

Chapter 5: Place and Economy

Healthy Urban Environment

- 5.1 Air Quality & Noise Pollution
- 5.2 Safe & Sustainable Travel

Community Safety

- 5.3 Crime
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Housing and Homelessness

- 5.5 Home Ownership and Occupancy
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- 5.8 Low Income Families, Fuel Poverty and NEET

Appendix

5.1 Air Quality & Noise Pollution

Key Points

Background

Poor air quality is a major public health issue. Evidence shows that air pollution is linked to coronary heart disease, stroke, respiratory disease, lung cancer, asthma, low birth weight and reduced life expectancy. Deprived areas often have poorer air quality than more affluent places, thus widening health inequalities. Sandwell is the 12th most deprived local authority in the country and has a road network of local and major arterial roads, including the M5 and M6 Motorways, which are some of the busiest and most congested roads in Europe.

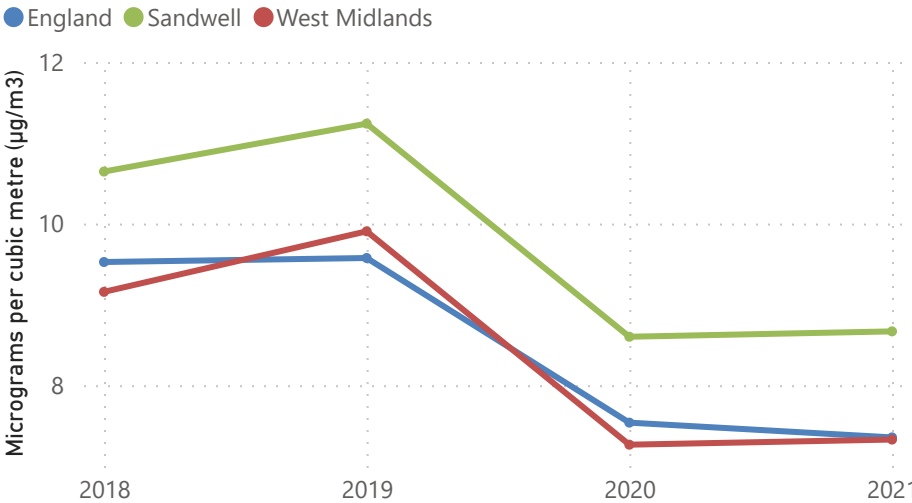
Particulate matter and air pollution

Particulate matter (PM) in the air with a diameter of 2.5 µm or less is known as fine particulate matter (PM2.5). This pollutant has a significant impact on public health because the particles are small enough to be inhaled into the deepest parts of the lung. This means there is no safe level of exposure to PM2.5. PM2.5 comes from a range of sources such as direct or ‘primary’ emissions from road transport, domestic combustion, manufacturing and industrial processes. ‘Secondary’ PM2.5 is formed in the atmosphere by chemical reactions involving primary emitted particles. Concentrations of PM2.5 vary from year to year due to the weather. Sandwell has had consistently higher levels of PM2.5 than the regional and national levels. However, the COVID-19 pandemic and lockdowns resulted in a substantial decrease in PM2.5 emissions between the years 2019 and 2020.

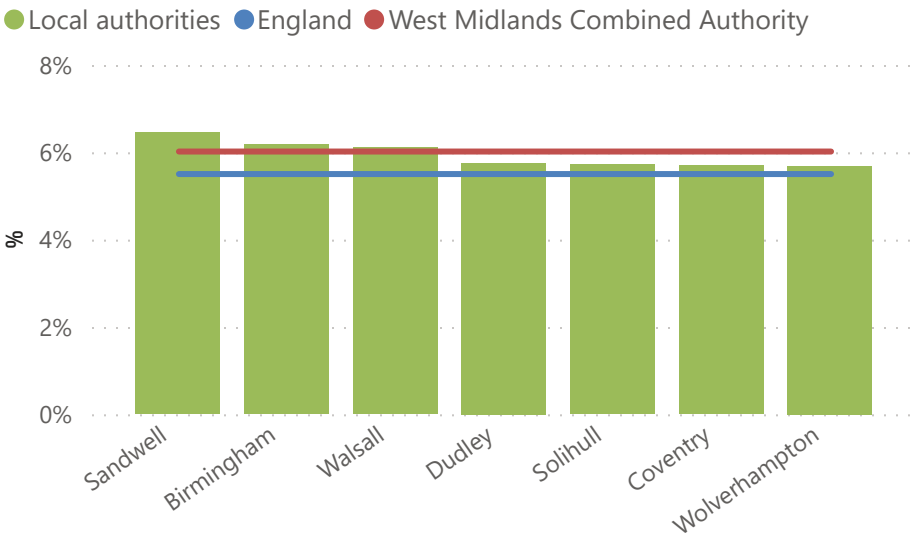
Air pollution-related mortality

Evidence indicates that the relative risk associated with living in areas with higher levels of air pollution over the long term is greater than that of daily variations in exposure. Sandwell’s consistently higher levels of air pollution is reflected by higher rates of death which are attributable to long term exposure to particulate air pollution. In 2021, Sandwell had the highest levels of deaths linked to air pollution in the West Midlands Combined Authority area.

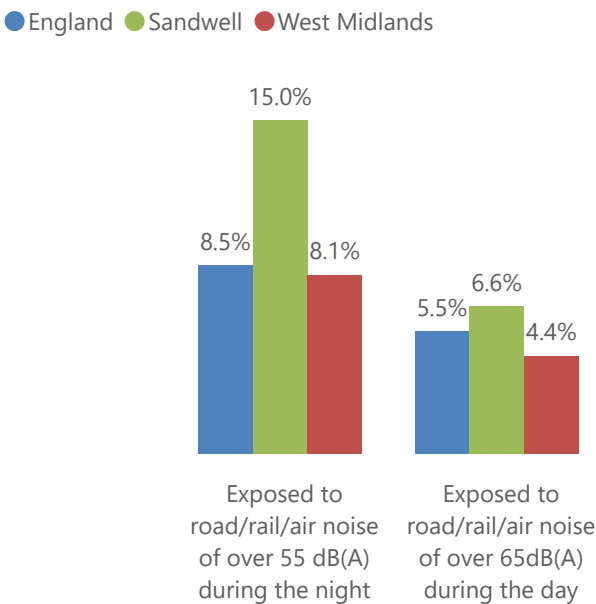
Air pollution: Annual average concentrations of fine particulate matter (PM2.5)



% of deaths attributable to fine particulate matter (PM2.5) air pollution (2021)



Population % affected by noise pollution from transport (2016)



Noise pollution in Sandwell

The World Health Organisation (WHO) classes noise as one of the top environmental hazards to health and well-being in Europe. Noise exposure can cause stress and sleep disturbance which have negative impacts on quality of life and health. Long term exposure to high levels of environmental noise e.g. vehicle noise, is linked to health conditions such as strokes and heart attacks. The Department for Environment, Food and Rural Affairs (DEFRA) conducts a noise mapping and modelling exercise by local authority every 5 years. The latest available data for 2016 shows that the proportion of Sandwell residents who are exposed to noise from road, rail and air transport is almost double that of the regional rates (15% vs 8.1%). Daytime noise level exposure affects a smaller proportion of Sandwell residents (6.6%); however, this is still higher than the regional and national rates (4.4% and 5.5% respectively).

Key Points

Background

Physical inactivity is one of the leading causes of illness and death. It is linked to cardiovascular disease, coronary heart disease, stroke, diabetes, obesity, osteoporosis, colon and breast cancer, and poor mental health. Active travel i.e. walking or cycling to work or to the shops is one form of physical activity which can be incorporated into everyday life. Active travel also reduces car travel, air pollution, carbon dioxide emissions, congestion, road danger and noise. It increases the number of people of all ages out on the streets, making public spaces more welcoming and providing opportunities for social interaction and children’s play.

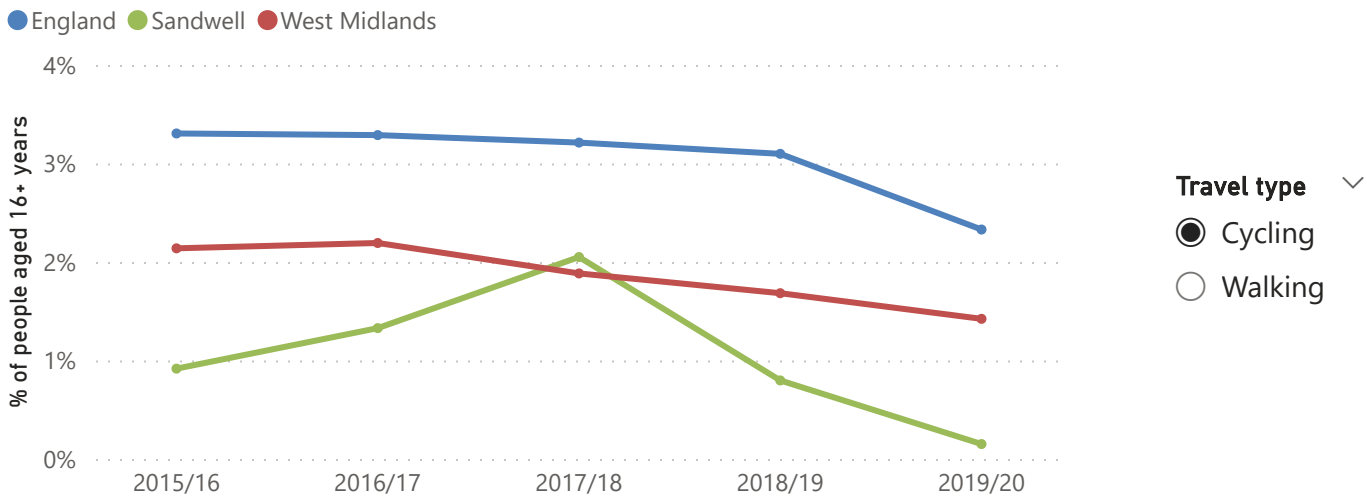
Active travel in Sandwell

Rates of active travel in Sandwell between 2015 - 2020 were consistently below the national rate. The COVID-19 pandemic and lockdowns caused a further reduction in active travel in 2019/2020.

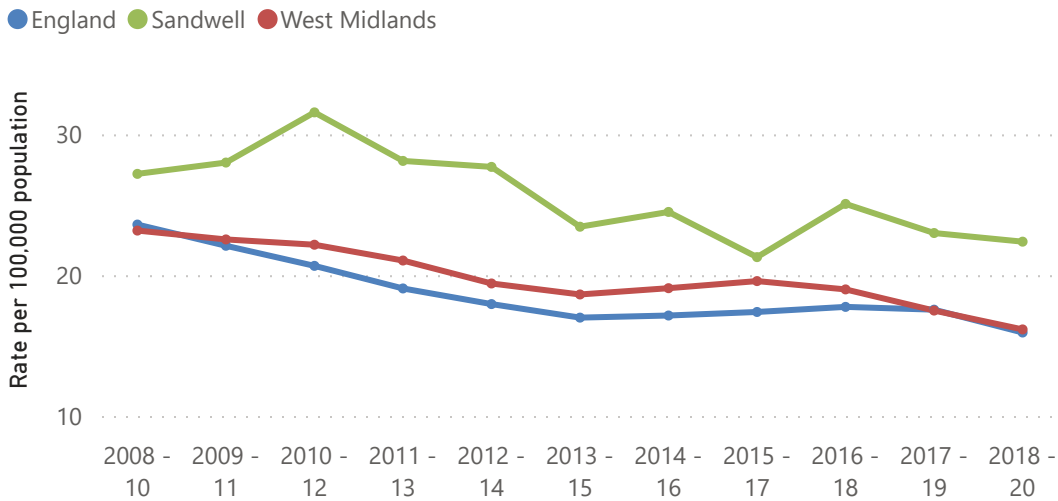
Road safety

According to the Office for Health Improvement & Disparities, parents cite vehicle speed and volume as reasons why they do not allow their children to walk or cycle, thereby reducing opportunities for active travel. In Sandwell, children under the age of 16 suffer significantly higher rates of death and serious injury in road accidents than the national rate.

Active Travel: Percentage of adults cycling or walking for travel at least 3 days per week



Children aged 0-16 years killed or seriously injured in road accidents



Key Points

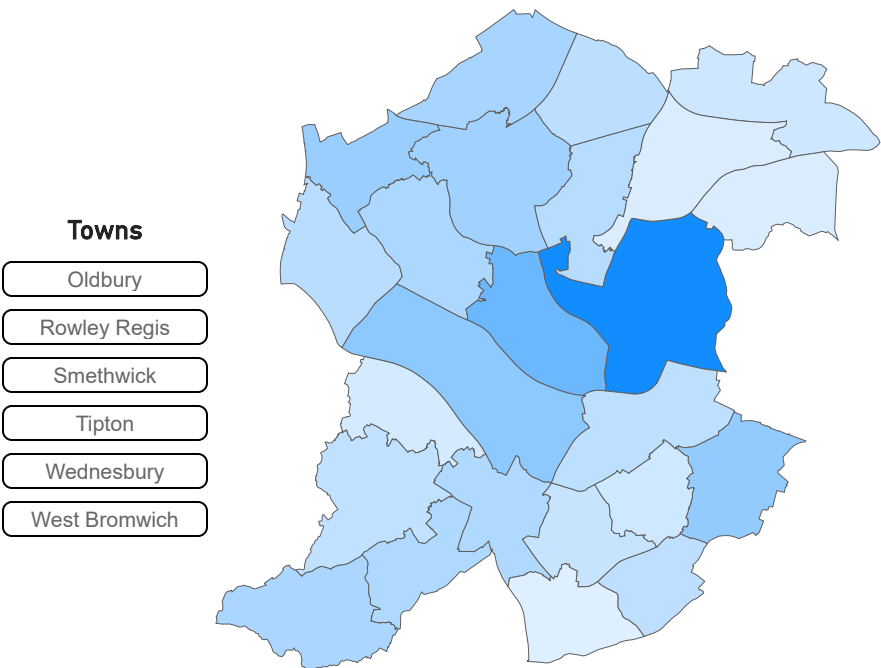
Background
Community safety forms a key part of the wider determinants of health. Crime and the fear of crime damages a community’s health and wellbeing. The most direct impact on health is violence which causes injury and death; however, there are also psychological effects of experiencing crime. The fear of crime can reduce health promoting behaviours such as outdoor physical activity and social contact. Perpetrators of crime are more likely than the general population to have worse health across a range of conditions (e.g. mental health and substance misuse issues). This can lead to reoffending and further exacerbation of health and social inequalities. Furthermore, both offenders and victims are more likely to live in the most deprived areas, which already increases the risk of health inequalities.

Crime in Sandwell
A total of 85,406 crime incidents were recorded in Sandwell in the two-year period January 2021 - December 2022. The majority (44.3%) of these incidents were episodes of violence and sexual offences, followed by public order offences (9.2%) and vehicle crime (9%). At ward level, these five wards had the highest rates of crime per 1,000 population: West Bromwich Central (552.5), Greets Green and Lyng (384.1), Oldbury (320.3), Soho and Victoria (308.3), Princes End (298.0). Three of these wards, West Bromwich Central, Princes End and Soho and Victoria were designated by West Midlands Police in 2019 as ‘Impact Areas’ i.e. areas of greater need of police intervention and support due to higher crime rates. These wards are among the most deprived wards in Sandwell.

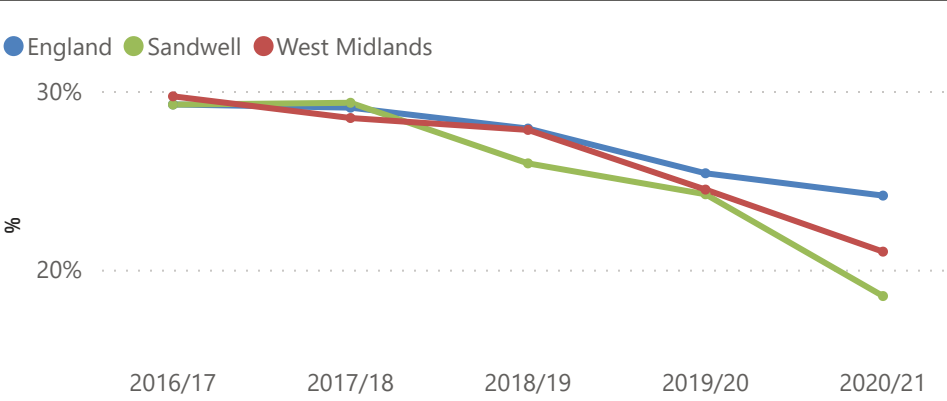
Total recorded crime in Sandwell 2021, 2022

Type of crime	% of total crime
Violence and sexual offences	44.3%
Public order	9.2%
Vehicle crime	9.0%
Criminal damage and arson	7.5%
Anti-social behaviour	7.1%
Theft	6.8%
Burglary	4.6%
Shoplifting	3.8%
Drugs	2.2%
Other crime	1.9%
Robbery	1.9%
Possession of weapons	1.6%
Total	100.0%

Crime rate per 1,000 population by ward 2021, 2022



Reoffending levels: percentage of offenders who reoffend



Reoffending rates in Sandwell

The causes of reoffending are complex and multi-faceted; however, deprivation is a key factor in both first time offending and reoffending. Despite being the 12th most deprived borough in the country, Sandwell’s reoffending rates have been below the national rate since 2016/2017 and have continued to decline. The COVID-19 pandemic and lockdowns also contributed to falling reoffending rates in 2019/2020 and 2020/2021.



Key Points

Background

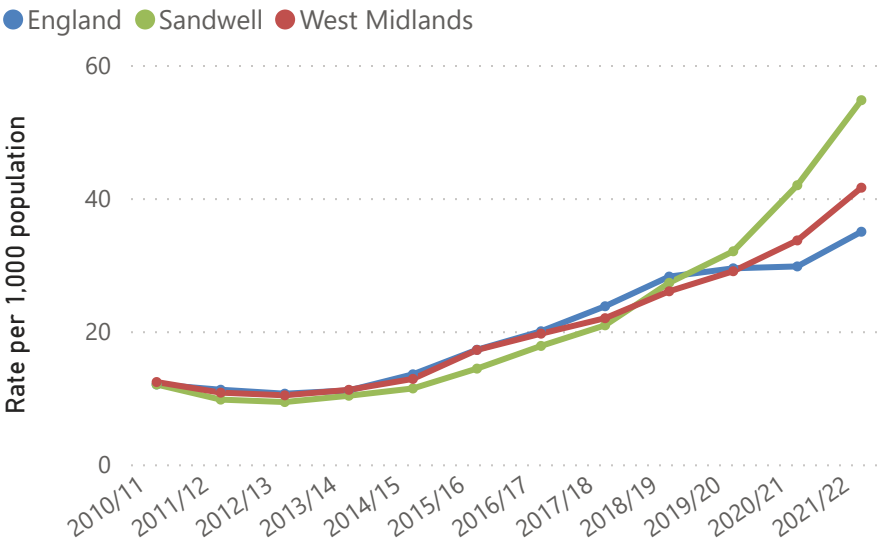
Violent crime is linked to a range of negative health outcomes at a neighbourhood level, including death, coronary heart disease, preterm birth and low birthweight. Violent crime also reduces positive health behaviour such as physical activity. Additionally, exposure to violence has negative impacts on mental health, particularly for children and young people ([see Lorenc T, Petticrew M, Whitehead M, et al.](#)). [Evidence](#) also shows a strong link between violence and deprivation for both victims and perpetrators.

Violent crime in Sandwell

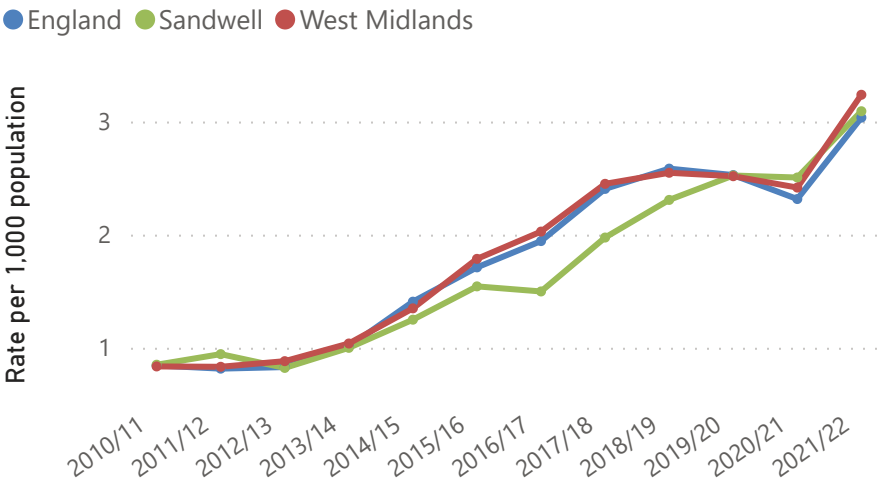
Violence and sexual offences accounted for 44.3% of all crime in Sandwell in 2021 and 2022. Violent crime in Sandwell rose above the national rate in 2019/20 having been below it for the previous ten years. Violent crime, sexual offences and domestic abuse rates in Sandwell have been steadily increasing since 2015/2016 and saw a sharp increase in 2020/21 and 2021/22 during the COVID-19 pandemic and lockdowns. [Evidence](#) from the Office for National Statistics (ONS) showed nationwide increases in several indicators of domestic abuse during the pandemic, including: Police recorded crime, the number of domestic abuse cases handled by Victim Support, the number of calls to the National Domestic Abuse Helpline and the number of arrests and voluntary attendances for domestic abuse-related crimes.

Higher rates of violent crime in Sandwell are reflected in higher rates of emergency hospital admissions for violent crime. However, admission rates have been steadily declining since 2009/10, suggesting that although violent crime in Sandwell has been

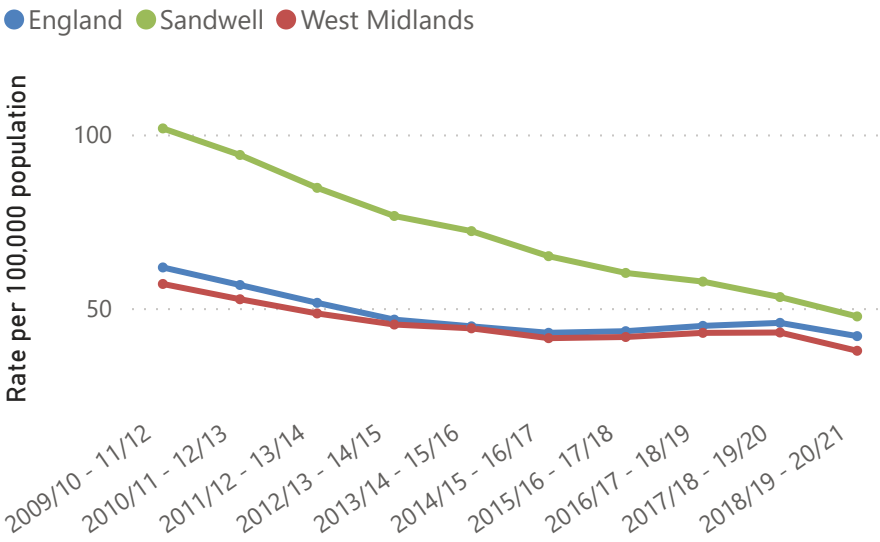
Violent crime - violence offences per 1,000 population



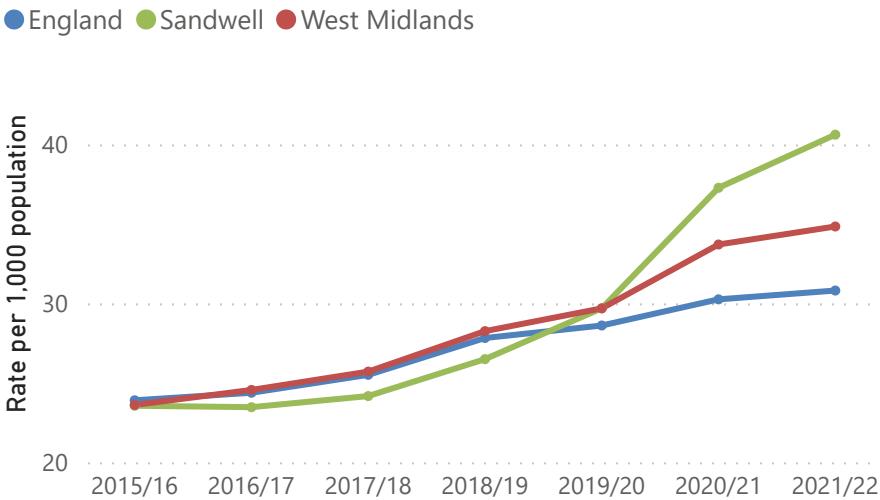
Violent crime - sexual offences per 1,000 population



Violent crime - hospital admissions for violence (including sexual violence)



Domestic abuse related incidents and crimes





Key Points

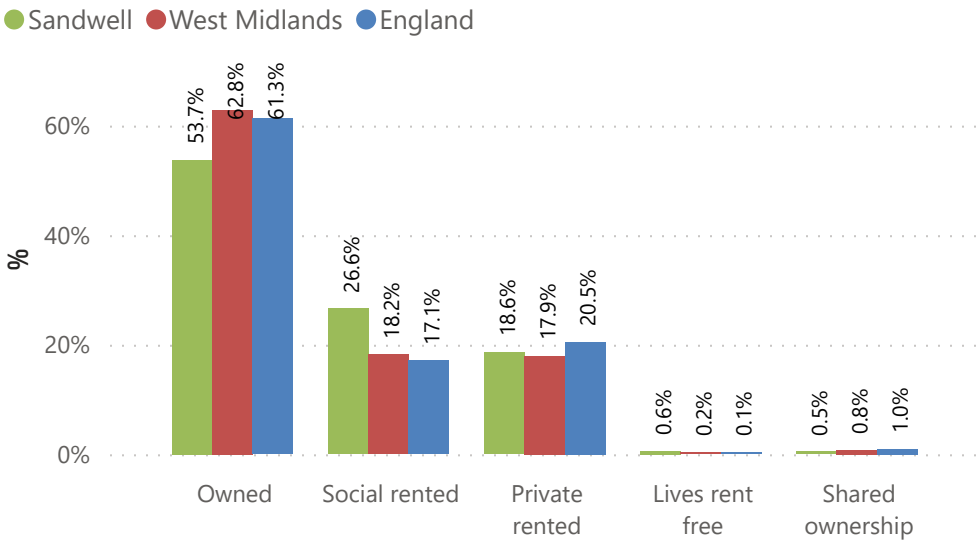
Background

Housing is a key determinant of health, not only in terms of quality, but also the affordability of housing and security of tenure. High housing costs can cause families to experience poverty and contribute to ill health such as increased blood pressure and hypertension, depression and anxiety. Home ownership can provide greater stability whereas insecurity of tenure is a major concern for many renters and adds to mental and physical risks to health. According to the [Marmot Review](#) (2010), poverty rates for people living in social housing are double that of the population as a whole with only a third of tenants in full-time employment and fewer than half with any paid work. A lack of stable housing affects the mental health and wellbeing of all householders, both adults and children. Living in overcrowded housing also has an impact on physical and mental health. Children living in overcrowded homes are more likely to be stressed, anxious and depressed, have poorer physical health, attain less well at school and have a greater risk of behavioural problems than those in uncrowded homes.

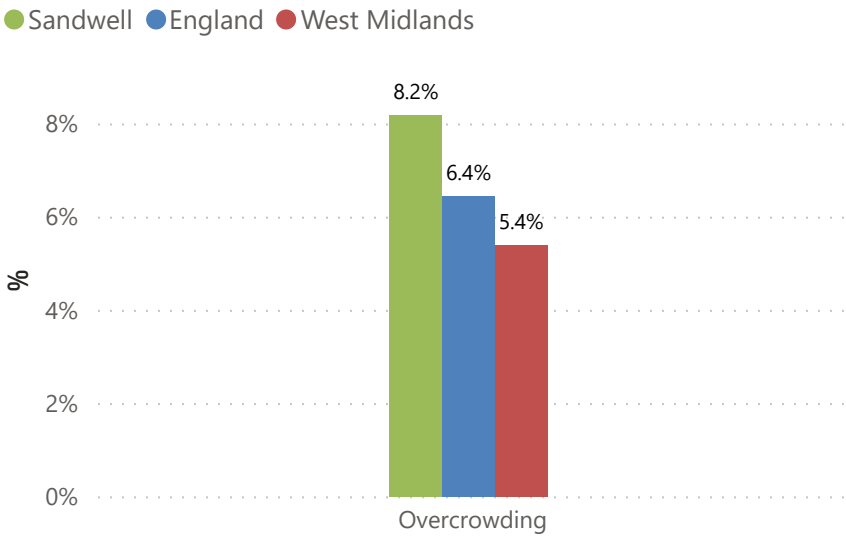
Housing in Sandwell

Based on the ratio of house prices to earnings, it is more affordable to buy a house in Sandwell compared to the England average; however, affordability levels are at their lowest in the last 20 years. The 2021 census showed that Sandwell had lower rates of home ownership (53.7%) compared to the national and regional rates (61.3% and 62.8% respectively). Social renting in Sandwell was higher (26.6%) than the

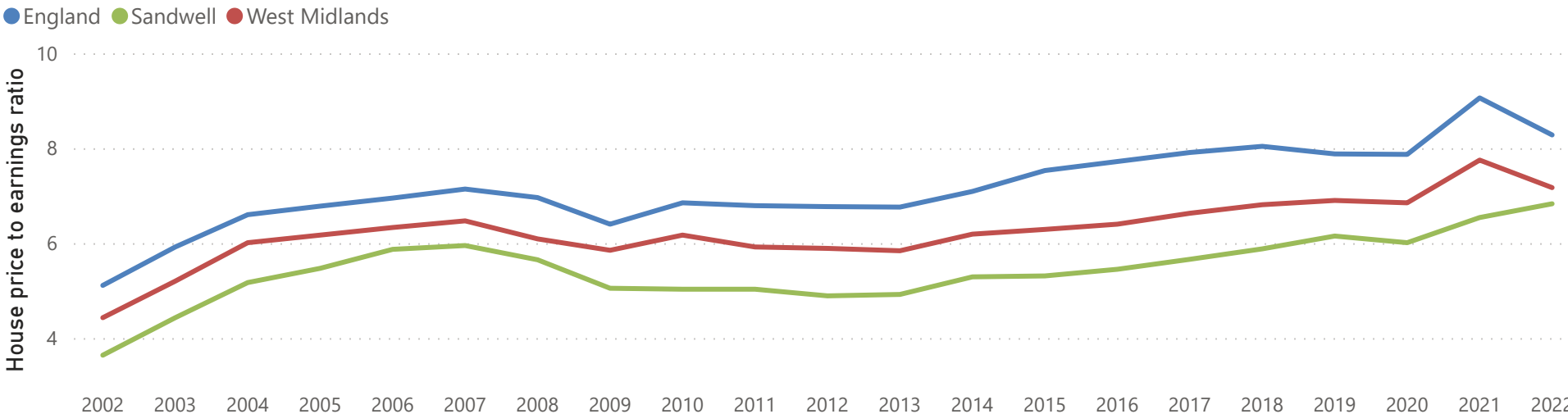
Tenure types in Sandwell - 2021 census



Overcrowding rates in Sandwell homes - 2021 census



Housing affordability: Ratio of house prices to earnings ⓘ



Key Points

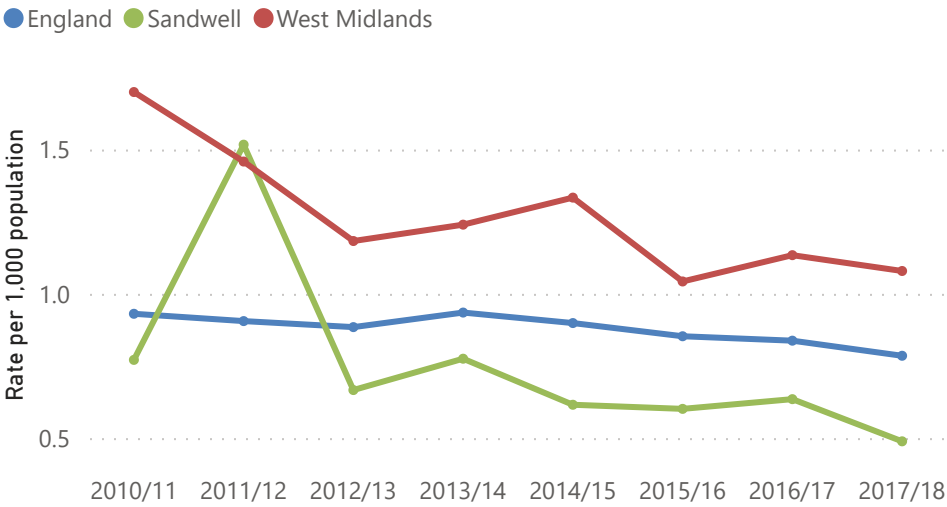
Background
A safe, stable home is a key determinant of health and wellbeing. Homelessness and insecure accommodation is associated with severe poverty and can lead to adverse physical and mental health and social outcomes, particularly for children.

Homelessness and mental health
Statutory homelessness is defined as becoming unintentionally homeless. However, households deemed not to be in ‘priority need’ are not entitled to provision of accommodation by their local authority. These households can have greater public health needs than the population as a whole. Most of the people in this cohort are single homeless people, who as a group have very high prevalence of mental and physical health issues. Because this cohort are not eligible for housing by the Council, they are at greater risk of sleeping rough.

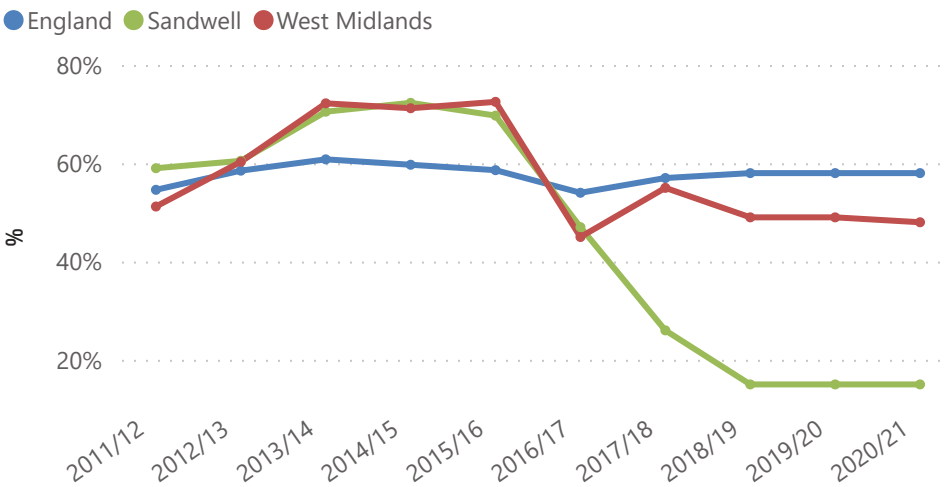
Since 2012/2013 the rate of people in Sandwell categorised as homeless but not in priority need has been consistently lower than regional and national rates. The latest data from the Ministry of Housing, Communities & Local Government is as at 2017/2018 and therefore does not reflect the impact of the COVID-19 pandemic.

However, the percentage of adults aged 18-69 in Sandwell under secondary mental health services who live in stable and appropriate accommodation has been declining since 2015/2016 and since 2017/18 has been significantly below the national and regional rates.

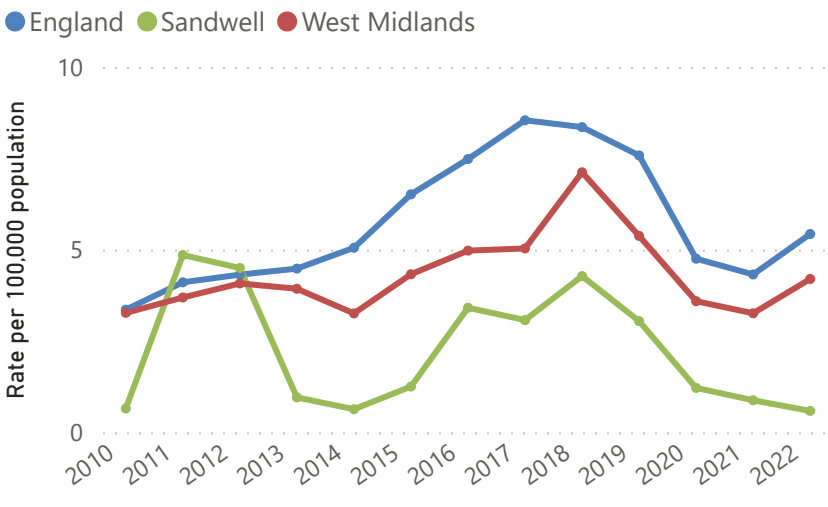
Statutory homelessness - Eligible homeless people not in priority need



Adults in secondary mental health care in stable and appropriate accommodation



Rate of people sleeping rough - Annual autumn snapshot



Rough sleeping in Sandwell

This data is an annual autumn snapshot of people sleeping rough on a single night between 1 October and 30 November. Sleeping rough is defined as sleeping or about to bed down in open air locations and other places including tents and make shift shelters. The data is presented as the rate per 100,000 population. Since 2012, the annual rate of people sleeping rough in Sandwell has been consistently below the national and regional rates. Although rough sleeping rates in Sandwell have been trending downward since 2018, the COVID-19 measures in place during 2020 and 2021 may have further reduced the number of people sleeping rough.

Key Points

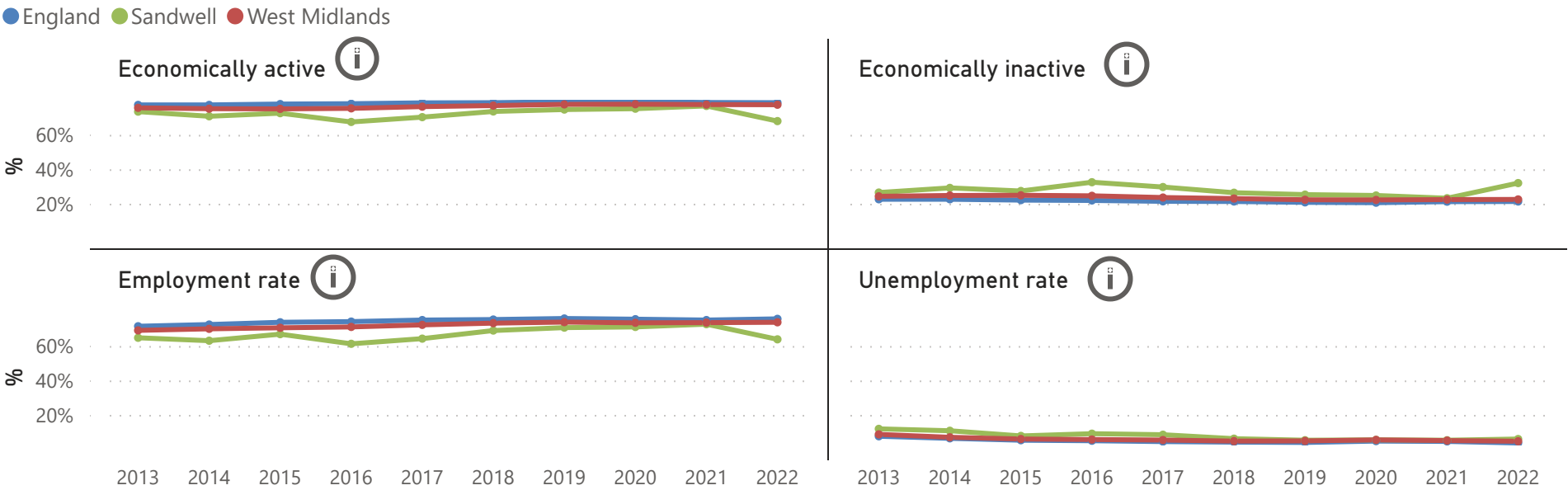
Background

According to the [2010 Marmot Review](#), being in good employment is beneficial to health and wellbeing while long term unemployment contributes to poor health outcomes and health inequalities. Unemployment or low-paid work limits people’s access to affordable and good quality housing. Unemployed people are more at risk of limiting long-term illness, mental illness, cardiovascular disease, premature mortality and suicide. Unemployment is also linked to negative health behaviours such as higher levels of alcohol consumption and smoking and lower levels of physical exercise. Unemployment contributes to poor health and poor health increases the likelihood of unemployment, so the two issues may become mutually reinforcing. The quality and type of work is also a significant determinant of health; [precarious employment](#) can have negative effects on mental health. Income is positively related to life expectancy, disability free life expectancy, and self-reported health, consequently, many physical and mental health outcomes improve as income rises.

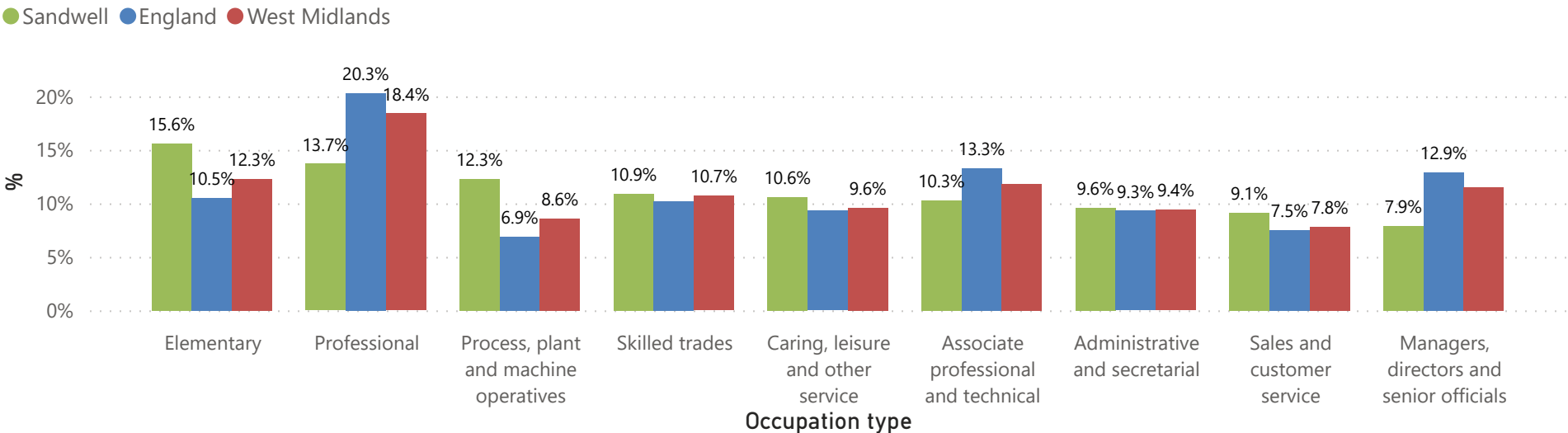
Economic activity and employment in Sandwell

Sandwell compares unfavourably with the national and regional rates for all economic and employment indicators. In 2022, 68% of Sandwell’s population were economically active compared to the national and regional rates of 78.7% and 77.5% respectively. The employment rate in Sandwell in 2022 was 63.9% compared to the national and regional rates of 75.8% and 73.8% respectively. Based on the 2021 census, most working people in Sandwell (15.6%) were employed in ‘elementary’

Economic activity and employment rates



Occupation type of Sandwell residents aged 16+ in employment the week before the 2021 census





Key Points

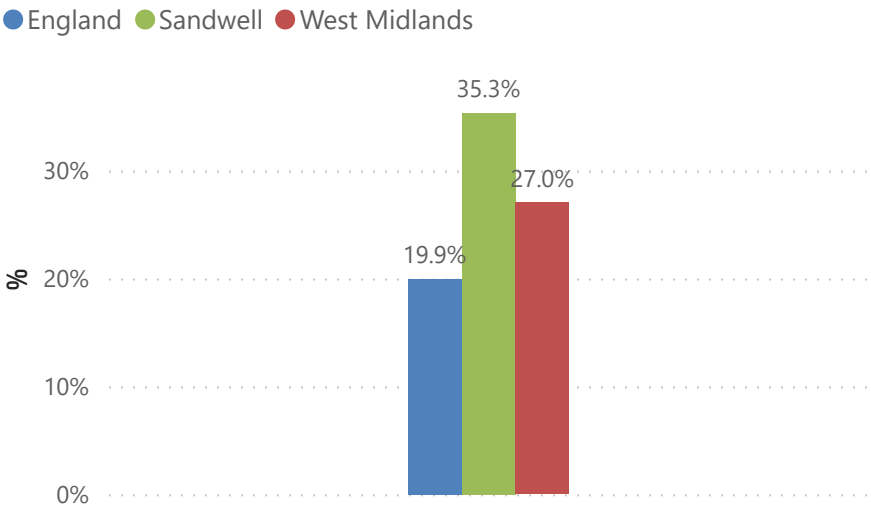
Background

Income plays an important part in people’s health from childhood through to old age. Low income households generally suffer from poorer health compared to those with higher incomes. Parents’ income influences children’s health which in turn influences their life chances and future earning potential. Income also determines the nature of the home environment, where young children spend much of their time.

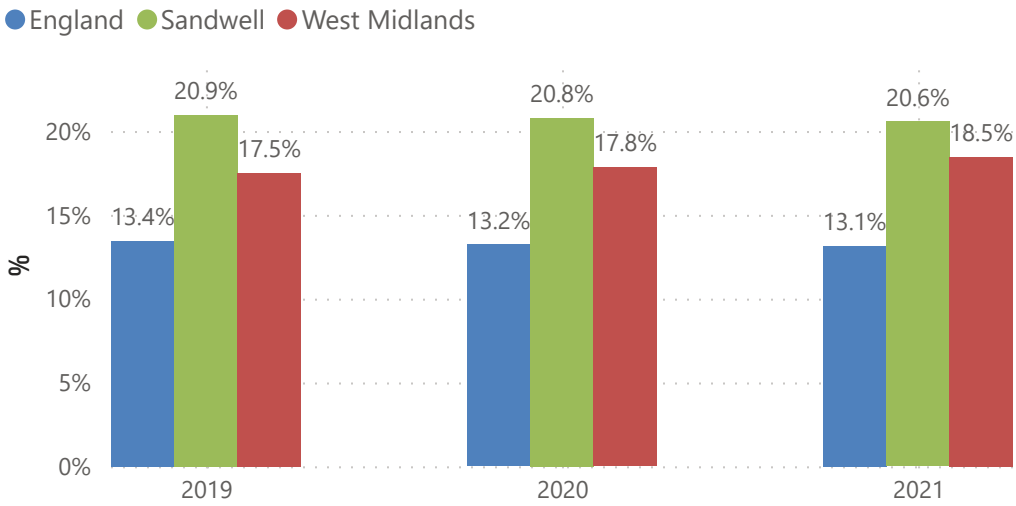
Poor housing can lead to poor physical and mental health in childhood. A crucial element of safe, healthy housing is adequate heating. However, the lower a household’s income the more likely they are to be at risk of fuel poverty. Fuel poverty and living in cold homes are associated with poor health. Children are particularly vulnerable to the effects of living in cold housing. Children who live in homes with inadequate heating are more likely to suffer from chest and breathing problems such as asthma and bronchitis. Cold housing also negatively affects children’s educational attainment, emotional well-being and resilience.

Educational attainment is strongly linked with health outcomes because education provides knowledge and capabilities that contribute to mental and physical wellbeing. Furthermore, educational qualifications influence income, housing and other material resources associated with health. Therefore, spending time not in employment, education or training (NEET) can

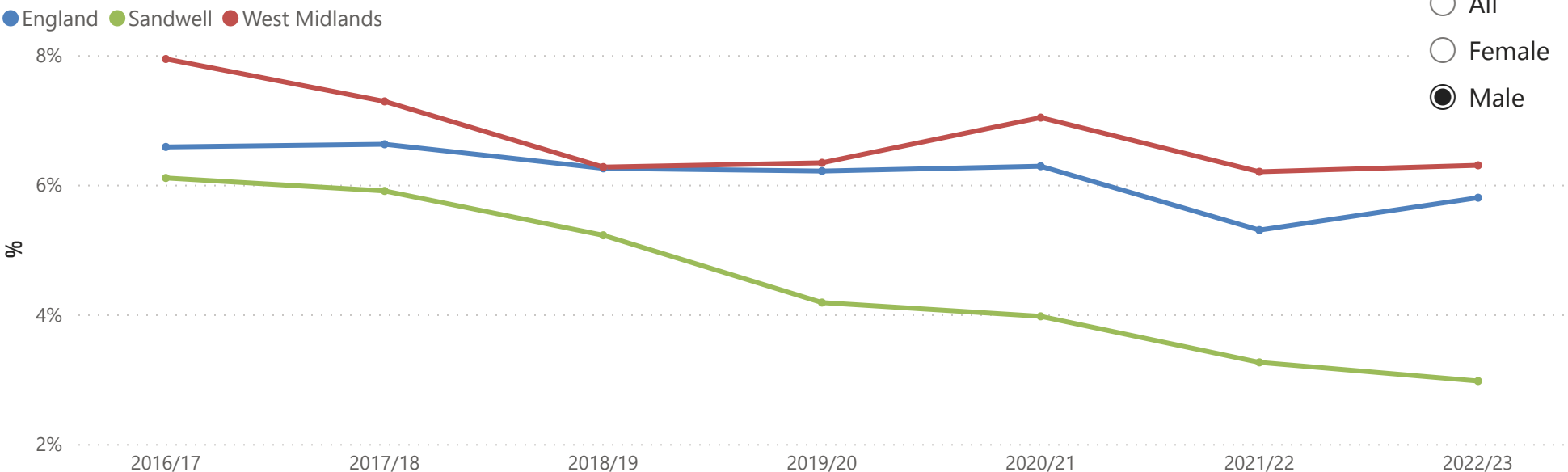
Children aged under 16 in low income families 2021/2022



Percentage of households in Sandwell that experience fuel poverty



Percentage of 16 to 17 year olds not in education, employment or training (NEET) or whose activity is not known





Appendix: Chapter 5 - Place

Data Sources

Air & noise pollution

Fingertips - Air pollution: fine particulate matter (new method - concentrations of total PM2.5)
Fingertips - Fraction of mortality attributable to particulate air pollution (new method)
Fingertips - The percentage of the population exposed to road, rail and air transport noise of 55 dB(A) or more during the night-time
Fingertips - The percentage of the population exposed to road, rail and air transport noise of 65dB(A) or more during the daytime

Active travel

Fingertips - Percentage of adults walking for travel at least three days per week
Fingertips - Percentage of adults cycling for travel at least three days per week
Fingertips - Children killed and seriously injured (KSI) on England's roads

Crime

Police recorded crime data - <https://data.police.uk/data/>
Fingertips - Reoffending levels: percentage of offenders who reoffend
Fingertips - Violent crime - hospital admissions for violence (including sexual violence)
Fingertips - Violent crime - violence offences per 1,000 population
Fingertips - Violent crime - sexual offences per 1,000 population
Fingertips - Domestic abuse related incidents and crimes

Housing and Homelessness

NOMIS: Census 2021 table TS053 - Occupancy rating for rooms (overcrowding)
NOMIS: Census 2021 table TS054 - Tenure
ONS - Housing affordability - House price to residence-based earnings ratio
Fingertips - Statutory homelessness - Eligible homeless people not in priority need
Fingertips - Adults in contact with secondary mental health services who live in stable and appropriate accommodation
Rough sleeping - <https://www.gov.uk/government/collections/homelessness-statistics#rough-sleeping>

Economic Activity and Employment

NOMIS: Census 2021 table TS063 - Occupation type
NOMIS: Annual population survey - Economic activity/inactivity, Unemployment, Employment

Low Income Families, Fuel Poverty and NEETs

Fingertips - 16 to 17 year olds not in education, employment or training (NEET) or whose activity is not known
Fingertips - Fuel poverty (low income, low energy efficiency methodology)
Fingertips - Children in relative low income families (under 16s)

Contact

If you have any queries or comments please contact the Public Health Research and Intelligence Team: research_sandwell@sandwell.gov.uk



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