Health State Life Expectancy in Wirral (2019-2023)

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Health State Life Expectancy in Wirral (2019-2023)

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Wirral Technical Briefing – Health State Life Expectancy (2019-2023)

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Executive Summary

Key Messages

- Health inequalities in Wirral are substantial, with significant differences between MSOAs in life expectancy, healthy life expectancy and disability-free life expectancy.
- The same communities consistently experience the poorest outcomes across all three measures, particularly Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Poulton and Birkenhead South.
- Inequalities in healthy life expectancy and disability-free life expectancy are considerably larger than inequalities in life expectancy, demonstrating that differences in quality of life exceed differences in longevity.
- Across all three measures, a greater proportion of Wirral neighbourhoods fall within the lowest national deciles than would be expected nationally, indicating a concentration of poorer health outcomes within the borough.
- MSOAs experiencing the poorest health outcomes also tend to experience less favourably across a range of wider determinants spanning the life course, highlighting the importance of addressing the broader social, economic and environmental factors that influence health.

Conclusion

Whilst Wirral performs relatively well overall compared with many similar local authorities, substantial inequalities remain between communities. Reducing these inequalities will require sustained action across the life course to improve both the length and quality of life for all residents.

Introduction

Why Health State Life Expectancy Matters

The Office for National Statistics (ONS) 2026, explains that health state life expectancy measures not only how long people live, but how long they live in good health and free from disability providing a broader understanding of population health than life expectancy alone. While life expectancy measures how long people can expect to live, healthy life expectancy and disability-free life expectancy help us understand how many of those years are likely to be lived in good health and free from disability. Together, these measures provide insight into both the length and quality of life experienced by a population.

As mentioned in the Marmot review, health state life expectancy is influenced by a wide range of social, economic and environmental factors, including income, education, employment, housing and access to services. The Marmot Review highlights how inequalities in these wider determinants can lead to substantial differences in health outcomes between communities. As a result, populations can experience relatively favourable overall health outcomes whilst still experiencing significant inequalities within local areas.

Understanding health state life expectancy is therefore important not only for monitoring population health, but also for identifying health inequalities and supporting action to improve both the length and quality of life for all residents.

Purpose of the Brief

This briefing presents the latest Health State Life Expectancy estimates for Wirral and explores how Life Expectancy (LE), Healthy Life Expectancy (HLE) and Disability-Free Life Expectancy (DFLE) vary across communities within the borough. Using Office of National Statistics (ONS) Middle-layer Super Output Area (MSOA)-level data for 2019-2023, the report aims to identify the scale of health inequalities, highlight areas experiencing the poorest outcomes, and provide evidence to support action to improve health, wellbeing and equity across Wirral.

Relationship to the Annual Life Expectancy Report

This report complements the Annual Life Expectancy Report by focusing on inequalities within Wirral rather than trends over time. While the Annual Life Expectancy Report provides the strategic overview of population health and comparisons with regional and national benchmarks, this briefing uses MSOA-level health state life expectancy data to better understand how outcomes vary between communities. Together, the two reports provide a comprehensive picture of both overall performance and health inequalities across the borough.

Policy Context

National Policy Context

HLE is included within the Government's Local Outcomes Framework (LOF) as a key measure of population health and wellbeing. The framework compares local authorities against a group of statistical neighbours with similar demographic and socio-economic characteristics, providing an important benchmark for assessing local performance. HLE is also included within the Public Health Outcomes Framework as a measure of overall population health.

Using the most recent local authority-level data, Wirral performs relatively well compared with its LOF statistical neighbours, indicating that overall healthy life expectancy outcomes (males and females) are stronger than those observed across many comparable local authorities. However, the LOF also includes the Slope Index of Inequality for Life Expectancy, which measures the extent of inequality in health outcomes between the most and least deprived communities, and this measure indicates significant differences in life expectancy between more and less deprived populations. Wirral ranks very highly compared to their LOF statistical neighbours.

Whilst overall borough-level outcomes are comparatively favourable, measures of inequality suggest that substantial differences in outcomes exist within Wirral. This distinction reflects a key principle highlighted by the Marmot Review, as explained above. As a result, populations can achieve relatively good overall health outcomes whilst still experiencing considerable inequalities between their most and least advantaged communities.

The availability of Office for National Statistics (ONS) Health State Life Expectancy estimates at MSOA level provides an opportunity to explore these inequalities in greater detail and this can help identify where inequalities are occurring and which communities experience the poorest outcomes.

Please note: The local authority-level estimates used within national frameworks and the MSOA-level estimates presented in this briefing are derived from different reporting periods and are intended for different purposes. The local authority indicators provide an overview of overall performance, whilst the MSOA estimates provide insight into variation within the borough. Together, they offer complementary perspectives on population health and health inequalities. The aim is not to reassess Wirral's overall performance, but to better understand the geography, scale and nature of inequalities within the borough. In doing so, it helps explain why relatively strong borough-level outcomes can coexist with substantial health inequalities and supports a more targeted intensive approach to reducing those inequalities, while maintaining accessible services across the borough.

Local Strategic Context

Reducing health inequalities is a central ambition of the Wirral Plan and wider partnership priorities. Understanding how LE, HLE and DFLE vary across communities helps identify where the greatest inequalities exist and where action may have the greatest impact.

This briefing complements existing LE reporting by providing a MSOA-level perspective on health outcomes. Whilst the Annual Life Expectancy Report focuses on trends over time and comparisons with Cheshire and Merseyside, the North West, England and other comparator authorities, this report focuses on inequalities within Wirral. Together, the two reports provide a more complete understanding of population health and inequality across the borough.

Understanding the Measures

This report examines three complementary measures of population health: LE, HLE and DFLE. Together, they provide information on not only how long people live, but how many of those years are spent in good health and free from disability. The measures should be interpreted together, as each captures a different aspect of population health.

Life Expectancy (LE)

Life Expectancy estimates the average number of years a person can expect to live if current mortality rates continue throughout their lifetime. It is the most widely used measure of population health and provides an indication of overall longevity within a population. Whilst LE is an important measure of health outcomes, it does not indicate the quality of life experienced during those years or whether they are lived in good health.

Healthy Life Expectancy (HLE)

Healthy Life Expectancy estimates the average number of years a person can expect to live in good health. It combines information on mortality with self-reported health status to estimate how many years of life are likely to be spent in good or very good health. HLE provides a broader measure of population health than life expectancy alone by considering both the quantity and quality of life.

Disability-Free Life Expectancy (DFLE)

Disability-Free Life Expectancy estimates the average number of years a person can expect to live free from a limiting long-term illness or disability. It provides an indication of how long people are likely to live independently and without significant activity limitations. DFLE complements HLE by focusing specifically on disability and functional limitation, providing additional insight into healthy ageing and the burden of ill health within a population.

Interpreting the Measures Together

Considering these measures together provides a more complete understanding of population health:

- LE indicates how long people live.
- HLE indicates how many years are spent in good health.
- DFLE indicates how many years are lived free from limiting illness or disability.

The differences between these measures can provide insight into the number of years that people spend in poor health or living with disability and help identify inequalities in health outcomes between communities.

Data and Methodology

About the Data

MSOAs are statistical geographies developed by ONS for the publication and analysis of small-area data. MSOAs typically have a population of between 5,000 and 15,000 residents, providing a consistent geography that is broadly comparable in population size across England. There are 6,856 MSOAs in England.

MSOAs are widely used in public health analysis because they provide a balance between geographical detail and statistical reliability. They are small enough to identify local variations and inequalities in health outcomes, while large enough to protect confidentiality and reduce random variation that can occur in areas with smaller populations.

For LE statistics, MSOAs are particularly useful because the larger population base provides a sufficient number of deaths and population to produce robust and reliable estimates. This allows meaningful comparison of LE between communities and helps identify geographical inequalities in health outcomes that may be hidden when analysing data at local authority level

This briefing	Annual Life Expectancy Report
ONS MSOA Health State Life Expectancy estimates	Latest local authority estimates
2019-2023 (5-year pooled)	2023-2025 (3-year pooled)
MSOA inequalities	Borough trends and benchmarking
LE, HLE and DFLE at MSOA level	Latest borough-level performance

Life Expectancy in Wirral (2019–2023)

The most recent local authority-level LE estimates (2023-2025) are available through national reporting frameworks and are considered within the Annual Life Expectancy Report and other performance monitoring publications. However, equivalent MSOA-level estimates are not currently available. This briefing therefore uses the latest ONS Health State Life Expectancy estimates available at MSOA level for the period 2019-2023. Whilst these estimates relate to an earlier reporting period, they provide a unique opportunity to understand how health outcomes vary between communities within Wirral and to examine inequalities at a MSOA level.

Overall Borough Context

LE at birth in Wirral for the period 2019-2023 was 77.6 years for males and 81.6 years for females. LE in Wirral is lower than the England value for both males (79.1, England) and females (83.0, England) and is same value for the North West for both males (77.6, North West) and females (81.6, North West). Whilst these borough-level figures provide an overview of population health, they mask considerable variation within the borough. The following analysis explores how LE between communities across Wirral.

Key Messages

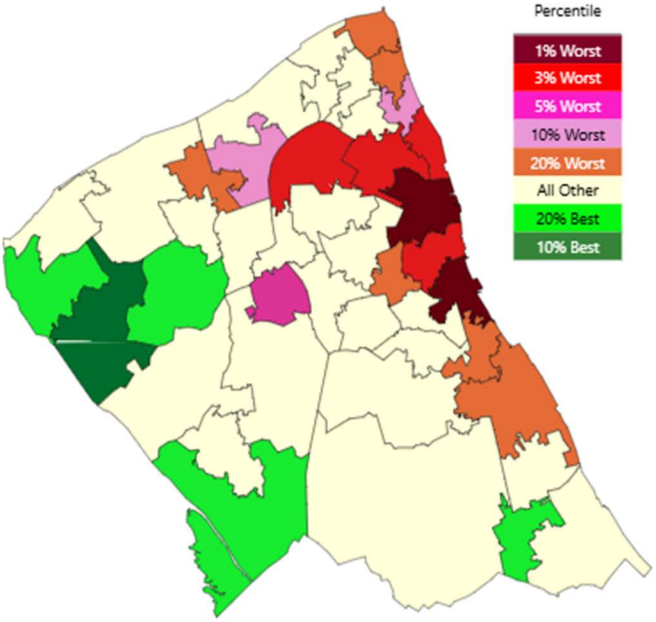
- LE inequalities within Wirral remain substantial, with a gap of 16.4 years for males and 12.9 years for females between the highest and lowest performing MSOAs.
- MSOAs with the lowest LE are concentrated within eastern Wirral, including Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Birkenhead South and Poulton, whilst the highest LE is observed in west and south-western Wirral communities.
- Wirral has one of the largest LE gaps in England, ranking 4th highest for males and 15th highest for females when compared with other local authorities.
- Poor LE outcomes are overrepresented within the borough, with more than one in five MSOAs falling within the lowest national decile for both males and females, indicating a greater concentration of poorer outcomes than would be expected nationally.
- Significant differences in longevity persist across Wirral, demonstrating that opportunities for a long life are not shared equally between communities and continue to be influenced by wider social, economic and environmental factors.

Male and Female Life Expectancy in Wirral by MSOAs

Male Life Expectancy

Male LE inequalities within Wirral are substantial, with a 16.4-year gap between the MSOAs with the highest and lowest life expectancy..

Figure 1: Male Life Expectancy by MSOA (2019-2023)



MSOA	HLE
Birkenhead Central	67.5
Tranmere	69.8
Bidston Hill	71.4
Poulton	71.9
Seacombe	72.0
Birkenhead South	72.3
Woodchurch	72.6
Leasowe South & Moreton East	73.4
Egremont	73.8
Bebington New Ferry	75.6
New Brighton	75.6
Wallasey East	75.9
Lower Bebington & Bromborough Pool	76.0
Oxton South	76.0
Moreton West	76.1
Claughton South & Oxton North	76.2
Egerton Park	76.2
Noctorum North & Upton East	76.4
Liscard	77.3
Claughton North	78.4
Bromborough North	78.7

MSOA	HLE
Eastham	79.1
Higher Bebington	79.3
Leasowe	79.5
Hoylake	79.7
Saughall Massie	80.0
Upton West	80.0
Great Meols	80.3
Prenton	80.4
Heswall	80.5
Noctorum South	80.5
Thursaston & Irby	80.7
Poulton, Raby Mere & Thornton Hough	81.1
Woodhey	81.1
Wallasey Central	81.3
Wallasey Village	81.3
Pensby & Thingwall	81.5
Bromborough South	81.9
Gayton & Lower Heswall	81.9
West Kirby	82.5
Greasby	82.6
Caldy & Newton	83.9

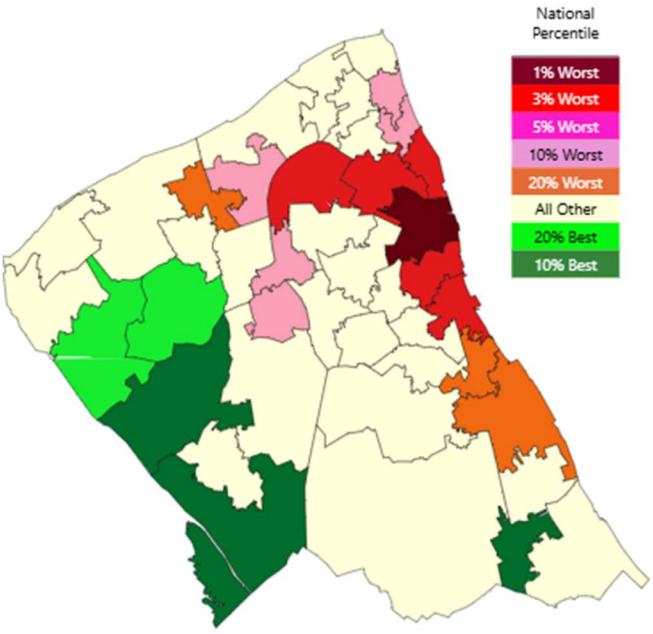
Source: Office for National Statistics

Figure 1: Male Life Expectancy by MSOA (2019-2023)**Figure 1** above shows LE ranges from 67.5 years in Birkenhead Central to 83.9 years in Caldy & Newton. The lowest life expectancy is concentrated within eastern Wirral MSOAs of the borough, whilst the highest is concentrated in west and south-western Wirral areas. This pattern demonstrates a marked social gradient in health outcomes across Wirral and suggests that the factors influencing life expectancy are not evenly distributed across communities.

Female Life Expectancy

Female LE varies substantially across Wirral, with women living in the most disadvantaged areas of Wirral expected to live almost 13 years fewer than those living in areas with the highest Life expectancy.

Figure 2: Female Life Expectancy by MSOA (2019-2023)



MSOA	HLE
Birkenhead Central	74.9
Tranmere	76.0
Bidston Hill	76.5
Seacombe	76.6
Birkenhead South	76.8
Poulton	76.9
Egremont	78.3
Noctorum North & Upton East	79.0
Wallasey East	79.0
Woodchurch	79.0
Leasowe South & Moreton East	79.1
Bebington New Ferry	79.4
Moreton West	79.7
Lower Bebington & Bromborough Pool	80.1
Bromborough North	81.2
Claughton South & Oxton North	81.2
Egerton Park	81.5
Liscard	81.6
Heswall	81.7
Hoylake	81.8
Leasowe	81.8

MSOA	HLE
Eastham	81.9
Oxton South	81.9
New Brighton	82.1
Claughton North	82.5
Prenton	82.8
West Kirby	82.9
Upton West	83.0
Poulton, Raby Mere & Thornton Hough	83.1
Wallasey Village	84.1
Woodhey	84.3
Higher Bebington	84.4
Wallasey Central	84.4
Saughall Massie	84.5
Pensby & Thingwall	84.7
Noctorum South	85.0
Great Meols	85.2
Greasby	85.7
Caldy & Newton	86.4
Gayton & Lower Heswall	86.7
Thursaston & Irby	86.7
Bromborough South	87.8

Source: Office for National Statistics

As shown in
Figure 2, female LE at birth ranges from 74.9 years in Birkenhead Central to 87.8 years in Bromborough South, creating a gap of 12.9 years across the borough. Lower LE is concentrated within eastern Wirral, particularly in Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Birkenhead South and Poulton, several of which (14) rank amongst the lowest-performing MSOAs nationally. In contrast, the highest LE estimates are found in west and south-western MSOAs including Gayton & Lower Heswall, Thurstaston & Irby and Bromborough South.

The distribution of female LE demonstrates a persistent geographical pattern of inequality across Wirral, showing an east/west divide. The concentration of lower LE within more deprived communities suggests that differences in health outcomes continue to be strongly influenced by wider social, economic and environmental factors. Whilst women generally live longer than men (with the lowest life expectancy as 74.9 compared to 67.9 and the highest 87.8 compared to 83.9 years), substantial inequalities remain between communities, highlighting the unequal distribution of opportunities for good health across the borough.

Inequalities in Life Expectancy

LE inequalities can be assessed in several ways. This section examines the scale of inequalities within Wirral, the concentration of lower life expectancy across communities, and how Wirral compares with the national distribution of life expectancy. Together, these analyses provide a broader understanding of inequality than borough-level averages alone.

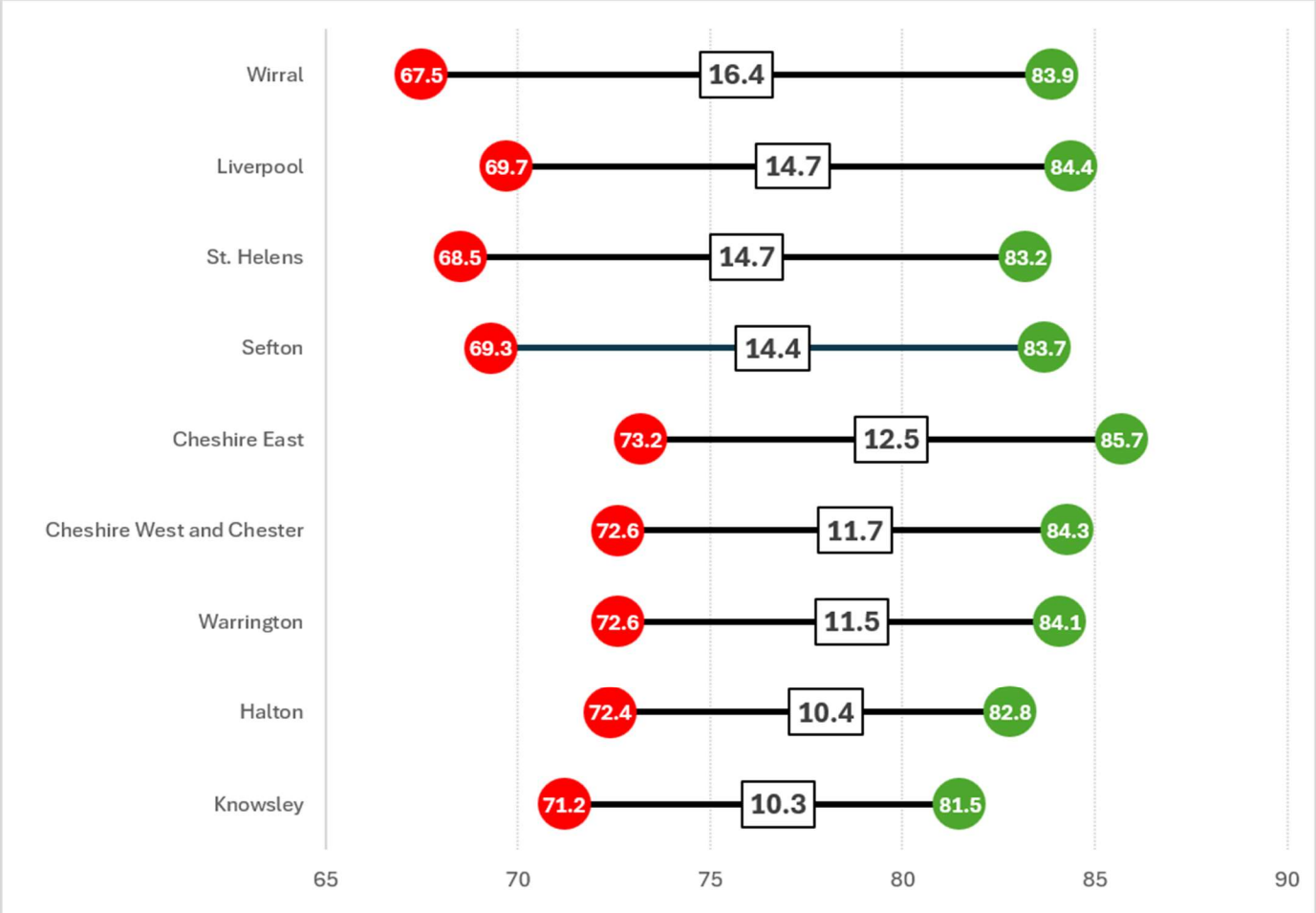
Gap Between MSOAs Experiencing Best and Worst LE

The gap between the MSOAs with the highest and lowest LE provides a simple measure of inequality within a local authority. Larger gaps indicate greater variation in outcomes between communities and can help identify areas where health inequalities are particularly pronounced. This analysis compares the scale of LE inequalities within Wirral against other Liverpool City Region and Cheshire & Merseyside local authorities

Males

The gap in male LE between the highest and lowest performing MSOAs in Wirral is 16.4 years, making it the 4th largest gap observed within any local authority in England. Compared with other Liverpool City Region and Cheshire & Merseyside authorities, see **Figure 3**, Wirral has the widest within-authority gaps in male life expectancy, indicating that inequalities are more pronounced than in many neighbouring areas.

Figure 3: Male Life Expectancy gap between best and worst MSOA's by Liverpool City Region and Cheshire & Merseyside Local Authorities (2019-2023)

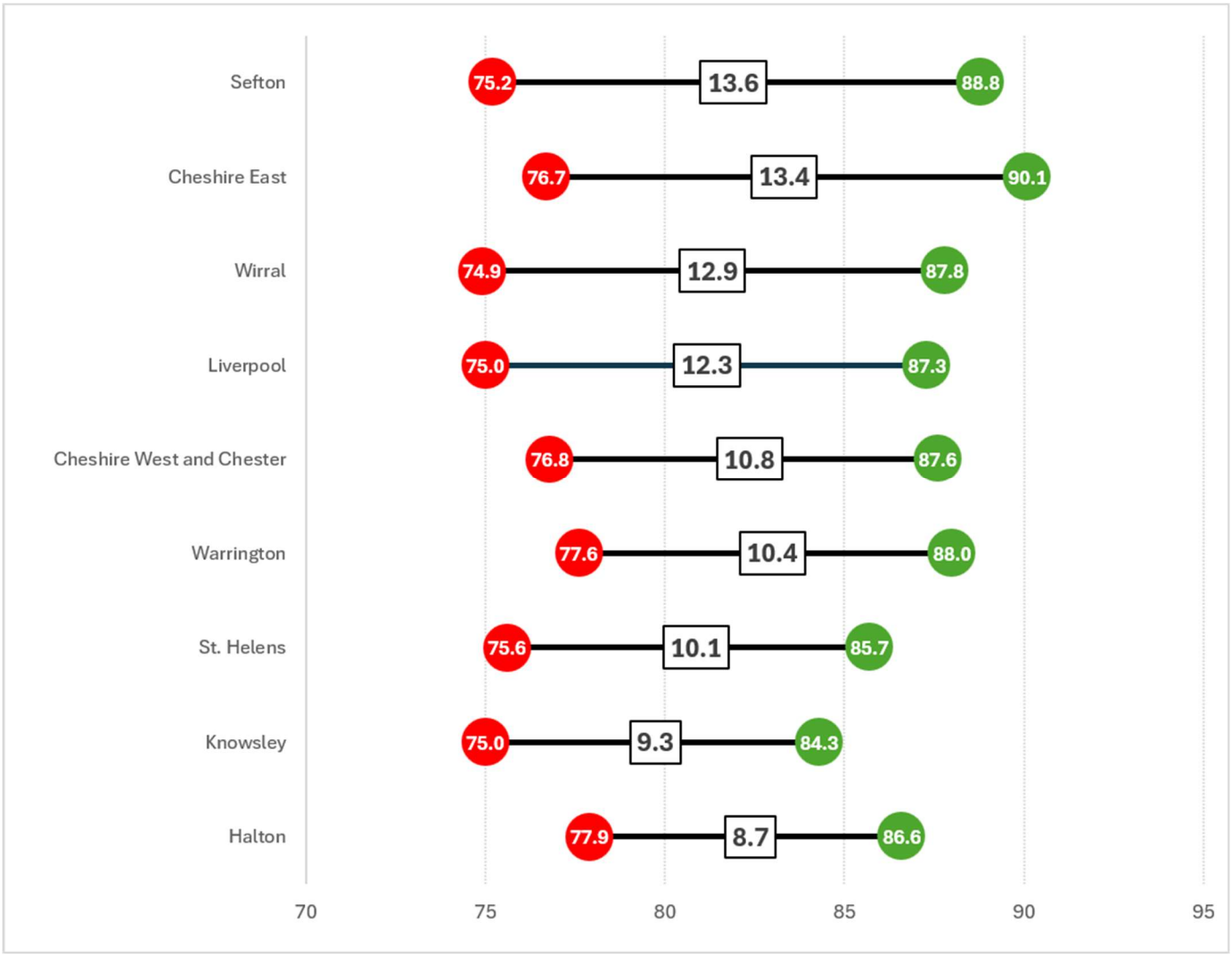


Source: Office for National Statistics

Females

The gap in female LE between the highest and lowest performing MSOAs in Wirral is 12.9 years, the 15th largest gap observed nationally between MSOAs within a local authority. Compared with other Liverpool City Region and Cheshire & Merseyside authorities, see **Figure 4**, Wirral continues to experience substantial inequalities in female LE, although the magnitude of inequality is lower than that observed for males.

Figure 4: Female Life Expectancy gap between best and worst MSOA's by Liverpool City Region and Cheshire & Merseyside Local Authorities (2019-2023)



Source: Office for National Statistics

National Decile Distribution

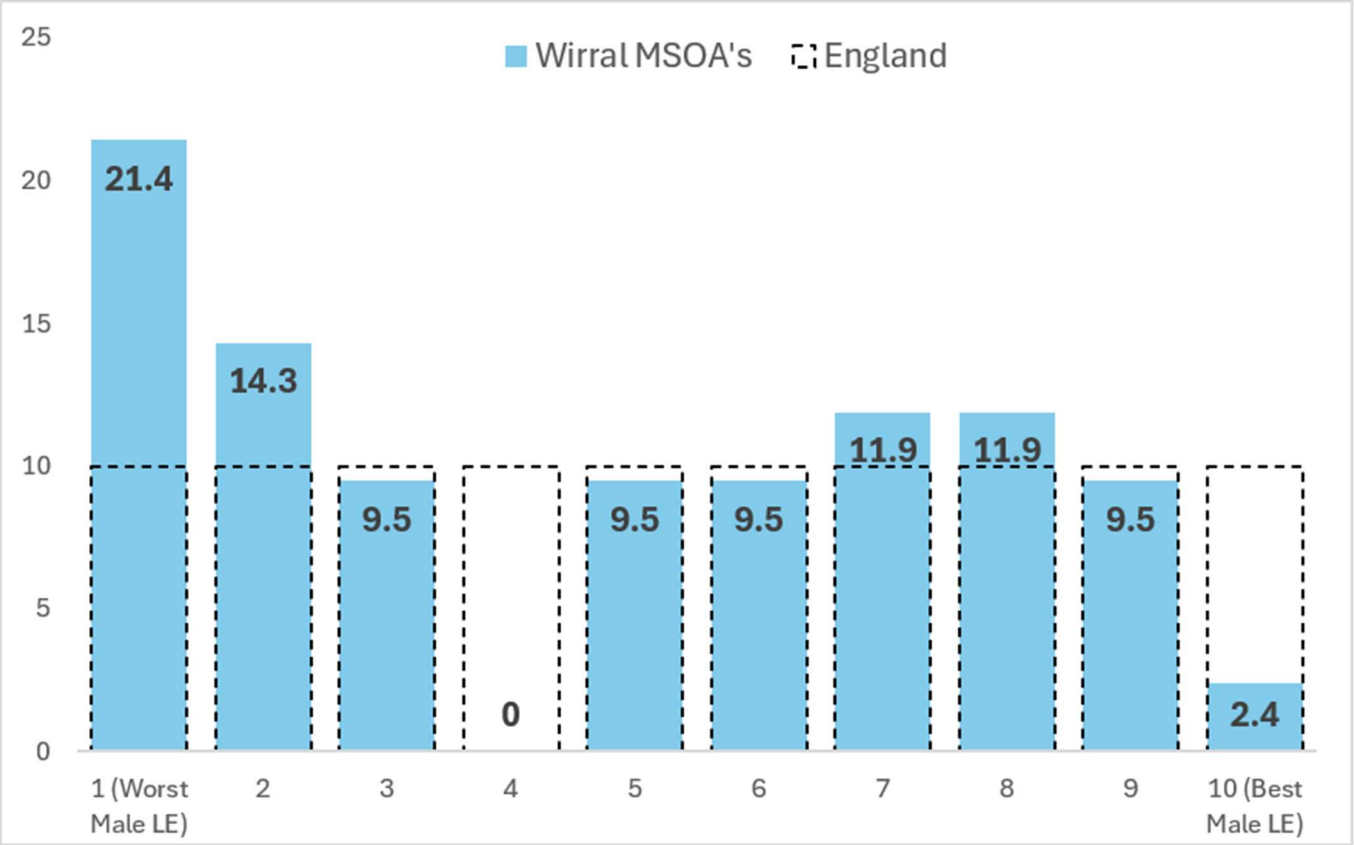
Are lower life expectancy outcomes concentrated in Wirral?

To understand whether lower life expectancy outcomes are concentrated within Wirral, communities can be compared with the national distribution of life expectancy. All 6,856 MSOAs in England are ranked and grouped into ten equal-sized groups (deciles), from the lowest LE (Decile 1) to the highest LE (Decile 10). This allows us to assess whether Wirral has a greater or lower concentration of MSOAs with lower LE than would be expected nationally.

Males

The distribution of male LE deciles indicate that the lowest LE outcomes are disproportionately concentrated within Wirral. Around one-fifth of Wirral MSOAs fall within the lowest national decile for male LE, more than double the proportion that would be expected if outcomes were distributed evenly across England (see **Figure 5**). This suggests that men in Wirral are more likely to live in MSOAs with comparatively lower LE than the England average. At the same time, a smaller proportion of MSOAs fall within the highest national deciles, highlighting the unequal distribution of male LE across the borough.

Figure 5: Percentage of Wirral MSOA's by National Male Life Expectancy Decile (2019-2023)

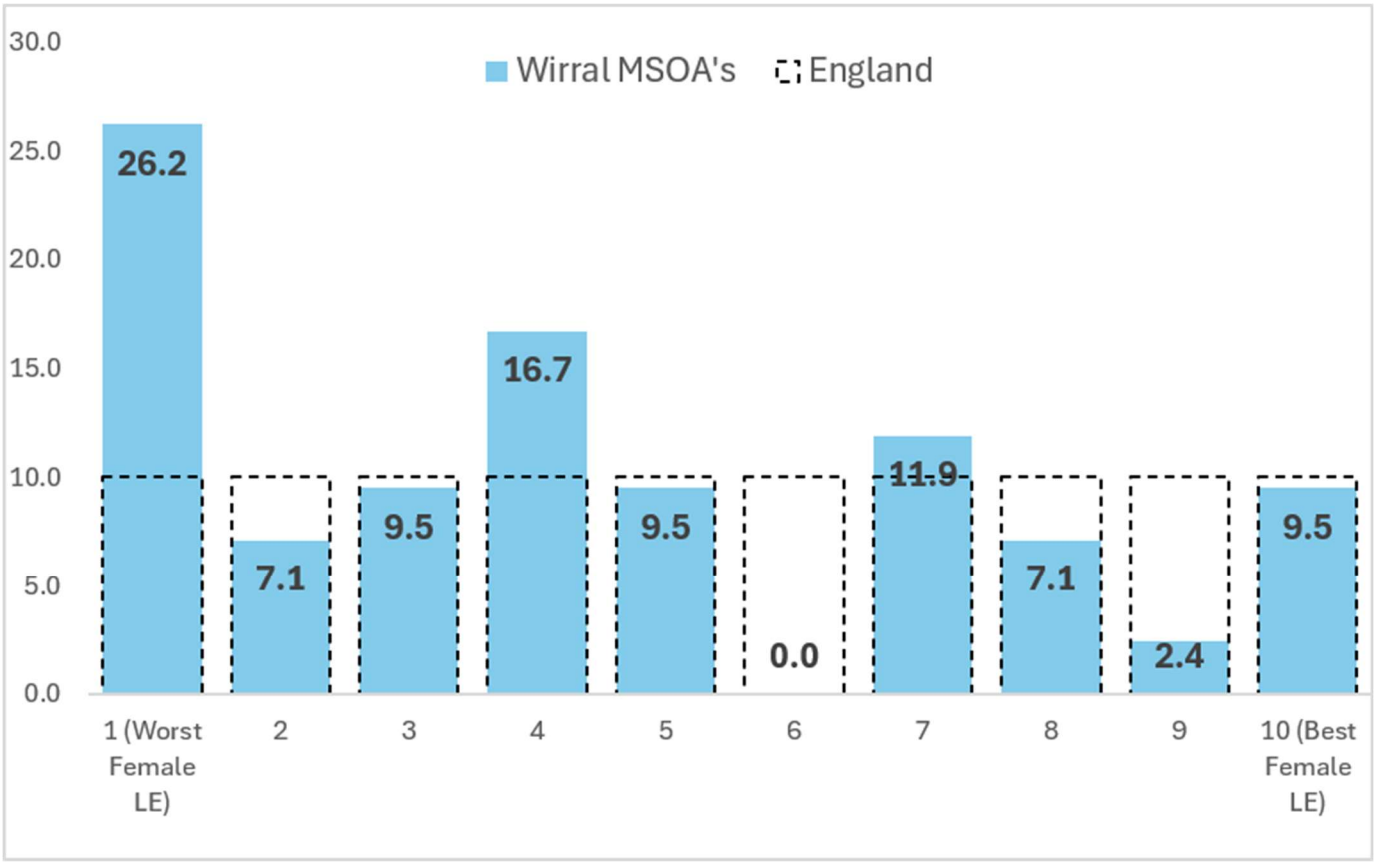


Source: Office for National Statistics

Females

A similar pattern is evident for female LE. Around one-quarter of Wirral MSOAs fall within the lowest national decile, indicating a higher concentration of lowest LE than would be expected nationally. Whilst some MSOAs achieve LE outcomes comparable with the best-performing areas in England, the overall distribution demonstrates that inequalities in female LE remain substantial across the borough, see **Figure 6**.

Figure 6: Percentage of Wirral MSOA's by National Female Life Expectancy Decile (2019-2023)



Source: Office for National Statistics

National Rankings and Percentiles

How do Wirral MSOAs compare nationally?

National rankings and percentiles help identify communities that experience exceptionally low or exceptionally high LE compared with the rest of England. This analysis highlights where Wirral MSOAs sit within the national distribution and identifies areas that are overrepresented amongst the highest and lowest LE MSOAs nationally.

Males

National rankings show that several Wirral MSOAs experience exceptionally low male LE. Wirral has two MSOAs in the lowest 1% nationally for male LE, Birkenhead Central and Tranmere. Birkenhead Central ranks as the 4th lowest of England's 6,856 MSOAs.

Overall, 4.8% of Wirral MSOAs fall within the lowest 1% nationally and 14.3% fall within the lowest 5%, indicating a greater concentration of lowest LE than would be expected nationally, see **Figure 1** above.

Females

National rankings show that several Wirral MSOAs experience exceptionally low female LE. Wirral has one MSOA within the lowest 1% nationally for female LE: Birkenhead Central, which ranks as the 23rd lowest of England's 6,856 MSOAs. Overall, 14.3% of Wirral MSOAs fall within the lowest 5% nationally, indicating a greater concentration of low female LE than would be expected nationally.

Healthy Life Expectancy at MSOA (2019-2023)

The most recent local authority-level healthy-life expectancy estimates (2022-2024) are available through national reporting frameworks and are considered within the Annual Life Expectancy Report and the local outcomes framework. However, equivalent MSOA-level estimates are not currently available. This briefing therefore uses the latest ONS Health State Life Expectancy estimates available at MSOA level for the period 2019-2023. Whilst these estimates relate to an earlier reporting period, they provide a unique opportunity to understand how health outcomes vary between communities within Wirral and to examine inequalities at a community level.

Overall Borough context

HLE at birth in Wirral for the period 2019-2023 was 62.3 years for males and 64.4 years for females. For this period, HLE in Wirral was lower than the England value for both males (65.1, England) and Females (66.5, England), compared to the North West male HLE was lower for males (62.9, North West) and the same value for females (64.4, North West). Whilst these borough-level figures provide an overview of population health, they mask considerable variation within the borough. The following analysis explores how HLE differs between communities across Wirral.

Key Messages

- HLE inequalities within Wirral are among the largest in England, with a gap of 25.4 years for males and 25.1 years for females between the MSOAs experiencing the highest and lowest HLE, with the lowest HLE concentrated within eastern Wirral, including Birkenhead Central, Seacombe, Bidston Hill and Tranmere, whilst the highest HLE is found in west and south-western Wirral communities.
- Wirral has the largest male HLE gap and the second largest female gap of any local authority in England, demonstrating that healthy years of life are not distributed equally across the borough.
- Areas experiencing lowest HLE are overrepresented within Wirral, with almost one in four MSOAs falling within the lowest national decile for both males and females and almost one in ten falling within the lowest 1% nationally.

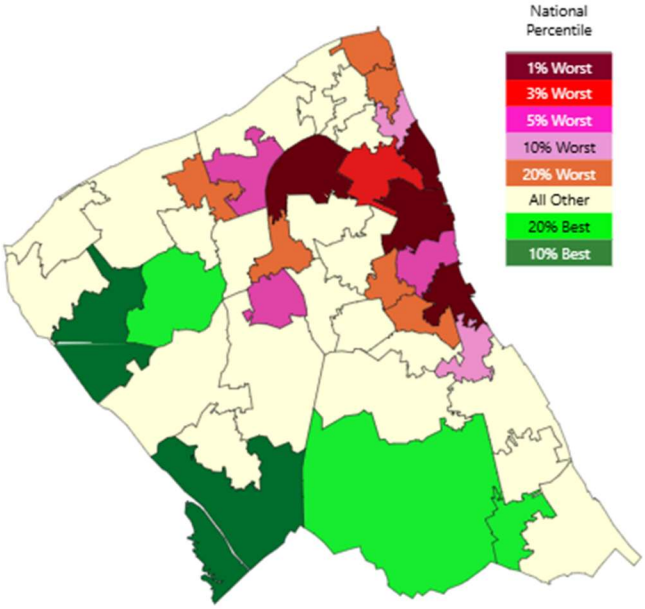
Male and Female Healthy Life Expectancy in Wirral by MSOAs

Male Healthy Life Expectancy

HLE inequalities within Wirral are substantial, with men in some MSOAs to expect more than 25 additional years of good health than those living in the areas experiencing the lowest HLE. Male HLE ranges from 47.8 years in Birkenhead Central to 73.2 years in Caldy & Newton, a gap of 25.4 years, see **Figure 7**. The lowest HLE estimates are concentrated within east Wirral MSOAs, including Birkenhead Central, Tranmere, Seacombe and Bidston Hill, all of which rank within the lowest 1% nationally. In contrast, the highest estimates are found in west and south-western parts of the borough, particularly Caldy & Newton and Gayton & Lower Heswall.

The differences observed in HLE are considerably larger than those seen for LE alone, indicating that inequalities in health extend beyond how long people live. Men living in the most disadvantaged communities can expect to spend substantially fewer years in good health, highlighting the unequal distribution of health and wellbeing across the borough.

Figure 7: Male Healthy Life Expectancy by MSOA (2019-2023)



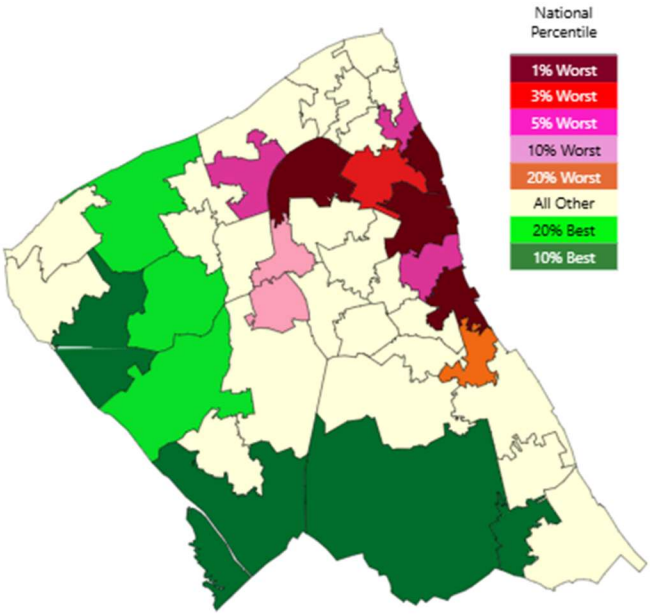
MSOA	HLE	MSOA	HLE
Birkenhead Central	47.8	Bromborough North	64.3
Tranmere	49.7	Claughton North	64.4
Seacombe	52.0	Upton West	65.5
Bidston Hill	52.7	Noctorum South	66.1
Poulton	53.6	Saughall Massie	66.6
Birkenhead South	53.6	Hoylake	66.8
Leasowe South & Moreton East	54.1	Higher Bebington	66.9
Woodchurch	55.1	Prenton	67.0
Egremont	56.1	Woodhey	67.1
Bebington New Ferry	57.4	Wallasey Central	67.5
New Brighton	58.6	Wallasey Village	67.7
Noctorum North & Upton East	58.8	Heswall	67.9
Oxton South	59.5	Great Meols	68.0
Wallasey East	59.6	Pensby & Thingwall	68.0
Moreton West	60.1	Thursaston & Irby	68.6
Egerton Park	60.2	West Kirby	69.1
Claughton South & Oxton North	61.0	Greasby	69.9
Liscard	61.0	Bromborough South	70.2
Leasowe	62.7	Poulton, Raby Mere & Thornton Hough	70.3
Lower Bebington & Bromborough Pool	63.0	Gayton & Lower Heswall	72.8
Eastham	63.6	Caldy & Newton	73.2

Source: Office for National Statistics

Female Healthy Life Expectancy
HLE inequalities for women are substantial across Wirral, with over 25 years difference between the highest and lowest performing MSOAs.

Female HLE ranges from 50.5 years in Birkenhead Central to 75.6 years in Gayton & Lower Heswall, a gap of 25.1 years, see **Figure 8**. The lowest HLE estimates are concentrated within eastern Wirral MSOAs, including Birkenhead Central, Seacombe, Bidston Hill and Tranmere, all of which rank within the lowest 1% nationally. In contrast, the highest estimates are found within west and south-western Wirral MSOAs, particularly Gayton & Lower Heswall, Caldy & Newton, Raby Mere & Thornton Hough, and Bromborough South.

Figure 8: Female Healthy Life Expectancy by MSOA (2019-2023)



MSOA	HLE
Birkenhead Central	50.5
Seacombe	53.0
Bidston Hill	53.1
Tranmere	53.1
Poulton	54.7
Birkenhead South	55.6
Leasowe South & Moreton East	55.8
Egremont	56.3
Woodchurch	58.0
Noctorum North & Upton East	58.5
Bebington New Ferry	59.4
Moreton West	61.5
Wallasey East	62.5
Egerton Park	62.7
Oxton South	63.3
New Brighton	63.4
Liscard	63.6
Leasowe	63.9
Bromborough North	64.0
Eastham	64.1
Claughton South & Oxton North	64.9

MSOA	HLE
Lower Bebington & Bromborough Pool	65.2
Claughton North	65.8
Upton West	67.1
Saughall Massie	67.7
Hoylake	68.0
Heswall	68.2
Prenton	68.2
West Kirby	68.2
Noctorum South	68.3
Wallasey Central	68.4
Wallasey Village	68.4
Pensby & Thingwall	68.7
Woodhey	69.2
Higher Bebington	69.6
Great Meols	71.1
Greasby	71.2
Thursaston & Irby	71.6
Bromborough South	72.6
Poulton, Raby Mere & Thornton Hough	73.3
Caldy & Newton	74.9
Gayton & Lower Heswall	75.6

Source: Office for National Statistics

The scale and distribution of female HLE inequalities closely mirrors that observed for males. However, whilst women generally live longer than men, many women in the most disadvantaged communities spend a substantial proportion of their lives in poor health. This highlights that inequalities in health are not simply about how long people live, but also about the number of years they can expect to live in good health and wellbeing.

Summary
HLE varies considerably across Wirral for both males and females. MSOAs experiencing the lowest HLE are concentrated within eastern parts of the borough and are overrepresented amongst those with the lowest HLE nationally. The scale of these inequalities exceeds those observed for LE, highlighting significant differences in the number of years residents can expect to live in good health.

Inequalities in Healthy Life Expectancy

HLE provides insight into not only how long people live, but how many of those years are spent in good health. This section examines the scale and distribution of HLE inequalities within Wirral and compares MSOA outcomes against the national picture. Together, these analyses help identify where residents experience the greatest number of healthy years lost.

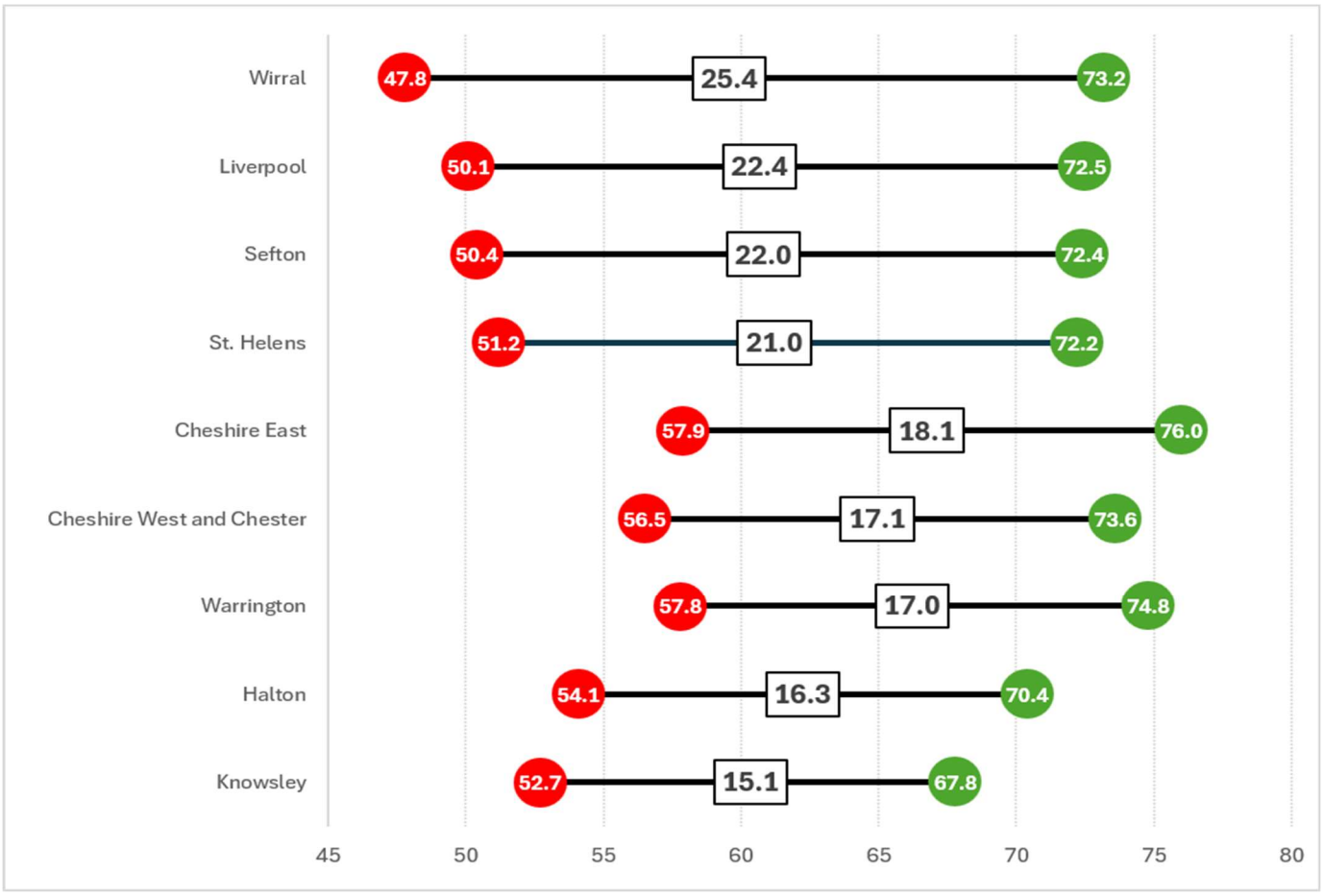
Gap Between MSOAs Experiencing Best and Worst HLE

One way of measuring inequalities in HLE is to compare outcomes in the MSOAs with the highest and lowest HLE. Larger gaps indicate greater inequalities in the number of years people can expect to live in good health and help quantify the extent to which opportunities for a healthy life vary between communities. Comparing these gaps across local authorities also provides insight into whether inequalities within Wirral are typical or unusually large relative to neighbouring areas and England as a whole.

Males

The gap in male HLE between the highest and lowest performing MSOAs in Wirral is 25.4 years, making it the largest gap observed within any local authority in England. Whilst HLE inequalities exist across many local authorities, the scale of inequality within Wirral is particularly pronounced. Compared with other Liverpool City Region and Cheshire & Merseyside authorities, see **Figure 9**, Wirral has the widest gap in male HLE, indicating that the benefits of good health are distributed less evenly across communities than in many neighbouring areas.

Figure 9: Male Healthy Life Expectancy gap between best and worst MSOA's by Liverpool City Region and Cheshire & Merseyside Local Authorities (2019-2023)

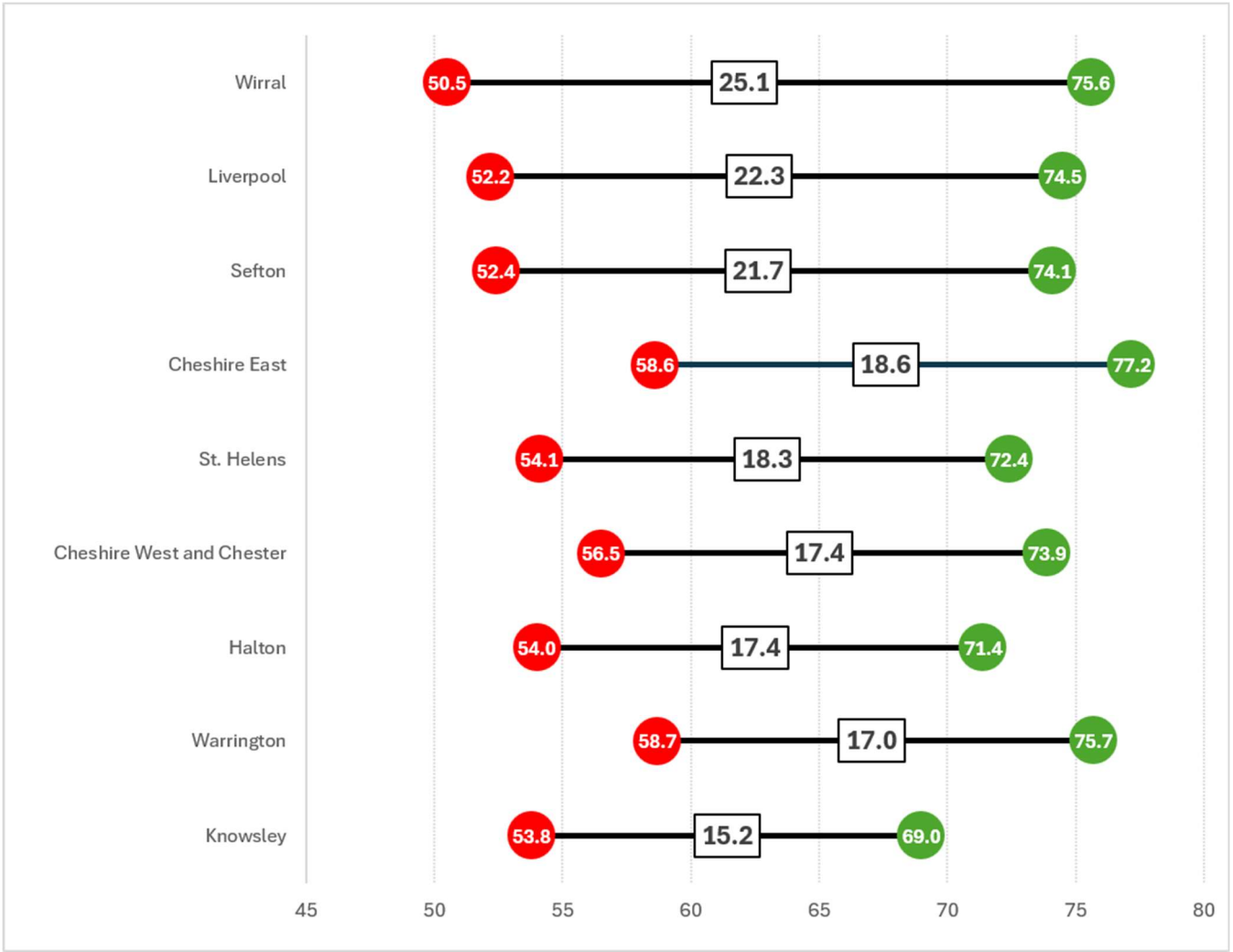


Source: Office for National Statistics

Females

The gap in female HLE between the highest and lowest performing MSOAs in Wirral is 25.1 years, making it the second largest gap observed within any local authority in England, Bradford has the largest with a gap of 25.9 years. The scale of inequality in Wirral is comparable to that observed for males and substantially greater than that seen for LE alone. Compared with Liverpool City Region and Cheshire & Merseyside authorities, see **Figure 10**, Wirral has one of the widest gaps in female HLE, demonstrating that the opportunity to live a long and healthy life is not shared equally across communities.

Figure 10: Female Healthy Life Expectancy gap between best and worst MSOA's by Liverpool City Region and Cheshire & Merseyside Local Authorities (2019-2023)



Source: Office for National Statistics

National Decile Distribution

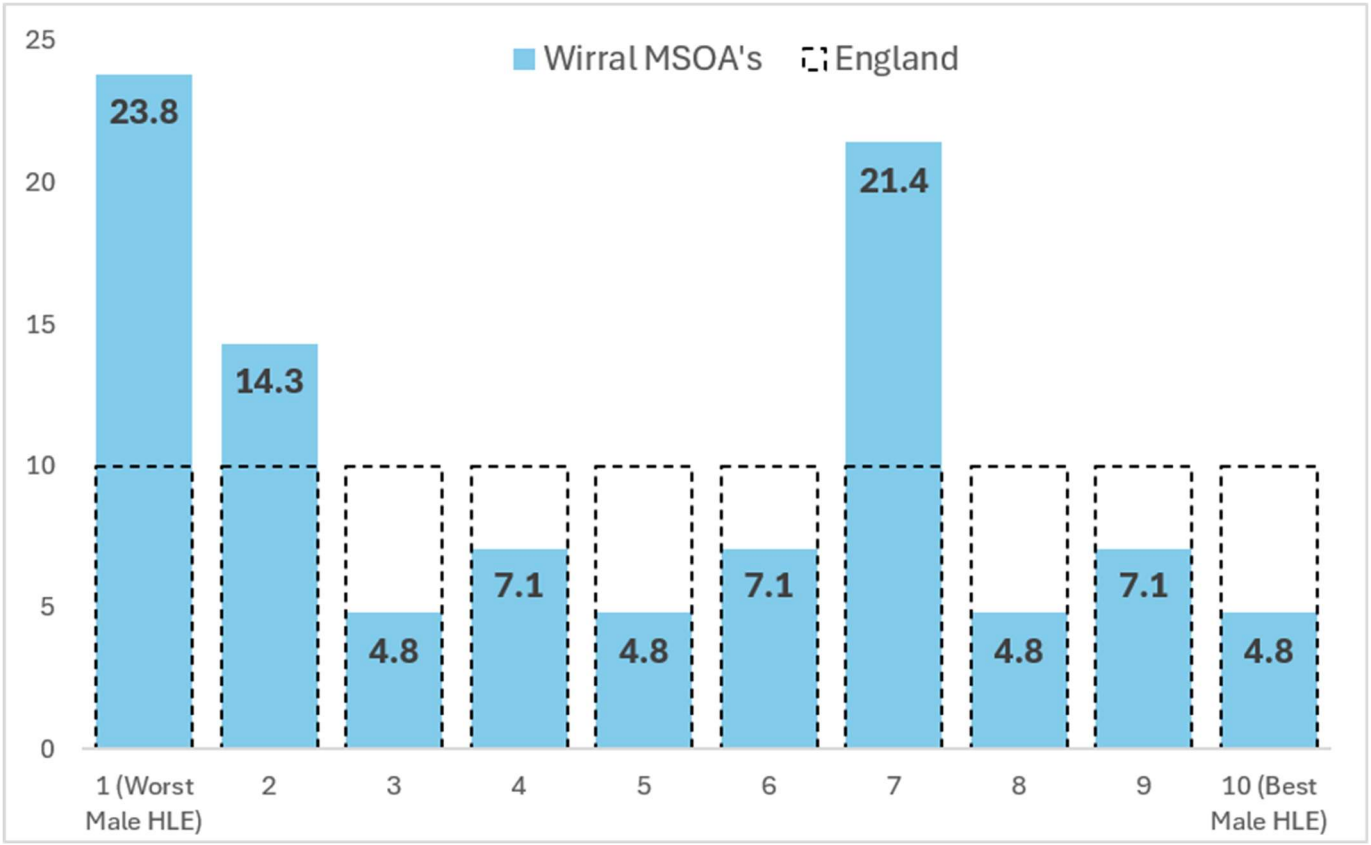
Are healthy years of life concentrated or unequally distributed across Wirral?

To understand whether areas experiencing lowest HLE are concentrated within Wirral, MSOAs can be compared with the national distribution of HLE. All 6,856 MSOAs in England are ranked and grouped into ten equal-sized groups (deciles), from the lowest HLE (Decile 1) to the highest HLE (Decile 10). This allows us to assess whether Wirral has a greater concentration of MSOAs with low HLE, or a lower concentration of MSOAs with high HLE, than would be expected nationally.

Males

Arease experiencing lowest male HLE are disproportionately concentrated within Wirral. Almost one in four MSOAs (23.8%) fall within the lowest national decile for male HLE, more than double the proportion that would be expected nationally, see **Figure 10**. In contrast, only 4.8% of MSOAs fall within the highest national decile, demonstrating that lower HLE outcomes are overrepresented across the borough.

Figure 11: Percentage of Wirral MSOA's by National Male Healthy Life Expectancy Decile (2019-2023)

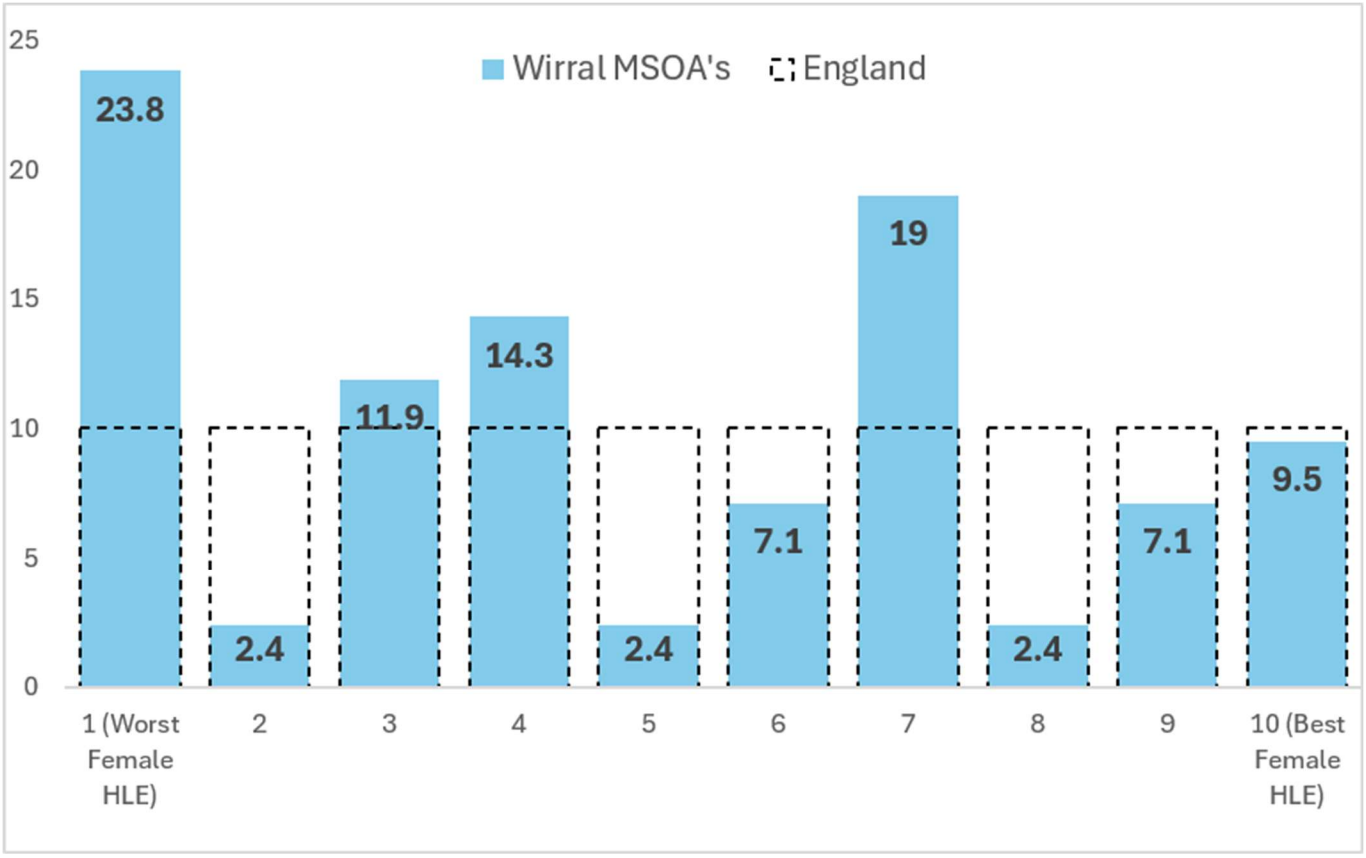


Source: Office for National Statistics

Females

A similar pattern is evident for female HLE. Almost one in four MSOAs (23.8%) fall within the lowest national decile for female HLE, indicating a substantially greater concentration of low HLE than would be expected nationally, see **Figure 10**. Whilst some MSOAs achieve HLE outcomes comparable with the best-performing areas in England, the overall distribution demonstrates that inequalities in the number of years women can expect to live in good health remain substantial across Wirral.

Figure 12: Percentage of Wirral MSOA's by National Female Healthy Life Expectancy Decile (2019-2023)



Source: Office for National Statistics

Summary

Whilst the overall pattern is consistent for males and females, inequalities are slightly more pronounced amongst males. However, for both sexes, HLE inequalities are substantially larger than those observed for LE alone, highlighting significant differences in the number of years residents can expect to live in good health.

National Rankings and Percentiles

Are areas experiencing lowest healthy-life expectancy concentrated in Wirral?

National rankings and percentiles provide additional context on how individual Wirral communities compare with the rest of England. This analysis identifies MSOAs where residents can expect to spend exceptionally few, or exceptionally many, years in good health and highlights whether areas experiencing lowest HLE are disproportionately concentrated within Wirral.

Males

National rankings show that several Wirral MSOAs experience exceptionally low male HLE. Wirral has four MSOAs within the lowest 1% nationally for male HLE: Birkenhead Central, Seacombe, Bidston Hill and Tranmere. Birkenhead Central ranks as the 2nd lowest of England's 6,856 MSOAs. Overall, 9.5% of Wirral MSOAs fall within the lowest 1% nationally and 19.0% fall within the lowest 5%, indicating a substantial overrepresentation of low male HLE compared with the national picture.

Females

National rankings show that several Wirral MSOAs experience exceptionally low female HLE. Wirral has four MSOAs within the lowest 1% nationally for female HLE: Birkenhead Central, Seacombe, Bidston Hill and Tranmere. Birkenhead Central ranks as the 4th lowest of England's 6,856 MSOAs. Overall, 9.5% of Wirral MSOAs fall within the lowest 1% nationally and 19.0% fall within the lowest 5%, demonstrating that low female HLE are also disproportionately concentrated within the borough.

Summary

National benchmarking demonstrates that Wirral is overrepresented amongst MSOAs with lowest HLE for both males and females. Almost one in ten MSOAs fall within the lowest 1% nationally and almost one in five fall within the lowest 5%, highlighting the concentration of extremely low HLE within the borough.

Disability Free Life Expectancy in Wirral (2019-2023)

DFLE provides insight into the number of years people can expect to live free from a limiting long-term illness or disability. This section examines how DFLE varies across Wirral and explores the scale and distribution of inequalities between MSOAs. The estimates presented are the latest available DFLE estimates, providing an important opportunity to understand how opportunities for a disability-free life vary across the borough. As with LE and HLE, borough-level figures can mask substantial variation between communities. This section therefore focuses on the distribution and scale of inequalities in DFLE across the borough.

Overall Borough Context

DFLE at birth in Wirral for the period 2019-2023 was 61.3 years for males and 62.6 years for females. Compared with England and the North West, Wirral's DFLE is lower for both males (66.0, England and 63.4, North West) and females (66.7, England and 64.2, North West). Whilst these borough-level figures provide an overview of population health, they mask considerable variation within the borough. The following analysis explores how DFLE differs between MSOAs across Wirral.

Key Messages

- DFLE inequalities within Wirral are among the largest in England, with a gap of 25.8 years for males and 23.6 years for females between the highest and lowest performing MSOAs.
- MSOAs with the lowest DFLE are concentrated within eastern Wirral, including Birkenhead Central, Tranmere, Bidston Hill, Seacombe and Birkenhead South, whilst the highest DFLE is observed in west and south-western Wirral communities.
- Wirral has the largest gap in DFLE of any local authority in England for both males and females, demonstrating substantial inequalities in healthy ageing and independent living.
- Areas experiencing the lowest DFLE are heavily concentrated within the borough, with around one-third of MSOAs falling within the lowest national decile and around one in five MSOAs falling within the lowest 1% nationally.
- DFLE inequalities are larger than those observed for LE and comparable to, or greater than, those observed for HLE, indicating that residents in the most disadvantaged communities not only live shorter and less healthy lives, but also spend significantly fewer years free from limiting illness or disability.

Male and Female disability free life expectancy in Wirral

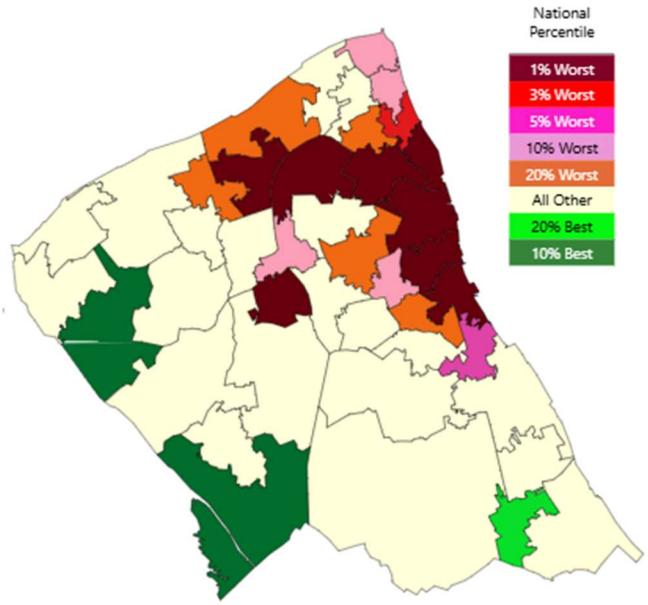
Male Disability Free Life Expectancy

DFLE inequalities within Wirral are among the largest in England, with men in some communities to expect more than 25 additional years free from limiting disability than those living in the areas with the lowest DFLE.

As can be seen in **Figure 13,** Male DFLE ranges from 46.5 years in Birkenhead Central to 72.3 years in Gayton & Lower Heswall, a gap of 25.8 years. The lowest estimates are concentrated within east Wirral, including Birkenhead Central, Tranmere, Birkenhead South, Seacombe, Poulton, Bidston Hill and Leasowe South & Moreton South, all of which rank within the lowest 1% nationally. In contrast, the highest DFLE estimates are found in the west and south-western parts of the borough, particularly Gayton & Lower Heswall and Caldy & Newton.

The inequalities observed in DFLE are greater than those seen for LE and slightly larger than those observed for HLE. This indicates that men in the most disadvantaged communities not only live shorter lives and spend fewer years in good health but also experience substantially fewer years free from limiting disability.

Figure 13: Male Disability Free Life Expectancy by MSOA (2019-2023)



MSOA	HLE
Birkenhead Central	46.5
Tranmere	48.4
Birkenhead South	51.4
Seacombe	51.6
Poulton	52.0
Bidston Hill	52.4
Leasowe South & Moreton East	53.1
Woodchurch	54.2
Egremont	54.9
Bebington New Ferry	56.3
New Brighton	57.5
Wallasey East	57.5
Noctorum North & Upton East	58.1
Oxton South	58.4
Egerton Park	59.3
Moreton West	59.4
Liscard	60.7
Claughton South & Oxton North	60.8
Leasowe	61.5
Lower Bebington & Bromborough Pool	61.6
Claughton North	63.3

MSOA	HLE
Bromborough North	63.7
Eastham	63.9
Higher Bebington	65.2
Upton West	65.4
Saughall Massie	65.7
Hoylake	65.8
Woodhey	66.1
Great Meols	66.2
Prenton	66.3
Noctorum South	66.7
Wallasey Central	66.7
Heswall	67.1
Wallasey Village	67.1
Thursaston & Irby	67.6
West Kirby	67.7
Pensby & Thingwall	68.2
Poulton, Raby Mere & Thornton Hough	68.8
Greasby	69.4
Bromborough South	70.2
Caldy & Newton	72.2
Gayton & Lower Heswall	72.3

Source: Office for National Statistics

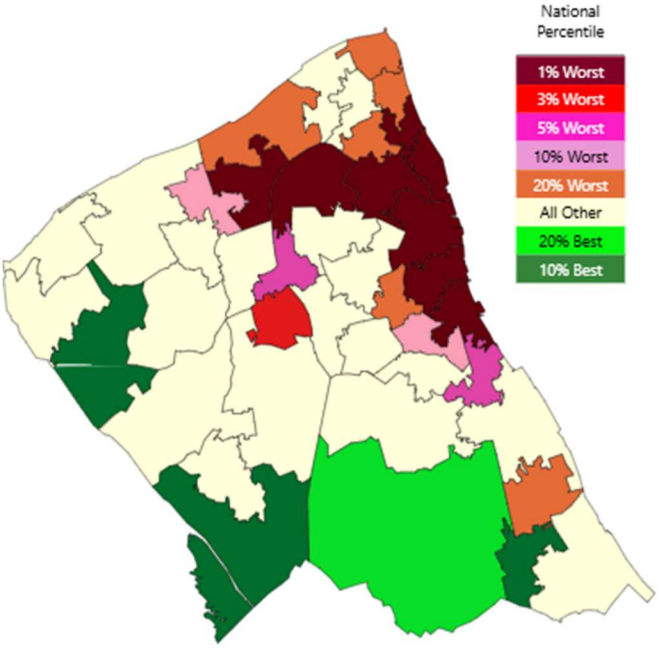
Female Disability Free Life Expectancy

DFLE inequalities for women are substantial across Wirral, with more than 23 years difference between the highest and lowest performing MSOAs.

Female DFLE ranges from 50.2 years in Birkenhead Central to 73.8 years in Gayton & Lower Heswall, a gap of 23.6 years (see **Figure 14)**. The lowest DFLE estimates are concentrated within east Wirral MSOAs, including Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Leasowe South & Moreton East, Poulton, Egremont and Birkenhead South, all of which rank within the lowest 1% nationally. In contrast, the highest estimates are found in west and south-western Wirral MSOAs, particularly Gayton & Lower Heswall, Caldy & Newton and Bromborough South.

The pattern of female DFLE closely mirrors that seen for both LE and HLE, with the areas experiencing lowest DFLE concentrated within the same MSOAs. However, the size of the gap demonstrates that women in the most disadvantaged communities can expect to spend substantially fewer years free from limiting illness or disability than those living in the most advantaged areas. This highlights significant inequalities in healthy ageing and independence across the borough.

Figure 14: Female Healthy Life Expectancy by MSOA (2019-2023)



MSOA	HLE
Birkenhead Central	50.2
Tranmere	50.3
Bidston Hill	52.0
Seacombe	52.6
Leasowe South & Moreton East	53.6
Poulton	53.7
Egremont	54.7
Birkenhead South	54.9
Woodchurch	56.8
Noctorum North & Upton East	57.3
Bebington New Ferry	57.9
Moreton West	59.8
Egerton Park	60.0
New Brighton	60.1
Wallasey East	60.1
Oxton South	60.5
Liscard	60.9
Leasowe	61.3
Bromborough North	61.7
Claughton South & Oxton North	63.1
Eastham	63.1

MSOA	HLE
Lower Bebington & Bromborough Pool	63.3
Claughton North	64.5
Hoylake	65.7
Upton West	65.9
Saughall Massie	66.3
West Kirby	66.5
Wallasey Village	66.6
Prenton	66.8
Heswall	66.9
Higher Bebington	67.5
Noctorum South	67.6
Wallasey Central	67.7
Woodhey	67.8
Pensby & Thingwall	68.3
Great Meols	68.7
Thursaston & Irby	69.7
Greasby	70.3
Poulton, Raby Mere & Thornton Hough	71.2
Bromborough South	72.0
Caldy & Newton	72.5
Gayton & Lower Heswall	73.8

Source: Office for National Statistics

Summary

DFLE varies considerably across Wirral for both males and females. The pattern is broadly similar for both sexes, with the lowest DFLE concentrated within east Wirral MSOAs and the highest estimates found in west and south-western Wirral communities. However, inequalities are slightly greater for males, with a gap of 25.8 years between the highest and lowest performing MSOAs compared with 23.6 years for females. These findings suggest that opportunities to live free from limiting illness or disability are not shared equally across the borough.

Inequalities in Disability Free Life Expectancy

DFLE provides insight into the number of years people can expect to live free from limiting illness or disability. This section examines the scale and distribution of DFLE inequalities within Wirral and compares MSOA outcomes against the national picture. Together, these analyses help identify where residents experience the greatest number of years lost to disability.

Gap Between MSOAs Experiencing Best and Worst DFLE

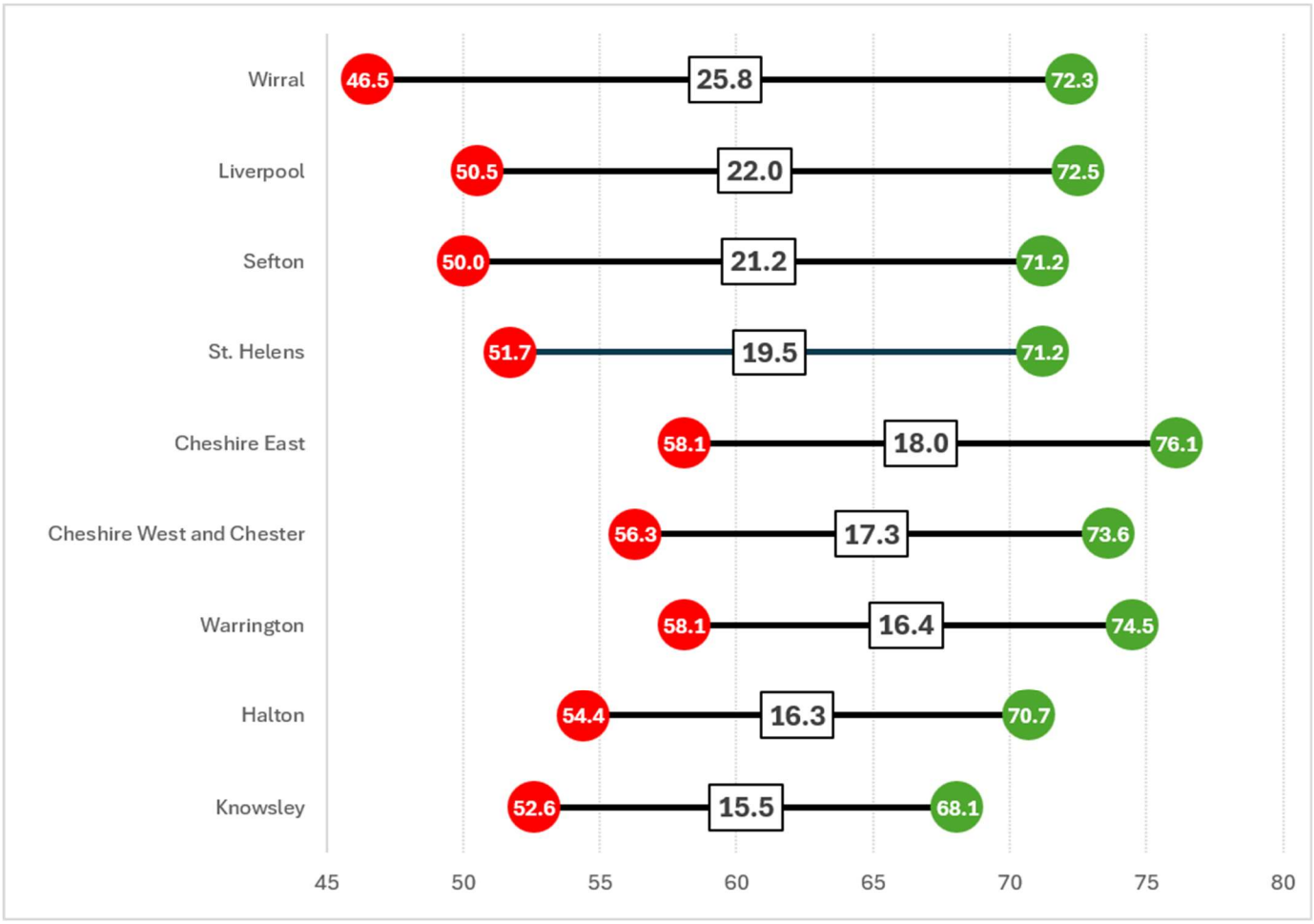
One way of measuring inequalities in DFLE is to compare outcomes in the MSOAs with the highest and lowest DFLE. Larger gaps indicate greater inequalities in the number of years people can expect to live free from limiting illness or disability and help quantify the extent to which opportunities for healthy ageing and independent living vary between communities. Comparing these gaps across local authorities also provides insight into whether inequalities within Wirral are typical or unusually large relative to neighbouring areas and England as a whole.

Males

The gap in male DFLE between the highest and lowest performing MSOAs in Wirral is 25.8 years, making it the largest gap observed within any local authority in England (**Figure 15)**.

Compared with Liverpool City Region and Cheshire & Merseyside authorities, Wirral has the widest gap in male DFLE, indicating that opportunities to live free from limiting illness or disability are distributed particularly unevenly across the borough.

Figure 15: Male Disability Free Life Expectancy gap between best and worst MSOA's by Liverpool City Region and Cheshire & Merseyside Local Authorities (2019-2023)



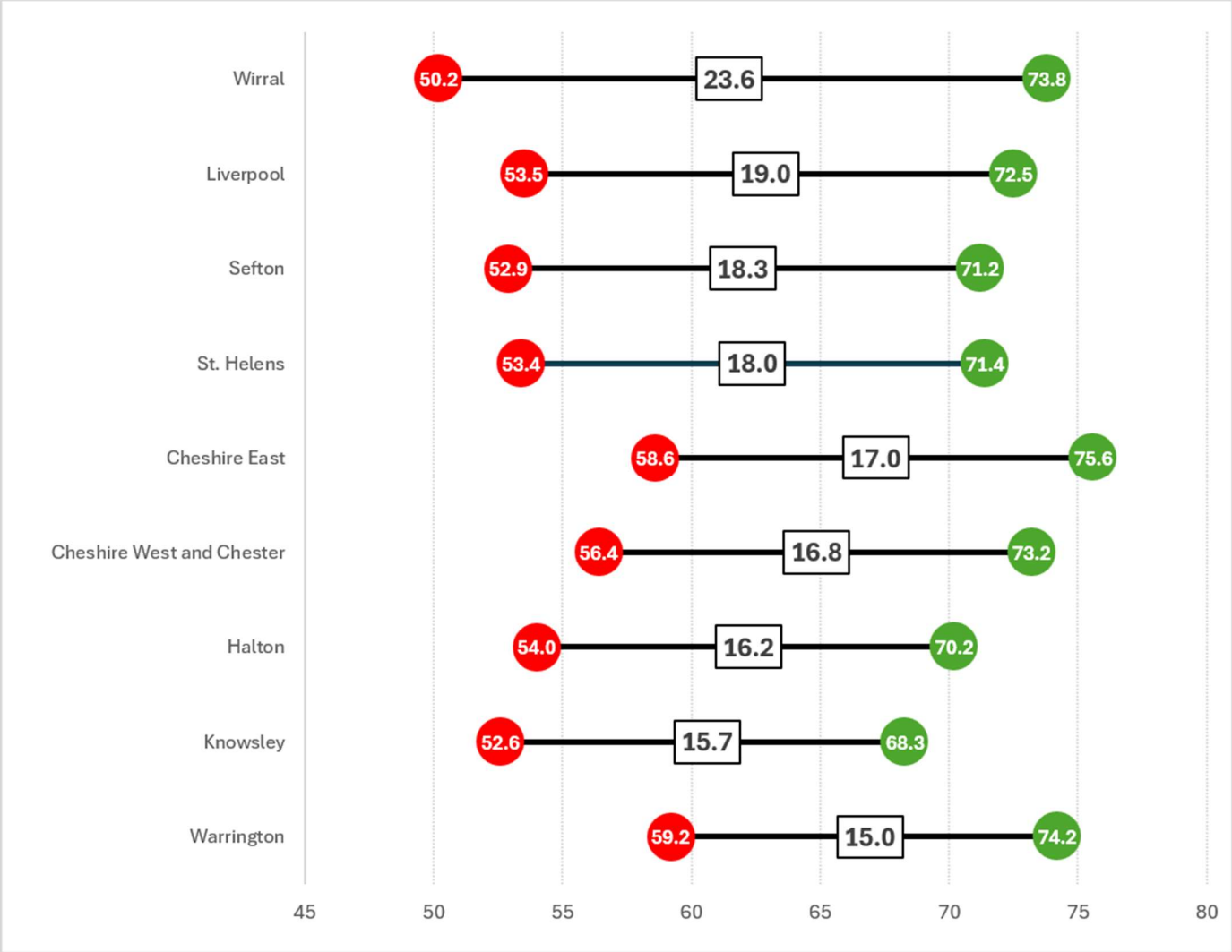
Source: [Office for National Statistics]

Females

The gap in female DFLE between the highest and lowest performing MSOAs in Wirral is 23.6 years, which is also the largest gap observed within any local authority in England (**Figure 16)**.

Compared with neighbouring authorities, Wirral experiences particularly pronounced inequalities in the number of years women can expect to live free from limiting illness or disability, highlighting substantial differences in healthy ageing and independence between communities.

Figure 16: Female Disability Free Life Expectancy gap between best and worst MSOA's by Liverpool City Region and Cheshire & Merseyside Local Authorities (2019-2023)



Source: Office for National Statistics

National Decile Distribution – Disability Free Life Expectancy

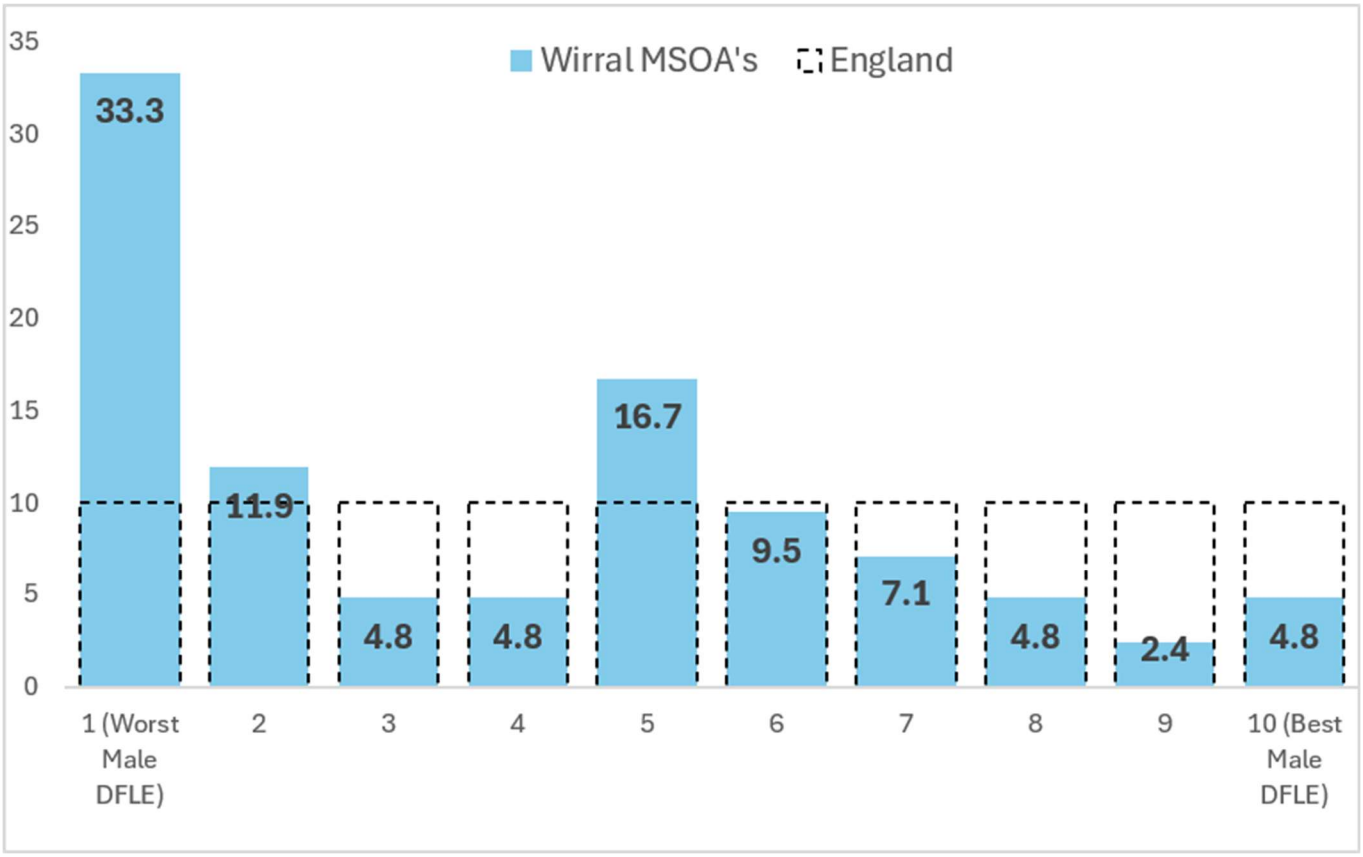
Are areas experiencing the lowest DFLE concentrated or unequally distributed across Wirral?

To understand whether areas experiencing exceptionally low DFLE are concentrated within Wirral, MSOAs can be compared with the national distribution of DFLE. All 6,856 MSOAs in England are ranked and grouped into ten equal-sized groups (deciles), from the lowest DFLE (Decile 1) to the highest DFLE (Decile 10). This allows us to assess whether Wirral has a greater concentration of MSOAs with exceptionally low DFLE, or concentration of MSOAs with high DFLE, than would be expected nationally.

Males

Areas experiencing exceptionally low male DFLE are disproportionately concentrated within Wirral. One-third of MSOAs (33.3%) fall within the lowest national decile for male DFLE, more than three times the proportion that would be expected nationally (**Figure 17)**. In contrast, only 4.8% of MSOAs fall within the highest national decile, demonstrating that MSOAs experiencing low DFLE are heavily concentrated within parts of the borough.

Figure 17: Percentage of Wirral MSOA's by National Male Disability Free Life Expectancy Decile (2019-2023)

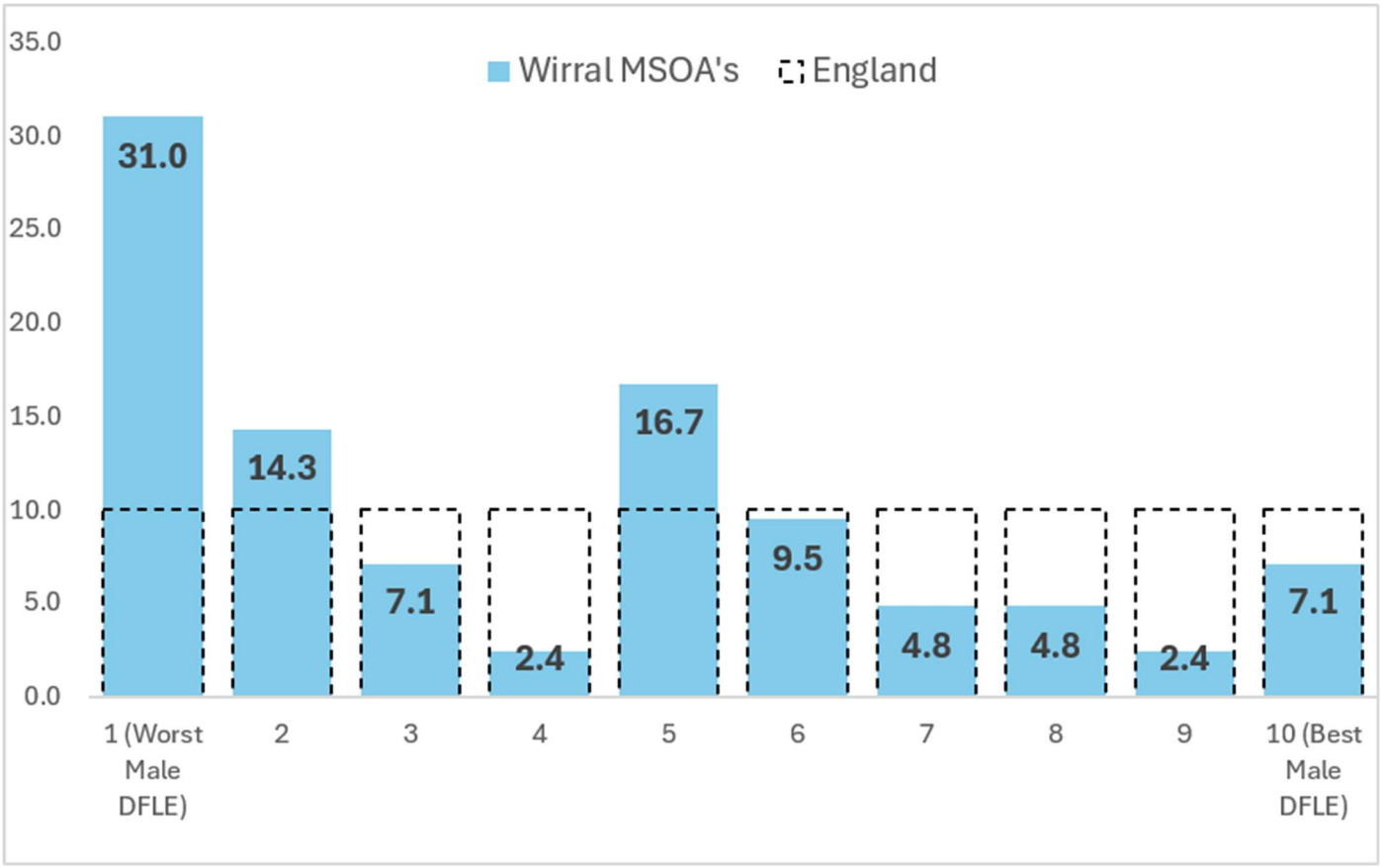


Source: Office for National Statistics

Females

A similar pattern is evident for female DFLE. Almost one-third of MSOAs (31.0%) fall within the lowest national decile, indicating a substantially greater concentration of low DFLE than would be expected nationally (**Figure 18)**. Whilst some MSOAs achieve DFLE comparable with the best-performing areas in England, the overall distribution demonstrates that inequalities in the number of years women can expect to live free from limiting illness or disability remain substantial across Wirral.

Figure 18: Percentage of Wirral MSOA's by National Female Disability Life Expectancy Decile (2019-2023)



Source: Office for National Statistics

Summary

DFLE outcomes are disproportionately concentrated within the lowest national deciles for both males and females. Around one-third of Wirral MSOAs fall within the lowest national decile, demonstrating a greater concentration of areas experiencing low DFLE than would be expected nationally. These findings suggest that inequalities in healthy ageing and living free from limiting illness or disability remain widespread across the borough.

National Rankings and Percentiles - Disability Free Life Expectancy

Are areas experiencing low DFLE concentrated in Wirral?

National rankings and percentiles provide additional context on how individual Wirral communities compare with the rest of England. This analysis identifies MSOAs where residents can expect to spend exceptionally few years free from limiting illness or disability and highlights whether areas experiencing low DFLE are disproportionately concentrated within Wirral.

Males

National rankings show that several Wirral MSOAs experience exceptionally poor male DFLE outcomes. Wirral has eight MSOAs within the lowest 1% nationally for male DFLE: Birkenhead Central, Tranmere, Birkenhead South, Seacombe, Poulton, Bidston Hill, Leasowe South & Moreton East, and Woodchurch. Birkenhead Central ranks as the lowest-ranked MSOA in England, with a male disability-free life expectancy of just 46.5 years.

Overall, 19.0% of Wirral MSOAs fall within the lowest 1% nationally and 23.8% fall within the lowest 5%, indicating a substantial overrepresentation of lower male DFLE compared with the national picture.

Females

National rankings show that several Wirral MSOAs experience exceptionally low female DFLE. Wirral has eight MSOAs within the lowest 1% nationally for female DFLE: Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Leasowe South & Moreton East, Poulton, Egremont and Birkenhead South. Birkenhead Central ranks as the 2nd lowest of England's 6,856 MSOAs for female disability-free life expectancy, an MSOA in Bradford ranks 1st lowest.

Overall, 19.0% of Wirral MSOAs fall within the lowest 1% nationally and 26.2% fall within the lowest 5%, indicating a substantial overrepresentation of area experiencing lower DFLE compared with the national picture.

Summary

National benchmarking demonstrates that Wirral is overrepresented amongst MSOAs with low DFLE for both males and females. Around one in five MSOAs fall within the lowest 1% nationally, with more than a quarter of MSOAs falling within the lowest 5% for females. These findings highlight the concentration of exceptionally low DFLE within the borough and reinforce the scale of inequalities in healthy ageing and living free from limiting illness or disability.

Understanding Inequalities Across the Three Measures

Key Message

Whilst substantial inequalities exist across all three measures, the differences observed in HLE and DFLE are considerably larger than those observed for LE. This suggests that inequalities in Wirral are not only affecting how long people live, but also the number of years they can expect to live in good health and free from limiting illness or disability.

Where Are Inequalities Greatest?

Across all three measures, the same geographical pattern is evident. The lowest LE, HLE and DFLE are concentrated within eastern MSOAs, particularly Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Poulton and Birkenhead South. In contrast, the highest outcomes are consistently observed within western and south-western Wirral communities, including Gayton & Lower Heswall, Caldy & Newton and Bromborough South.

Who Is Most Affected?

The analysis suggests that residents living in the most disadvantaged communities experience multiple and overlapping disadvantages. Compared with residents in the highest-performing areas, they can expect to:

- Live shorter lives.
- Spend substantially fewer years in good health.
- Spend substantially fewer years free from limiting illness or disability.

The largest inequalities are observed for HLE and DFLE, indicating that differences in quality of life exceed differences in longevity.

Comparing the three measures

Measure	Male Gap	Female Gap
Life Expectancy	16.4 years	12.9 years
Healthy Life Expectancy	25.4 years	25.1 years
Disability-Free Life Expectancy	25.8 years	23.6 years

The gap between MSOAs is considerably larger for HLE and DFLE than for LE alone. This suggests that residents in the most disadvantaged communities not only die earlier but spend many more years in poor health and living with disability.

Overall Interpretation

Taken together, the findings highlight substantial inequalities in both the length and quality of life experienced by Wirral residents. Whilst borough-level outcomes compare relatively favourably with many similar local authorities, MSOA-level analysis demonstrates that these benefits are not shared equally across all communities. The greatest inequalities are observed in the number of years residents can expect to live in good health and free from disability, emphasising the importance of tackling the wider social, economic and environmental factors that influence health throughout the life course.

Wider determinants and Life Course Factors

The analysis presented throughout this report demonstrates that the same communities consistently experience the lowest LE, HLE and DFLE. The concentration of lower health state life expectancy within the same communities suggests that these inequalities are unlikely to be explained by health and care services alone. Instead, they reflect the cumulative impact of factors operating throughout the life course.

As highlighted by the Marmot review, understanding the wider determinants associated with poorer outcomes is therefore essential to understanding why these inequalities exist. Factors such as income, employment, education, housing, environment and social conditions influence both the length and quality of life, shaping opportunities for residents to live long, healthy and independent lives. The following section explores how these factors are distributed across Wirral and how they may contribute to the patterns observed throughout this report.

The data in **Figure 19**, **Figure 20**, **Figure 21**, **Figure 22**, and **Figure 23** were sourced from Local Insights in September 2026. The full list of indicators is presented in the Appendix A.

Key Observations

Across the life course, the communities with the lowest LE, HLE and DFLE outcomes consistently perform less favourably across a range of wider determinants. This pattern is evident from early years and educational attainment through to employment, income, housing, health behaviours and wider measures of health and wellbeing. Together, these findings suggest that health inequalities in Wirral are closely associated with broader social, economic and environmental factors that influence health throughout life.

However, this pattern is less consistent for some indicators affecting older populations. One possible explanation is that residents in the most disadvantaged communities are less likely to survive into older age, reducing the number of people exposed to age-related conditions and outcomes. As a result, some indicators relating to older age may not follow the same gradient observed earlier in the life course.

The charts below compare MSOAs with the highest and lowest health state life expectancy outcomes across a range of wider determinants spanning the life course, helping to identify factors that may contribute to the inequalities observed throughout this report.

Starting Well

Figure 19: Starting Well Indicators, Within Wirral Ranks by MSOA, September 2026

Indicator	Female HLE	Male HLE	IMD 2025 Rank	0-4 attendances at A&E for trauma and injury	Children aged 0-19 in absolute low-income families	Children aged 4-17 providing unpaid care (Census 2021)	Educational Attainment (Attainment 8) 2023/24	Pupils Achieving a "Good Level of Development" at Early Years Foundation Stage by Non-Free School Meals (NFSM)	Reception prevalence of obesity (including severe obesity), 3 years data combined	Year 6 prevalence of obesity (including severe obesity), 3 years data combined	Youth unemployment (18-24 receiving JSA or Universal Credit)
Time Period	2019-2023	2019-2023	2025	April 2020 - March 2023	2024	2021	2023/24	2024	2022 to 2025	2022 to 2025	June 2026
Birkenhead Central	42	42	42	33	41	42	36	41	32	36	40
Tranmere	39	41	37	35	36	32	35	40	30	38	35
Seacombe	41	40	41	32	40	12	42	36	39	42	41
Bidston Hill	40	39	40	37	39	19	40	42	35	35	42
Birkenhead South	37	38	39	34	42	17	38	35	41	39	39
Poulton	38	37	38	17	38	40	39	38	24	41	37
Leasowe South & Moreton East	36	36	35	41	35	28	41	31	33	27	38
Woodchurch	34	35	33	40	33	14	32	39	42	40	33
Egremont	35	34	36	18	37	34	37	37	37	34	36
Bebington New Ferry	32	33	34	11	34	23	30	28	20	28	31
New Brighton	27	32	30	4	29	10	20	19	18	16	29
Noctorum North & Upton East	33	31	32	38	31	35	34	34	28	31	32
Oxton South	28	30	31	19	32	39	22	32	34	26	26
Wallasey East	30	29	29	9	26	11	26	27	31	23	27
Moreton West	31	28	26	22	28	13	31	25	26	22	30
Egerton Park	29	27	28	28	27	38	29	21	36	32	23
Claughton South & Oxton North	22	26	23	26	11	18	7	22	21	11	16
Liscard	26	25	27	2	30	37	27	30	29	29	20
Leasowe	25	24	25	13	25	36	28	33	40	37	34
Lower Bebington & Bromborough Pool	21	23	20	14	22	4	23	26	13	15	13
Eastham	23	22	22	12	21	41	24	24	12	13	14
Bromborough North	24	21	21	27	24	22	21	29	38	21	24
Claughton North	20	20	24	33	23	24	16	18	25	25	15
Upton West	19	19	17	24	18	26	15	17	15	30	28
Noctorum South	13	18	12	29	20	8	19	13	16	33	7
Saughall Massie	18	17	10	23	14	15	17	12	27	17	17
Hoylake	17	16	16	5	10	29	14	7	2	3	12
Higher Bebington	8	15	8	10	8	30	13	14	3	18	4
Prenton	15	14	13	42	16	31	4	23	10	19	21
Woodhey	9	13	15	36	15	6	18	20	23	12	19
Wallasey Central	11	12	18	16	17	20	33	15	17	7	25
Wallasey Village	12	11	19	6	19	21	25	16	6	24	22
Heswall	14	10	11	3	13	3	9	9	8	14	18
Great Meols	7	9	9	21	12	25	12	10	14	5	9
Pensby & Thingwall	10	8	7	25	5	27	6	8	11	20	11
Thurstaston & Irby	5	7	6	15	6	5	10	6	7	9	5
West Kirby	16	6	14	20	9	33	5	4	13	2	10
Greasby	6	5	5	31	7	7	11	3	5	8	8
Bromborough South	4	4	3	8	4	9	8	5	22	10	3
Poulton, Raby Mere & Thornton Hough	3	3	4	30	3	16	2	1	1	4	1
Gayton & Lower Heswall	1	2	1	7	1	1	1	2	4	6	6
Caldy & Newton	2	1	2	1	2	2	3	11	9	1	2

Source: Public Health Intelligence Team Wirral, Local Insight

Living Well

Figure 20: Living Well Indicators, Within Wirral Ranks by MSOA, September 2026

Indicator	Female HLE	Male HLE	IMD 2025 Rank	Bad health (Census 2021)	COPD Emergency Hospital Admissions, Rate per 1,000	Digestive Disease Emergency Hospital Admissions, Rate per 1,000	Emergency Hospital Admissions All Ages, Rate per 1,000	Emergency Hospital Admissions for Circulatory Conditions, Rate per 1,000	Intentional Self Harm Emergency Hospital Admissions	Peripheral Arterial Disease prevalence	Schizophrenia, bipolar disorder and psychoses prevalence	Stroke and Transient Ischaemic Attack prevalence	Very bad health (Census 2021)
Time Period	2019-2023	2019-2023	2025	2021	Apr-2022 to Mar-2025	Apr-2022 to Mar-2025	Apr-2022 to Mar-2025	Apr-2022 to Mar-2025	Apr-2022 to Mar-2025	2024/25	2024/25	2024/25	2021
Birkenhead Central	42	42	42	42	42	42	42	38	42	39	42	12	42
Tranmere	39	41	37	41	37	37	37	10	37	37	41	13	41
Seacombe	41	40	41	40	40	41	41	27	38	28	36	8	38
Bidston Hill	40	39	40	39	33	36	34	7	29	38	39	14	40
Birkenhead South	37	38	39	35	27	31	33	12	40	7	40	1	36
Poulton	38	37	38	36	39	35	38	3	21	30	32	6	37
Leasowe South & Moreton East	36	36	35	38	17	17	20	9	16	42	26	27	39
Woodchurch	34	35	33	33	41	30	40	22	39	35	22	29	30
Egremont	35	34	36	37	35	34	35	8	31	27	31	11	29
Bebington New Ferry	32	33	34	30	26	33	30	30	33	26	29	23	34
New Brighton	27	32	30	34	25	38	31	37	28	33	35	24	21
Noctorum North & Upton East	33	31	32	29	36	39	39	18	32	36	27	19	35
Oxton South	28	30	31	27	30	10	23	1	36	9	38	2	25
Wallasey East	30	29	29	28	38	14	28	35	41	32	33	18	31
Moreton West	31	28	26	31	34	16	14	6	26	41	21	31	32
Egerton Park	29	27	28	26	32	32	32	24	15	20	37	5	33
Claughton South & Oxton North	22	26	23	32	28	24	36	40	34	19	34	10	27
Liscard	26	25	27	24	31	27	25	4	35	21	28	9	18
Leasowe	25	24	25	23	11	7	3	2	19	40	24	16	26
Lower Bebington & Bromborough Pool	21	23	20	17	24	8	15	14	13	17	17	28	28
Eastham	23	22	22	19	21	21	22	20	24	12	11	26	24
Bromborough North	24	21	21	22	23	40	27	31	4	16	7	22	22
Claughton North	20	20	24	20	16	22	18	25	30	29	30	4	19
Upton West	19	19	17	25	19	19	13	28	17	34	10	32	15
Noctorum South	13	18	12	12	12	23	21	21	20	15	19	3	9
Saughall Massie	18	17	10	15	18	3	5	17	8	31	9	30	16
Hoylake	17	16	16	14	29	26	29	39	25	2	18	41	20
Higher Bebington	8	15	8	10	20	6	11	16	6	11	13	25	12
Prenton	15	14	13	16	13	29	17	19	7	4	14	7	14
Woodhey	9	13	15	11	7	12	8	13	27	10	20	17	13
Wallasey Central	11	12	18	6	5	15	7	11	22	18	25	15	8
Wallasey Village	12	11	19	18	14	11	10	33	23	14	23	20	17
Heswall	14	10	11	21	22	20	24	42	9	25	8	38	23
Great Meols	7	9	9	5	4	1	2	5	5	8	15	33	6
Pensby & Thingwall	10	8	7	13	10	18	19	29	14	23	6	39	5
Thurstaston & Irby	5	7	6	7	8	28	26	41	11	24	5	40	10
West Kirby	16	6	14	9	15	13	12	36	12	3	16	42	7
Greasby	6	5	5	8	9	9	9	34	18	6	1	36	4
Bromborough South	4	4	3	4	3	25	6	26	1	5	3	21	3
Poulton, Raby Mere & Thornton Hough	3	3	4	3	6	4	16	32	10	22	4	34	11
Gayton & Lower Heswall	1	2	1	1	1	2	1	23	3	13	2	35	1
Caldy & Newton	2	1	2	2	2	5	4	15	2	1	12	37	2

Source: Public Health Intelligence Team Wirral, Local Insight

Figure 21: Living Well Indicators Disease Prevalence, Within Wirral Ranks by MSOA, September 2026

Indicator	Female HLE	Male HLE	IMD 2025 Rank	Asthma	Atrial Fibrillation	Cancer (diagnosis since 2003)	Chronic Kidney Disease	COPD	Coronary Heart Disease	Dementia	Depression	Diabetes	Epilepsy	Heart Failure	High Blood Pressure	Learning Disabilities	Obesity	Osteoporosis	Palliative Care	Pre-Diabetes	Rheumatoid Arthritis	Serious Mental Illness
Time Period	2019-2023	2019-2023	2025	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2024/25	2017/18	2024/25	2024/25	2017/18
Birkenhead Central	42	42	42	36	5	1	4	42	20	26	42	41	42	29	4	38	29	21	20	6	1	42
Tranmere	39	41	37	30	8	4	7	41	24	21	39	39	32	36	8	36	34	25	29	14	6	40
Seacombe	41	40	41	42	1	6	3	37	1	2	38	37	36	2	7	18	38	30	7	32	4	36
Bidston Hill	40	39	40	31	6	3	6	39	17	33	41	36	40	12	25	32	36	23	23	12	9	33
Birkenhead South	37	38	39	33	3	2	5	40	7	7	37	38	34	26	1	39	31	4	16	26	10	41
Poulton	38	37	38	38	2	5	1	36	5	13	40	32	41	10	12	27	39	32	10	24	3	32
Leasowe South & Moreton East	36	36	35	40	19	22	31	38	33	4	35	42	29	22	33	26	42	15	36	40	29	23
Woodchurch	34	35	33	24	33	28	34	20	34	38	8	33	18	18	36	30	10	37	1	31	39	18
Egremont	35	34	36	41	4	7	12	34	2	3	36	35	37	1	9	14	33	27	12	30	7	35
Bebington New Ferry	32	33	34	28	22	23	10	25	31	29	33	28	22	37	22	31	41	29	4	18	32	28
New Brighton	27	32	30	32	21	17	29	30	27	34	27	30	35	11	30	25	17	16	24	27	19	39
Noctorum North & Upton East	33	31	32	25	20	18	20	24	28	41	16	34	25	14	29	34	26	24	21	7	35	21
Oxton South	28	30	31	19	10	9	15	31	8	15	28	23	30	24	3	37	24	10	18	11	15	37
Wallasey East	30	29	29	35	12	10	22	33	10	20	32	31	38	4	18	24	27	22	19	28	16	38
Moreton West	31	28	26	29	27	29	33	35	38	14	25	40	24	28	37	22	40	11	37	41	30	19
Egerton Park	29	27	28	21	11	11	8	32	13	16	31	24	23	32	6	33	32	19	13	17	18	34
Claughton South & Oxton North	22	26	23	18	14	15	16	29	15	24	26	22	31	19	15	35	20	14	28	4	11	31
Liscard	26	25	27	37	9	12	14	27	3	5	29	21	39	3	10	20	25	28	22	23	14	30
Leasowe	25	24	25	34	7	16	25	28	16	1	34	27	21	7	26	23	35	12	31	29	13	27
Lower Bebington & Bromborough Poc	21	23	20	17	25	27	17	12	26	37	19	16	15	35	20	29	37	33	15	16	24	14
Eastham	23	22	22	15	31	31	19	14	19	10	22	19	27	42	16	42	18	42	42	22	33	8
Bromborough North	24	21	21	16	29	25	2	15	18	18	20	20	19	39	5	41	19	38	40	8	17	9
Claughton North	20	20	24	20	13	8	9	26	11	39	30	25	33	13	17	28	22	20	33	3	5	25
Upton West	19	19	17	22	30	32	28	18	36	35	4	29	17	25	34	15	21	8	25	36	40	10
Noctorum South	13	18	12	9	16	14	23	21	9	22	24	18	14	15	13	17	16	13	9	2	25	22
Saughall Massie	18	17	10	23	32	33	32	23	35	23	14	26	16	23	35	11	28	7	27	34	31	11
Hoylake	17	16	16	3	35	37	35	9	32	36	3	3	5	9	32	8	7	3	32	33	28	13
Higher Bebington	8	15	8	12	24	24	21	7	23	27	17	6	9	27	23	9	30	31	8	20	12	17
Prenton	15	14	13	7	23	19	27	17	22	11	13	13	12	20	19	12	15	1	2	1	38	20
Woodhey	9	13	15	11	17	21	13	13	14	12	21	9	13	21	11	13	23	26	11	13	2	24
Wallasey Central	11	12	18	26	15	13	18	22	6	9	23	17	26	5	14	19	12	18	35	21	8	29
Wallasey Village	12	11	19	27	18	20	24	19	12	8	18	15	28	6	27	16	14	17	34	25	20	26
Heswall	14	10	11	14	42	40	42	11	42	32	12	14	8	34	42	7	4	41	17	42	37	6
Great Meols	7	9	9	5	28	30	30	16	29	19	11	12	11	8	28	10	11	2	30	35	22	15
Pensby & Thingwall	10	8	7	13	40	41	41	8	41	30	10	10	7	40	41	6	6	36	6	39	41	3
Thurstaston & Irby	5	7	6	10	41	42	40	5	40	31	9	7	6	41	40	3	5	35	5	38	42	2
West Kirby	16	6	14	6	38	36	38	4	30	42	2	2	4	17	31	4	3	9	39	9	36	16
Greasby	6	5	5	39	39	39	37	3	39	17	6	8	2	31	38	1	8	6	3	19	34	1
Bromborough South	4	4	3	4	26	26	11	10	4	6	15	11	20	38	2	40	13	40	41	10	21	5
Poulton, Raby Mere & Thornton Houg	3	3	4	8	34	35	26	1	25	28	7	5	10	33	24	21	9	34	26	15	26	7
Gayton & Lower Heswall	1	2	1	2	37	38	39	6	37	25	5	4	3	30	39	5	1	39	14	37	23	4
Caldy & Newton	2	1	2	1	36	34	36	2	21	40	1	1	1	16	21	2	2	5	38	5	27	12

Source: Public Health Intelligence Team Wirral, Local Insight

Ageing Well

Figure 22: Ageing Well Indicators, Within Wirral Ranks by MSOA, September 2026

Indicator	Female HLE	Male HLE	IMD 2025 Rank	Deaths under 75, all causes	Emergency Hospital Admissions for Falls Persons Aged 65 Plus, DSR per 100,000	Older person unemplopment (50+ receiving JSA or Universal Credit)	Pensioners in poverty (Pension Credit)	People over the age of 65 with bad or very bad health (Census 2021)	State Pension total claimants
Time Period	**2019-2023**	**2019-2023**	**2025**	**2019 to 2023**	**Apr-2023 to Mar-2026**	**June 2026**	**November 2025**	**2021**	**September 2025**
Birkenhead Central	42	42	42	42	35	42	42	42	26
Tranmere	39	41	37	41	41	39	41	40	12
Seacombe	41	40	41	39	42	40	38	38	29
Bidston Hill	40	39	40	40	38	36	40	41	4
Birkenhead South	37	38	39	38	37	41	37	34	39
Poulton	38	37	38	37	40	38	35	36	36
Leasowe South & Moreton East	36	36	35	35	20	33	39	39	42
Woodchurch	34	35	33	36	27	29	36	37	3
Egremont	35	34	36	34	28	37	33	33	7
Bebington New Ferry	32	33	34	32	33	35	32	32	13
New Brighton	27	32	30	25	21	34	27	29	16
Noctorum North & Upton East	33	31	32	33	25	25	34	35	5
Oxton South	28	30	31	29	32	31	30	25	33
Wallasey East	30	29	29	27	36	27	29	27	1
Moreton West	31	28	26	31	18	17	26	31	27
Egerton Park	29	27	28	28	34	30	31	30	21
Claughton South & Oxton North	22	26	23	26	39	28	25	26	2
Liscard	26	25	27	23	22	32	28	28	19
Leasowe	25	24	25	17	17	11	22	22	40
Lower Bebington & Bromborough Pool	21	23	20	30	31	9	24	24	18
Eastham	23	22	22	22	12	26	16	23	28
Bromborough North	24	21	21	24	24	18	21	19	24
Claughton North	20	20	24	21	30	22	20	20	6
Upton West	19	19	17	19	2	14	19	21	8
Noctorum South	13	18	12	13	13	7	11	16	22
Saughall Massie	18	17	10	15	8	13	17	13	35
Hoylake	17	16	16	8	19	20	14	18	10
Higher Bebington	8	15	8	18	11	5	9	7	11
Prenton	15	14	13	14	6	19	13	17	9
Woodhey	9	13	15	6	26	23	7	9	38
Wallasey Central	11	12	18	9	10	16	12	11	37
Wallasey Village	12	11	19	16	1	21	15	12	14
Heswall	14	10	11	20	23	24	23	14	15
Great Meols	7	9	9	7	7	10	6	4	41
Pensby & Thingwall	10	8	7	11	9	12	10	15	32
Thurstaston & Irby	5	7	6	3	29	8	5	8	30
West Kirby	16	6	14	10	15	15	18	10	17
Greasby	6	5	5	5	5	3	4	6	23
Bromborough South	4	4	3	4	4	2	8	5	25
Poulton, Raby Mere & Thornton Hough	3	3	4	12	16	1	2	3	31
Gayton & Lower Heswall	1	2	1	2	3	6	1	2	20
Caldy & Newton	2	1	2	1	14	4	3	1	34

Source: Public Health Intelligence Team Wirral, Local Insight

Wider Determinants

Figure 23: Wider Determinants Indicators, Within Wirral Ranks by MSOA, September 2026

Indicator	Female HLE	Male HLE	IMD 2025 Rank	AHAH Air quality domain	AHAH Fast food outlets	AHAH Gambling outlets	AHAH Nitrogen Dioxide	AHAH Particulate Matter	AHAH Sulphur Dioxide	AHAH Tobacconists and Vape Stores	Digital Exclusion Risk Index (DERI) score	Households in Fuel Poverty	Households on Universal Credit, Carer Entitlement	Households on Universal Credit, Child Entitlement	Households with no car (Census 2021)	Housing Benefit	Total crime offences (12 month total)	Total households on Universal Credit
Time Period	2019-2023	2019-2023	2025	May 2026	May 2026	May 2026	May 2026	May 2026	May 2026	May 2026	2021	2024	February 2026	February 2026	2021	December 2025	Jun-2025 to May-2026	February 2026
Birkenhead Central	42	42	42	40	34	39	41	41	38	21	42	39	34	34	42	42	42	42
Tranmere	39	41	37	38	32	32	36	31	39	39	38	37	37	36	39	41	33	38
Seacombe	41	40	41	42	26	35	42	42	41	27	40	41	41	41	41	40	40	40
Bidston Hill	40	39	40	21	3	11	23	26	20	17	41	35	42	42	38	39	38	41
Birkenhead South	37	38	39	37	35	40	38	38	36	19	34	42	36	38	40	36	41	39
Poulton	38	37	38	39	27	34	40	40	40	38	36	38	39	39	37	30	37	37
Leasowe South & Moreton East	36	36	35	15	30	9	18	33	14	14	39	26	40	40	35	38	32	36
Woodchurch	34	35	33	18	19	22	22	34	13	8	37	27	35	37	34	37	39	33
Egremont	35	34	36	36	41	23	39	36	37	34	31	40	33	33	36	29	36	35
Bebington New Ferry	32	33	34	41	31	31	35	29	42	41	32	36	32	32	33	34	34	32
New Brighton	27	32	30	22	37	42	25	13	25	12	30	30	21	17	31	32	31	25
Noctorum North & Upton East	33	31	32	16	5	3	19	27	15	15	33	20	38	35	27	35	26	34
Oxton South	28	30	31	33	40	38	32	30	31	24	16	34	27	28	32	26	35	30
Wallasey East	30	29	29	31	39	37	33	23	33	25	24	33	22	24	28	27	24	28
Moreton West	31	28	26	12	24	30	12	11	17	35	35	18	30	29	25	24	28	27
Egerton Park	29	27	28	32	28	21	31	25	34	33	28	31	29	30	26	28	25	31
Claughton South & Oxton North	22	26	23	28	21	13	29	18	29	16	29	28	9	7	29	33	27	21
Liscard	26	25	27	35	42	41	37	39	30	42	27	32	26	26	30	22	29	26
Leasowe	25	24	25	11	10	4	11	12	11	9	25	13	31	31	17	14	19	29
Lower Bebington & Bromborough Pool	21	23	20	34	14	12	34	15	35	18	22	21	23	22	21	25	22	20
Eastham	23	22	22	30	17	20	28	37	26	7	21	15	28	27	18	16	17	23
Bromborough North	24	21	21	27	25	27	24	16	28	31	20	24	25	25	23	23	30	22
Claughton North	20	20	24	25	15	36	27	17	27	23	26	29	24	23	24	21	21	24
Upton West	19	19	17	13	8	19	14	24	12	30	23	7	20	21	16	18	16	19
Noctorum South	13	18	12	23	6	5	21	35	18	20	5	5	16	18	10	3	13	14
Saughall Massie	18	17	10	10	23	16	10	9	10	28	15	10	13	14	5	15	3	9
Hoylake	17	16	16	3	36	26	1	2	5	36	6	17	8	9	19	17	15	11
Higher Bebington	8	15	8	20	18	14	17	20	23	13	11	19	14	13	11	11	9	12
Prenton	15	14	13	24	20	15	20	32	22	22	12	12	18	20	14	12	10	18
Woodhey	9	13	15	29	38	24	26	21	32	32	1	23	19	19	13	9	18	17
Wallasey Central	11	12	18	26	29	33	30	22	24	40	4	25	17	16	12	10	8	15
Wallasey Village	12	11	19	14	33	25	15	14	16	37	8	16	15	15	20	20	20	16
Heswall	14	10	11	8	13	7	8	6	8	26	17	14	10	8	15	31	14	8
Great Meols	7	9	9	4	11	8	4	7	4	11	2	3	12	12	4	5	7	10
Pensby & Thingwall	10	8	7	9	16	17	9	10	9	6	9	11	11	11	8	13	5	7
Thurstaston & Irby	5	7	6	5	9	10	5	8	3	4	19	9	6	6	7	6	11	6
West Kirby	16	6	14	1	22	29	2	1	1	3	13	22	7	10	22	19	23	13
Greasby	6	5	5	6	7	28	7	5	6	29	18	4	5	5	9	7	6	5
Bromborough South	4	4	3	19	12	18	16	19	21	5	3	6	3	4	6	8	1	3
Poulton, Raby Mere & Thornton Hough	3	3	4	17	2	2	13	28	19	2	14	8	2	3	3	4	12	4
Gayton & Lower Heswall	1	2	1	7	4	1	6	4	7	10	7	1	1	1	1	1	2	1
Caldy & Newton	2	1	2	2	1	6	3	3	2	1	10	2	4	2	2	2	4	2

Source: Public Health Intelligence Team Wirral, Local Insight

Implications for the Wirral Plan and Reducing Inequalities

The findings presented throughout this report have several implications for efforts to improve population health and reduce inequalities across Wirral.

- Health inequalities extend beyond LE. The largest differences between communities are observed in HLE and DFLE, indicating that reducing inequalities is not only about helping residents live longer, but also increasing the number of years they spend in good health and free from disability.
- The same communities experience consistently lower health state life expectancy. MSOAs such as Birkenhead Central, Tranmere, Bidston Hill, Seacombe, Poulton and Birkenhead South repeatedly experience the poorest outcomes across all three measures, suggesting that targeted intensive action in these communities may have the greatest impact, while maintaining accessible services across the borough.
- Health inequalities are closely linked to wider determinants. The communities with the poorest health outcomes also tend to experience less favourable outcomes across a range of social, economic and environmental indicators, reinforcing the importance of a whole-system approach to reducing inequalities.
- Action is required across the life course. The patterns observed throughout this report suggest that inequalities accumulate over time, highlighting the importance of interventions spanning early years, education, employment, housing, healthy ageing and access to opportunities.
- MSOA-level intelligence adds value. Whilst Wirral performs relatively well overall compared with many similar local authorities, MSOA-level analysis demonstrates that the benefits of good health are not shared equally. Continued monitoring of health state life expectancy and wider determinants can help track progress and inform place-based action.

Together, these findings support the ambitions of the Wirral Plan by identifying where inequalities are greatest and highlighting opportunities to improve both the length and quality of life for Wirral residents.

Appendix A

List of indicators included in the wider determinant and lifestyle factors section, earlier in this document. All indicators' data was sourced from Local Insight tool in September 2026. Each indicator covers a different period as indicated in the table below.

Theme	Indicator	Period
Starting Well	0-4 attendances at A&E for trauma and injury	31 Mar 2020 - 03 Mar 2023
	Children aged 0-19 in absolute low-income families	2024
	Children providing unpaid care (Census 2021)	2021
	Educational Attainment (Attainment 8) 2023/24	2023/24
	Pupils Achieving a "Good Level of Development" at Early Years Foundation Stage by Non-Free School Meals (NFSM)	01 Jan 2024 - 01 Dec 2024
	Reception prevalence of obesity (including severe obesity), 3 years data combined	2022 to 2025

	Year 6 prevalence of obesity (including severe obesity), 3 years data combined	2022 to 2025
	Youth unemployment (18-24 receiving JSA or Universal Credit)	June 2026
Living Well Part 1	Bad health (Census 2021)	2021
	COPD Emergency Hospital Admissions, Rate per 1,000, 2022/23 to 2024/25	Apr-2022 to Mar-2025
	Digestive Disease Emergency Hospital Admissions, Rate per 1,000, 2022/23 to 2024/25	Apr-2022 to Mar-2025
	Emergency Hospital Admissions All Ages, Rate per 1,000, 2022/23 to 2024/25	Apr-2022 to Mar-2025
	Emergency Hospital Admissions for Circulatory Conditions, Rate per 1,000, 2022/23 to 2024/25	Apr-2022 to Mar-2025
	Intentional Self Harm Emergency Hospital Admissions, Rate per 1,000, 2022/23 to 2024/25	Apr-2022 to Mar-2025
	Peripheral Arterial Disease prevalence	2024/25
	Schizophrenia, bipolar disorder and psychoses prevalence	2024/25
	Stroke and Transient Ischaemic Attack prevalence	2024/25
	Very bad health (Census 2021)	2021
Living Well Part 2, GP Quality outcomes framework prevalence data	Asthma prevalence	2024/25
	Atrial Fibrillation prevalence	2024/25
	Cancer prevalence (diagnosis since 2003)	2024/25
	Chronic Kidney Disease prevalence	2024/25
	COPD prevalence	2024/25
	Coronary Heart Disease prevalence	2024/25
	Dementia prevalence	2024/25
	Depression prevalence	2024/25
	Diabetes prevalence	2024/25
	Epilepsy prevalence	2024/25
	Heart Failure prevalence	2024/25
	High Blood Pressure prevalence	2024/25
	Learning Disabilities prevalence	2024/25
	Obesity prevalence	2024/25
	Osteoporosis prevalence	2024/25
	Palliative Care prevalence	2017/18
	Pre-Diabetes prevalence	2024/25
	Rheumatoid Arthritis prevalence	2024/25
	Serious Mental Illness prevalence	2017/18
Ageing Well	Deaths under 75, all causes	2019 to 2023
	Emergency Hospital Admissions for Falls Persons Aged 65 Plus, DSR per 100,000, 2023/24 to 2025/26	Apr-2023 to Mar-2026
	Older person unemployment (50+ receiving JSA or Universal Credit)	June 2026
	Pensioners in poverty (Pension Credit)	November 2025
	People over the age of 65 with bad or very bad health (Census 2021)	2021
	State Pension total claimants	September 2025
Wider Determinants	AHAH Air quality domain	May 2026
	AHAH Fast food outlets	May 2026
	AHAH Gambling outlets	May 2026
	AHAH Nitrogen Dioxide	May 2026
	AHAH Particulate Matter	May 2026
	AHAH Sulphur Dioxide	May 2026
	AHAH Tobacconists and Vape Stores	May 2026

	Digital Exclusion Risk Index (DERI) score	2021
	Households in Fuel Poverty	2024
	Households on Universal Credit, Carer Entitlement	February 2026
	Households on Universal Credit, Child Entitlement	February 2026
	Households with no car (Census 2021)	2021
	Housing Benefit	December 2025
	Total crime offences (12 month total)	Jun-2025 to May-2026
	Total households on Universal Credit	February 2026