

Health baseline

Introduction

This report sets out the health baseline which will be used to determine the overall health and wellbeing of the population that interacts with the Proposed development at Hendre Lakes. The study area includes the wards that are in the immediate vicinity of the site boundary and includes Trowbridge (W0500092), Pontprennau/Old St Mellons (W05000900), which are in Cardiff and Marshfield (W05000844) which is in Newport (see Figure 12.1). Where available, data is presented at ward level. Where data is not available at this scale, or it is also relevant to include a wider population, it is presented for Cardiff as a whole as the site sits within Cardiff and is closer to the main population centres of the city.

Population profile

ONS mid-year population estimates (2018) show that Cardiff has a population of 364,200¹. The population within the study area was 21,305 in 2013² split between the wards as Trowbridge (10,657), Pontprennau (6,589) and Marshfield (4,059). Table 1 shows the age profile in the local area. Both Trowbridge and Pontprennau have relatively higher populations of those aged 0-15, whilst Marshfield has a higher population of those aged 65+ compared with the other wards and Cardiff, but in line with the Welsh average.

Table 1: Age profile

| Age band | Trowbridge | Pontprennau | Marshfield | Cardiff | Wales |
|--------------|------------|-------------|------------|---------|-------|
| 0-15 | 25% | 22% | 19% | 18% | 19% |
| 16-64 | 63% | 66% | 63% | 67% | 63% |
| 65+ | 12% | 12% | 17% | 14% | 18% |

According to the 2011 census 89% of people within the study area describe themselves as white, 3% as mixed ethnicity, 4% as Asian, 2% as black and 2% as 'other'. This is similar to the ethnic group split across Cardiff.

Deprivation

The Welsh Index of Multiple Deprivation (2019) (WIMD) provides a measure of relative deprivation at the small area level based on Lower Super Output Area (LSOA). The WIMD is currently made up of eight separate types (domains) of deprivation: income, employment, health, education, access to services, community safety, physical environment and housing. These domains are combined to also provide an indication of overall deprivation.

The study area includes a number of LSOAs which are listed below in Table 2 along with their ranking (out of 1909). The LSOA in which the project site sits is Trowbridge 6 (Figure 12.2). This table also shows the overall deprivation score, indication that in general the areas around the site are not very deprived, although pockets of deprivation do exist, notably in Trowbridge 4.

¹ Nomis (ONS) Labour Market Profile for Cardiff. Found at: <https://www.nomisweb.co.uk/reports/lmp/la/1946157397/report.aspx#tabrespop> [Accessed on 03/10/19].

² Nomis (ONS) Labour Market Profile for Trowbridge, Pontprennau and Marshfield.

Table 2: WIMD 2019³ overall deprivation score

| LSOA | WIMD rank ¹ | WIMD score ² |
|--------------|------------------------|-------------------------|
| Marshfield 2 | 1563 | 5 |
| Marshfield 3 | 1522 | 5 |
| Marshfield 4 | 1131 | 5 |
| Trowbridge 1 | 1342 | 5 |
| Trowbridge 4 | 61 | 1 |
| Trowbridge 6 | 1232 | 5 |
| Trowbridge 9 | 402 | 2 |

¹ Where 1 is most deprived and 1909 is the least deprived
² Where 1 is most deprived 10% of LSOAs and 5 is the least deprived 50%

Health and wellbeing

The following baseline data presents the health and wellbeing status of the local population. WIMD and census data is provided at smaller geographical levels, but the majority of health information presented covers Cardiff as it is not available at the more granular level of the study area (i.e. Trowbridge, Pontprennau/Old St Mellons and Marshfield wards) data. Newport has not been included because of the greater distance that the main conurbations are from the project site.

Health deprivation

The health deprivation domain measures the lack of good health, using seven indicators such as long term illnesses, death rates, birth weights and obesity levels. Table 3 shows that generally the population of the local area is healthy, with the majority of LSOAs in the 50% least deprived areas. Trowbridge 4 however

| LSOA | WIMD rank ¹ | WIMD score ² |
|--------------|------------------------|-------------------------|
| Marshfield 2 | 1813 | 5 |
| Marshfield 3 | 1283 | 5 |
| Marshfield 4 | 1014 | 5 |
| Trowbridge 1 | 1040 | 5 |
| Trowbridge 4 | 28 | 1 |
| Trowbridge 6 | 1117 | 5 |
| Trowbridge 9 | 591 | 4 |

¹ Where 1 is most deprived and 1909 is the least deprived
² Where 1 is most deprived 10% of LSOAs and 5 is the least deprived 50%

has much higher levels of health deprivation, within the 10% most deprived areas in Wales.

Table 3: WIMD health domain score

³ Welsh Index of Multiple Deprivation (WIMD) 2019. Welsh Government. Found at: <https://wimd.gov.wales/explore?lang=en#domain=overall&z=12&lat=51.4998&lng=-3.1593>

Self-evaluation of health status

Within the Census 2011 people were given an opportunity to self-evaluate their health status. Within the study area, 94% reported health that was either fair, good or very good, whilst 5% reported bad health and 2% reported having very bad health. This is very similar to the health reported across Cardiff as a whole.

Life Expectancy and Mortality

Over the period from 2008-2012, the life expectancy for both males and females across Wales has increased. This pattern is also reflected in Cardiff, where life expectancy for males has increased from 77.8 to 78.2, and for females from 81.9 to 82.7. In Newport, the life expectancy for males is seen to increase from 2008-2012, whereas for females the life expectancy is not seen to change. Life expectancy in Cardiff and Newport for both males and females is higher than the average across Wales, as shown in Table 6.

Table 6 Life expectancy (Source: StatsWales)

| | | 2008-2010 | 2009-2011 | 2010-2012 |
|---------|---------|-----------|-----------|-----------|
| Wales | Males | 77.6 | 78.0 | 78.2 |
| | Females | 81.8 | 82.2 | 82.2 |
| Cardiff | Males | 77.8 | 78.2 | 78.2 |
| | Females | 81.9 | 82.4 | 82.7 |
| Newport | Males | 76.9 | 77.7 | 77.9 |
| | Females | 82.1 | 82.2 | 82.1 |

The all-cause mortality rate is lower in Cardiff than across Wales, whereas the mortality rate is higher in Newport than across Wales. The mortality rate in Cardiff is 1,025.1 deaths per 100,000 population compared with 1,045.7 per 100,000 population for Wales and 1118.6 per 100,000 population in Newport. The mortality rate has decreased in both Cardiff and Wales over the period 2010-2016 however is seen to fluctuate in Newport, as shown in Table 4.

Table 4 All-cause mortality rate per 100,000 population (Source NHS Wales Informatics Service, Health Maps Wales)

| | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 |
|---------|---------|---------|---------|---------|---------|---------|---------|
| Wales | 1,080.0 | 1,034.8 | 1,050.8 | 1,059.8 | 1,016.9 | 1,064.4 | 1,045.7 |
| Cardiff | 1,059.1 | 1,009.8 | 1,033.1 | 1,058.9 | 1,011.4 | 1,026.7 | 1,025.1 |
| Newport | 1094.5 | 1039.0 | 1106.2 | 1094.9 | 1052.0 | 1122.8 | 1118.6 |

Cancer

In 2016, the incidence of cancer in Wales was 613.2 per 100,000 population. In Cardiff the incidence was higher at 619.6 per 100,000 population, this was even higher in Newport at 658.8 per 100,000 population. The incidence of cancer in Wales was lower in 2016 than the figure recorded in 2012, whereas the figure in Cardiff and Newport in 2016 is higher than that of 2012. There is fluctuation in the figures in Wales, Cardiff and Newport, as seen in Table 5.

The mortality rate from cancer in 2017 in Wales is lower than that in Cardiff and Newport at 278.3 per 100,000 population and compared to 286.3 per 100,000 population and 289.2 per 100,000 respectively. There is fluctuation in the mortality rate in Wales, Cardiff and Newport between 2012 and 2017, as displayed in Table 5.

Table 5 Cancer incidence and mortality rates per 100,000 population (Source: NHS Wales Informatics Service, Health Maps Wales)

| | | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|----------------|---------|-------|-------|-------|-------|-------|-------|
| Incidence | Wales | 615.6 | 643.1 | 636.0 | 616.1 | 613.2 | - |
| | Cardiff | 611.7 | 650.1 | 637.8 | 620.2 | 619.6 | - |
| | Newport | 569.2 | 728.4 | 639.5 | 633.1 | 658.8 | - |
| Mortality rate | Wales | 289.0 | 286.2 | 289.1 | 278.4 | 279.2 | 278.3 |
| | Cardiff | 288.9 | 290.6 | 289.9 | 273.8 | 276.9 | 286.3 |
| | Newport | 307.3 | 303.7 | 319.3 | 295.8 | 306.6 | 289.2 |

Respiratory Disease

In 2017/2018, the rate of hospital admissions for respiratory diseases was lower in Cardiff and Newport than across Wales. Fluctuation in hospital admissions can be seen across Wales, Cardiff and Newport between 2012 and 2018, as seen in Table 6.

In 2017, mortality rate from respiratory diseases across Wales is lower than that in Cardiff, however the mortality rate in Newport is lower than both Wales and Cardiff. Across Wales, the mortality rate is 155.9 per 100,000 population compared to Cardiff at 167.1 per 100,000 and Newport at 153.5 per 100,000. Mortality rates have fluctuated in Wales, Cardiff and Newport, with no clear pattern emerging in any area, as displayed in Table 6.

Table 6 Hospital admissions and mortality rate per 100,000 population: all respiratory diseases (Source: NHS Wales Informatics Service, Health Maps Wales)

| | 2012/2013 | 2013/2014 | 2014/2015 | 2015/2016 | 2016/2017 | 2017/2018 |
|----------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| <i>Hospital Admissions</i> | | | | | | |
| Wales | 1518.2 | 1485.4 | 1598.1 | 1718.7 | 1792.2 | 1798.2 |
| Cardiff | 1408.6 | 1522.9 | 1508.3 | 1703.9 | 1767.5 | 1746.4 |
| Newport | 1537.3 | 1600.0 | 1679.3 | 2027.2 | 1939.7 | 1744.0 |
| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| <i>Mortality Rate</i> | | | | | | |
| Wales | 153.9 | 164.9 | 144.0 | 171.3 | 160.8 | 155.9 |
| Cardiff | 174.6 | 178.5 | 167.0 | 169.9 | 173.1 | 167.1 |
| Newport | 169.5 | 180.2 | 141.1 | 193.6 | 180.5 | 153.5 |

Cardiovascular Disease

Links have been established between cardiovascular disease and poor health behaviour, lifestyle choice and relative socio-economic deprivation. Comparisons of the mortality rates and hospital admission rates for all cardiovascular disease, presented in Table 6. Hospital admissions have generally decreased in Wales, Cardiff and Newport from 2012 to 2018. Mortality rate follows the same trend as a decrease is seen in Wales, Cardiff and Newport from 2012-2018. However, some fluctuation in Newport can be seen.

Table 7 Hospital admissions and mortality rate per 100,000 population: all cardiovascular diseases (Source: NHS Wales Informatics Service, Health Maps Wales)

| | 2012/2013 | 2013/2014 | 2014/2015 | 2015/2016 | 2016/2017 | 2017/2018 |
|----------------------------|-------------|-------------|-------------|-------------|-------------|-------------|
| <i>Hospital Admissions</i> | | | | | | |
| Wales | 1876.9 | 1897.1 | 1839.9 | 1828.2 | 1684.3 | 1574.7 |
| Cardiff | 1706.4 | 1641.2 | 1463.1 | 1564.0 | 1534.4 | 1512.2 |
| Newport | 1800.1 | 1791.8 | 1878.7 | 1785.2 | 1596.7 | 1433.8 |
| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| <i>Mortality Rate</i> | | | | | | |
| Wales | 310.2 | 307.5 | 284.7 | 289.2 | 273.3 | 261.7 |

| | | | | | | |
|---------|-------|-------|-------|-------|-------|-------|
| Cardiff | 277.8 | 270.1 | 246.7 | 245.2 | 239.0 | 236.1 |
| Newport | 325.3 | 311.4 | 299.5 | 301.5 | 288.7 | 290.2 |

From Table 7, data for acute myocardial infarction (heart attacks) shows that hospital admissions between the period of 2012 and 2016 are higher in Wales than that of Cardiff and Newport, however 2017-2018 hospital admissions are higher in Cardiff than across Wales. The mortality rate for acute myocardial infarction fluctuates in Wales, Cardiff and Newport but generally there is a decrease from 2012 to 2018, as displayed in Table 8.

The hospital admission rate and mortality rates are the highest for cases of coronary heart disease compared to the other cardiovascular diseases displayed in Table 8. Hospital admissions of coronary heart disease are generally higher across Wales than in Cardiff and Newport, showing a general decrease in admissions from 2012 to 2018. Mortality rate also shows a general decrease from 2012 to 2018 in Wales, Cardiff and Newport however it does fluctuate, as seen in Table 8.

Hospital admissions from strokes are higher in Cardiff than across Wales between 2012 and 2018, however Newport is seen to have lower hospital admissions than across Wales. Hospital admissions peak in both Cardiff and Newport in 2016/17 with 246.0 cases per 100,000 population and 191.0 cases per 100,000 respectively. The mortality rate in Wales and Cardiff decrease from 2012-2018, as displayed in Table 8.

Table 8 Hospital admissions and mortality rate per 100,00 population: acute myocardial infarction, coronary heart disease and stroke (Source: NHS Wales Informatics Services, Health Maps Wales)

| Acute myocardial infarction | 2012/2013 | 2013/2014 | 2014/2015 | 2015/2016 | 2016/2017 | 2017/2018 |
|-------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| <i>Hospital admissions</i> | | | | | | |
| Wales | 146.5 | 151.1 | 135.8 | 147.7 | 150.3 | 149.8 |
| Cardiff | 100.1 | 112.0 | 108.8 | 133.6 | 153.9 | 160.5 |
| Newport | 137.2 | 115.9 | 115.6 | 104.4 | 132.8 | 125.6 |
| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| <i>Mortality rate</i> | | | | | | |
| Wales | 47.1 | 47.7 | 44.0 | 47.4 | 43.4 | 43.8 |
| Cardiff | 46.2 | 41.2 | 32.9 | 41.3 | 35.7 | 40.2 |
| Newport | 52.8 | 52.1 | 54.0 | 47.4 | 35.0 | 40.3 |
| Coronary heart disease | 2012/2013 | 2013/2014 | 2014/2015 | 2015/2016 | 2016/2017 | 2017/2018 |
| <i>Hospital admissions</i> | | | | | | |
| Wales | 544.0 | 525.1 | 490.5 | 491.0 | 471.3 | 443.0 |
| Cardiff | 461.5 | 460.7 | 398.5 | 391.2 | 434.8 | 456.1 |
| Newport | 528.7 | 505.6 | 476.2 | 399.3 | 411.5 | 357.5 |
| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| <i>Mortality rate</i> | | | | | | |
| Wales | 144.1 | 143.6 | 126.4 | 130.6 | 121.6 | 118.4 |
| Cardiff | 118.2 | 123.3 | 202.2 | 107.4 | 110.0 | 103.7 |
| Newport | 154.7 | 155.6 | 141.0 | 140.8 | 129.2 | 139.2 |
| Stroke | 2012/2013 | 2013/2014 | 2014/2015 | 2015/2016 | 2016/2017 | 2017/2018 |
| <i>Hospital admissions</i> | | | | | | |
| Wales | 197.0 | 208.0 | 201.0 | 200.0 | 198.0 | 185.0 |
| Cardiff | 210.0 | 221.0 | 216.0 | 228.0 | 246.0 | 235.0 |
| Newport | 168.0 | 161.0 | 155.0 | 176.0 | 191.0 | 141.0 |

| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|-----------------------|------|------|------|------|------|------|
| <i>Mortality rate</i> | | | | | | |
| Wales | 77.2 | 75.6 | 75.1 | 69.9 | 66.7 | 59.9 |
| Cardiff | 80.6 | 72.1 | 68.9 | 60.5 | 61.1 | 62.9 |
| Newport | 84.7 | 88.8 | 82.7 | 72.9 | 80.3 | 63.8 |

Access to health services

The Cardiff and Vale University Health Board provides health care for Cardiff and the Vale of Glamorgan. As of September 2016, there were 511,067 registered patients within the Cardiff and Vale University Health Board area. There was a total of 310 General Practitioners (excluding locums, GP registrars and GP retainers), with an average size list of 1,649 patients⁴.

There are several hospitals in the Cardiff and Vale University area including University Hospital of Wales, St David's Hospital and Barry Hospital. There are also Community hospitals, as well as minor injuries units, and mental health services⁵.

The scheme does not directly impact upon health care services. It does, however, have potential implications for access, accessibility and response time to facilities.

Alcohol

Poor health behaviour can have a wide-ranging influence on overall health and well-being. Elements such as diet and the level of physical activity a person undertakes, and the degree of risk-taking behaviour, alcohol consumption and smoking, are directly correlated with a range of adverse health outcomes.

Alcohol consumption is a key health concern and a major cause of illness in Wales, with around 1,500 deaths attributable to alcohol each year (1 in 20 of all deaths)⁶.

Data obtained by the National Survey for Wales highlighted that 18% of adults surveyed, reported drinking above weekly guidelines (average weekly alcohol consumption above 14 units). It was reported that men were twice as likely to drink above the weekly guideline than women. Data for 2016/17 shows that in the Cardiff and Vale Health Board area, 23% of adults reported drinking above the weekly guidelines, this is above the average across Wales of 20%⁷.

Data obtained by the NHS Informatics surveys demonstrated that in 2017/18, alcohol attributable admissions for females in Wales was 359.8 per 100,000 population and 685.9 per 100,000 population for men in Wales⁸. Alcohol specific admission rates in Cardiff in 2017/18 totalled 506.8 cases per 100,000 population. The number of individuals admitted with alcohol-attributable cases in the Cardiff and Vale University Health Board accounted for 1671.4 per 100,000 population in 2017/18.

Alcohol-attributable mortality rates demonstrate that between 2015 and 2017, Cardiff and Vale University Health Board had 50.5 alcohol-attributable deaths per 100,000 population (3-year average). This compares to the Welsh average of 52.9 deaths per 100,000 population (3-year average). Cardiff had a mortality rate of 50.8 deaths per 100,000 population between 2015-2017 which is below the average across Wales.

Public Health Wales states that mortality and hospital admissions associated with alcohol are strongly related to deprivation levels, where rates in the most deprived areas in Wales are significantly higher than those of the least deprived areas. Furthermore, there has been no improvement in the disparity in mortality rates between the most and least deprived areas over time⁹.

⁴ Statistics Wales (2017), Statistical First Release: GPs in Wales, 2006-2016

⁵ Cardiff and Vale University Health Board: <http://www.cardiffandvaleuhb.wales.nhs.uk>

⁶ Public Health Wales Observatory (2014), Alcohol and health in Wales 2014: Wales profile.

⁷ Statistics for Wales (2017), National Survey for Wales – Population health: health-related lifestyle (adults), 2016-2017.

⁸ Public Health Wales Observatory. Hospital Admissions. due to Alcohol-specific and Attributable Conditions. Health Maps Wales

⁹ Public Health Wales Observatory (2014), Alcohol and health in Wales 2014: Wales profile.

Smoking

Data from Statistics Wales highlights 1 in 5 (19%) adults reported that they currently smoke in 2018 (21% male and 17% female). The figure is lower in the Cardiff and Vale University Health Board at 16%. This was the lowest percentage in all Health Boards across Wales, with the highest being both Abertawe Bro Morgannwg and Cwm Taf at 21%¹⁰.

Smoking was most common among adults aged 25-34 years¹⁰, and cigarette use among middle-aged adults and older declined with age. Adults aged 75 and over were less likely to smoke cigarettes or use e-cigarettes than adults of any other age¹⁰.

In terms of smoking-attributable hospital admissions, the rate in Cardiff and Vale University Health Board, in 2013-2015, was below the Welsh average of 1,185 per 100,000 population compared with 1,478. In Cardiff, it was 1,167, which is below that of both Wales and Cardiff and Vale. Smoking-attributable mortality rates in both Cardiff and Vale and Cardiff were both below the average across Wales at 274 and 283 respectively¹¹.

There is an association between higher rates of smoking and factors such as age, socio-economic group, deprivation, housing and education. Smoking rates tend to be greatest in the most deprived areas of Wales and caused around one third of the inequality in mortality between the least and most deprived areas. Overall, rates of deaths from smoking are falling, due to increasing restrictions on smoking; however, socio-economic inequalities are widening due to faster reductions in the least deprived areas, compared to the most deprived. It has been reported that in households headed by someone who has never worked, or in long-term unemployment, 44% of adults reported to be smoking. It has been suggested that a cause of smoking is due to an attempt to relieve the stress of socio-economic deprivation¹².

Obesity and physical activity

Being overweight (with a body mass index of 25–30) or obese (with a body mass index greater than 30) increases the risk of a range of adverse health outcomes including cardiovascular disease, diabetes, and hypertension.

The National Survey for Wales collects data regarding levels of physical activity and obesity throughout Wales. Data for 2018/19 indicates that, in Wales overall, 59% of adults aged 16 and over are classed as overweight, with 23% classed as obese. 53% of people reported that they met the recommended exercise guidelines (a minimum of 150 active minutes per week), with 33% reporting that they were active for less than 30 minutes per week. Only 24% reported that they ate the recommended five portions of fruit and vegetables per day¹³.

In Cardiff and Vale, the proportion of adults who are overweight and obese is 56%, which is below the Welsh average of 59%. Over 40% of adults in the area do not undertake regular physical activity and 27% are considered to be 'inactive'.

Crime and community safety

Cardiff is covered by the South Wales police force area. Recent statistics show that in February 2020, the most common types of crime in the police force area were violence, criminal damage and arson, antisocial behaviour and public order offences.

At a more local level, the community safety domain considers deprivation relating to living in a safe community, using police and fire records such as records of criminal damage, anti-social behaviour and

¹⁰ Statistics for Wales (2018). National Survey for Wales 2017-2018. Population health – Lifestyle

¹¹ Public Health Wales Observatory (2017), Smoking-attributable mortality and hospital admissions.

¹² Tobacco and health in Wales (June 2012)

¹³ Statistics for Wales (2019), National Survey for Wales – Population health: health-related lifestyle (adults), 2016-2017.

burglary. Table 9 shows that on average, most of the local area is within the 50% least deprived areas for community safety in Wales, with Trowbridge 9 in the 20% least deprived.

Table 9: WIMD community safety deprivation score

| LSOA | WIMD rank ¹ | WIMD score ² |
|--------------|------------------------|-------------------------|
| Marshfield 2 | 714 | 4 |
| Marshfield 3 | 866 | 4 |
| Marshfield 4 | 762 | 4 |
| Trowbridge 1 | 1258 | 5 |
| Trowbridge 4 | 618 | 4 |
| Trowbridge 6 | 1004 | 5 |
| Trowbridge 9 | 264 | 2 |

¹ Where 1 is most deprived and 1909 is the least deprived
² Where 1 is most deprived 10% of LSOAs and 5 is the least deprived 50%

Education, employment and income

The WIMD education domain considers education, training and skill using six indicators including results for different key stages and the number of adults with qualifications. Table 10 identifies Trowbridge 4 (10% most deprived) and Trowbridge 9 (30% most deprived) as pockets of deprivation in the local area.

Table 10: WIMD income, employment and education deprivation scores

| LSOA | WIMD - employment | | WIMD - income | | WIMD - education | |
|--------------|------------------------|-------------------------|------------------------|-------------------------|------------------------|-------------------------|
| | WIMD rank ¹ | WIMD score ² | WIMD rank ¹ | WIMD score ² | WIMD rank ¹ | WIMD score ² |
| Marshfield 2 | 1873 | 5 | 1843 | 5 | 1829 | 5 |
| Marshfield 3 | 1467 | 5 | 1469 | 5 | 1627 | 5 |
| Marshfield 4 | 1492 | 5 | 1543 | 5 | 1552 | 5 |
| Trowbridge 1 | 1451 | 5 | 1341 | 5 | 928 | 4 |
| Trowbridge 4 | 175 | 1 | 33 | 1 | 52 | 1 |
| Trowbridge 6 | 1342 | 5 | 1109 | 5 | 921 | 4 |
| Trowbridge 9 | 711 | 3 | 314 | 2 | 462 | 3 |

¹ Where 1 is most deprived and 1909 is the least deprived
² Where 1 is most deprived 10% of LSOAs and 5 is the least deprived 50%

The employment domain considers four indicators including the number of people applying for different Government benefits or allowances, whereas the income domain assess the proportion of people below a defined level of income. Table 10 above identifies similar trends between the two domains, with Trowbridge 4 in the most 10% deprived areas of Wales for both employment and income. Trowbridge 9 is also a notable area of deprivation.

Further baseline information in relation to education, employment and income is described in the Socio-economic assessment.