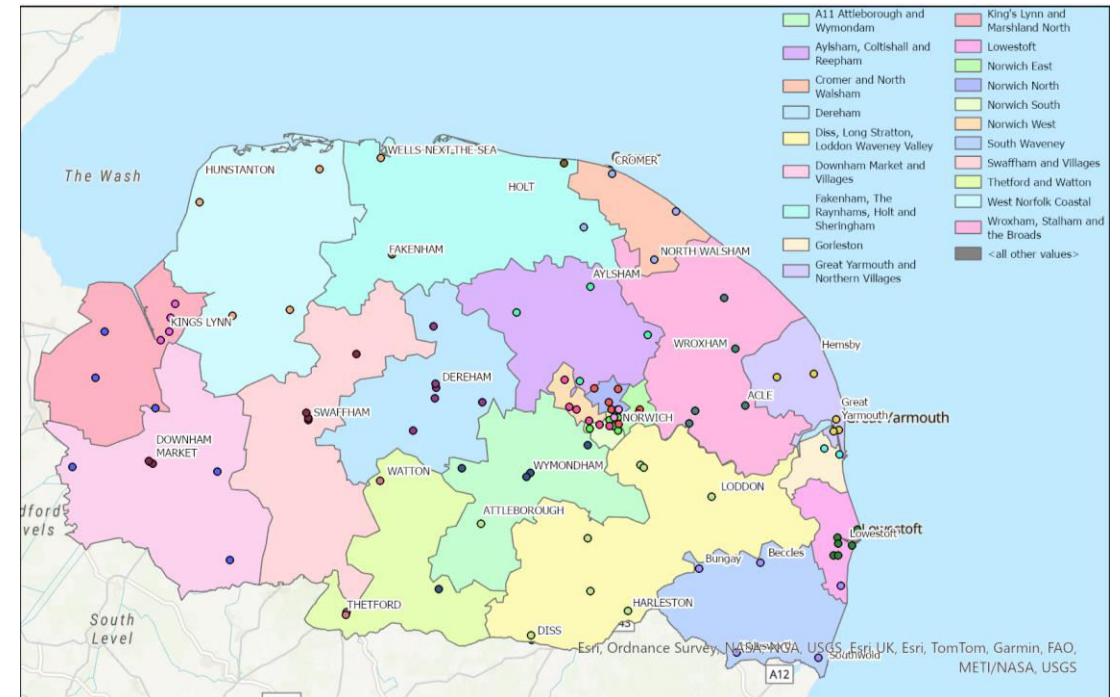


How do we define neighbourhoods?

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.
- Natural communities or 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.

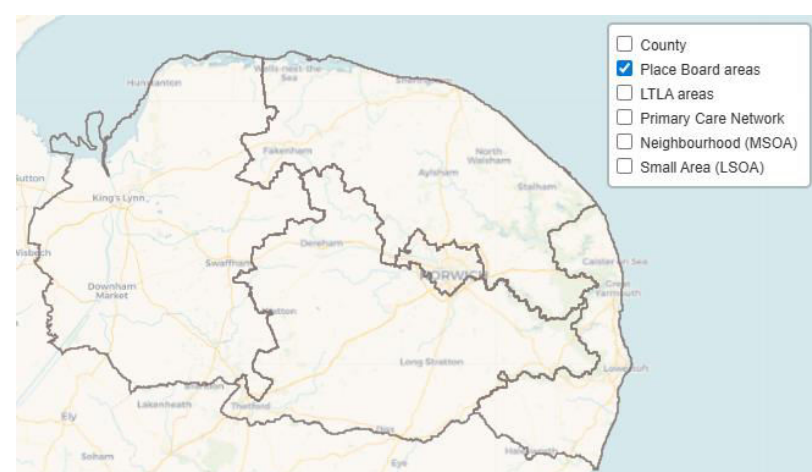


Methods

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 Norwich East, highlighting population structure and socioeconomic challenges.

Population and deprivation summary

Norwich East has an age profile that is characterised by a considerably younger population than that of Norfolk & Waveney as a whole. Heartsease and Pilling Park has the largest proportion of children (almost 1 in 5 aged under 16), whereas more than one in four are aged 65+ in Thorpe St. Andrew North.

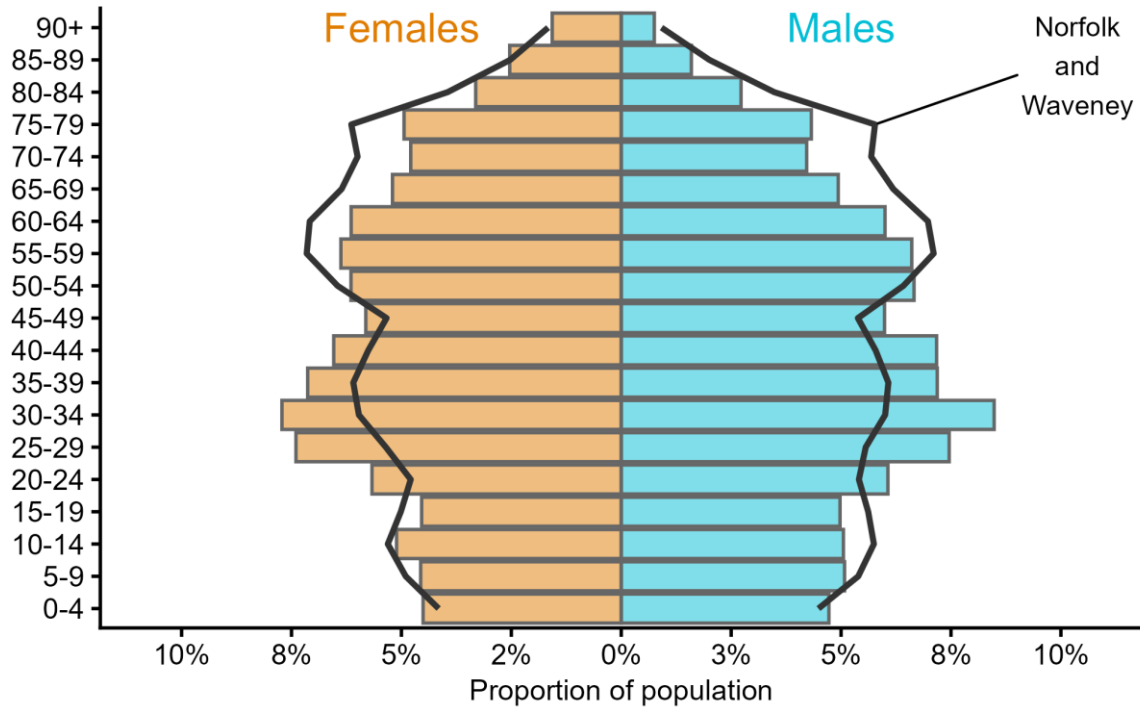
Locally, the MSOA with the largest estimated overall population growth is Thorpe St Andrew North with a 16.4% population increase by 2044.

There is stark variation in deprivation between local areas.

	Period	England	City Centre East	Heartsease & Pilling Park	Sprowston Central	Sprowston East	Thorpe Hamlet & Mousehold South	Thorpe St Andrew North	Thorpe St Andrew South & Dussindale
Resident population (aged 0 to 15)	2022	18.5	9.33	19.4	16.5	17.1	14.3	14.5	16.9
Resident population (aged 65 and over)	2022	18.6	13.7	17.9	24.7	23.8	15.2	27.4	20.3
Resident population (aged 85 and over)	2022	2.5	1.96	3.59	3.82	4.25	1.51	4.21	3.36
Population density: people per square kilometre	2022	438	3440	4470	1690	1840	4240	2550	1750
Poverty: Index of Multiple Deprivation	2019	21.7	24.3	35.6	13.7	8.22	27.2	11.6	10.3
Poverty: English Indices of Deprivation	2019	12.9	11.6	20.4	8.35	5.02	14.8	7.8	6.57
Children in poverty: Income Deprivation Affecting Children Index (IDACI) (aged 0 to 15)	2019	17.1	16.3	27.4	11	4.98	16.7	7.32	8.68
Older people in poverty: Income Deprivation Affecting Older People Index (IDAOPI) (aged 60 and over)	2019	14.2	18.1	19.3	9.21	6.78	18.7	9.95	7.68
Fuel poverty (low income, low energy efficiency methodology)	2023	11.4	7.94	12.3	8.71	7.15	10.3	10.3	6.89
Unemployment: people claiming out of work benefit (aged 16 to 64)	2024/25	4.07	3.94	4.53	1.96	2.27	4.53	1.81	2.15
Long-term unemployment: people claiming out of work benefit for over 12 months (aged 16 to 64)	2024/25	0.51	0.59	0.58	0	0.57	0.93	0	0

Demography in Norwich East

Norwich East population compared to Norfolk and Waveney 2024



Source: ONS 2024 mid-year estimates

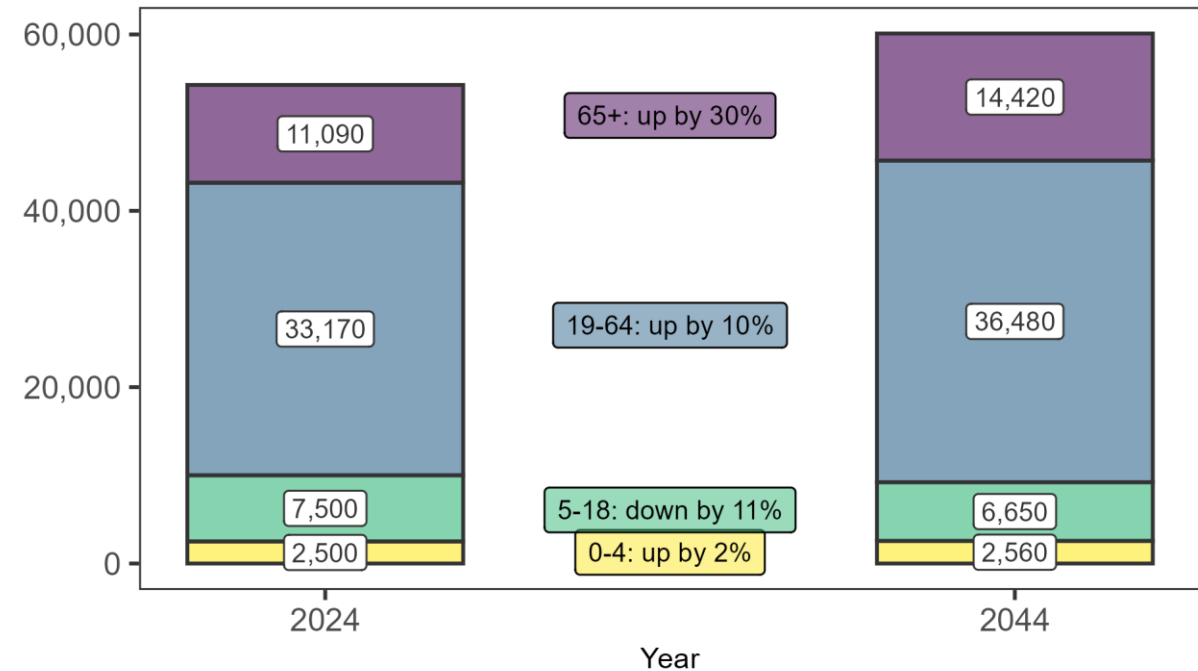
Norwich East has an age profile that is characterised by a much younger population than that of Norfolk & Waveney as a whole. Conversely, there are relatively fewer over the age of 50.

The age group with the largest projected population growth by 2044 in Norwich East is people aged 65+.

Locally, the MSOA with the largest estimated overall population growth is Thorpe St Andrew North with a 16.4% population increase by 2044.

Population projections by age groups for Norwich East

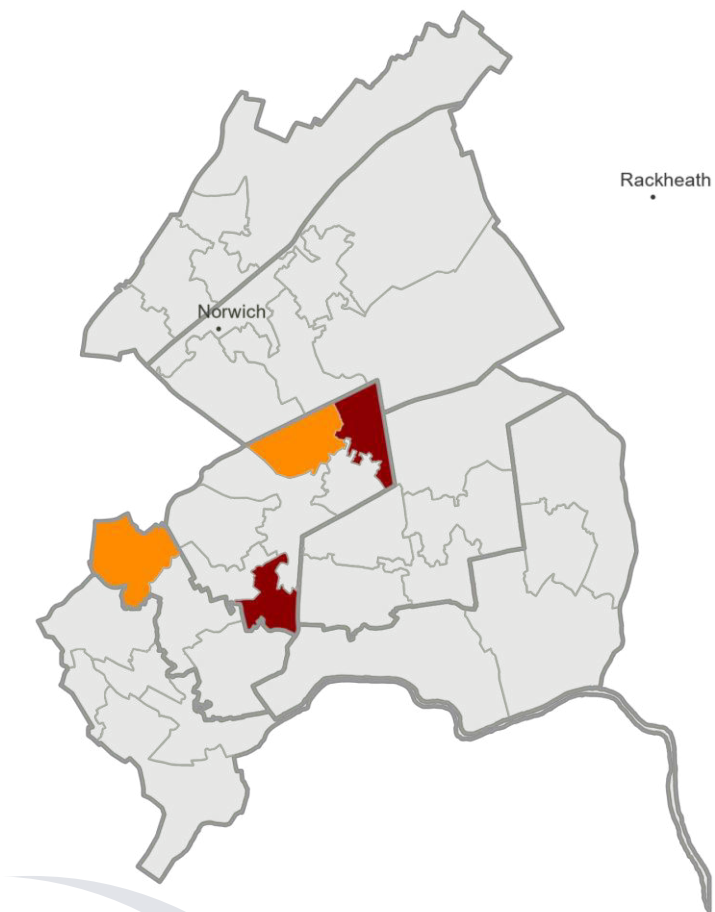
Residents



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

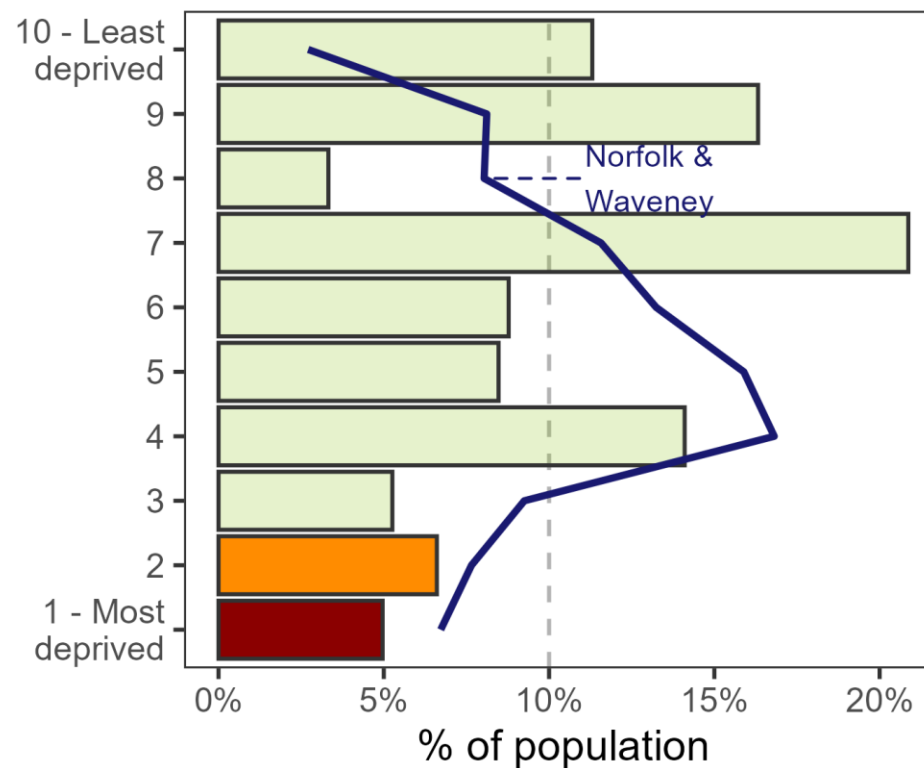
Deprivation in Norwich East

Core20 LSOAs in Norwich East



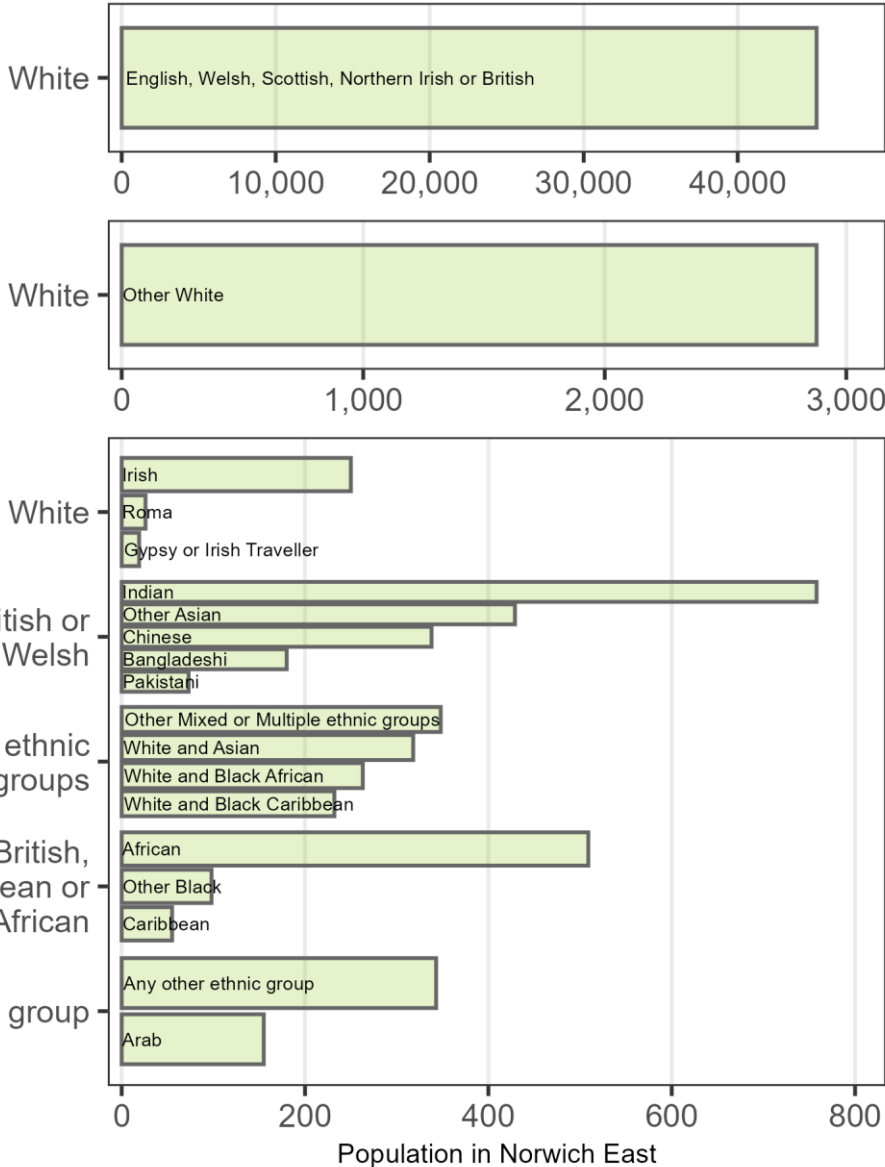
11.6% of the population of Norwich East live in small areas that are among the 20% most deprived areas in England (Core20 areas). Across Norfolk and Waveney, 14.4% live in Core20 areas.

IMD 2025 Decile



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

Ethnicity in Norwich East



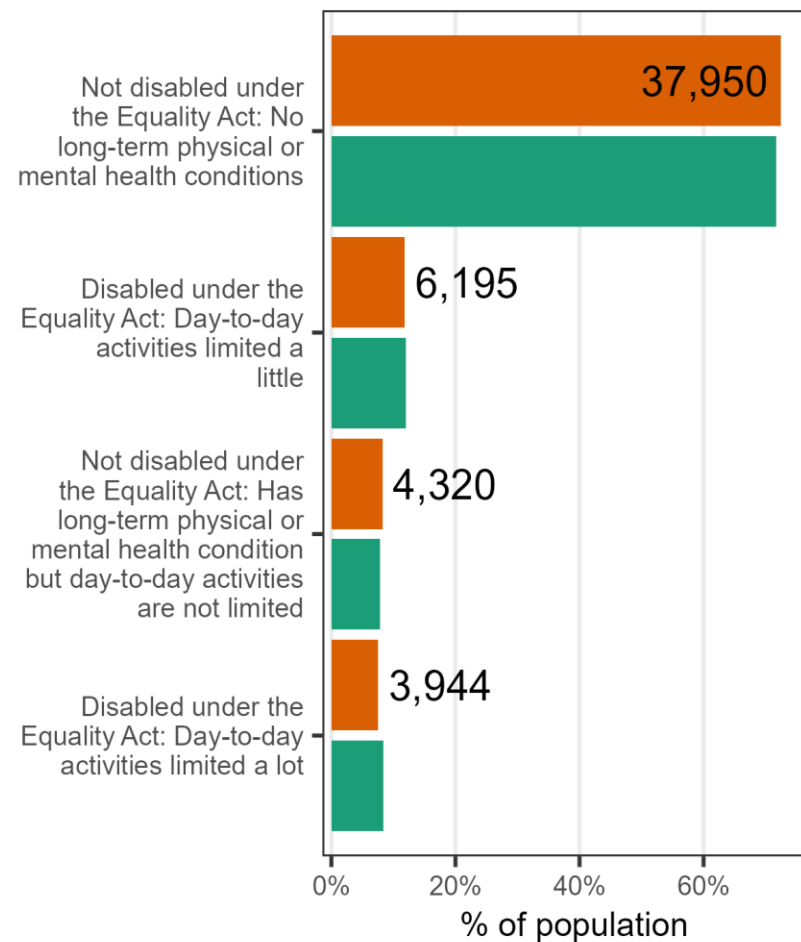
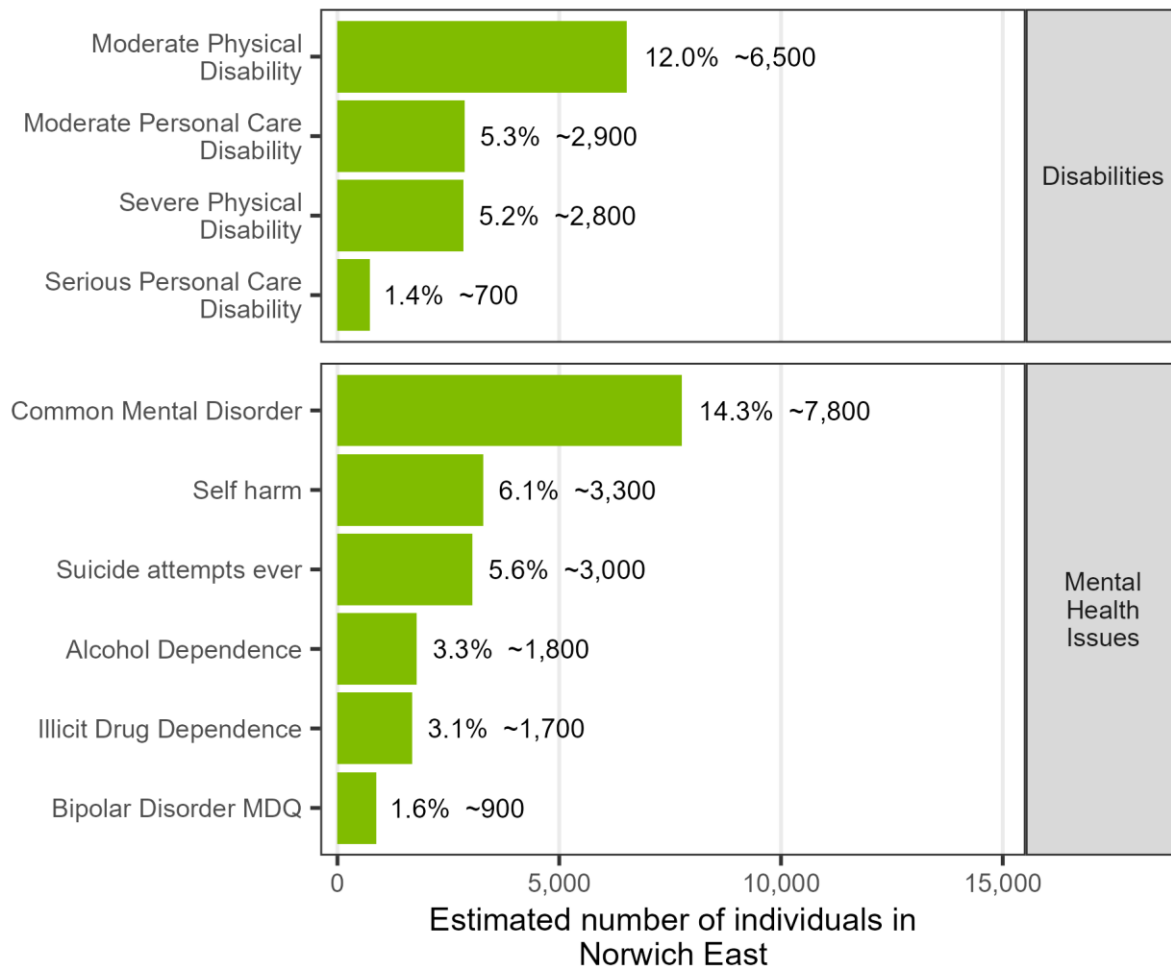
Source: Census 2021 (obtained through NOMIS)

Ethnicity group	Population	Proportion
White	48,293	92.2%
Asian Asian British Or Asian Welsh	1,778	3.4%
Mixed Or Multiple Ethnic Groups	1,161	2.2%
Black Black British Black Welsh Caribbean Or African	662	1.3%
Other Ethnic Group	498	1.0%

Source: Census 2021 (obtained through NOMIS)

Small areas (MSOAs) with the highest proportions of non-White residents in Norwich East include City Centre East (18.9%) and Thorpe Hamlet & Mousehold South (9.2%).

People with disabilities and vulnerable populations

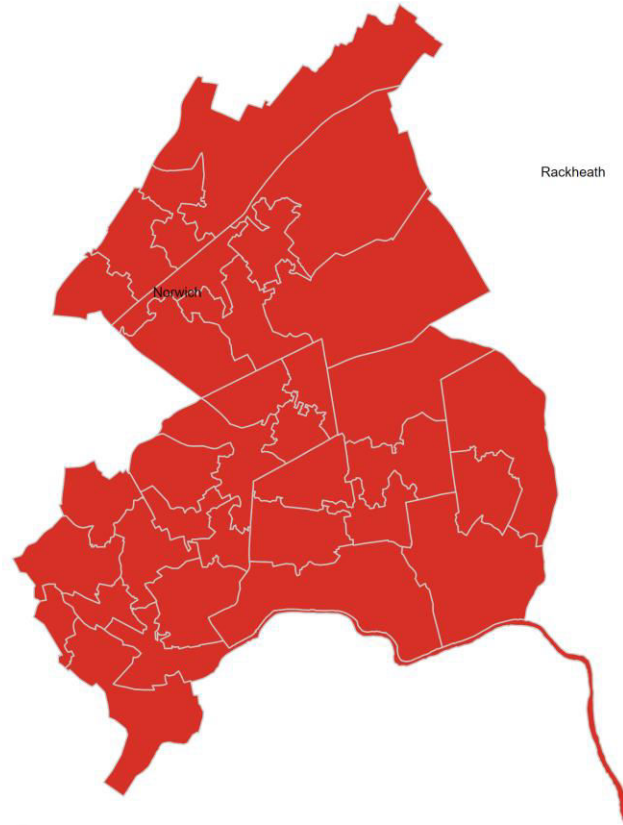


Source: 2021 Census (ONS)

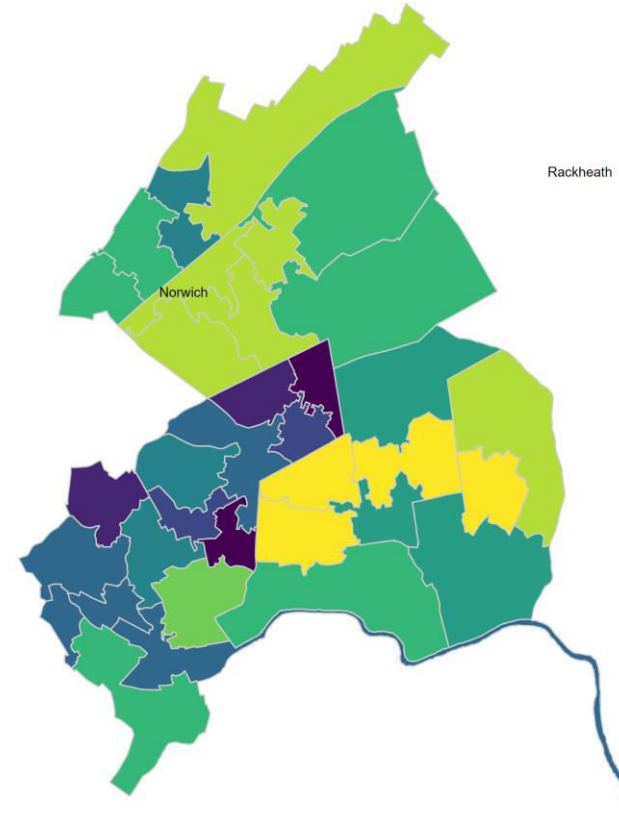
Sources:
 PANSI/POPPI, Psychiatric Morbidity Survey
 ONS 2024 mid-year population estimates

Rurality and Deprivation in Norwich East

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

- 1 - Most deprived
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 - Least deprived

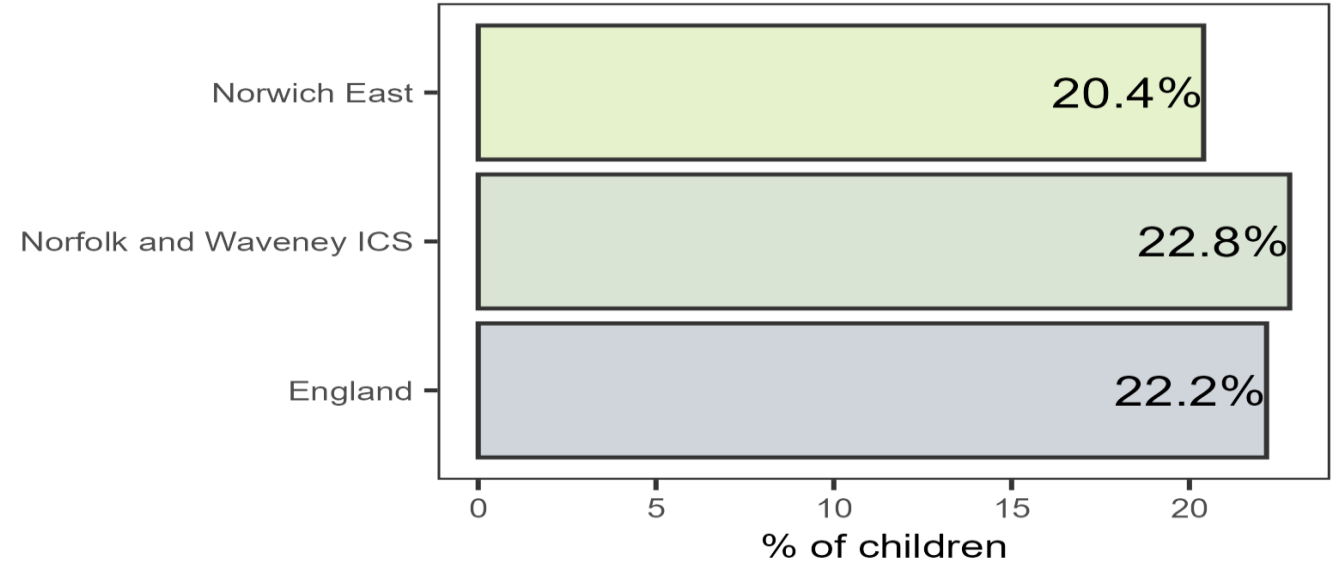
Children in Poverty

In Norwich East, 20.4% of children aged 0-19 live in low-income families, compared to 22.8% across Norfolk and Waveney and 22.2% across England.

28.0% of children aged 0 to 15 in Norwich East are estimated to live in poverty according to the Income Deprivation Affecting Children Index (IDACI). In England overall, this is 36.25%.

In Norwich East, 21.0% of pupils from Reception to Year 13 are eligible for free school meals. This is significantly lower than across all schools in Norfolk, where 24.0% of pupils are eligible.

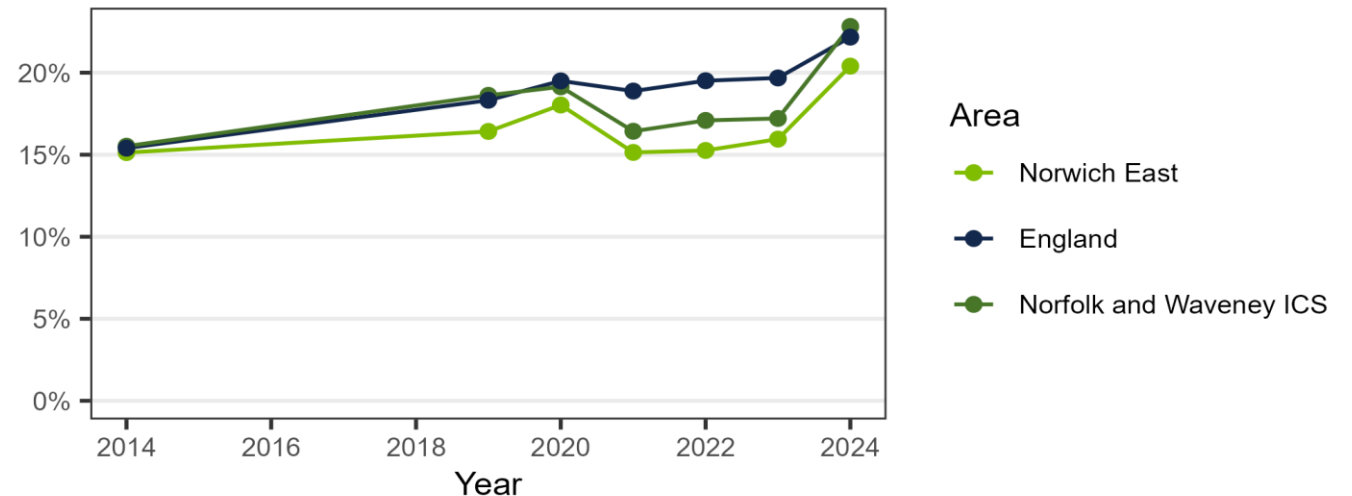
Children aged 0-19 in relative low-income families



Source: Local Insight (OCSI)

Children aged 0-19 in relative low-income families

% of children



Source: Local Insight (OCSI)

Economy, employment and housing

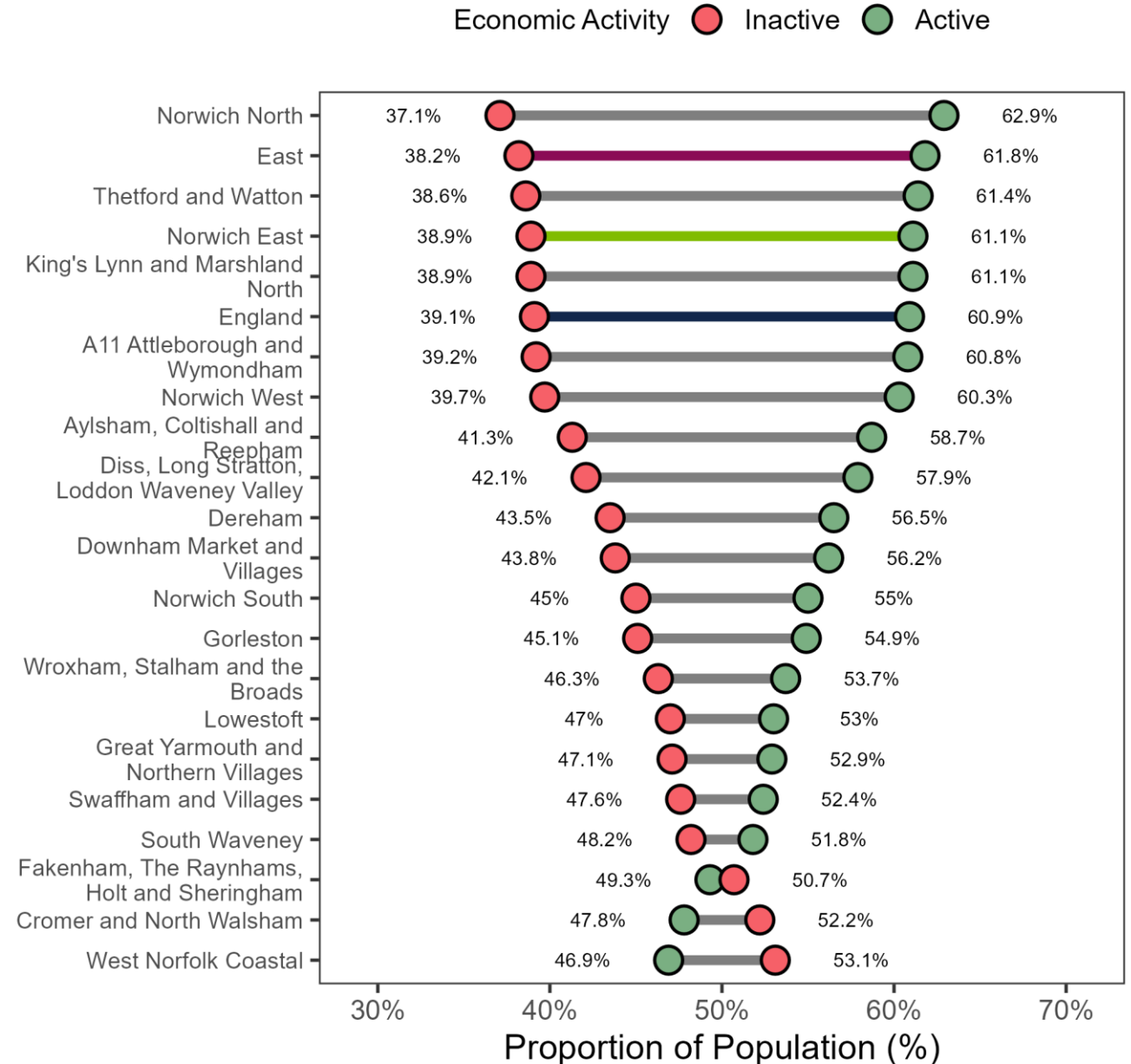
Economy and Employment

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 Norwich East neighbourhood 61.1% of working-age residents were classified as 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 Norwich East neighbourhood during the 2021 Census varied considerably.

Within the neighbourhood, Heartsease and Pilling Park recorded the lowest proportion of economically active residents aged 16–64 at 43.9%, indicating high levels of economic inactivity among the working-age population.

In contrast, Thorpe Hamlet and Mousehold South recorded the highest proportion of economically active residents (67.3%) among MSOAs within the neighbourhood. This MSOA, along with City Centre East (67.1%) and Thorpe St Andrews South and Dussindale (63.6%), 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 Norwich South, professional occupations represented the largest occupational group, accounting for 27.8% of usual residents aged 16 years and over in employment. This proportion is substantially higher than both Norfolk (16.6%) and England (20.3%), highlighting a high concentration of higher-skilled roles within the local labour market. In addition, employment in associate professional and technical roles (13.5%) was slightly above Norfolk (11.8%) and similar to England (13.3%), reinforcing the area's professional profile.

Conversely, Norwich South recorded lower proportions of residents employed in skilled trades (7.1%) and process, plant and machine operative roles (4.9%) compared with Norfolk (12.8% and 8.0% respectively) and England (10.2% and 6.9%). Employment in caring, leisure, and other service roles (8.8%) and administrative and secretarial roles (7.7%) was also below Norfolk and England averages. This suggests that Norwich South has a relatively low concentration of routine and manual occupations, reflecting a labour market that is more professional compared to county and national patterns.

Occupational Groups						
Occupation	Norwich South		Norfolk		England	
	Count	Rate	Count	Rate	Count	Rate
Managers, Directors & Senior Officials	2,679	9.8%	49,365	11.9%	3,403,916	12.9%
Professional	7,628	27.8%	68,653	16.6%	5,356,649	20.3%
Associate Professional & Technical	3,704	13.5%	48,630	11.8%	3,499,749	13.3%
Administrative & Secretarial	2,108	7.7%	37,330	9.0%	2,446,565	9.3%
Skilled Trades	1,959	7.1%	52,732	12.8%	2,683,139	10.2%
Caring, Leisure & Other Service	2,409	8.8%	43,994	10.6%	2,447,148	9.3%
Sales & Customer Service	2,458	9.0%	33,402	8.1%	1,972,553	7.5%
Process, Plant & Machine Operatives	1,340	4.9%	33,235	8.0%	1,832,666	6.9%
Elementary	3,165	11.5%	46,376	11.2%	2,762,829	10.5%

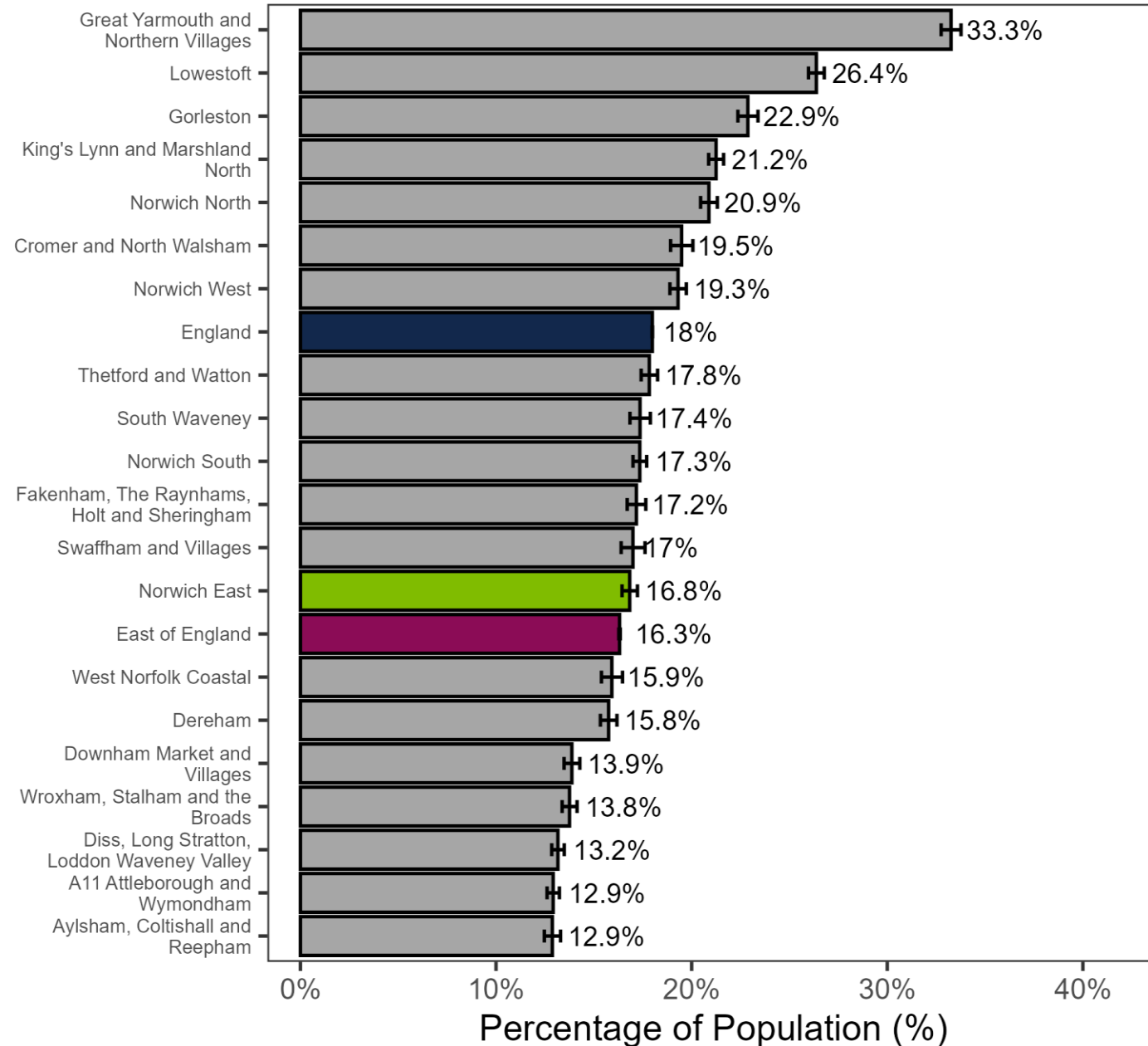
Economy and Employment

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 (age 18-66) claiming Universal Credit across different neighbourhoods in Norfolk during August 2025.

The proportion of residents claiming Universal Credit varies across neighbourhoods. In August 2025, the Norwich East neighbourhood recorded a claimant rate 16.8%, which was significantly lower than six of the 19 other neighbourhoods and below the England average (18%). However, the rate remained marginally above the East of England average (16.3%).



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

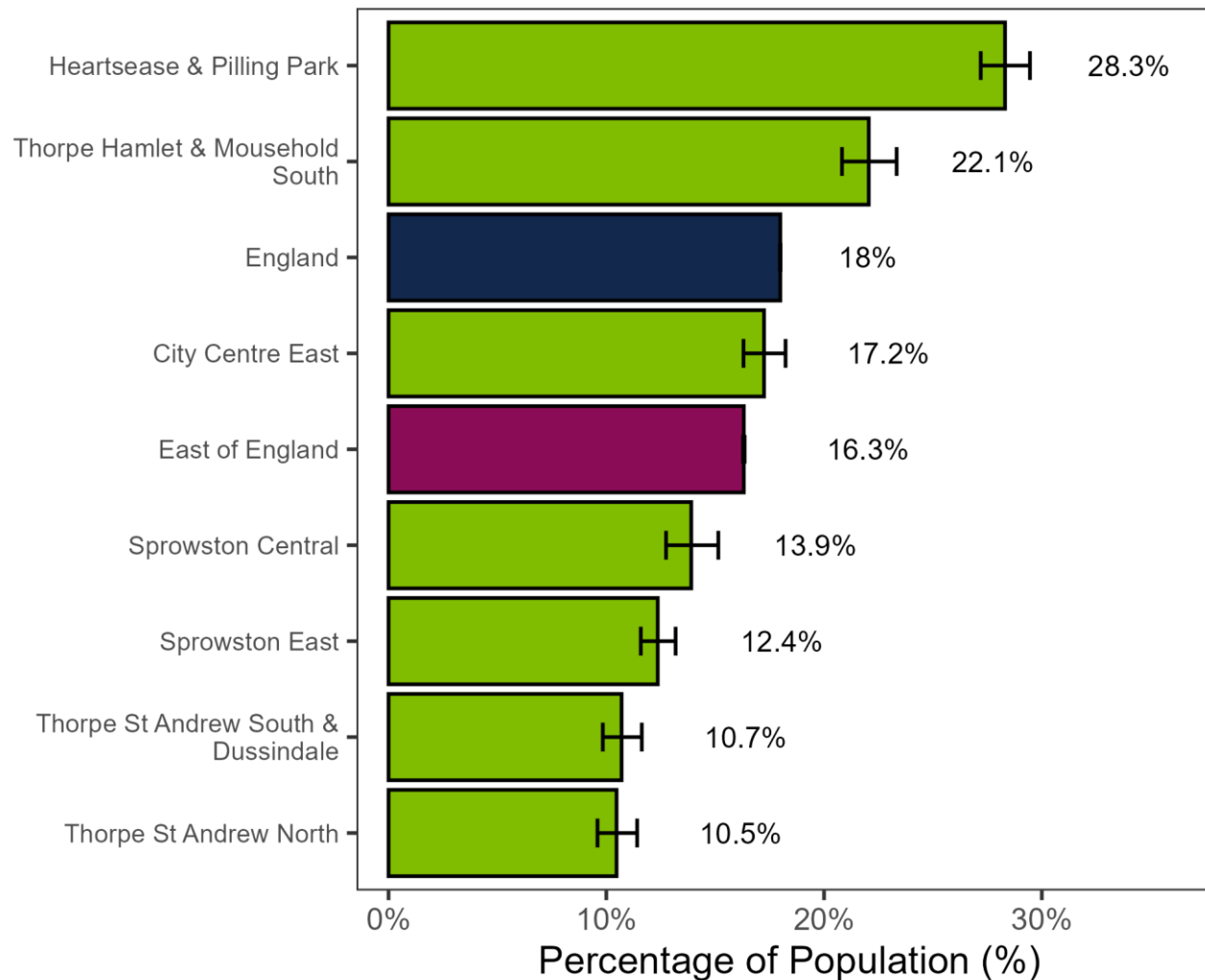
Economy and Employment

In August 2025, the proportion of residents (aged 18 to 66) claiming Universal Credit varied significantly across MSOAs within the Norwich East neighbourhood (ranging from 10.5%-28.3%).

Heartsease and Pilling Park recorded the highest proportion of claimants at 28.3%, 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%).

Thorpe St Andrews North reported the lowest proportion of claimants at 10.5%, significantly fewer claimants compared to five of the other six MSOAs within the area and both the East of England and England average.

Universal Credit Claimants by MSOA in Norwich East (Aug 2025)



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

Economy and Employment

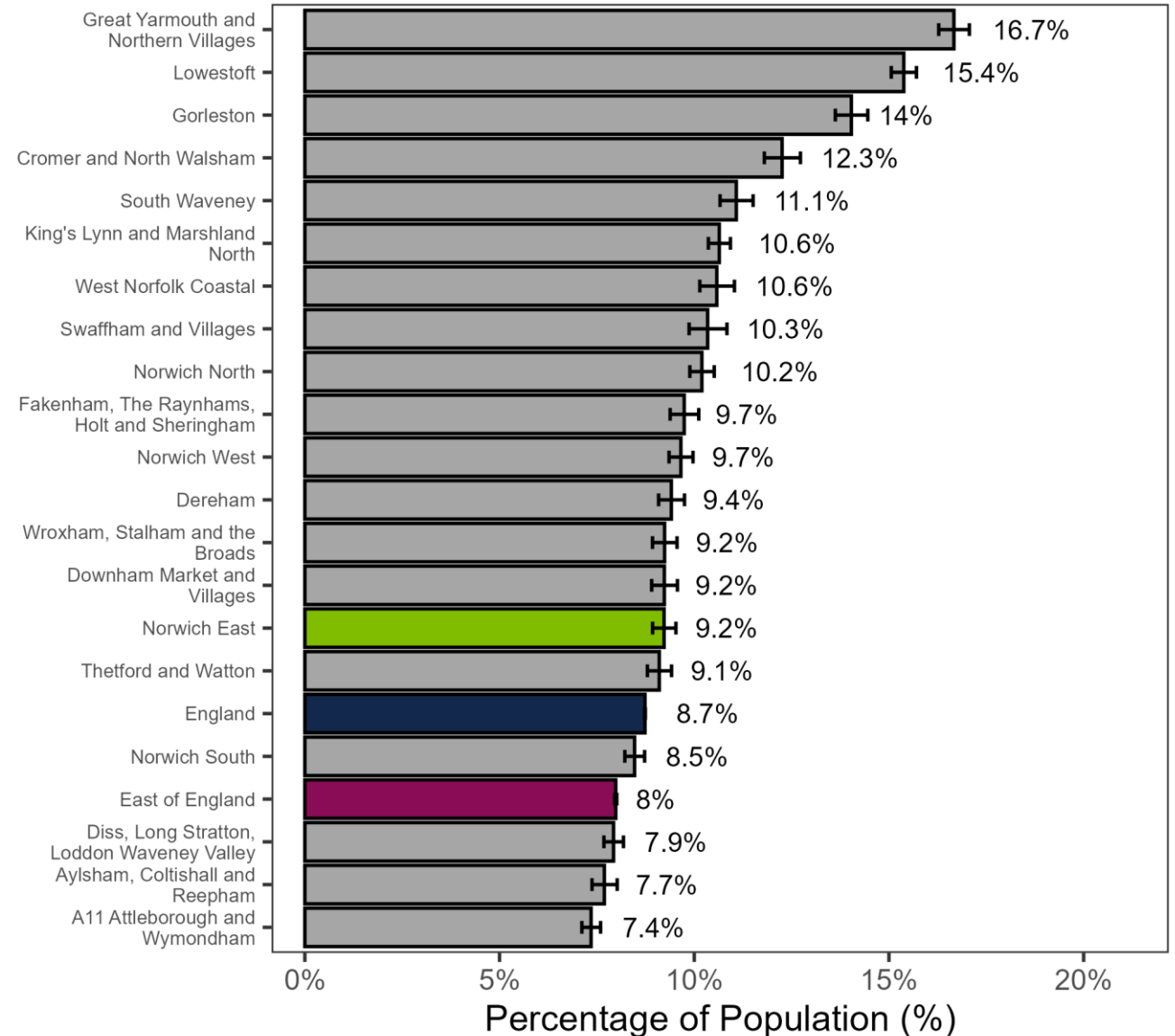
Personal Independence Payments (PIP) entitlement statistics covers individuals currently receiving PIP and those whose payments are temporarily suspended (e.g., during a hospital stay).

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 Norwich East neighbourhood had a significantly lower proportion of individuals entitled to PIP (9.2%) than eight neighbourhoods and a similar proportion to five other neighbourhoods. Entitlement in this area was also higher than the East of England average (8%) and the England average (8.7%). This suggests that PIP entitlement levels in Norwich East are elevated 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

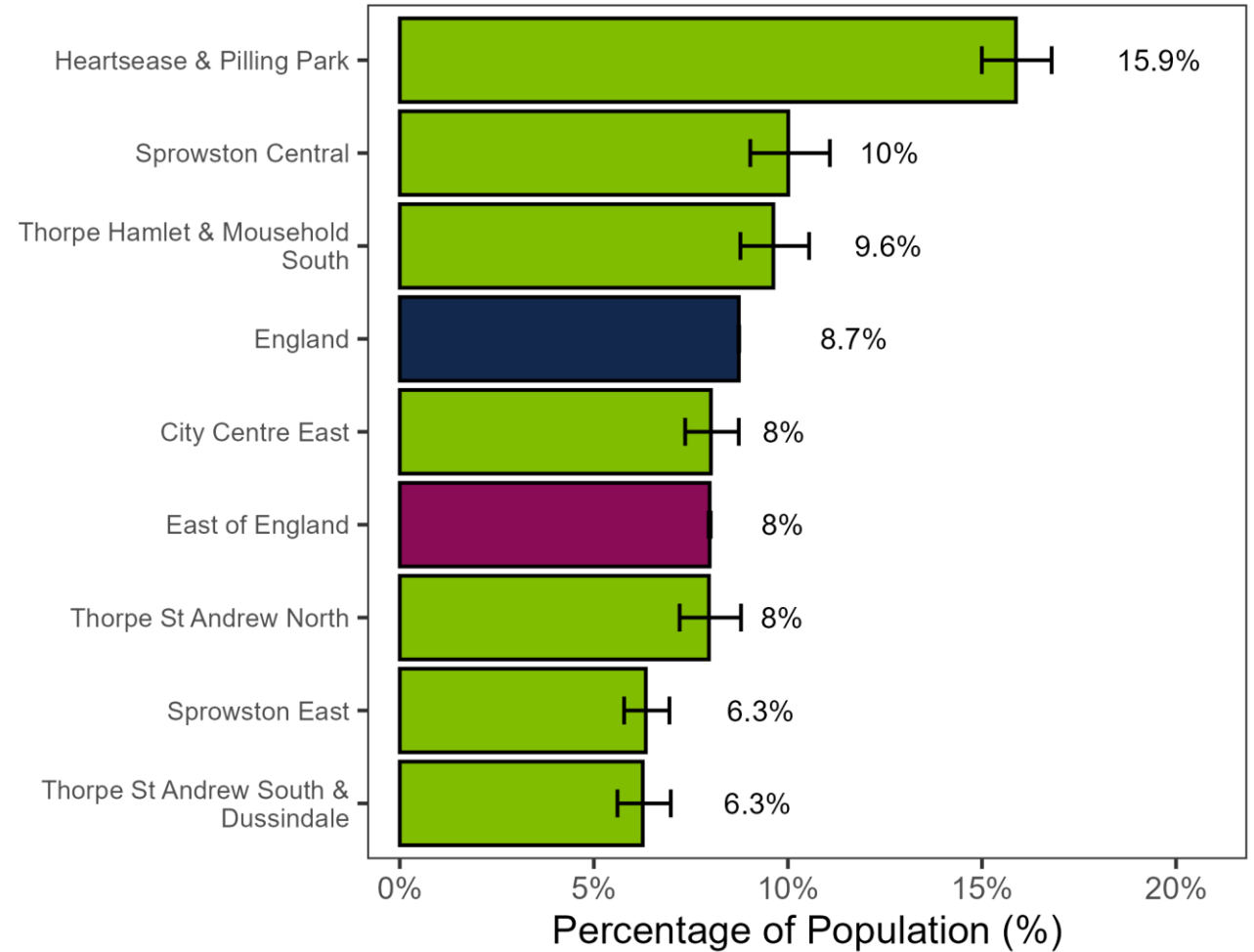
Economy and Employment

In June 2025, the proportion of residents aged 16 to 66 entitled to Personal Independence Payment (PIP) across MSOAs within the Norwich East neighbourhood varied significantly (ranging from 6.3%-15.9%).

Heartsease and Pilling Park recorded the highest entitlement rate at 15.9%, significantly higher 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%).

Thorpe St Andrew South and Dussindale reported the lowest entitlement rate at 6.3%, significantly lower than five of the other six MSOAs within the area and both the East of England and England average.

Population Entitled to PIP by MSOA in Norwich East (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, Norwich East has a slightly higher proportion of homes owned outright (34% vs 32.5%) and a slightly lower proportion with a mortgage (26.8% vs 28.8%). Its combined social renting rate (council and housing association) is 18.3%, which is higher than the national average of 17.1%. The private renting rate (Landlord/rent free/other) at 20.3% is slightly lower than the England average (20.6%).

Compared to the average across neighbourhoods, the Norwich East neighbourhood has a higher proportion of homes mortgaged or rented (from social housing or privately) 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
England	32.5%	28.8%	18.2%	8.8%	8.3%	2.2%	1.0%	0.1%
Norwich East	33.9%	26.8%	18.3%	8.7%	9.6%	1.9%	0.7%	<0.1%
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 Raynhams, 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%
King's Lynn and Marshland North	34.9%	27.9%	17.0%	12.5%	4.7%	2.3%	0.6%	0.1%
Lowestoft	40.0%	24.8%	18.4%	7.1%	7.3%	2.0%	0.3%	<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%

Source: Census 2021 Housing Tenure Data

Life expectancy and mortality

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

Life expectancy and mortality

Within Norwich East, there are local areas that have significantly longer life expectancy than the England average, but other areas have significantly worse mortality outcomes.

Specifically, Heartsease and Pilling Park has high rates of early and preventable mortality.

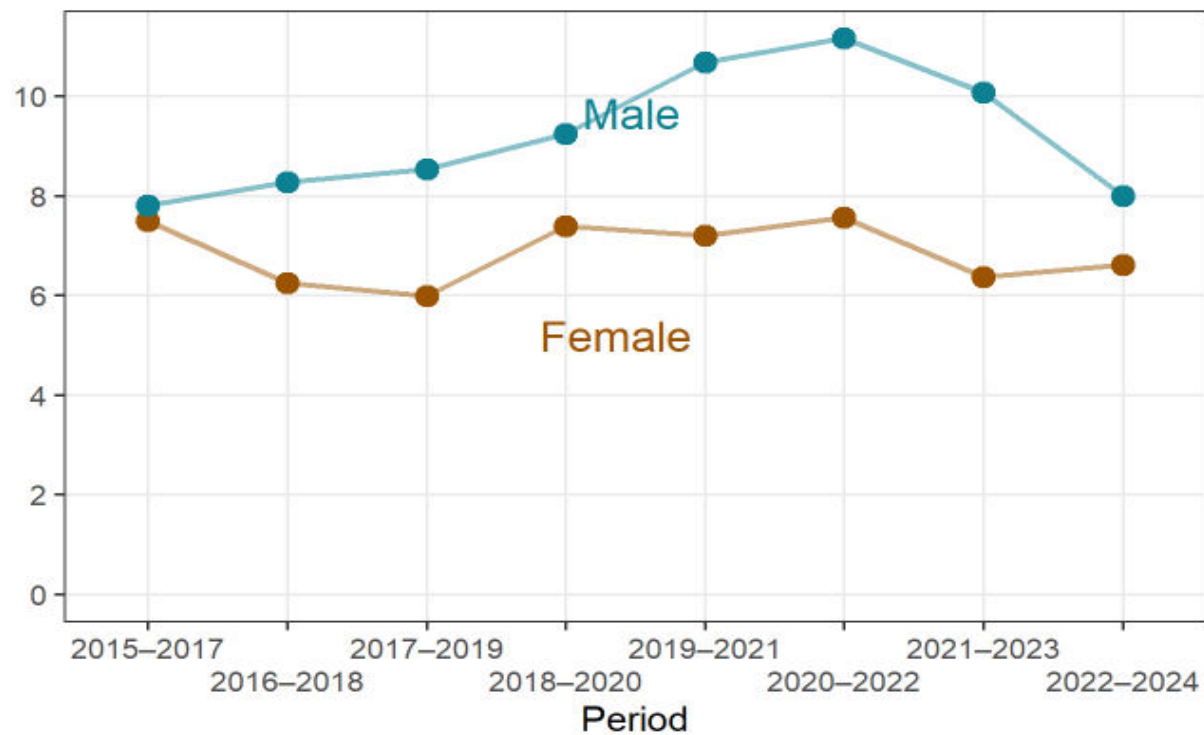
	Period	England	City Centre East	Heartsease & Pilling Park	Sprowston Central	Sprowston East	Thorpe Hamlet & Mousehold South	Thorpe St Andrew North	Thorpe St Andrew South & Dussindale
Life expectancy at birth - Female	2019 - 23	83	81.1	81.2	84.6	85.3	83.7	85.2	81.8
Life expectancy at birth - Male	2019 - 23	79.1	79.3	76.9	80.8	81.9	79.1	82.1	79.7
Mortality from all causes	2019 - 23	100	106	108	87	79.3	93.8	77.9	118
Mortality from all causes (aged under 75)	2019 - 23	100	114	133	81.7	77.7	112	79.8	81.5
Mortality from cancer	2019 - 23	100	100	120	85.7	93.6	84.8	70.5	98.6
Mortality from cancer (aged under 75)	2019 - 23	100	108	111	87.5	95.3	105	66.6	66.4
Mortality from cardiovascular disease	2019 - 23	100	109	105	93	87.3	114	107	113
Mortality from cardiovascular disease (aged under 75)	2019 - 23	100	106	121	101	55.6	125	104	62.3
Mortality from coronary heart disease	2019 - 23	100	89.8	113	61.8	89.2	128	128	84.8
Mortality from stroke	2019 - 23	100	151	119	104	82	152	74.6	158
Mortality from respiratory diseases	2019 - 23	100	53.8	114	70.1	67	107	78	86.3
Mortality from causes considered preventable (aged under 75)	2019 - 23	100	125	148	89	73.6	123	68.4	68.1

Life expectancy inequalities in Norwich Place Board area

There is a large gap in life expectancy between people living in the most and least deprived areas of Norwich Place Board (former CCG). 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 Norwich

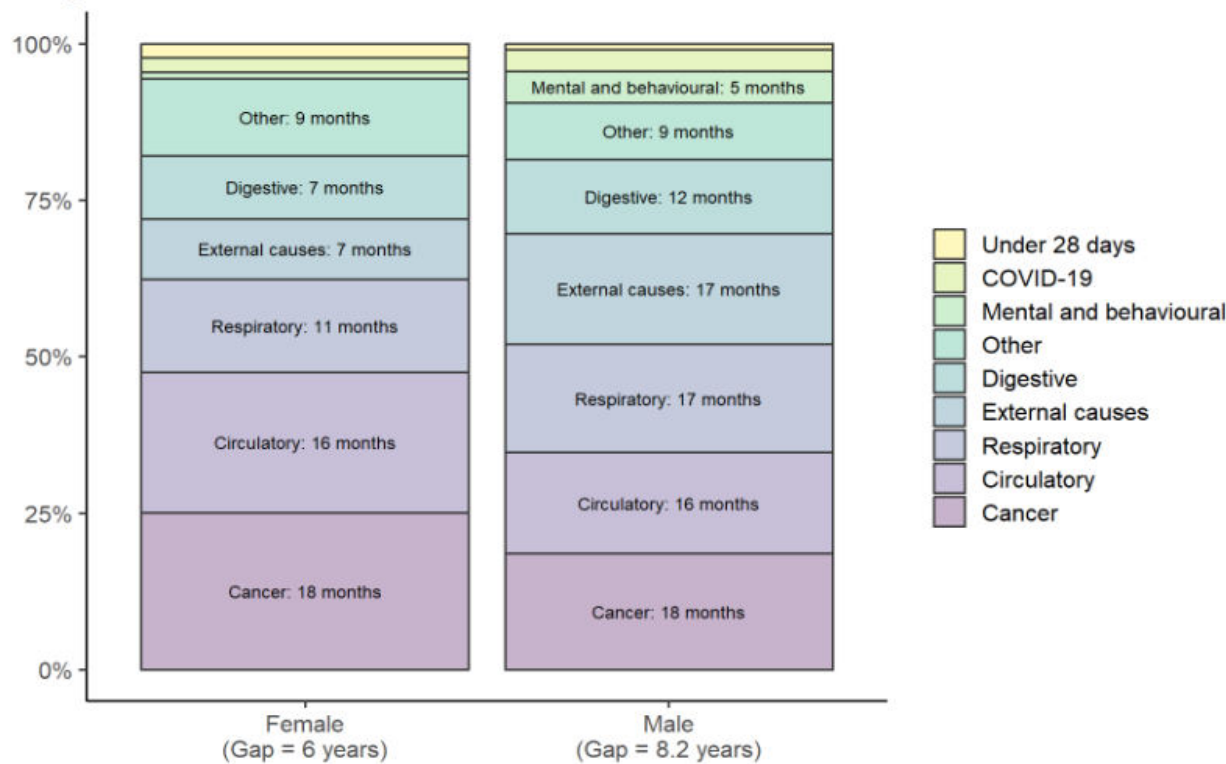
Gap in life expectancy at birth (years)



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 Norwich in 2022-2024

Percentage contribution

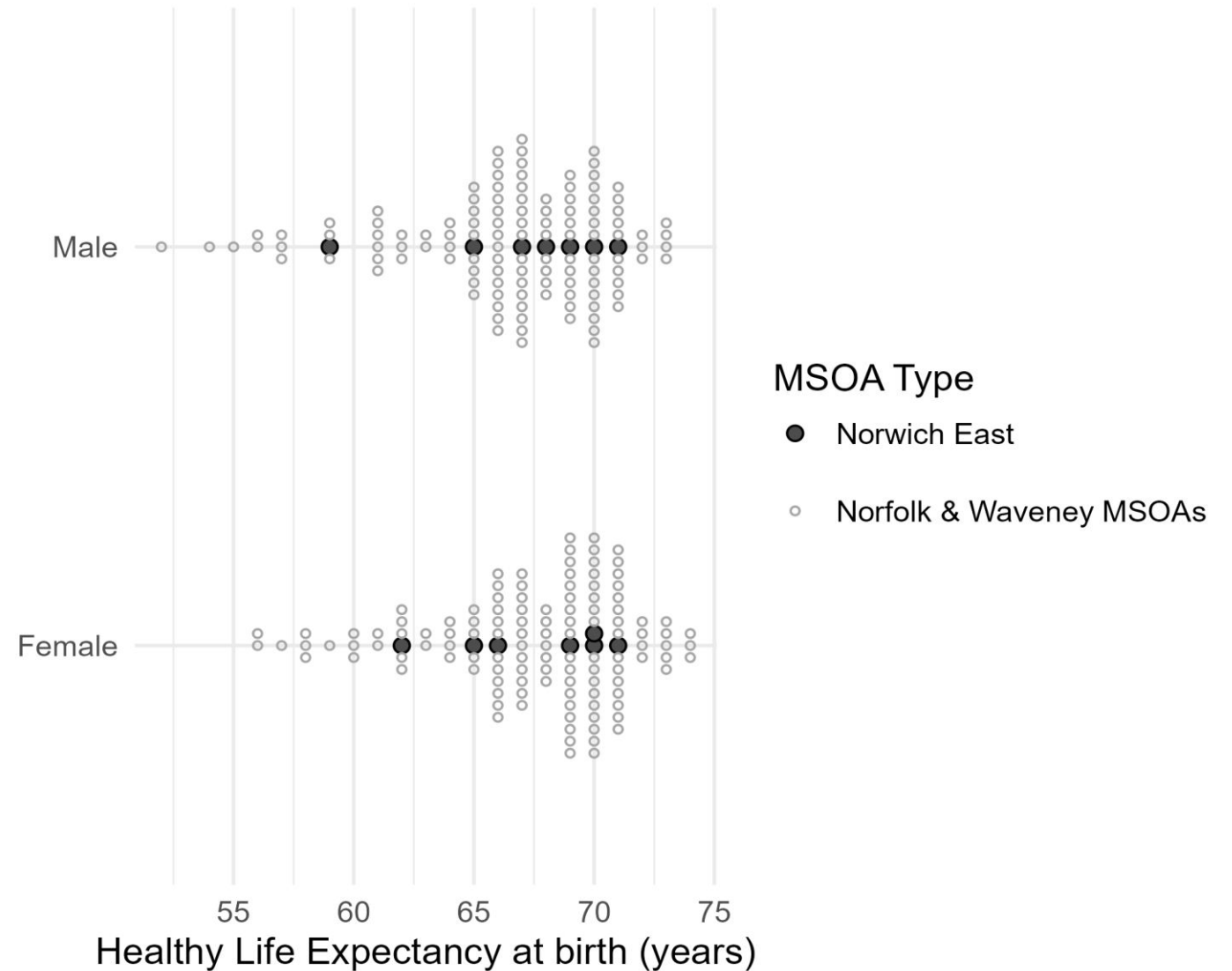


Sources: CRD (NHS Digital) and ONS mid-year estimates
NB: Small area deprivation scores based on IMD 2025

Healthy Life Expectancy

As for other indicators, there is substantial variation between local areas with regards to healthy life expectancy.

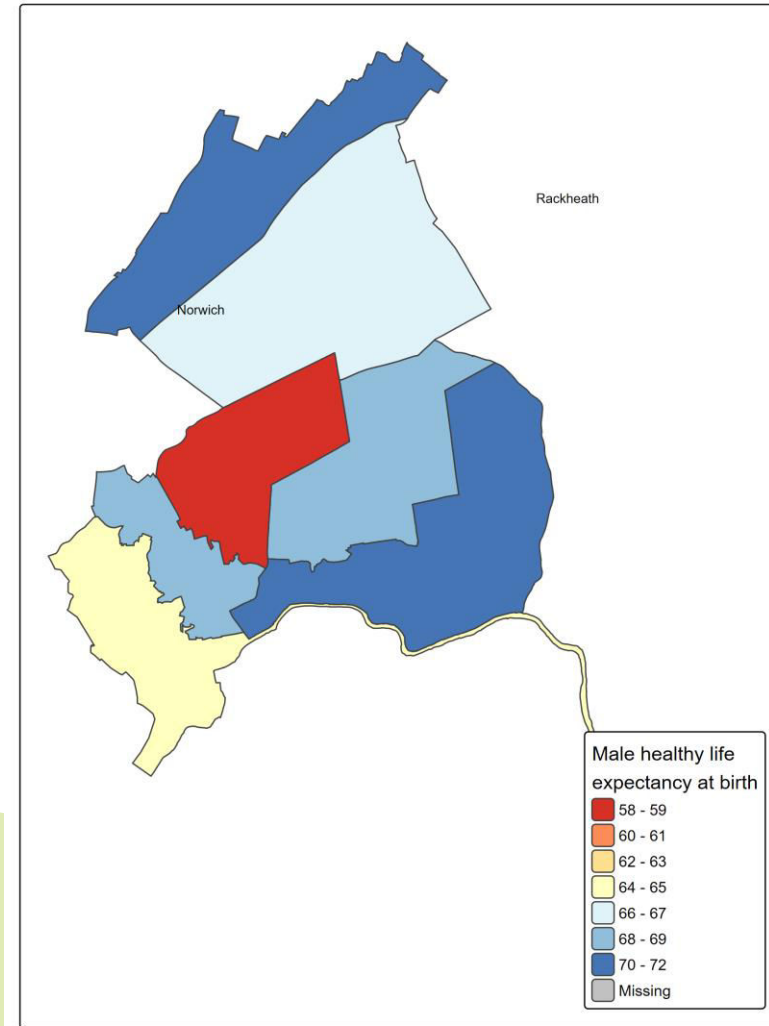
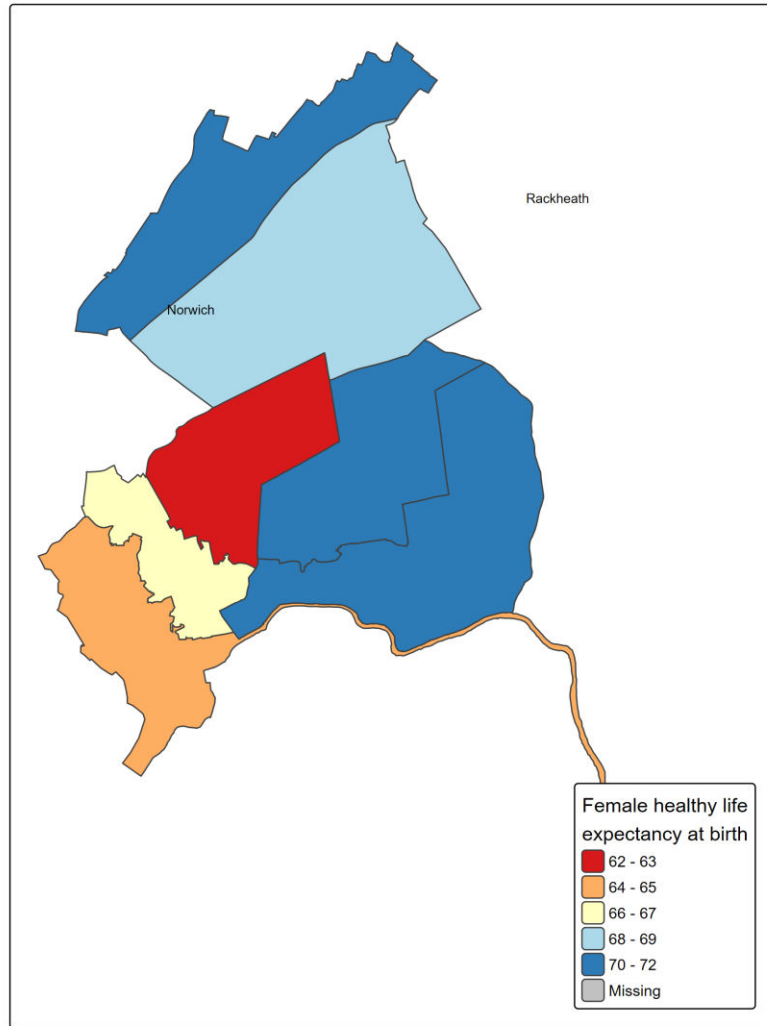
Residents of Heartsease and Pilling Park have lower healthy life expectancy than the Norfolk and Waveney average.



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

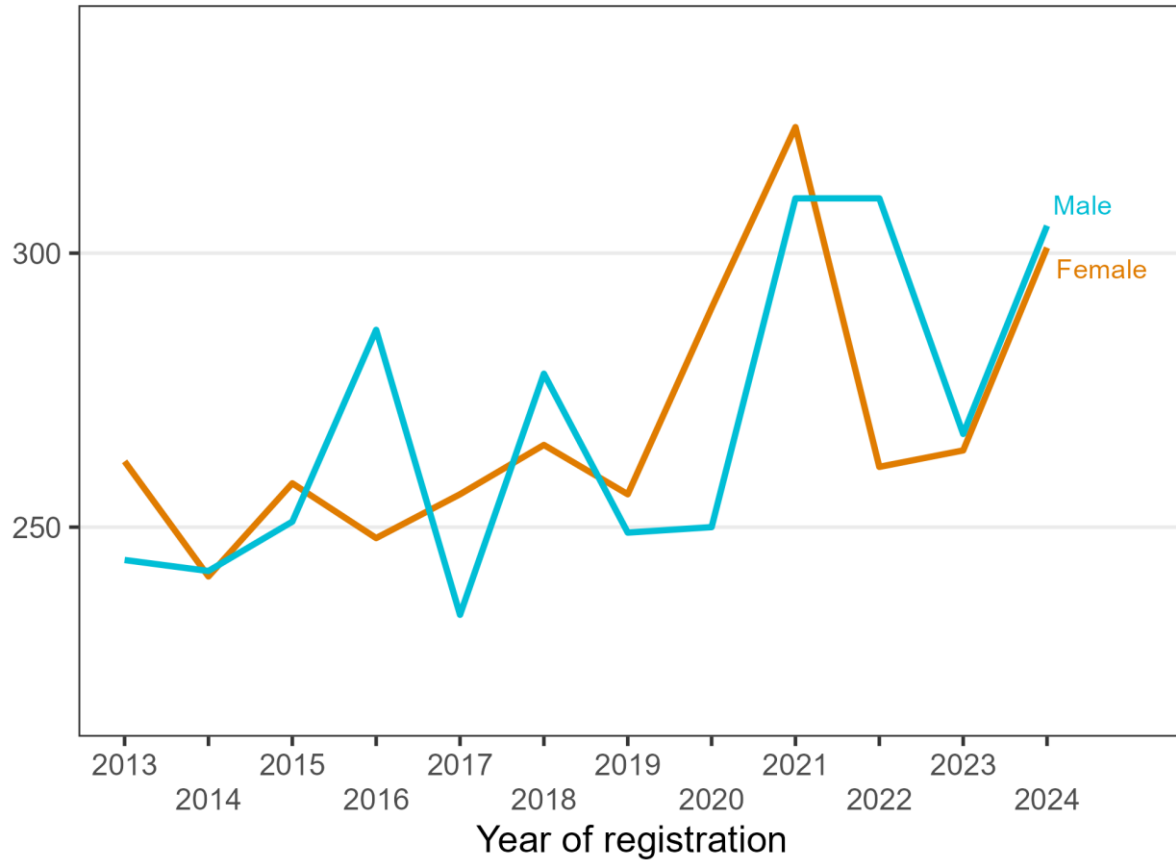
Healthy Life Expectancy in Norwich East

Within the Norwich East neighbourhood area, female healthy life expectancy was lowest in Heartsease & Pilling Park and highest in Sprowston Central in 2021. Male healthy life expectancy was lowest in Heartsease & Pilling Park and highest in Thorpe St Andrew South & Dussindale in 2021.



Deaths

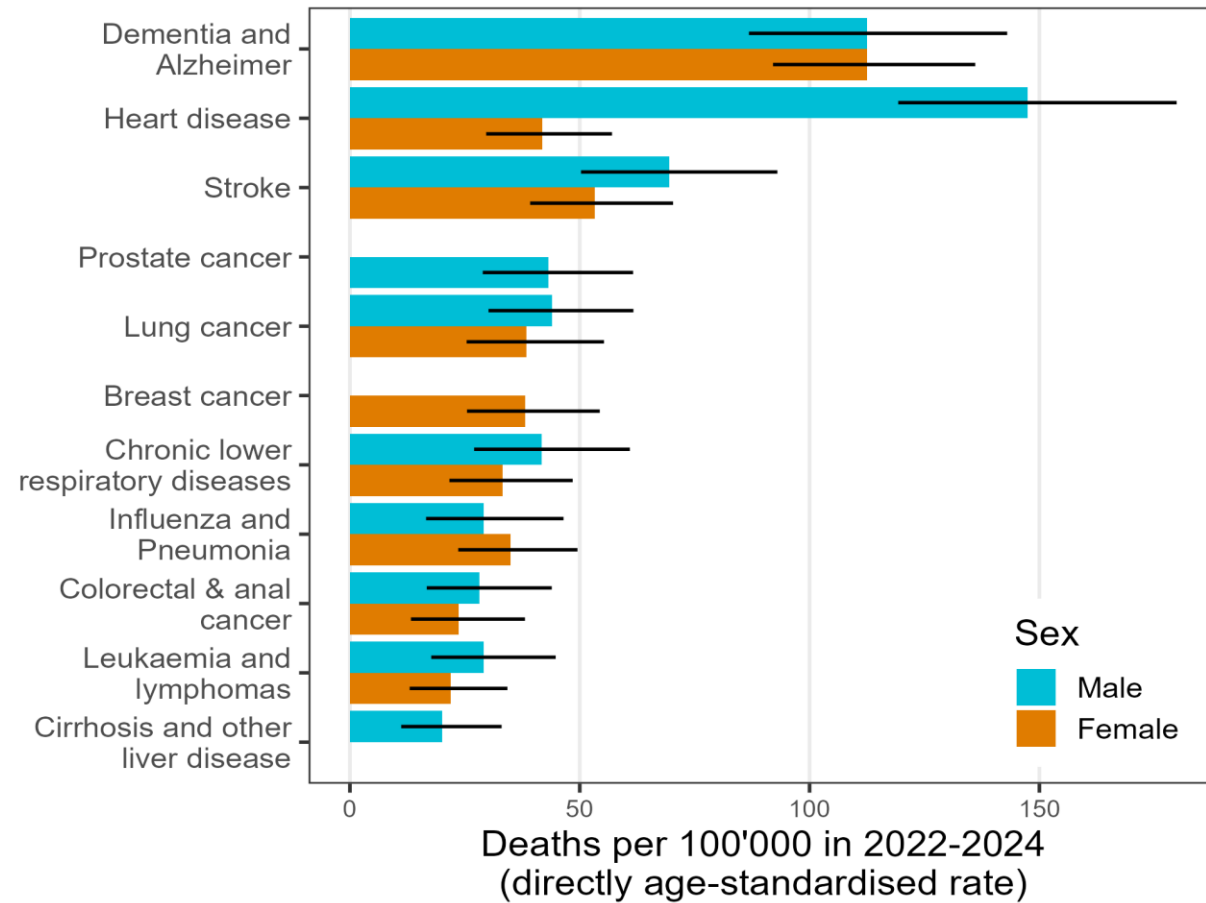
Deaths in Norwich East



Source: NOMIS

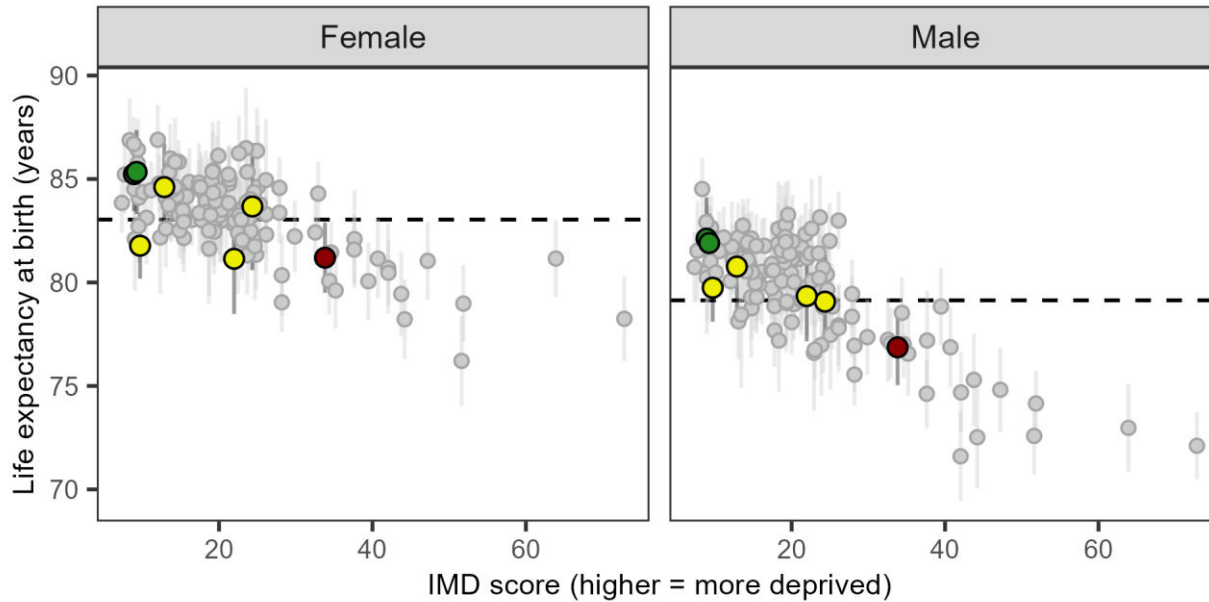
Leading causes of death in Norwich East

Leading cause of death

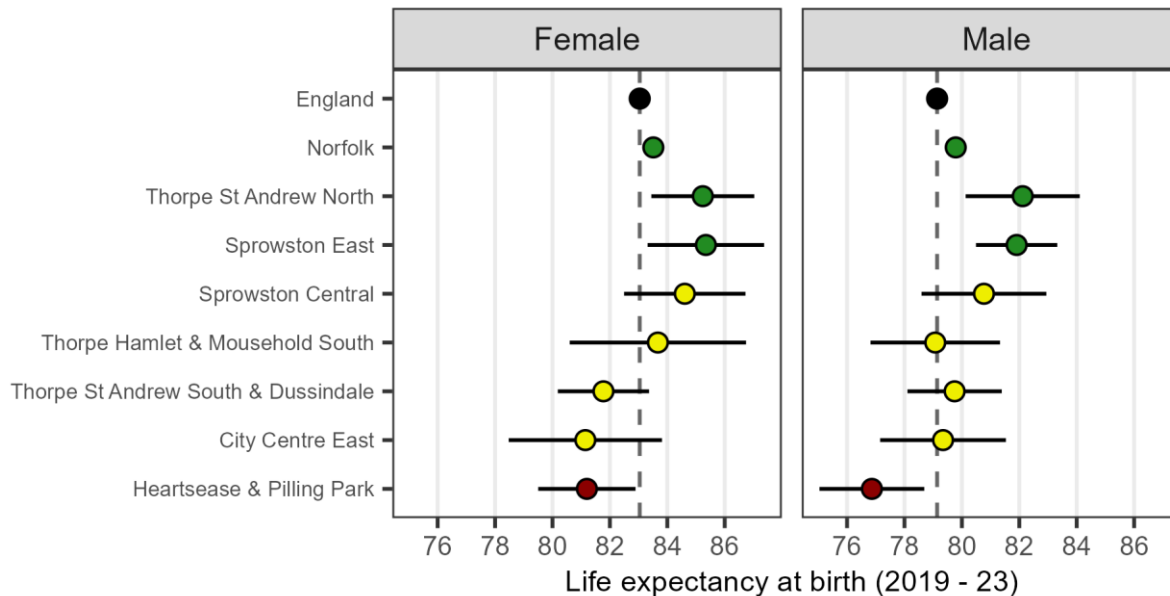


Source: CRD (NHS Digital) and ONS mid-year population estimates

Life expectancy in Norwich East



- There is considerable variation in life expectancy across small areas within Norwich East, alongside variation in multiple deprivation.
- Heartsease and Pilling Park has the lowest life expectancy, significantly lower than the Norfolk and England averages.
- Females live longer than males in all areas.



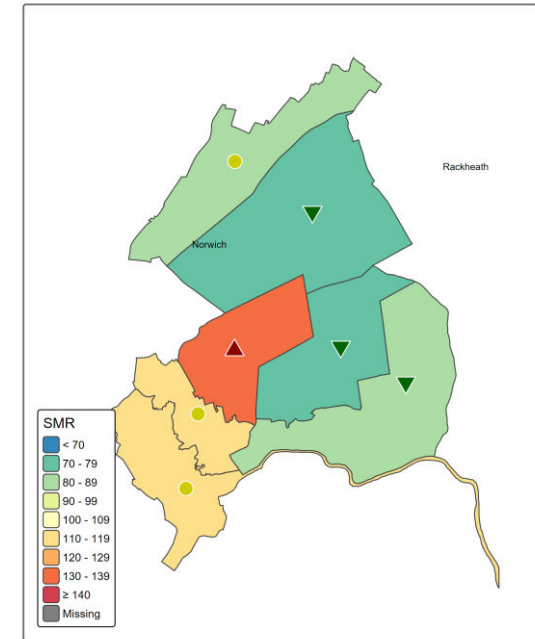
- Better
- Similar
- Worse
- Not compared

Premature mortality

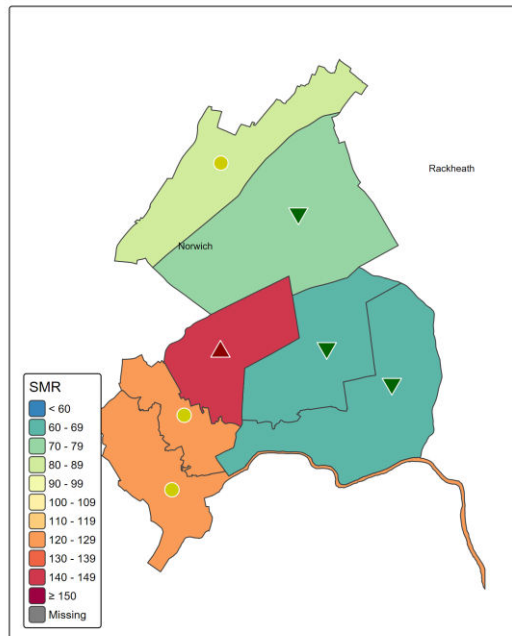
There were 766 deaths of people under the age of 75 in Norwich East in 2019 - 23. Overall, the rate of premature mortality was 4% lower than the England average but there was large variation between local areas.

Locally, the highest rate of premature mortality was in Heartsease & Pilling Park (Standardised Mortality Ratio = 133.2). The lowest rate was in Sprowston East. Three local areas (MSOAs) had a significantly better premature mortality rate than the England average (green triangles).

Mortality from all causes (aged under 75) in Norwich East
(Standardised Mortality Ratio [England = 100], 2019-2023)



Mortality from causes considered preventable (aged under 75) in Norwich East
(Standardised Mortality Ratio [England = 100], 2019-2023)



Preventable mortality

In 2019 - 23, 362 deaths of people under the age of 75 in Norwich East were from causes considered preventable. Overall, there was a 3% lower rate of preventable mortality compared to the national average but there was large variation between local areas.

Locally, the highest rate of preventable mortality was in Heartsease & Pilling Park (Standardised Mortality Ratio = 148.1). The lowest rate was in Thorpe St Andrew South & Dussindale. Three local areas (MSOAs) had a significantly better preventable mortality rate than the England average (green triangles).

Behavioural determinants of health

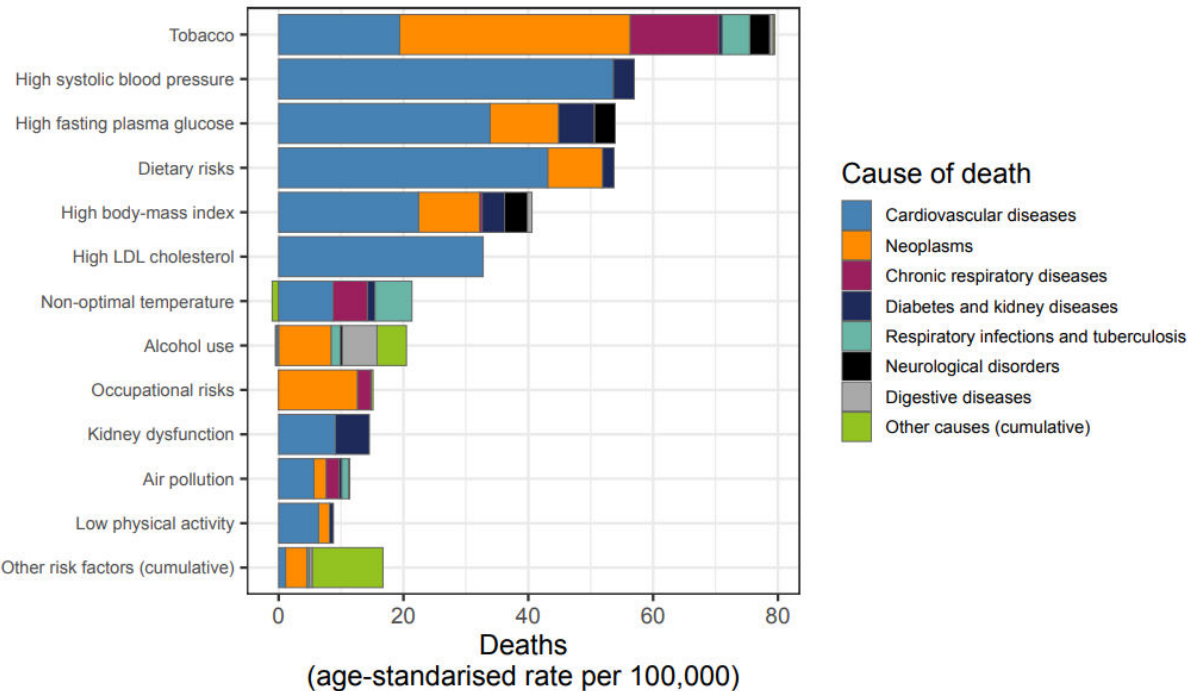
- This section examines lifestyle and behavioural risk factors such as smoking, diet, and physical activity, which contribute to preventable disease.

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.

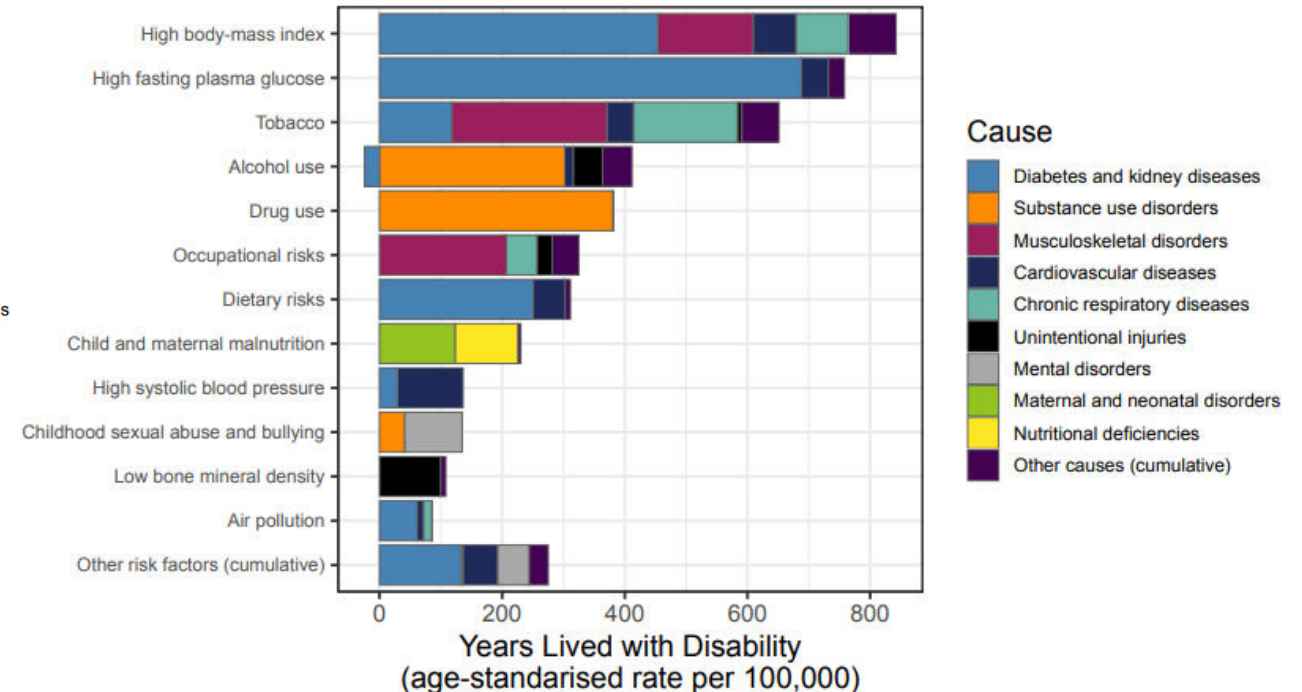
Deaths

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

Behavioural risk factors such as smoking, poor diet, physical inactivity, and alcohol consumption contribute to preventable disease and health inequalities.

Children

- Childhood weight is generally lower than or similar to the England average, though there is some variation between small areas.

Adults

- Smoking prevalence across Norwich is similar to Norfolk and England averages.
- Alcohol-specific hospital admissions are increased compared to regional and national benchmarks.
- A smaller proportion of adults are overweight or obese.
- All these factors are likely in part explained by the younger demographic in Norwich compared to other areas

Environmental and Social Factors

- A few local areas show elevated hospital admissions for children under 5.
- Behavioural risks are preventable, highlighting opportunities for targeted community and family-based interventions.

Implications

- High prevalence of behavioural risks in some local areas contributes to disease burden (injuries, chronic disease).
- Tackling smoking, diet and physical activity could significantly reduce health inequalities and improve long-term outcomes.

	Period	England	City Centre East	Heartsease & Pilling Park	Sprowston Central	Sprowston East	Thorpe Hamlet & Mousehold South	Thorpe St Andrew North	Thorpe St Andrew South & Dussindale
Reception prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	9.64	10.7	8.62	7.41	7.35	10	6.06	
Reception prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	21.9	21.4	19	22.2	19.1	23.3	21.2	17.1
Year 6 prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	22.7	23.5	25.6	21.9	20.7	22.7	11.4	15.2
Year 6 prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	36.7	35.3	37.8	31.2	36.2	31.8	25.7	28.3
General fertility rate (women aged 15 to 44)	2018 - 22	54.6	34.9	52.6	51.3	65.3	50.7	51	44.6
Low birth weight of live babies	2018 - 22	6.84	8.91	8.73	7.14	4.76	6.98	5.36	6.83
Emergency hospital admissions: all causes (aged under 5)	2016/17 - 20/21	141	173	187	132	174	188	161	142
Unintentional and deliberate injuries: emergency hospital admissions in children (aged under 5)	2016/17 - 20/21	119	154	175	70.3	78.8	149	73.6	117
Unintentional and deliberate injuries: hospital admissions in children (aged under 15)	2016/17 - 20/21	92	124	116	72.6	74.5	93.8	86.4	96.6
Unintentional and deliberate injuries: hospital admissions in young people (aged 15 to 24)	2016/17 - 20/21	128	72.1	171	73	128	213	131	87.5

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

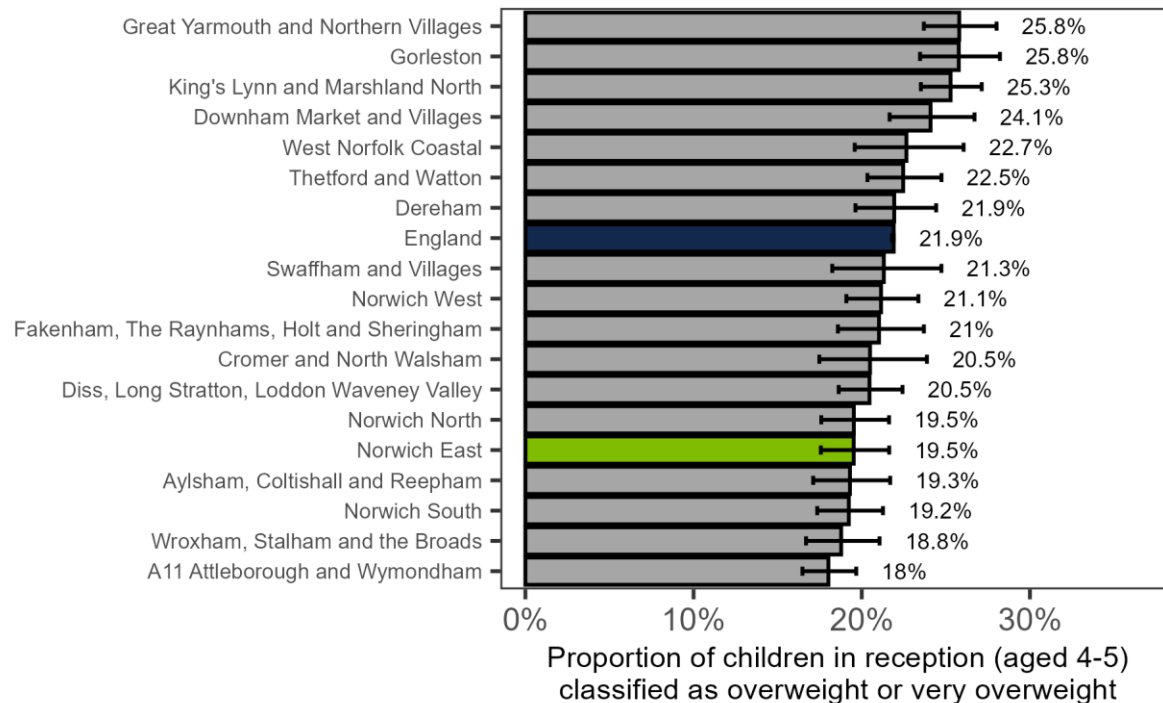
Behavioural risk factors - children

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%).

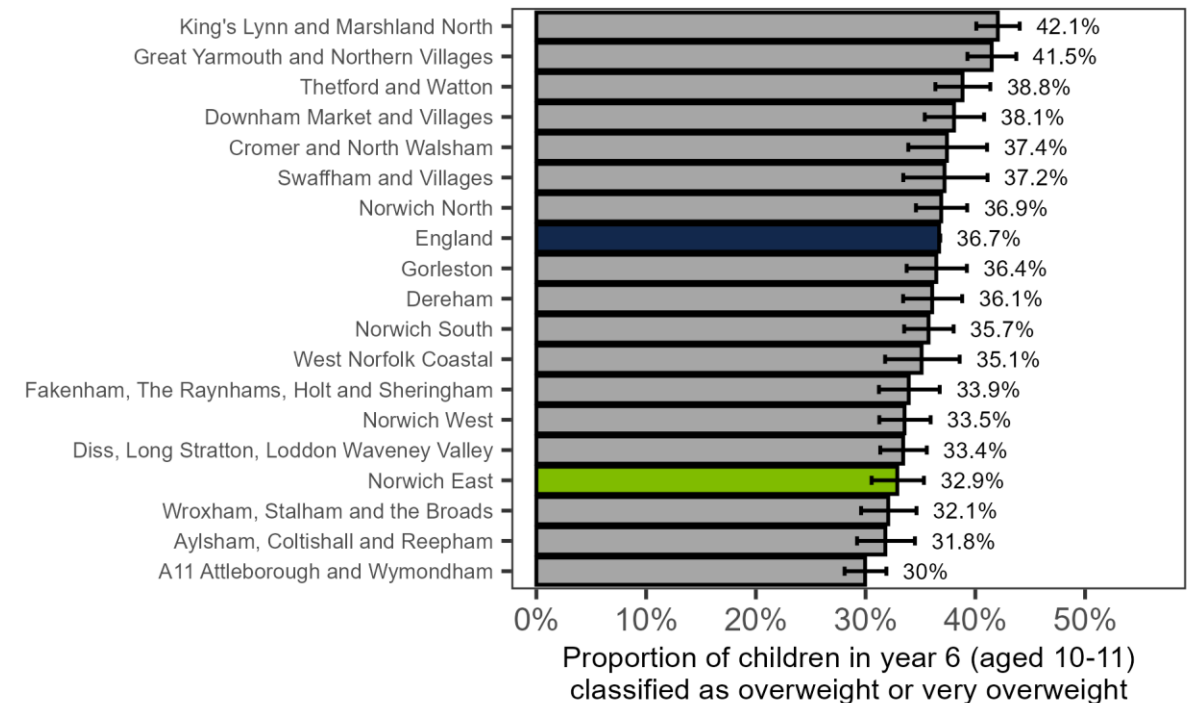
In the Norwich East neighbourhood, 19.5% of Reception children and 32.9% of Year 6 children were classified as overweight or very overweight. These figures rank among the lowest across all neighbourhoods and are significantly below the England averages, indicating that childhood excess weight in this area is notably lower 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

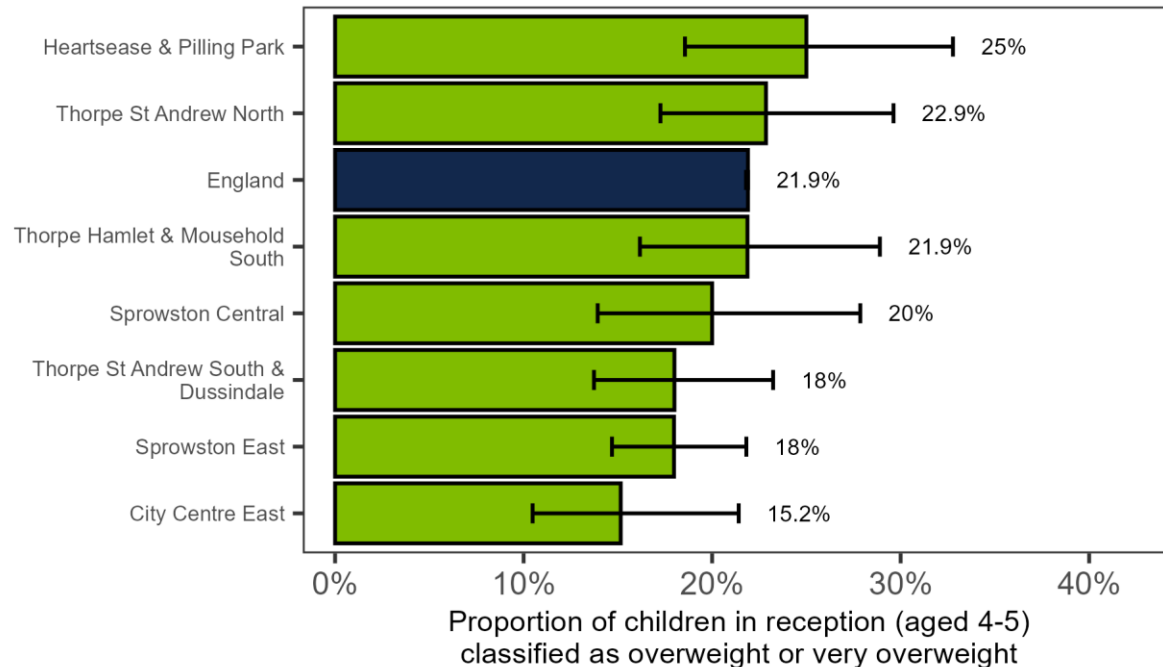
Behavioural risk factors - children

Between 2021/22 and 2023/24, levels of overweight and very overweight children in the Norwich East neighbourhood showed little variation across MSOAs.

Among Reception-age children, the highest prevalence was observed in Heartsease and Pilling Park at 25%. This was statistically similar to all other MSOAs in the neighbourhood and the national average of 21.9%.

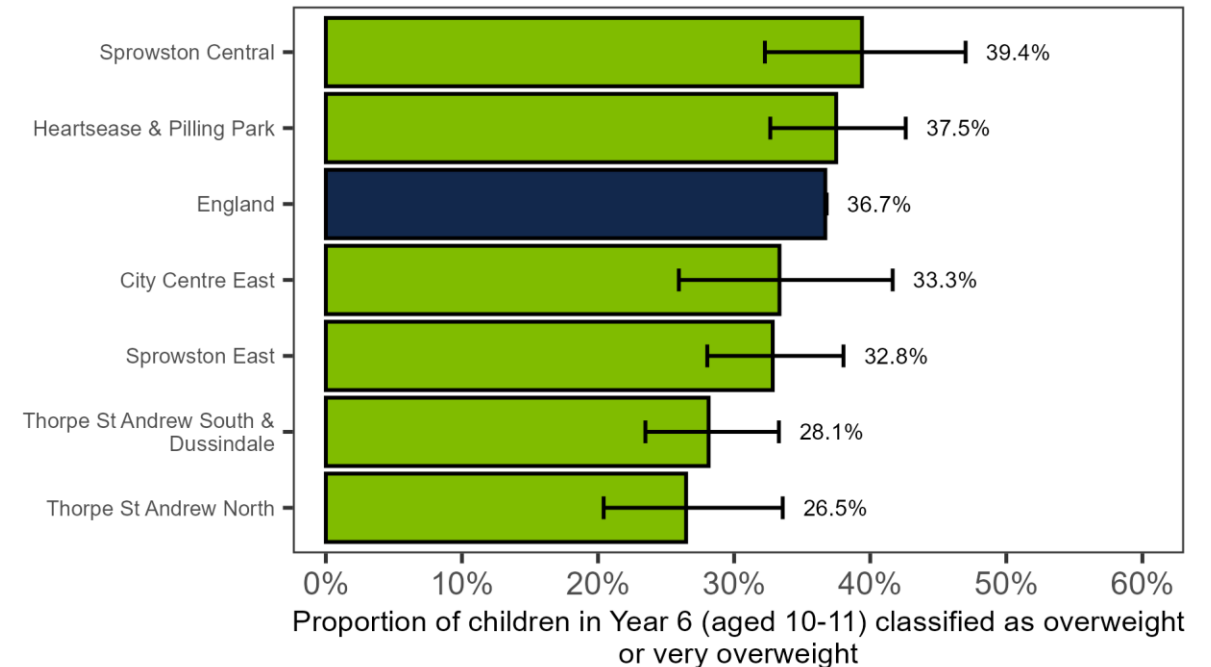
For Year 6 children, Sprowston Central reported the highest prevalence at 39.4%. This figure was again comparable to other MSOAs and the national average of 36.7%.

Reception: Prevalence of Overweight or Very Overweight Children Across MSOAs in Norwich East 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 Norwich East Compared to National Average (3-Year Combined)



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

Behavioural risk factors - adults

In Norwich, alcohol-specific hospital admissions and smoking prevalence are higher than the Norfolk and England averages, suggesting a greater local burden of smoking and alcohol related health risks. Whereas the proportion of adults estimated to be obese is below the Norfolk and England averages, suggesting that weight-related health challenges are less pronounced in this area compared with wider regional and national patterns.

Norfolk Health and Wellbeing Profiles Adult Lifestyle

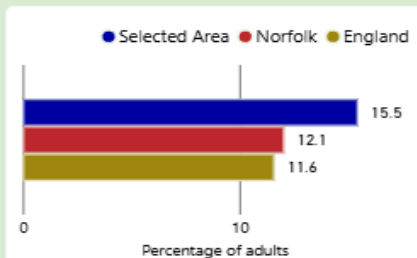
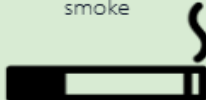
There are approximately 91,330 adults aged 20-64 living in this area, who make up 63% of the population (the Norfolk average is 55% of the population).

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.

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.

15%
of adults currently
smoke



There are approximately 18,170 people who are smokers in this area.



Select your district or Norfolk:

Select your electoral division or district or Norfolk:

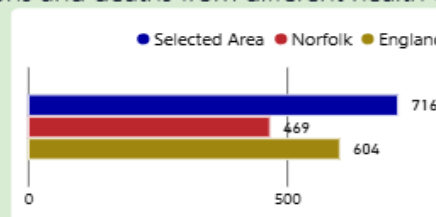


Alcohol

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

716

hospital admissions for alcohol specific conditions per 100,000 people



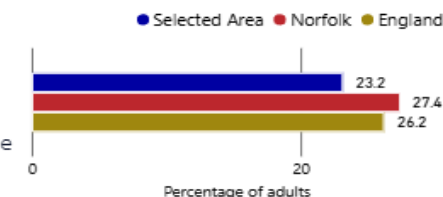
In the most recent 3-year period there were approximately 2,675 hospital admissions for alcohol specific conditions in this area.

Healthy Weight

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



23%
of adults are
predicted to be obese



In this area there are approximately 27,460 adults who are predicted to be obese and approximately 24,380 adults who are physically inactive.

Disease and poor health

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

Disease and poor health

Overall rates of emergency hospital admissions are similar to or lower than the England average.

But there are local areas with a high burden of alcohol- or mental health-related issues and some with a high rate of CVD-related admissions.

	Period	England	City Centre East	Heartsease & Pilling Park	Sprowston Central	Sprowston East	Thorpe Hamlet & Mousehold South	Thorpe St Andrew North	Thorpe St Andrew South & Dussindale
Emergency hospital admissions: all causes	2016/17 - 20/21	100	83.5	101	73.6	71.7	90.7	71.8	74
Coronary heart disease: emergency hospital admissions	2016/17 - 20/21	100	71.4	95.7	74.3	77.1	78	81.4	58.8
Stroke: emergency hospital admissions	2016/17 - 20/21	100	141	113	78.5	99.1	105	127	100
Heart attack (myocardial infarction): emergency hospital admissions	2016/17 - 20/21	100	92.7	135	85	106	94	110	71.9
Chronic obstructive pulmonary disease (COPD): emergency hospital admissions	2016/17 - 20/21	100	35.4	106	36.6	46.7	83	53.2	53.4
Intentional self-harm: emergency hospital admissions	2016/17 - 20/21	100	92.6	156	40.5	77.4	158	91.8	66.1
Hip fracture: emergency hospital admissions (aged 65 and over)	2016/17 - 20/21	100	99.6	101	97.7	94.9	93.8	102	106
Alcohol-related conditions: admission episodes (all primary and secondary diagnoses)	2016/17 - 20/21	100	120	109	81.5	70.3	120	78.1	71.6
Hospital admissions for alcohol attributable conditions, narrow definition	2016/17 - 20/21	100	126	123	105	81.3	141	92.7	68.6

Long-term conditions

This spine chart shows how Norwich East 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 Norwich East 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).

Norwich East PCN

Condition	Time period	PCN count	PCN prevalence %	ICB gp median%	PCN Worst	PCN Best
Osteoporosis, 50+	2024/25	721	2.3	0.6	2.9	0.2
Depression, 18+	2024/25	10,903	15.3	14.3	19.2	11.1
Learning disability	2024/25	682	0.8	0.7	1.2	0.5
Epilepsy, 18+	2024/25	654	0.9	0.9	1.1	0.7
Dementia	2024/25	824	0.9	1.1	1.6	0.6
Heart failure	2024/25	883	1.0	1.1	1.9	0.6
Chronic kidney disease	2024/25	3,360	4.7	5.7	8.2	2.8
Asthma, 6+	2024/25	6,146	7.4	8.3	9.8	6.6
COPD	2024/25	1,528	1.7	2.4	3.6	1.3
Stroke	2024/25	1,608	1.8	2.6	4.0	0.6
Rheumatoid Arthritis, 16+	2024/25	628	0.9	1.1	1.4	0.6
Atrial fibrillation	2024/25	1,963	2.2	3.2	4.6	1.7
Diabetes Mellitus, 17+	2024/25	5,422	7.5	9.3	11.0	5.2
Coronary heart disease	2024/25	2,536	2.9	3.9	5.4	2.0
Hypertension	2024/25	12,853	14.6	19.3	23.8	10.6
Cancer	2024/25	3,053	3.5	5.1	6.5	3.0
Obesity, 18+	2024/25	8,619	12.1	15.5	18.9	9.1

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

Norwich East PCN



Diabetes Mellitus
prevalence, 17+
5,400



Chronic kidney
disease
prevalence, all age
3,400



Coronary heart
disease, all age
2,500



Stroke and
transient ischaemic
attack, all age
1,600

0 1,000 2,000 3,000 4,000 5,000 6,000

This chart shows the estimated number of patients with major long-term conditions within the Norwich East PCN.

Diabetes affects around 5,400 adults, and chronic kidney disease affects 3,400 people.

Stroke and transient ischaemic attack affect approximately 1,600 people.

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



Norfolk
County Council

Infographics: healthicons.org

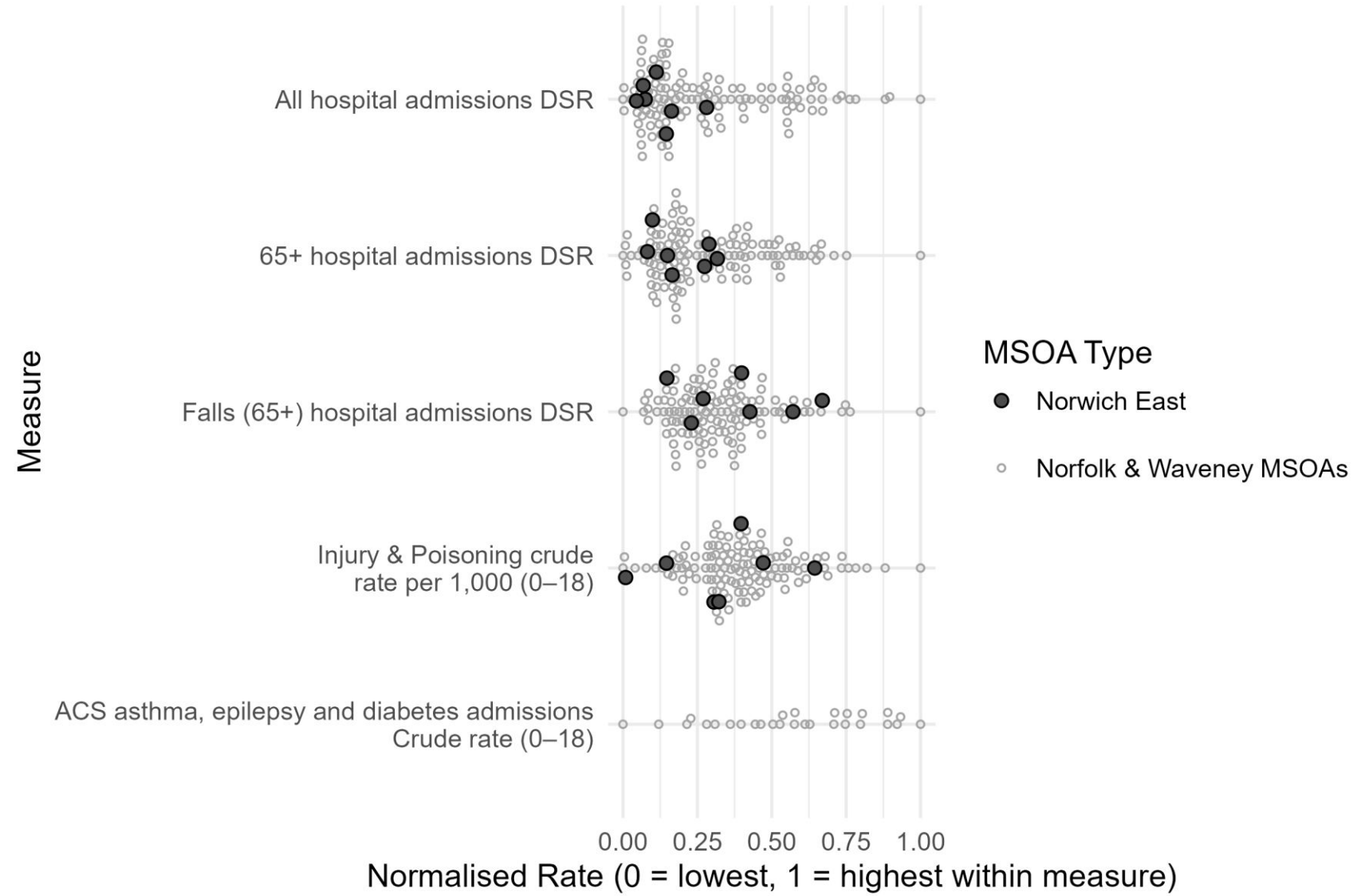
Healthcare - unplanned hospital admissions

As for other indicators, there is a large spread of Norwich East MSOAs across the scale for most hospital admission measures.

City Centre East had the highest rate of hospital admissions for injury and poisoning out of all MSOAs in Norfolk and Waveney.

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

Neighbourhood MSOA emergency hospital admission rate comparison



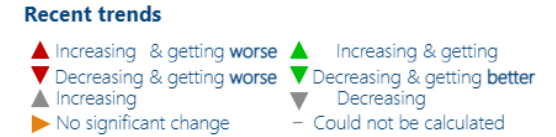
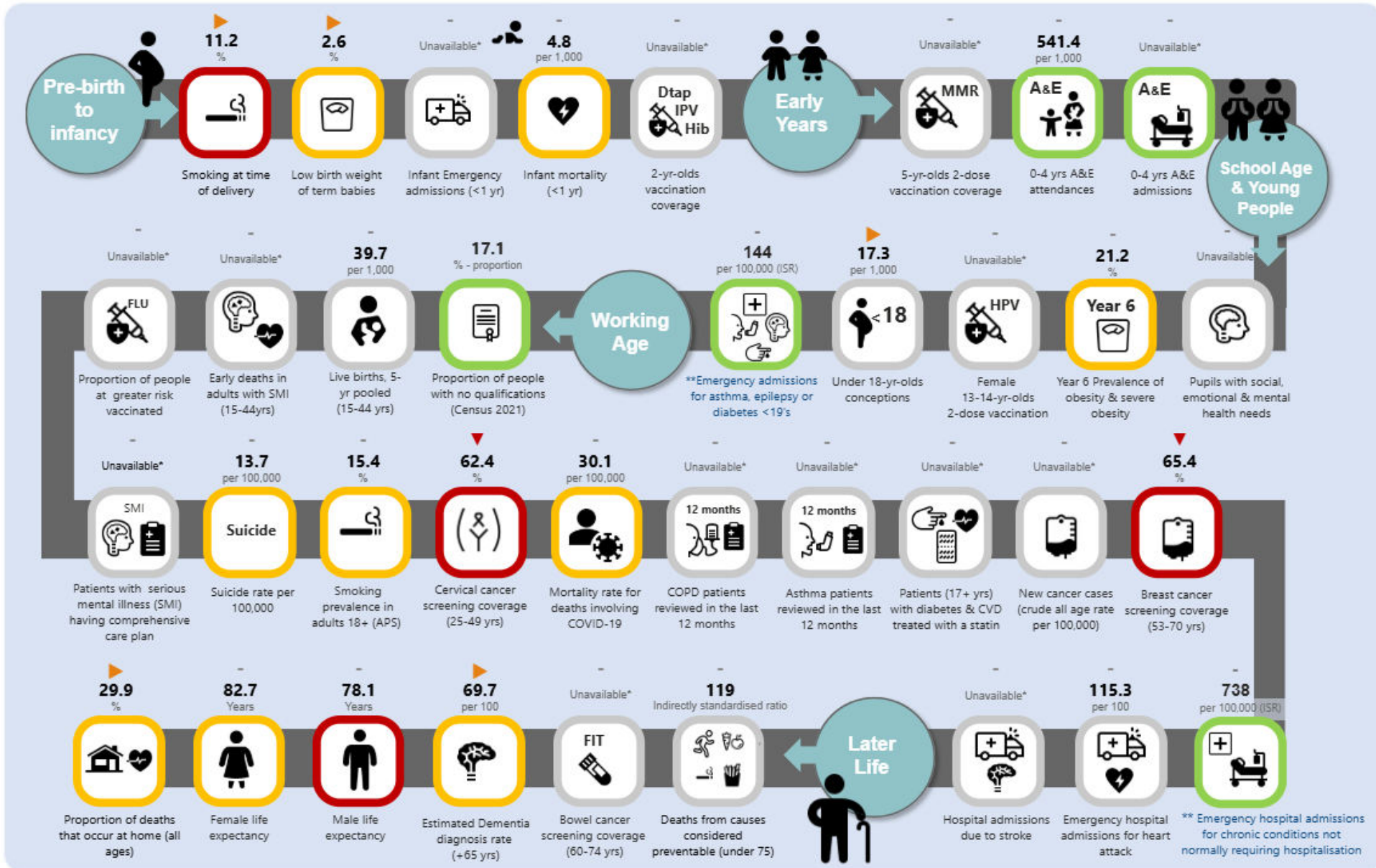
Healthcare - unplanned hospital admissions

Measure	Heartsease & Pilling Park	Thorpe Hamlet & Mousehold South	City Centre East	Thorpe St Andrew South & Dussindale	Thorpe St Andrew North	Sprowston Central	Sprowston East
All hospital admissions DSR	4,802	4,059	3,947	3,736	3,500	3,458	3,316
65+ hospital admissions DSR	9,626	8,420	9,791	10,102	8,247	7,689	7,502
Falls (65+) hospital admissions DSR	1,805	2,422	2,198	1,869	1,512	1,421	1,234
Injury & Poisoning crude rate per 1,000 (0–18)	13.4	12.3	16.1	10.9	11.1	6.3	8.4
ACS asthma, epilepsy and diabetes admissions Crude rate (0–18)							

Local strategy measures summary

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

Healthcare life-course measures – Norwich



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.

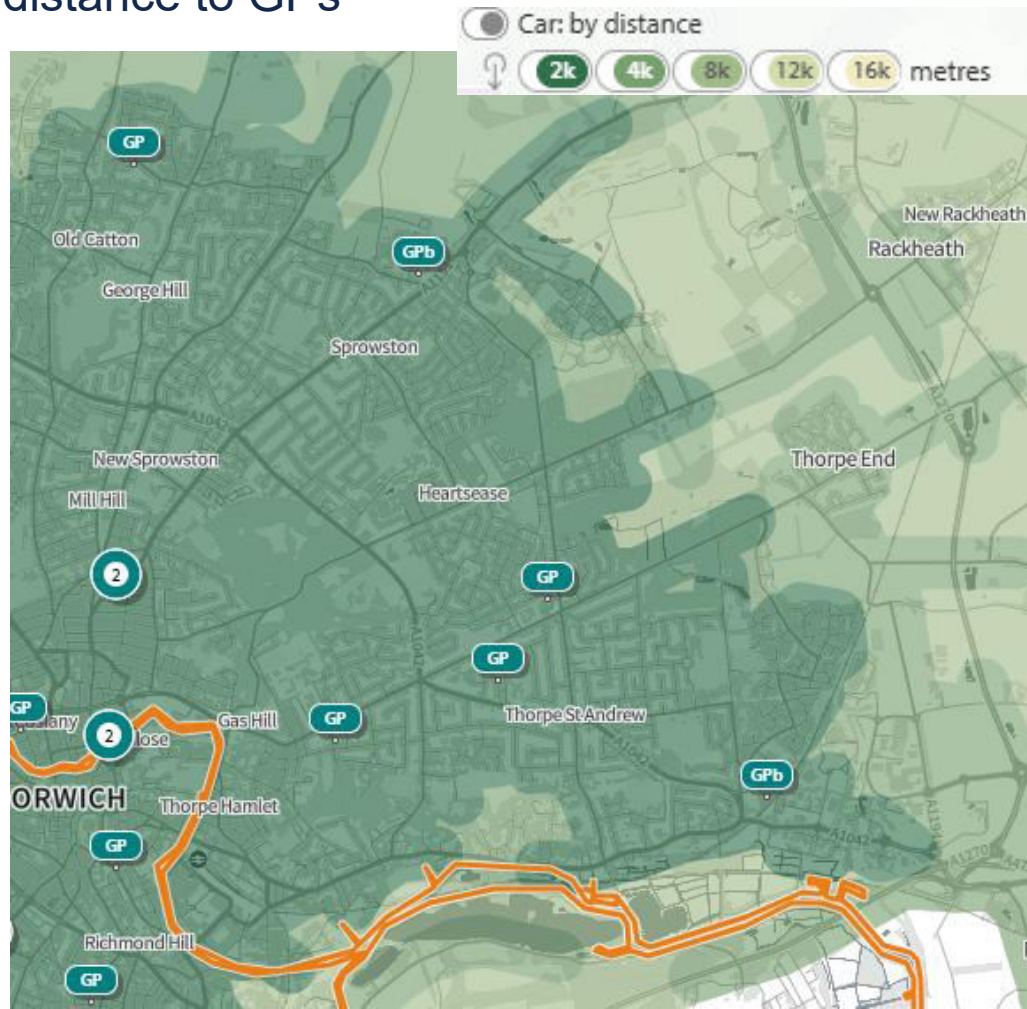
**There is an exception for NHS Outcome metrics marked with asterisks which compare to a 2012 England baseline.

Services and access

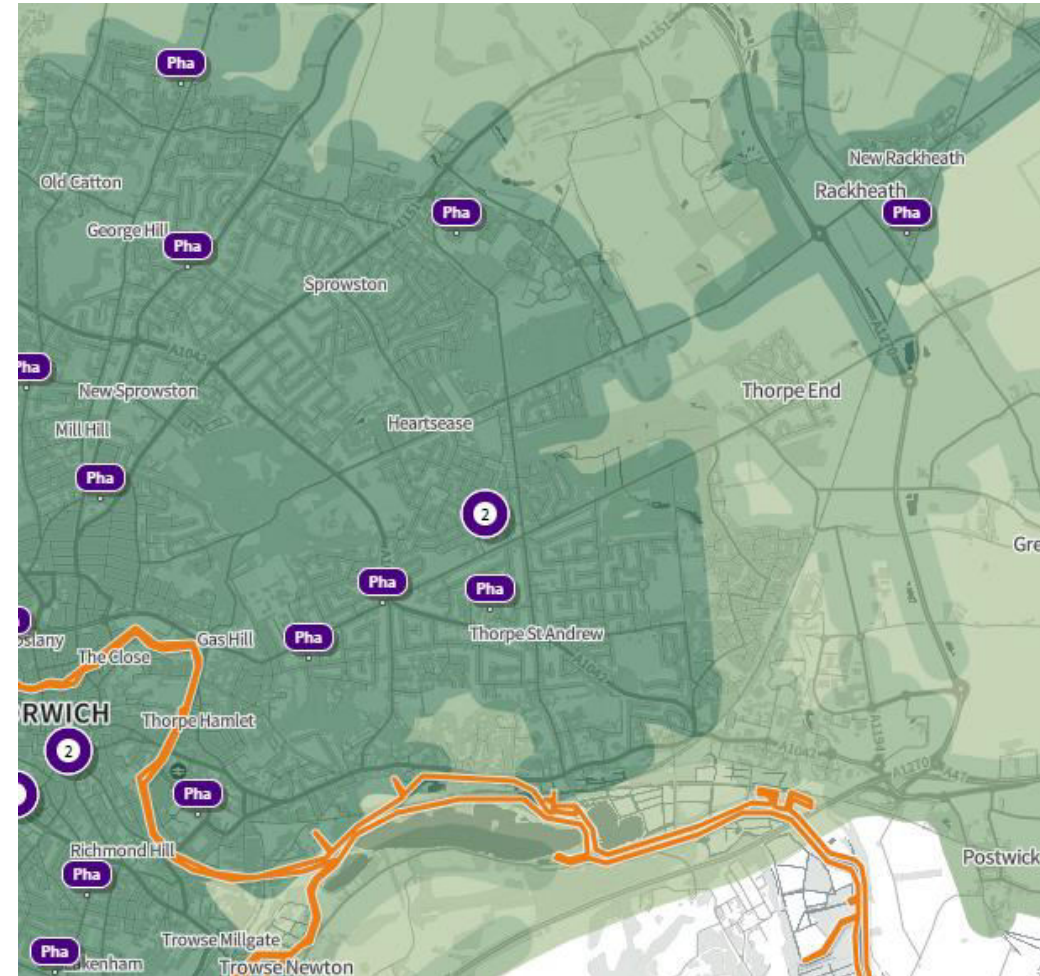
- This section looks at access to health and community services, which is critical for addressing inequalities.

Access to primary care and pharmacies

Travel distance to GPs

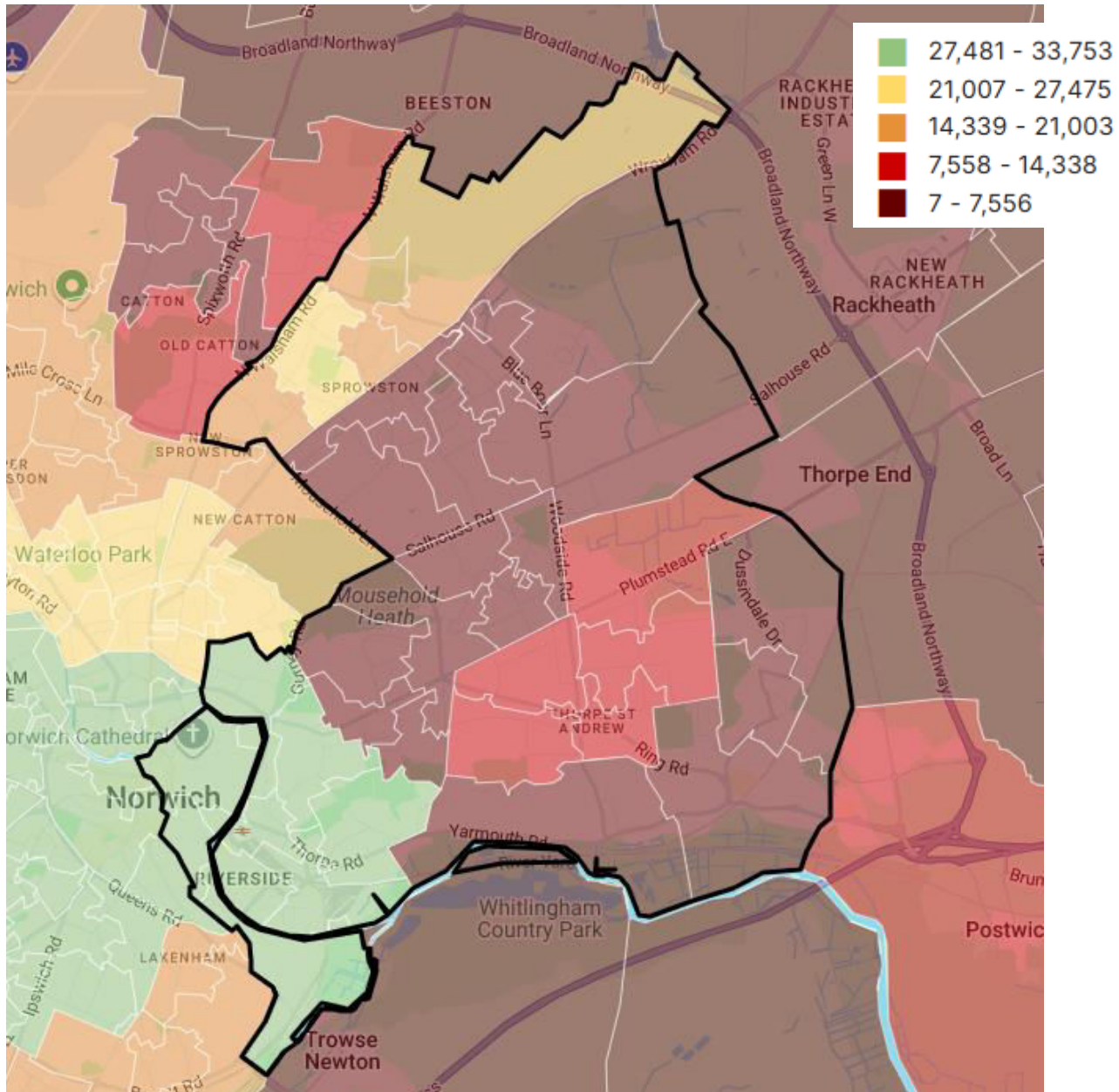


Travel distance to pharmacies



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

Civic Assets



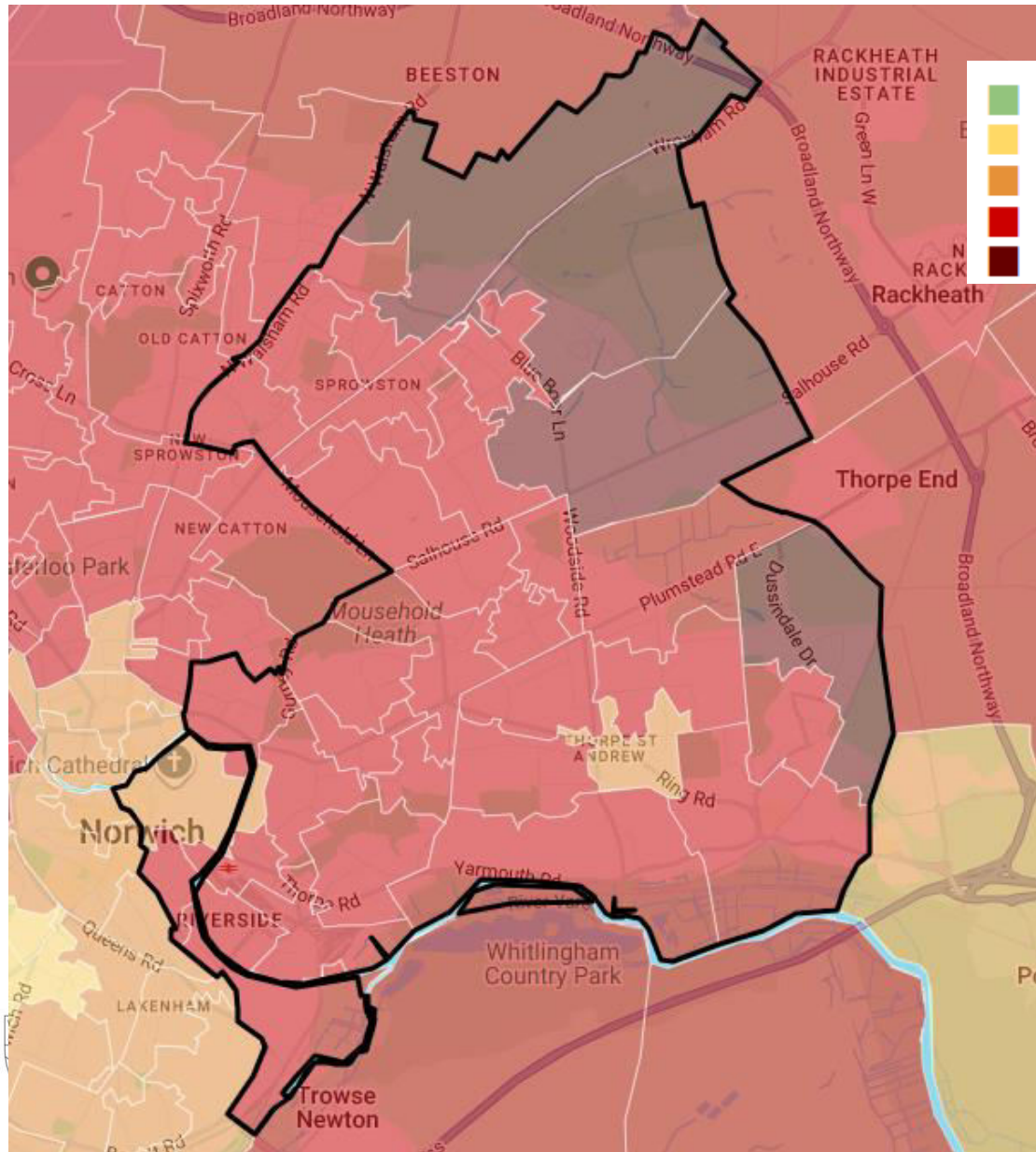
This map shows the Community Needs Index and civic assets ranking, which reflect the availability of community infrastructure and its role in wellbeing.

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

Norwich East – Key Headlines

Population & Deprivation:

- Large variation in deprivation, ranging from the most to the least deprived national deciles.
- Overall average levels of child poverty and Free School Meal eligibility, but there is stark local socioeconomic variation.

Health Outcomes:

- Life expectancy overall similar to the England average; but strong inequalities across Norwich (8-year gap for men, 6-year gap for women).
- Premature and preventable mortality similar to national average; but areas with worst outcomes have rates up to 30-50% worse than national averages.

Behavioural Risks:

- Smoking slightly higher, alcohol-related admissions much higher, and obesity rates lower than Norfolk and England averages. Likely partly explained by demographic differences.
- Childhood overweight among the lowest within Norfolk and Waveney.

Disease Burden:

- Prevalence of some long-term conditions higher than Norfolk and Waveney averages (osteoporosis, mental health, learning difficulties), other conditions with lower than national prevalence (e.g. cancer, COPD).

Wider Determinants:

- Average economic activity 61.1% (England 60.9%). Large variation locally.
- Average Universal Credit (16.8%) and PIP entitlement (9.2%). Large variation locally.
- Generally good access to healthcare. But poor accessibility of childcare.



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.