

Wroxham, Stalham and the Broads

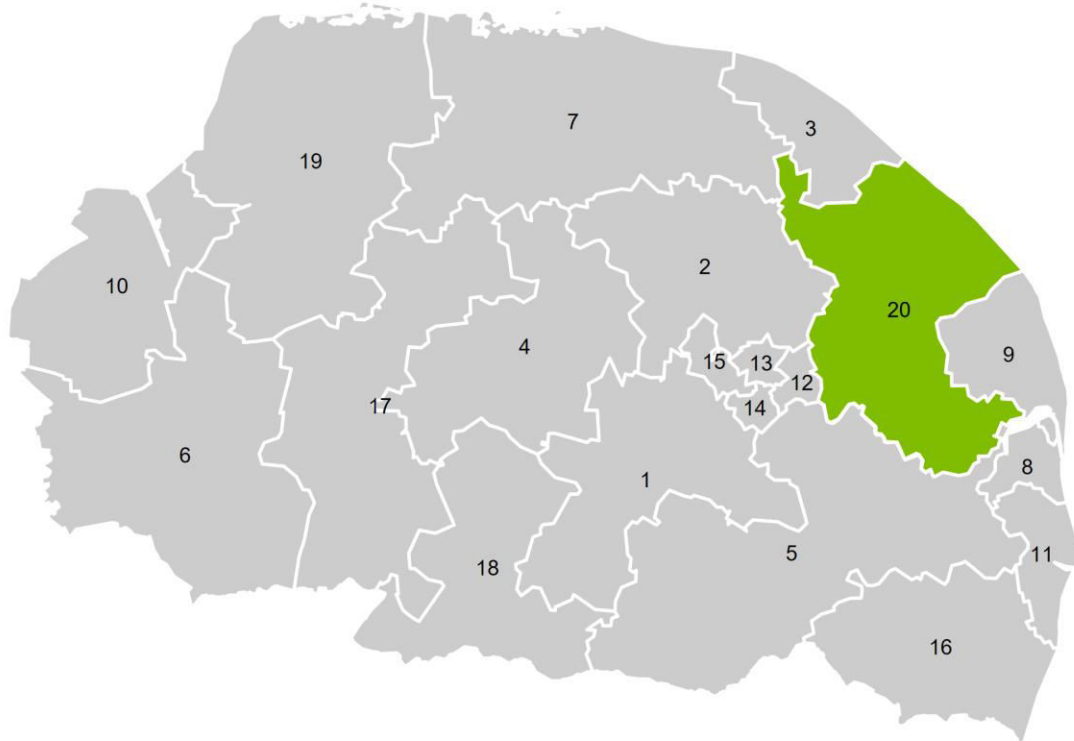
I&A Public Health Intelligence

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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:

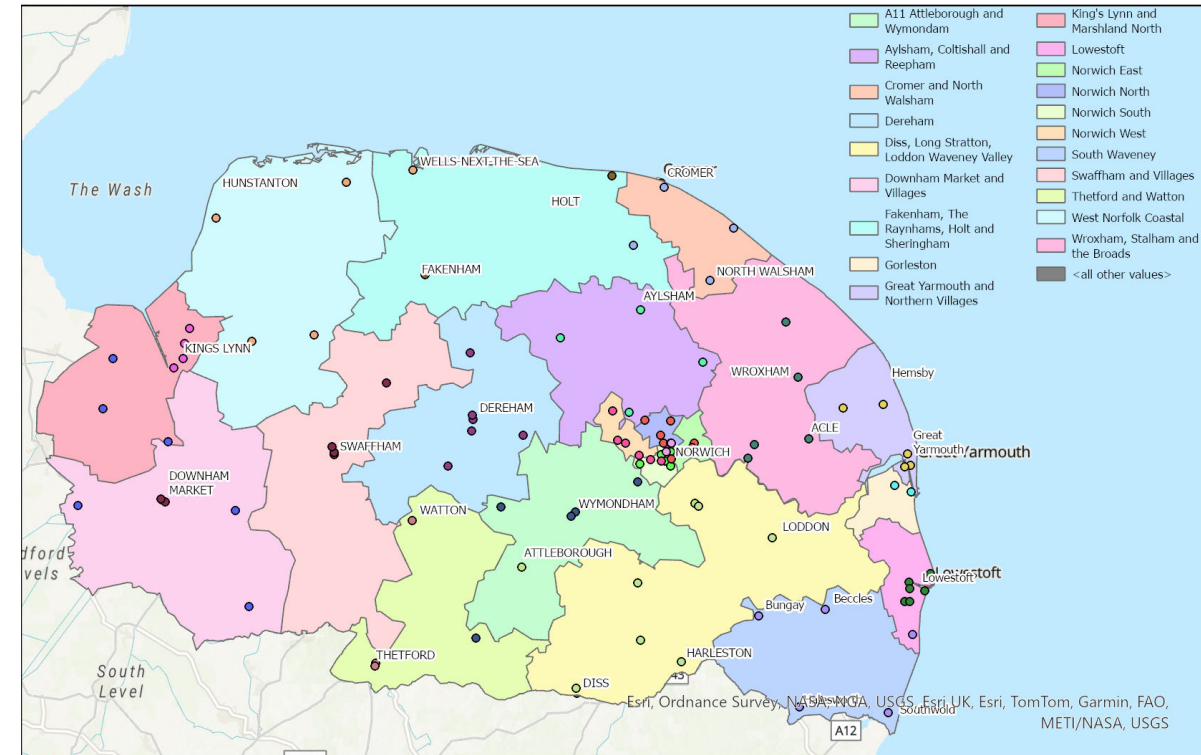
- Summaries of health, wellbeing, and wider determinants in each neighbourhood
- Draw on local data, insights, and community context
- Highlight key challenges and opportunities for improving population health

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

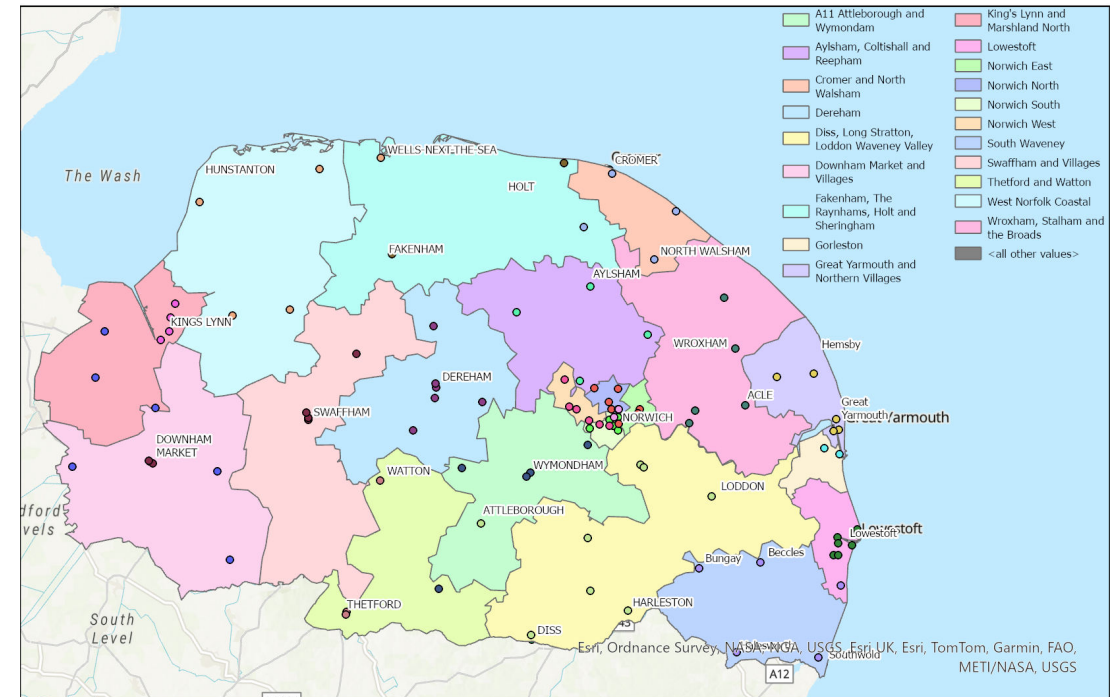


How do we define neighbourhoods?

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 Wroxham, Stalham and the Broads, highlighting population structure and socioeconomic challenges.

Population and deprivation summary

Wroxham, Stalham and the Broads neighbourhood profile has a predominantly rural population with small market towns and villages. The area's population is older than the Norfolk & Waveney average, with fewer children and young adults.

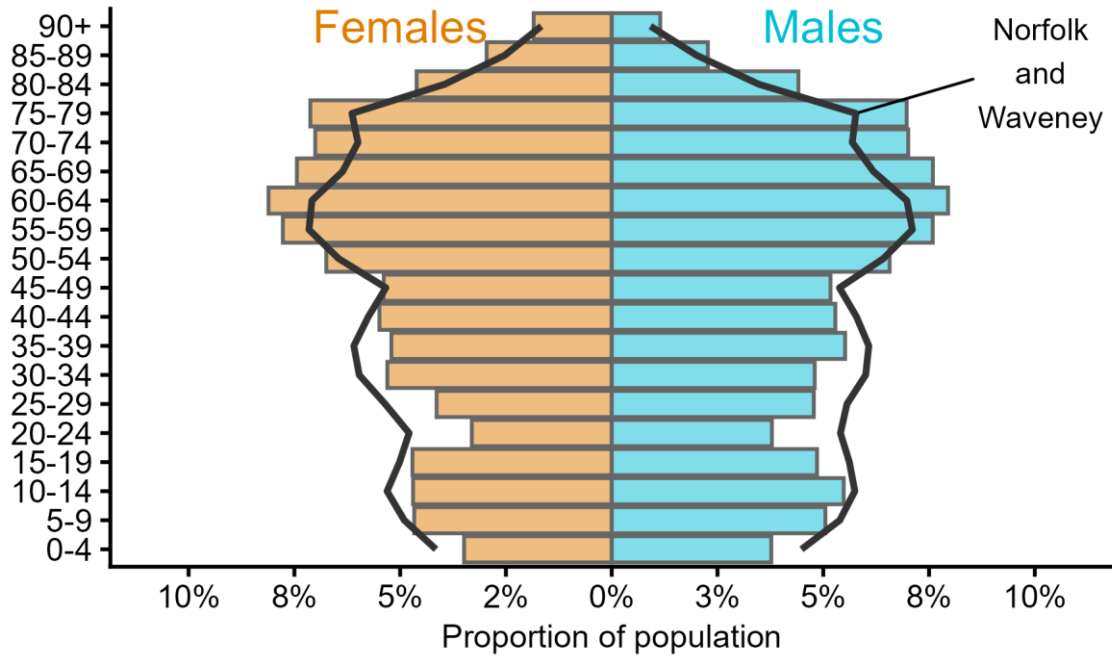
Socioeconomic deprivation is relatively low overall, but pockets of disadvantage exist, particularly in coastal and isolated communities.

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

	Period	England	Acle & Reedham	Blofield, Lingwood & Upton	Brundall & Cantley	Feilmingham, Worstead & Happisburgh	Hoveton, Horning & Potter Heigham	Stalham & Sea Palling	Wroxham, Rackheath & the Plumsteads
Resident population (aged 0 to 15)	2022	18.5	14.8	15.7	14.7	14	10.8	13.8	18
Resident population (aged 65 and over)	2022	18.6	28.4	27.8	29.1	26.6	39.5	31.9	24.9
Resident population (aged 85 and over)	2022	2.5	4.89	3.13	3.66	2.38	5.87	4.21	4.09
Population density: people per square kilometre	2022	438	96.7	153	169	78	93	114	249
Poverty: Index of Multiple Deprivation	2019	21.7	15.6	11	10.8	22.8	19.8	24.5	12.2
Poverty: English Indices of Deprivation	2019	12.9	8.3	7.28	6.12	9.07	10.5	12	6.89
Children in poverty: Income Deprivation Affecting Children Index (IDACI) (aged 0 to 15)	2019	17.1	9.81	8.61	7.38	10.9	16.9	12.5	7.96
Older people in poverty: Income Deprivation Affecting Older People Index (IDAOPI) (aged 60 and over)	2019	14.2	9.07	8.86	7.1	10.7	9.7	13	6.72
Fuel poverty (low income, low energy efficiency methodology)	2023	11.4	11.7	10.7	9.26	15.9	13.9	14.5	9.11
Unemployment: people claiming out of work benefit (aged 16 to 64)	2024/25	4.07	2.41	1.83	2.05	1.94	2.2	3.12	2.11
Long-term unemployment: people claiming out of work benefit for over 12 months (aged 16 to 64)	2024/25	0.51	0	0.32	0	0	0	0	0

Demography in Wroxham, Stalham and the Broads

Wroxham, Stalham and the Broads population compared to Norfolk and Waveney 2024



Source: ONS 2024 mid-year estimates

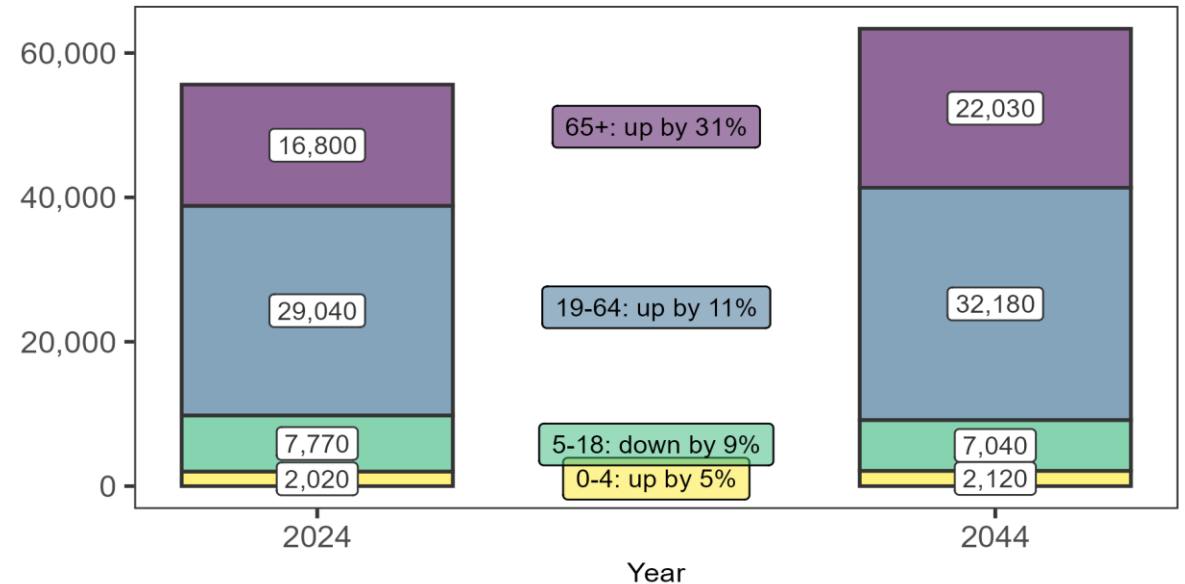
The area's population is older than the Norfolk & Waveney average, with fewer children and young adults.

The age group with the largest projected population growth by 2044 in Wroxham, Stalham and the Broads is people aged 65+.

Locally, the MSOA with the largest estimated overall population growth is Brundall & Cantley with a 16.6% population increase by 2044.

Population projections by age groups for Wroxham, Stalham and the Broads

Residents



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

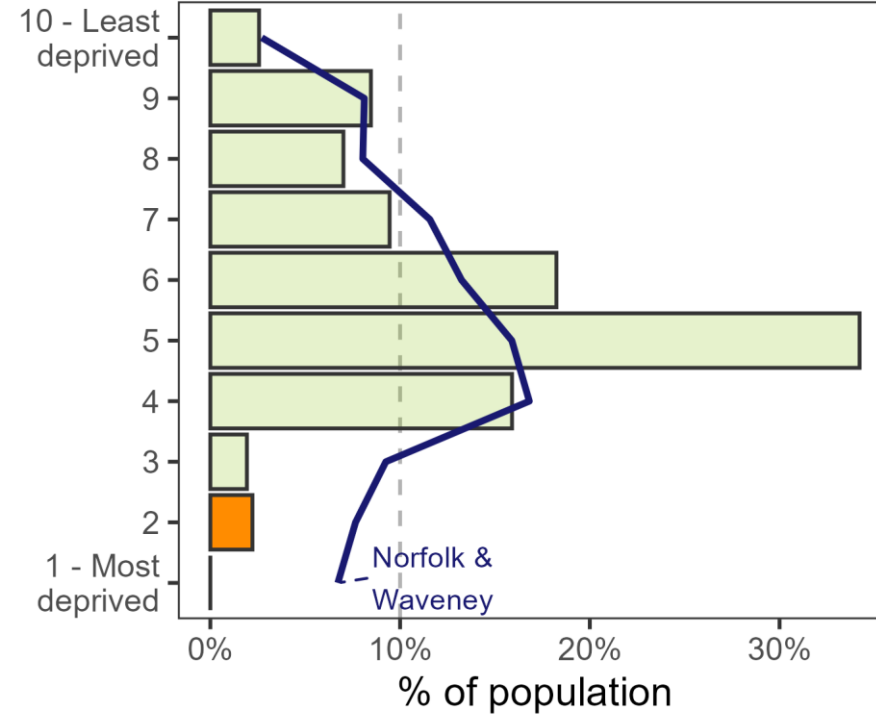
Deprivation in Wroxham, Stalham and the Broads

Core20 LSOAs in Wroxham, Stalham and the Broads



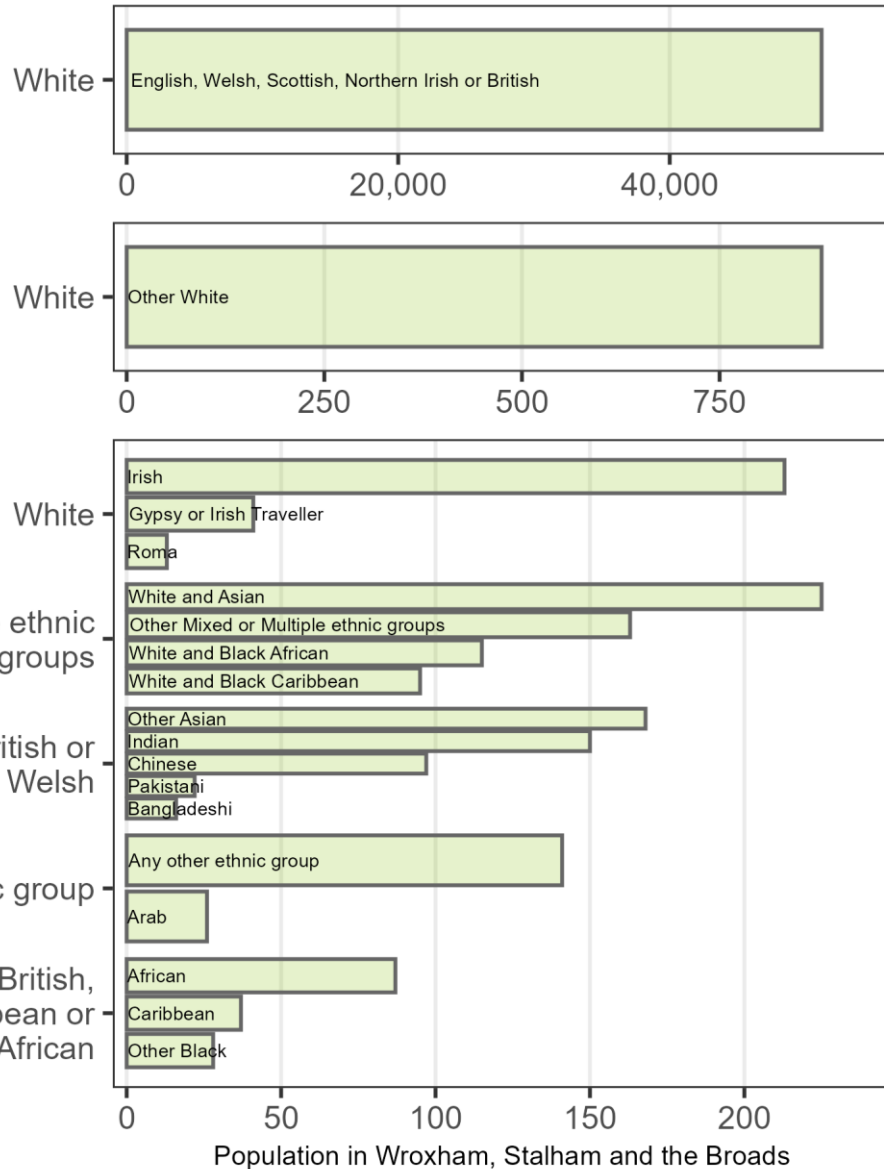
2.2% of the population of Wroxham, Stalham and the Broads live in small areas that are among the 20% most deprived areas in England (Core20 areas). Across Norfolk and Waveney, 14.4% live in Core20 areas.

IMD 2025 Decile



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

Ethnicity in Wroxham, Stalham and the Broads



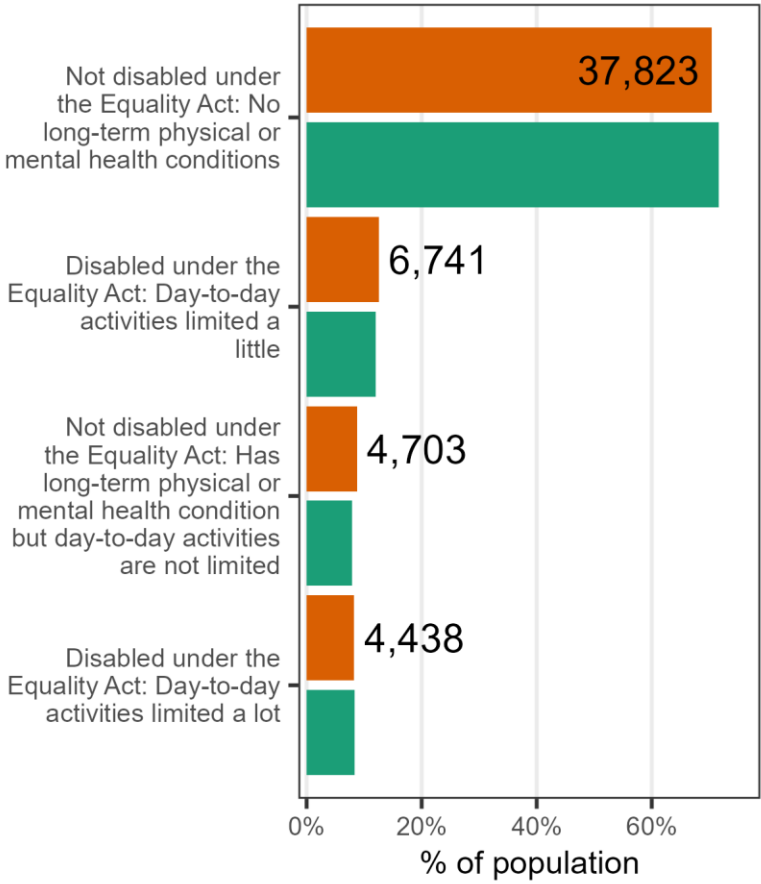
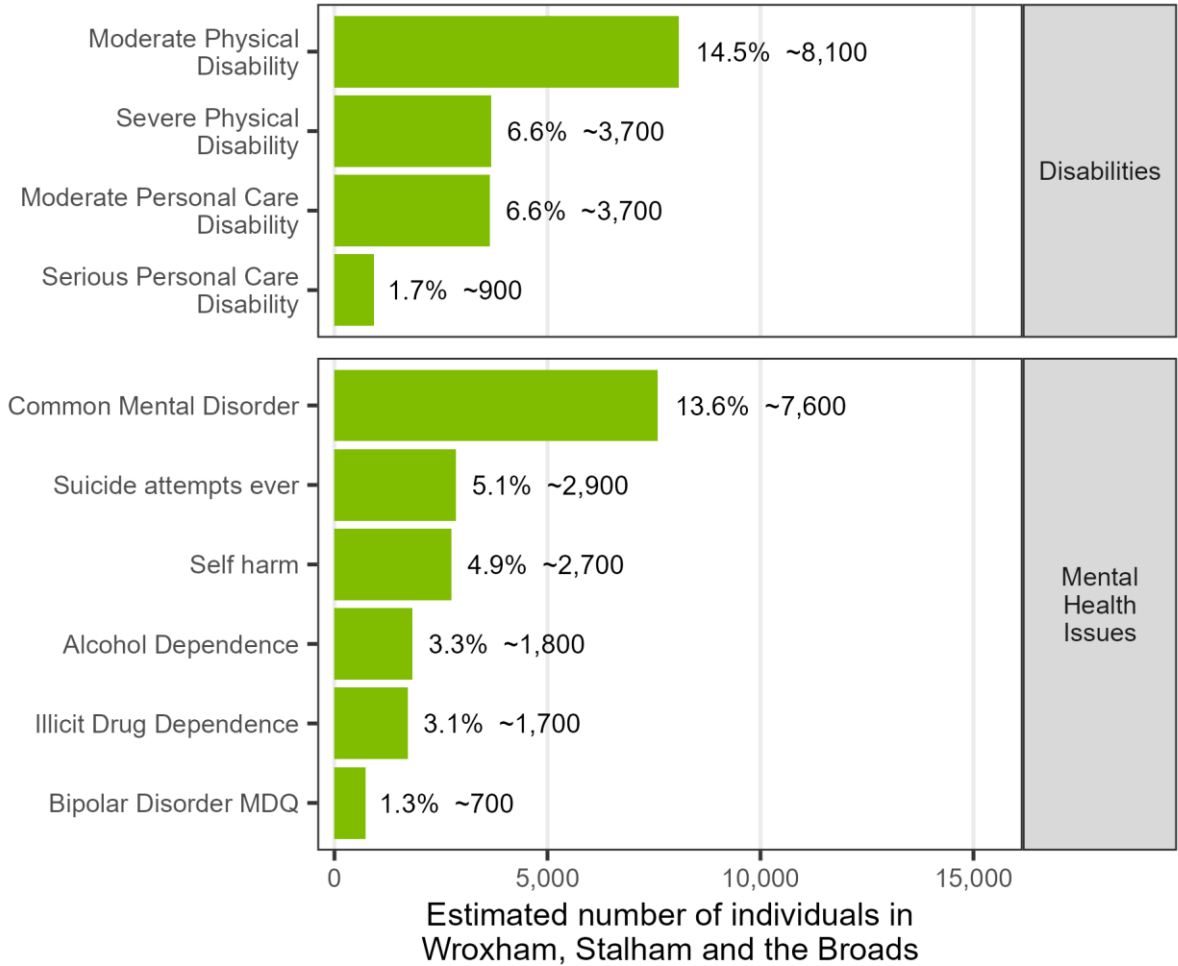
Source: Census 2021 (obtained through NOMIS)

Ethnicity group	Population	Proportion
White	52,332	97.4%
Mixed Or Multiple Ethnic Groups	598	1.1%
Asian Asian British Or Asian Welsh	453	0.8%
Other Ethnic Group	167	0.3%
Black Black British Black Welsh Caribbean Or African	152	0.3%

Source: Census 2021 (obtained through NOMIS)

Small areas (MSOAs) with the highest proportions of non-White residents in Wroxham, Stalham and the Broads include Brundall & Cantley (3.5%) and Wroxham, Rackheath & the Plumsteads (3.5%).

People with disabilities and vulnerable populations



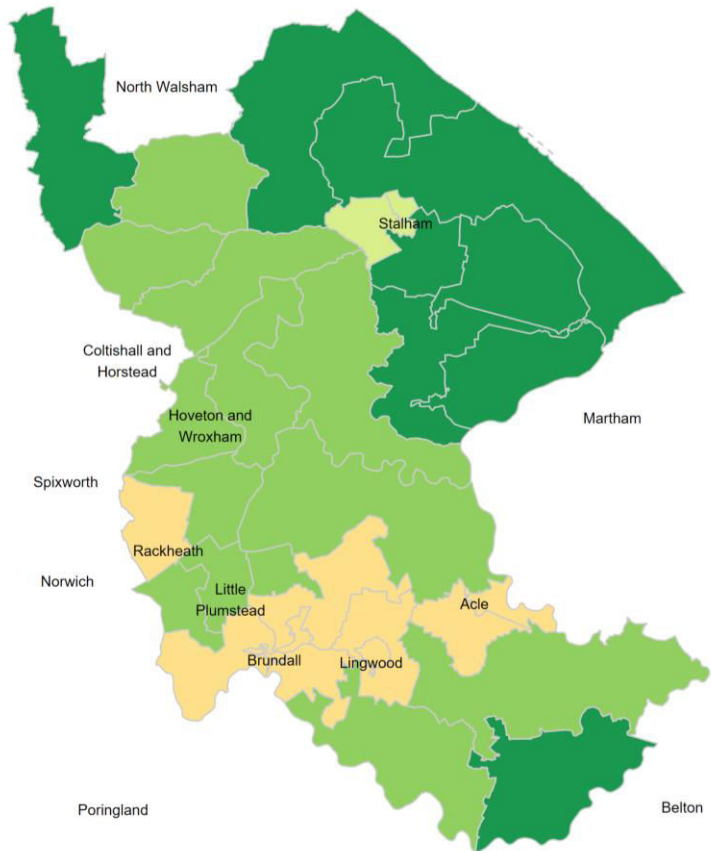
Area
■ Wroxham, Stalham and the Broads
■ Norfolk and Waveney

Source: 2021 Census (ONS)

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

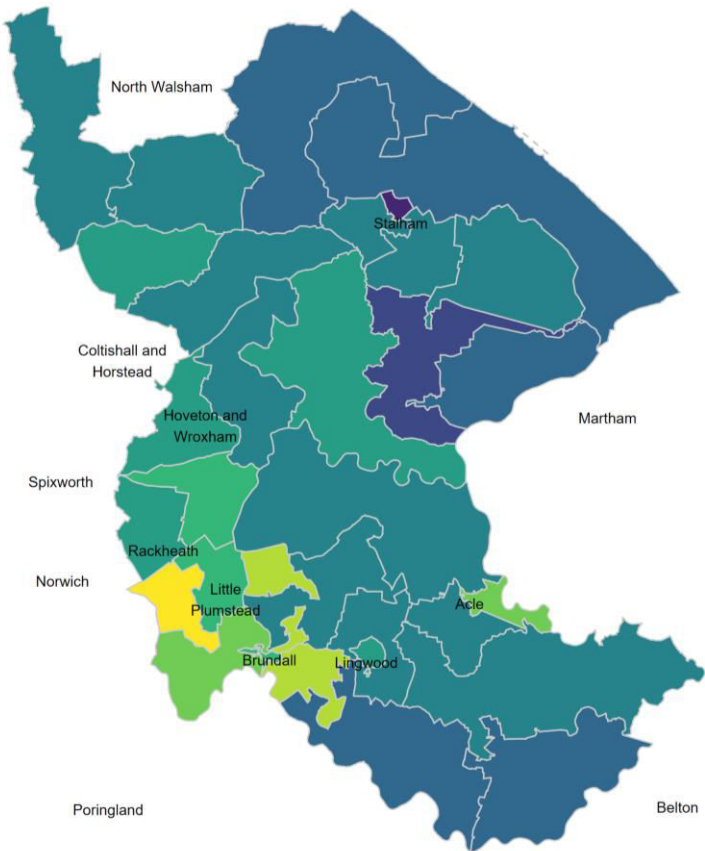
Rurality and Deprivation in Wroxham, Stalham and the Broads

ONS Rural Urban Classification



- 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

Index of Multiple Deprivation deciles



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

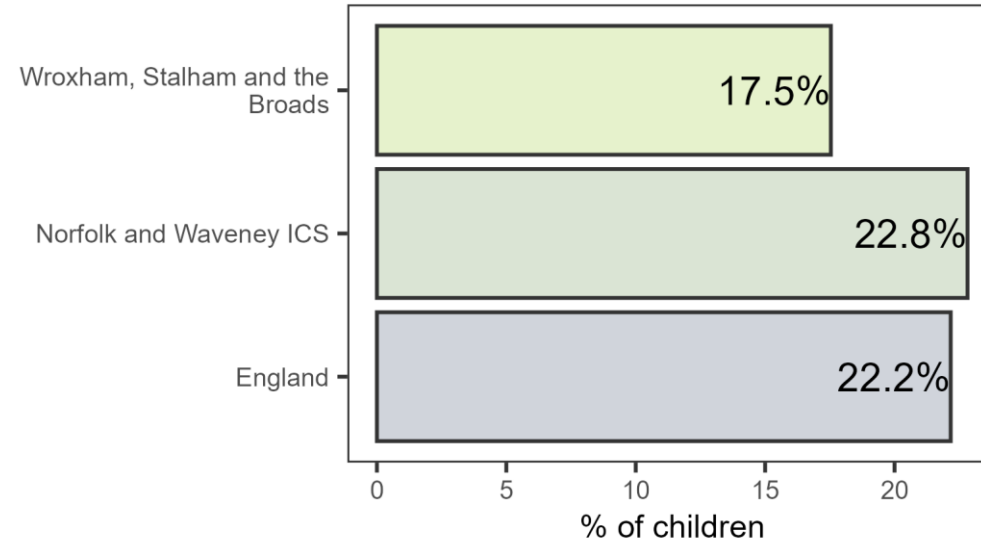
Children in Poverty

In Wroxham, Stalham and the Broads, 17.5% 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 Wroxham, Stalham and the Broads are estimated to live in poverty according to the Income Deprivation Affecting Children Index (IDACI). In England overall, this is 36.25%.

In Wroxham, Stalham and the Broads, 20.1% 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.

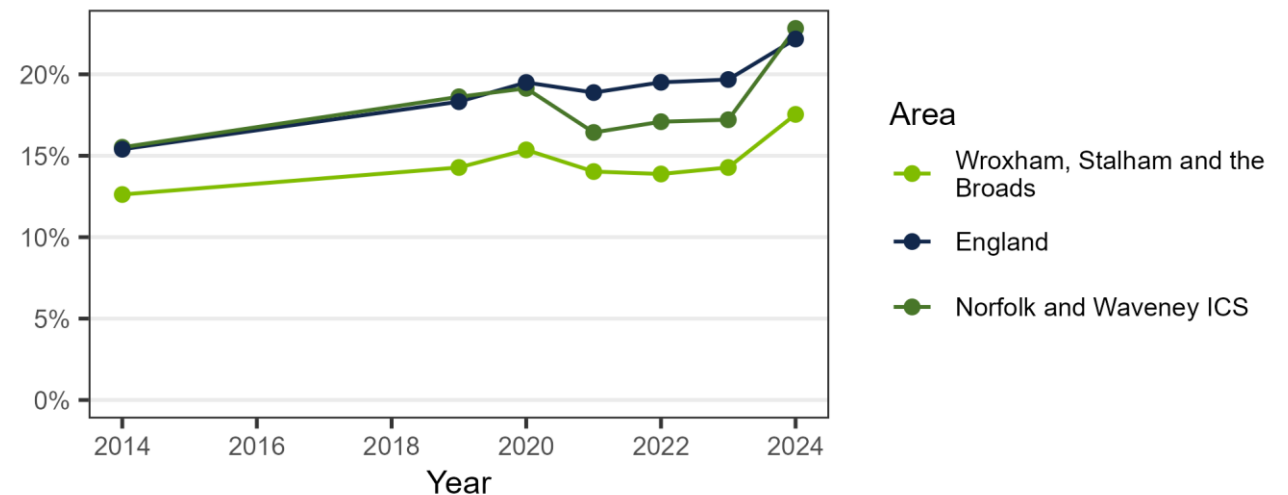
Children aged 0-19 in relative low-income families



Source: Local Insight (OCSI)

Children aged 0-19 in relative low-income families

% of children



Source: Local Insight (OCSI)

Economy, employment and housing

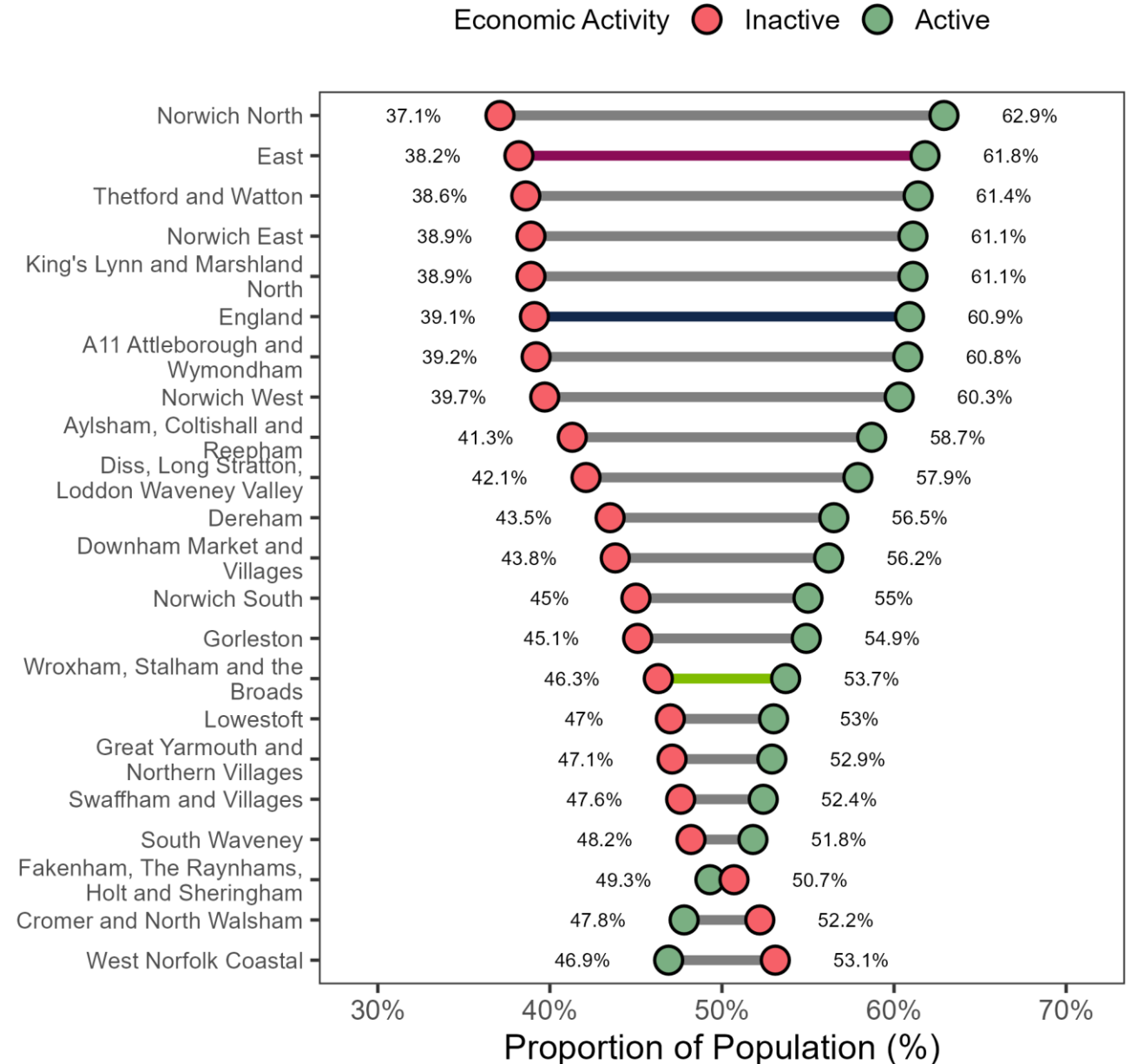
Economy and Employment

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 has 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 Wroxham, Stalham and the Broads neighbourhood, 53.7% of working-age residents were economically active, while 46.3% were economically inactive. These proportions position the area towards the mid-to-lower end of economic activity compared with other neighbourhoods and below both the regional and national averages.

Economic Activity Across Areas (Census 2021)



Economy and Employment

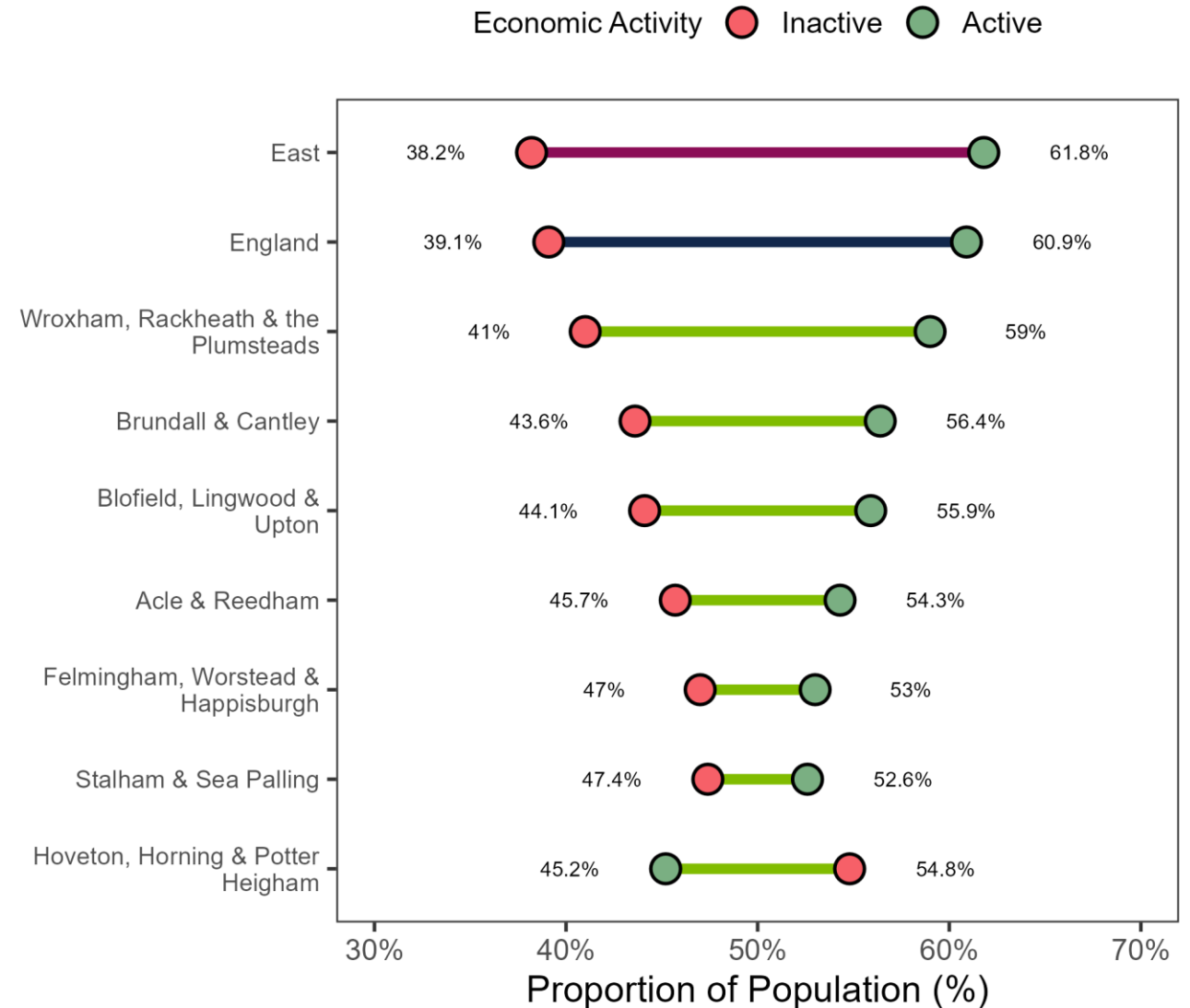
Levels of economic activity reported across MSOAs within the Wroxham, Stalham and the Broads neighbourhood during the 2021 Census varied considerably.

Within the neighbourhood, Hoverton, Horning and Potter Heigham recorded the lowest proportion of economically active residents aged 16–64 at 45.2%, indicating very high levels of economic inactivity among the working-age population.

In contrast, Wroxham, Rackheath and the Plumsteads recorded the highest proportion of economically active residents (59%) among MSOAs within the neighbourhood. However, this was still below the East of England average (61.8%) and slightly below the England average (60.9%).

This suggests below-average rates of economic activity across MSOAs compared with regional and national levels.

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 Wroxham, Stalham and the Broads, the highest employment levels were in Professional occupations (17.5%), Managers, Directors & Senior Officials (14.3%), and Skilled Trades (14.5%). All three were above the Norfolk averages, indicating a strong mix of professional, leadership, and vocational roles in the area.

The lowest levels of employment were in Process, Plant & Machine Operatives (5.9%) and Sales & Customer Service roles (7.3%), both below county and national averages, suggesting fewer residents working in operational or customer-facing occupations compared with county and national averages.

Occupational Groups						
Indicator	Wroxham, Stalham and the Broads		Norfolk		England	
	Count	Rate	Count	Rate	Count	Rate
Managers, Directors & Senior Officials	3,372	14.3%	49,365	11.9%	3,403,916	12.9%
Professional	4,135	17.5%	68,653	16.6%	5,356,649	20.3%
Associate Professional & Technical	2,907	12.3%	48,630	11.8%	3,499,749	13.3%
Administrative & Secretarial	2,223	9.4%	37,330	9.0%	2,446,565	9.3%
Skilled Trades	3,429	14.5%	52,732	12.8%	2,683,139	10.2%
Caring, Leisure & Other Service	2,410	10.2%	43,994	10.6%	2,447,148	9.3%
Sales & Customer Service	1,728	7.3%	33,402	8.1%	1,972,553	7.5%
Process, Plant & Machine Operatives	1,390	5.9%	33,235	8.0%	1,832,666	6.9%
Elementary	1,999	8.5%	46,376	11.2%	2,762,829	10.5%

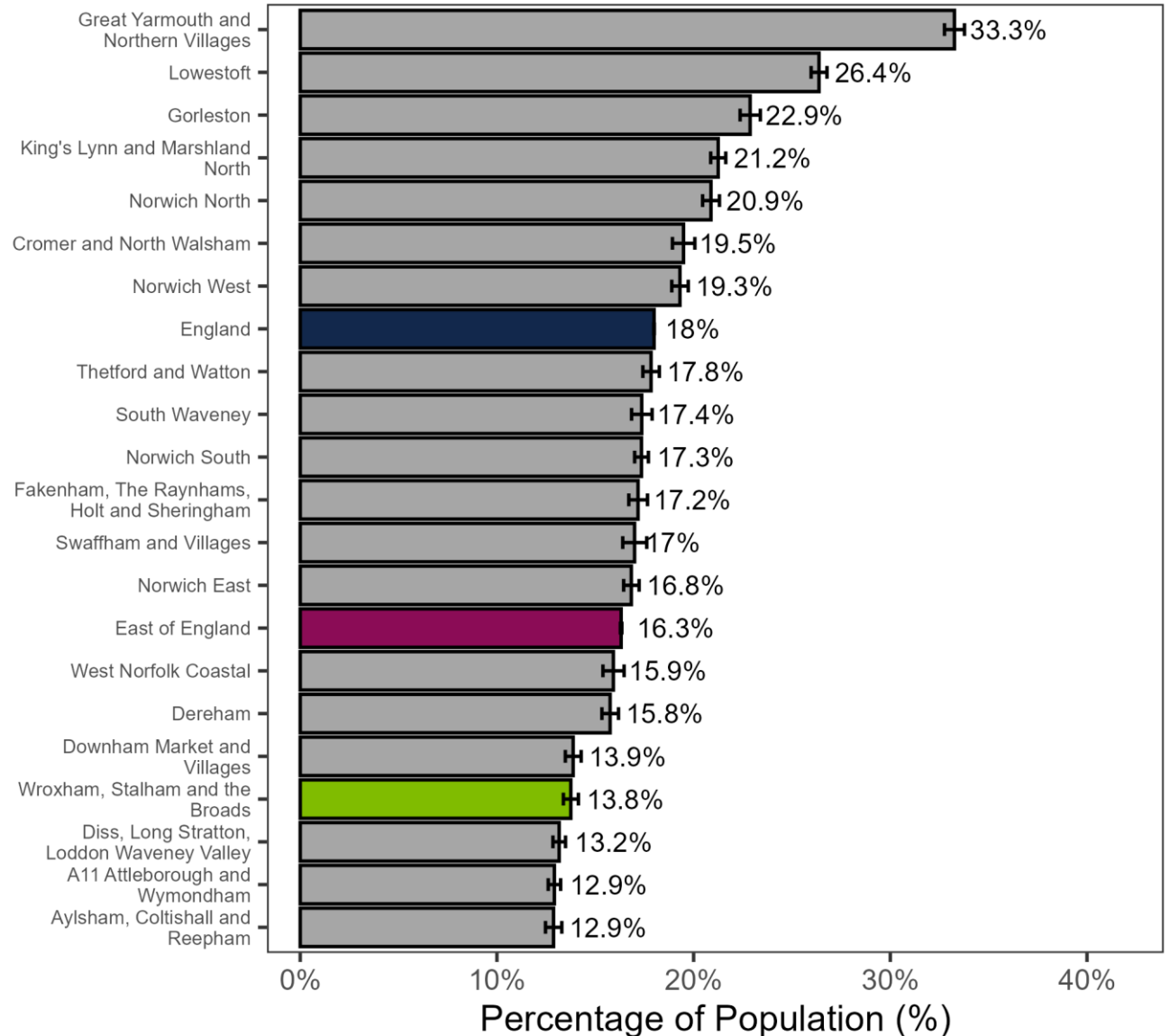
Economy and Employment

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 across neighbourhoods. In August 2025, the Wrexham, Stalham and the Broads neighbourhood recorded a claimant rate of 17.3%, which was significantly lower than 15 of the 19 other neighbourhoods and both the East of England (16.3%) and England average (18%).

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



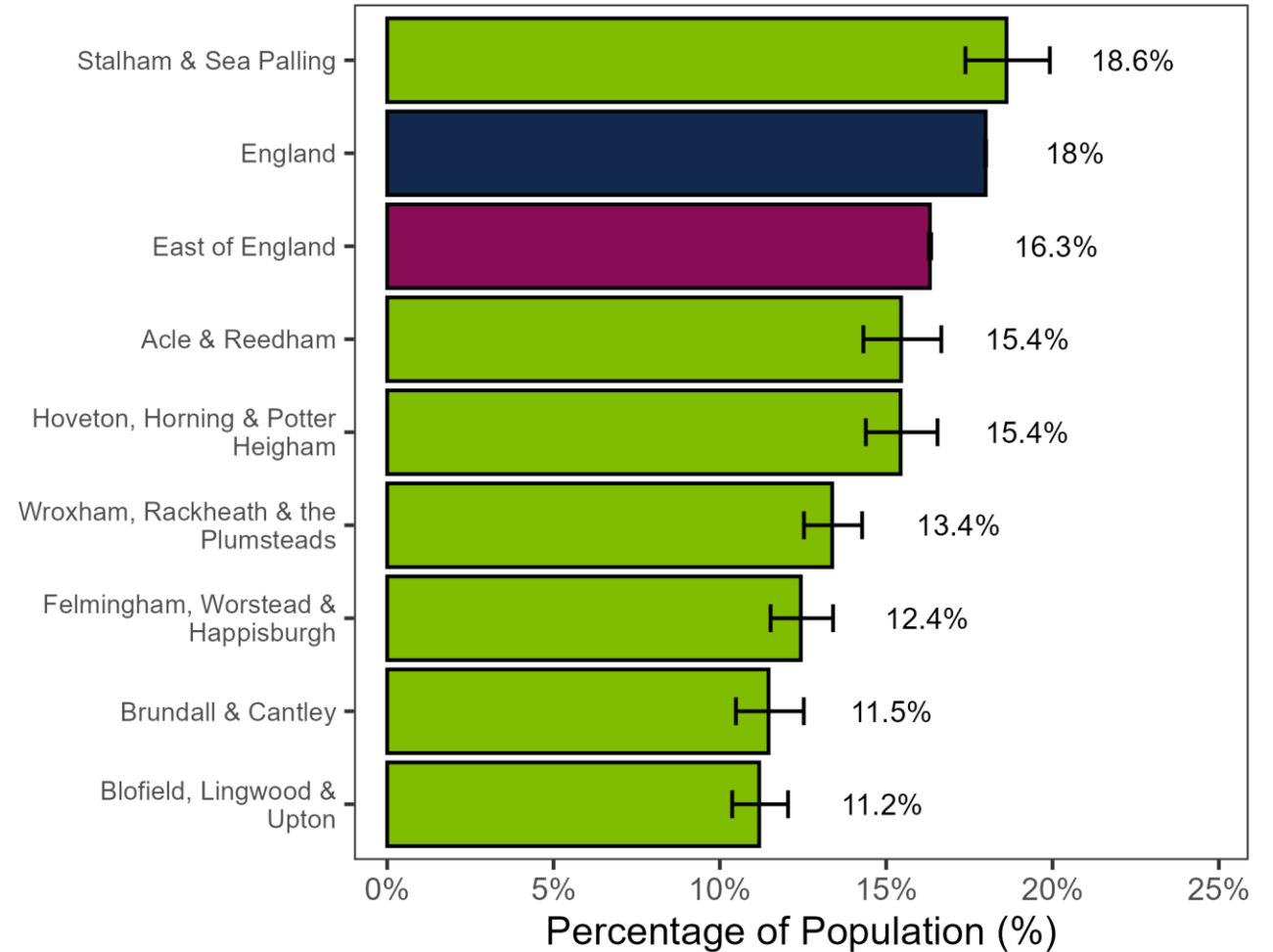
Economy and Employment

In August 2025, the proportion of residents (aged 18 to 66) claiming Universal Credit varied significantly across MSOAs within the Wroxham, Stalham and the Broads neighbourhood (ranging from 11.2%-18.6%).

Stalham and Sea Palling recorded the highest proportion of claimants at 18.6%, significantly more claimants than all other MSOAs within the neighbourhood. This figure was also significantly higher than the East of England (16.3%) average but similar to the England average (18%).

Biolfield, Lingwood and Upton reported the lowest proportion of claimants at 11.2%, significantly fewer claimants compared to four of the other six MSOAs within the area and both the East of England and England average.

Universal Credit Claimants by MSOA in Wroxham, Stalham and the Broads (Aug 2025)



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

Economy and Employment

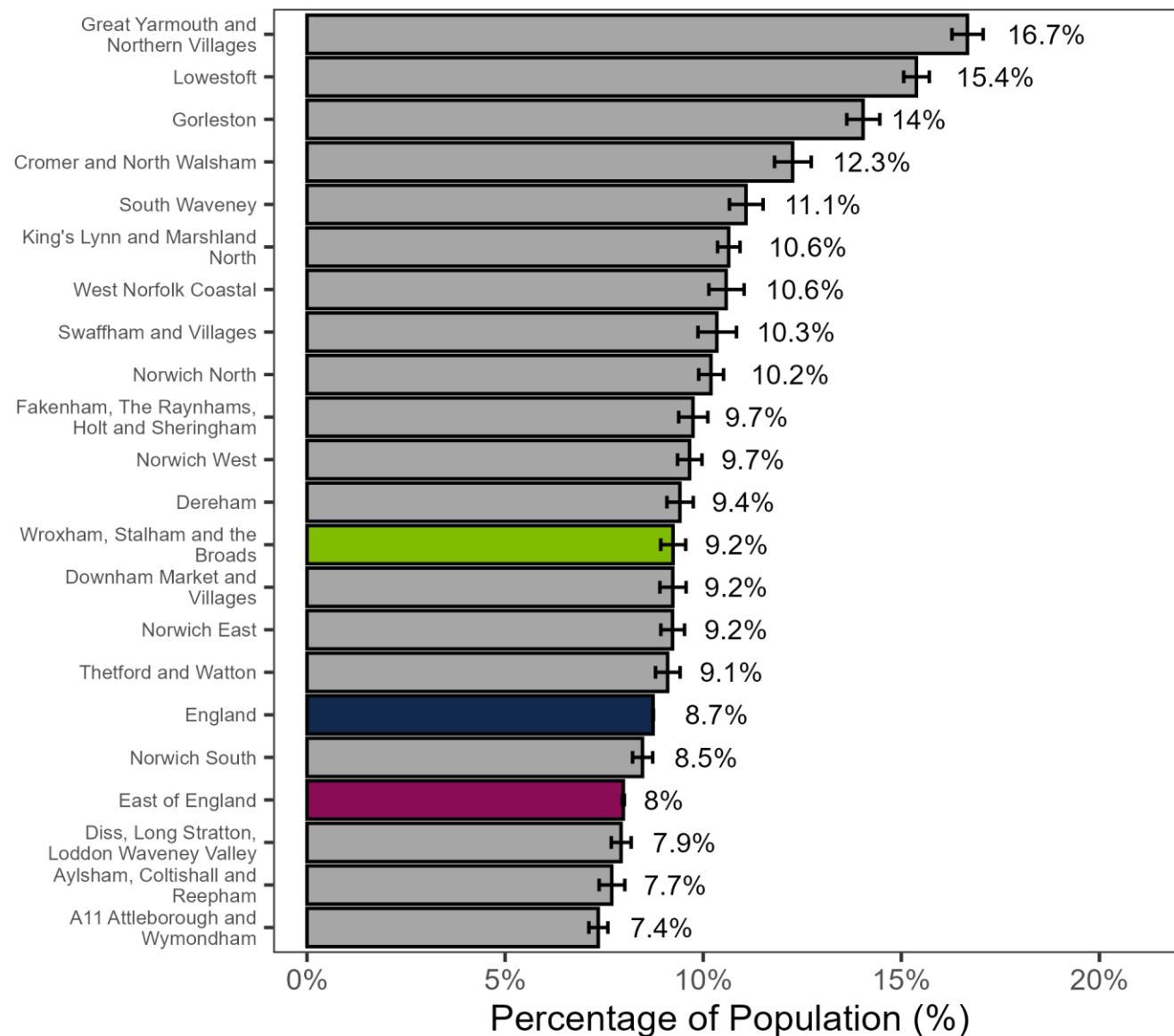
Personal Independence Payments (PIP) entitlement statistics covers individuals currently receiving PIP and those whose payments are temporarily suspended (e.g., during a hospital stay).

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 Wroxham, Stalham and the Broads neighbourhood had a PIP entitlement rate of 9.2%, significantly lower than nine of the other 19 neighbourhoods. However, entitlement in this area was higher than both the East of England average (8%) and the England average (8.7%), indicating comparatively elevated levels of PIP entitlement compared with regional and national figures.

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



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

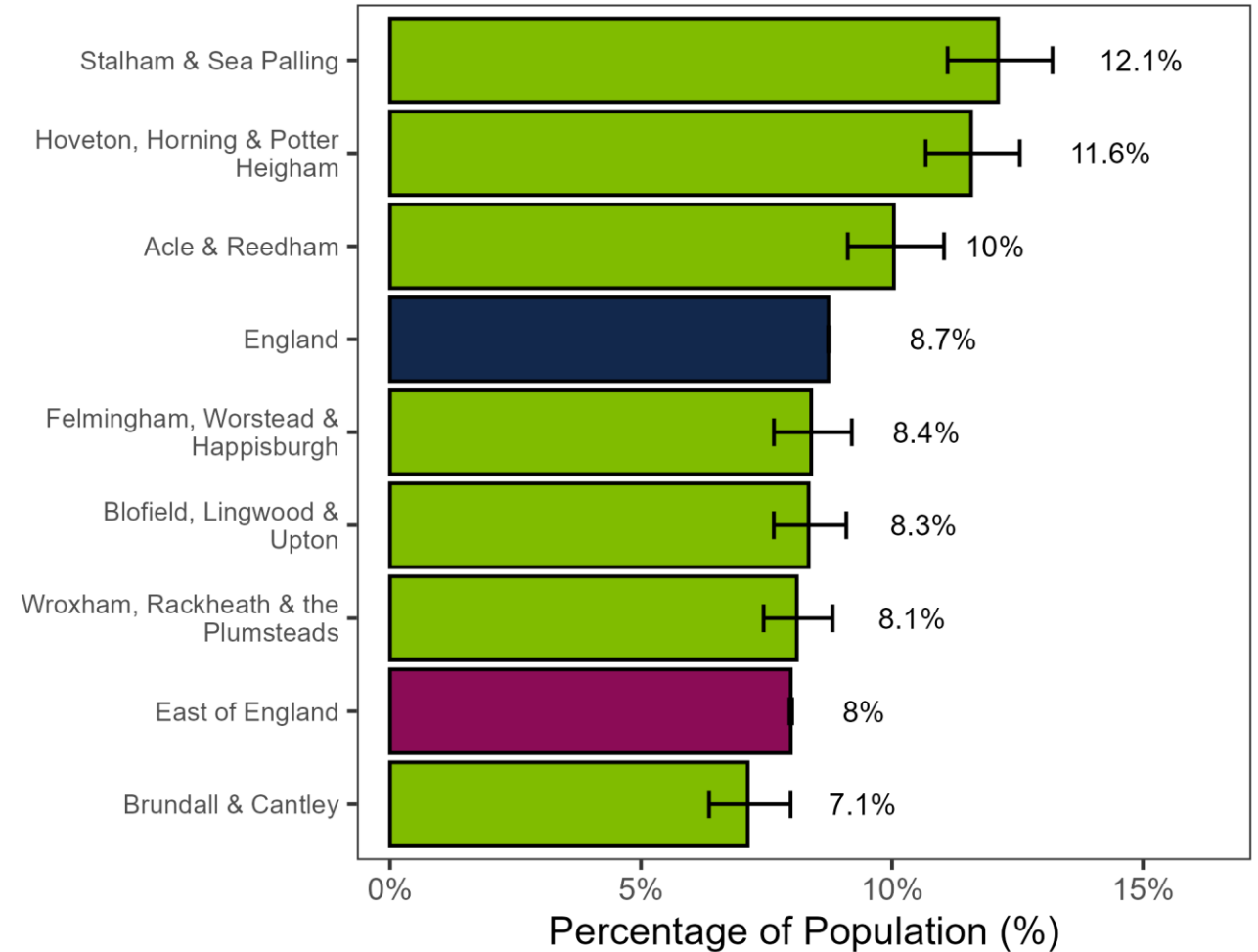
Economy and Employment

In June 2025, the proportion of residents aged 16 to 66 entitled to Personal Independence Payment (PIP) across MSOAs within the Wroxham, Stalham and the Broads neighbourhood varied significantly (ranging from 7.1%-12.1%).

Stalham and Sea Palling recorded the highest entitlement rate at 12.1%, significantly higher than five of the other six MSOAs within the neighbourhood. Entitlement in three of seven MSOAs was also significantly above the East of England average (8%) and the England average (8.7%). This suggests that health-related support needs in these MSOAs are considerably higher than both regional and national benchmarks.

Brundall and Cantley reported the lowest entitlement rate at 7.1%, significantly lower than three of the other six MSOAs within the area and the England average. However, similar to the East of England average.

Population Entitled to PIP by MSOA in Wroxham, Stalham and the Broads (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, Wroxham Stalham and the Broads has a higher proportion of homes owned outright (47.4% vs 32.5%) and a slightly lower proportion with a mortgage (27.3% vs 28.8%). Its combined social renting rate (council and housing association) is 10.8%, which is lower than the national average of 17.1%. The private renting rate (Landlord/rent free/other) at 13.6% is also lower than the England average (20.6%).

Compared to the average across neighbourhoods, the Wroxham Stalham and the Broads neighbourhood has a higher proportion of homes owned outright or mortgaged and a lower proportion rented (from social housing or private sector).

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%
Wroxham, Stalham and the Broads	47.4%	27.3%	11.3%	9.3%	1.4%	2.2%	0.9%	<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 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%

Life expectancy and mortality

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

Life expectancy and mortality

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

Life expectancy is broadly in line with Norfolk averages and above England overall, but inequalities exist between MSOAs for healthy life expectancy.

Premature mortality is 21% lower than England, and preventable mortality is 30% lower, reflecting relatively good health outcomes compared to national benchmarks.

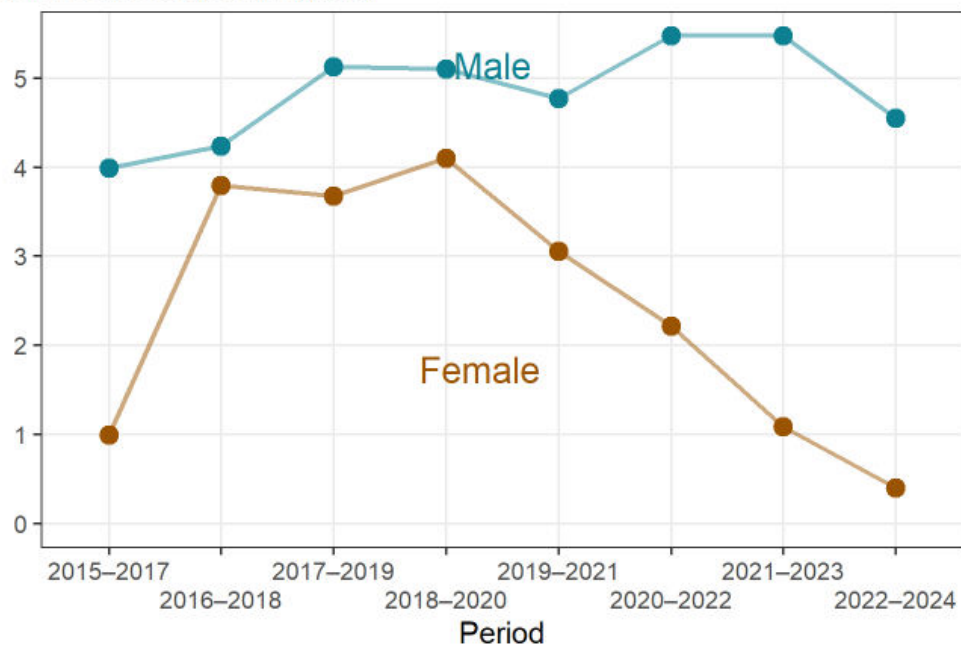
	Period	England	Acle & Reedham	Biofield, Lingwood & Upton	Brundall & Cantley	Felmingham, Worstead & Happisburgh	Hoveton, Horning & Potter Heigham	Stalham & Sea Palling	Wroxham, Rackheath & the Plumsteads
Life expectancy at birth - Female	2019 - 23	83	83.4	84.5	82.2	86.1	83.5	84.4	84.1
Life expectancy at birth - Male	2019 - 23	79.1	81.9	80.5	81.1	80.5	80	80.4	82.2
Mortality from all causes	2019 - 23	100	88.7	101	101	83	91.3	90.6	89.4
Mortality from all causes (aged under 75)	2019 - 23	100	86.7	67.2	70.4	77.3	87.4	83.7	79
Mortality from cancer	2019 - 23	100	99.3	87.6	86.7	93.5	95.7	86.1	76.1
Mortality from cancer (aged under 75)	2019 - 23	100	91.1	76	77.9	86.8	116	77.2	88.6
Mortality from cardiovascular disease	2019 - 23	100	91.7	80.4	70.4	93.3	96.1	98.5	85.5
Mortality from cardiovascular disease (aged under 75)	2019 - 23	100	89.2	36.1	40.6	80.2	85.2	103	70.3
Mortality from coronary heart disease	2019 - 23	100	88.4	70.9	70.9	86.4	96.8	103	62.6
Mortality from stroke	2019 - 23	100	74.8	98.2	47.6	98.9	92.6	95	102
Mortality from respiratory diseases	2019 - 23	100	64.9	64.3	80.4	80.2	73	106	52.6
Mortality from causes considered preventable (aged under 75)	2019 - 23	100	85.6	59.8	46.9	76.4	73.4	80	64.5

Life expectancy inequalities in the North Norfolk Place Board area

Only a very small proportion live in Core20 areas. Nevertheless, there is some variation in relative deprivation in the North Norfolk Place Board area, especially among males. Looking at relatively most and least quintiles shows that circulatory, respiratory and digestive diseases cause most of the existing gaps.

Change in life expectancy gap (3 year average) between most and least deprived deciles within North Norfolk

Gap in life expectancy at birth (years)

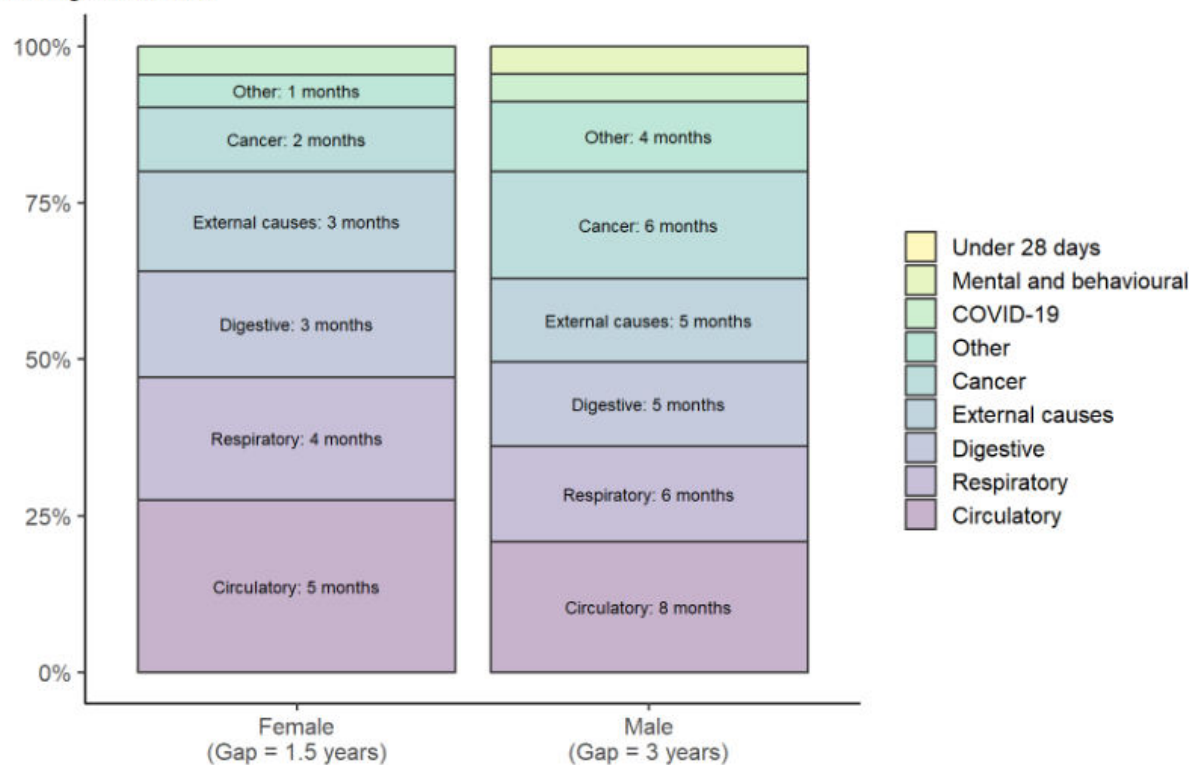


Sources: CRD (NHS Digital) and ONS mid-year estimates
NB: Small area deprivation scores based on IMD 2025



Contributors to life expectancy gap between most and least deprived quintiles within North Norfolk in 2022-2024

Percentage contribution

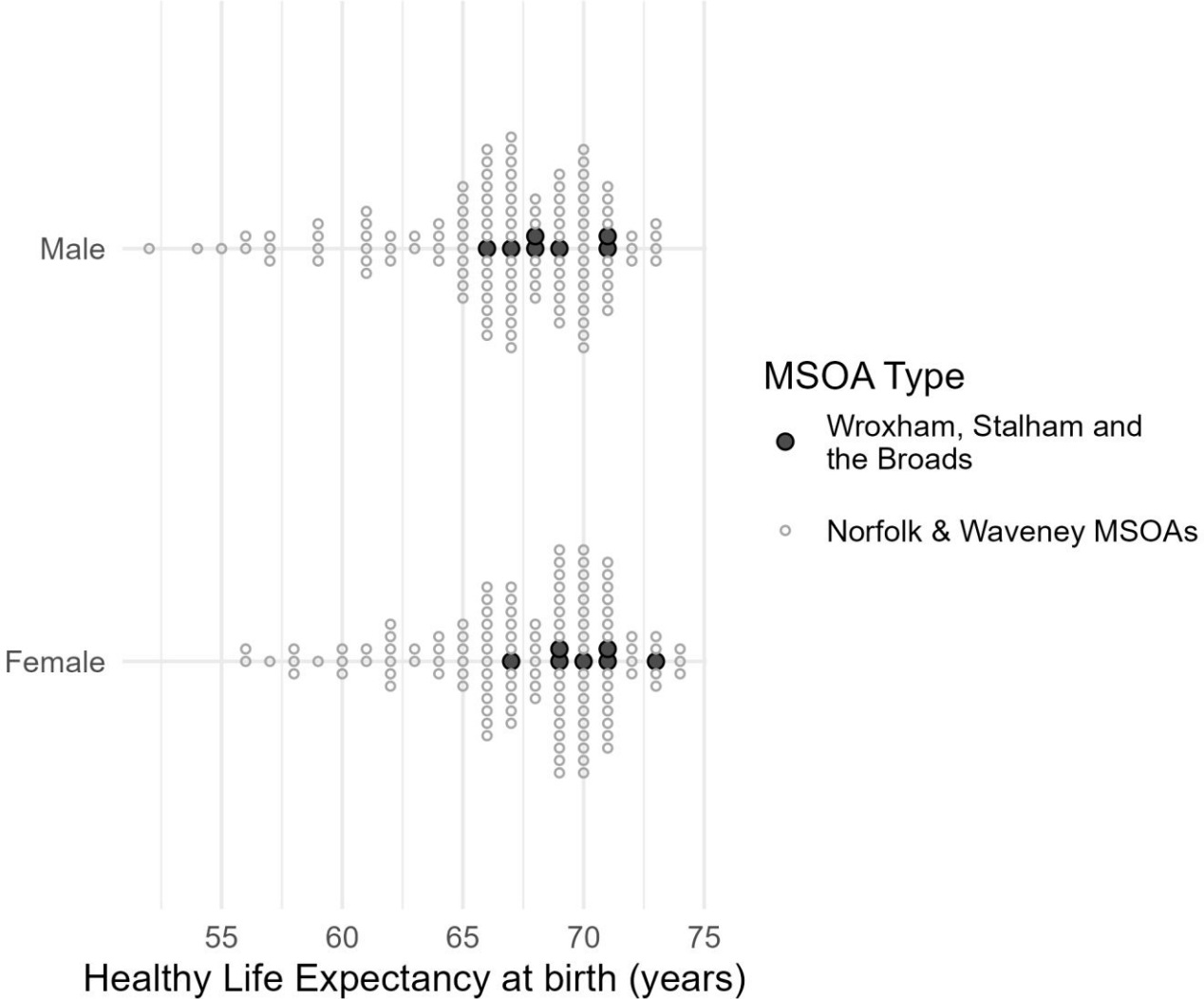


Sources: CRD (NHS Digital) and ONS mid-year estimates
NB: Small area deprivation scores based on IMD 2025

Healthy Life Expectancy

Within the Wroxham, Stalham and the Broads neighbourhood area, female healthy life expectancy was lowest in Stalham & Sea Palling and highest in Brundall & Cantley in 2021.

Male healthy life expectancy was lowest in Felmingham, Worstead & Happisburgh and highest in Blofield, Lingwood & Upton and Wroxham, Rackheath & the Plumsteads in 2021.

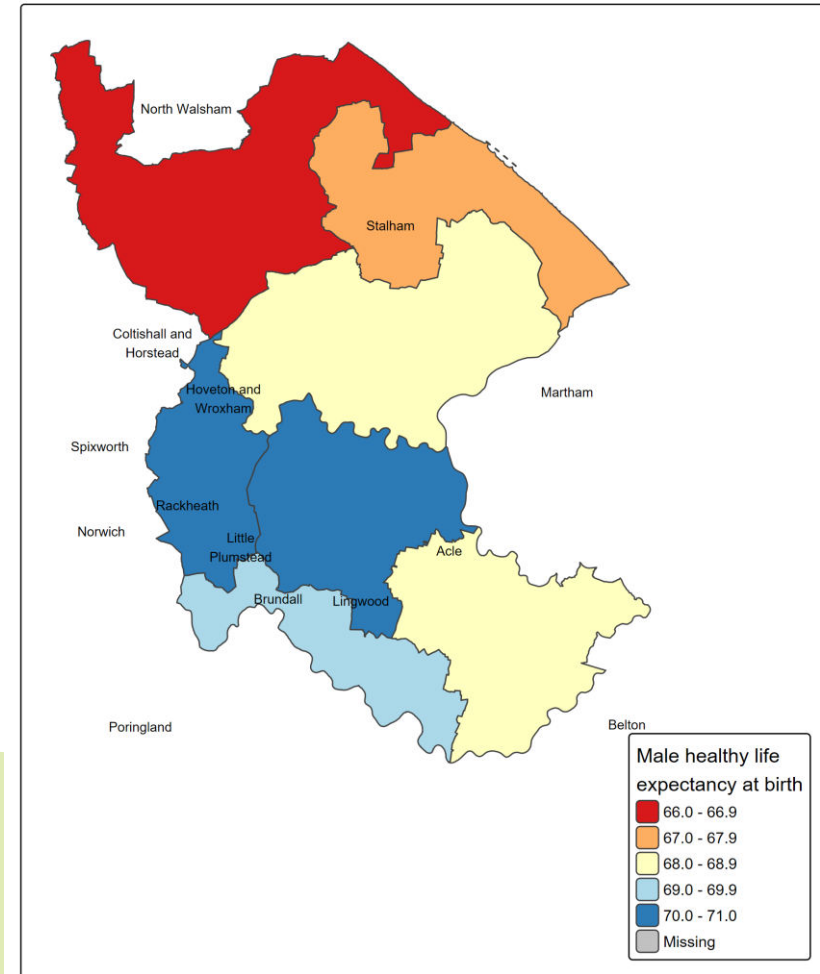
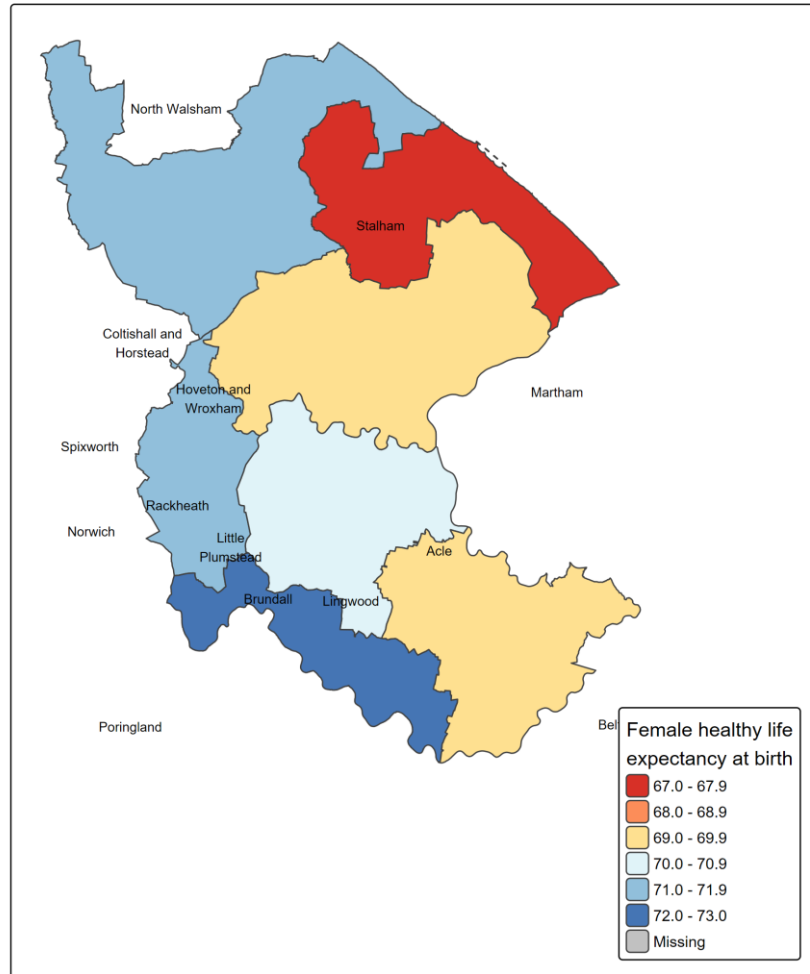


Source: HDIG report 1. Healthy life expectancy and prevention opportunities (2023)

Healthy Life Expectancy in Wroxham, Stalham and the Broads

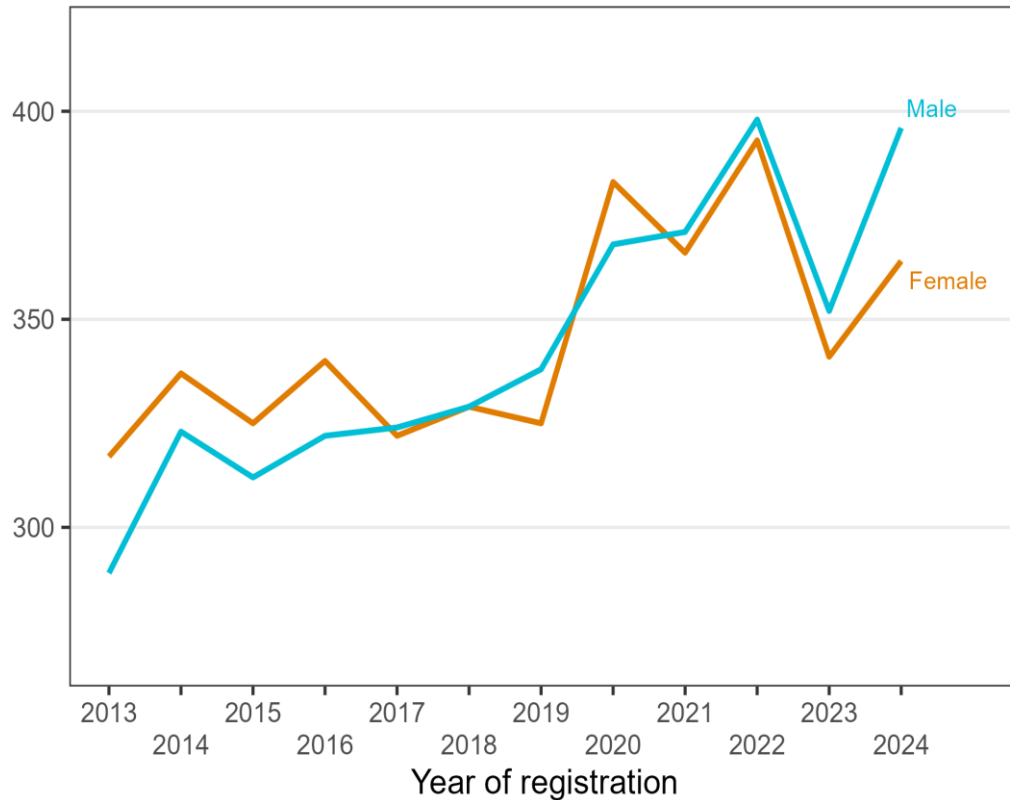
Within the Wroxham, Stalham and the Broads neighbourhood area, female healthy life expectancy was lowest in Stalham & Sea Palling and highest in Brundall & Cantley in 2021.

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Deaths

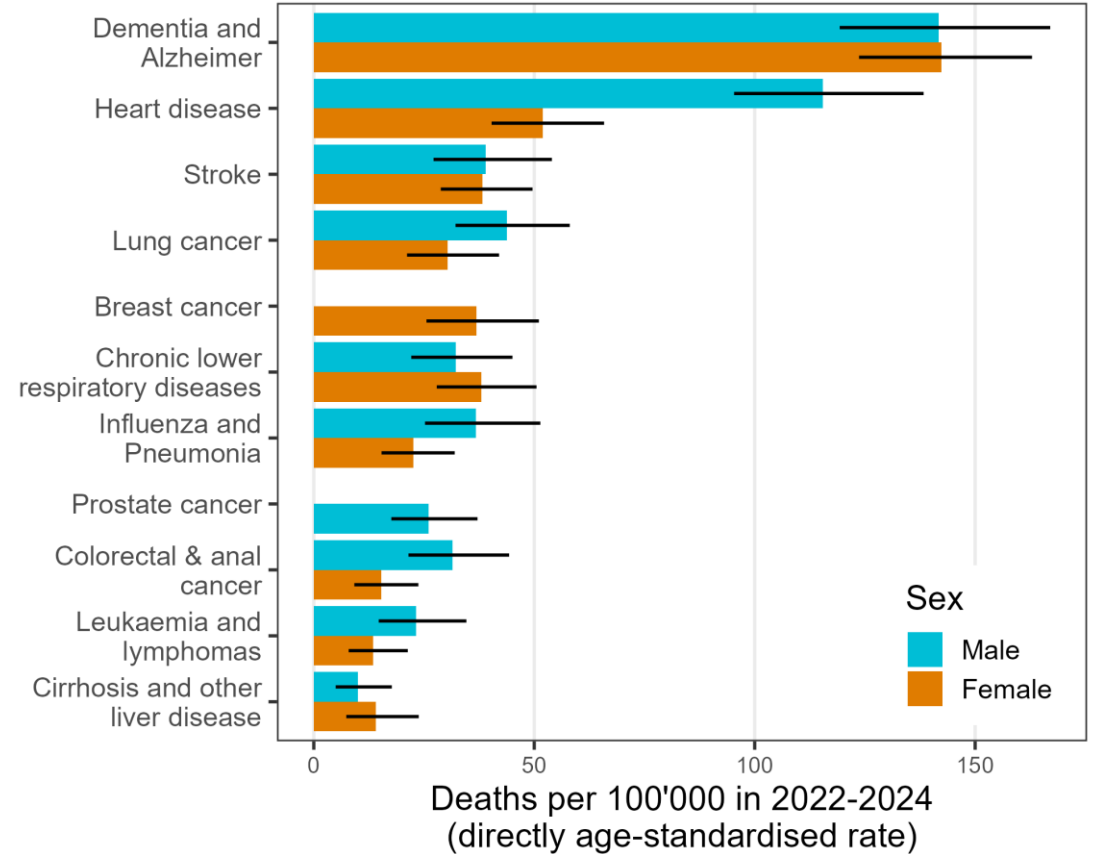
Deaths in Wroxham, Stalham and the Broads



Source: NOMIS

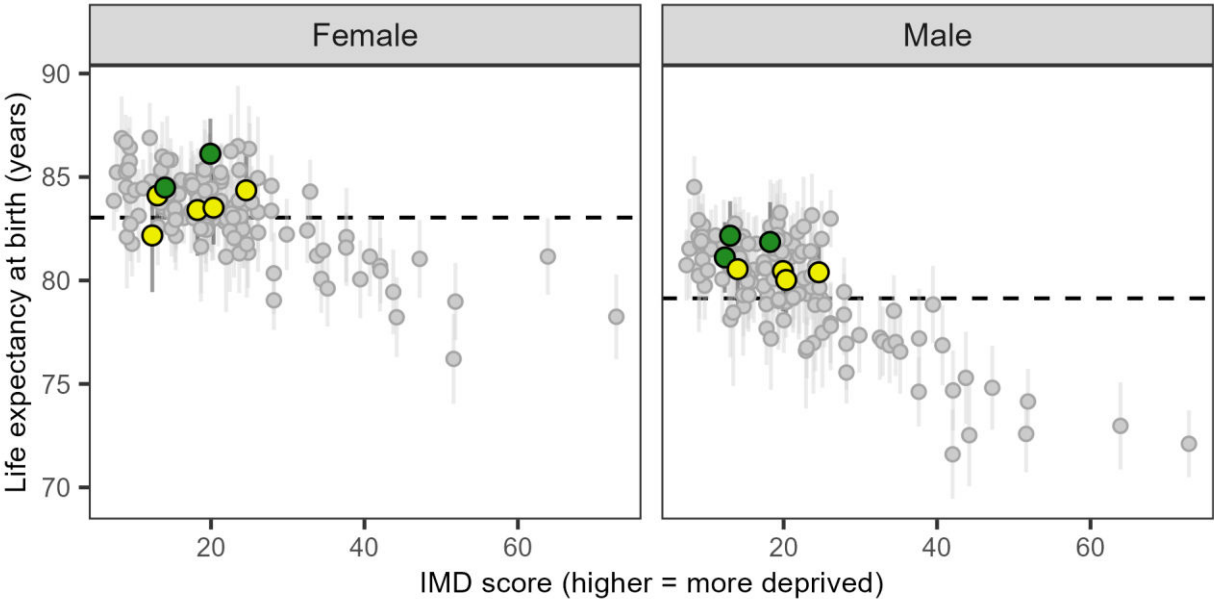
Leading causes of death in Wroxham, Stalham and the Broads

Leading cause of death

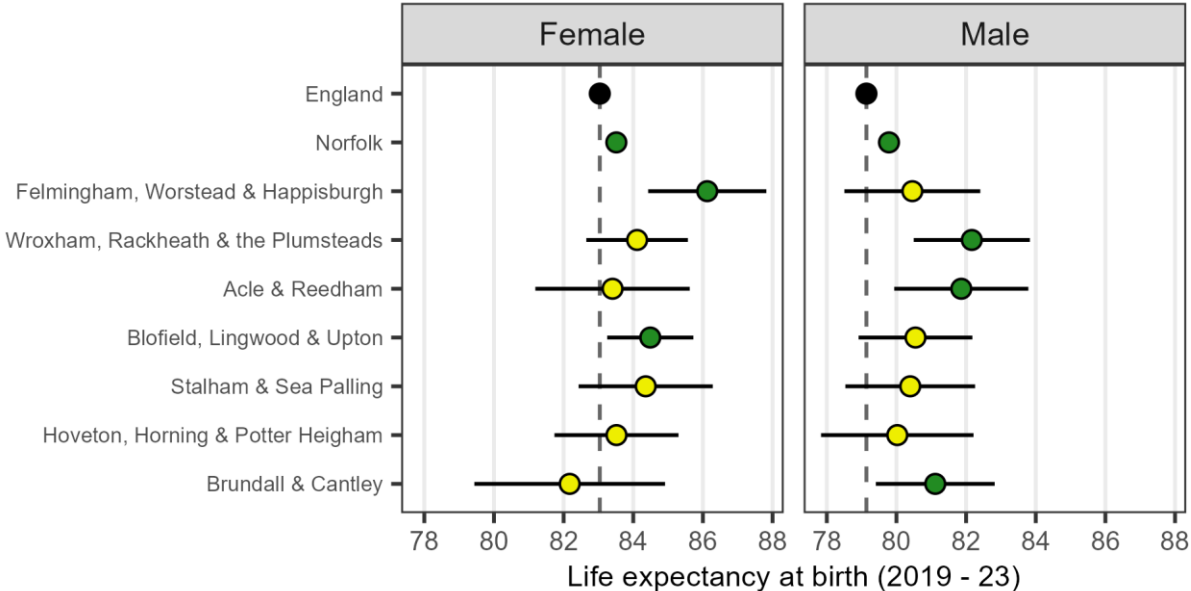


Source: CRD (NHS Digital) and ONS mid-year population estimates

Life expectancy in Wroxham, Stalham and the Broads



Life expectancy in Wroxham, Stalham and the Broads is generally higher than the England average and broadly in line with Norfolk overall, reflecting lower deprivation and healthier behaviours.



- Better
- Similar
- Worse
- Not compared

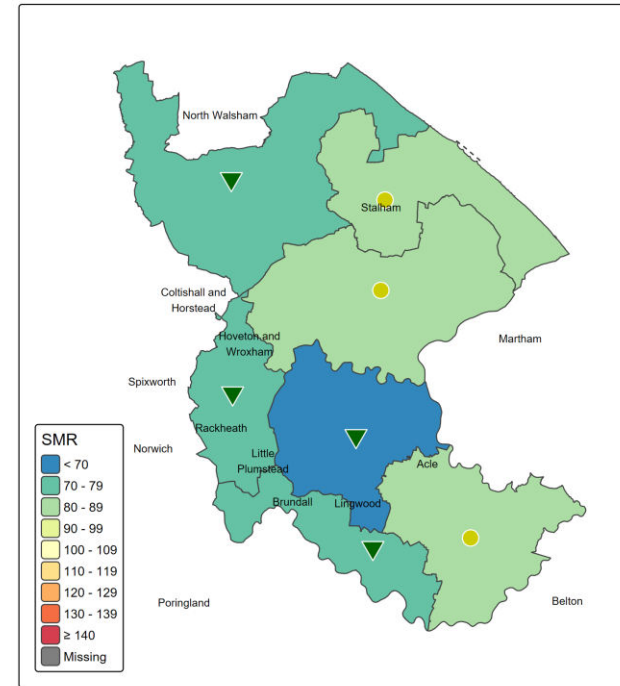
Source: OHID Fingertips

Premature mortality

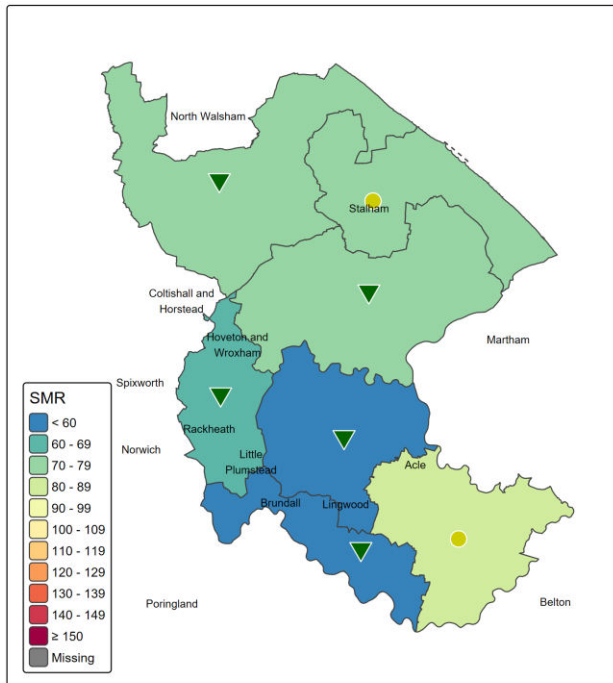
There were 853 deaths of people under the age of 75 in Wroxham, Stalham and the Broads in 2019 - 23. Overall, the rate of premature mortality was 21% lower than the England average.

Locally, the highest rate of premature mortality was in Hoveton, Horning & Potter Heigham (Standardised Mortality Ratio = 87.4). The lowest rate was in Blofield, Lingwood & Upton. Four small areas (MSOAs) had a significantly better premature mortality rate than the England average (green triangles).

Mortality from all causes (aged under 75) in Wroxham, Stalham and the Broads (Standardised Mortality Ratio [England = 100], 2019-2023)



Mortality from causes considered preventable (aged under 75) in Wroxham, Stalham and the Broads (Standardised Mortality Ratio [England = 100], 2019-2023)



Preventable mortality

In 2019 - 23, 347 deaths of people under the age of 75 in Wroxham, Stalham and the Broads were from causes considered preventable. Overall, there was a 30% lower rate of preventable mortality compared to the national average.

Locally, the highest rate of preventable mortality was in Acle & Reedham (Standardised Mortality Ratio = 85.6). The lowest rate was in Brundall & Cantley. Five small areas (MSOAs) had a significantly better preventable mortality rate than the England average.



Behavioural determinants of health

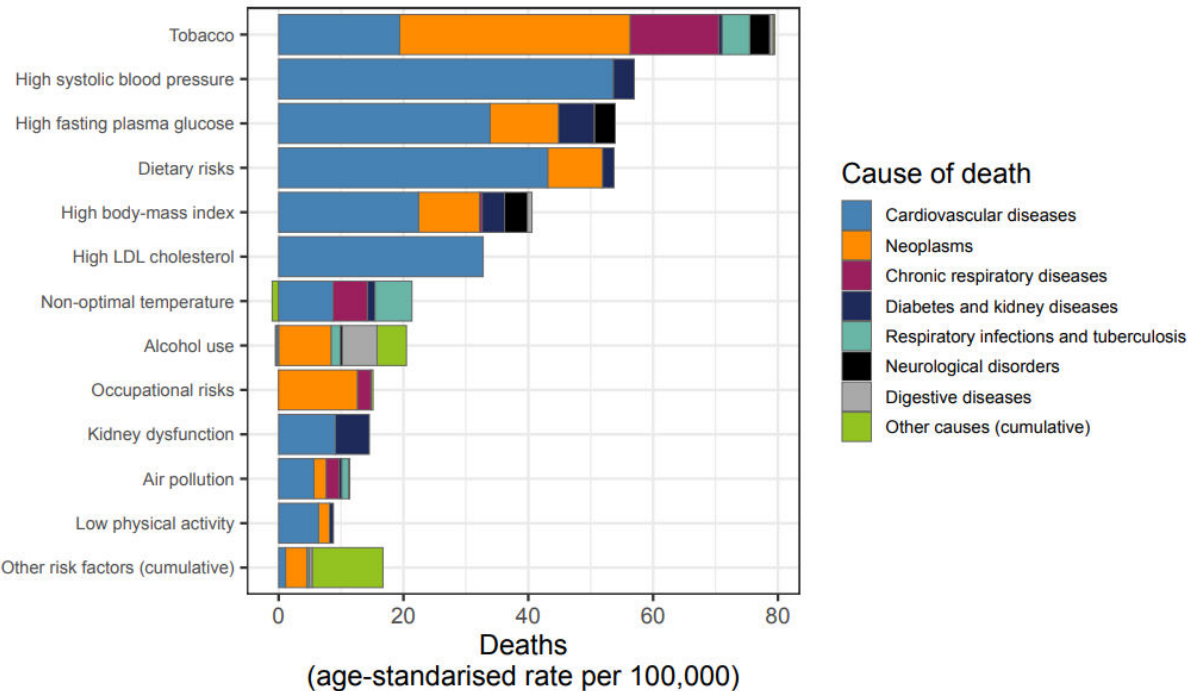
- This section examines lifestyle and behavioural risk factors such as smoking, diet, and physical activity, which contribute to preventable disease.

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.

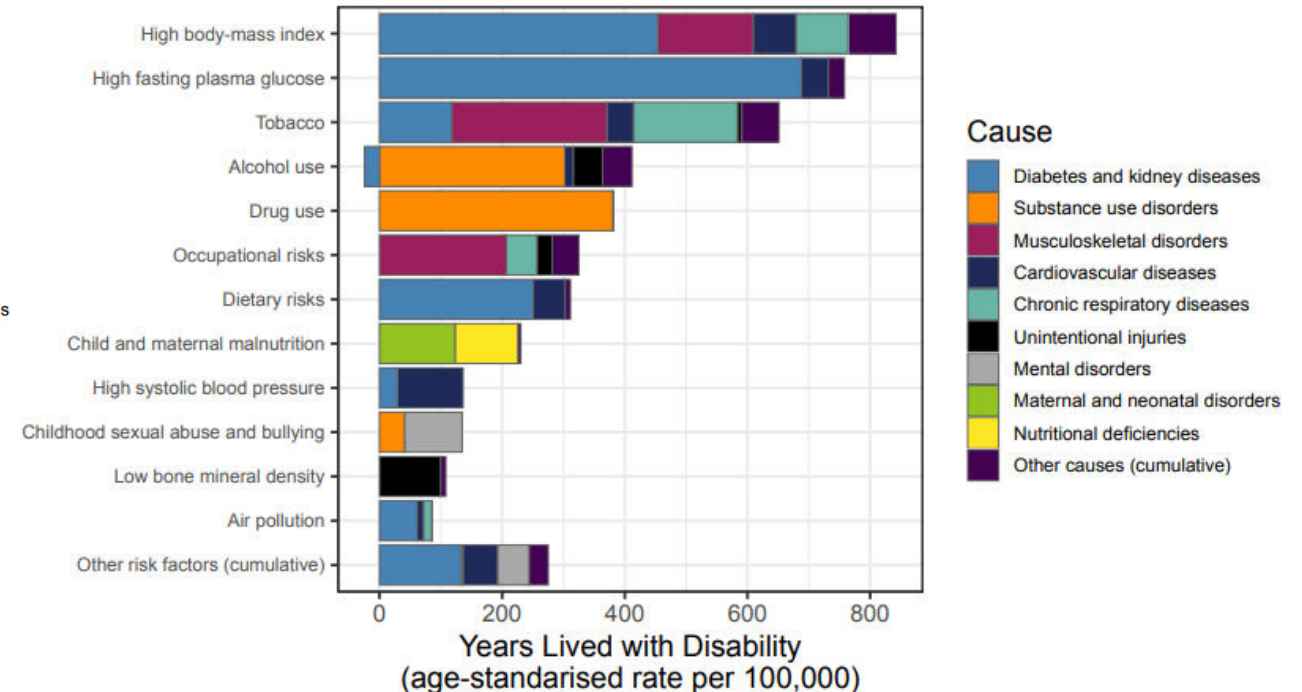
Deaths

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

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

Smoking, obesity, and alcohol-related risks are generally lower than Norfolk and England averages.

Childhood overweight prevalence is among the lowest (Reception: 18.8%, Year 6: 32.1%), suggesting positive early-life health behaviours. However, rural isolation may limit access to physical activity opportunities for some families.

	Period	England	Acle & Reedham	Blofield, Lingwood & Upton	Brundall & Cantley	Felmingham, Worstead & Happisburgh	Hoveton, Horning & Potter Heigham	Stalham & Sea Palling	Wroxham, Rackheath & the Plumsteads
Reception prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	9.64		8	6.25	10	6.9	10	6.78
Reception prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	21.9	15.2	20	18.8	20	20.7	23.3	15.3
Year 6 prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	22.7	21.2	18.5	15.6	21.1	19.4	18.9	18.2
Year 6 prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	36.7	27.3	31.5	28.1	34.2	33.3	29.7	29.1
General fertility rate (women aged 15 to 44)	2018 - 22	54.6	51.3	50	53.2	48.4	49.7	50.9	56.5
Low birth weight of live babies	2018 - 22	6.84	5.96	7.08	5.56	5.06	5.56	7.08	3.83
Emergency hospital admissions: all causes (aged under 5)	2016/17 - 20/21	141	157	155	225	139	175	176	149
Unintentional and deliberate injuries: emergency hospital admissions in children (aged under 5)	2016/17 - 20/21	119	149	124	107	115	151	154	108
Unintentional and deliberate injuries: hospital admissions in children (aged under 15)	2016/17 - 20/21	92	101	100	113	100	95.7	82.8	94.3
Unintentional and deliberate injuries: hospital admissions in young people (aged 15 to 24)	2016/17 - 20/21	128	86.1	92.3	118	73.9	140	154	146

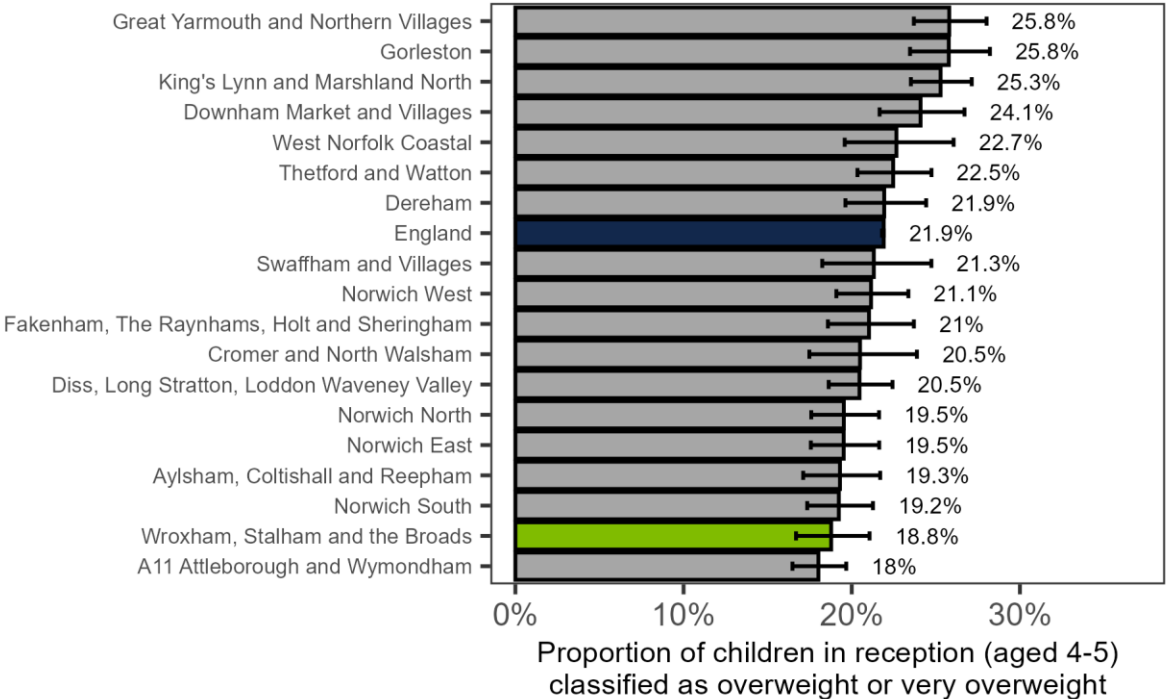
Behavioural risk factors - children

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%).

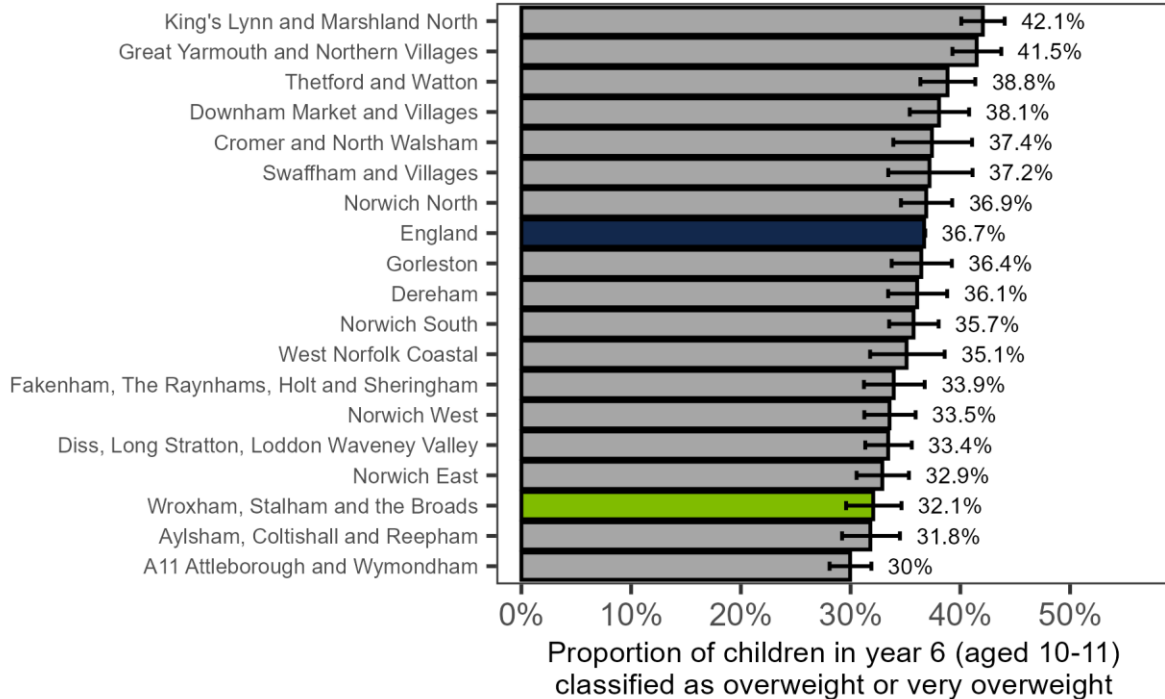
In the Wroxham, Stalham and the Broads neighbourhood, 18.8% of Reception-age children were classified as overweight or very overweight. This figure was one of the lowest across neighbourhoods, significantly lower than four of 19 other neighbourhoods and the England average (21.9%). For Year 6-age children, 32.1% were overweight or very overweight, this was again one of the lowest across neighbourhoods, significantly lower than four of 19 other neighbourhoods and the England average (21.9%).

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

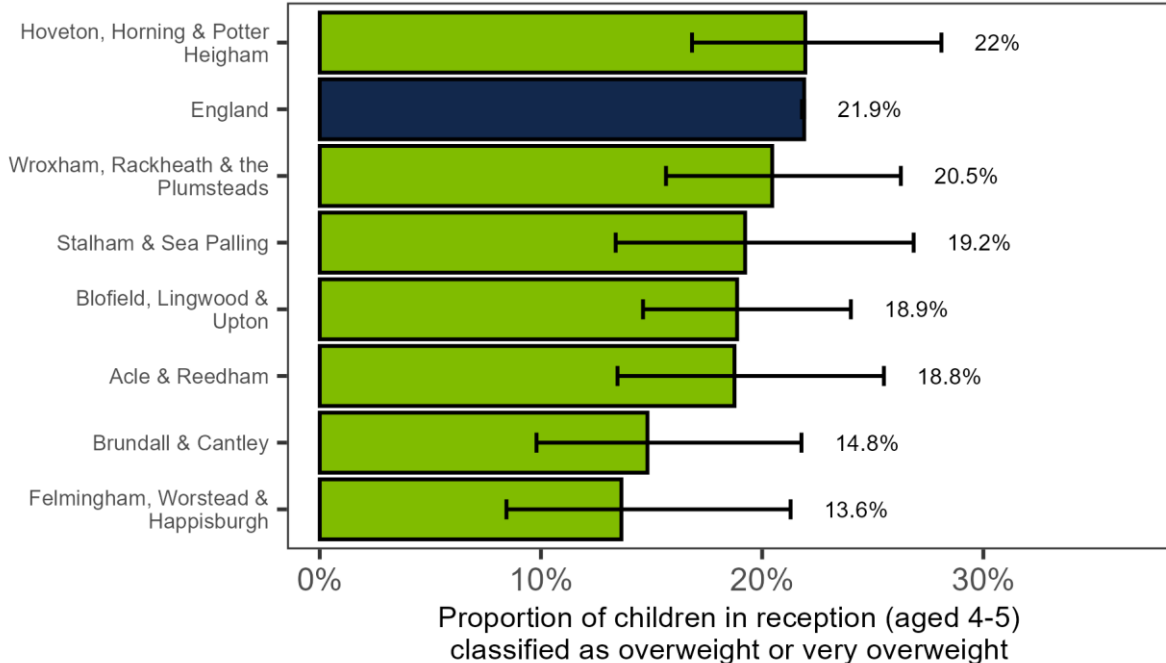
Behavioural risk factors - children

Within the Wroxham, Stalham and the Broads 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, Houston, Horning and Potter Heigham recorded the highest prevalence (22%), however this was not significantly higher than any of the other MSOAs within the Neighbourhood or the national average (21.9%).

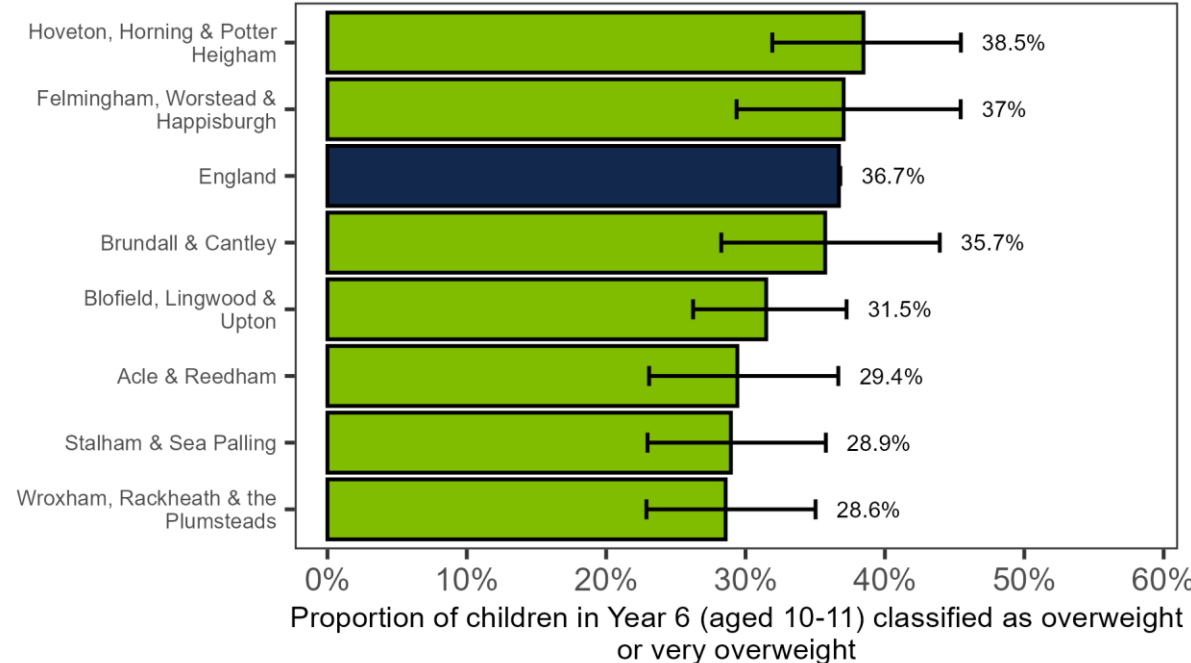
Among Year 6 children, Hoveton, Horning and Potter Heigham again reported the highest prevalence (38.5%), however again this was not significantly higher than any other MSOA within the Neighbourhood or the national average (36.7%).

Reception: Prevalence of Overweight or Very Overweight Children Across MSOAs in Wroxham, Stalham and the Broads 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 Wroxham, Stalham and the Broads Compared to National Average (3-Year Combined)



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

Behavioural risk factors - adults

In Broadland, alcohol-specific hospital admissions and smoking prevalence are lower than the Norfolk and England averages, suggesting a lower local burden of smoking and alcohol related health risks.

Whereas the proportion of adults estimated to be obese is 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.

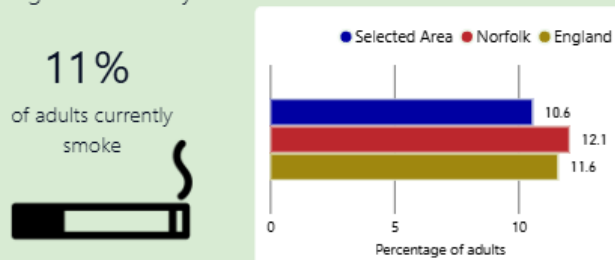
Norfolk Health and Wellbeing Profiles Adult Lifestyle

There are approximately 72,330 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.

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.



There are approximately 11,610 people who are smokers in this area.

Select your district or Norfolk:

Select your electoral division or district or Norfolk:

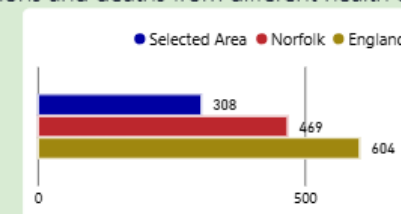


Alcohol

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

308

hospital admissions for alcohol specific conditions per 100,000 people



In the most recent 3-year period there were approximately 1,350 hospital admissions for alcohol specific conditions in this area.

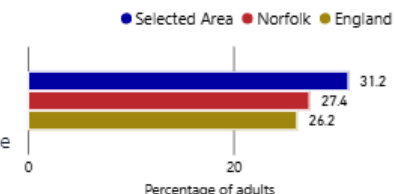
Healthy Weight

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



31%

of adults are predicted to be obese



In this area there are approximately 33,880 adults who are predicted to be obese and approximately 29,720 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

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

The burden of long-term conditions is moderate compared to coastal and urban areas but will rise with ageing demographics. Cardiovascular disease, dementia and respiratory conditions remain priorities for prevention and management.

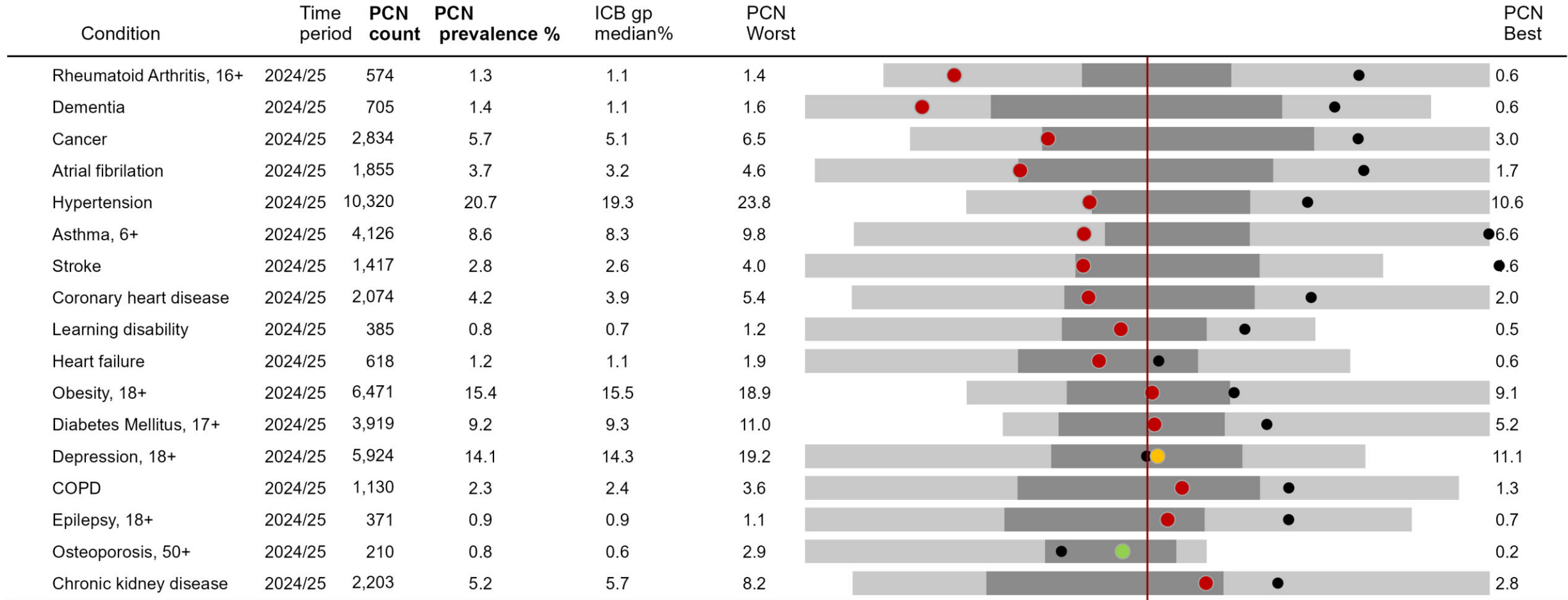
Unplanned hospital admissions are lower than in deprived areas but still significant for older adults.

	Period	England	Acle & Reedham	Blofield, Lingwood & Upton	Brundall & Cantley	Felmingham, Worstead & Happisburgh	Hoveton, Horning & Potter Heigham	Stalham & Sea Palling	Wroxham, Rackheath & the Plumsteads
Emergency hospital admissions: all causes	2016/17 - 20/21	100	67.7	78.9	96.7	63.5	68.7	81.9	69.5
Coronary heart disease: emergency hospital admissions	2016/17 - 20/21	100	73.8	92.4	58.1	78.4	77	87.1	54.1
Stroke: emergency hospital admissions	2016/17 - 20/21	100	93.6	121	114	99.9	101	104	90.8
Heart attack (myocardial infarction): emergency hospital admissions	2016/17 - 20/21	100	94.1	119	64.2	107	96.2	101	78
Chronic obstructive pulmonary disease (COPD): emergency hospital admissions	2016/17 - 20/21	100	54.5	66.9	42.4	36	44.1	84.9	22.5
Intentional self-harm: emergency hospital admissions	2016/17 - 20/21	100	60.8	73.1	74.9	49.1	120	165	122
Hip fracture: emergency hospital admissions (aged 65 and over)	2016/17 - 20/21	100	82	114	109	83.1	88.5	103	105
Alcohol-related conditions: admission episodes (all primary and secondary diagnoses)	2016/17 - 20/21	100	77.3	82.1	96.6	78.3	92.9	93.2	80
Hospital admissions for alcohol attributable conditions, narrow definition	2016/17 - 20/21	100	96.9	85.2	98.4	70.3	127	107	99.6

Long-term conditions

North Norfolk 4 PCN

This spine chart shows how North Norfolk 4 PCN, which overlaps most with this neighbourhood profile, 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 North Norfolk 4 PCN are placed on top of these summaries, allowing the viewer to compare it with all other local GP's for that measure. The circle colours red amber or green represent the PCN being worse, similar or better 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

North Norfolk 4 PCN



Diabetes Mellitus
prevalence, 17+
3,900



Chronic kidney
disease
prevalence, all age
2,200



Coronary heart
disease, all age
2,100



Stroke and
transient ischaemic
attack, all age
1,400

0 500 1,000 1,500 2,000 2,500 3,000 3,500 4,000 4,500

This chart shows the estimated number of patients with major long-term conditions within the North Norfolk 4 PCN.

Diabetes affects around 3,900 adults, and chronic kidney disease affects 2,200 people.

Stroke and transient ischaemic attack affect approximately 1,400 people.

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



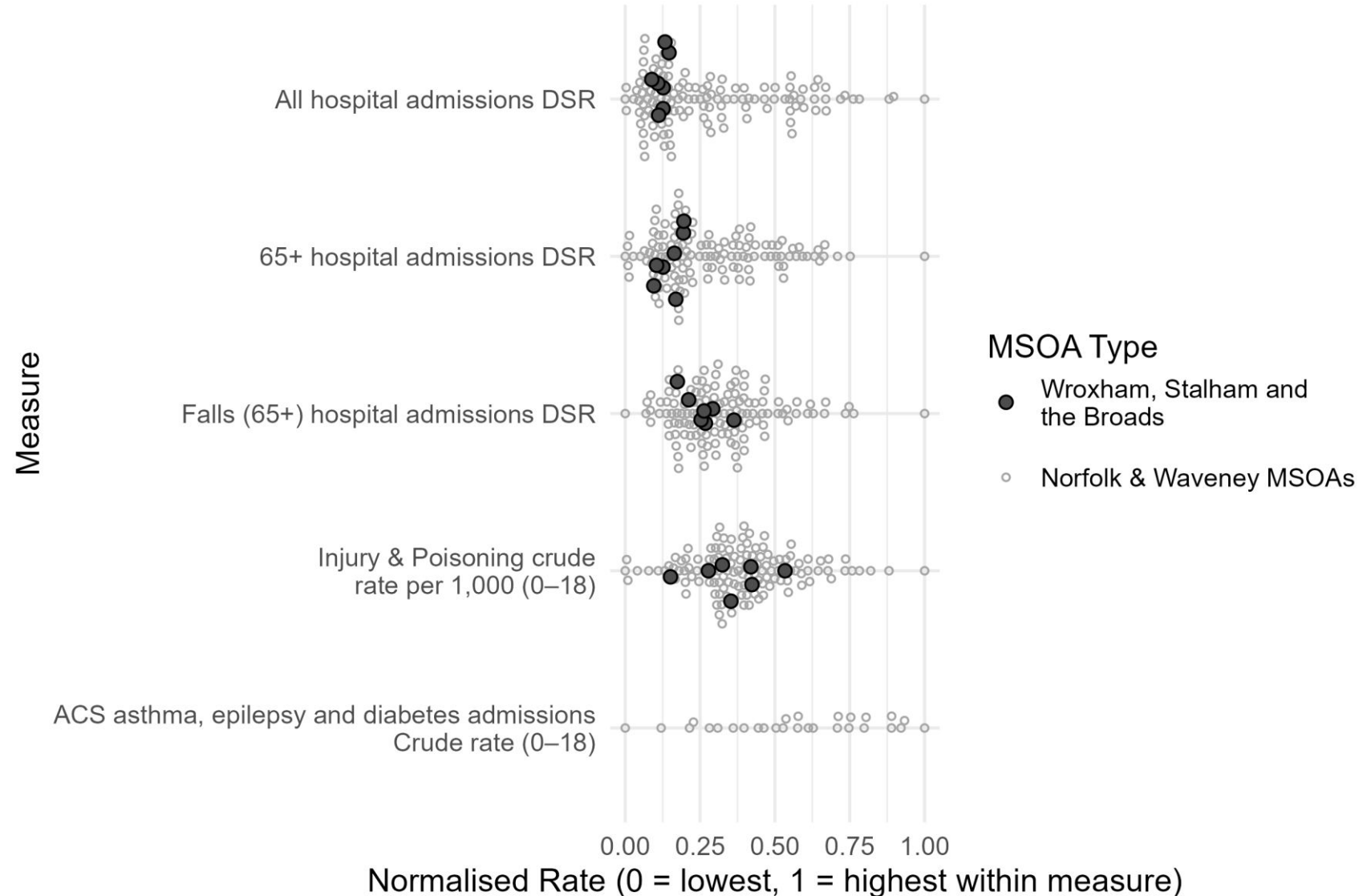
Norfolk
County Council

Infographics: healthicons.org

Healthcare - unplanned hospital admissions

Unplanned hospital admission rates in Wroxham, Stalham and the Broads are generally lower than those seen in more deprived coastal and urban areas, reflecting the neighbourhood's relatively better health outcomes. However, variation exists across MSOAs: older populations in rural and coastal communities contribute to higher admission rates for conditions such as falls.

Neighbourhood MSOA emergency hospital admission rate comparison



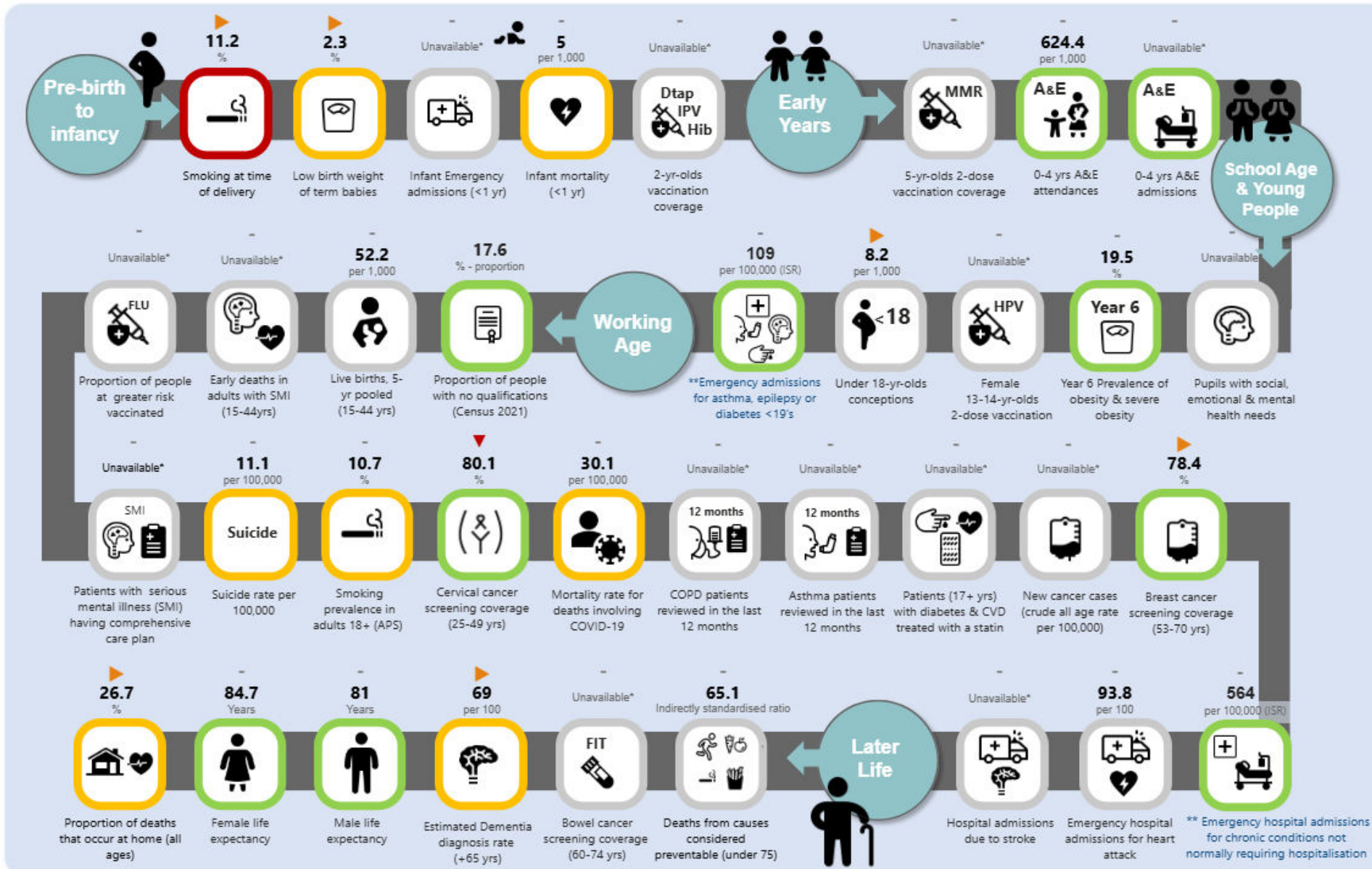
Healthcare - unplanned hospital admissions

Measure	Acle & Reedham	Stalham & Sea Palling	Brundall & Cantley	Felmingham, Worstead & Happisburgh	Hoveton, Horning & Potter Heigham	Blofield, Lingwood & Upton	Wroxham, Rackheath & the Plumsteads
All hospital admissions DSR	3,952	3,868	3,829	3,827	3,734	3,717	3,588
65+ hospital admissions DSR	8,462	8,745	8,760	8,408	7,990	7,752	7,650
Falls (65+) hospital admissions DSR	1,508	1,563	1,725	1,475	1,380	1,497	1,295
Injury & Poisoning crude rate per 1,000 (0–18)	14.4	8.5	10.4	11.1	12.7	12.6	11.6
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 – Broadland



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.

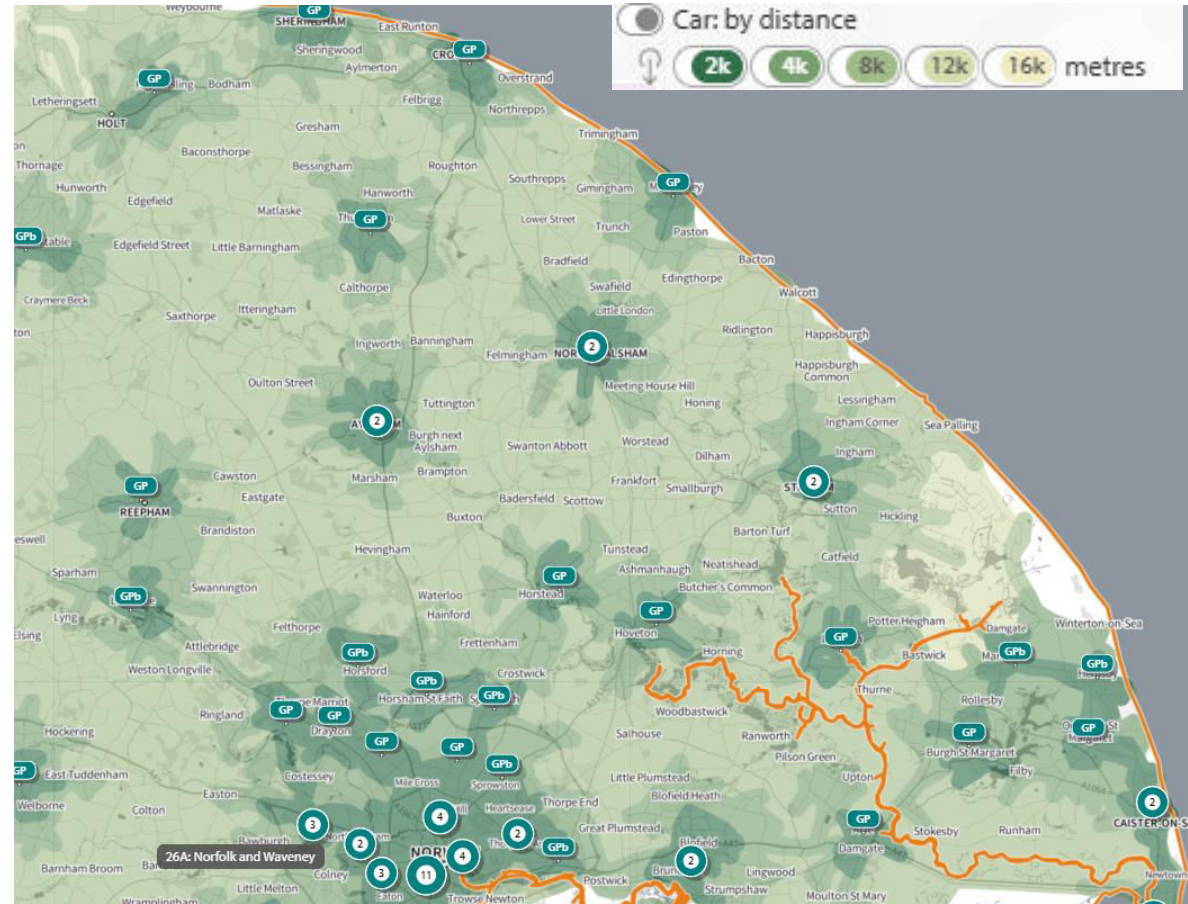
**There is an exception for NHS Outcome metrics marked with asterisks which compare to a 2012 England baseline.

Services and access

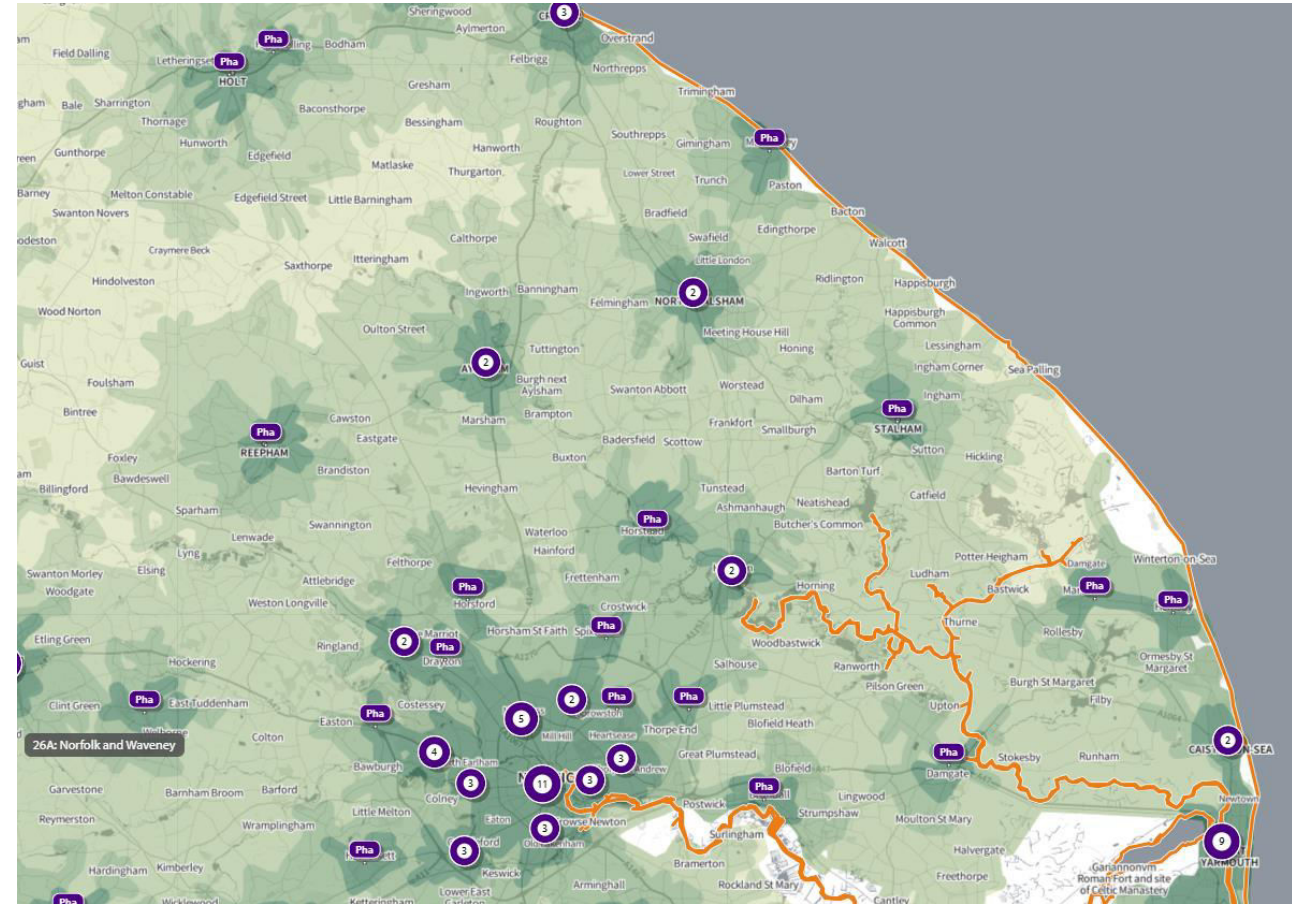
- This section looks at access to health and community services, which is critical for addressing inequalities.

Access to primary care and pharmacies

Travel distance to GPs

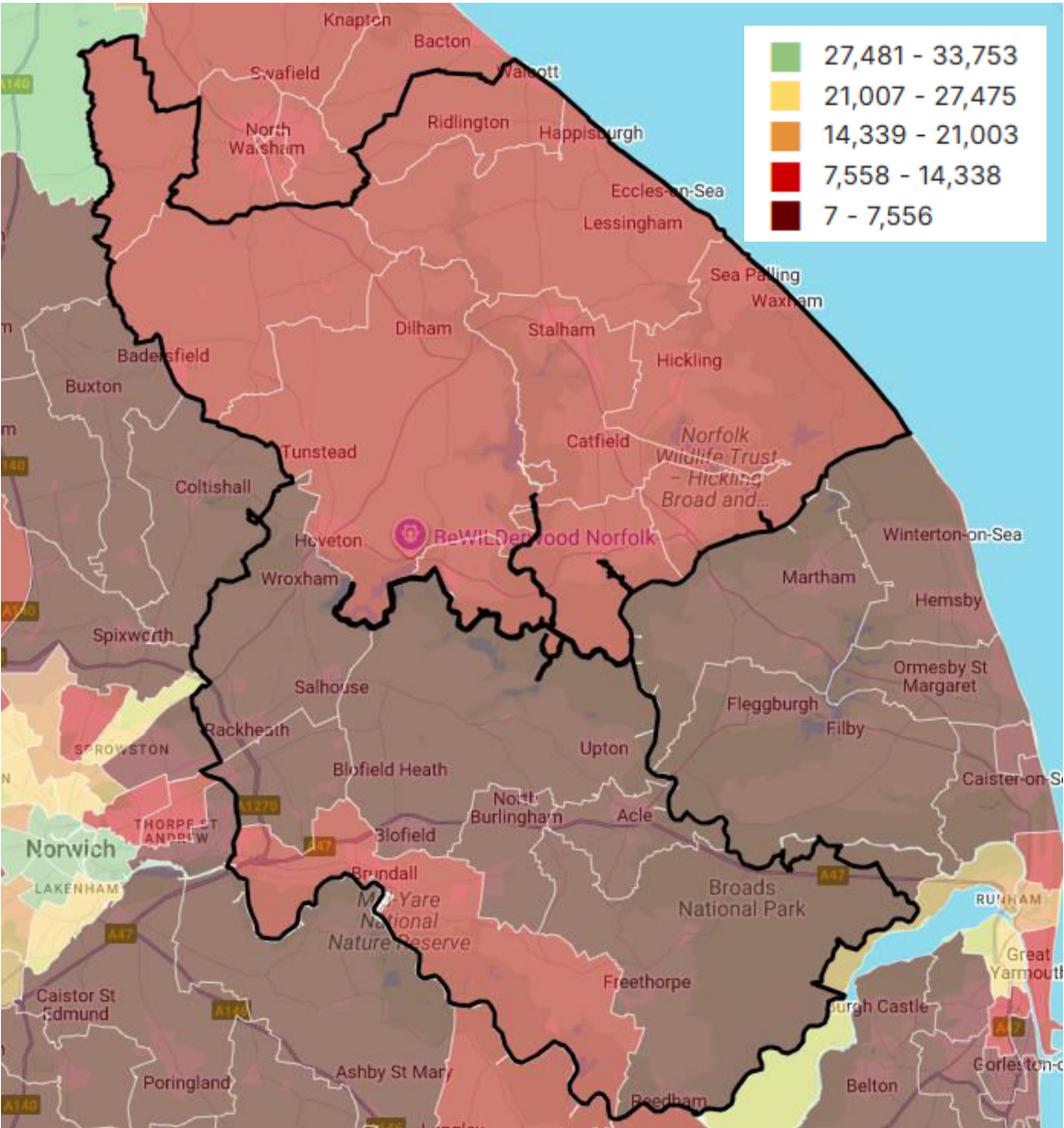


Travel distance to pharmacies



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

Civic Assets



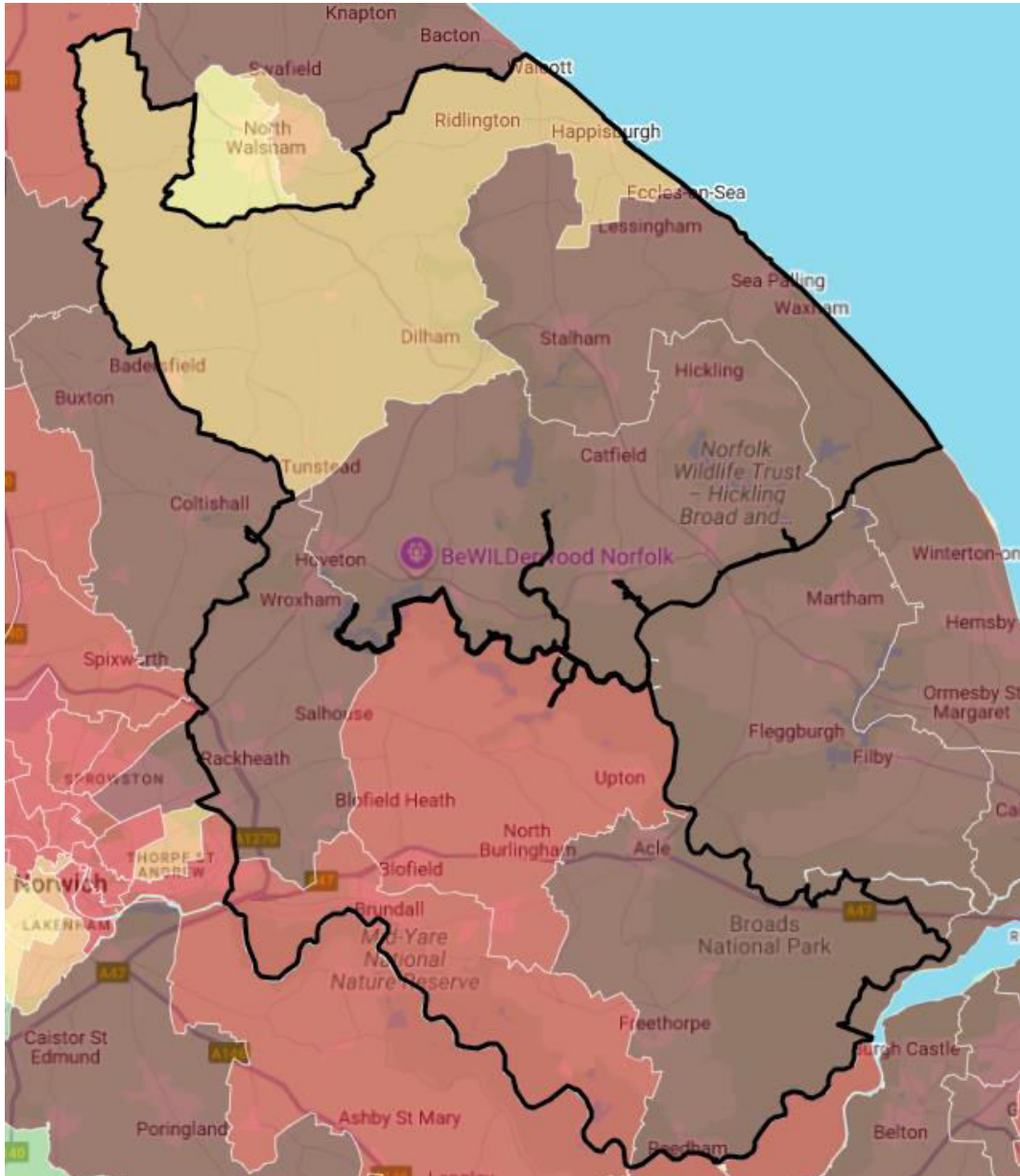
This map shows the Community Needs Index and civic assets ranking, which reflect the availability of community infrastructure and its role in wellbeing.

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



- 36.18 - 77.65
- 29.14 - 36.17
- 22.88 - 29.13
- 16.71 - 22.87
- 1.44 - 16.70

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

Summary

Wroxham, Stalham and the Broads – Key Headlines

Population & Deprivation:

- Ageing population; low deprivation overall but rural isolation risks.

Health Outcomes:

- Life expectancy above England average; inequalities between MSOAs.

Behavioural Risks:

- Lower smoking and obesity rates; positive child health indicators.

Disease Burden:

- Moderate LTC prevalence; ageing trend will increase demand.

Wider Determinants:

- Low economic activity; housing stability; variable benefit dependency.

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.