



Suffolk in 20 years – healthy, wealthy and wise? Summary

December 2023



Introduction

- This forms the ‘Suffolk +20 years’ evidence base
- Key trends (economy, demography, physical health, mental health, housing, inequalities) which will influence Suffolk’s future – ongoing work...
- This is not all-seeing and all-knowing – and things will change over time – think of it as a ‘do nothing’ scenario
- What do we need to take account of in our work to support and enable sustainable communities across Suffolk?

National context

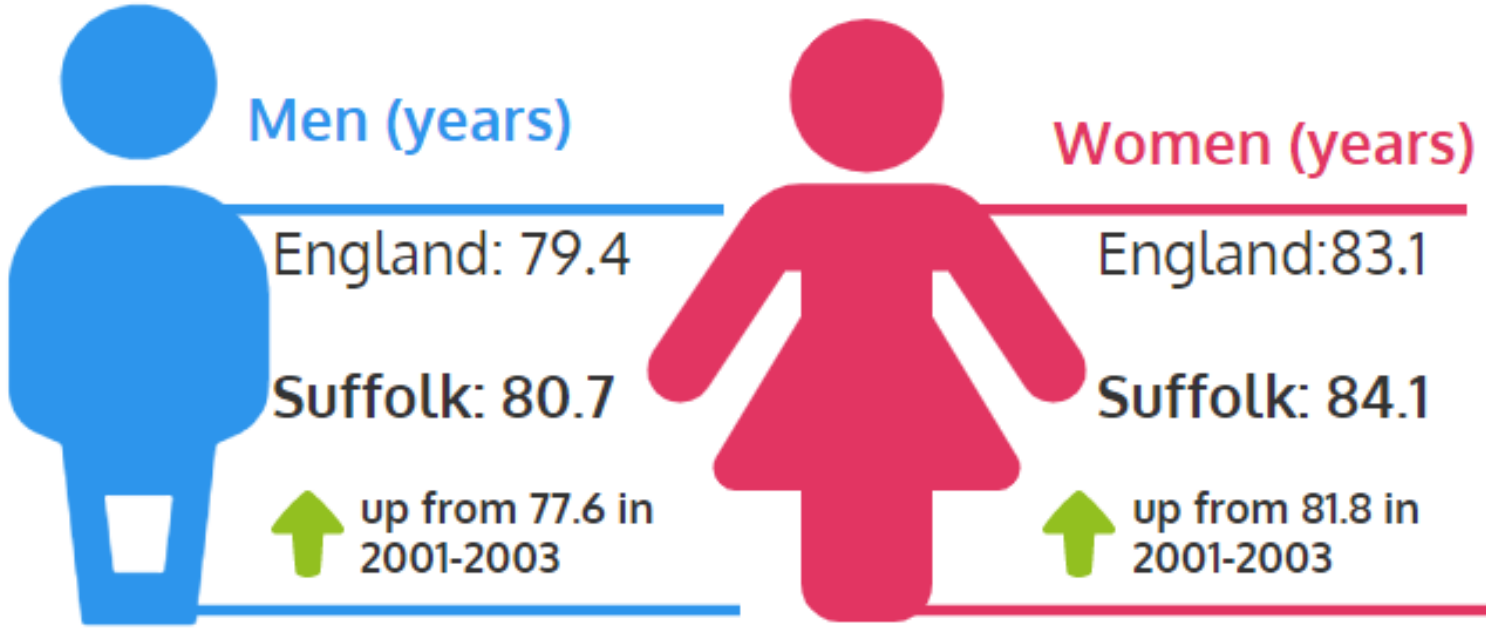
1. Life expectancy is stalling, and health inequalities are widening
2. Key risk factors are driving a significant and unequal burden of preventable ill health and premature death
3. People are living for longer but with major health conditions
4. Unmet need for NHS and social care services is substantial and increasing
5. Long-run trends in health and care spending show a decade of underinvestment
6. The health system lacks capacity compared with many other countries
7. Staff shortages are persistent, with stress and burnout high
8. Public satisfaction with the NHS is at a record low, but support for its core principles remains rock solid
9. The NHS is repeatedly reorganised, while social care is overlooked
10. Policy choices made by the next government will shape the future of the nation's health

Source: [Nesta UK 2040 options](#), [BBC news](#), [CMO annual report 2023](#)



Suffolk today is ***generally***, healthy with life expectancy above the England average. Women typically live longer than men.

2018-20 Life expectancy at birth:



BUT! Life expectancy in Suffolk HAD been steadily increasing from 2001-03. Life expectancy for men and women in Suffolk is now at the same level as 2012-14.

Life expectancy for women in Suffolk did not increase compared to 2015-17, whilst life expectancy for men DECREASED by 0.2 years over the same period.

Source: OHID; [Fingertips](#)

Our internal population health management (PHM) dataset, enables us to look at more detailed healthy life expectancy data.

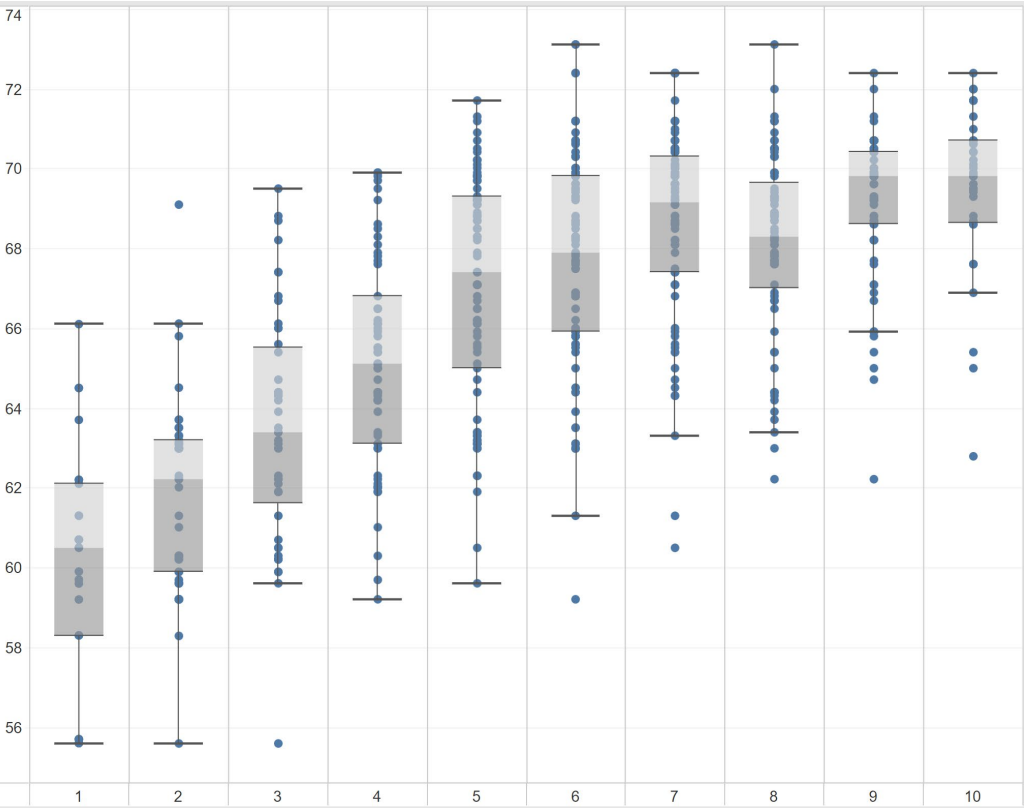


Healthy life expectancy is significantly lower for people living in areas of greater deprivation (1 is most deprived) in Suffolk (data excludes Waveney).

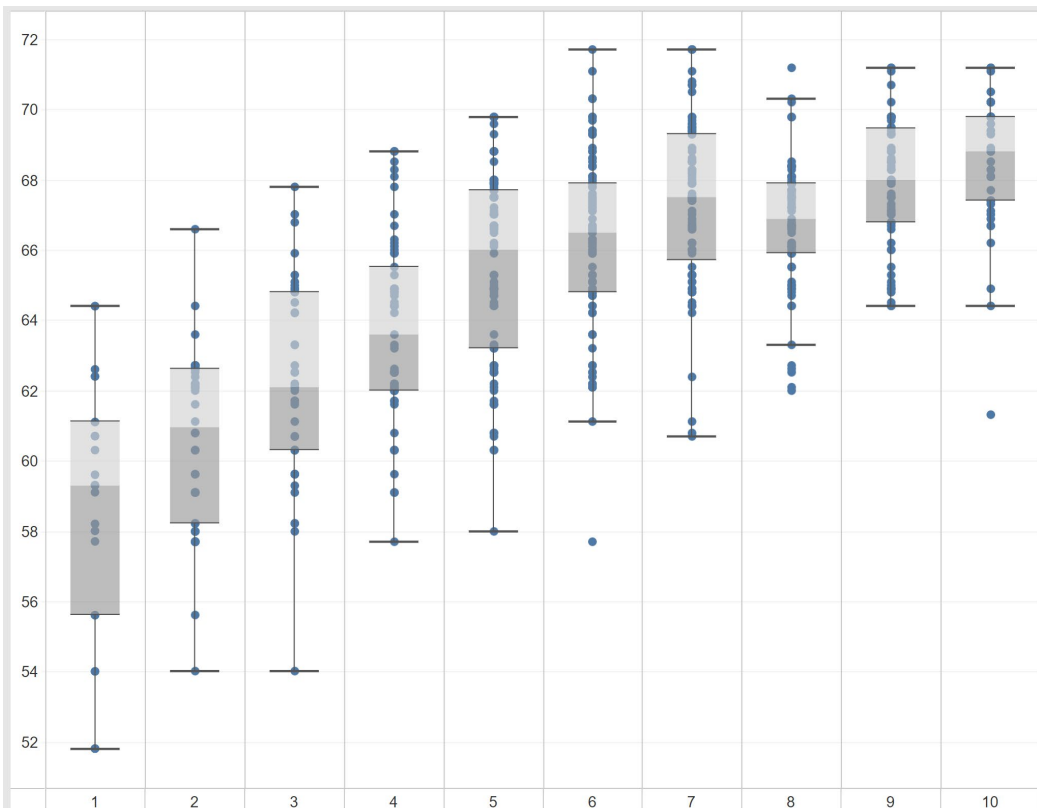
Male healthy life expectancy

Note the vertical axis are different scales

Female healthy life expectancy



Box and whisker diagrams
The median life expectancy in each group is the central line that separates the two shades of grey. The two grey boxes show the interquartile ranges (second and third quartiles). The “whiskers” show the maximum and minimum values (excluding outliers).



1 most deprived

10 least deprived

1 most deprived

10 least deprived

Source: Optum PHM Dashboards, population of the two Suffolk alliance areas, SNEE population, Sep '22 – Aug '23

Suffolk is just outside the least deprived third of local Authorities in England, with unemployment rates generally lower than regional and national rates...

Suffolk's Index of Multiple Deprivation ranking, 2019:



Suffolk, East of England and Great Britain unemployment rates, June 2023



12 of the 22 areas in the 10% most multiple deprived areas of England are in Ipswich. The other 10 are all in the Waveney area of East Suffolk.

...but Suffolk residents are less likely to be employed in more highly skilled occupations ...

All in employment by occupation (SOC2020), Jul 2022 - Jun 2023 (%)

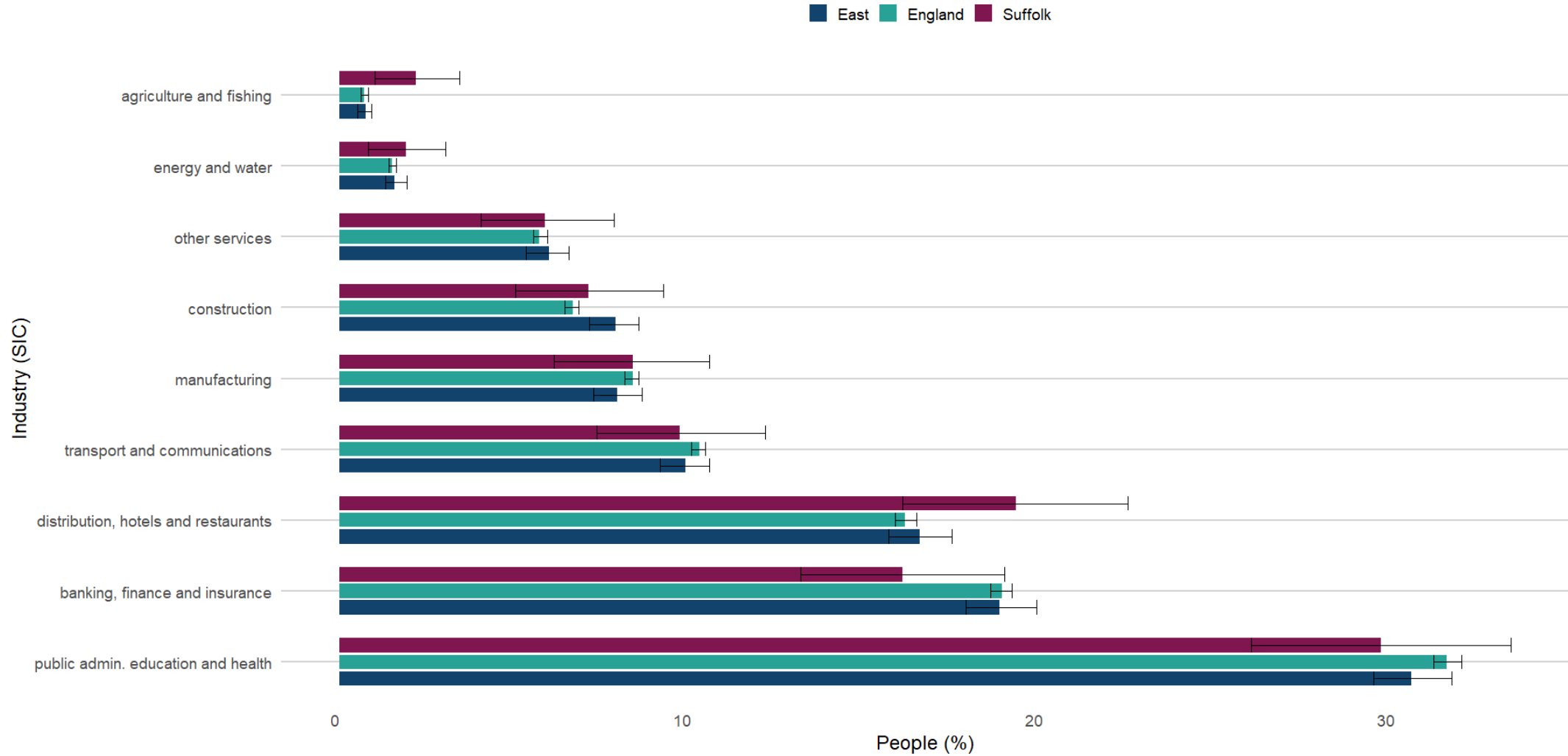


- 1: managers, directors and senior officials
- 2: professional occupations
- 3: associate professional occupations
- 4: administrative and secretarial occupations
- 5: skilled trades occupations
- 6: caring, leisure and other service occupations
- 7: sales and customer service occupations
- 8: process, plant and machine operatives
- 9: elementary occupations

Compared to England, Suffolk has a statistically significant lower percentage of people working in “professional occupations”, and a statistically significant higher percentage of people working in “caring, leisure, and other service occupations”.

Source: [Employment, economy & skills Suffolk summary](#) (data from the Annual population survey ONS via Nomis)

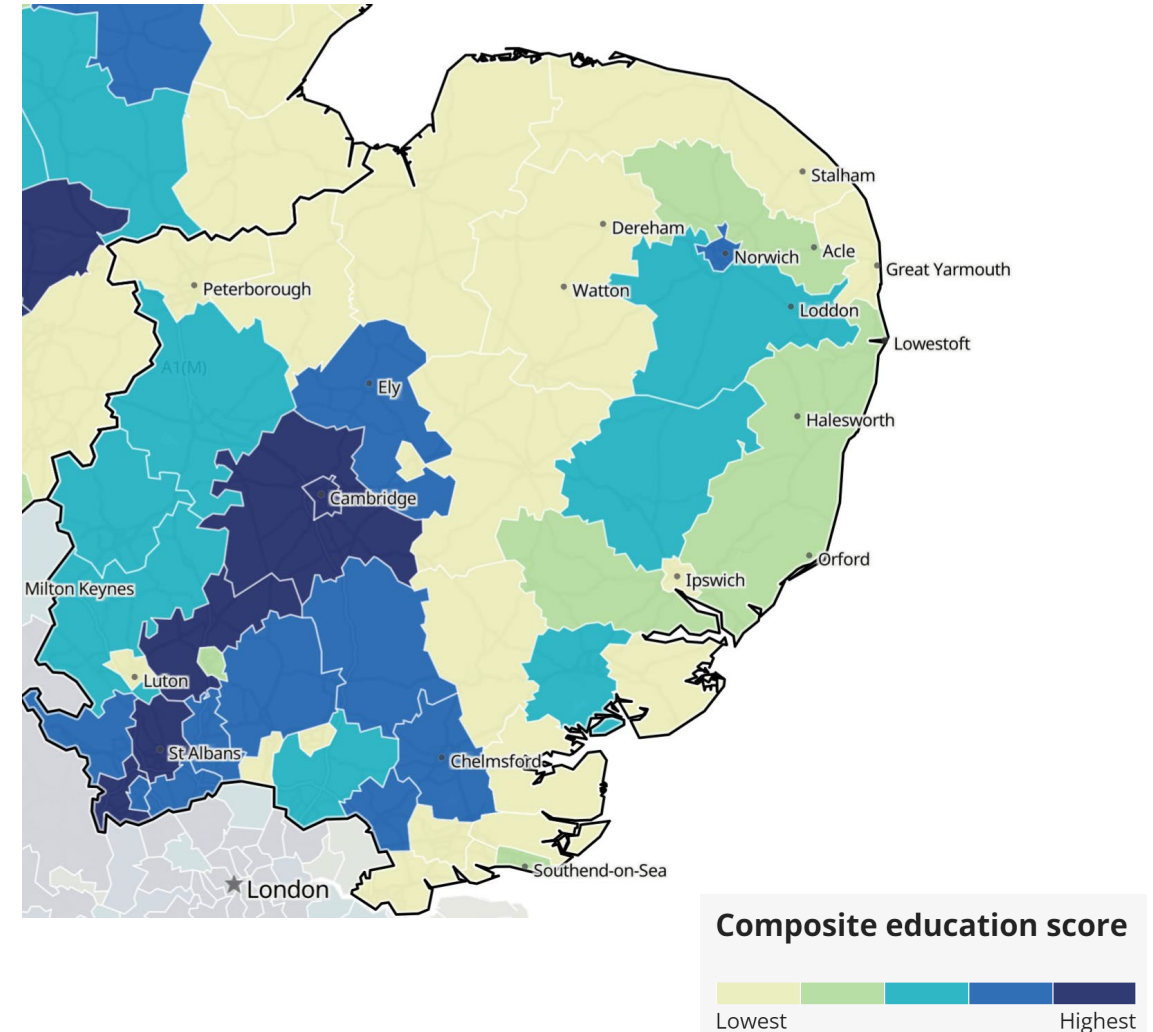
...and, compared to England, are more likely to work in primary industries such as agriculture...



Source: [Annual population survey](#) ONS via Nomis

Suffolk residents are also more likely to have no formal qualifications...

- If professional jobs requiring expert training were readily available in all areas, the distribution of people with high-level qualifications should be fairly even.
- Areas with less-qualified workforces may have a poorer economy, or fewer well-paid jobs.
- Coastal areas struggle to attract and retain highly qualified workers.
- West Suffolk (282) and Ipswich (291) are in the bottom 20% of areas in England for composite education score. West Suffolk's education profile is most similar to Bolton (ranked 20 places higher – better – than West Suffolk).

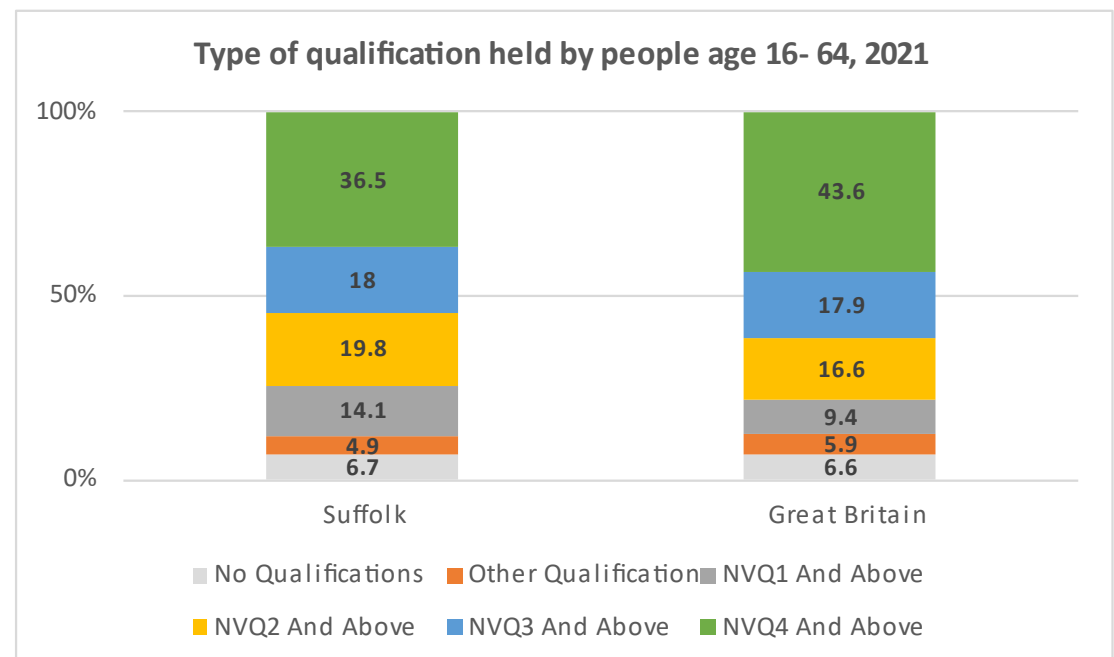
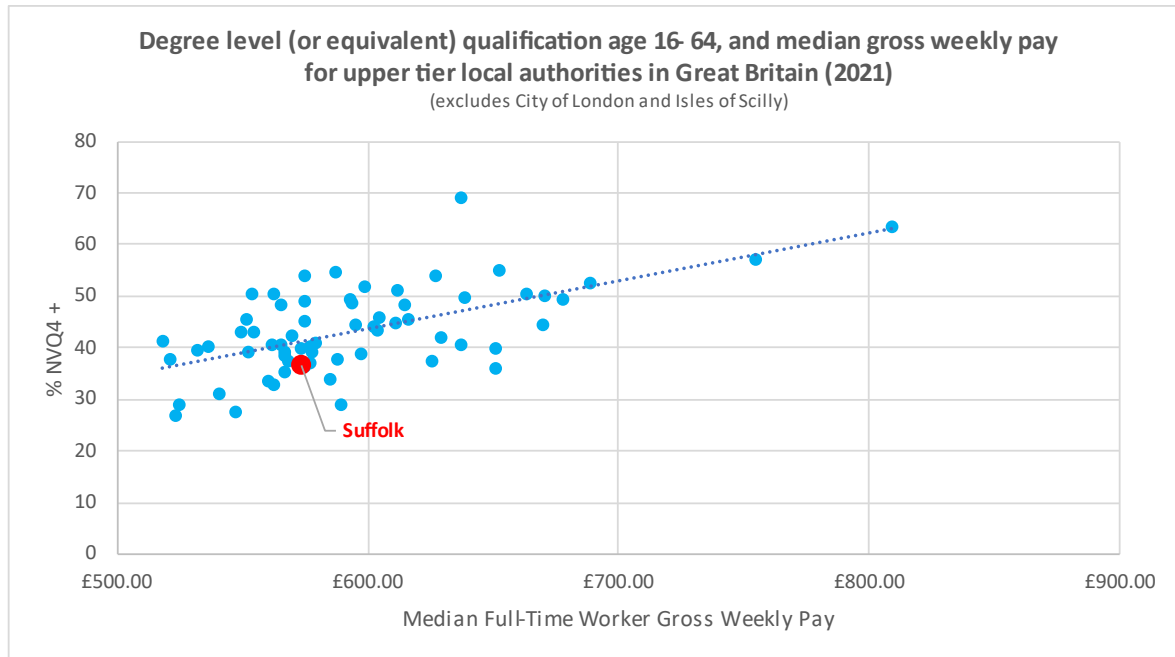
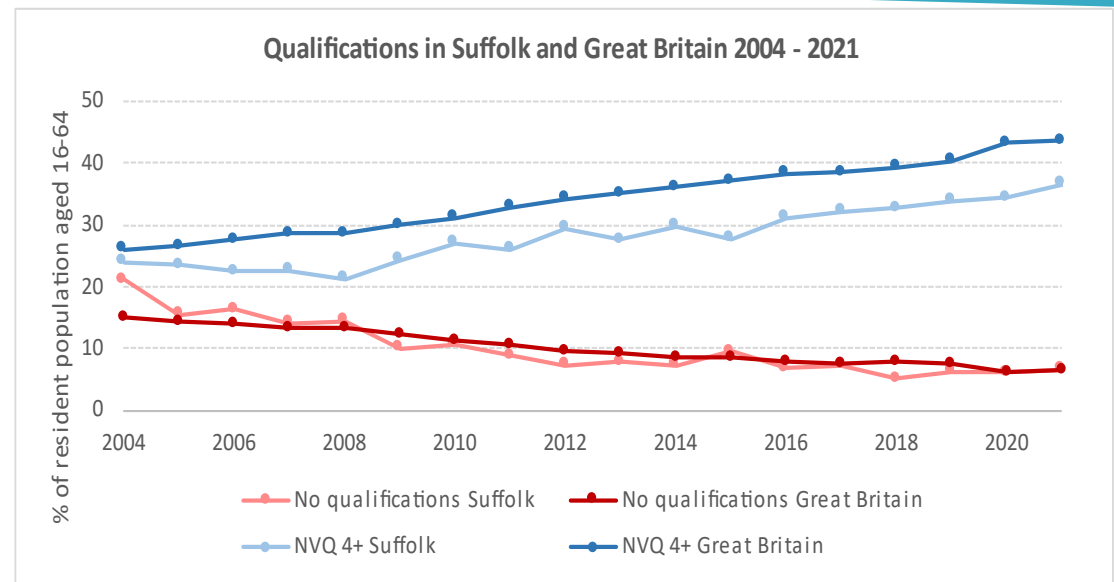


Note: Level 4 qualifications are higher than A levels

Source: [Census 2021 qualifications](#) (ONS)

...this fits with our lower levels of gross weekly pay...

- Degree qualifications have been increasing but remain below the national average – this correlates with the low levels of pay in the county
- Suffolk has similar levels of people lacking any qualifications compared to the national average



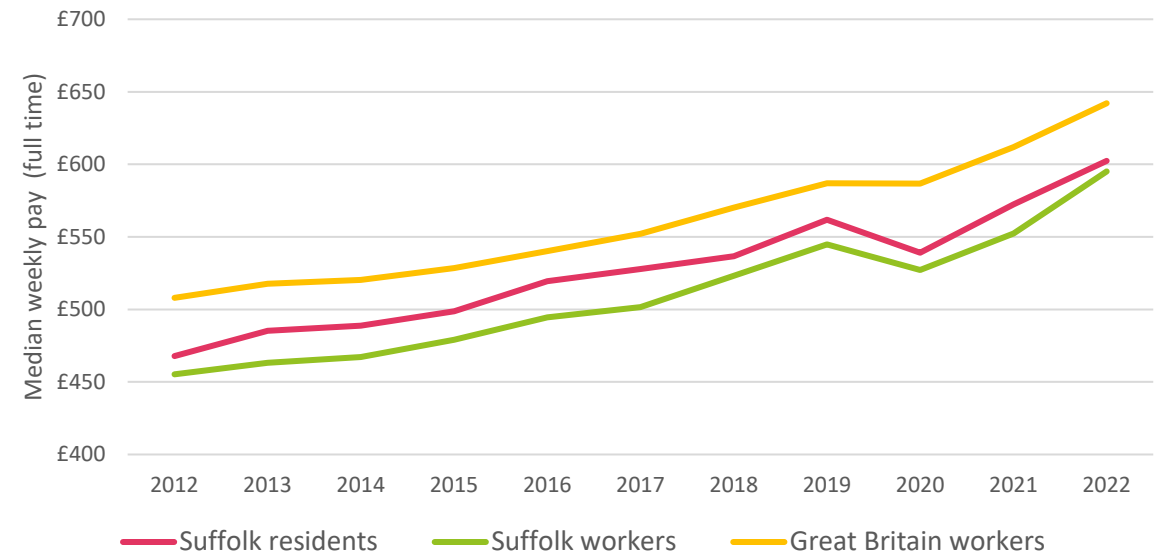
Source: [Nomis qualifications](#), [Nomis - Annual Survey of Hours and Earnings 2021](#)

... particularly for those who live and work in Suffolk, as many people commute out of the county for higher pay.

Median gross weekly full-time pay comparison 2022:



Median weekly for residents and workers, 2012-2022

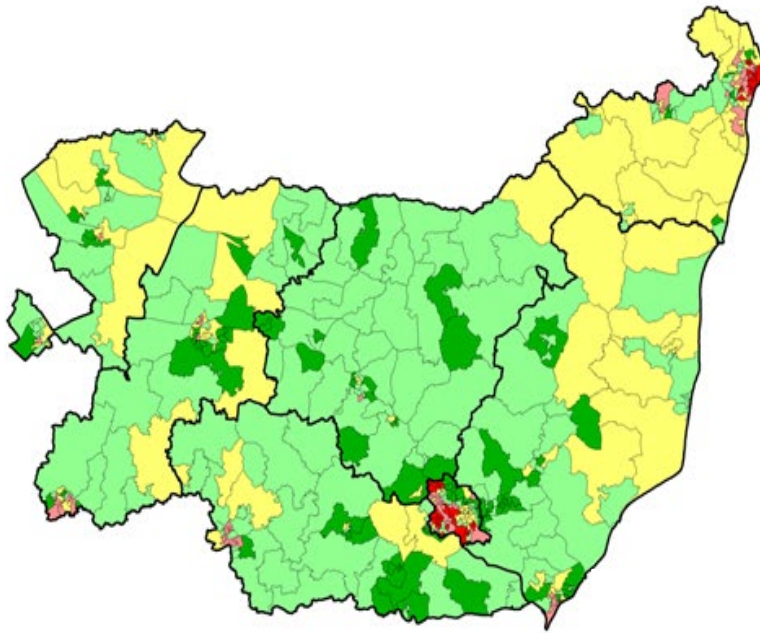


- In 2022, people who worked full time in Suffolk earned on average **£40 per week less than the Great Britain average**.
- The pay gap between Suffolk workers and residents is narrowing.
- There was a sharper drop in median pay for Suffolk residents and workers during the pandemic year of 2020 compared to Great Britain workers.
- For both Suffolk workers and residents, the average pay gap to Great Britain workers has increased compared to 2019.
- Suffolk is an attractive place to live, with workers choosing to live in the county but commuting out of county for the higher salaries not available locally.

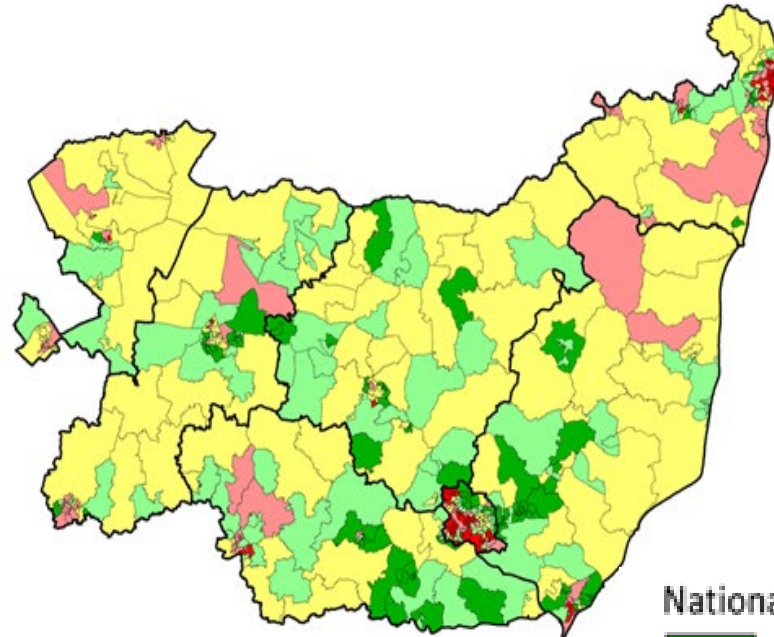
Source: Nomis - Annual Survey of Hours and Earnings 2022 – [Suffolk residents](#) and [Suffolk workers](#) 11

Relative deprivation levels rose in Suffolk before COVID. Deprivation is hard to measure in Suffolk, due to the rurality of much of the county and the sparsity of some of our population groups.

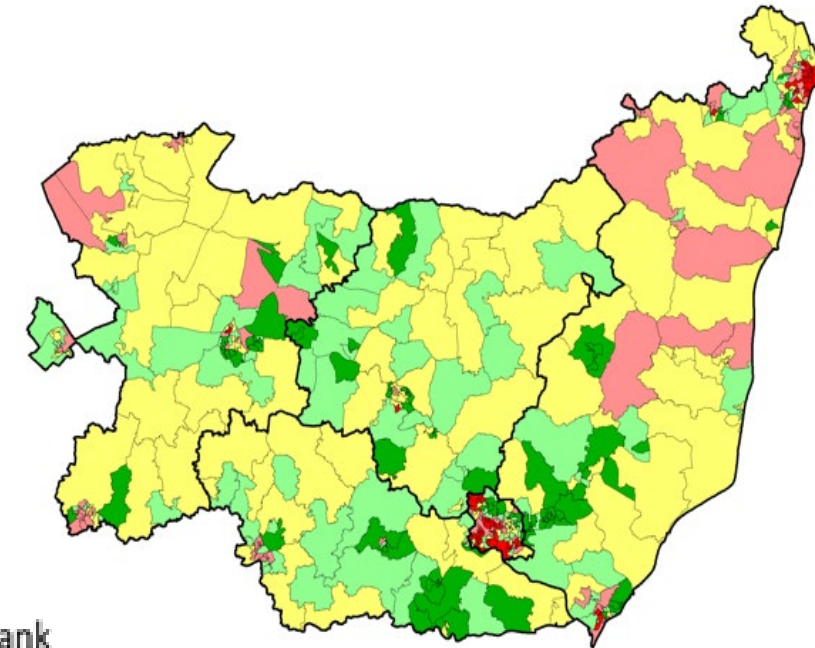
2010



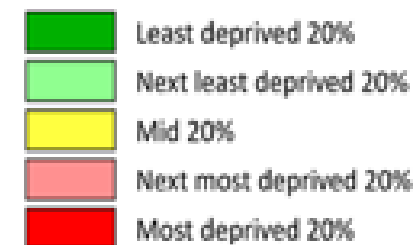
2015



2019

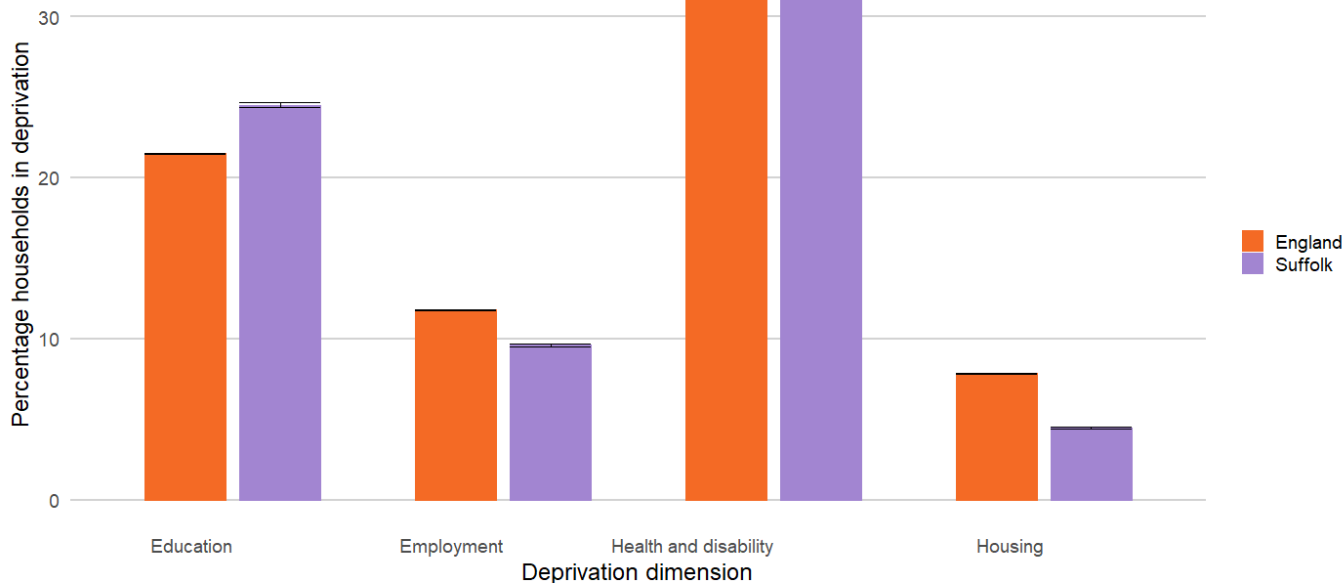


National Rank



During the pandemic, census data on deprivation shows Suffolk households were more likely to be considered deprived in education than England as a whole...

Deprivation by dimension (% households), Suffolk and England, 2021 Census



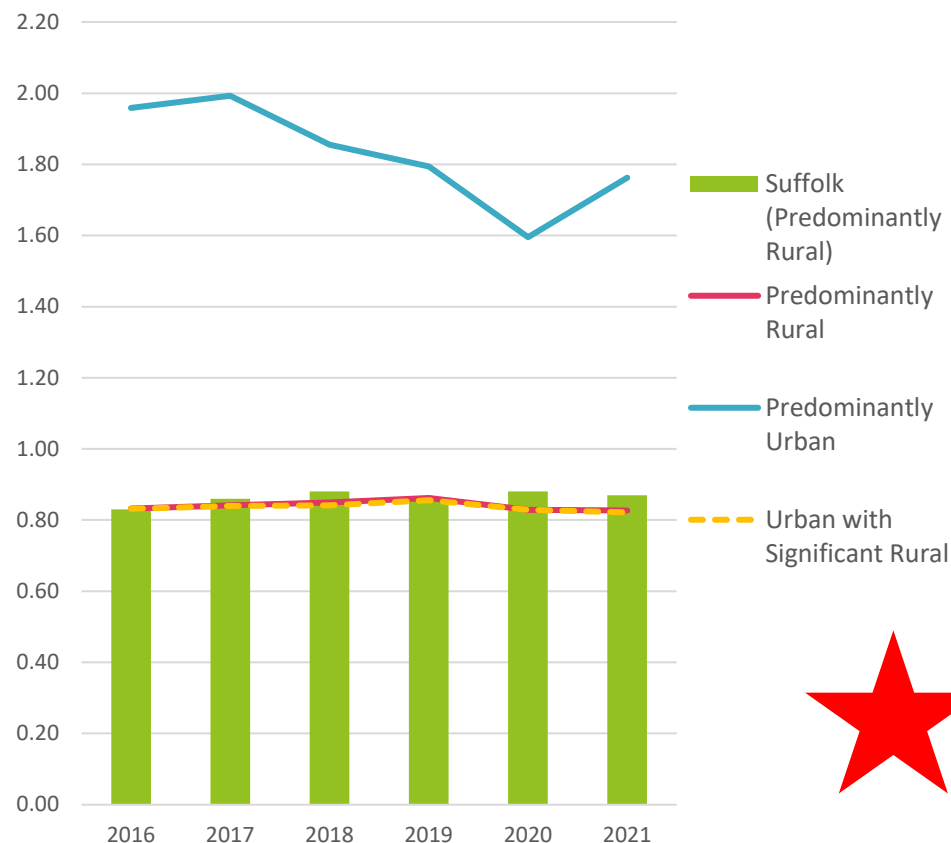
Error bars denote 95% confidence intervals using Wilson method

Local data indicates: Over a third of people aged 16 and over in Lakenheath have no qualifications (34.9%), and over a quarter of people in Brandon (28.4%) and in Gainsborough, Greenwich and Orwell (27.7%)

- The census deprivation data is calculated differently to the Index of Multiple Deprivation (IMD). Nevertheless, it helps to give an idea of local deprivation. Especially as the IMD is not being refreshed until 2024.
- A household is classified as deprived in the education dimension if no one has at least a level 2 education and no one aged 16 to 18 years is a full-time student.
- A household is classified as deprived in the employment dimension if any member is either unemployed or economically inactive due to long-term sickness or disability.

Structural factors such as low jobs density and relatively low levels of education and skills are contributing to very low social mobility in many areas of Suffolk.

Jobs Density in Suffolk and comparators:



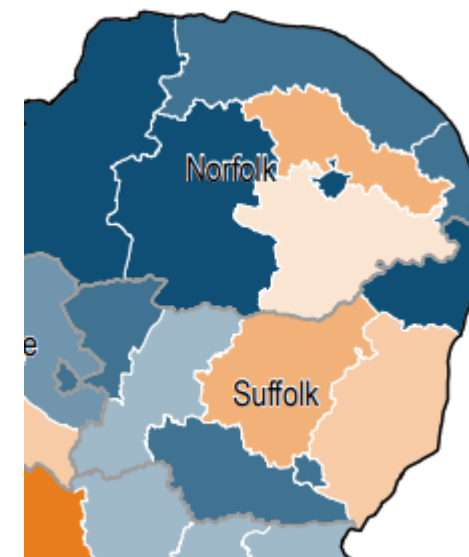
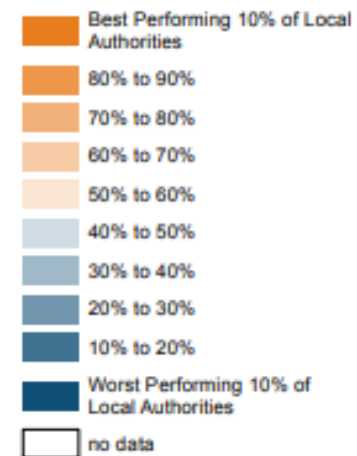
Access to many services and to wider opportunities may be limited, either by distance, lack of provision due to population sparsity, transport difficulties, or a lack of infrastructure.

Jobs density in urban areas, for example, can be up to 2 times greater than in rural areas.

The 2017 Social Mobility Index identified 4 out of Suffolk's 7 Districts and Boroughs as being in the worst 20% for **social mobility** nationally, driven by poor outcomes at school age and in adulthood.



2023 Social Mobility Index data indicates that East Anglia (this includes Suffolk, Norfolk, Cambridgeshire & Peterborough) is in the **bottom quintile** for '**promising prospects**'. This composite indicator looks at qualifications, earnings and occupation level.



Sources: [Nomis – Jobs Density](#)

'Suffolk Economic Factsheet', Rural Services Network; 'Hidden Needs 2011', Suffolk Community Foundation; <https://www.gov.uk/government/publications/state-of-the-nation-2022-a-fresh-approach-to-social-mobility>

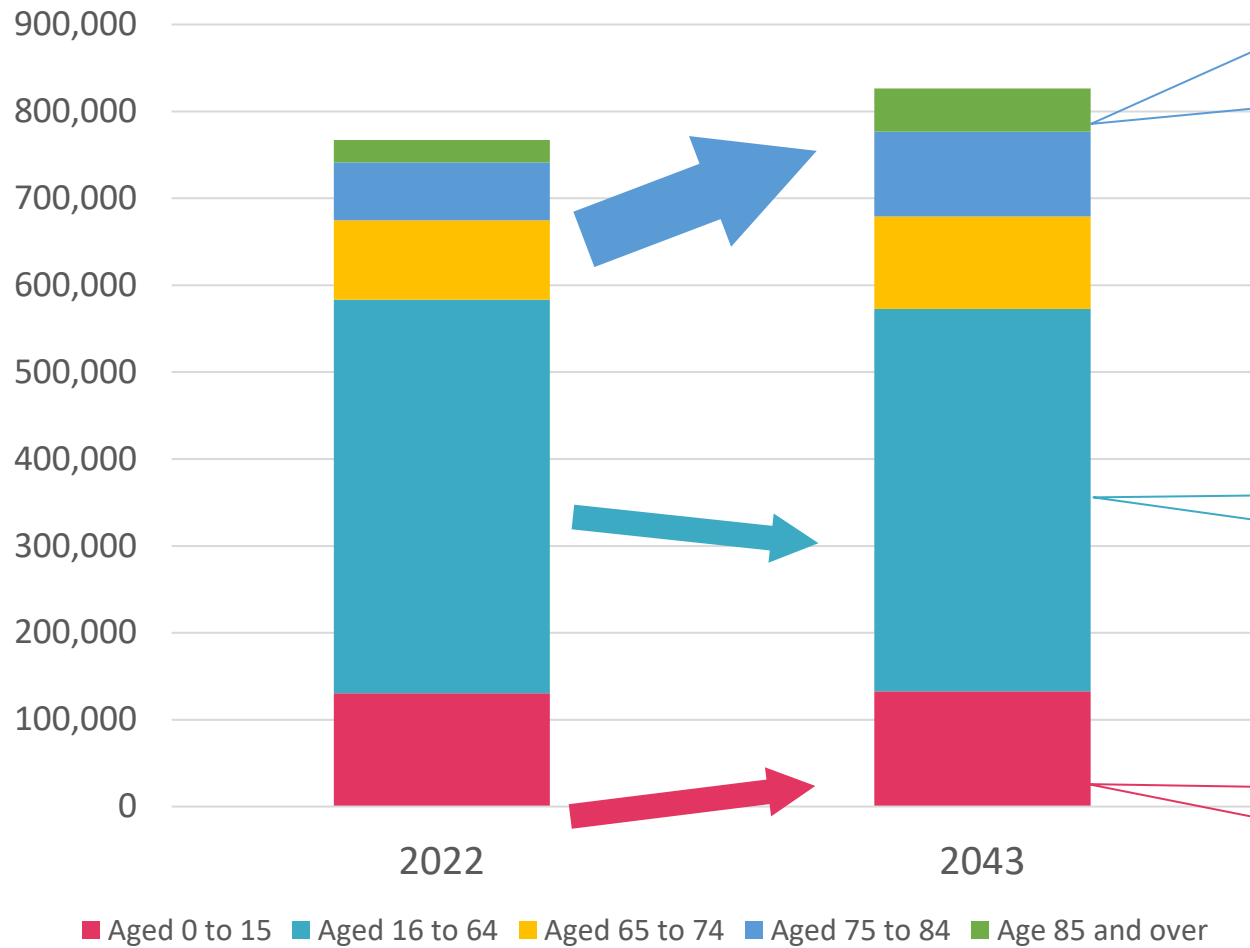
Social Mobility Data Explorer (2022) https://social-mobility.data.gov.uk/social_mobility_by_area/east_anglia

Suffolk's total population is projected to increase by nearly 8% over the next 20 years; but the number of older people increases by 38%

38% increase in people aged 65+

3% decrease in people of working age

2% increase in children & young people



The 65+ age group accounts for most of the population increase in Suffolk over the next 20 years. The biggest growth will be numbers of people aged 75 and over. The number of people aged 85 and over is expected to be around 50,000 - almost double 2022.

The working age population is expected to **DECLINE** slightly – with implications for the local economy...

Change – an **INCREASE** of 2,200 in the child and young person population (had projected a 4% decline 2022 to 2042).

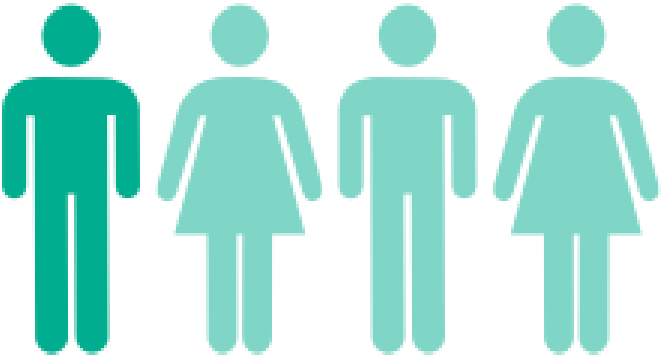
Source: ONS [population estimates \(2022 released 2023\)](#) and [projections - local authorities - 2018-based](#)



Suffolk will have nearly **1 in 3** people aged over 65 in 20 years' time.

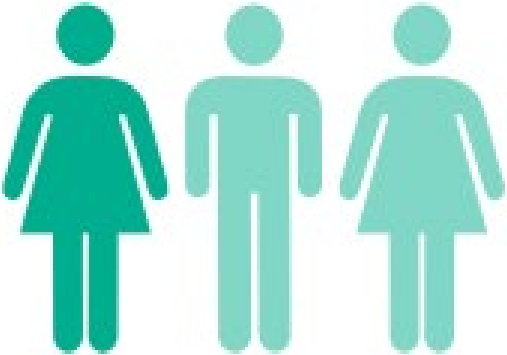
Now...

nearly 1 in 4 people aged 65 and over (5 years ago it was closer to 1 in 5)



In 20 years...

1 in 3 people aged 65 and over ...and nearly 1 in 5 people will be aged 75 or over



Suffolk's population has aged since the 2011 Census.
The **median age** in East Suffolk and Babergh is now 49, while in Ipswich it is 38.

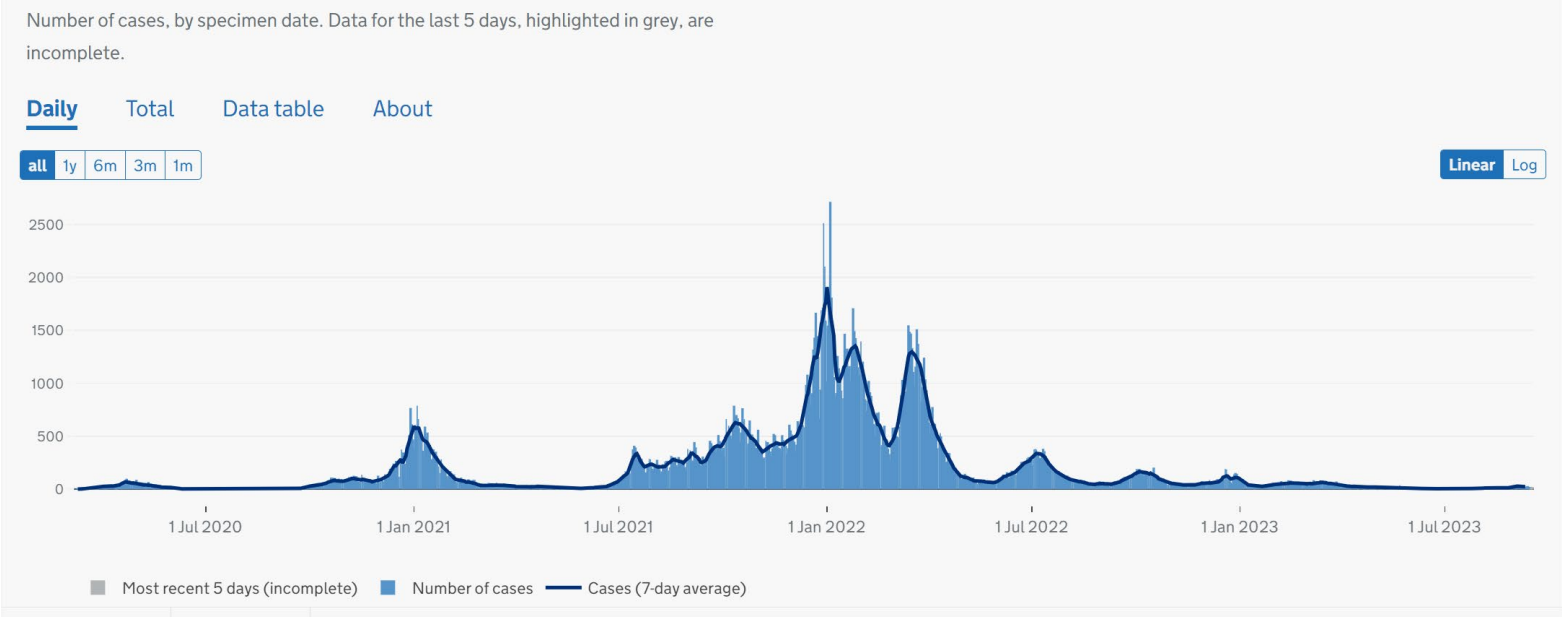
Source: ONS [population estimates \(2022 released 2023\)](#) and [projections - local authorities - 2018-based, Census maps](#)

Yet even with all these amazing advances in healthcare, catastrophic threats to health remain. This is the story of Covid-19 in Suffolk...

252,030 people tested positive for COVID-19 in Suffolk between May 2020 and Sep 2023

People in Suffolk’s more socio-economically deprived communities are **more likely** to catch C-19 - and are **less likely** to be vaccinated

In January 2021, C19 patients in Suffolk were occupying **835** general hospital beds and **104** HDU/ITU beds. On 28 September 2023, there were **60** patients with C19 (0 HDU/ITU)



Over **55,000** people were on the Clinically Extremely Vulnerable list

Since 1 January 2023, **260** Suffolk deaths have been attributable to COVID-19, of which **194** occurred in hospital and 43 occurred in care homes.

As at March 2023, **22,000** people may now be living with long COVID (2.9% population, self-reported; symptoms lasting longer than 12 weeks following infection) but only **718** are recorded in PHM data for Suffolk (figures not available for Waveney)

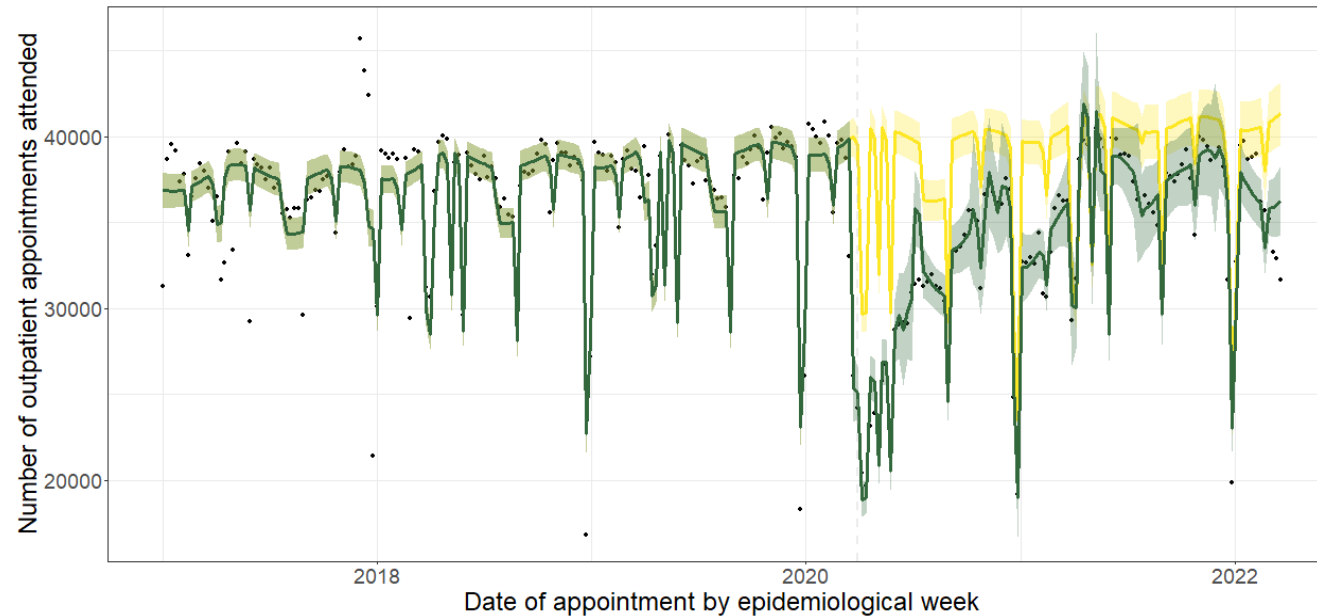
... and there were both direct and indirect impacts of COVID-19, particularly in relation to long covid and because people could not access healthcare in a timely manner.

Numbers of outpatient appointments attended by Suffolk residents (green line) were significantly lower than what would have been expected had there not been the pandemic (yellow line - counterfactual)

500,000 outpatient appointments that would have been expected to take place between March 2020 and March 2022 did not occur

Equivalent to **13** weeks' worth of outpatient care in "normal times" - outpatient care gap

Interrupted time series model output for attended outpatient appointments by Suffolk residents
Data taken from NHS Hospital Episode Statistics outpatients datasets
- downloaded on 2022-10-26



Although Suffolk fared significantly better than the East of England regional average, these indirect impacts may continue to be felt for years to come

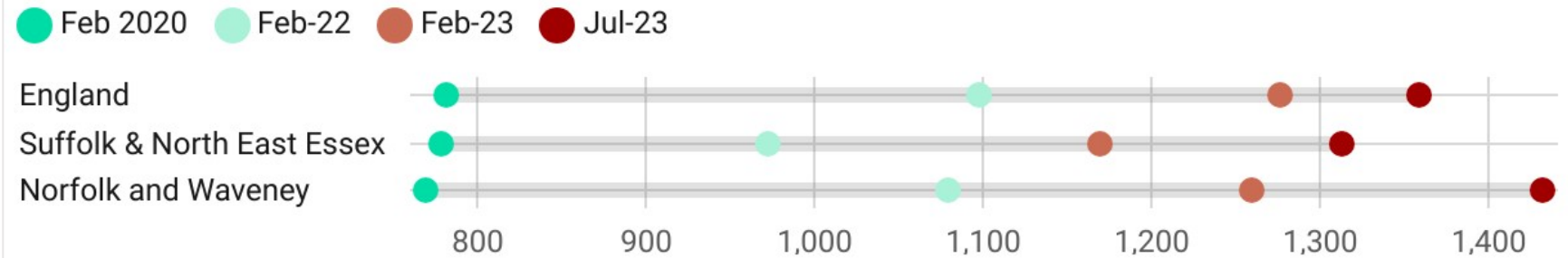
Ophthalmology, trauma & orthopaedics and ENT have among the highest care gaps by treatment specialty for Suffolk residents

Sources: Public Health Suffolk analysis of NHS Hospital Episode Statistics outpatient data

... the direct and indirect impacts of COVID-19 as well as pressures on the NHS including, potentially, strikes, are still being felt

Number of elective referrals waiting for treatment per 10,000 population: Suffolk ICS and England, February 2020 to July 2023

Based on Nuffield Trust analysis



Population figures 2020 MYE (ONS), incomplete pathways (NHS)

Chart: KI&E, PH&C, SCC • Source: NHS • Created with Datawrapper

In July 2023, **5,427** (Norfolk and Waveney) and **4,040** (Suffolk and North East Essex) adults were waiting for support from community musculoskeletal services

11.6% patients registered in Suffolk (excluding Waveney and Lowestoft) were on a waiting list (Sep 2022 – Aug 2023), rising to over a quarter **25.5%** for people who were in their eighties. This age group (80-89) also had the highest percentage of patients on multiple waiting lists (6.8%) and the highest percentage on an urgent waiting list (5.9%) compared to other ten-year age bands.



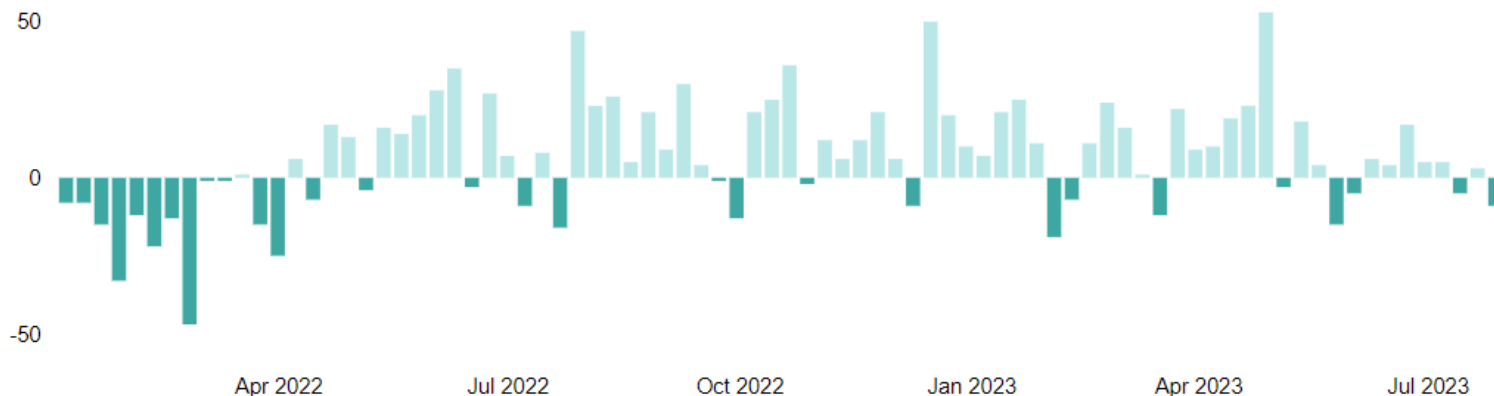
Sources: Public Health Suffolk analysis of NHS [referral to treatment waiting times](#), Optum PHM dashboard

Excess mortality in recent months is a national and local issue, and this could possibly be linked to outpatient and other care gaps (diagnostics, surgery, drug therapies) . Excess deaths (not due to COVID-19) have been recorded in England in almost every week since 15th April 2022

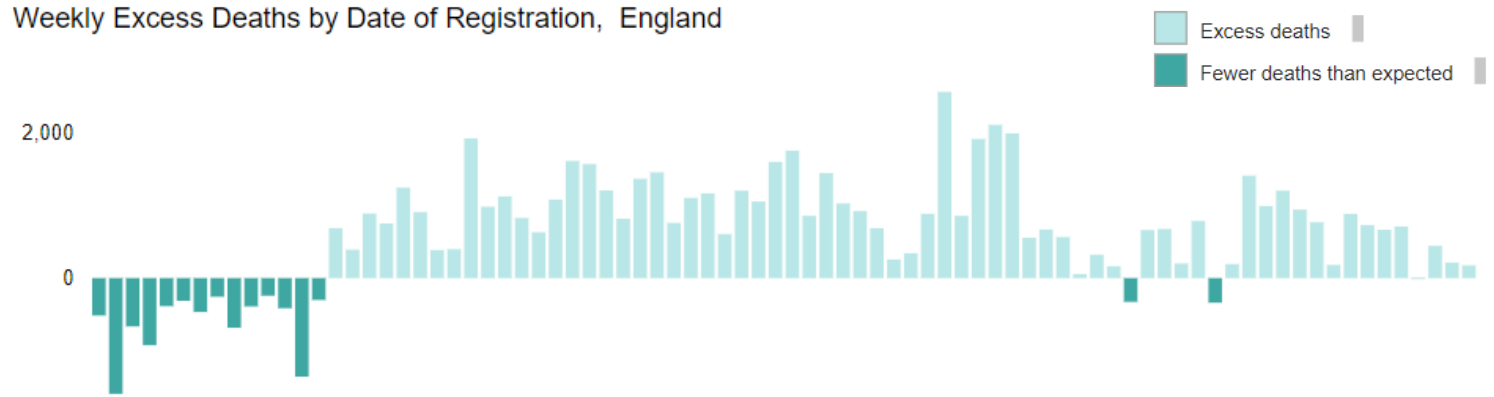
Excess Mortality in England by Upper Tier Local Authority

Date Range (week ending): 07/01/2022 to 28/07/2023

Weekly Excess Deaths by Date of Registration, Suffolk

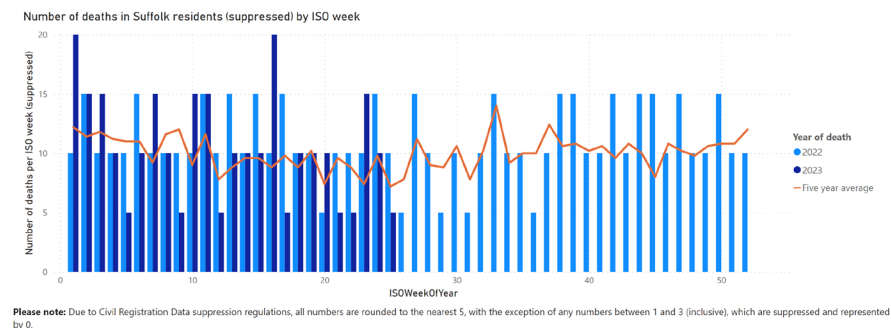


Weekly Excess Deaths by Date of Registration, England



In England, fewer than expected deaths were registered due to respiratory infections, Parkinson’s, and dementia. In Suffolk the pattern is less clear, partly because of smaller numbers.

Dementia and Alzheimer’s disease in Suffolk compared to 2016-21 average:

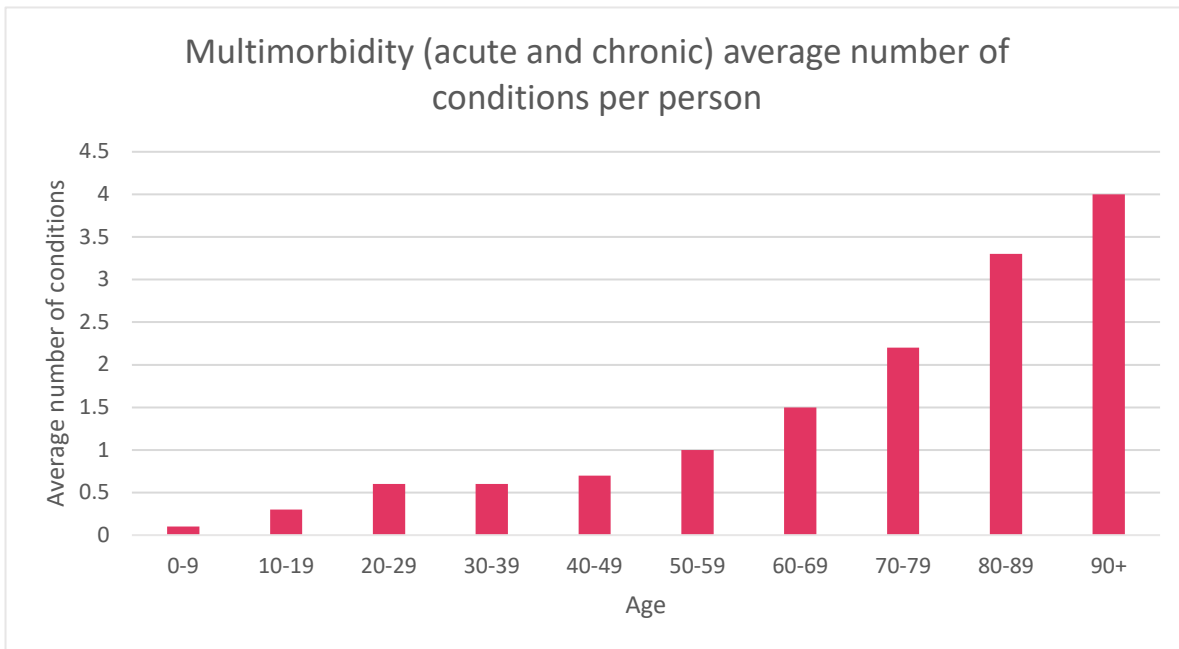


Source: OHID: [Excess mortality in England](#), [Excess mortality in England by region](#), KI&E analysis of local death data

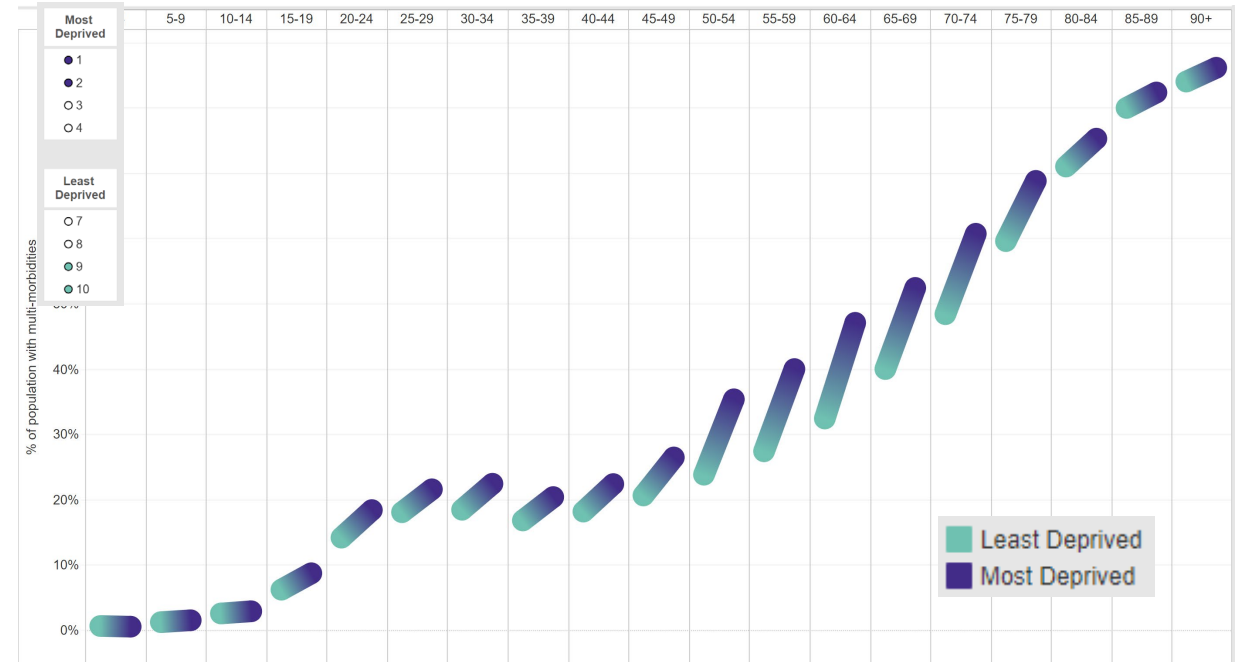
Suffolk +20 years – How **healthy** will we be?

As we age, conditions such as heart disease and diabetes become more common; and some new age-related conditions appear. Many more people will have multiple conditions in Suffolk in 20 years' time – and multi-morbidity is a key driver of cost.

Average number of conditions by age band Suffolk data only (excludes Waveney):



Age of onset of multi-morbidity by deprivation & age Suffolk data only (excludes Waveney):



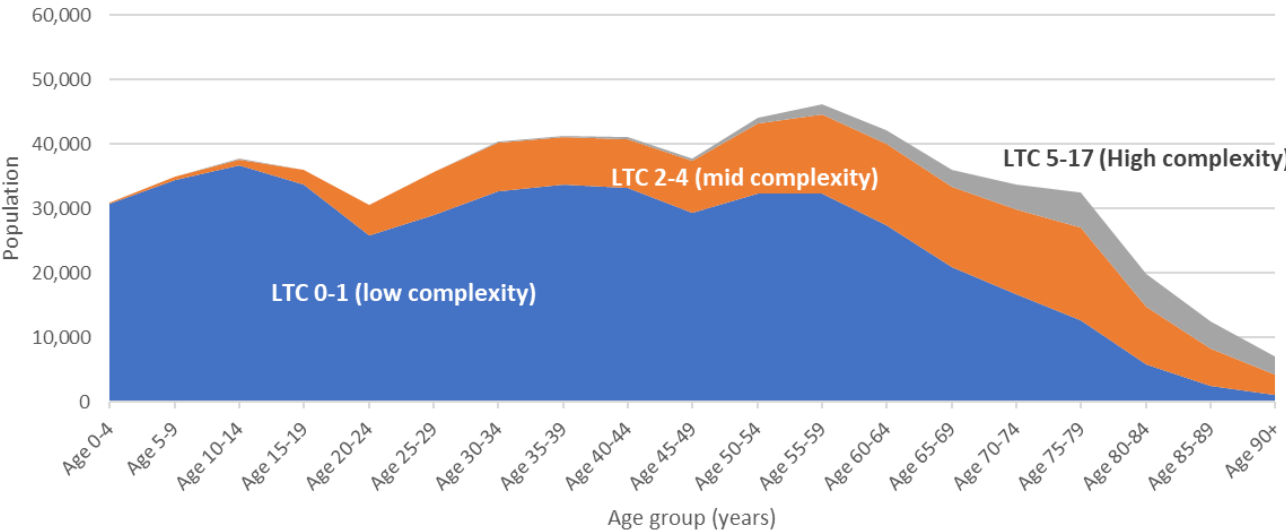
People living in poorer areas tend to have multiple health conditions at a younger age compared to those in wealthier areas.



Source: SNEE Optum PHM (Suffolk PCNs)

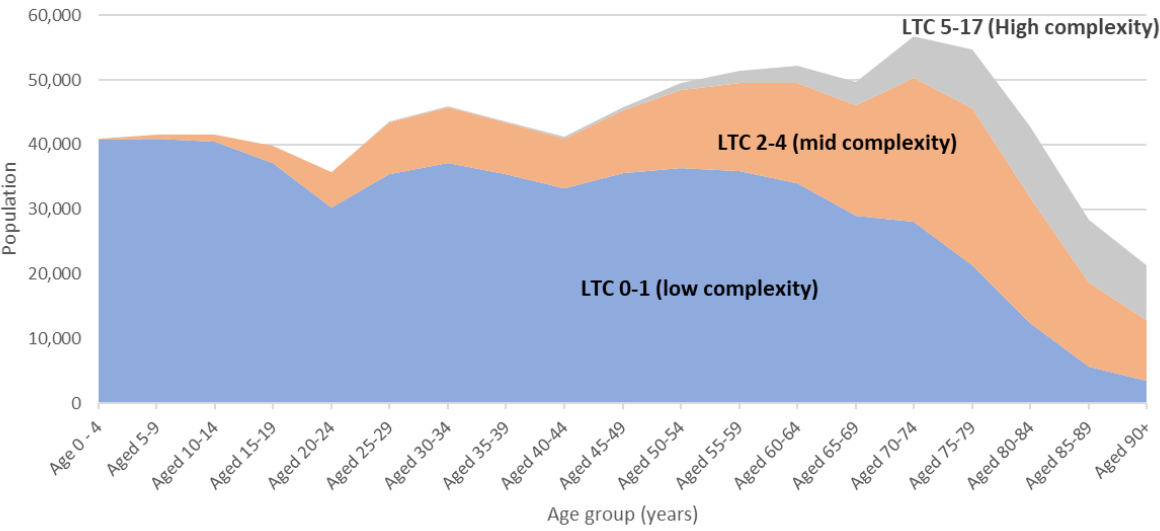
As we age, long-term conditions such as heart disease become more common; and some new age-related conditions appear. Many more people will have multiple conditions in Suffolk in 20 years' time – and multi-morbidity is a key driver of cost.

Patients by age and complexity, 2022-23, West Suffolk and Ipswich & East Suffolk alliances



2023

Projected population by age and complexity, 2043, Suffolk



2043

If we look at the number of patients in Suffolk (excluding Waveney) who have long-term conditions (LTCs), and apply these proportions to Suffolk’s projected population, it appears that Suffolk will have **a much higher number** of people with 2 or more co-morbidities in 2043 (254,000) compared to 2023 (170,000), mainly driven by our ageing population. This poses a large challenge to health and care services.

Source: Optum PHM; [ONS population projections - local authorities - 2018-based](#)

The number of people living with dementia in Suffolk is likely to increase by nearly half (49%) in the next 20 years; and most of these new cases will be in people aged over 85.

- In 2023, approximately 14,200 people aged 65 and over in Suffolk are estimated to be living with dementia. This is forecast to increase by nearly half (49%) by 2040 (to 21,200 people).
- Over half (66.5%) of all cases of dementia in 2040 will be diagnosed in those aged 85 or over. This is equivalent to 11,100 people (or around half the population of Sudbury).

Forecast changes in the numbers of people with dementia in Suffolk, by age band, 2023-2040

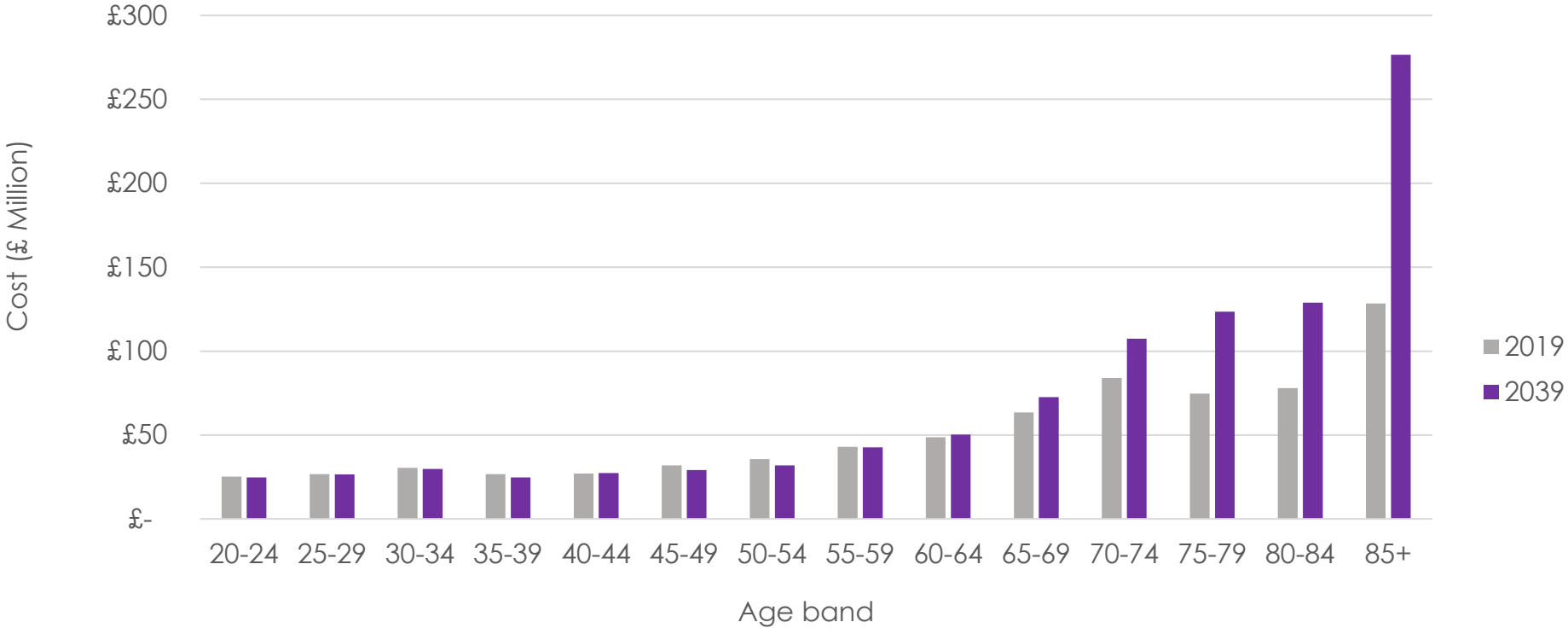


- Not everyone with dementia will have a diagnosis, and so may not have access to services and support.
- In 2023, there were 7,392 people (aged 65 or over) on Suffolk GPs dementia registers, plus 184 people aged under 65. It is estimated that a further 5,603 people (aged 65 or over) have dementia in Suffolk (without a diagnosis).

Source: [Primary care dementia data](#), [PANSI](#), [POPPI](#)

The possible impact of our ageing population on health and care costs can be estimated, using the age band cost estimates produced in Somerset. This suggests that costs of caring for the oldest members of our society may be more than double the current level by 2039 – the numbers won't be right but this gives a sense of the scale of the challenge.

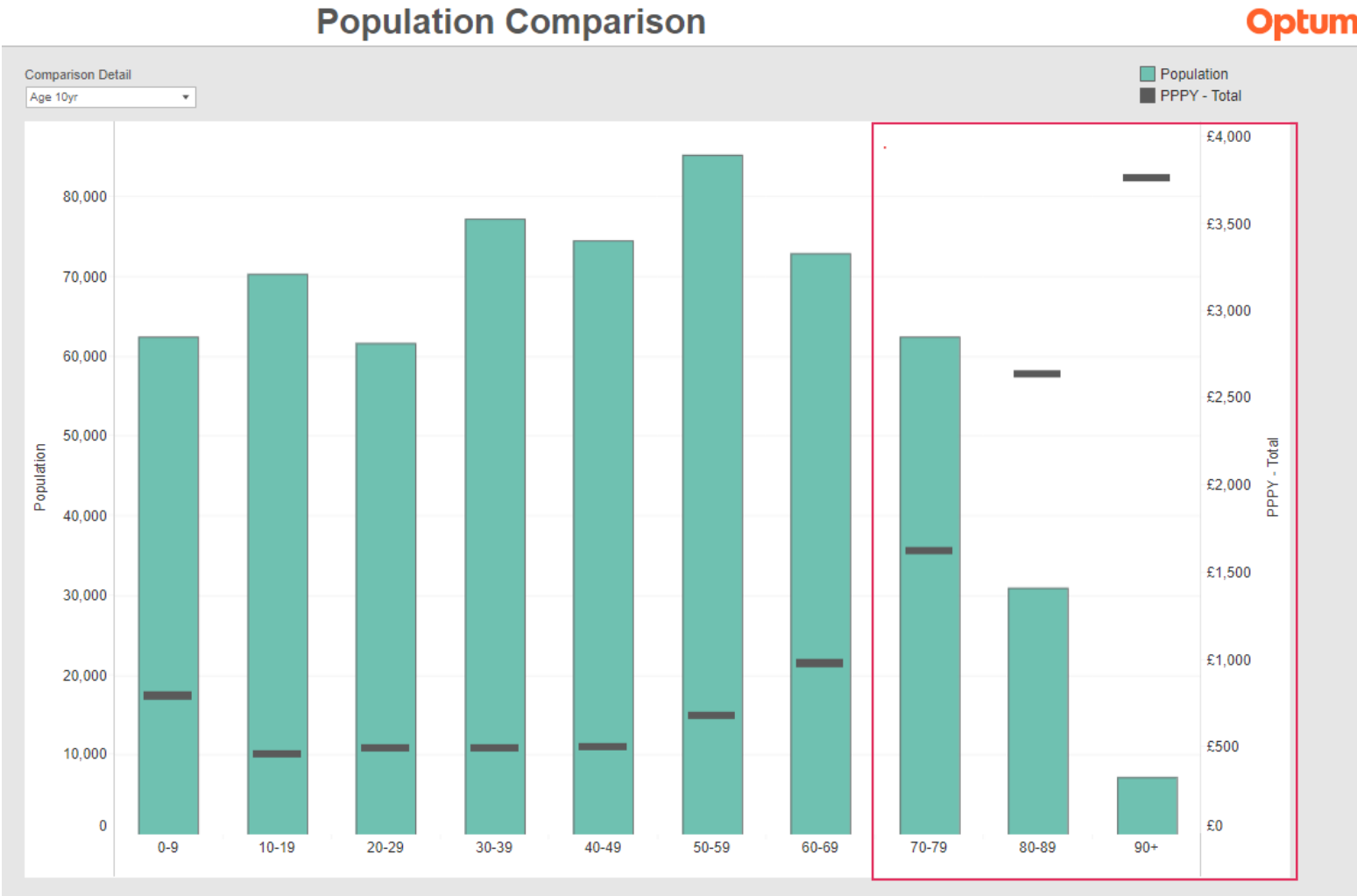
Estimated changes in the cost of health and social care in Suffolk, 2019 and 2039 (£m):



Note – inflation will have increased these costs

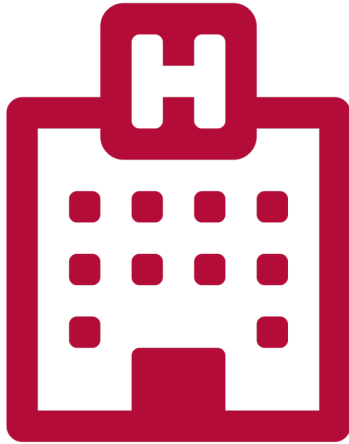
Source: Public Health Suffolk analysis using health and care per head costs from Kasteridis et al, 2014

And this is recent Suffolk data from our new linked dataset (excluding Waveney). You can clearly see how the numbers of people in older age bands lowers, but the health and care spend per person per year (PPPY) increases significantly...



Source: Optum PHM Dashboards, Suffolk population of SNEE population, May '22 – Apr '23

In terms of capacity, at current hospital admission and length of stay rates (calculated based on 2019-2021 hospital admissions data and projected using ONS 2018 population projections to 2041), these increases in demand will require significant acute capacity (staff and buildings) and funding.



In **20 years' time** – at current admission rates - there will be 130 additional admissions to hospital **each day** – more than 47,000 over the course of a year in Suffolk

In **20 years' time** – at current admission rates and lengths of stay - we will need **over 620** additional acute beds every day. This is almost 1.5 more West Suffolk Hospitals!
Additionally, local hospital modelling suggests even more rapid growth in need



How does mental health play into all this?



COMPARED TO THE GENERAL POPULATION, PATIENTS WITH SCHIZOPHRENIA WILL ON AVERAGE, DIE 14.6 YEARS EARLIER.

THE ECONOMIC COST ALONE OF ONE SUICIDE FOR A PERSON OF WORKING AGE IS ESTIMATED TO EXCEED

£1.7m.



ALMOST HALF OF ALL TOBACCO CONSUMED IS BY PEOPLE WITH MENTAL ILL HEALTH.



Each year, mental health problems are estimated to cost the UK economy over **£117.9 BILLION (2022)**



COMPARED TO THE GENERAL POPULATION, PEOPLE WITH BIPOLAR DISORDER AND SCHIZOAFFECTIVE DISORDER

DIE 13 YEARS EARLIER

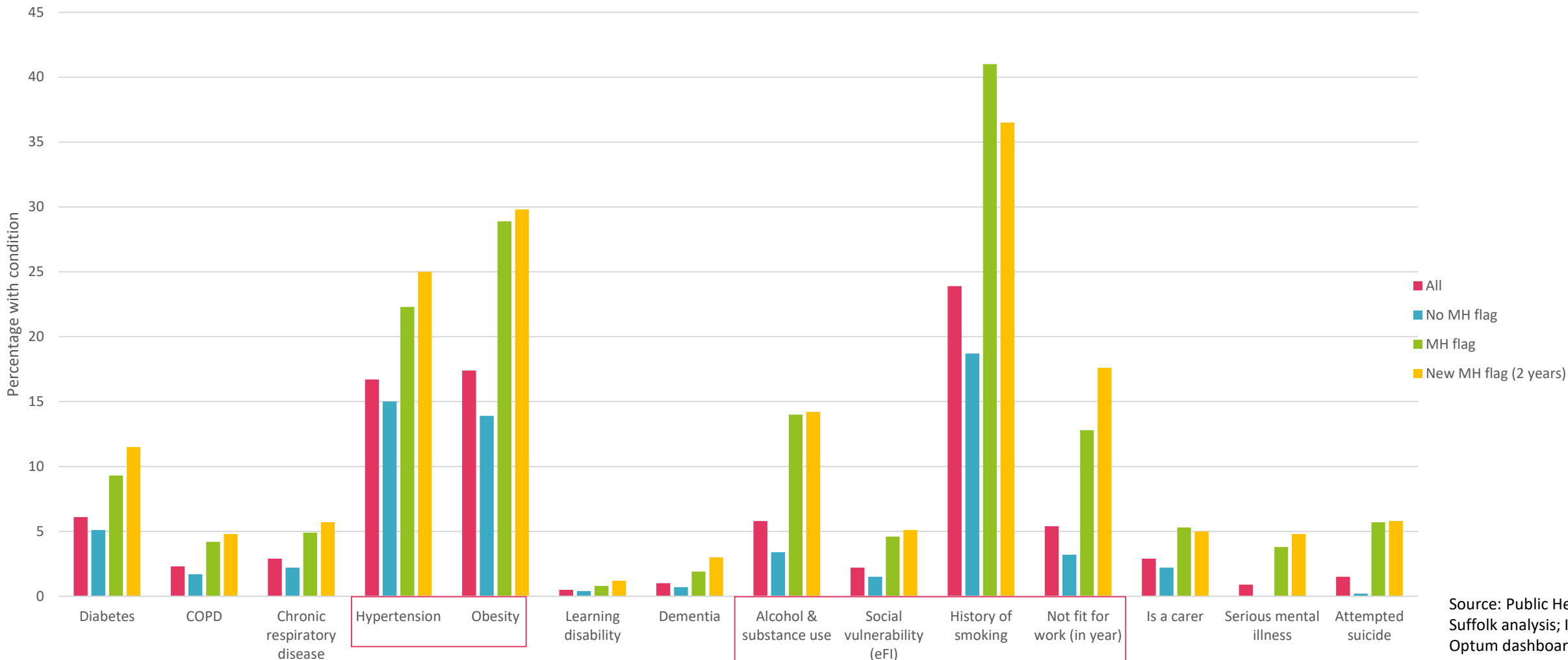


MENTAL ILL HEALTH COSTS SUFFOLK **£450 MILLION** IN DIRECT COSTS, AND IS ESTIMATED TO COST BETWEEN **£400-950 MILLION** IN INDIRECT COSTS EACH YEAR.

Source: 2016 APHR for Suffolk, with updated data

This data needs to be treated with caution – and the apparent differences haven't been statistically tested yet. However, PHM data suggests prevalence rates for a range of common conditions and risk factors are often much higher in patients who also have a mental health condition ...

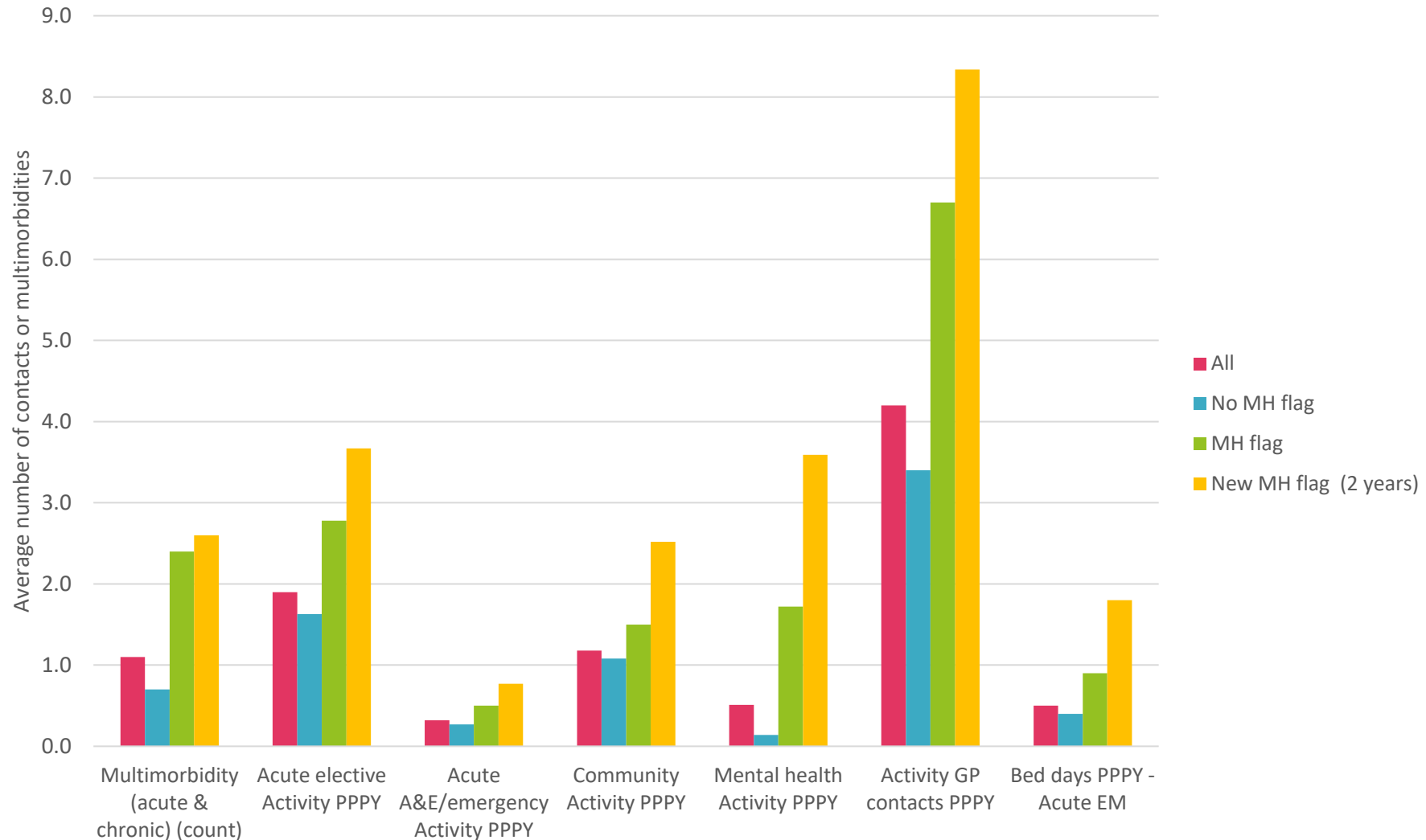
Patients by mental health flag and other conditions (%), Suffolk (excluding Waveney), Aug 2022-Jul 2023



Source: Public Health Suffolk analysis; IES PHM Optum dashboards

... and similar patterns for many types of health service usage, and for multimorbidity. Multimorbidity is the main driver of increasing cost.

Suffolk SNEE (by INT, excluding "other" and Essex), Aug 2022-Jul 2023



Source: Public Health Suffolk analysis; IES PHM Optum Dashboards

And what might the future bring? Suffolk's overall population is growing, and as many mental health conditions, such as depression, are 'common'. The numbers of people with those conditions is likely to increase proportionately – prevalence may also be increasing.

If the population increases as forecast but prevalence remains the same:

In 2021/22 in Suffolk, **13.2%** of patients on Suffolk GP practice registers were recorded as having depression (aged 18+), equating to **87,437 people**. Applying the current prevalence to the projected county population for 2043 could mean there are an **extra 1,947 people with depression** by 2042.**



In 20 years...

If prevalence remains at 13.2%** , with population growth, that equates to:

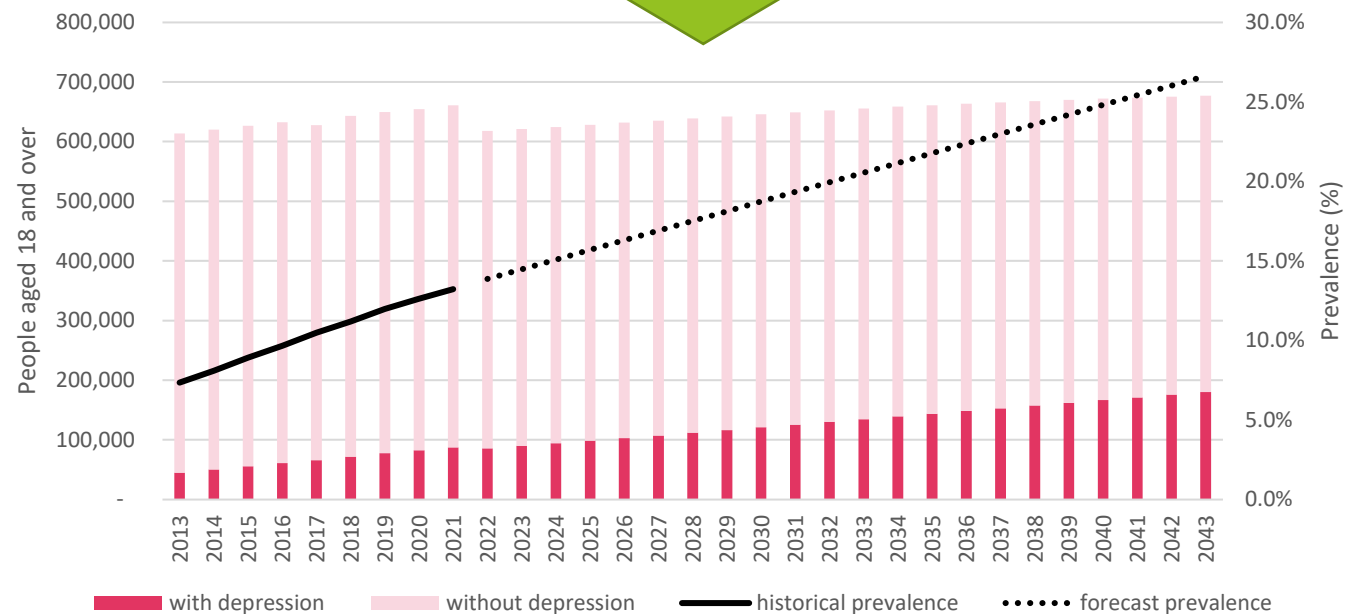


+1,950 people with depression

** Likely an underestimate as prevalence has been increasing each year since 2013/14
Source: [Fingertips](#), [ONS population projections - local authorities - 2018-based](#)

If the proportion of people with mental ill health increases:

Using the same base data, and applying crude trend forecasting assuming no other changes, 26.6% of the 18+ population could experience depression by 2043*. Imagining the population size doesn't change between 2020 and 2042 this would equate to over **165,400** people 18+ with depression in Suffolk. The chart below shows, with population growth, that figure could be even higher.



* Note this forecast is built on a small number of existing data points – so forecasts should be interpreted with caution.

In Suffolk there are a number of risk factors for mental ill health that are lower than average – but many of the factors which are higher relate to children and young people. 50% of lifelong mental illness develops before the age of 14.

There are also increasing trends for several indicators related to mental ill health in Suffolk in children and young people:

- Suffolk’s hospital admissions as a result of **self-harm** (10-24 years) are statistically significantly higher than national levels and have been increasing (2021/22).
- Latest data for hospital admissions as a result of **self-harm for those aged 15-19** years in Suffolk (2021/22), are statistically significantly higher than the England rate.
- The percentage of **obese children** in Year 6 has increased from **16.8% to 21.7%** in Suffolk between 2014/15 and 2021/22.
- While it is too early to understand the long term impact, research is already suggesting that C19 has had a significant impact on children and young people of all ages – whether that is the development of speech and language in early years, the impact of many months of emergency home schooling, the distortion to qualifications, or the disruption to third tier education

These factors could have a direct impact on the current generation of children and young people in Suffolk as they move into adulthood and could indicate a possible increase in demand for future mental health services.

Suffolk risk factors for mental ill health

Long term claimants of Jobseeker's Allowance
Admission episodes for alcohol-related conditions (Broad): Old Method
Affordability of home ownership
Children in absolute low income families (under 16s)
Children in relative low income families (under 16s)
First time entrants to the youth justice system
16 to 17 year olds not in education, employment or training (NEET) or whose activity is not known
Domestic abuse related incidents and crimes
Violent crime - violence offences per 1,000 population
Reoffending levels: percentage of offenders who reoffend
First time offenders
Homelessness: households in temporary accommodation
Fuel poverty (low income, low energy efficiency methodology)
Low birth weight of term babies
Smoking status at time of delivery
Reception: Prevalence of overweight (including obesity)
Year 6: Prevalence of overweight (including obesity)
Percentage of adults (aged 18 plus) classified as overweight or obese
Smoking Prevalence in adults (18+) - current smokers (APS)
Children in care
Crime deprivation: score
Deprivation score (IMD 2019)
Employment and Support Allowance claimants
Employment deprivation: score
Estimated prevalence of opiate and/or crack cocaine use
Migrant GP registrations: rate per 1,000 population
Percentage with 3 or more risky behaviours at age 15
Prisoner population: count
School pupils with social, emotional and mental health needs: % of school pupils with social, emotional and mental health needs
Smoking prevalence in adults with a long term mental health condition (18+) - current smokers (GPPS)
Smoking prevalence in adults with anxiety or depression (18+) - current smokers (GPPS)

Risk factors for mental ill health identified in Fingertips JSNA tool. Green indicates Suffolk performs better than England

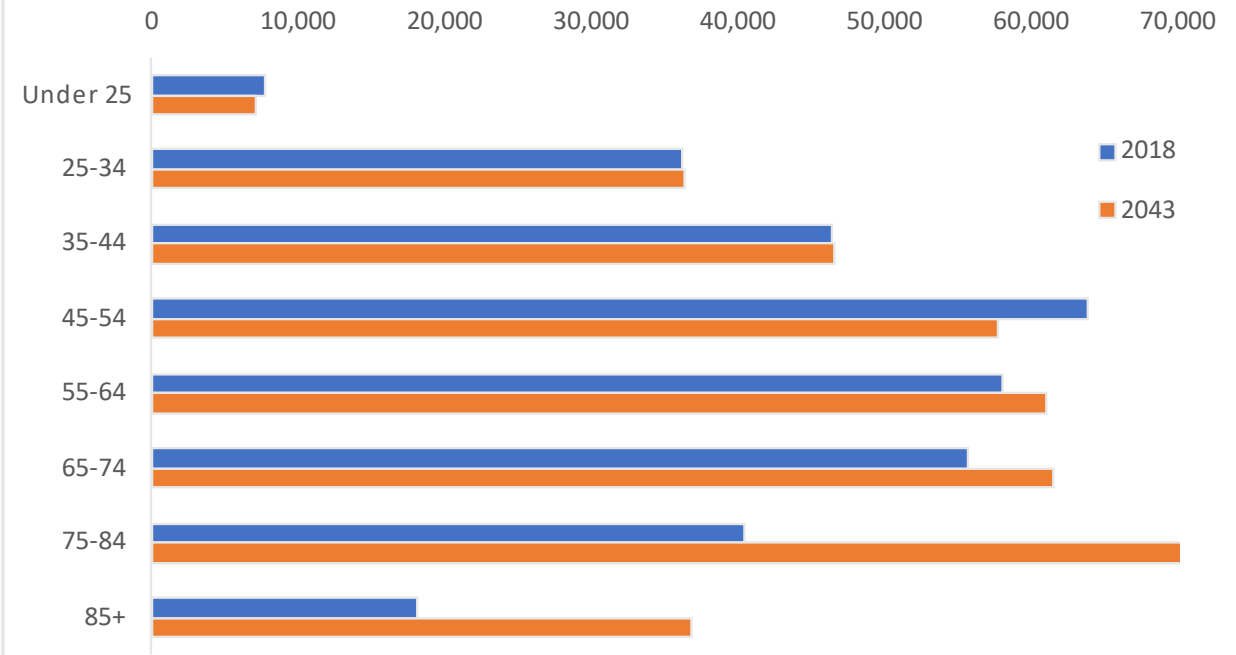
Suffolk +20 years – what will our **communities** need?

The number of households and demand for dwellings are forecast to increase by 16% from 2018 to 2043 – more than double the rate of population growth - as changes in demographic structure change household composition.

Local Authority	Change 2018-43: Households with one dependent child	Change 2018-43: Households with two dependent children	Change 2018-43: Households with three or more dependent children	Change 2018-43: One person households: Male	Change 2018-43: One person households: Female	Change 2018-43: Other households with two or more adults
Babergh	1.1%	0.4%	1.2%	27.9%	32.7%	21.5%
East Suffolk	2.9%	-1.1%	-1.0%	25.1%	34.9%	24.9%
Ipswich	-5.5%	-11.0%	-12.7%	6.9%	13.0%	7.7%
Mid Suffolk	-12.7%	-13.0%	-12.8%	36.8%	44.6%	29.9%
West Suffolk	-0.1%	-5.4%	-4.7%	16.6%	25.2%	13.6%
Suffolk	-1.7%	-5.5%	-5.4%	20.8%	30.0%	19.9%

- More **older households**
- **Biggest proportional increases are among singles and shared households** (couples with other adults and 'other' household types).
- The number of households with dependent **children will decrease** (4%), whilst the number of households with no dependent children will increase (22%).
- More **smaller households** – what might that mean for resilience?

Number of Households by age in Suffolk 2018 vs. 2043

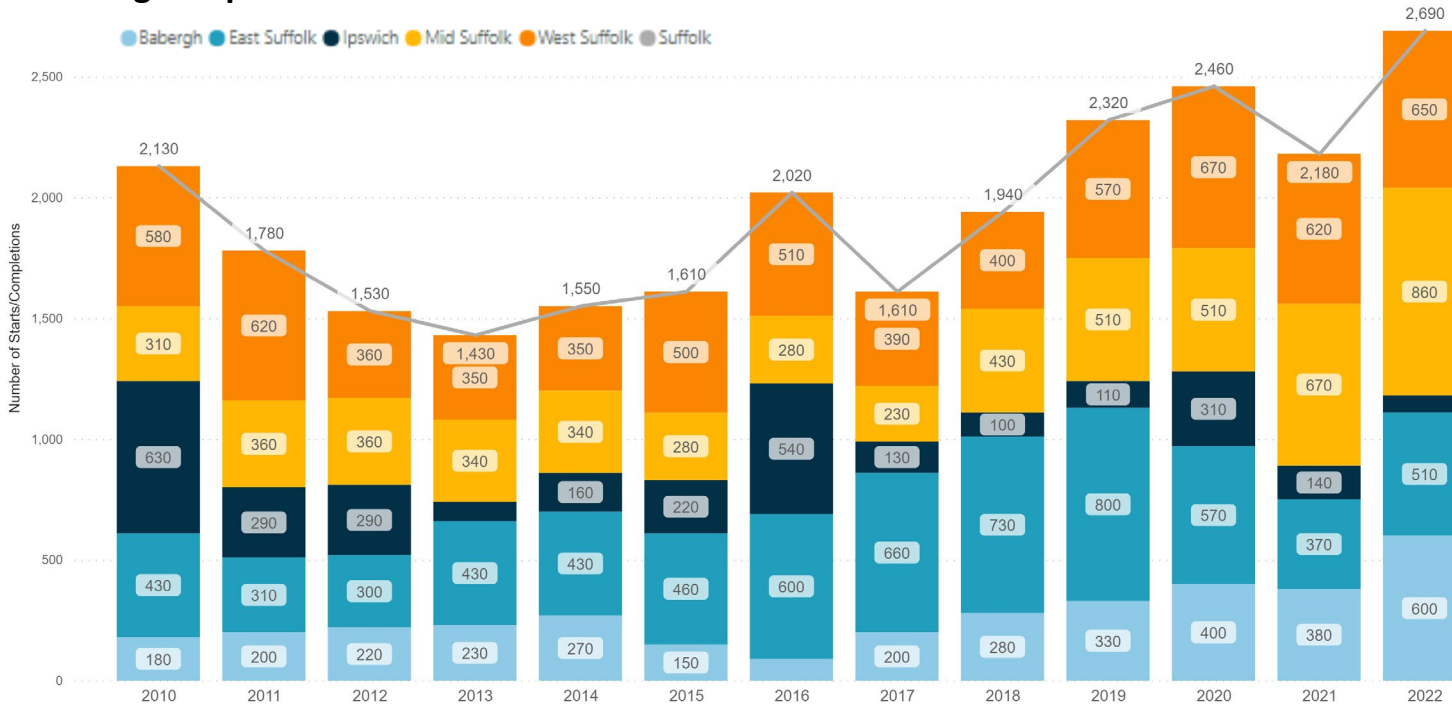


Source: ONS: Household projections for England, Suffolk housing summary

The latest (2021) Housing Delivery Test measurement was published by DLUHC in 2022. This is an official, annual measurement of housing delivery by relevant plan-making authorities (i.e. in Suffolk by LTLA). The latest figures show Suffolk overdelivered on the number of homes required...*



Housing completions in Suffolk 2010-2022:



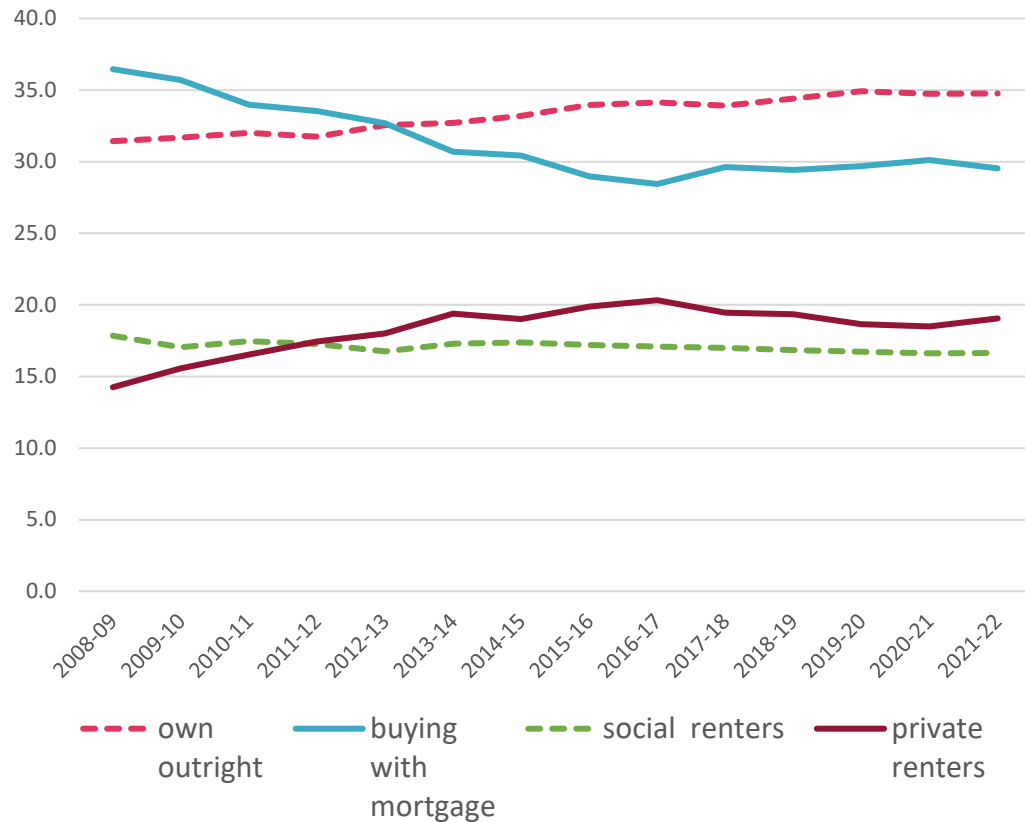
...but – are these the right homes? Average house prices are now 9.7 times average incomes across Suffolk - if we don't build more affordable homes, or control rents, some estimates suggest that, in 20 years' time, 40% of people aged 40 or below will still be living at home with their parents.... Do you know how many people are on Suffolk housing waiting lists? Or how many of these new homes are 'affordable'?

For 2018-21 (latest figures), the total number of houses required across Suffolk was 7,950. 9,426 were delivered (119%). Ipswich was the only Suffolk planning authority that did not exceed the test: 82% (n=950) of required homes were built, a shortfall of 208.

Source: Institute for Public Policy research, Britain in the 2020s, December 2016; [DLUHC housing delivery test](#), [Suffolk housing summary](#)

For England as a whole, high housing waiting lists and high property ownership costs are pushing more and more people towards private rentals...

Households by tenure (English Housing Survey):

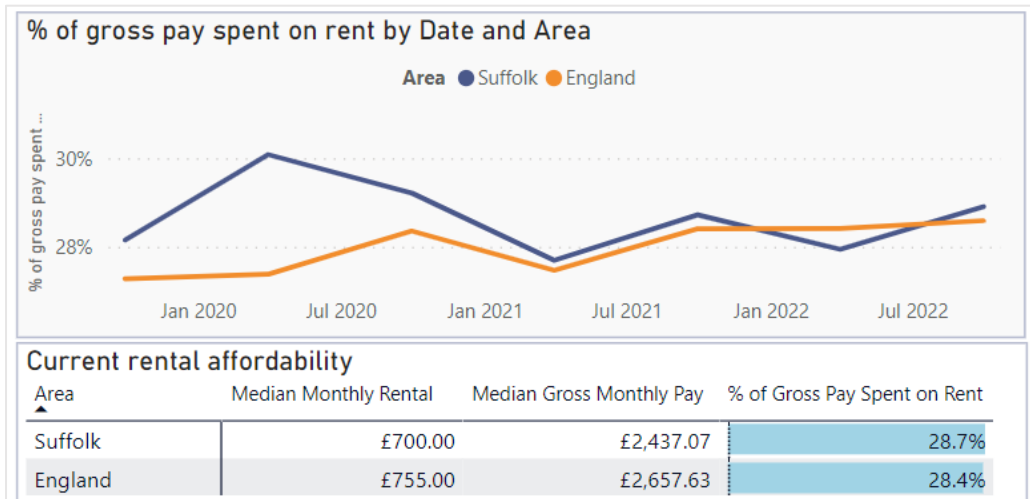
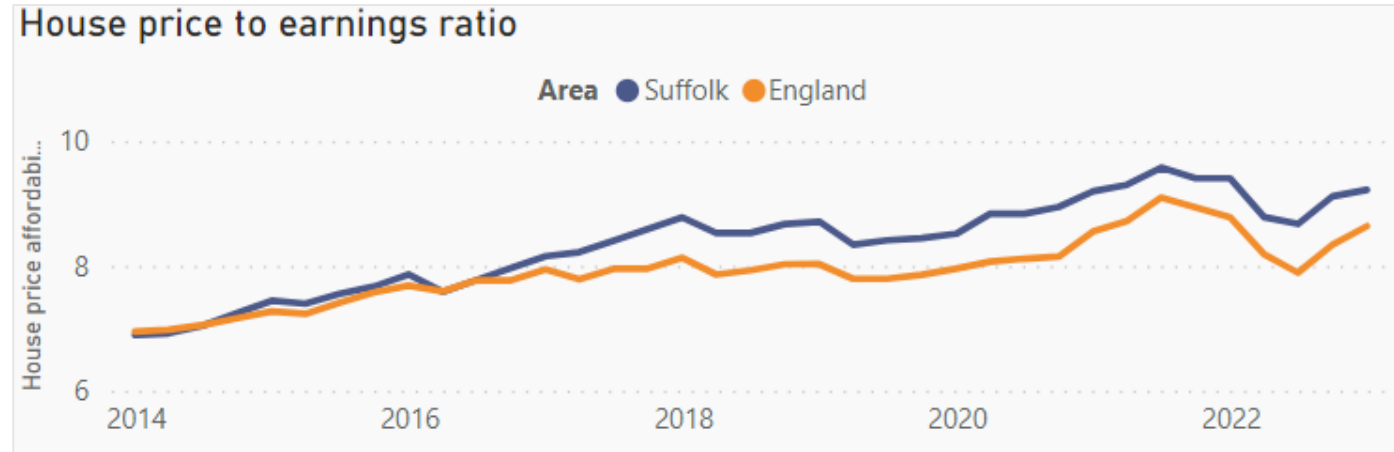


- The private rented sector has doubled in size since 2000.
- Private renters in England have little of the customary security that social tenants (or private renters in some other parts of the world, for example long term contracts) enjoy and face uncapped and frequently unaffordable rents.
- The Resolution Foundation reports that, in 2019, rates of homeownership among younger adults were **half** what they had been a generation before (Corlett and Odamtten, 2021).

Source: [English Housing Survey](#)

In Suffolk, the number of households buying with a mortgage has dropped by 9% since 2011, while private renters have increased by 29.5%...

Houses in Suffolk are less affordable than elsewhere in England. Babergh has the highest affordability ratio in Suffolk (**median house price is 11.7 times residents gross annual pay**).

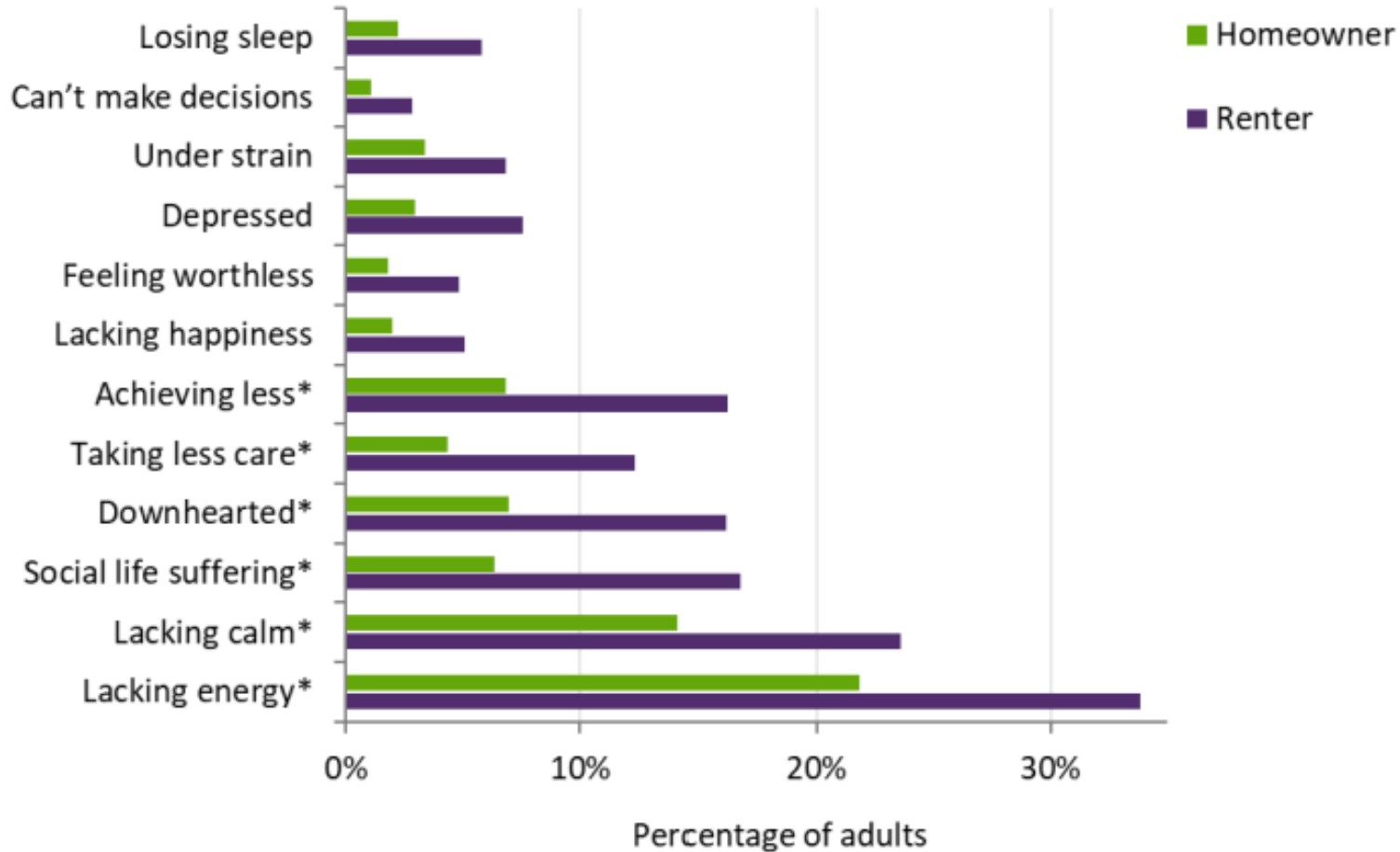


Suffolk figures conceal variation – in **West Suffolk renters spend an average of 41.1% gross pay on rent.**

Source: [Cost of Living dashboard Healthy Suffolk](#)

Renting your home may also have a significant impact on wellbeing and mental health...

Figure S1: Home truths: every indicator of mental distress is higher for renters than for homeowners



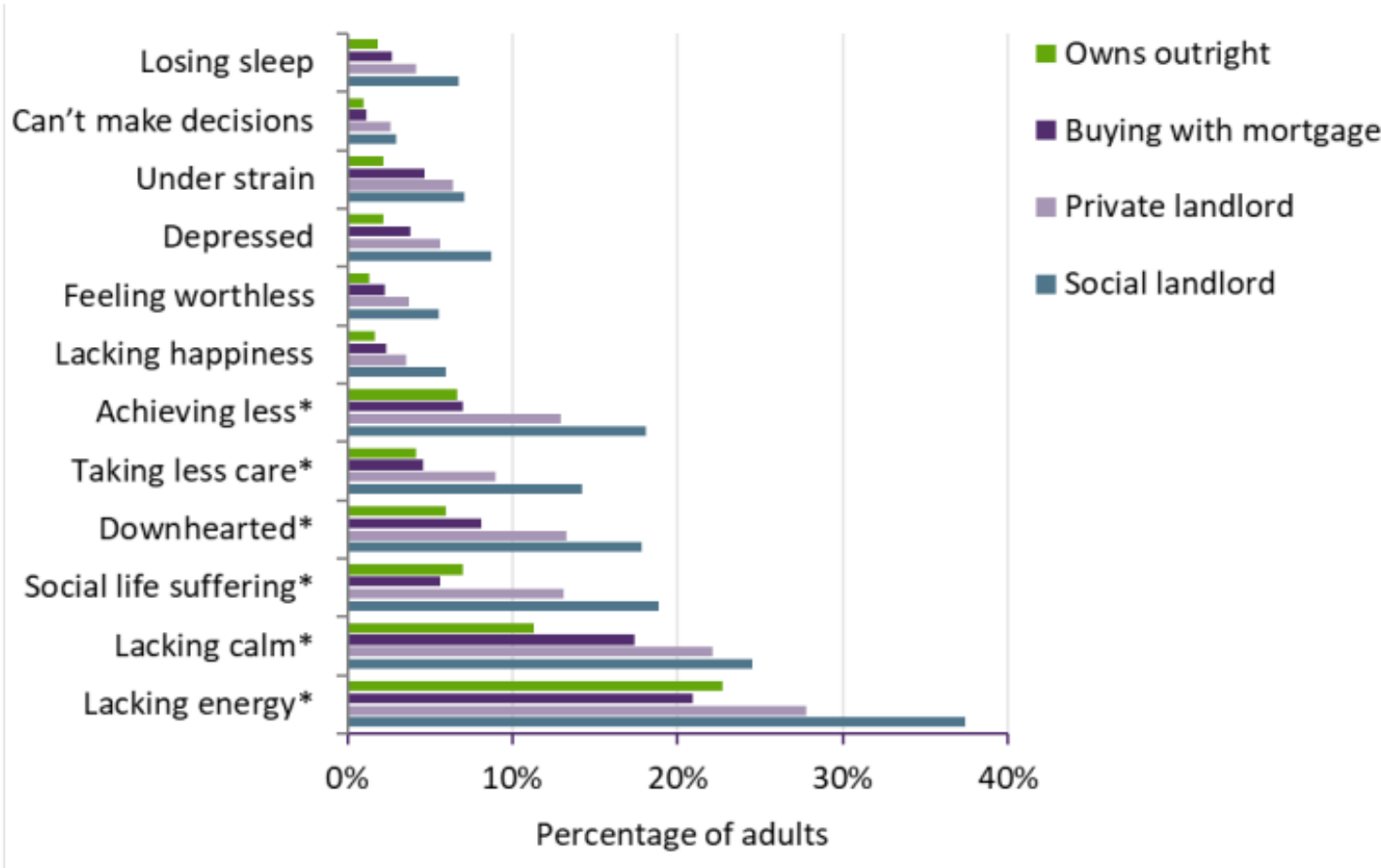
Latest (December 2022) national data shows the percentage of people experiencing some form of depression by tenure:

- 1 in 4 (27%) of people who rent
- 1 in 8 (13%) of people with a mortgage or loan to purchase their home
- 1 in 10 (10%) of people who own their home outright

Source: [Anxiety nation? Joseph Rowntree Foundation, cost of living and depression](#)

But the situation is complex – social renters actually have more protection and security but show more mental distress – possibly because the requirements for accessing social housing tend to include a history of ill-health and significant housing insecurity...

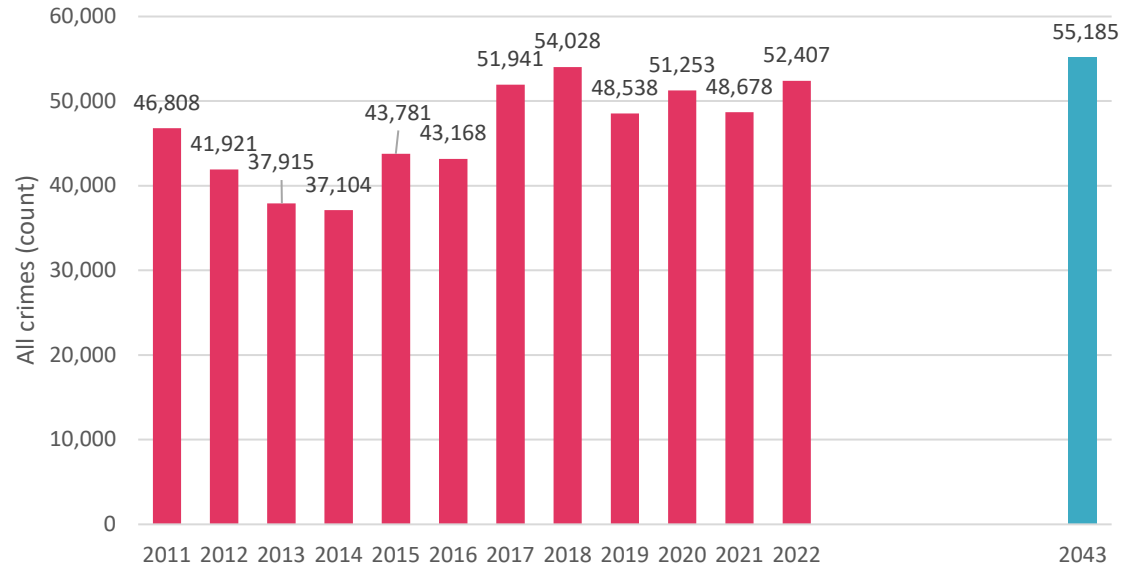
Figure B1: More home truths: indicators of mental distress for more detailed tenure groups



Notes: Indicators without an asterisk are derived from the General Health Questionnaire (GHQ) and those with an asterisk are from the Short Form Survey (SF-12). See Annex A for the precise wording and use made of each question.

Crime levels in Suffolk have been relatively stable in recent years, following a rise between 2014 – 2018.

Number of offences (2017-2021), and forecast offences in 2043:

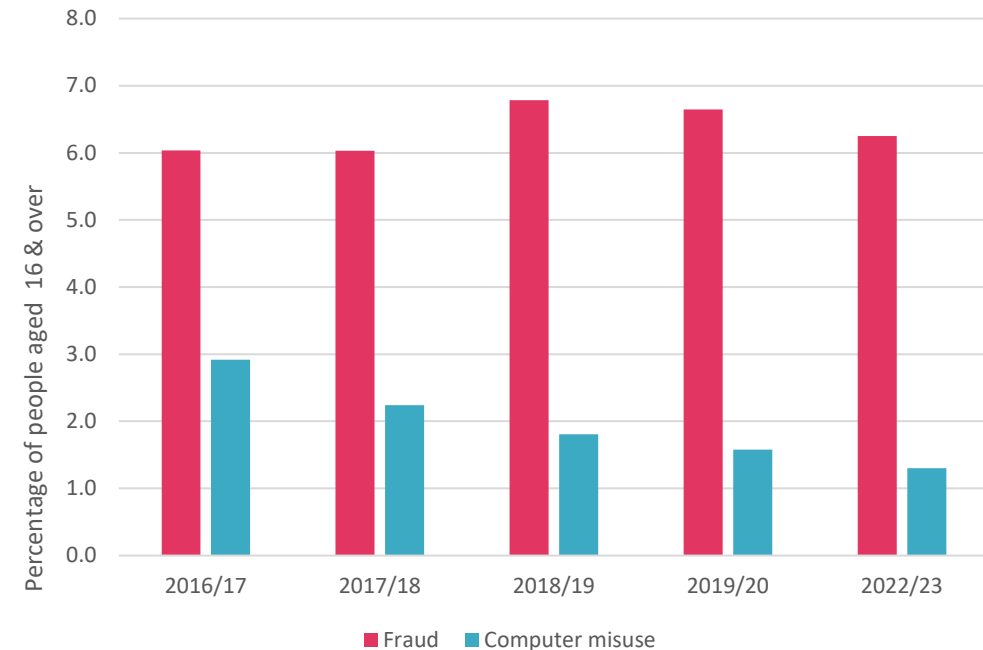


In 2023, there may have been around 48,500 “victims of fraud” in Suffolk, and around 10,000 “victims of computer misuse”

National crime survey data suggests that there have been significant falls in bank and credit account fraud and computer viruses (2019/20 compared to 2022/23), and a significant increase in “Advance Fee” fraud. In 2022/23, only 11.5% fraud and computer misuse incidents were reported*.

* To Police or Action Fraud

‘Victims’ of crime (Crime Survey for England and Wales):



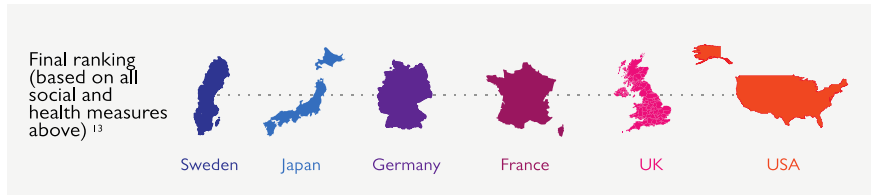
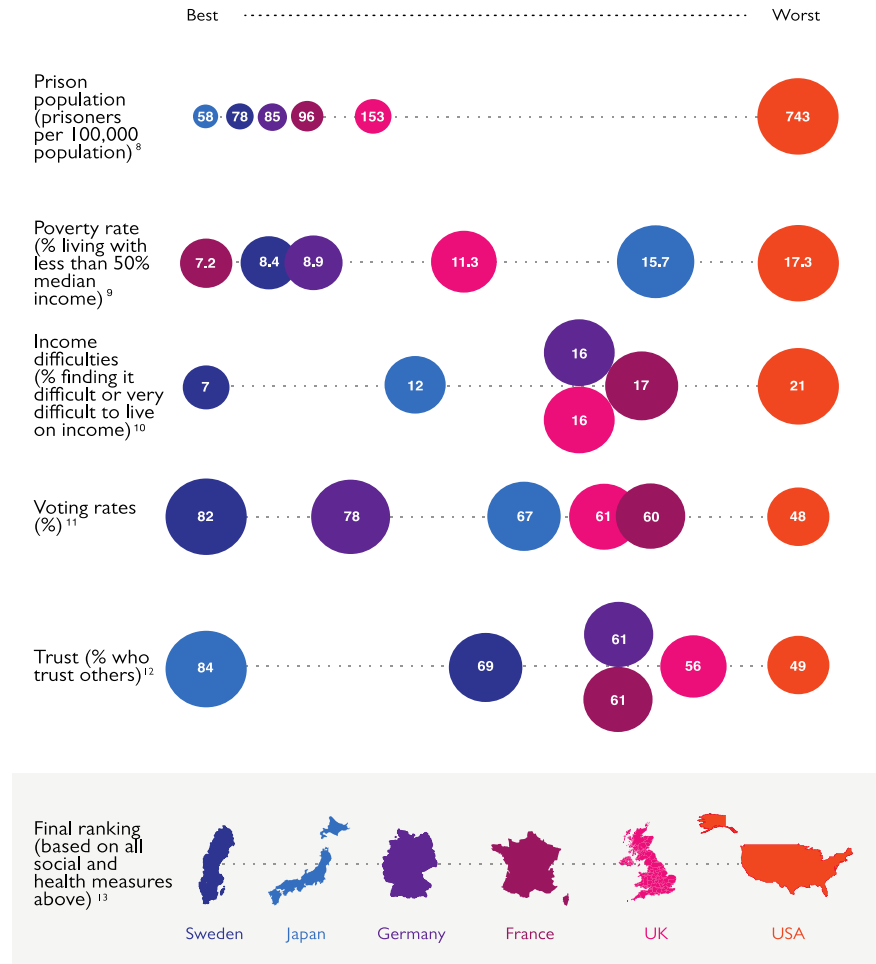
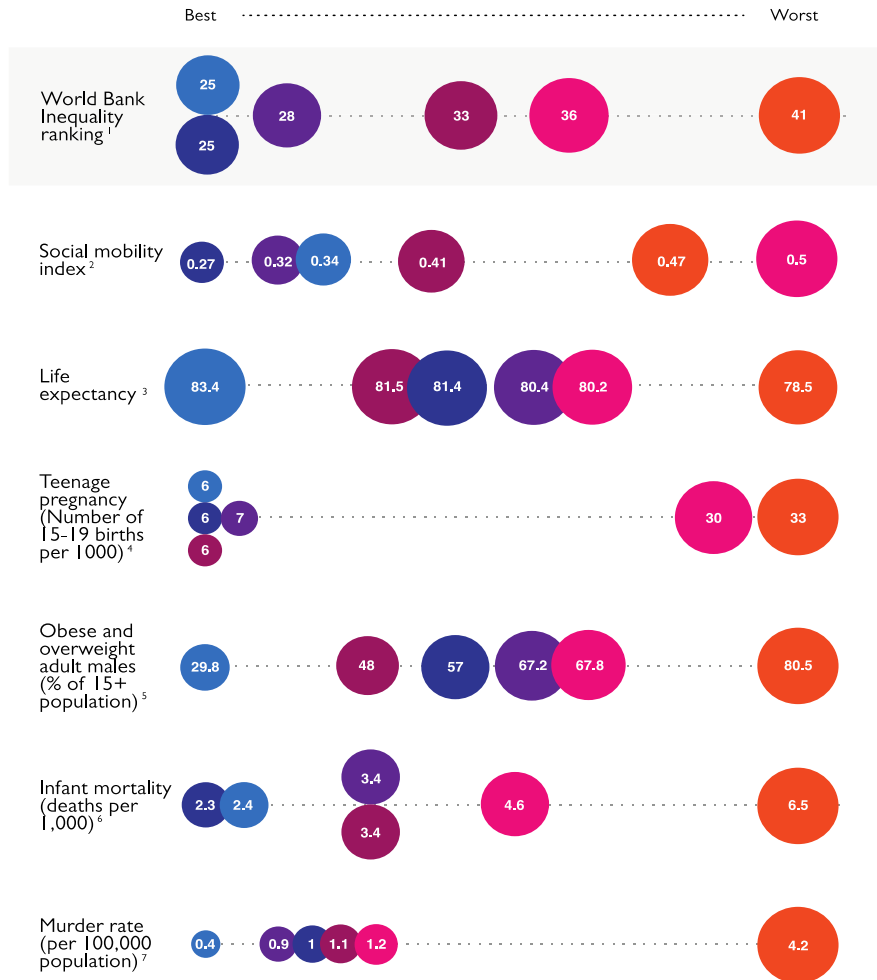
Source: Suffolk Observatory – [All Crime](#) and [All Crime Rates](#); [ONS population projections - local authorities - 2018-based](#), [ONS nature of fraud & computer misuse](#)

Suffolk +20 years – what sort of **inequalities** will we see?



Higher levels of inequality are strongly associated with a range of negative health and social outcomes at country level

● Japan ● Germany ● UK
 ● Sweden ● France ● US



Source: Wilkinson R, Pickett K. 'The Spirit Level' 2010

Sources:
 1. World Bank - GINI, most recent data used for each country | 2. Miles Corak (2012), "Inequality from Generation to Generation: The United States in Comparison," in Robert Rycroft (editor), The Economics of Inequality, Poverty, and Discrimination in the 21st Century, ABC-CLIO, forthcoming. | 3. Gapminder.org, various sources, 2011 figures | 4. World Bank (2007-11) | 5. WHO 2010 | 6. United Nations 2011 data | 7. UNODC (most recent varies by country - either 2009 or 2010) | 8. ICPS: <http://www.idcr.org.uk/wp-content/uploads/2010/09/WPPL-9-22.pdf> | 9. OECD Society at a Glance 2011 | 10. OECD Society at a Glance 2011 | 11. OECD Society at a Glance 2011 | 12. OECD Society at a Glance 2011 | 13. Treating the scores above as percentages, with the highest score as 100% and the lowest as 0%. | Where a high score was best, the calculation was reversed. | Infographic by Adam Frost and Rosie Roche

And in addition to this, the UK is now one of the most regionally unbalanced countries, in terms of inequality, in the industrialised world – leading to ‘geography of discontent’

- When we compare the UK with 30 OECD countries across 28 broad indicators the UK is one of the most interregionally unequal countries in the industrialized world, and almost certainly the most interregionally unequal large high-income country.
- The only countries in the OECD 30 that are interregionally more unequal than the UK are Slovakia and Ireland.
- Amongst its competitor peer group of large countries with similar or higher levels of income, the UK is much more unequal interregionally than any of its peers. Only Italy, with its longstanding problems of the Mezzogiorno, has comparable interregional inequalities with that of the UK. The small number of measures where Germany is more unequal than the UK are entirely a legacy of the absorption of the former East Germany.
- In many ways the economic geography of the UK is more reminiscent of a much poorer country at an earlier stage of economic development.

Why does this matter?

- As Krugman famously remarked, **‘Productivity isn’t everything, but, in the long run, it is almost everything.** A country’s ability to improve its standard of living over time depends almost entirely on its ability to raise its output per worker.’

Numerous social surveys demonstrate that people whose life is primarily in prosperous regions tend to have a profoundly different view of the world, themselves and their opportunities for self-enhancement than those who live in low-productivity regions.

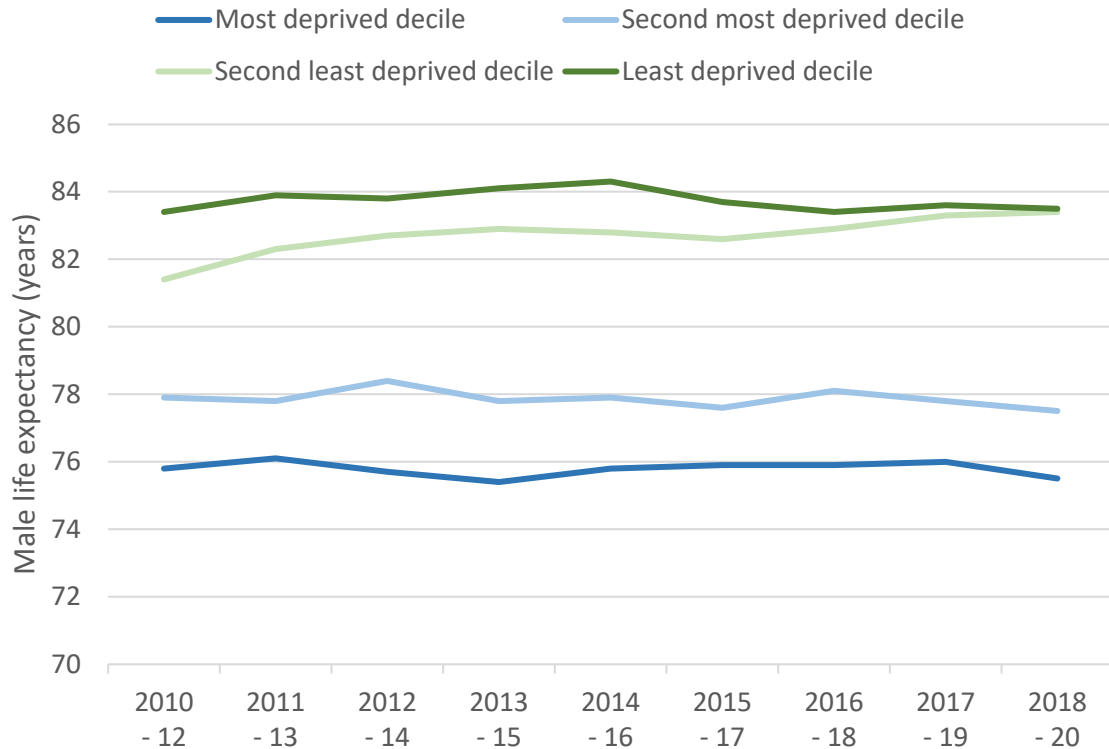
Moreover, most people’s perceptions of their prosperity and quality of life depends crucially not only on the productivity of the region in which they live and work, but also on their awareness of the experiences of other regions.

The resulting **‘geography of discontent’** associated with large interregional inequalities in productivity have profound, and often dangerous, political economy implications for national governance and institutional systems. **Moreover, it is interregional inequality that is now fundamentally challenging many of our national institutional and governance systems – and that has the potential to affect all of us, whatever our personal levels of wealth and productivity.**

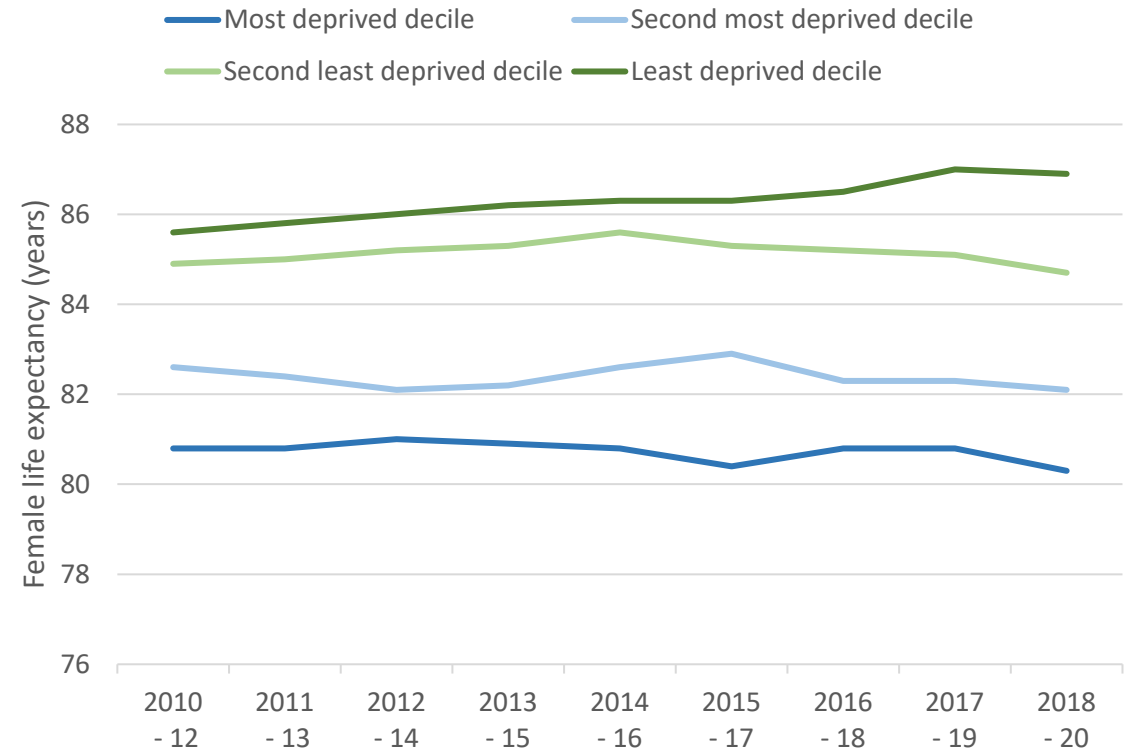
Within Suffolk, both males and females in our least deprived communities live longer on average than those in our more deprived ones, and this pattern is more pronounced in men.



Inequality in life expectancy at birth, male



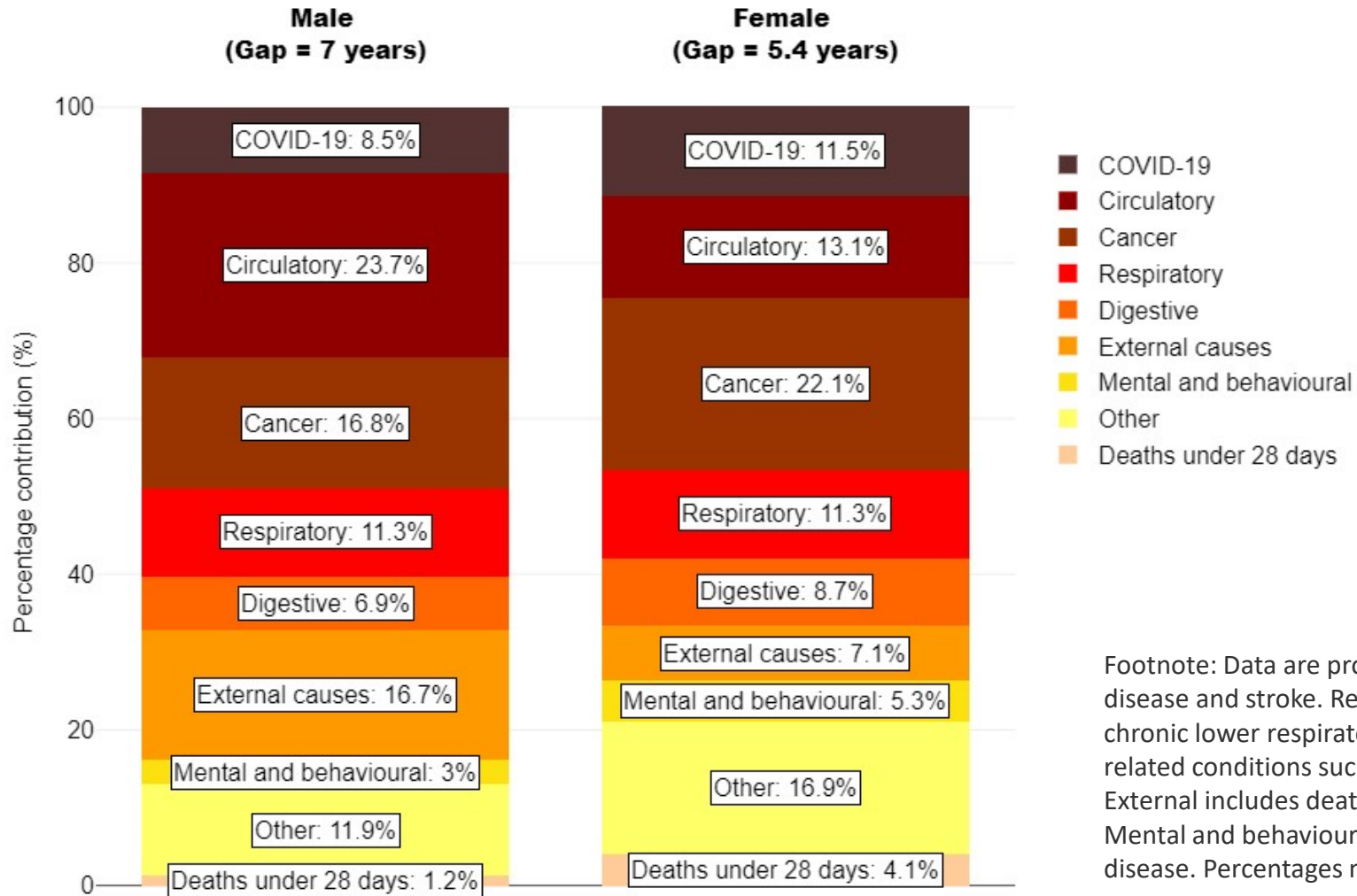
Inequality in life expectancy at birth, female



Source: Fingertips – [Life Expectancy at Birth](#)

Within Suffolk circulatory disease and cancer are the highest contributors to our life expectancy gap, while circulatory or external causes are higher in men, and cancer and other causes are higher in women.

Breakdown of the life expectancy gap between the most and least deprived quintiles of Suffolk by cause of death, 2020 to 2021:



Footnote: Data are provisional. Circulatory includes heart disease and stroke. Respiratory includes flu, pneumonia, and chronic lower respiratory disease. Digestive includes alcohol-related conditions such as chronic liver disease and cirrhosis. External includes deaths from injury, poisoning and suicide. Mental and behavioural includes dementia and Alzheimer's disease. Percentages may not sum to 100 due to rounding.

Source: [PHE Segment tool](#)

Previous projections suggested average life expectancy in Suffolk could be 89.1 years by 2030 – but the impact of covid has taken ten years off life expectancy gains

Figure 1 Life expectancy at birth
England and Wales, 1841–2000

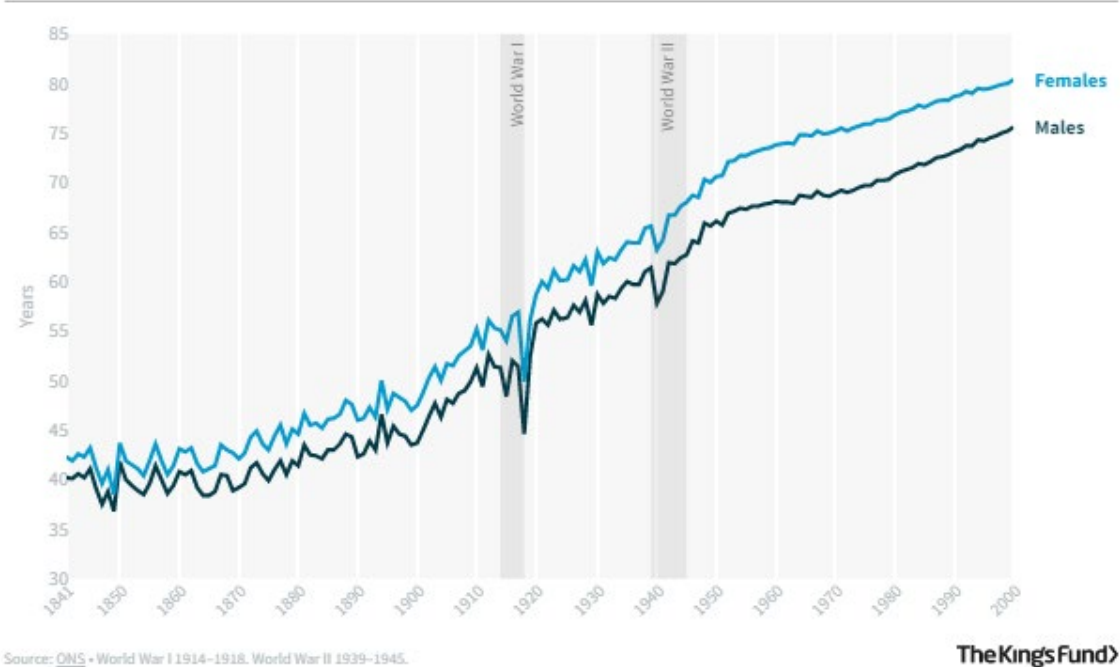
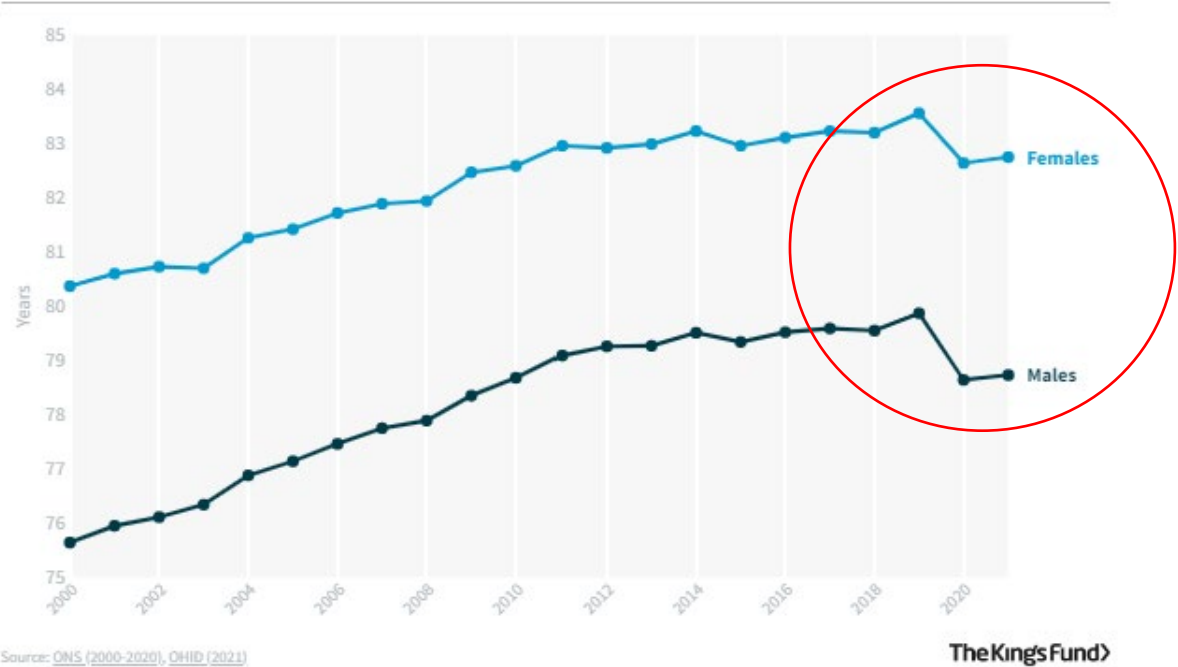


Figure 2 Life expectancy at birth
England, 2000–21



Source: Bennet J, Guangquan L, Foreman K, Best N, Kontis V, Pearson C, Hambly P, Ezzati M. 'The future of life expectancy and life expectancy inequalities in England and Wales: Bayesian spatiotemporal forecasting'. Lancet 2015;386: 163-70; [What is happening to life expectancy in England? | The King's Fund \(kingsfund.org.uk\)](https://www.kingsfund.org.uk/insights-and-analysis/what-is-happening-to-life-expectancy-in-england/)

That reduction in life expectancy is not distributed equally across the population – and while the impact of the cost of living crisis is unclear, if it does reduce life expectancy, commentators such as Marmot suggest that effect will be magnified in more deprived communities, based on changes to life expectancy during austerity

Figure 2 Life expectancy at birth
England, 2000–21

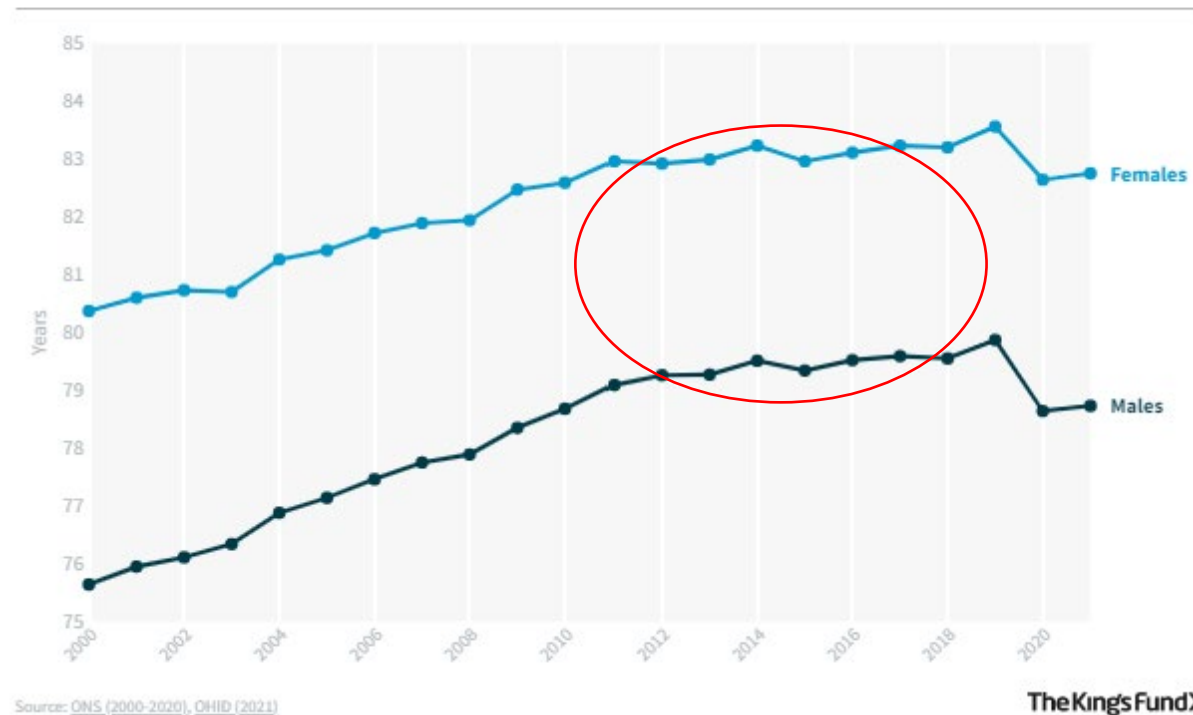
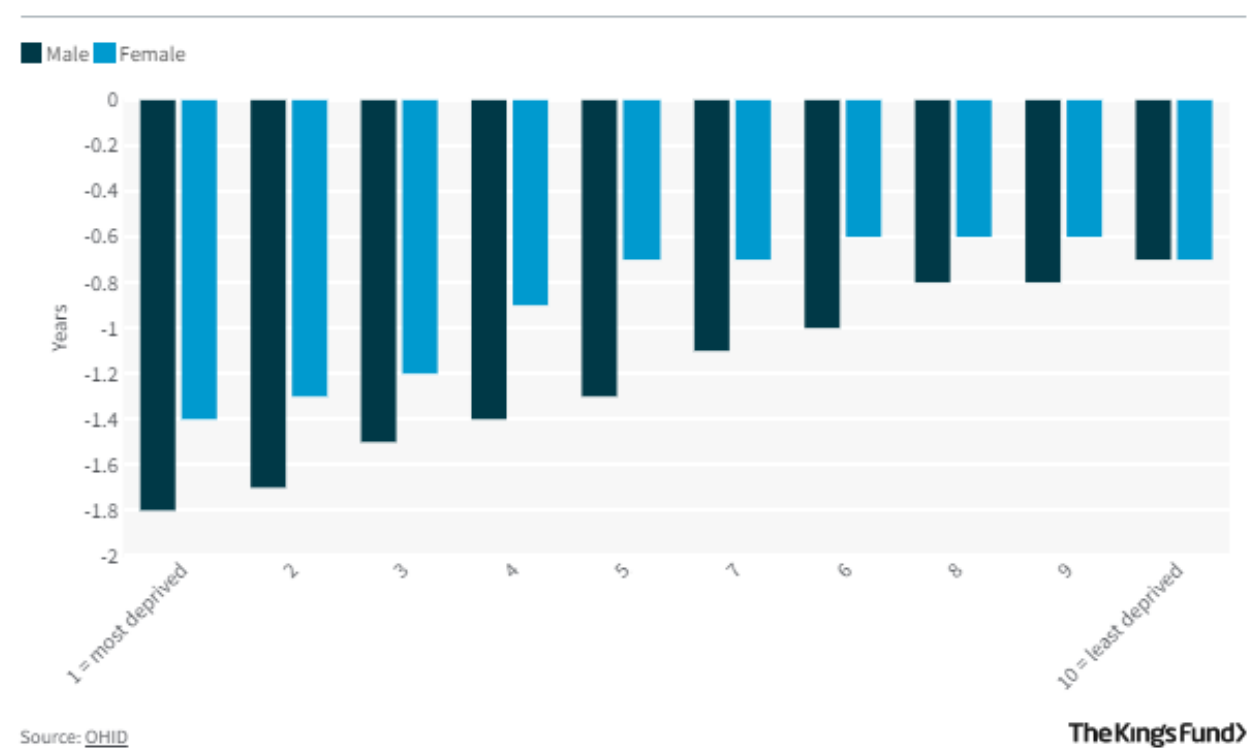


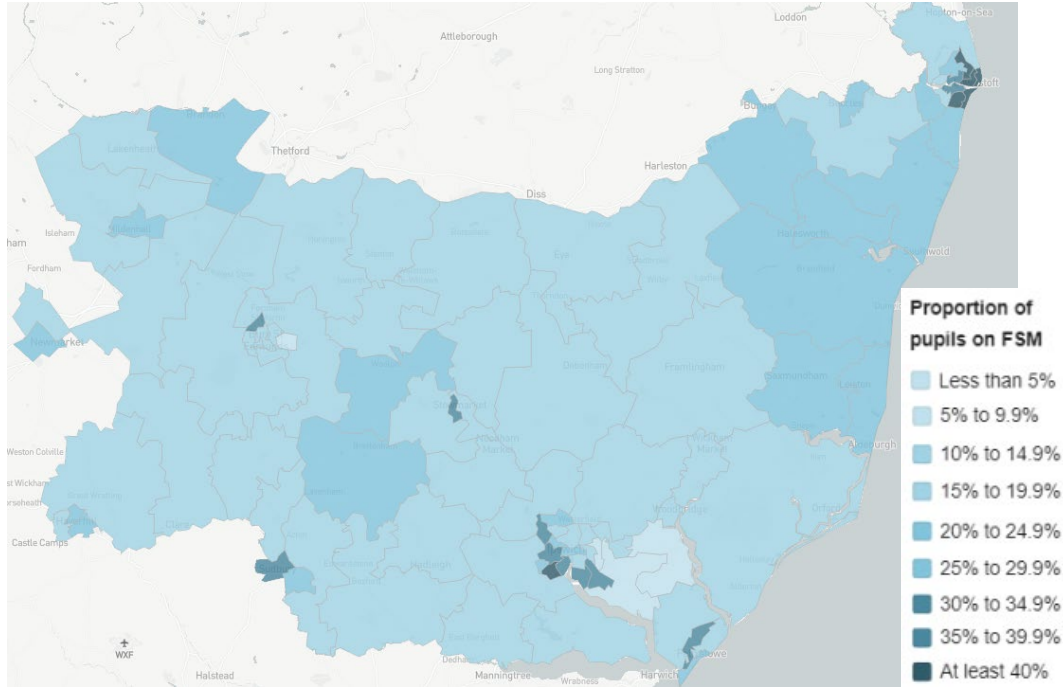
Figure 5 Fall in life expectancy by deprivation decile
England, 2019–21



The number of areas where more than a third of children are entitled to free school meals is increasing



Free School Meal entitlement by Middle Super Output Area (MSOA):



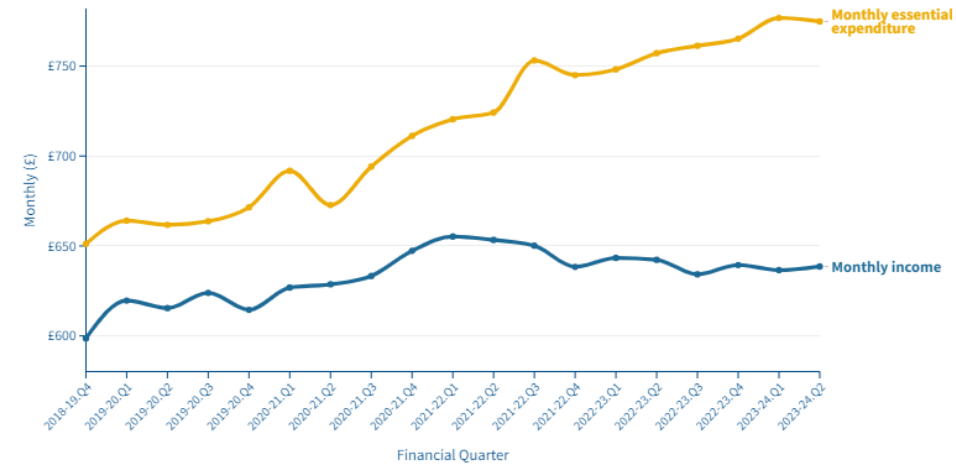
15 areas in Suffolk have at least 30% of their children eligible for free school meals in the latest data. The areas include parts of Ipswich, Lowestoft, Felixstowe, Bury, Sudbury Stowmarket.

Sources: [Cost of Living - Healthy Suffolk](#), [Citizens Advice](#)

National data from Citizens Advice shows how increases in essential costs (monthly spending on essentials such as rent, mortgages, energy costs and groceries) are leading to negative budgets – particularly for people on lower incomes.

Essential costs have outpaced the incomes of the people we help with debt advice

Monthly income of less than £886



Income quartiles refer to income range among the people we help with debt advice. The monthly income for the Bottom Quartile of our debt clients is less than £886; the Second Quartile is £886-£1,349; the Third Quartile is £1,349 to £1,824 and the Top Quartile is more than £1,824.

The number of people we're helping with food bank referrals or emergency charitable support every day 'Crisis support' combines food bank referrals and emergency charitable support.

Food bank referrals Charitable support Crisis support



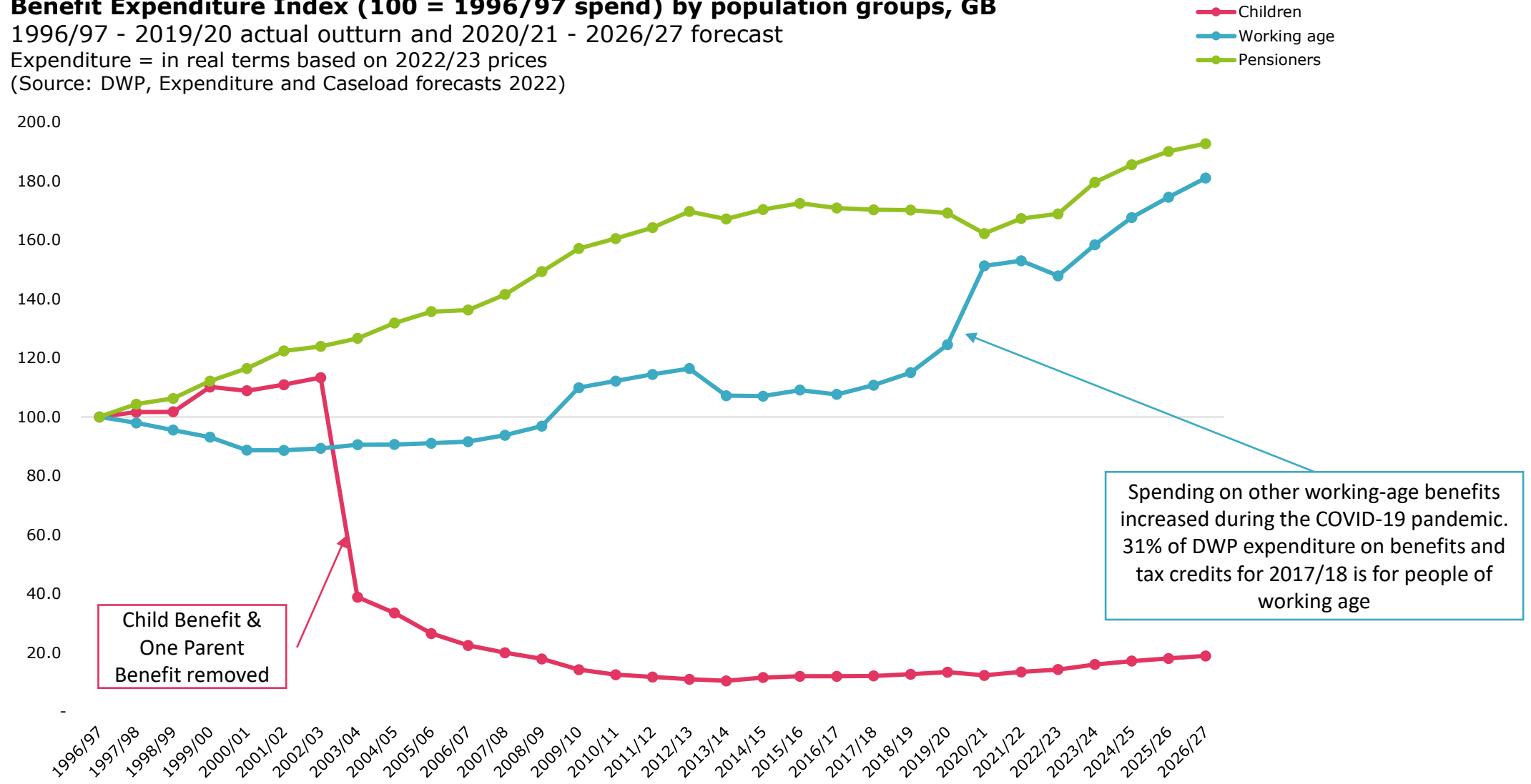
There is a long-term national increasing trend in daily referrals to food banks or emergency charitable support:

Since the Welfare Reform Act 1996, spending on pensioner benefits has risen continuously, and will continue to do so as the older proportion of the population increases. In contrast, benefit on expenditure for children has dropped sharply since 1996, with small increases forecast over the next few years....

Benefit Expenditure Index (100 = 1996/97 spend) by population groups, GB

1996/97 - 2019/20 actual outturn and 2020/21 - 2026/27 forecast

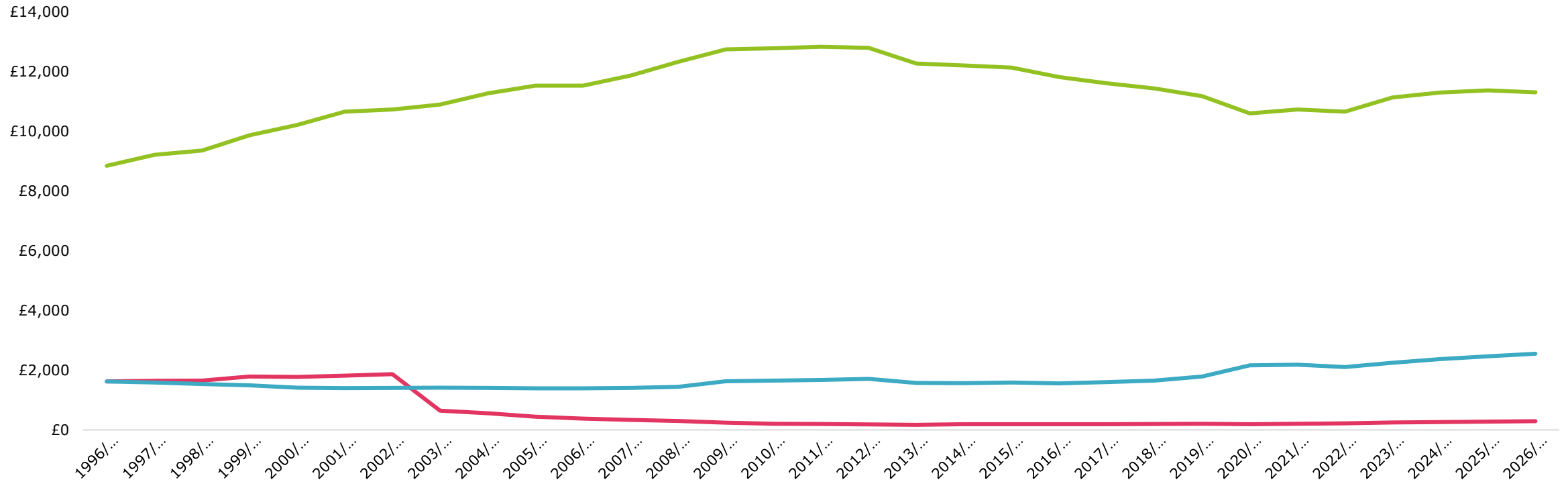
Expenditure = in real terms based on 2022/23 prices
 (Source: DWP, Expenditure and Caseload forecasts 2022)



...in terms of benefit spend per head, this has increased by +26% for pensioners and +10% for those of working age between 1996/97 and 2019/20, while spend per head for children declined by -87%.

GB Benefit Expenditure (in real term based on 2022/23 prices):
spend per head by population groups (based on total GB population in each group),
 1996/97 - 2019/20 actual outturn and 2020/21 - 2026/27 forecast
 (Sources: DWP, Expenditure and Caseload forecasts)

Children
 Working Age
 Pensioners



In Suffolk in 2021/22, over 60% of benefit expenditure was to pensioners (58% State Pension, compared to 49.2% Great Britain).

Sources: [SODA Understanding Poverty report](#), [DWP benefit expenditure by LA](#)

Suffolk +20 years – will our **economy** be sufficient to fund what we will need?

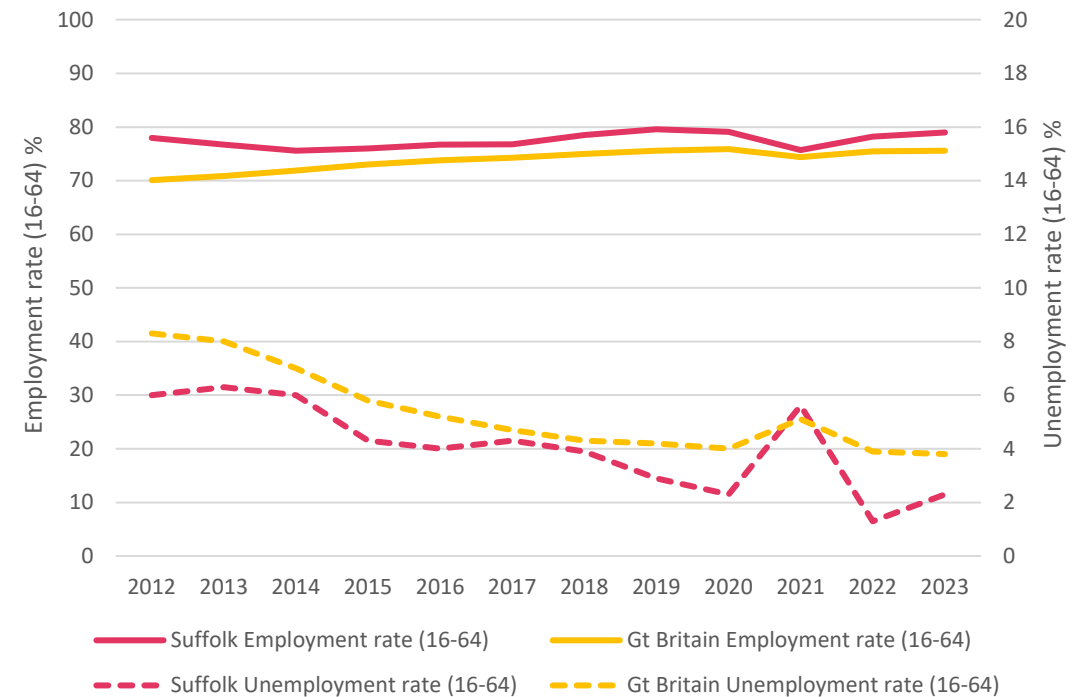
Suffolk's employment rate is consistently higher than Great Britain, and the local unemployment rate is lower than the national level

Employment and unemployment (Jul 2022 – Jun 2023)

	Suffolk (Numbers)	Suffolk (%)	East (%)	Great Britain (%)
Economically Active	376,800	80.9%	81.1%	78.6%
In Employment	368,500	79.0%	78.2%	75.6%
Employees	310,600	67.7%	68.0%	66.0%
Self Employed	57,300	11.1%	9.9%	9.3%
Unemployed	8,300	2.2%	3.5%	3.8%
Economically Inactive	84,000	19.1%	18.9%	21.4%

Unemployment has almost doubled since 2021/22 (from 4,600)

Employment and unemployment rates:



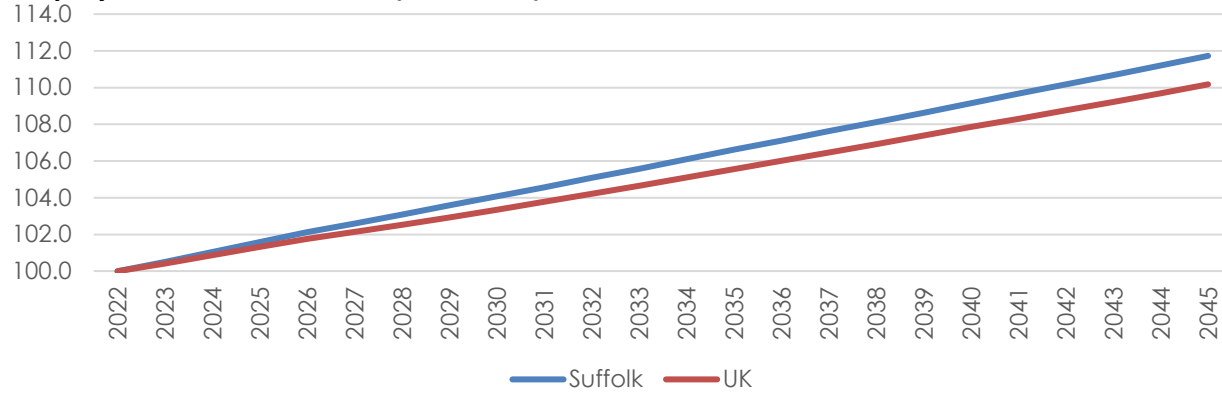
But

- The nature of employment is changing; **more than 1 million people in England (3.6%) are now 'employed' on zero hours contracts**
- "By 2023, the richest 50 families in the UK held more wealth than half of the UK population, comprising 33.5 million people. If the wealth of the super-rich continues to grow at the rate it has been, **by 2035, the wealth of the richest 200 families will be larger than the whole UK GDP.**"
- **A third of adults in the UK have no savings, or less than £1,000 in savings**
- For the poorest 10th of the British wealth distribution, 'median net financial wealth... was zero, meaning that less than half of the poorest decile have financial assets... that outweigh their financial liabilities, such as outstanding credit card balances and loans' (The Office for National Statistics)
- For the majority of this group (the poorest 10%), property and pension wealth is also zero.

Sources: [Nomis – Annual Population Survey](#); [ONS LFS](#), [Equality Trust](#), [ONS wealth](#)

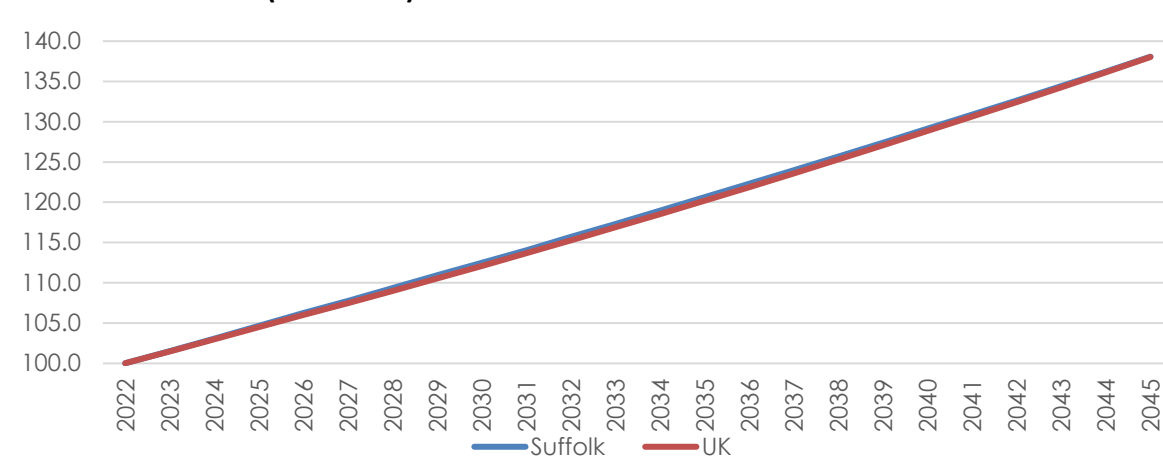
Although Suffolk is forecast to see above average employment and GVA growth, it is unlikely to close the current productivity gap due to low wages...

Employment indexed to 100 (100=2022):



Employment is forecast to grow more strongly in Suffolk than in the UK as a whole, but GVA growth is only expected to keep pace with the UK average.

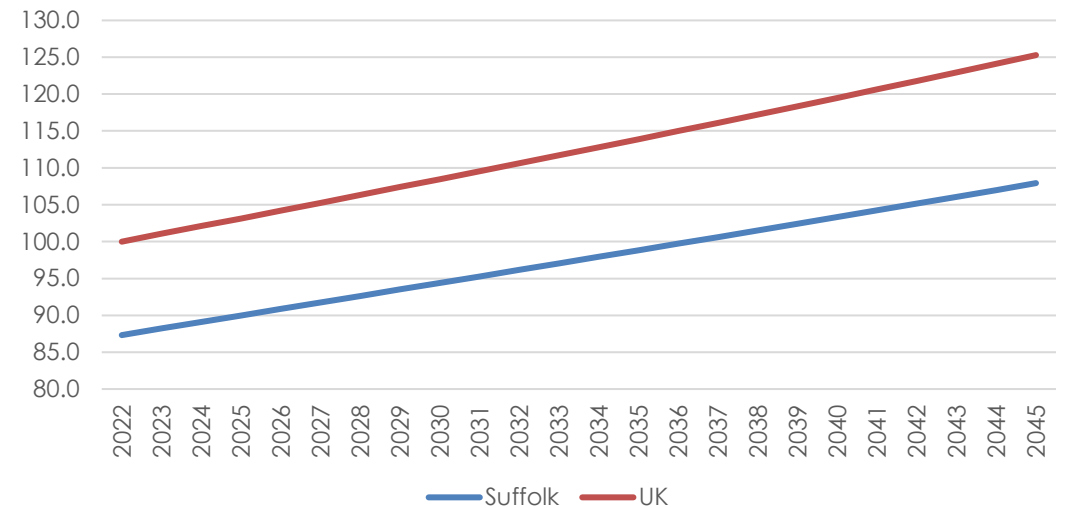
GVA indexed to 100 (100=2022):



... but Suffolk's labour productivity (GVA per worker) is forecast to take around 14 years to reach the **current** UK level, by which time the UK figure is expected to have grown by around 15%. Labour productivity is expected to remain at less than 90% of the UK average

The "productivity gap" is expected to widen over the next 20 years **from £2.6bn in 2022 to £3.7bn in 2042.**

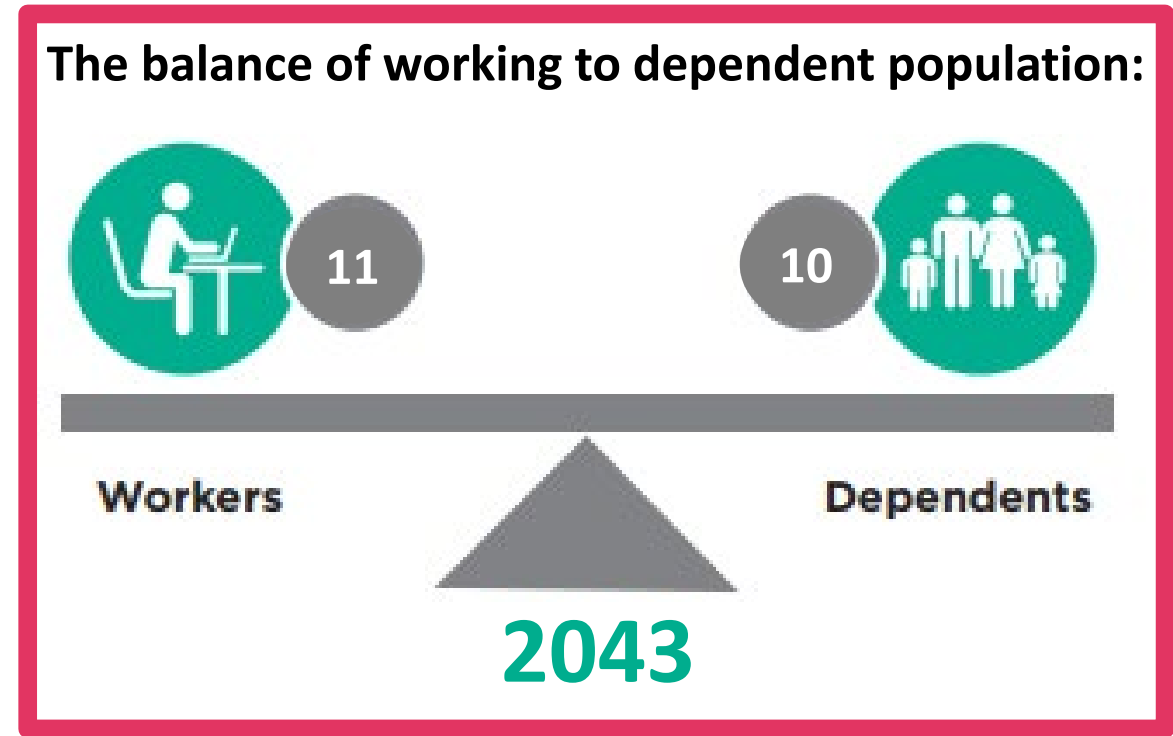
Labour productivity – Indexed to 100 (100 = UK in 2022):



Source: East of England Forecasting Model 2019. "Productivity gap" is the difference in total GVA Suffolk would produce if our productivity per worker was at the UK average

Suffolk's labour force is likely to dwindle in proportion to our total population...

- Currently 88.2% of people in Suffolk aged 65 and over are economically inactive. If this trend continues, **more than 1 in 4 (27.1%) of Suffolk's population will be economically inactive people aged 65 and over by 2043** (the increasing retirement age will mitigate against this to some degree) compared to **21.9%** today.
- Economic forecasting from the East of England Forecasting Model (2019) currently suggests that Suffolk job numbers will grow by 10% (38,000) between 2022 and 2042, though this was based on an assumption of much stronger working age population growth than Office for National Statistics (ONS) projections.

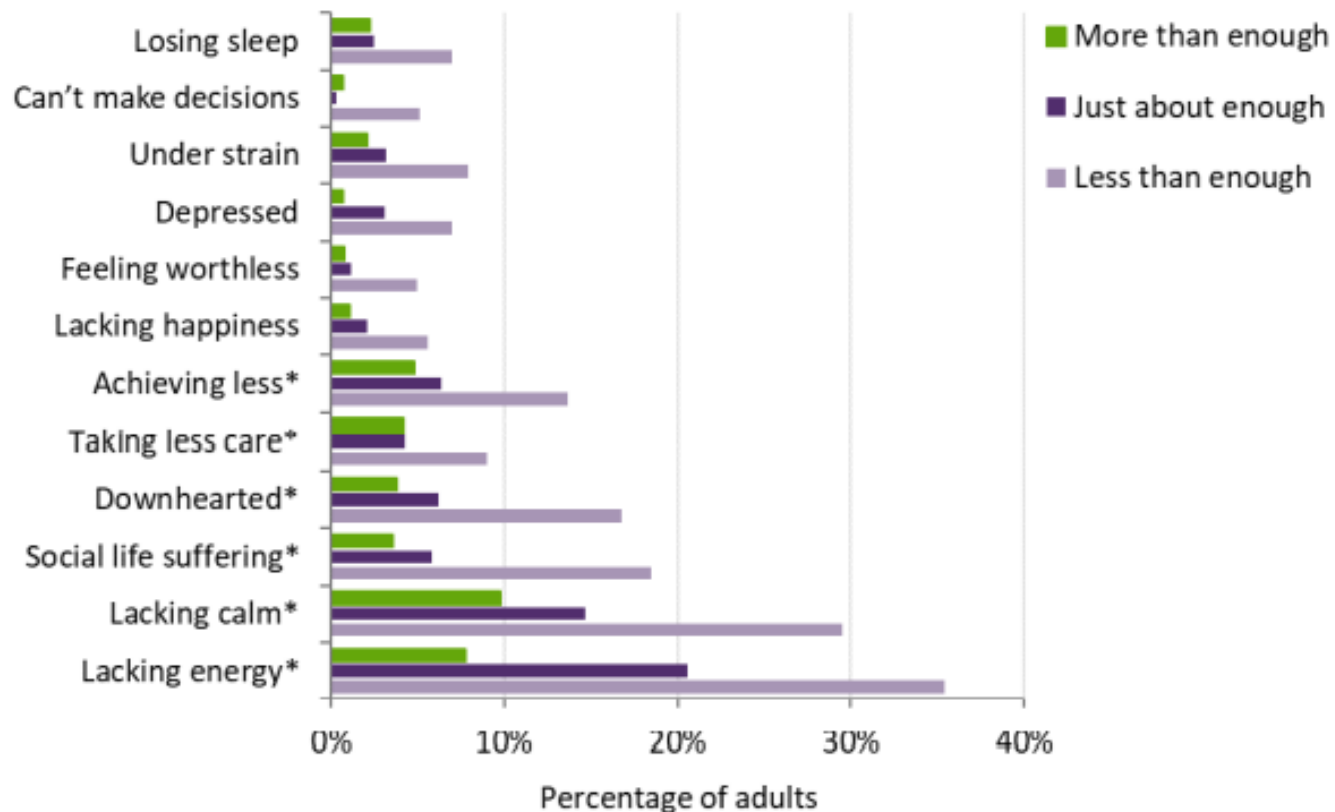


By 2043, there will only be **1.1** people of working age (18-64) for every child or person of retirement age – **2.8** people aged 18-64 for every child and **1.7** for every person of retirement age.

In 2023 the overall ratio is **1.2 : 1**, with **2.8** working age residents for every child and **2.2** for every individual of retirement age.

... and mental wellbeing is much lower for people who think they do not have enough resources to fund their retirement....

Figure 12: Age-old worry: the adequacy of pension provision shapes all the anxiety markers in the run-up to retirement

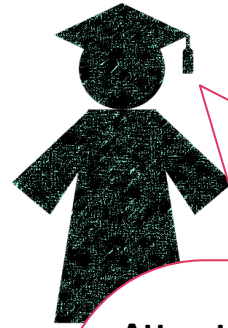


Notes: Indicators without an asterisk are derived from the General Health Questionnaire (GHQ) and those with an asterisk are from the Short Form Survey (SF-12). See Annex A for the precise wording and use made of each question. Source: JRF analysis of Understanding Society, 2019/20

... so improving the education and skills of those who are working, including keeping older workers in the workforce for longer, becomes ever more vital

National data indicates:

- Graduates and postgraduates continue to have higher employment rates than non-graduates.
- In 2022, the employment rate for working-age graduates – those aged 16 to 64 – was 87.3%, up 0.6 percentage points from 2021 (86.6%). For working-age postgraduates the employment rate was 89.3% (up 1.1 percentage points), for non-graduates it was 69.6% (a decrease of 0.2 percentage points from 2021).
- 66.3% of working-age graduates were in high-skilled employment, compared with 78.3% of postgraduates and 23.6% of non-graduates.
- The median salary for working-age graduates was £38,500 in 2022. This was £11,500 more than non-graduates (£27,000) but £6,500 less than postgraduates (£45,000).



Attracting and retaining graduates is key.
UoS should provide a boost to Suffolk's performance

66% of graduates from HEIs in Norfolk and Suffolk still reside in the East of England five years after graduation. However, a large proportion of these graduates could be outside of the LEP area in Cambridgeshire or Essex.

The University of Suffolk has high graduate retention, with 90% of graduates residing in the East of England five years after graduation.

Other data suggests percentage of graduates residing in Norfolk and Suffolk would be higher if there were more job opportunities requiring higher skill levels and offering higher salaries.

*Data from [New Anglia LEP](#) (2021)

What to do?

- Consider how mental health and emotional wellbeing may be affected, either positively or negatively, by what we have discussed
- **Prevent** everything which is possible to prevent
- Continue to **mitigate health inequalities** in local populations
- Develop **new models of health and care** – our current ones will not cope with our ageing population (or future pandemics) if we deliver care in the way we do now
- Continue the relentless focus on **education and skills** particularly for the most disadvantaged children
- Consider how larger companies / **highly skilled work** could complement the SME work Suffolk is already good at, but which offers comparatively few highly skilled / highly paid roles
- Try to **mitigate the impact of the cost of living crisis as much as possible** – high levels of employment are generally protective against inequalities, but we are starting from a low wage base
- Try to address the fragmentation of **housing policy** – history suggests current approach will not cope with future demands