**Health & Disability in Leicester (Census 2021)**

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**Introduction**

The Office for National Statistics (ONS) launched the Census 2021 survey on March 21, 2021. Census 2021 had a high response rate of 97%, making it a reliable resource that provides a detailed understanding of the population of England and Wales. This information provides valuable insight into the characteristics of local authorities and information that can be used for governments and municipalities to develop policies, plan public services and more.

The Census 2021 results about health include data about people’s general health and disability information across England and Wales. Overall, the data shows an increased number of people reporting very good health, while the amount of those reporting disability and limitations have decreased. However, Census 2021 was undertaken during the coronavirus (COVID-19) pandemic. This may have influenced how people perceived their health status and activity limitations, and therefore may have affected how people chose to respond.

This report shows trends and analysis from the first release of Census 2021 data on health data in Leicester, as well as a breakdown of local authority data, comparisons with data from England & Wales and other major urban cities within the UK, and changes over the decades since the previous Census in 2001 and 2011.

From my friend chatgpt:

The 2021 Census, conducted by the Office for National Statistics (ONS), offered a comprehensive snapshot of the population of England and Wales. With a remarkable response rate of 97%, the Census results provide valuable insights into the demographics, health, and lifestyles of the people in these regions. These findings are crucial for policymakers and local authorities in shaping policies, planning public services, and more.

The Census gathered data on the general health and disability of the population, revealing an increase in the number of individuals reporting good health, while the percentage of people with disabilities and limitations has declined. However, it's worth noting that the Census was conducted during the COVID-19 pandemic, which may have affected how people perceived and reported their health status.

This report delves into the first release of Census 2021 data on health in Leicester, comparing it to data from England and Wales, other UK cities, and previous censuses. The report highlights trends and provides a detailed analysis of local authority data, giving a comprehensive overview of health and wellness in Leicester over time.

**Highlights:**

* General health – main findings: In Leicester, a majority (81%) described their general health as either “very good” (48.8%), or “good” (33.5%). While 12.5% described their health as “fair”. A smaller proportion of residents described their health as “bad” (4%) or “very bad” (1.2%) during the 2021 census.
* Disability – main findings: Leicester had 368,571 usual residents, of which 79.9% reported not having a long-term physical or mental health condition.
* Unpaid carers: In 2021, 3.4% of Leicester residents (aged five years and over) reported providing up to 19 hours of unpaid care each week. This figure decreased from 6.2% in 2011. These are age-standardised proportions.

**What Data Related to Health does the Census Collect?**

The data collected provides information about people’s general health across England and Wales.

In the first data release, there were a total of 4 combined datasets and the corresponding census question asked, related to general health:

1. **General Health -**  Respondents were asked to assess their general health on a five-point scale: "Very good", "Good", "Fair", "Bad", or "Very bad".
2. **Disability - “***Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?”*

“*Do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?*”

1. **Unpaid Care** – “*Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?*”
2. **General Health**

General Health involves a person’s self-assessment of the general state of their health at the time of the survey, on Census Day, 21 March 2021. Respondents assessed their general health from very good to very bad.

**England & Wales General Health Overview**

Source: [ONS.gov](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/generalhealthenglandandwales/census2021)

“Across England and Wales, there was an increase in the proportion of people reporting very good health and a decrease in the proportion of people reporting very bad health, compared with the 2011 Census.

The census data on general health show:

* an increase in the proportion of people reporting their health as very good to 47.5% (28.8 million) in 2021 (from 45.0%, 26.4 million, in 2011)
* a smaller proportion but larger number of people reporting their health as good, to 34.1% (20.0 million) in 2021 (from 34.6%, 19.1 million in 2011)
* a decrease in the proportion of people reporting their health as fair, to 13.1% (7.6 million) in 2021 (from 14.3%, 7.4 million in 2011)
* a smaller proportion, but similar number of people reporting their health as bad, to 4.2% (2.4 million) in 2021 (from 4.7%, 2.4 million in 2011)
* Chart, bar chart

  Description automatically generateda decrease in the proportion of people reporting their health as very bad, to 1.2% (715,000) in 2021 (from 1.4%, 716,000 in 2011)”

*Figure 1 (Source:* [*ons.gov.uk*](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/generalhealthenglandandwales/census2021)*)*

**General Health in Leicester**

*Figures 2 & 3: A column graph and pie chart illustrating the general health of Leicester respondents from the 2021 Census data.*

Based on the above figures showing general health reported by Leicester residents in 2021, out of 368,571 usual residents, a majority (81%) described their general health as either “very good” (48.8%), or “good” (33.5%). While 12.5% described their health as “fair”. A smaller proportion of residents described their health as “bad” (4%) or “very bad” (1.2%).

Since the previous Census 2011, overall, the figures have improved slightly, with an increase of respondents reporting “very good health”, from 44.9% in 2011, to 48,8% in 2021. The proportion of Leicester residents describing their health as "very bad" decreased from 2.0% to 1.6%, while those describing their health as "bad" fell from 6.1% to 5.2%.

The following figures show these changes with figures of 2011 for comparison over the last decade.

|  |  |  |
| --- | --- | --- |
| **General Health in Leicester in 2021, compared with 2011.** | | |
|  | **2021** | **2011** |
| **Very Good Health** | 179,719 | 148,108 |
| **Good Health** | 123,425 | 117,551 |
| **Fair Health** | 46,156 | 44,278 |
| **Bad Health** | 14,749 | 14,972 |
| **Very Bad Health** | 4,522 | 4,930 |

*Figure 4: Table reporting the general health of residents in Leicester in 2021 versus 2011 Census data.*

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*Figure 5 (Source: ONS.gov)*

In comparison, the 2001 census data included three categories for respondents to describe their general health: “good”, “fair” and “not good” health. The “very good”, “bad” and “very bad” health categories were not included in the 2001 census. However, the “not good” health category was split into “bad” and “very bad” health in the 2011 and 2021 census. Therefore, the “not good” health category was discontinued after the 2001 census. We have combined the number of respondents who described their general health as “bad” and “very bad” in the 2011 and 2021 census to estimate how many respondents had “not good” health during the 2011 and 2021 census. This will allow us to compare the number of respondents who described their general health as “good”, “fair” and “not good” between the 2001, 2011 and 2021 census data.

Between 2001 to 2021, the number of respondents who reported having “good” health has gradually declined by 32.3% from 65.8% in 2001 to 35.6% in 2011 and 33.5% in 2021. Moreover, figure 7 shows there is a decline in the number of respondents who have “fair” health has declined by 11.6% between 2001 and 2021. In contrast, the number of respondents who reported their general health as “not good” increased by 35.9% from 10.1% in 2001 to 49.1% in 2011, before declining slightly to 46% in the 2021 census data.

*Figure 6: A bar graph illustrating the general health of Leicester residents reported in the 2001, 2011 and 2021 Census.*

**Local Authority Breakdown – Leicestershire**

Next, we analysed the general health of 2021 Census respondents across Leicestershire to analyse the general health of Leicestershire residents living in Leicester, Blaby, Charnwood, Harborough, Hinckley and Bosworth, Melton,

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*Figure 7. Percentage of people with varying levels of general health across Leicestershire in 2021, standardised by age.*

North-West Leicestershire and Oadby and Wigston.

There was little difference in general health between local authorities in Leicestershire in 2021. The percentage of people with ‘Very Good Health’ varied between 43% (Leicester) and 53% (Harborough). ‘Good health’ varied between 33-36%, ‘Fair Health’ between 11-16%, ‘Bad health’ between 3-5%, and the percentage of residents with ‘Very Bad Health’ was around 1-2% for all local authorities.

We were also interested in analysing the non-age-standardised general health data of Leicestershire residents between the 2021 and 2011 Census.

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*Figure 8a: Local Authority Breakdown 2021 and Figure 8b: Local Authority Breakdown 2011*

As shown in the above figure 8a, it contains the local authority breakdown of general health data in each area of Leicestershire. The people in Harborough have the highest ‘very good’ health respondents with a percentage of 51.5% in 2021. Contrary to that Oadby and Wigston have the lowest number of respondents reporting they have ‘very good’ health with a percentage of 46%. In contrast the 2011 data shown the figure 8b illustrates that Harborough had the highest number of respondents reporting ‘very good health’ with a percentage of 50.9%, whereas Leicester had the lowest number of respondents who reported to have very good health percentage at 44%. Between figure 8a and 8b, Leicester had the highest number of respondents reporting very bad health with a percentage of 1.49% in 2011, which declines to 1.2% in 2021.

**Regional and National Comparison**

We also analysed the general health of 2011 and 2021 Census data respondents in Leicester to respondents in nearby cities and towns and also Inner London in Figures 9a and 9b.

In all five areas, the majority of 2021 and 2011 census respondents reported they had ‘very good’ health, and there was a steady decline in the number of 2011 and 2021 census respondents who reported worsening general health. Therefore, the lowest numbers of respondents reported to have ‘bad’ and ‘very bad’ health in the 2021 and 2011 census. Between the 2011 and 2021 census, there has been a rise in the number of respondents who are reporting ‘good’, and ‘fair’ health.

*Figure 9a: General health of respondents across five areas from 2011 Census data.*

*Figure 9b: General health of respondents across five areas from 2021 Census data.*

This may be due to a rise in the overall UK population as well as a rise in the aging population between 2011 and 2021 .

**2. Disability**

Respondents reported whether they had any physical or mental conditions expecting to last 12 months or more, and whether these limit their day-to-day activities. The number of people who assessed their day-to-day activities as limited by long-term physical or mental health conditions or illnesses and are considered as a disability. This definition of a disabled person meets the harmonised standard for measuring disability and is in line with the Equality Act (2010).

It is important to note that here are higher numbers of people in older age groups reporting they have a disability. However, this is because older people are more likely than younger people to be disabled.

**England Disability Held Overview**

Source: [ons.gov.uk](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/disabilityenglandandwales/census2021)

“In 2021, across both England and Wales, the proportion of disabled people was 17.8% (10.4 million). The proportion of people that are disabled has decreased 1.7 percentage points from 2011, when it was 19.5% (10.0 million).

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*Figure 10 (Source: ONS.gov)*

The proportion of disabled people decreased in every region of England. The region with the highest proportion of disabled people was the Northeast (21.2%, 567,000), as it had been in 2011 (22.8%, 562,000). This was followed by the Northwest (19.8%, 1.4 million) and Yorkshire and The Humber (18.9%, 1.0 million). Meanwhile, London (15.7%, 1.2 million) and the Southeast (16.1%, 1.5 million) had the lowest proportions of disabled people.

The local authorities with the highest proportions of disabled people in 2021 included Blackpool (24.7%), at 7.0 percentage points above the national estimate, and Liverpool (23.8%), at 6.1 percentage points above the national estimate.”

**Disability in Leicester**

The table below shows the respondents in Leicester who reported whether they are disabled and whether their disability affects their day-to-day activities during the 2011 and 2021 Census. During the 2021 census, Leicester had 368,571 usual residents, of which 79.9% reported not having a long-term physical or mental health condition compared to 4.62% of usual residents who reported having a long-term illness or condition that didn’t affect their daily activities and 6.97% of residents whose disability affected their daily activities significantly. Moreover, Leicester saw the East Midlands' second-largest percentage-point fall in the proportion of residents who were identified as being disabled and limited a lot (from 11.5% in 2011 to 8.8% in 2021). These are age-standardised proportions.

|  |  |  |
| --- | --- | --- |
| **Disability in Leicester in 2021, compared with 2011.** | | |
|  | **2021** | **2011** |
| **Not disabled - No long-term physical or mental health condition** | 294,394 (79.9%) | 272,702 |
| **Not disabled - With a long-term illness or condition, but day-to-day activities not limited** | 17,029  (4.62%) | 29,522 |
| **Disabled – Day-to-day activities limited a lot** | 25,692 (6.97%) | 27,615 |

*Figure 11: Number of respondents who reported having a disability and the impact of their disability on daily activities of living between 2021 and 2011.*

**Regional and National Comparison**

Next, we compared the prevalence of disability reported in the 2011 Census for Leicester to four other areas in the UK, mainly towns and cities near to Leicester and Inner London\* boroughs. We found that the prevalence of disability reported in Leicester during the 2011 Census (17.4%) was similar to other major neighbouring towns and cities including Derby (18.6%), Nottingham (18.2%) and Birmingham (18.4%).However there were notably lower levels of disability reported in Inner London in the 2011 Census data at 13.6%. However, most respondents in all five areas included in Figure 12 reported that their disability did not affect their day-to-day activities. In contrast, there were a smaller number of respondents in each of the five areas who reported that their disability impacted their day-to-day activities. In Figure !!, similar numbers of respondents reported that their disability has a profound negative impact on their ability to do daily activities as the number of respondents who reported their disability has a limited impact on their life.

*Figure 12: Percentage of respondents who reported having a disability and the impact of their disability on their daily activities during the 2011 Census across five areas.*

Whereas Figure 13 below indicates that there has been a slight reduction in the number of respondents who are not disabled across all five areas in the 2021 Census compared to the 2011 Census. This is associated with a rise in disability that affects daily activities of living across all five areas reported in the 2021 Census, with the greatest rise being reported in Inner London boroughs in comparison to the 2011 Census data.

In the 2021 Census data 15.5% of respondents in Leicester,17.3% of respondents in Birmingham,19.7% of respondents in Inner London boroughs, 18.6% of respondents in Nottingham, and 18.7% of respondents in Derby reported having a disability which impacts their daily activities. Interestingly there hasn’t been a great change in the severity of disability and there are similar percentages for the limiting impact of the disability on daily activities between the 2011 and 2021 Census data. This rise in disability, particularly in the number of respondents who have a disability that limits their daily activities a little may be attributed to our aging UK population.

*Figure 13: Percentage of respondents who reported having a disability and the impact of their disability on their daily activities during the 2021 Census across five areas.*

**Local Authority Breakdown – Leicestershire**  
We also analysed the percentages of respondents living in Leicestershire who reported that they have a disability in the 2021 Census data, which slightly or significantly limited their ability to do daily activities of living.

In figure 14, Harborough had the lowest percentage of people disabled under the Equality Act in 2021 at 15.1%, of which, 5.4% were limited a lot in their day-to-day activities, and 9.6% were limited a little. This was followed by Leicester with a percentage of 15.5 disabled under the Equality Act, of which, 7% of respondents reported that their day-to-day activities were limited a lot, with 8.5% limited a little. In comparison, Hinckley & Bosworth and North-West Leicestershire had the highest percentage of residents classed as disabled under the Equality act at 17.5%, with 6.8% of respondents reporting that their day-to day activities were limited a lot.

We also compared disability across Leicestershire that was reported in the 2011 Census data across different areas of Leicestershire (figure 15). We found that there were comparable levels of disability being reported in the 2011 Census across Leicestershire which was: 15.8% in Blaby, 15.6% in Charnwood, 14.5% in Harborough, 17.0% in Hinckley and Bosworth, 15.6% in Melton, 18.1% in North West Leicestershire and 17.3% in Oadby and Wigston. There were more respondents living in Leicestershire with a disability that had a slightly limited their daily activities rather than having a major limiting impact on their daily activities of living during the 2011 Census.

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*Figure 14 Percentage of people disabled under the Equality Act in Leicestershire in 2021, and how their activities are limited.*

*Figure 15: Percentage of respondents who reported a disability across Leicestershire in the 2011 Census data*

1. **Unpaid Care**

An unpaid carer may look after, give help or support to anyone who has long-term physical or mental ill-health conditions, illness or problems related to old age. This does not include any activities as part of paid employment, and this help can be within or outside of the carer's household.

**England & Wales Unpaid Care Overview**

Source: [ons.gov.uk](https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/internationalmigration/bulletins/internationalmigrationenglandandwales/census2021)

“In England and Wales, an estimated 51.4 million usual residents aged 5 years and over did not provide unpaid care.

The estimated 5.0 million people who answered "Yes" selected the category which best corresponded to the number of hours of unpaid care they provided in a typical week. Of all usual residents in England and Wales aged 5 years and over, there were an estimated:

* 1.8 million people who provided 9 hours or less of unpaid care a week
* 678,000 people who provided 10 to 19 hours of unpaid care a week
* 483,000 people who provided 20 to 34 hours of unpaid care a week
* 552,000 people who provided 35 to 49 hours of unpaid care a week

In both England and in Wales, unpaid carers most commonly provided either the lowest (9 hours or less) or the highest (50 or more hours) amount of unpaid care possible.

A larger proportion of usual residents aged 5 years and over provided any amount of unpaid care in Wales (10.5%) than in England (8.9%) in 2021. The proportions have decreased since 2011 (when they were 13.0% and 11.3% respectively). Comparisons between 2011 and 2021 data for the three categories of unpaid care show:

* decreases in the proportions who provided 19 hours or less of unpaid care a week in both England (from 7.2% in 2011 to 4.4% in 2021) and in Wales (from 7.4% in 2011 to 4.7% in 2021)
* increases in the proportions who provided between 20 and 49 hours of unpaid care a week in England (from 1.5% in 2011 to 1.8% in 2021), and in Wales (from 1.9% in 2011 to 2.2% in 2021)
* the proportions of people who provided 50 or more hours of unpaid care a week remained similar in England (2.7% in 2011, 2.7% in 2021) and in Wales (3.7% in 2011, 3.6% in 2021)

**Unpaid Care in Leicester**

Figure below indicates that there has been an decline in the number of respondents receiving weekly unpaid care in Leicester between the 2011 and 2021 Census data. Notably, the percentage of people (aged five years and over) providing up to 19 hours of weekly unpaid care in Leicester decreased by 2.8%. In 2021, 3.4% of Leicester residents (aged five years and over) reported providing up to 19 hours of unpaid care each week. This figure decreased from 6.2% in 2011. These are age-standardised proportions.

In 2021, just over 1 in 50 people (2.2%) reported providing between 20 and 49 hours of unpaid care each week, compared with 2.0% in 2011. The proportion of Leicester residents (aged five years and over) that provided at least 50 hours of weekly unpaid care decreased from 3.2% to 3.0%.

This area had the region’s lowest proportion of people (aged five years and over) providing up to 19 hours of weekly unpaid care. Boston had the East Midlands' next lowest proportion of people (aged five years and over) providing up to 19 hours of weekly unpaid care (3.8%), while Gedling had the region's highest proportion (5.6%).

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*Figure 16: Source: ONS.gov*

**Regional and National Comparison**

*Figure 17: Number of hours of unpaid care provided to 2011 Census respondents across five areas*

We compared the number of hours of weekly unpaid care that respondents of the 2011 Census between Leicester, Inner London boroughs and towns and cities that are close to Leicester. Across all five areas most respondents did not receive unpaid care on a weekly basis, and the small number of hours of unpaid care given in all five areas were similar for each of the five areas. In all five areas, less than 5% of respondents received more than 20 hours of unpaid care a week.

**Limitations & Further information**

One of the major limitations of the UK Health Census data is that the categories used in the Census have changed between all three censuses, which makes very difficult to compare health data trends using the same categories. For example, the classification of illness has changed over the past 30 years from ‘good health’, ‘fairly good health’, and ‘not good health’ which was originally used in the 2001 Census, to ‘very bad, bad, fair, good and very good health’. Moreover we are confident that some of the rise in respondents reporting less than ‘very good health’ between 2011 and 2021 is due to an aging population, in addition to a rise in the UK general population between the 2011 and 2021 Census.

Therefore, this negatively affects the comparability of the health data and leads to us manipulating health data categories so that we can create comparable health Census data categories across all three decades from 2001-2021. This may be driven by changes in legislation such as the Equality Act 2010 which has changed the way we classify disability and also possibly made respondents more willing to disclose a disability which may affect an individual's daily living due to greater confidence that the Equality Act protects individuals from discrimination based on protected characteristics such as and including disability.

Useful links:

1. The ONS website contains information regarding the census, including:
   1. [Visualisation of changes in Leicester - 2021](https://www.ons.gov.uk/visualisations/censusareachanges/E06000016/)
   2. [Quality and methodology for Census 2021](https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/methodologies/qualityandmethodologyinformationqmiforcensus2021)
   3. [Terms, definitions, and answers to frequently asked questions](https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/internationalmigration/methodologies/longterminternationalmigrationfrequentlyaskedquestionsandbackgroundnotes#migration-terms-and-definitions)
   4. [Future publication plans for 2023](https://www.ons.gov.uk/census/aboutcensus/censusproducts/analysis/internationalmigrationanalysisplans)
   5. [Census Maps](https://www.ons.gov.uk/census/maps)
   6. [Health, disability and unpaid care quality information for Census 2021](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/methodologies/healthdisabilityandunpaidcarequalityinformationforcensus2021)
2. For 2011 census data:
   1. Leicester government report on
   2. [2011 census data](https://www.nomisweb.co.uk/sources/census_2011)