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# Royal Geographical Society Environment & Society Forum

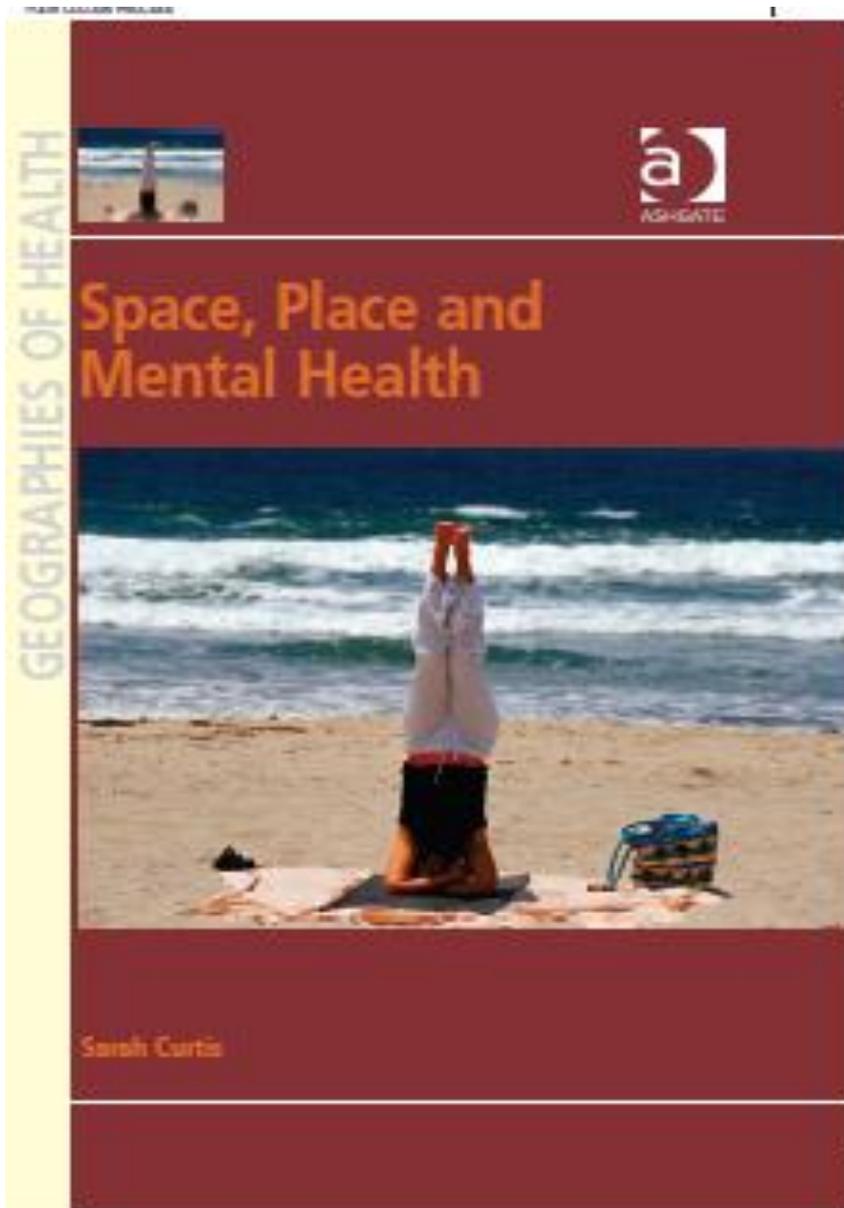
*What keeps the UK healthy?  
Geographical perspectives on  
health and employment*

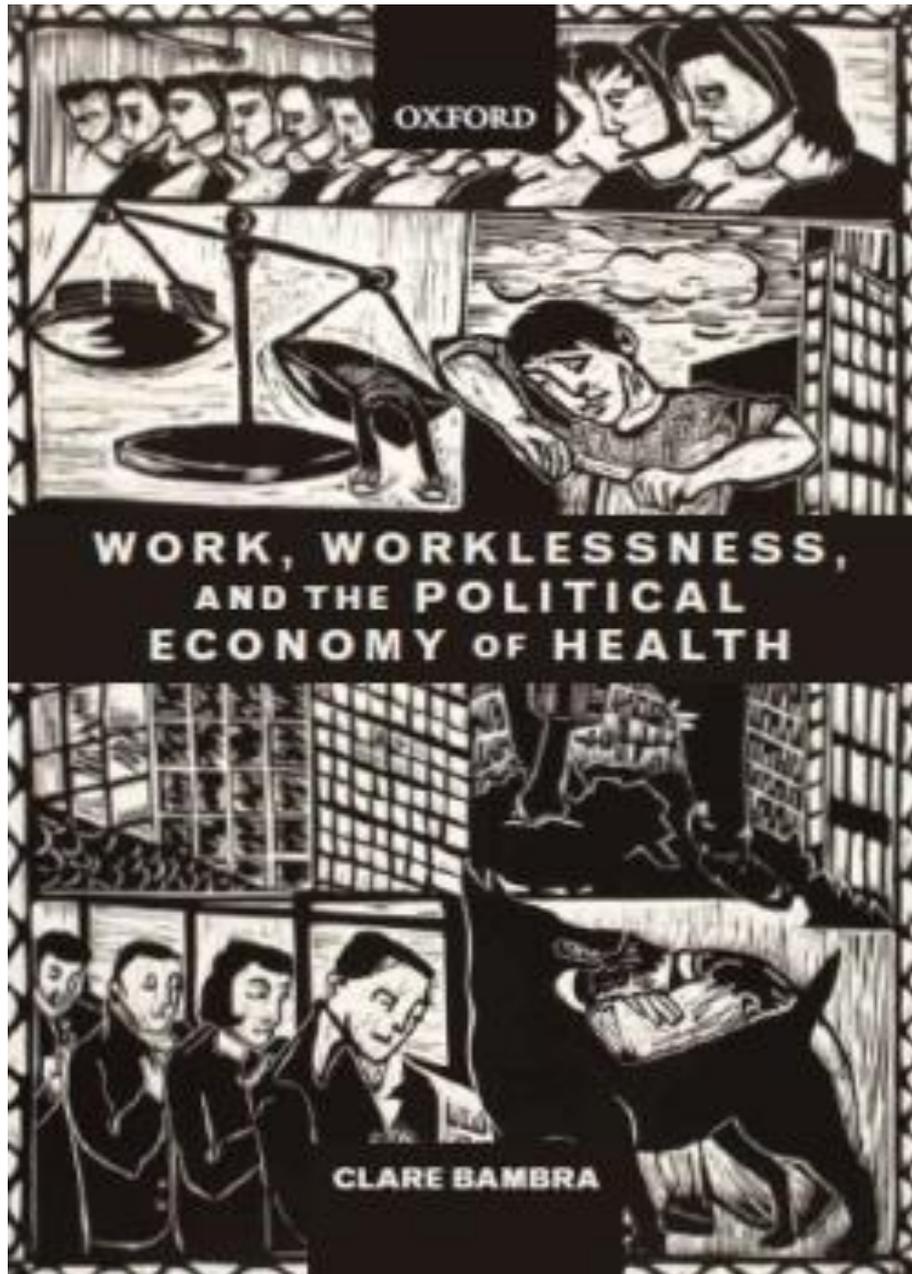


## Space, Place and Health:

- Place matters for (physical and mental) health
- Places and people *interact* over time in ways that are important for health

(e.g. book by Sarah Curtis on *Space, Place and Mental Health*)





...Also...

Employment  
(work & worklessness)  
matters for health:

Eg. Clare Bamba,  
*Work, Worklessness  
and the Political  
Economy of Health*

# Why employment in local communities are important for health of all members of the community...



**Durham Miner's Gala**

- income levels and community resources
- social support through work places
- sense of purpose and 'structure' to life
- reputation and collective sense of identity

**Long term conditions in local labour markets may be especially important for health in communities....**

**..can influence health over the life-course.**

... Two examples from  
health geography...

*health and long term conditions  
in local labour markets*

**Mylene Riva and Sarah Curtis**

# Example 1

**Trends in local employment rates  
(relative to national average)**

**1981-2001**



**predict death/illness for people in  
the local population 2001-2007**

# The information used....

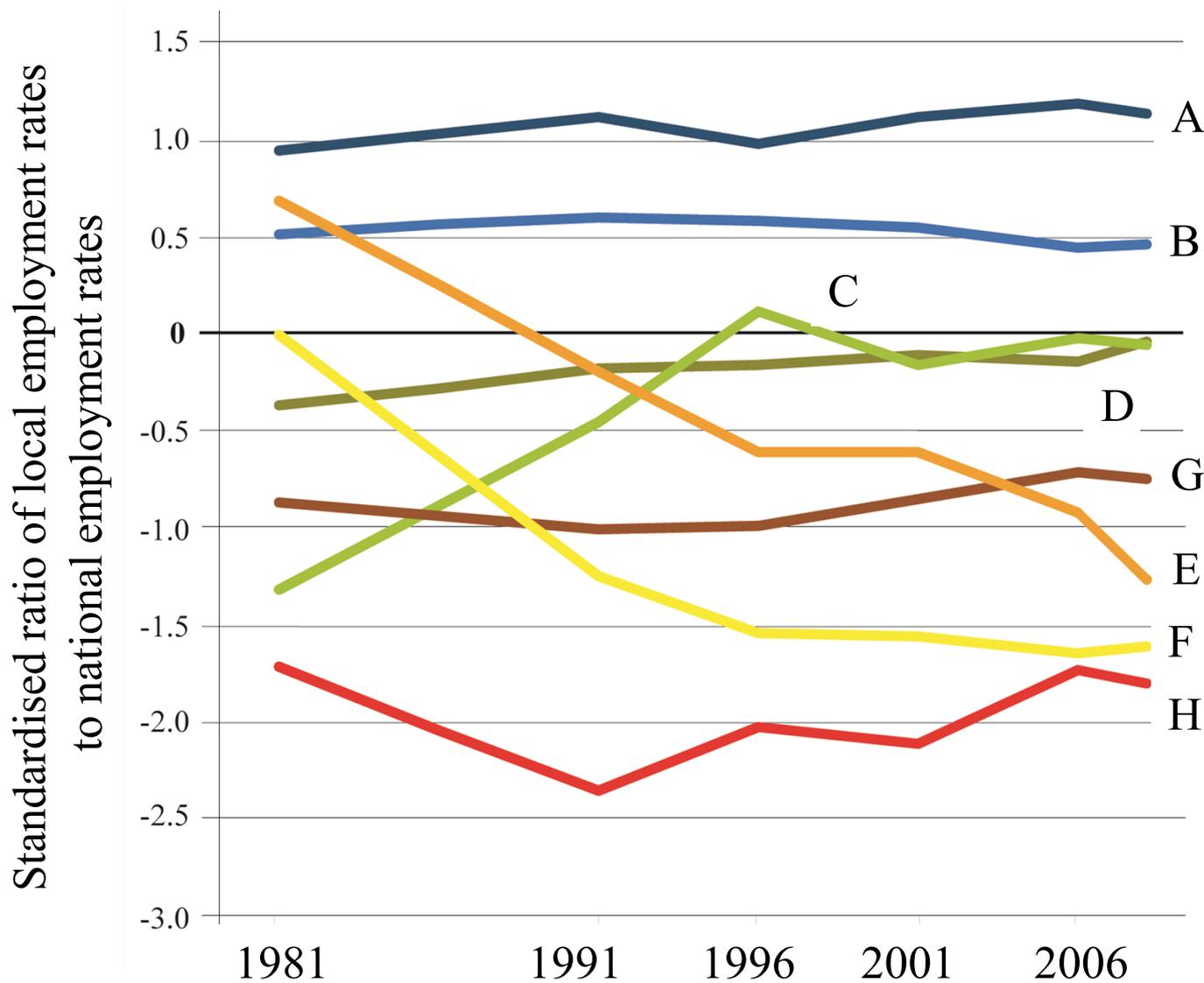
- Office of National Statistics Longitudinal Study
  - 207,959 people aged  $\geq 16$  years and older in 1981
  - Recorded in the 1981, 1991 and 2001 popn Censuses
- **Measure of health:** did the person:
  - Die from any cause 2001-2007 ? (**Mortality**)
  - Report a limiting long term illness (LLTI) in 2001 (**Morbidity**)
- Characteristics of each person, measured in 1981, that might relate to their health (*strictly anonymized data analysed in a secure data laboratory*)
  - Sex, age, ethnic group, household composition, economic activity, having access to a car, housing tenure, residential mobility

# Linking data on people to information on employment trends in their community

- Trends in employment rates 1981-2008 relative to national average for Local Authority Districts (LADs; n=352)\*;
- Analysis to identify groups of areas with similar employment trends
- Linked to information on individual people.

(\*Data from the Decennial Census and the Labour Force Survey.)

# local authority districts grouped by trends in employment rates (compared with national average)



## 8 groups:

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LADs per  
group

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A=46

B=131

C=20

D=64

E=14

F=16

G=40

H=21

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Local Authorities grouped  
According to trends in  
employment rate relative to  
the National average

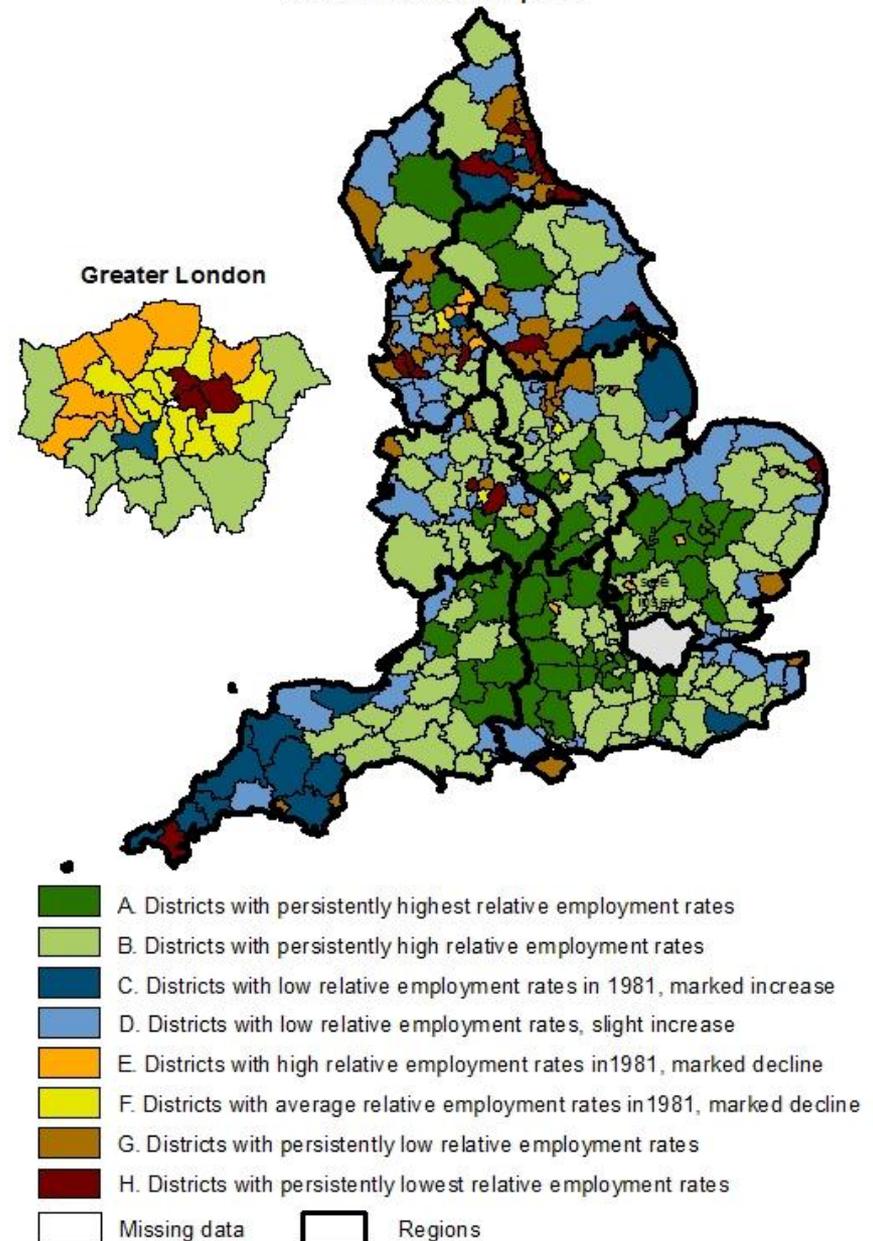
**Always relatively High ( A )**

**Improvement from low  
initial level in 1981 ( C )**

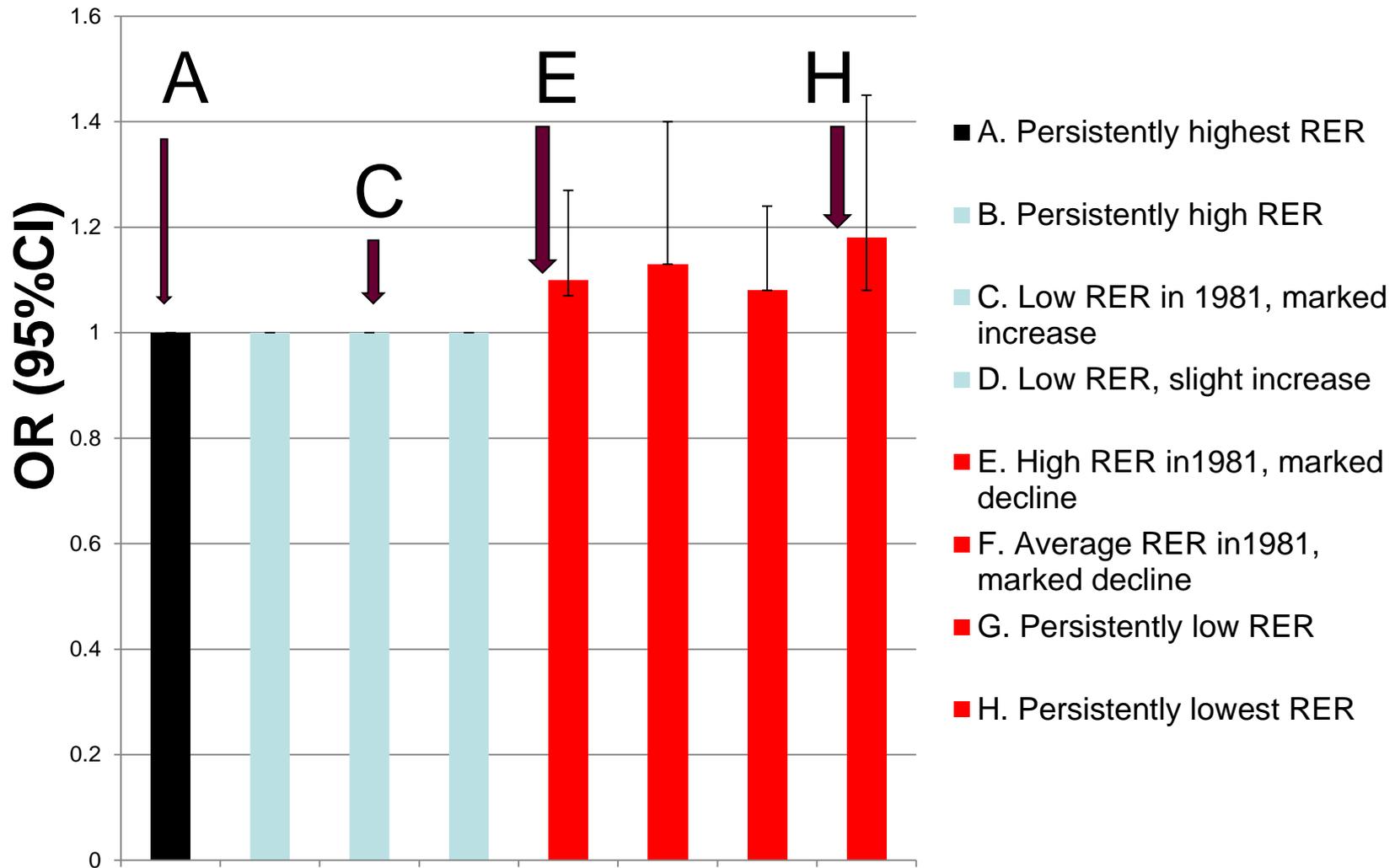
**Deterioration from initial  
level in 1981 ( E )**

**Always relatively low ( H )**

Trajectories of relative employment rates at the Local Authority District level  
over the 1981 to 2008 period

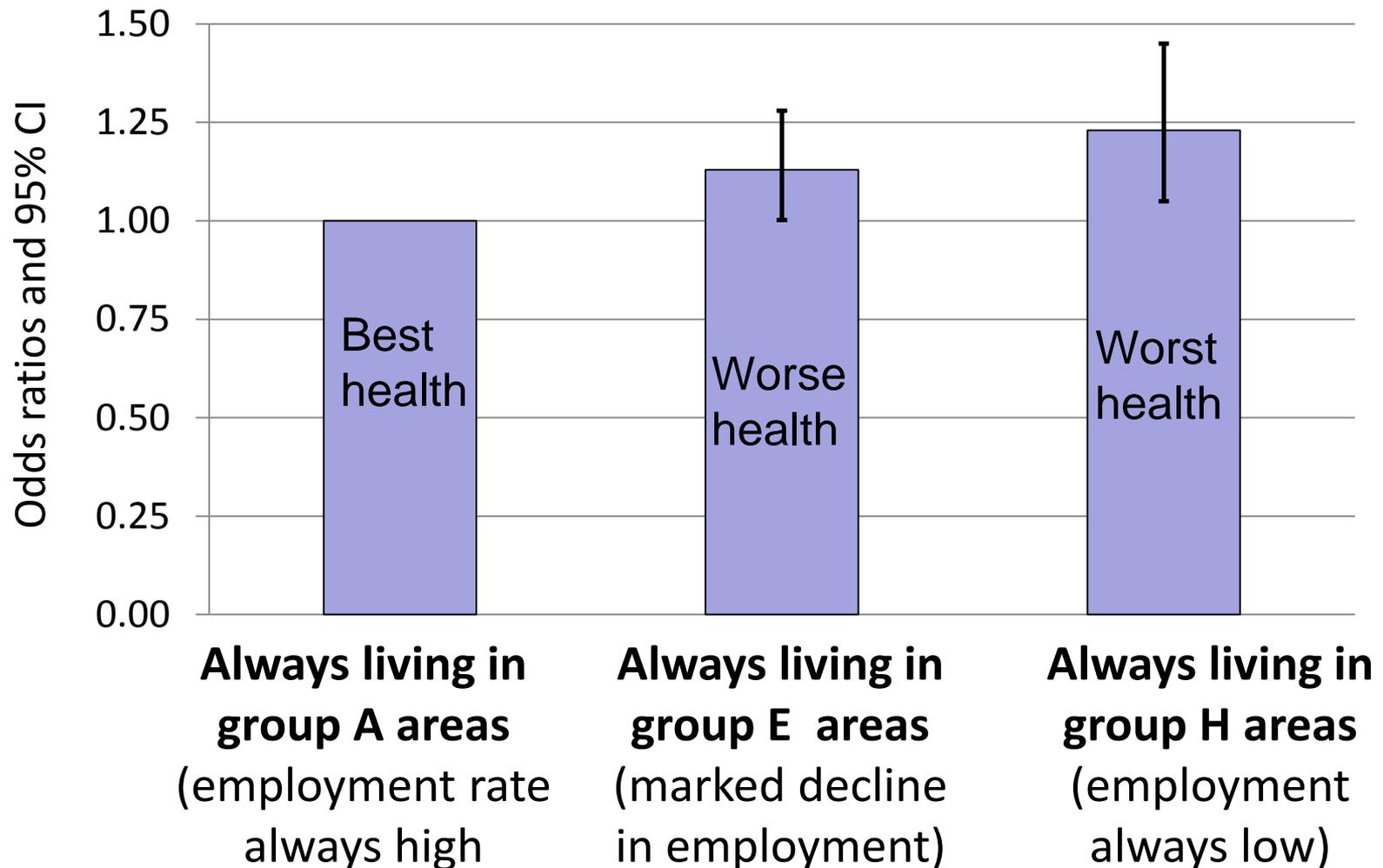


# Risk of death higher for people living in area groups E,F,G,H, than in area group A



(allowing for individuals' socio-demographic characteristics in 1981 and residential mobility 1981-2001)

# Reporting long term illness: those always living in areas classed 'E' or 'H' are more likely to report an illness than residents of group 'A'



# Policy implications

- **Especially poor health was found for people in our sample living in areas where employment was persistently low over time.**
- **These are areas with especially ‘deep seated’ economic and health disadvantage. To ‘reverse’ these conditions is likely to require intensive and sustained policies and interventions.**
- **Health disadvantage was less pronounced for people in areas with low employment levels in 1981 but showing marked improvement over time**

**Example 2: Is there a 'legacy of ill-health' in 'ex-coalfield' areas?**

**The mining industry has suffered major decline in the last 20 years.**

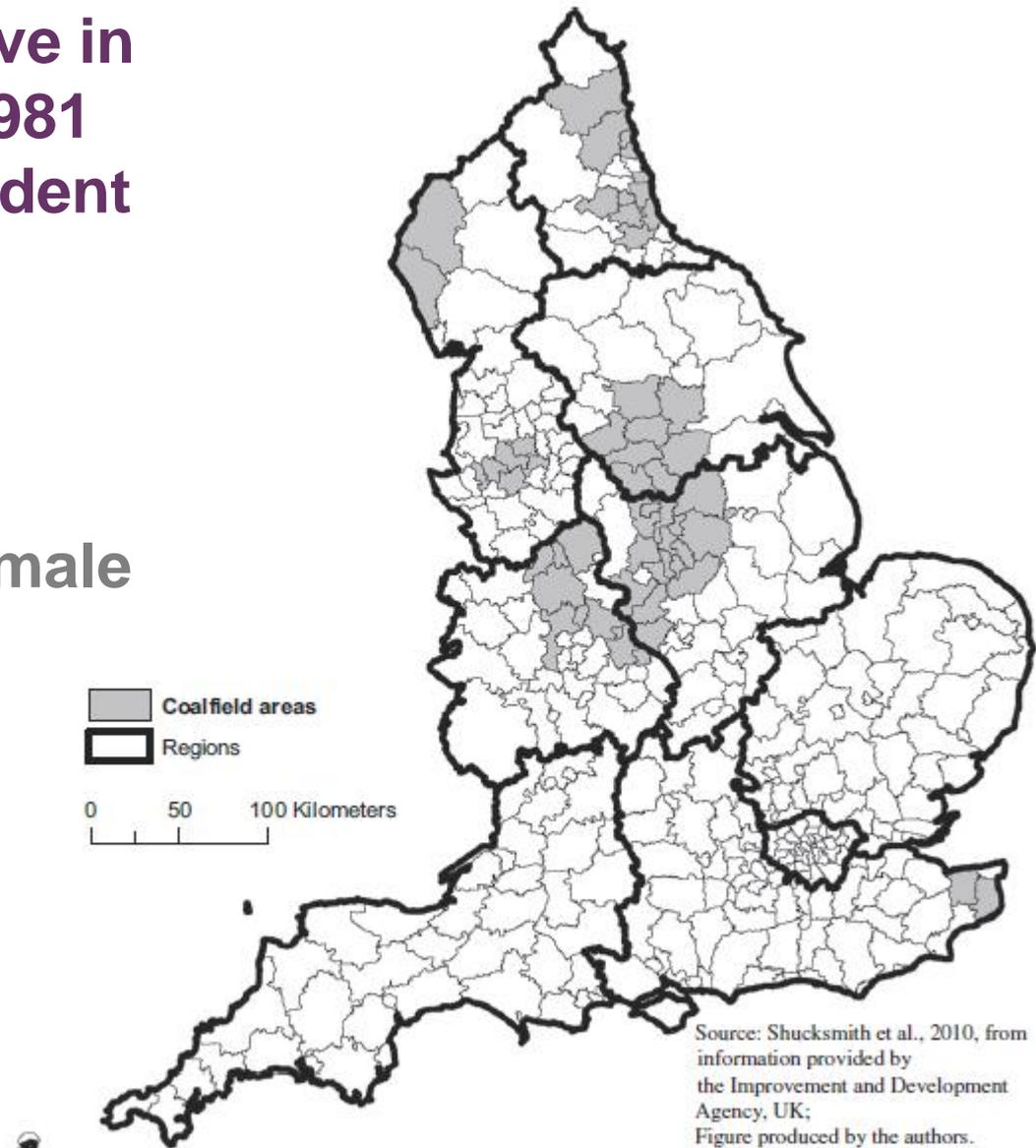
**Do residents in 'ex-coalfied' areas report worse health, allowing for their other characteristics?.**

# The information used

- **Data for 26, 097 people** answering the national Health Surveys for England, 2004 - 2006
- **Measures of health** (based on survey answers):  
did the person:
  - Report a limiting long term illness?
  - Have a common mental disorder?
- **Characteristics of each person**, that might relate to their health (*strictly anonymized data*)
  - Sex, age, ethnic group, marital status, social class, smoking and drinking behaviour

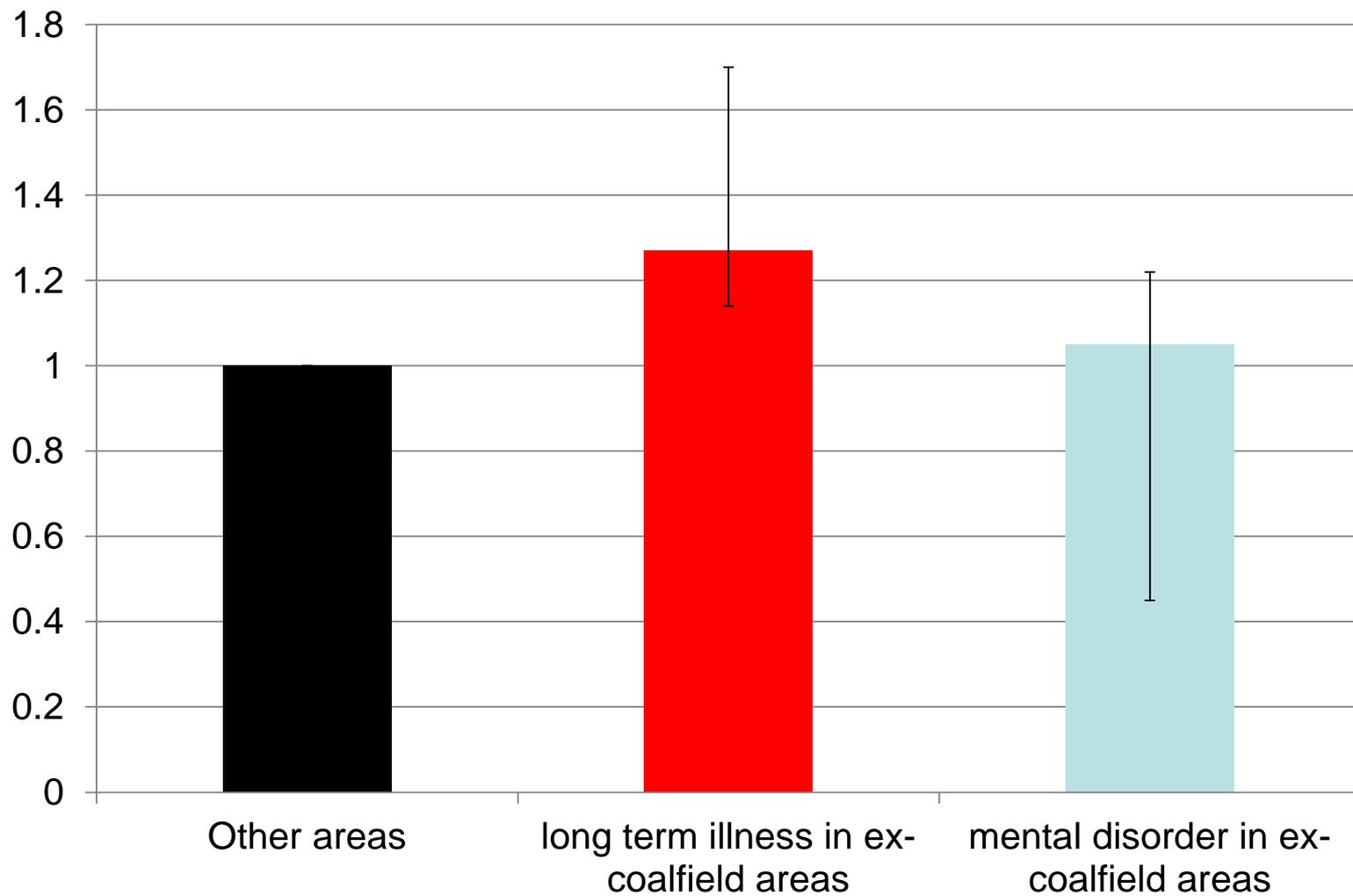
**Does the person live in an area which in 1981 was heavily dependent on coal mining?**

**(mining employed more than 10% of male workforce in 1981)**



**Fig. 1.** Local Authority Districts in England characterised as former coalfield areas ( $n=55$ ).

**Allowing for individual's personal characteristics, the risk of long term illness was greater for those in coalfield areas, but the risk of mental disorders was no different**



Also....

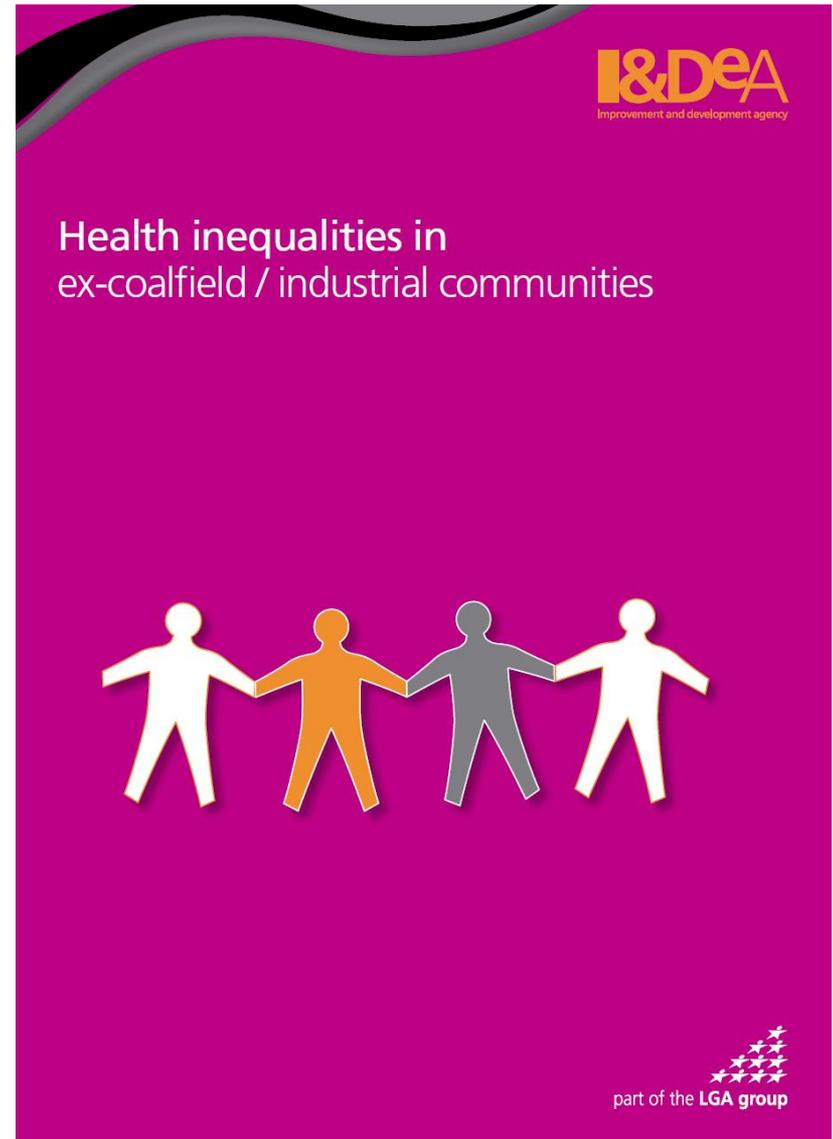
the risks of long term illness in  
ex-coalfield areas varied:-

greatest in the most rural  
'ex-coalfield' areas.

## Policy implications:

**This study of ex-coalfields was reported to the Improvement and Development Agency**

**The study shows that not all aspects of health are poor in coalfield areas and suggests that action in local areas can help to improve health**



Shucksmith, J., Carlebach, S., Riva, M., Curtis, S., Hunter, D.J., Blackman, T., and Hudson, R. (2010) *Health inequalities in ex-coalfield / industrial communities*. A report to the Improvement and Development Agency for Local Government and the Department of Health IDeA/DH, London

<http://www.idea.gov.uk/idk/aio/18036469>

## **Key messages:**

**Employment conditions at the level of whole communities are important for health**

**Where economic regeneration boosts healthy employment, this may benefit health for the whole community.**

**Area regeneration programmes are important especially in areas where employment rates are low.**

# This research is published as:

Riva, M. And Curtis, S. (2012) Long term local area employment rates as predictors of individual mortality and morbidity: a prospective study in England spanning more than two decades.

*Journal of Epidemiology and Community Health*, 66:10  
919-926

Riva, M., Terashima, M., Curtis, S., Shucksmith, J., and Carlebach, S. (2011) Coalfield health effects: variation across former coalmining communities in England. *Health & Place* 17, 2, 588-597

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- Census output is Crown copyright and is reproduced with the permission of the Controller of HMSO and the Queen's Printer for Scotland.
- The authors alone are responsible for the interpretation of the data.

Thank you!

# Risk of illness greater than in area group A, for all other groups, especially G and H.

