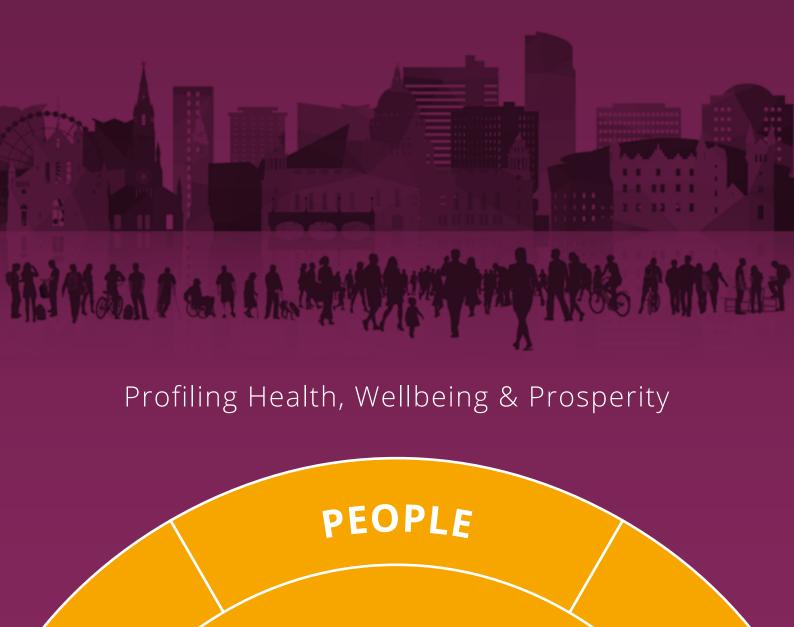


BELFAST

Has COVID-19 changed our city?



Acknowledgements

Belfast Healthy Cities would like to acknowledge and sincerely thank Erica Ison, for her commitment and diligence as author of the six chapters in this publication, *BELFAST: Profiling, Health, Well-being and Prosperity: Has Covid -19 changed our city?*

We would also like to wholeheartedly thank Dr Karen Casson, Vice Chair of Belfast Healthy Cities Board of Directors for her meticulous review of the data and her valuable comments on the Chapters.

Steering Group Members

Joan Devlin, Chief Executive Officer, Belfast Healthy Cities, Chair Erica Ison, Specialist Practitioner in Population and Public Health Dr Karen Casson, Vice Chair, Belfast Healthy Cites Caroline Scott, Office Manager, Belfast Healthy Cities, Administrative support

Publications

There are six publications, referred to as chapters, in *BELFAST Profiling Health*, *Wellbeing & Prosperity: Has Covid-19 changed our city?*

They are based on the 6P framework of Belfast being a member of Phase VII (2019 – 2025) of the World Health Organization European Healthy Cities Network:



PEOPLE

Previous Publications

There are six publications, referred to as chapters, in *BELFAST Profiling Health, Wellbeing & Prosperity,* and a summary document.

They are based on the 6P framework of Belfast being a member of Phase VII (2019 – 2025) of the World Health Organization European Healthy Cities Network:





The Belfast Healthy Cities City Health Profile is an important document that will help set out the challenges and opportunities for us all to improve the Health and Wellbeing of the city into the future going forward.

As we emerge from the COVID-19 pandemic, and we continue to see pressures on the cost of living, the city is clearly in a very different place now and we must take the opportunity to reflect both on the impact of the pandemic and refocus our thoughts as we move forward. This profile, and the key learning within, will help us do that.

Has COVID-19 changed our city? Undoubtedly the answer is yes. The wider health and social care system had to adapt to meet the challenge of COVID-19. Prior to the pandemic, our health and social care system was already facing huge strategic challenges in the form of an ageing population, increasing demand, long and growing waiting lists, workforce pressures and the emergence of new and more expensive treatments. All of these pressures were exacerbated by the pandemic. The Department of Health and the wider service also need to plan for potential further outbreaks of the virus and use the learning from the pandemic to assist this planning.

To support the overall work on recovery, we need to understand what has, and has not, worked in terms in addressing the impact of the pandemic around the world. While no one nation or region will map precisely to our situation, there will be a strong evidence base to draw from.

It is apparent across many areas that there are opportunities to use the new ways of working and opportunities from the current crisis and not simply to return to the way things were done previously. This continues to be a feature of the future thinking on recovery.

I see continued collaboration as key going forward, we can all learn so much from each other, as is evidenced in the Chapters. I whole-heartedly support crossdepartmental and cross-agency liaison. This is at the heart of Making Life Better, the Executive's framework for improving health and addressing health inequalities. We all have so much to contribute towards the health of our population and we can do this better together.

I am delighted to be working closely with Belfast Healthy Cities and I commend the organisation on this very important piece of work.

Andra My Courto

Foreword

Prof Sir Michael McBride Chief Medical Officer

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Preface

COVID-19 changed the lives of everyone living in Belfast and beyond. Few of us could have imagined the sudden and profound changes to our way of life. As we emerge from the pandemic, it is important that we consider what the impact of this was on the health and wellbeing of the people of Belfast. This chapter, PEOPLE, in 'BELFAST, Profiling Health, Wellbeing & Prosperity: has COVID-19 changed our city?' is a follow up to the chapter on PEOPLE, produced as part of, 'BELFAST Profiling Health, Wellbeing & Prosperity: The data behind the people and the city', produced in 2022.

There are a wide range of indicators set out in this chapter. The information presented underscores some of the challenges faced by those living in parts of our city. Some areas, such as the Court District Electoral Area (DEA) face high levels of disadvantage and we can see that they also experience poorer health outcomes.

We know that a feeling of social connection is an important determinant of health and wellbeing. It is notable that while the proportion of people reporting feeling lonely did not change a lot in Belfast across the pandemic period, rates are higher than in other parts of Northern Ireland. The average score for anxiety increased across the pandemic period and Belfast continues to have higher levels of anxiety than most other areas in NI. Linked to this, the standardised prescription rate for mood and anxiety in Belfast Health and Social Care Trust area, was the highest in NI.

There is also important information about access to preventative services. The number of children registered with a dentist has fallen across this period with Belfast Trust seeing the biggest fall. The uptake rate for cervical screening has also fallen. Cervical screening saves lives and we will use the information as we continue to promote uptake. On a positive note, the rise in uptake of bowel cancer screening seen is welcome, although we still have work to do to reach the recommended levels of uptake.

The profile is welcome and timely with the refreshed action plans within the Belfast Agenda Community Plan and the emerging Integrated Care System structure within Health & Social Care. I am delighted to present this document and I would encourage the use of the data in strategic discussions and priority setting across all sectors to continue to improve the health and wellbeing of the population of Belfast and to reduce inequalities.

Dr Joanne McClean Director of Public Health Public Health Agency

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COVID-19 Peace Chapter Indicators showing the administrative and other geographies at which data were available

Indicator	LGD	LGD Deprived	нѕст	HSCT Deprived	Northern Ireland	Assembly area	DEA	Other
Standardised death rate: COVID-19								
Standardised admission rate: Emergency admissions								
Wellbeing Indicators								
Feelings of loneliness: at least some of the time								
Feelings of loneliness: often/always								
Signs of loneliness								NI deprivation quintiles
Life satisfaction: average score								
Life satisfaction: very high levels								NI deprivation quintiles
Feeling worthwhile: average score								
Feeling worthwhile: very high levels								NI deprivation quintiles
Anxiety: average score								
Anxiety: very low levels								NI deprivation quintiles
Standardised prescription rate for mood and anxiety								
People aged 18 years and over who drank alcohol								NI deprivation quintiles
People aged 16 years and over who smoked cigarettes								NI deprivation quintiles

Indicator	LGD	LGD Deprived	нѕст	HSCT Deprived	Northern Ireland	Assembly area	DEA	Other
People aged 16 years and over who smoked electronic cigarettes								NI deprivation quintiles
Smoking during pregnancy								
Breastfeeding on discharge								
Standardised dental registration rate in children and young people aged under 18 years								
Coverage of women eligible for cervical screening								
Uptake by women eligible for breast screening			Belfast & South Eastern HSCTs combined					
Uptake for bowel cancer screening								

BELFAST: Profiling Health, Wellbeing & Prosperity

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SECTION 1

Standardised Death Rate for COVID-19

DATA SOURCE

Information is from the Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Death Rate – COVID-19.¹

INFORMATION ABOUT THE INDICATOR

Deaths due to COVID-19 are defined as 'deaths due to COVID-19' and use the International Classification of Disease Tenth Revision (ICD-10) codes² as reported by NISRA within the Registrar General Annual Report³, i.e., ICD-10 codes U07.1 and U07.2.

The code U10.9 was introduced in 2021 as a new code for 'deaths due to COVID-19'.4

This indicator has been directly standardised for age.

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Calendar years 2020, and 2021

1. Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 31 March 2023)

- 2. ICD-10 Version:2016 (who.int) (Last accessed 3 April 2023)
- 3. Registrar General Annual Report 2020 | Northern Ireland Statistics and Research Agency (nisra.gov.uk) (Last accessed 3 April 2023)
- 4. The introduction of code U10.9 is likely to have resulted in an increase in deaths recorded as due to COVID-19 during 2021

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Introduction to the Health Inequalities Annual Report 2023, it states:

"The most recent figures reported in this release typically include data from 2020 and 2021, and therefore reflect to an extent, the impact of the coronavirus (COVID-19) pandemic. In particular, figures related to hospital admissions, dental indicators and childhood obesity have been significantly impacted due to service restrictions."⁵

PROFILE FINDINGS

In Belfast LGD, the standardised death rate for COVID-19:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 134 per 100,000 population
- In 2021, covering the first calendar year of the pandemic, was 112 per 100,000 population (see COVID-19 People Figure 1)

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, in Belfast LGD, there was a decrease of 22 per 100,000 population in the COVID-19 death rate (see COVID-19 People Figure 1).

In deprived areas of Belfast LGD, the standardised death rate for COVID-19:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 175 per 100,000 population
- In 2021, covering the first calendar year of the pandemic, was 155 per 100,000 population

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, in deprived areas of Belfast LGD, there was a decrease of 20 per 100,000 population in the COVID-19 death rate (see COVID-19 People Figure 1).

In Belfast HSCT, the standardised death rate for COVID-19:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 127 per 100,000 population
- In 2021, covering the first calendar year of the pandemic, was 109 per 100,000 population (see COVID-19 People Figure 1)

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Introduction, page 7 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 6 July 2023)

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Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, in Belfast HSCT, there was a decrease of 18 per 100,000 population in the COVID-19 death rate (see COVID-19 People Figure 1).

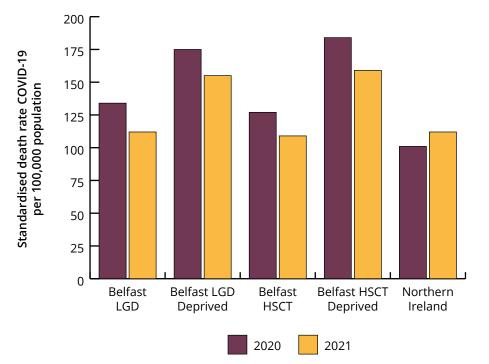
In deprived areas of Belfast HSCT, the standardised death rate for COVID-19:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 184 per 100,000 population
- In 2021, covering the first calendar year of the pandemic, was 159 per 100,000 population (see COVID-19 People Figure 1)

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, in deprived areas of Belfast HSCT, there was a decrease of 25 per 100,000 population in the COVID-19 death rate (see COVID-19 People Figure 1).

COVID-19 PEOPLE FIGURE 1:

Standardised death rate for COVID-19 by Belfast LGD, Belfast LGD Deprived, Belfast HSCT, Belfast HSCT Deprived, and Northern Ireland, 2020 and 2021



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Death Rate – COVID-19

Differences by Belfast DEAs

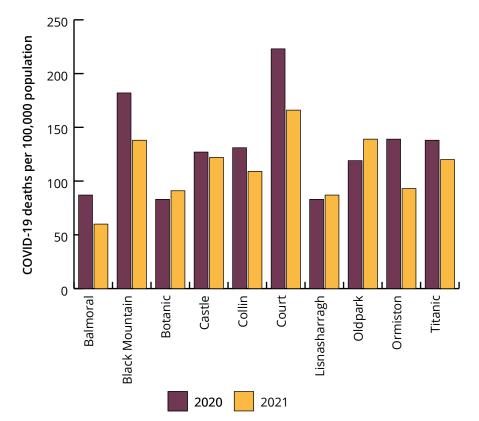
There was variation in the standardised death rate for COVID-19 across Belfast's DEAs.

- In 2020, covering the first 9 months of the COVID-19 pandemic, the standardised death rate for COVID-19 was highest in Court DEA at 223 per 100,000 population, followed by Black Mountain DEA at 182 per 100,000 population, and equal lowest in Botanic DEA and Lisnasharragh DEA at 83 per 100,000 population, closely followed by Balmoral DEA at 87 per 100,000 population. The median was 129 per 100,000 population (see COVID-19 People Figure 2)
- In 2021, covering the first calendar year of the pandemic, the standardised death rate for COVID-19 was highest in Court DEA at 166 per 100,000 population, and lowest in Balmoral DEA at 60 per 100,000 population. The median was 115 per 100,000 population (see COVID-19 People Figure 2)

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, the standardised death rate for COVID-19:

- Decreased in 7 of Belfast's DEAs
- Increased in 3 of Belfast's DEAs (see COVID-19 People Figure 2)

COVID-19 PEOPLE FIGURE 2:



Standardised death rate for COVID-19 by Belfast DEA, 2020 and 2021

Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Death Rate – COVID-19

KEY COMPARISONS

Comparison with Northern Ireland

In 2020, covering the first 9 months of the COVID-19 pandemic, when compared with Northern Ireland, the standardised death rate for COVID-19 was higher:

- In Belfast LGD by 33 per 100,000 population, 134 compared with 101 per 100,000 population
- In deprived areas of Belfast LGD by 74 per 100,000 population, 175 compared with 101 per 100,000 population
- In Belfast HSCT by 26 per 100,000 per population, 127 compared with 101 per 100,000 population
- In deprived areas of Belfast HSCT by 83 per 100,000 population, 184 compared with 101 per 100,000 population (see COVID-19 People Figure 1)

In 2021, covering the first calendar year of the COVID-19 pandemic, however, when compared with Northern Ireland, the standardised death rate for COVID-19:

- In Belfast LGD was the same at 112 per 100,000 population
- In deprived areas of Belfast LGD was higher by 43 per 100,000 population, 155 compared with 101 per 100,000 population
- In Belfast HSCT was lower by 3 per 100,000 population, 109 compared with 112 per 100,000 population
- In deprived areas of Belfast HSCT was higher by 47 per 100,000 population, 159 compared with 112 per 100,000 population (see COVID-19 People Figure 1)

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, the standardised death rate for COVID-19:

- In Belfast LGD decreased by 22 per 100,000 population, from 134 to 112 per 100,000 population (a percentage decrease of 16.42%)
- In deprived areas of Belfast LGD decreased by 20 per 100,000 population from 175 to 155 per 100,000 population (a percentage decrease of 11.43%)
- In Belfast HSCT decreased by 18 per 100,000 population, from 127 to 109 per 100,000 population (a percentage decrease of 14.17%)
- In deprived areas of Belfast HSCT decreased by 25 per 100,000 population from 184 to 159 per 100,000 population (a percentage decrease of 13.59%)
- In Northern Ireland increased by 11 per 100,000 population, from 101 to 112 per 100,000 population (a percentage increase of 10.89%; see COVID-19 People Figure 1)

Comparison with other LGDs

In 2020, covering the first 9 months of the COVID-19 pandemic, when compared with other LGDs:

- Belfast LGD had the highest standardised death rate for COVID-19 at 134 per 100,000 population
- Fermanagh & Omagh LGD had the lowest death rate at 49 per 100,000 population
- Lisburn & Castlereagh LGD had the median death rate at 100 per 100,000 population (see COVID-19 People Figure 3)

In 2021, covering the first calendar year of the COVID-19 pandemic, when compared with other LGDs:

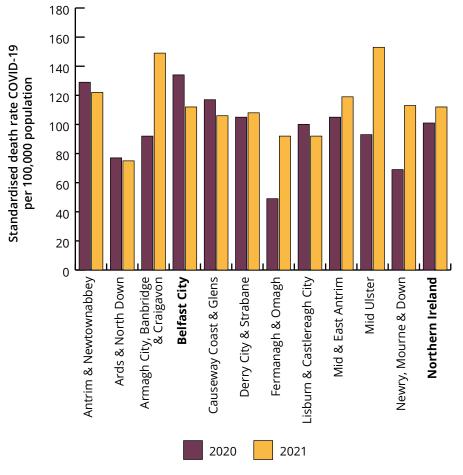
- Belfast LGD had the median standardised death rate for COVID-19 at 112 per 100,000 population
- Mid Ulster had the highest death rate at 153 per 100,000 population
- Ards & North Down LGD had the lowest death rate at 75 per 100,000 population (see COVID-19 People Figure 3)

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, the standardised death rate for COVID-19:

- Increased in 6 LGDs
- Decreased in 5 LGDs, including Belfast LGD (see COVID-19 People Figure 3)

COVID-19 PEOPLE FIGURE 3:

Standardised death rate for COVID-19 by LGD and Northern Ireland, 2020 and 2021



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Death Rate – COVID-19

Comparison with other HSCTs

In 2020, covering the first 9 months of the COVID-19 pandemic, when compared with other HSCTs:

- Belfast HSCT had the highest standardised death rate for COVID-19 at 127 per 100,000 population
- Southern HSCT had the lowest death rate at 85 per 100,000 population
- South Eastern and Western HSCTs had the median death rate at 86 per 100,000 population (see COVID-19 People Figure 4)

In 2021, covering the first calendar year of the COVID-19 pandemic, when compared with other HSCTs:

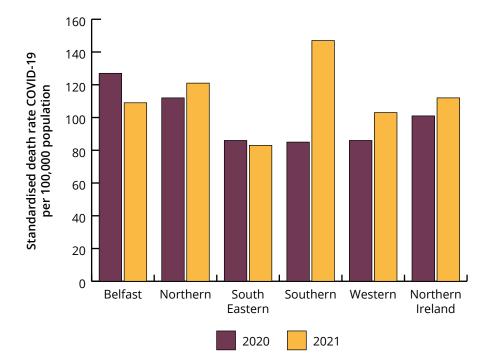
- Belfast HSCT had the median standardised death rate for COVID-19 at 109 per 100,000 population
- Southern HSCT had the highest death rate at 147 per 100,000 population
- South Eastern HSCT had the lowest death rate at 83 per 100,000 population (see COVID-19 People Figure 4)

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, the standardised death rate for COVID-19:

- Increased in 3 HSCTs
- Decreased in 2 HSCTs, including Belfast HSCT (see COVID-19 People Figure 4)

COVID-19 PEOPLE FIGURE 4:





Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Death Rate – COVID-19

DIRECT IMPACT OF THE COVID-19 PANDEMIC

In 2020, covering the first 9 months of the COVID-19 pandemic, the standardised death rate for COVID-19 was higher in Belfast LGD and in Belfast HSCT than that in Northern Ireland.

In 2021, however, covering the first calendar year of the pandemic, the standardised death rate for COVID-19 was the same in Belfast LGD as it was in Northern Ireland, and it was lower in Belfast HSCT than that in Northern Ireland.

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic:

- The gap between Belfast LGD and Northern Ireland narrowed such that there was no difference between the two and both had the same datapoint, due to a decrease in rate in Belfast LGD and an increase in rate in Northern Ireland
- The gap between Belfast HSCT and Northern Ireland narrowed such that Belfast HSCT had a lower datapoint than that in Northern Ireland, due to a decrease in rate in Belfast HSCT and an increase in rate in Northern Ireland

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In 2020, covering the first 9 months of the COVID-19 pandemic, among LGDs, Belfast LGD had the highest standardised death rate for COVID-19, approaching triple the rate of that in Fermanagh & Omagh LGD and almost double that in Newry, Mourne & Down LGD. In 2021, covering the first calendar year of the pandemic, however, Belfast LGD had the median standardised death rate for COVID-19, reflecting not only a decrease in the rate in Belfast LGD but also a large percentage increase in the rate in some of the other LGDs, notably Armagh City, Banbridge & Craigavon LGD, Fermanagh & Omagh LGD, Mid Ulster LGD, and Newry, Mourne & Down LGD.

In 2020, covering the first 9 months of the COVID-19 pandemic, among HSCTs, Belfast HSCT had the highest standardised death rate for COVID-19, however, in 2021, covering the first calendar year of the pandemic, Belfast HSCT had the median death rate, reflecting not only a decrease in the rate in Belfast HSCT, but also a large percentage increase in the rate in Southern HSCT.

Inequalities with the potential for inequity

The standardised death rate for COVID-19 was higher in deprived areas of Belfast LGD than that in Belfast LGD in:

- 2020, covering the first 9 months of the COVID-19 pandemic
- 2021, covering the first calendar year of the pandemic

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, although the death rates for COVID-19 in Belfast LGD and deprived areas of Belfast LGD both decreased, there was a greater percentage decrease in Belfast LGD and the gap between the two widened.

The standardised death rate for COVID-19 was higher in deprived areas of Belfast HSCT than that in Belfast HSCT in:

- 2020, covering the first 9 months of the COVID-19 pandemic
- 2021, covering the first calendar year of the pandemic

Between 2020 and 2021, covering the first year and 9 months of the COVID-19 pandemic, although the death rates for COVID-19 in Belfast HSCT and deprived areas of Belfast HSCT both decreased, there was a slightly greater percentage decrease in Belfast HSCT and the gap between the two widened slightly.

In 2020, covering the first 9 months of the COVID-19 pandemic, among Belfast's DEAs, Court DEA and Black Mountain DEA had the highest standardised death rates for COVID-19. The death rate in Court DEA was approaching triple that of Botanic and Lisnasharragh DEAs, and the death rate in Black Mountain DEA was more than double that in Botanic and Lisnasharragh DEAs.

In 2021, covering the first calendar year of the COVID-19 pandemic, among Belfast's DEAs, Court DEA, Oldpark DEA, and Black Mountain DEA had the highest standardised death rates for COVID-19. The death rate in Court DEA was approaching double that in Botanic DEA. PEOPLE

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SECTION 2

Standardised Admission Rate Emergency Admissions

DATA SOURCE

Information is from the Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Admission Rate – Emergency Admissions.⁶

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Health Inequalities Annual Report 2023, it states:

"It should be noted that due to the impact of the COVID-19 pandemic on hospital services any changes from 2020/21 should be interpreted with caution."⁷

In the Introduction to the Health Inequalities Annual Report 2023, it states:

"The most recent figures reported in this release typically include data from 2020 and 2021, and therefore reflect to an extent, the impact of the coronavirus (COVID-19) pandemic. In particular, figures related to hospital admissions, dental indicators and childhood obesity have been significantly impacted due to service restrictions."⁸

 Introduction, page 7 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 6 July 2023) Ľ

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^{6.} Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 9 July 2023)

^{7.} Footnote 20 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 3 July 2023)

DFOD

In the Excel spreadsheet entitled Health Inequalities Annual Report 2023 Data Tables – by Indicator, there is a note from the data-provider that states service-based indicators, including dental treatment activity, are affected by:

"... difficulties in ascertaining whether any changes in rates are due to changes in demand (i.e., health of the population), or, as a result of changes in service provision. All figures relating to these indicators should be treated with caution as they may also be impacted by external factors that are not reflective of service demand. As unmet demand is not accounted for in the data, these indicators should therefore be viewed as indicators of service provision rather than demand."⁹

PROFILE FINDINGS

In 2020/21, the first full year of the COVID-19 pandemic, the standardised admission rate for emergency admissions in:

- Belfast LGD was 7,208 per 100,000 population
- Deprived areas of Belfast LGD was 9,635 per 100,000 population
- Belfast HSCT was 7,015 per 100,000 population
- Deprived areas of Belfast HSCT was 9,571 per 100,000 population

In 2021/22, the second full year of the COVID-19 pandemic, the standardised admission rate for emergency admissions in:

- Belfast LGD was 8,096 per 100,000 population
- Deprived areas of Belfast LGD was 10,546 per 100,000 population
- Belfast HSCT was 7,796 per 100,000 population
- Deprived areas of Belfast HSCT was 10,456 per 100,000 population

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions decreased in:

- Belfast LGD by 620 per 100,000 population, from 8,716 to 8,096 per 100,000 population
- Deprived areas of Belfast LGD, by 1,203 per 100,000 population, from 11,749 to 10,546 per 100,000 population
- Belfast HSCT by 740 per 100,000 population from 8,536 to 7,796 per 100,000 population
- Deprived areas of Belfast HSCT by 1,364 per 100,000 population, from 11,820 to 10,456 per 100,000 population

Differences by Belfast DEAs

There was variation in standardised admission rate for emergency admissions across Belfast's DEAs.

In 2020/21, the first full year of the COVID-19 pandemic, the standardised admission rate for emergency admissions was:

- Highest in Court DEA at 9,321 per 100,000 population
- Lowest in Balmoral DEA at 5470 per 100,000 population (see COVID-19 People Figure 5)

The median was 7,587 per 100,000 population.

In 2021/22, the second full year of the COVID-19 pandemic, the standardised admission rate for emergency admissions was:

- Highest in Court DEA at 10,077 per 100,000 population
- Lowest in Balmoral DEA at 5,996 per 100,000 population (see COVID-19 People Figure 5)

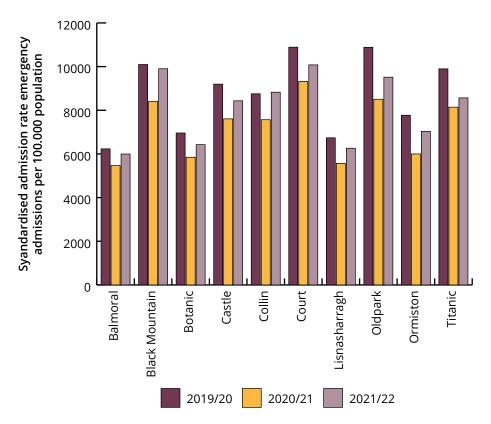
The median was 8,500 per 100,000 population.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions:

- Decreased overall in 9 DEAs
- Increased overall in one DEA (see COVID-19 People Figure 5)

COVID-19 PEOPLE FIGURE 5:

Standardised admission rate for emergency admissions by Belfast DEA, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Admission Rate – Emergency Admissions

See pages 138-145, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, the standardised admission rate for emergency admissions in:

- Belfast LGD, was lower than that in Northern Ireland in 2019/20, before the COVID-19 pandemic, but higher than that in Northern Ireland in 2020/21 and 2021/22, the first two full years of the pandemic
- Deprived areas of Belfast LGD, was higher than that in Northern Ireland in 2019/20, 2020/21, and 2021/22, both before and during the first two full years of the pandemic

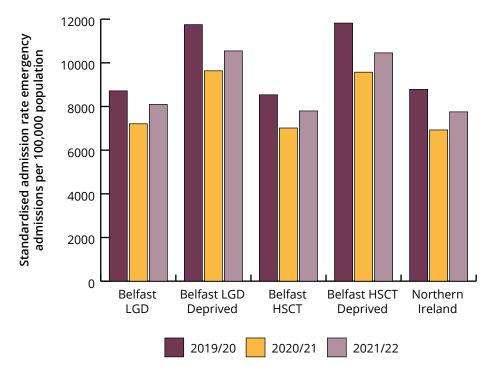
• Deprived areas of Belfast HSCT, was higher than that in Northern Ireland in 2019/20, 2020/21, and 2021/22, both before and during the first two full years of the pandemic (see COVID-19 People Figure 6)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions decreased in:

- Belfast LGD by 620 per 100,000 population, from 8,716 to 8,096 per 100,000 population (a percentage decrease of 7.11%)
- Deprived areas of Belfast LGD by 1,203 per 100,000 population, from 11,749 to 10,546 per 100,000 population (a percentage decrease of 10.24%)
- Belfast HSCT by 740 per 100,000 population from 8,536 to 7,796 per 100,00 population (a percentage decrease of 8.67%)
- Deprived areas of Belfast HSCT by 1,364 per 100,000 population from 11,820 to 10,456 per 100,00 population (a percentage decrease of 11.54%)
- Northern Ireland by 1,031 per 100,000 population, from 8,785 to 7,754 per 100,000 population (a percentage decrease of 11.74%; see COVID-19 People Figure 6)

COVID-19 PEOPLE FIGURE 6:

Standardised admission rate for emergency admissions by Belfast LGD, Belfast LGD Deprived, Belfast HSCT, Belfast HSCT Deprived, and Northern Ireland, 2019/20, 2020/21, 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Admission Rate – Emergency Admissions

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

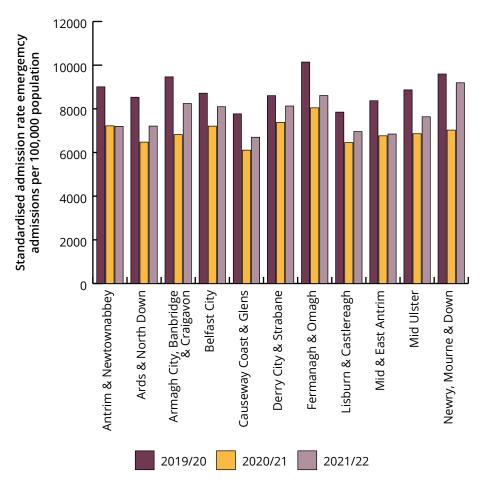
- The median standardised admission rate for emergency admissions in 2019/20, before the COVID-19 pandemic
- The fourth highest standardised admission rate for emergency admissions in 2020/21, the first full year of the pandemic
- The fifth highest standardised admission rate for emergency admissions in 2021/22, the second full year of the pandemic (see COVID-19 People Figure 7)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions decreased in all LGDs, including Belfast LGD (see COVID-19 People Figure 7).

PEOPLE

COVID-19 PEOPLE FIGURE 7:

Standardised admission rate for emergency admissions by LGD, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Admissions Rate – Emergency Admissions

Comparison with other HSCTs

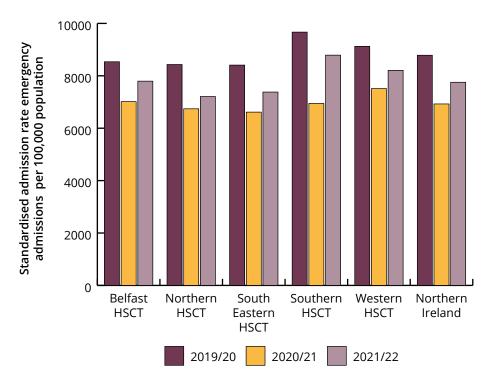
When compared with other HSCTs, Belfast HSCT had:

- The median standardised admission rate for emergency admissions in 2019/20, before the COVID-19 pandemic
- The second highest standardised admission rate for emergency admissions in 2020/21, the first full year of the pandemic
- The median standardised admission rate for emergency admissions in 2021/22, the second full year of the pandemic (see COVID-19 People Figure 8)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions decreased in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 8).

COVID-19 PEOPLE FIGURE 8:

Standardised admission rate for emergency admissions by HSCT, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Admissions Rate – Emergency Admissions

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Comparison with Northern Ireland

In comparison with Northern Ireland, the standardised admission rate for emergency admissions in:

- Belfast LGD was lower in 2019/20, before the COVID-19 pandemic, but higher in 2020/21 and 2021/22 during the first two full years of the pandemic
- In Belfast HSCT was lower in 2019/20, before the COVID-19 pandemic, but higher in 2020/21 and 2021/22, the first two full years of the pandemic

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the gap in the standardised admission rate for emergency admissions widened between:

- Belfast LGD and Northern Ireland, with a greater percentage decrease in Northern Ireland
- Belfast HSCT and Northern Ireland, with a greater percentage decrease in Northern Ireland

In comparison with Northern Ireland, in 2019/20, before the COVOD-19 pandemic, and 2020/21 and 2021/22, during the first two full years of the pandemic, the standardised admission rate for emergency admissions was higher in deprived areas of:

- Belfast LGD
- Belfast HSCT

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the gap in the standardised admission rate for emergency admissions:

- Widened between deprived areas in Belfast LGD and Northern Ireland with a greater percentage decrease in Northern Ireland
- Widened slightly between deprived areas in Belfast HSCT and Northern Ireland with a slightly greater percentage decrease in Northern Ireland

Comparison with other LGDs

In comparison with other LGDs, Belfast LGD had:

- In 2019/20, before the COVID-19 pandemic, the median standardised admission rate for emergency admissions
- In 2020/21, the first full year of the pandemic, the fourth highest standardised admission rate for emergency admissions
- In 2021/22, the second full year of the pandemic, the fifth highest standardised admission rate for emergency admissions

Consequently, there was a change in the relative position of Belfast LGD among LGDs with Belfast LGD moving one place higher overall.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast LGD had the third lowest percentage decrease in the standardised admission rate for emergency admissions at 7.11%
- The greatest percentage decrease was in Antrim & Newtownabbey LGD at 20.11%
- The smallest percentage decrease was in Newry, Mourne & Down LGD at 4.18%
- The median percentage decrease was in Causeway Coast & Glens LGD at 13.76%

Comparison with other HSCTs

In comparison with the other HSCTs, Belfast HSCT had:

- In 2019/20, before the COVID-19 pandemic, the median standardised admission rate for emergency admissions
- In 2020/21, during the first full year of the pandemic, the second highest standardised admission rate for emergency admissions
- In 2021/22, during the second full year of the pandemic, the median standardised admission rate for emergency admissions

Consequently, there was no overall change in the relative position of Belfast HSCT among HSCTs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast HSCT had the smallest percentage decrease in the standardised admission rate for emergency admissions at 8.67%
- Northern HSCT had the greatest percentage decrease at 17.53%
- Western HSCT had the median percentage decrease at 10.03%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

As noted by the data-holder (see page 000), these data should be treated with caution. They are not necessarily reflective of service demand because unmet demand is not accounted for; therefore, this indicator should be viewed as an indicator of service provision rather than one of demand.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions decreased in:

- All LGDs, including Belfast LGD
- All HSCTs, including Belfast HSCT
- Northern Ireland

It is worth noting that the standardised admission rate for emergency admissions had been steadily decreasing in Belfast LGD and in Northern Ireland from 2016/17 to 2019/20, before the COVID-19 pandemic.

For people in Belfast LGD and in Belfast HSCT, the first two years of the COVID-19 pandemic has been associated with an overall decrease in the standardised admission rate for emergency admissions (see also "Contextual information" below, page 000).

Inequalities with the potential for inequity

From 2019/20 to 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions was higher in:

- Deprived areas of Belfast LGD than that in Belfast LGD
- Deprived areas of Belfast HSCT than that in Belfast HSCT

During the first two full years of the pandemic, however, the gap in the standardised admission rate for emergency admissions narrowed between:

- Belfast LGD and deprived areas in Belfast LGD, with a greater percentage decrease in deprived areas of Belfast LGD
- Belfast HSCT and deprived areas in Belfast HSCT, with a greater percentage decrease in deprived areas of Belfast HSCT

For people in deprived areas of Belfast LGD and Belfast HSCT, the first two full years of the COVID-19 pandemic have been associated with an overall decrease in the standardised admission rate for emergency admissions.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, among Belfast's DEAs, Court, Oldpark, and Black Mountain DEAs had the highest standardised admission rates for emergency admissions:

- Court DEA had the highest rates in 2019/20, 2020/21, and 2021/22
- Oldpark had the second highest rates in 2019/20 and 2020/21, and the third highest rate in 2021/22
- Black Mountain DEA had the third highest rates in 2019/20 and 2020/21 and the second highest rate in 2021/22

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised admission rate for emergency admissions:

- Decreased in 9 DEAs
- Increased in one DEA

Of the DEAs in which the standardised admission rates for emergency admissions decreased:

- The smallest percentage decrease was in Collin DEA at 0.82%, followed by Black Mountain DEA at 1.93%.
- The largest percentage decrease was in Titanic DEA at 13.44%

In 2021/22, the standardised admission rates for emergency admissions in Black Mountain, Castle, Collin, Court, Oldpark, and Titanic DEAs were higher than those in Belfast LGD, Belfast HSCT, and Northern Ireland.

CONTEXTUAL INFORMATION: PROPORTION OF INPATIENT ADMISSIONS THAT WERE EMERGENCY ADMISSION

Introduction

It is important to be aware that these inpatient admission data are not directly comparable with the data used to calculate the indicator for the standardised admission rate emergency admissions as presented above because:

- The data for the standardised admission rate emergency admissions are collected by patients' place of residence
- The data for the inpatient admission rate are collected by provider, that is, the health and social care trust at which patients were treated

PROFILE FINDINGS

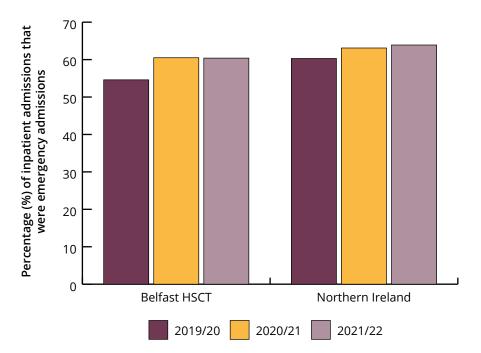
In Belfast HSCT, the proportion of inpatient admissions that were emergency admissions was:

- In 2020/21, the first full year of the pandemic, 60.5%
- In 2021/22, the second full year of the pandemic, 60.4% (see COVID-19 People Figure 9)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the proportion of inpatient admissions that were emergency admissions increased by 5.8 percentage points, from 54.6% to 60.4% (see COVID-19 People Figure 9).

COVID-19 PEOPLE FIGURE 9:

Percentage (%) of inpatient admissions that were emergency admissions in Belfast HSCT, 2019/20, 2020/21, and 2021/22



Source: Personal communication, Department of Health: Public Health Information & Research Branch, and the Hospital Information Branch¹⁰

Comparison with Northern Ireland

When compared with Northern Ireland, the proportion of inpatient admissions that were emergency admissions were lower in Belfast HSCT in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 9)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the proportion of inpatient admissions that were emergency admissions increased in:

- Belfast HSCT by 5.8 percentage points, from 54.6% to 60.4% (a percentage increase of 10.62%)
- Northern Ireland by 3.6 percentage points, from 60.3% to 63.9% (a percentage increase of 5.97%; see COVID-19 People Figure 9)

BELFAST: Profiling Health, Wellbeing & Prosperity

Personal communications, Public Health Information & Research Branch and Hospital Information Branch, Department of Health, 5 and 9 August 2023

PEOPLE

Potential impact of the COVID-19 pandemic

During the first two full years of the pandemic, although Belfast HSCT had a lower proportion of inpatient admissions that were emergency admissions when compared with Northern Ireland, there was a greater percentage increase in Belfast HSCT than in Northern Ireland, and the gap between the two narrowed.

Although the COVID-19 pandemic has been associated with a decrease in emergency admissions, continuing a trend that was occurring before the pandemic, in Belfast HSCT, the pandemic has been associated with an increase in the proportion of inpatient admissions that were emergency admissions.

INTRODUCTION TO THE WELLBEING INDICATORS

The Wellbeing indicators cover among others the following four topics:

- Loneliness
- Life Satisfaction
- Feeling Worthwhile
- Anxiety

There are three reliable and reputable sources of data for the calculation of these indicators:

- NISRA, Wellbeing in Northern Ireland, which uses data from the Continuous Household Survey, (CHS) Northern Ireland
- The Department of Health, which uses data from the Health Survey Northern Ireland
- ONS, Personal well-being in the UK (by country, region, and LGD), which uses data from the Labour Force Survey (LFS)

Although these datasets cover the same topics, the indicators derived from them are calculated and presented in different ways using different geographical/ administrative levels.

The indicators derived from Continuous Household Survey data have recently been designated the official Wellbeing statistics for Northern Ireland, and these are presented here.¹¹ As different datasets, however, have been used to calculate different aspects of the same topic, in addition to the indicators derived from the Continuous Household Survey, the indicators derived from the Health Survey Northern Ireland have also been included here.¹²

The data from:

- The Continuous Household Survey are available by LGD and assembly area
- The Health Survey Northern Ireland are available by HSCT and Northern Ireland deprivation quintile (see COVID-19 People Table 1)

COVID-19 PEOPLE TABLE 1:

Sources of data for the Wellbeing indicators presented in this document

Indicator	Data source	
	Continuous Household Survey (CHS)	Health Survey Northern Ireland
Feelings of loneliness: at least some of the time		
Feelings of loneliness: often/always		
Signs of loneliness		
Life satisfaction: average score		
Life satisfaction: very high levels		
Feeling worthwhile: average score		
Feeling worthwhile: very high levels		
Anxiety: average score		
Anxiety: very low levels		

The ONS indicators, based on data from the Labour Force Survey, are not presented in this document, but a personal well-being interactive map can be accessed online, which provides data by local area (LGDs in Northern Ireland), from 2011/12 to 2021/22.¹³

- 12. Health survey Northern Ireland | Department of Health (health-ni.gov.uk) (Last accessed 7 July 2023)
- Personal well-being in the UK Office for National Statistics (ons.gov.uk) see Section 4 "Personal well-being by local area", Figure 6 (Last accessed 23 March 2023); see also Section 3 "Personal wellbeing by country and region"

^{11.} Wellbeing in Northern Ireland | Northern Ireland Statistics and Research Agency (nisra.gov.uk) (Last accessed 7 July 2023)

SECTION 3

Feelings of Loneliness: At Least Some of the Time

DATA SOURCE

- 2019/20: Information is from NISRA, Loneliness in Northern Ireland: 2019/20, Estimates of Loneliness in NI 2019/20 Tables¹⁴
- 2020/21: Information is from The Executive Office, Wellbeing in Northern Ireland, 1. Loneliness 2020-21¹⁵

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Wellbeing in Northern Ireland 2021/22 report, it states:

"With the lifting of some restrictions, from the month of July 2021, CSU implemented the knock to nudge method. This meant that interviewers could once again call at sampled addresses to encourage people to participate in the survey while adhering to the COVID health and safety advise/restrictions. Interviewers were not permitted to enter the property, only to collect contact information to complete the survey using CATI (Computer assisted Telephone Interviewing) at an agreed time. The achieved response rate was 41% (4,103 individuals), which is a lower response compared with the normal achieved response rate of approximately 55% in face-to-face mode but much higher than the achieved response rate in 2020/21 (16%)."

^{14. 2019/20:} Loneliness in Northern Ireland: 2019/20 | Northern Ireland Statistics and Research Agency (nisra.gov.uk) Table 7b, Estimated Frequency of Loneliness by Geographical Location – 5 Category Split (Last accessed 28 February 2023)

^{15. 2020/21:} Wellbeing in Northern Ireland 2020/21 | The Executive Office (executiveoffice-ni.gov.uk) Loneliness – some of the time (Last accessed 28 February 2023)

The data-publisher advises caution when comparing current data to that collected prior to 2020/21 due to changes in the survey methodology.¹⁶

Profile findings In Belfast LGD, the percentage of people aged 16 years and over who felt lonely at least some of the time:

- In 2020/21, the first full years of the COVID-19 pandemic, was 14.3%
- In 2021/22, the second full year of the pandemic, was 16.7%

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast LGD, the percentage of people aged 16 years and over who felt lonely at least some of the time increased overall by 0.1 percentage points from 16.6% to 16.7%.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, Belfast LGD had a higher percentage of people aged 16 years and over who felt lonely at least some of the time in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 10)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who felt lonely at least some of the time:

- In Belfast LGD increased overall by 0.1 percentage points from 16.6% to 16.7% (a percentage increase of 0.60%)
- In Northern Ireland increased overall by 2.1 percentage points, from 12.0% to 14.1% (a percentage increase of 17.50%; see COVID-19 People Figure 10)

^{16.} Annex A: Technical notes, Data collection and analysis, Continuous Household Survey, Sample, page Wellbeing in Northern Ireland Report 2021-22 (executiveoffice-ni.gov.uk) (Last accessed 7 July 2023)

Comparison with other LGDs

When compared with other LGDs, the percentage of people aged 16 years and over who felt lonely at least some of the time in Belfast LGD was:

- Highest in 2019/20, before the COVID-19 pandemic
- Equal fourth highest in 2020/21, the first full year of the pandemic
- Second highest in 2021/22, the second full year of the pandemic LGDs (see COVID-19 People Figure 10)

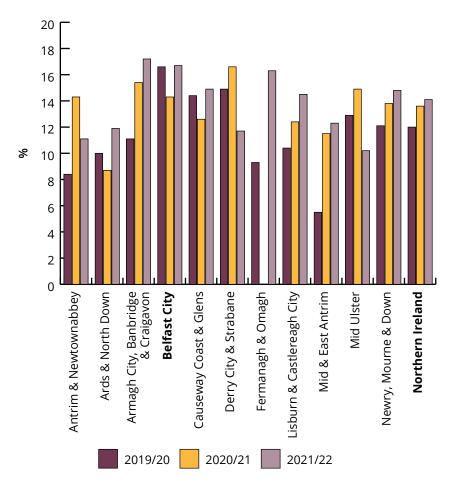
Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who felt lonely at least some of the time:

- Increased overall in 9 LGDs, including Belfast LGD
- Decreased overall in 2 LGDs (see COVID-19 People Figure 10)¹⁷

17. In 2020/21, the sample size in Fermanagh & Omagh LGD was small (<100), therefore, it was not possible to include this LGD in the comparison

COVID-19 PEOPLE FIGURE 10:

Percentage (%) of people aged 16 years and over who felt lonely at least some of the time by LGD and Northern Ireland, 2019/20, 2020/21, and 2021/22



Sources: 2019/20: NISRA: Loneliness in Northern Ireland: 2019/20; Estimates of Loneliness in NI 2019/20 Tables, Table 7b, Estimated Frequency of Loneliness by Geographical Location – 5 Category Split; 2020/21: The Executive Office, Wellbeing in Northern Ireland, 1. Loneliness 2020-21, Loneliness_5_ category, Some of the time; 2021/22: The Executive Office, Wellbeing in Northern Ireland, 1. Loneliness 2021-22, Loneliness_5_category, Some of the time

PEOPLE

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over who felt lonely at least some of the time was higher in Belfast LGD both before and during the first two years of the COVID-19 pandemic; however, the gap between the two narrowed due to a much greater percentage increase in Northern Ireland when compared with a very slight percentage increase overall in Belfast LGD.

Comparison with other LGDs

Of all the LGDs, Belfast LGD had:

- The highest percentage of people aged 16 years and over who felt lonely at least some of the time in 2019/20, before the COVID-19 pandemic
- The equal fourth highest in 2020/21, the first year of the pandemic
- The second highest percentage in 2021/22, the second year of the pandemic

Consequently, there was a change in the relative position of Belfast LGD among LGDs during the pandemic due to:

- A relative decrease in Belfast LGD in the percentage who felt lonely at least some of the time between 2019/20 and 2020/21 and then a relative increase to slightly higher than the pre-pandemic level between 2020/21 and 2021/22
- A relatively large percentage increase in Armagh City, Banbridge & Craigavon LGD, which in 2021/22 had the highest percentage of all LGDs at 17.2%

PEOPLE

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two years of the COVID-19 pandemic, the percentage of people aged 16 years and over who felt lonely at least some of the time:

- Increased in 9 LGDs, including Belfast LGD
- Decreased in 2 LGDs
- Increased in Northern Ireland

For people in Belfast LGD, the first two years of the COVID-19 pandemic were associated with a very slight increase in the percentage of people aged 16 years and over who felt lonely at least some of the time; however, this slight increase occurred in the context of a relatively high percentage before the pandemic.

SECTION 4

Feelings of Loneliness: Often/Always

DATA SOURCE

- 2019/20: Information is from NISRA, Loneliness in Northern Ireland: 2019/20, Estimates of Loneliness in NI 2019/20 Tables¹⁸
- 2020/21: Information is from The Executive Office, Wellbeing in Northern Ireland, 1. Loneliness 2020-21¹⁹
- 2021/22: Information is from The Executive Office, Wellbeing in Northern Ireland, 1. Loneliness 2021-22²⁰

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

 Loneliness in Northern Ireland: 2019/20 | Northern Ireland Statistics and Research Agency (nisra.gov.uk) Table 7b, Estimated Frequency of Loneliness by Geographical Location – 5 Category Split (Last accessed 28 February 2023) с

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Wellbeing in Northern Ireland 2020/21 | The Executive Office (executiveoffice-ni.gov.uk) Loneliness – some of the time (Last accessed 28 February 2023)

^{20.} Wellbeing in Northern Ireland Report 2021/22 | The Executive Office (executiveoffice-ni.gov.uk) (Last accessed 27 March 2023)

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Wellbeing in Northern Ireland 2021/22 report, it states:

"With the lifting of some restrictions, from the month of July 2021, CSU implemented the knock to nudge method. This meant that interviewers could once again call at sampled addresses to encourage people to participate in the survey while adhering to the COVID health and safety advise/restrictions. Interviewers were not permitted to enter the property, only to collect contact information to complete the survey using CATI (Computer assisted Telephone Interviewing) at an agreed time. The achieved response rate was 41% (4,103 individuals), which is a lower response compared with the normal achieved response rate of approximately 55% in face-to-face mode but much higher than the achieved response rate in 2020/21 (16%)."

The data-publisher advises caution when comparing current data to that collected prior to 2020/21 due to changes in the survey methodology. ²¹

PROFILE FINDINGS

In Belfast LGD, the percentage of people aged 16 years and over who felt lonely "often/always":

- In 2020/21, the first full year of the COVID-19 pandemic, was 7.5%
- In 2021/22, the second full year of the pandemic, was 8.3%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast LGD, the percentage of people aged 16 years and over who felt lonely "often/always" decreased overall by 0.4 percentage points from 8.7% to 8.3%.

See pages 29-41, in the Participation Chapter for further detail of the findings before the COVID-19 pandemic.

^{21.} Annex A: Technical notes, Data collection and analysis, Continuous Household Survey, Sample, page Wellbeing in Northern Ireland Report 2021-22 (executiveoffice-ni.gov.uk) (Last accessed 7 July 2023)

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Comparison with Northern Ireland

When compared with Northern Ireland, Belfast LGD had a higher percentage of people aged over 16 years who felt lonely "often/always" in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged over 16 years who felt lonely "often/always":

- In Belfast LGD decreased by 0.4 percentage points from 8.7% to 8.3% (a percentage decrease of 4.60%)
- In Northern Ireland increased by 0.7 percentage points, from 5.4% to 6.1% (a percentage increase of 12.96%; see COVID-19 People Figure 11)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

- The highest percentage of people aged over 16 years who felt lonely "often/always" in 2019/20, before the COVID-19 pandemic, and in 2020/21, the first full year of the pandemic
- The second highest percentage in 2021/22, the second full year of the pandemic (see COVID-19 People Figure 11)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged over 16 years who felt lonely "often/always":

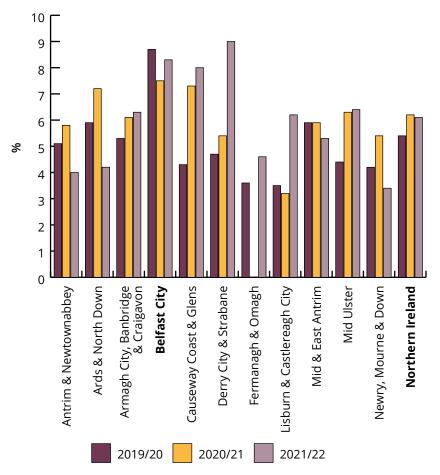
- Increased in 6 LGDs
- Decreased in 5 LGDs, including Belfast LGD (see COVID-19 People Figure 11)²²

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^{22.} In 2020/21, the sample size in Fermanagh & Omagh LGD was small (<100), therefore, it was not possible to include this LGD in the comparison

COVID-19 PEOPLE FIGURE 11:

Percentage (%) of people aged 16 years and over who felt lonely "often/always" by LGD and Northern Ireland, 2019/20, 2020/21, and 2021/22



Sources: 2019/20: NISRA: Loneliness in Northern Ireland: 2019/20; Estimates of Loneliness in NI 2019/20 Tables, Table 7b, Estimated Frequency of Loneliness by Geographical Location – 5 Category Split; 2020/21: The Executive Office: Wellbeing in Northern Ireland, 1. Loneliness 2020-21, Loneliness_5_ category, Often/always; 2021/22: The Executive Office: Wellbeing in Northern Ireland, 1. Loneliness 2021-22, Loneliness_5_category, Often/always

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over who felt lonely "often/always" was higher in Belfast LGD both before and during the first two full years of the COVID-19 pandemic; however, the gap between the two narrowed due to a decrease in the percentage in Belfast LGD whereas there was an increase in the percentage in Northern Ireland.

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Of all the LGDs, Belfast LGD had the highest percentage of people aged 16 years and over who felt lonely "often/always" both before and during the first full year of the COVID-19 pandemic (2020/21), and the second highest percentage during the second full year of the pandemic (2021/22). Consequently, there was a change in the relative position of Belfast LGD among the other LGDs due to a large percentage increase in Derry City & Strabane LGD between 2020/21 and 2021/22 from 5.4% to 9.0%.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over who felt lonely "often/always":

- Increased in 6 LGDs
- Decreased in 5 LGDs, including Belfast LGD
- Increased in Northern Ireland

For people in Belfast LGD, the first two full years of the COVID-19 pandemic has been associated with a slight decrease in the percentage of people aged 16 years and over who felt lonely "often/always"; however, this slight decrease occurred in the context of a relatively high percentage before the-pandemic.

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SECTION 5

Signs of Loneliness

DATA SOURCE

Information is from the Department of Health, Health survey Northern Ireland, Health Survey NI Trend Tables, Loneliness.²³

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for the 2020/21 and 2021/22 survey moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21 and 2021/22.

^{23.} Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 27 March 2023)

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Specific to this indicator

None reported by the data-holder.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9):

- In 2020/21, the first full year of the COVID-19 pandemic, was 27%
- In 2021/22, the second full year of the pandemic, was 25%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9) decreased overall by 1 percentage point from 26% to 25%.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, Belfast LGD had:

- A higher percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9) in 2019/20, before the COVID-19 pandemic, and in 2021/22, the second full year of the pandemic
- The same percentage in 2020/21, the first full year of the pandemic (see COVID-19 People Figure 12)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9) decreased overall:

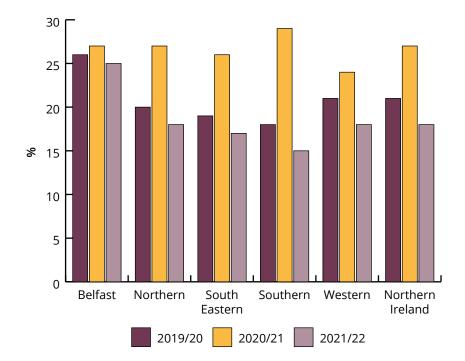
- In Belfast LGD by 1 percentage point, from 26% to 25% (a percentage decrease of 3.85%)
- In Northern Ireland by 3 percentage points, from 21% to 18% (a percentage increase of 14.29%; see COVID-19 People Figure 12)

When compared with other HSCTs, Belfast HSCT had:

- The highest percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9) in 2019/20, before the COVID-19 pandemic, and in 2021/22, the second full year of the pandemic
- The equal second highest percentage in 2020/21, the first full year of the pandemic (see COVID-19 People Figure 12)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9) decreased in all HSCTs, including Belfast HSCT. however, it is noticeable that in all HSCTs and Northern Ireland there was an increase in percentage between 2019/20 and 2020/21, the first full year of the COVID-19 pandemic, and a subsequent decrease in percentage to lower than pre-pandemic levels between 2020/21 and 2021/22, the second full year of the pandemic (see COVID-19 People Figure 12).

COVID-19 PEOPLE FIGURE 12:



Percentage (%) of people aged 16 years and over showing signs of loneliness by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22

Source: Department of Health, Health survey Northern Ireland, Health Survey NI Trend Tables, Loneliness.

There was variation in the percentage of people aged 16 years and over showing signs of loneliness across the quintiles of deprivation in Northern Ireland in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic

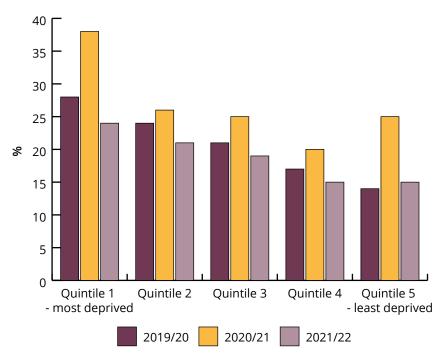
Both before and during the first two full years of the COVID-19 pandemic, people in Quintile 1, the most-deprived areas, had the highest percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9; see COVID-19 People Figure 13).

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9):

- Decreased in Quintiles 1-4, including the most-deprived areas; however, it is noticeable that in these quintiles there was an increase in percentage between 2019/20 and 2020/21, the first year of the COVID-19 pandemic, and a subsequent decrease in percentage to lower than pre-pandemic levels between 2020/21 and 2021/22, the second year of the pandemic
- Increased overall in Quintile 5, the least-deprived areas: however, it is noticeable that in this quintile there was an increase in percentage between 2019/20 and 2020/21, the first year of the COVID-19 pandemic, and a subsequent decrease in percentage but not to pre-pandemic levels between 2020/21 and 2021/22, the second year of the pandemic (see COVID-19 People Figure 13)

COVID-19 PEOPLE FIGURE 13:

Percentage (%) of people aged 16 years and over showing signs of loneliness (a score of 3-5 out of 9) by quintile of deprivation in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health survey Northern Ireland, Health Survey NI Trend Tables, Loneliness.

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over showing signs of loneliness was higher in Belfast HSCT before and during the second full year of the COVID-19 pandemic, but the same during the first full year of the pandemic; however, the gap between the two widened due to a greater percentage decrease overall in Northern Ireland when compared with Belfast HSCT.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the highest percentage of people aged 16 years and over showing signs of loneliness before and during the second full year of the COVID-19 pandemic (2021/22); during the first full year of the pandemic (2020/21), Belfast HSCT had the equal second highest percentage, together with Northern HSCT, due to relatively large increases in the percentages for both Northern HSCT and South Eastern HSCT.

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It is noticeable that in all HSCTs, and Northern Ireland, there was an initial increase in the percentage of people aged 16 years and over showing signs of loneliness between 2019/20 and 2020/21, and a subsequent decrease in the percentage to lower than pre-pandemic levels between 2020/21 and 2021/22 (see COVID-19 People Figure 12).

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast HSCT had the smallest percentage decrease overall in the percentage of people aged 16 years and over showing signs of loneliness at 3.85%
- Southern HSCT had the highest percentage decrease overall at 16.67%
- South Eastern HSCT had the median percentage decrease overall at 10.53%

Between 2020/21 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, although the percentage decreased overall in all HSCTs, the decrease in Belfast HSCT was relatively small and consequently there was no overall change in the relative position of Belfast HSCT among HSCTs.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over showing signs of loneliness decreased overall in all HSCTs, including Belfast HSCT, and Northern Ireland, despite an initial increase during the first year of the pandemic.

For people in Belfast HSCT, the COVID-19 pandemic has been associated with a slight decrease overall in people aged 16 years and over showing signs of loneliness, despite an initial increase.

Inequality with the potential for inequity in Northern Ireland

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over showing signs of loneliness decreased overall in deprivation Quintiles 1-4 but increased overall in Quintile 5, the least-deprived areas.

For Quintiles 1-4, there was an initial increase in the percentage of people aged 16 years and over showing signs of loneliness between 2019/20 and 2020/21, but there was a subsequent decrease in percentage between 2020/21 and 2021/22 to levels lower than those before the pandemic.

- Quintile 1, the most-deprived areas, had the greatest percentage decrease overall by 14.29%
- Quintile 3, the mid-quintile, had the smallest percentage decrease overall by 9.52%
- The median percentage decrease overall was 12.13%

Despite the overall decrease in Quintile 1, the most-deprived areas, after the first two years of the pandemic, Quintile 1 had the highest percentage of people aged 16 years and over showing signs of loneliness, followed by Quintile 2, the second most-deprived areas.

Between 2 and 3 out of every 10 people aged 16 years and over in Quintile 1, the most-deprived areas, showed signs of loneliness compared with between 1 and 2 out of every 10 in Quintile 5, the least-deprived areas, and approaching 2 out of every 10 people in Northern Ireland.

SECTION 6

Life Satisfaction: Average Score

DATA SOURCE

Information is from The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.1 Life Satisfaction 2021-22.²⁴

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Wellbeing in Northern Ireland 2021/22 report, it states:

"With the lifting of some restrictions, from the month of July 2021, CSU implemented the knock to nudge method. This meant that interviewers could once again call at sampled addresses to encourage people to participate in the survey while adhering to the COVID health and safety advise/restrictions. Interviewers were not permitted to enter the property, only to collect contact information to complete the survey using CATI (Computer assisted Telephone Interviewing) at an agreed time. The achieved response rate was 41% (4,103 individuals), which is a lower response compared with the normal achieved response rate of approximately 55% in face-to-face mode but much higher than the achieved response rate in 2020/21 (16%)."

The data-publisher advises caution when comparing current data to that collected prior to 2020/21 due to changes in the survey methodology. ²⁵

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^{24.} Wellbeing in Northern Ireland Report 2021/22 | The Executive Office (executiveoffice-ni.gov.uk) (Last accessed 12 April 2023)

Annex A: Technical notes, Data collection and analysis, Continuous Household Survey, Sample, page Wellbeing in Northern Ireland Report 2021-22 (executiveoffice-ni.gov.uk) (Last accessed 7 July 2023)

PROFILE FINDINGS

In Belfast LGD, the average score out of 10 for life satisfaction in people aged 16 years and over:

- In 2020/21, the first full year of the COVID-19 pandemic, was 7.5
- In 2021/22, the second full year of the pandemic, was 7.3

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast LGD, the average score out of 10 for life satisfaction in people aged 16 years and over decreased overall by 0.1 points, from 7.4 to 7.3.

Differences by Belfast assembly area

There was variation in the average score out of 10 for life satisfaction in people aged 16 years and over across Belfast's assembly areas in:

- 2019/20, before the COVID-19 pandemic
- 2021/22, the second full year of the pandemic²⁶

In 2019/20, before the COVID-19 pandemic, Belfast South had the highest average score for life satisfaction in people aged 16 years and over at 7.7, and Belfast North had the lowest average score at 7.3 (see COVID-19 People Figure 14).

In 2021/22, the second full year of the COVID-19 pandemic, Belfast East and Belfast South had the equal highest average score for life satisfaction in people aged 16 years and over at 7.6, whereas Belfast North and Belfast West had the equal lowest average score at 6.9 (see COVID-19 People Figure 14).

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for life satisfaction in people aged 16 years and over:

- Decreased overall in Belfast North, Belfast South, and Belfast West
- Remained the same overall in Belfast East (see COVID-19 People Figure 14)

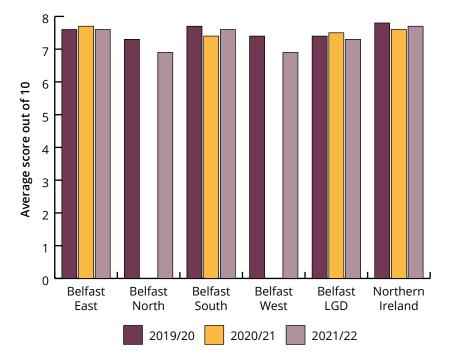
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^{26.} The average score out of 10 for life satisfaction is not available for 2020/21 in Belfast North and in Belfast West due to small sample sizes

PEOPLE

COVID-19 PEOPLE FIGURE 14:

Average score out of 10 for life satisfaction in people aged 16 years and over by Belfast assembly area, Belfast LGD and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.1 Life Satisfaction 2021-22

On pages 16-22, of the Participation Chapter, the ONS data were used to calculate the time series for Life Satisfaction before the COVID-19 pandemic. As the data from the Continuous Household Survey have recently been designated the official source for the Wellbeing indicators for Northern Ireland, we have used these data, presenting a time series from 2019/20, before the COVID-19 pandemic, to 2021/22, covering the first two years of the pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, the average score out of 10 for life satisfaction in people aged 16 years and over in Belfast LGD was lower than that in Northern Ireland in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 14)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for life satisfaction in people aged 16 years and over decreased overall:

- In Belfast LGD by 0.1 points, from 7.4 to 7.3 (a percentage decrease of 1.35%)
- In Northern Ireland by 0.1 points, from 7.8 to 7.7 (a percentage decrease of 1.28%; see COVID-19 People Figure 14)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

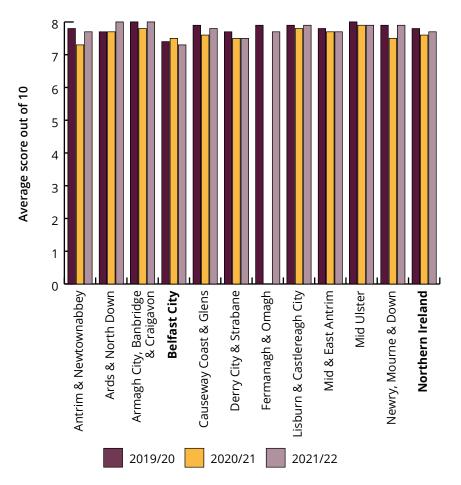
- In 2019/20, before the COVID-19 pandemic, the lowest average score out of 10 for life satisfaction in people aged 16 years and over at 7.4
- In 2020/21, the first full year of the pandemic, the equal second lowest average score at 7.5, together with 2 other LGDs
- In 2021/22, the second full year of the pandemic, the lowest average score at 7.3 (see COVID-19 People Figure 15)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for life satisfaction in people aged 16 years and over:

- Decreased overall in 7 LGDs, including Belfast LGD
- Increased overall in one LGD
- Remained the same overall in 3 LGDs (see COVID-19 People Figure 15)

COVID-19 PEOPLE FIGURE 15:

Average score out of 10 for life satisfaction in people aged 16 years and over by LGD and Northern Ireland, 2019/20, 2020/21, and 2021/22²⁷



Source: The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.1 Life Satisfaction 2021-22

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the average score for life satisfaction in people aged 16 years and over was lower in Belfast LGD before and during the first two full years of the COVID-19 pandemic; the gap between the two widened very slightly due to a slightly greater percentage decrease in Belfast LGD when compared with Northern Ireland.

27. There is no average score for Fermanagh & Omagh LGD in 2020/21 due to a small sample size

Comparison with other LGDs

Of all the LGDs, Belfast LGD had the lowest average score for life satisfaction in people aged 16 years and over before and during the second full year of the COVID-19 pandemic (2021/22); during the first full year of the pandemic (2020/21), Belfast LGD had the equal second lowest average score, together with two other LGDs due to an increase in average score for Belfast LGD compared with a decrease in average score for the two other LGDs. Owing to a subsequent decrease in average score between 2020/21 and 2021/22 in Belfast LGD, overall, there was no change in the relative position of Belfast LGD among LGDs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast LGD had the third greatest percentage decrease in the average score out of 10 for life satisfaction in people aged 16 years and over at 1.35%
- Derry City & Strabane LGD had the greatest percentage decrease at 2.60%, closely followed by Fermanagh & Omagh at 2.53%
- Mid Ulster LGD had the smallest percentage decrease at 1.25%
- Antrim & Newtownabbey LGD and Mid & East Antrim LGD had the median percentage decrease at 1.28%.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the average score for life satisfaction in people aged 16 years and over:

- Decreased overall in 7 LGDs, including Belfast LGD
- Remained the same overall in 3 LGDs
- Increased in one LGD
- Decreased in Northern Ireland

For people aged 16 years and over in Belfast LGD, the COVID-19 pandemic has been associated with a decrease in life satisfaction.

PEOPLE

Inequalities with the potential for inequity

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score for life satisfaction in people aged 16 years and over decreased in Belfast North, Belfast South, and Belfast West.

- Belfast North had the lowest average score in 2019/20 and the equal lowest score in 2021/22, and the second greatest percentage decrease in average score at 5.48%.
- Belfast West not only had the had the second lowest average score in 2019/20 and the equal lowest average score in 2021/22 but also the greatest percentage decrease at 6.76%
- Belfast South had the lowest percentage decrease at 1.30% and the equal highest average score in 2021/22 from being the highest in 2019/20

The percentage decreases in average score for life satisfaction in people aged 16 years and over in Belfast North and Belfast West were 4-5 times greater than those in Belfast LGD and Northern Ireland.

SECTION 7

Life Satisfaction: Very High Levels

DATA SOURCE

Information is from the Department of Health, Health survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Life Satisfaction.²⁸

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for the 2020/21 and 2021/22 survey moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

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^{28.} Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 22 March 2023)

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The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21 and 2021/22.

Specific to this indicator

None reported by the data-holder.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10):

- In 2020/21, the first full year of the COVID-19 pandemic, was 29%
- In 2021/22, the second full year of the pandemic, was 24%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) decreased by 5 percentage points, from 29% to 24%.

See pages 16-22, in the Participation Chapter for further detail of the findings before the COVID-19 pandemic.

Comparison with Northern Ireland

When compared with Northern Ireland, the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) was lower in Belfast HSCT in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 16)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) decreased in:

- Belfast HSCT by 5 percentage points, from 29% to 24% (a percentage decrease of 17.24%)
- Northern Ireland by 10 percentage points, from 40% to 30% (a percentage decrease of 25.00%; see COVID-19 People Figure 16)

Comparison with other HSCTs

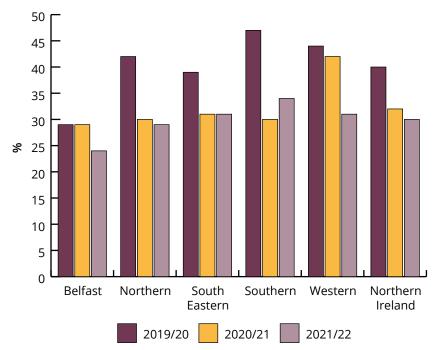
When compared with other HSCTs, Belfast HSCT had the lowest percentages of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 16)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) decreased overall in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 16).

COVID-19 PEOPLE FIGURE 16:

Percentage (%) of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland, Health Survey NI Trend Tables, Life Satisfaction

Differences by deprivation in Northern Ireland

There was variation in the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) across the quintiles of deprivation in Northern Ireland:

- The highest percentage was in Quintile 3 at 44% in 2019/20, in Quintile 2 at 33% in 2020/21, and in Quintiles 2, 4 and 5 at 32% in 2021/22
- The lowest percentage was in Quintile 1 at 34% in 2019/20, in Quintiles 1 and 5 at 31% in 2020/21, and in Quintile 1 at 20% in 2021/22
- The median percentage was in Quintiles 2 and 4 at 42% in 2019/20, in Quintiles 3 and 4 at 32% in 2020/21, and in Quintiles 2, 4 and 5 at 32% in 2021/22 (see COVID-19 People Figure 17)

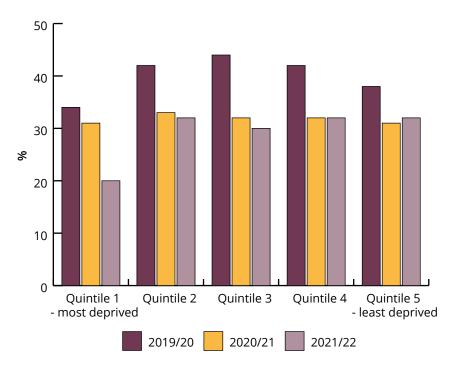
Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) decreased overall in all quintiles of deprivation, however:

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- In Quintiles 1, 2, 3 and 4 the decrease occurred each year
- In Quintile 5, there was a relatively large decrease between 2019/20 and 2020/21, followed by a relatively small increase between 2020/21 and 2021/22, such that the increase did not enable the percentage of people with very high levels of life satisfaction to reach the pre-pandemic level (see COVID-19 People Figure 17)

COVID-19 PEOPLE FIGURE 17:

Percentage (%) of people aged 16 years and over with very high levels of life satisfaction (a score of 9-10 out of 10) by deprivation quintile in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland, Health Survey NI Trend Tables, Life Satisfaction

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Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over with very high levels of life satisfaction was lower in Belfast HSCT before and during the first two full years of the COVID-19 pandemic; however, the gap between the two narrowed due to a greater percentage decrease in Northern Ireland compared with Belfast HSCT.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the lowest percentage of people aged 16 years and over with very high levels of life satisfaction before and during the first two full years of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast HSCT had the smallest percentage decrease in the percentage of people aged 16 years and over with very high levels of life satisfaction at 17.24%
- Northern HSCT had the greatest percentage decrease at 30.95%, closely followed by Western HSCT at 29.55%
- Southern HSCT had the median percentage decrease at 27.66%.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over with very high levels of life satisfaction decreased overall in all HSCTs, including Belfast HSCT, and in Northern Ireland, which may reflect increasing levels of stress in those populations as the pandemic progressed.

For people aged 16 years and over in Belfast HSCT, therefore, the COVID-19 pandemic has been associated with a decrease in life satisfaction.

Inequalities with the potential for inequity in Northern Ireland

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of life satisfaction decreased in all Northern Ireland's deprivation quintiles:

- The greatest percentage decrease was in Quintile 1, the most-deprived areas, at 41.18%
- The smallest percentage decrease was in Quintile 5, the least-deprived areas, at 15.79%
- The median percentage decrease was in Quintile 2, the second mostdeprived areas, and Quintile 4, the second least-deprived areas, at 23.81%

In 2021/22, 2 out of every 10 people aged 16 years and over in Quintile 1, people in the most-deprived areas, had very high levels of life satisfaction compared with 3 or over 3 out of every 10 people aged 16 years and over in Quintiles 2, 3, 4, and 5.

The levels of very high life satisfaction in people aged 16 years and over were 12 percentage points lower in Quintile 1, the most-deprived areas, when compared with Quintile 5, the least-deprived areas.

SECTION 8

Feeling Worthwhile: Average Score

DATA SOURCE

Information is from The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.2 Worthwhile 2021-22.²⁹

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Wellbeing in Northern Ireland 2021/22 report, it states:

"With the lifting of some restrictions, from the month of July 2021, CSU implemented the knock to nudge method. This meant that interviewers could once again call at sampled addresses to encourage people to participate in the survey while adhering to the COVID health and safety advise/restrictions. Interviewers were not permitted to enter the property, only to collect contact information to complete the survey using CATI (Computer assisted Telephone Interviewing) at an agreed time. The achieved response rate was 41% (4,103 individuals), which is a lower response compared with the normal achieved response rate of approximately 55% in face-to-face mode but much higher than the achieved response rate in 2020/21 (16%)."

The data-publisher advises caution when comparing current data to that collected prior to 2020/21 due to changes in the survey methodology. ³⁰

^{29.} Wellbeing in Northern Ireland Report 2021/22 | The Executive Office (executiveoffice-ni.gov.uk) (Last accessed 12 April 2023)

Annex A: Technical notes, Data collection and analysis, Continuous Household Survey, Sample, page Wellbeing in Northern Ireland Report 2021-22 (executiveoffice-ni.gov.uk) (Last accessed 7 July 2023)

PROFILE FINDINGS

In Belfast LGD, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile:

- In 2020/21, the first full year of the COVID-19 pandemic, was 7.9
- In 2021/22, the second full year of the pandemic, was 7.6

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast LGD, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile decreased overall by 0.1 points out of 10, from 7.7 to 7.6.

Differences by Belfast assembly area

There was variation in the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile across Belfast's assembly areas in:

- 2019/20, before the COVID-19 pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 18)³¹

In 2019/20, before the COVID-19 pandemic:

- Belfast East, Belfast South, and Belfast West had the equal highest average score for people aged 16 years and over feeling the things they do in life are worthwhile at 7.8
- Belfast North had the lowest average score at 7.7 (see COVID-19 People Figure 18)

In 2021/22, the second full year of the COVID-19 pandemic:

- Belfast East had the highest average score for people aged 16 years and over feeling the things they do in life are worthwhile at 7.8
- Belfast North had the lowest score at 7.4 (see COVID-19 People Figure 18)

31. The average score out of 10 for people feeling the things they do in life are worthwhile is not available for 2020/21 in Belfast North and in Belfast West due to small sample sizes

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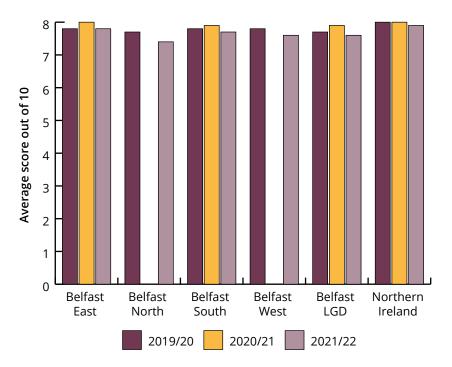
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Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile:

- Decreased overall in Belfast North, Belfast South, and Belfast West
- Remained the same overall in Belfast East (see COVID-19 People Figure 18)

COVID-19 PEOPLE FIGURE 18:

Average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile by Belfast assembly area, Belfast LGD, and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.2 Worthwhile 2021-22

See pages 146-152, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile in Belfast LGD was lower in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 18)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile decreased:

- In Belfast LGD by 0.1 points out of 10, from 7.7 to 7.6 (a percentage decrease of 1.30%)
- In Northern Ireland by 0.1 points out of 10, from 8.0 to 7.9 (a percentage decrease of 1.25%; see COVID-19 People Figure 18)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

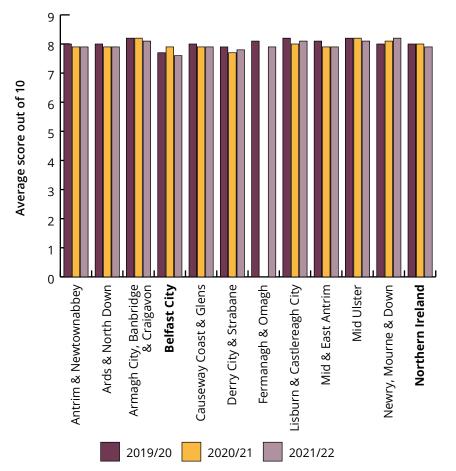
- In 2019/20, before the COVID-19 pandemic, the lowest average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile at 7.7
- In 2020/21, the first full year of the pandemic, the equal second lowest average score at 7.9, together with 4 other LGDs
- In 2021/22, the second full year of the pandemic, the lowest average score at 7.6 (see COVID-19 People Figure 19)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile:

- Decreased in 10 LGDs, including Belfast LGD
- Increased in one LGD (see COVID-19 People Figure 19)

COVID-19 PEOPLE FIGURE 19:

Average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile by LGD and Northern Ireland, 2019/20, 2020/21, and 2021/22³²



Source: The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.2 Worthwhile 2021-22

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the average score for people aged 16 years and over feeling the things they do in life are worthwhile was lower in Belfast LGD before and during the first two full years of the COVID-19 pandemic; the gap between the two widened very slightly due to a slightly greater percentage decrease in Belfast LGD when compared with Northern Ireland.

32. There is no average score for Fermanagh & Omagh LGD in 2020/21 due to a small sample size

Comparison with other LGDs

Of all the LGDs, Belfast LGD had the lowest average score for people aged 16 years and over feeling the things they do in life are worthwhile before and during the second full year of the COVID-19 pandemic (2021/22); during the first full year of the pandemic (2020/21), Belfast LGD had the equal second lowest score, together with four other LGDs due to an increase in average score for Belfast LGD compared with a decrease in average score for the four other LGDs. Owing to a subsequent decrease in average score between 2020/21 and 2021/22 in Belfast LGD, there was no overall change in the relative position of Belfast LGD among LGDs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast LGD had the third greatest percentage decrease in the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile at 1.30%
- Fermanagh & Omagh LGD and Mid & East Antrim LGD had the greatest percentage decrease at 2.47%
- The median percentage decrease was 1.25%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the average score out of 10 for people aged 16 years and over feeling the things they do in life are worthwhile:

- Decreased overall in 10 LGDs, including Belfast LGD
- Decreased in Northern Ireland
- Increased in one LGD

For people aged 16 years and over in Belfast LGD, the COVID-19 pandemic has been associated with a decrease in feeling that the things they do in life are worthwhile.

PEOPLE

Inequalities with the potential for inequity

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score for people aged 16 years and over feeling the things they do in life are worthwhile decreased in Belfast North, Belfast South, and Belfast West.

- Belfast North not only had the lowest average score in 2019/20 and in 2021/22, but also the largest percentage decrease in average score at 3.90%.
- Belfast West had the median percentage decrease at 2.56%, and the second lowest score in 2021/22 from being equal highest in 2019/20
- Belfast South had the lowest percentage decrease at 1.28% and the second highest score in 2021/22 from being equal highest in 2019/20

SECTION 9

Feeling Worthwhile: Very High Levels

DATA SOURCE

Information is from the Department of Health, Health survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Worthwhile.³³

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for the 2020/21 and 2021/22 survey moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21 and 2021/22.

Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 23 March 2023)

Specific to this indicator

None reported by the data-holder.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10):

- In 2020/21, the first full year of the COVID-19 pandemic, was 41%
- In 2021/22, the second full year of the pandemic, was 29%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) decreased by 9 percentage points, from 38% to 29%.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) was:

- Lower in Belfast HSCT in 2019/20, before the COVID-19 pandemic, and 2021/22, the second full year of the pandemic
- Higher in Belfast HSCT in 2020/21, the first full year of the pandemic (see COVID-19 People Figure 20)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) decreased in:

- Belfast HSCT by 9 percentage points, from 38% to 29% (a percentage decrease of 23.68%)
- Northern Ireland by 11 percentage points, from 45% to 34% (a percentage decrease of 24.44%; see COVID-19 People Figure 20)

PEOPLE

Comparison with other HSCTs

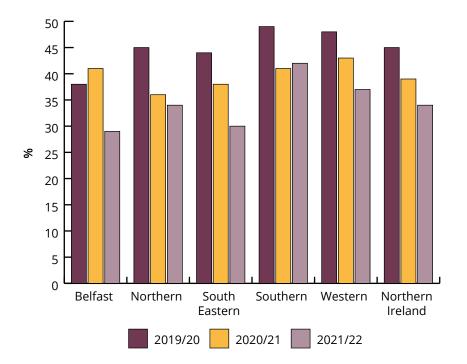
When compared with other HSCTs, Belfast HSCT had:

- The lowest percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) in 2019/20, before the COVID-19 pandemic, and in 2021/22, the second full year of the pandemic
- The equal second highest percentage in 2020/21, the first full year of the pandemic (see COVID-19 People Figure 20)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) decreased overall in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 20).

COVID-19 PEOPLE FIGURE 20:

Percentage (%) of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland, Health Survey NI Trend Tables, Worthwhile

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Differences by deprivation in Northern Ireland

There was variation in the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) across the quintiles of deprivation in Northern Ireland:

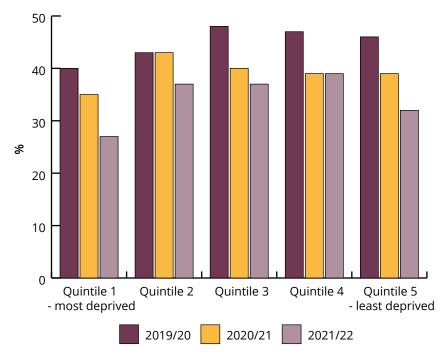
- The highest percentage was in Quintile 3 at 48% in 2019/20, in Quintile 2 at 43% in 2020/21, and in Quintile 4 at 39% in 2021/22
- The lowest percentage was in Quintile 1, the most-deprived areas, at 40% in 2019/20, at 35% in 2020/21 and at 27% in 2021/22
- The median percentage was in Quintile 5 at 46% in 2019/20, in Quintiles 4 and 5 at 39% in 2020/21 and in Quintiles 2 and 3 at 37% in 2021/22 (see COVID-19 People Figure 21)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) decreased overall in all quintiles of deprivation, however:

- In Quintiles 1, 3 and 5 the decrease occurred each year
- In Quintile 2, despite the overall decrease, the percentage remained the same between 2019/20 and 2020/21
- In Quintile 4, despite the overall decrease, the percentage remained the same between 2020/21 and 2021/22 (see COVID-19 People Figure 21)

COVID-19 PEOPLE FIGURE 21:

Percentage (%) of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) by deprivation quintile in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland, Health Survey NI Trend Tables, Worthwhile

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over with very high levels of feeling worthwhile (a score of 9-10 out of 10) was lower in Belfast HSCT before and during the second full year of the COVID-19 pandemic (2021/22), however, it was higher during the first full year of the pandemic (2020/21). Overall, the gap between Belfast HSCT and Northern Ireland narrowed slightly due to a slightly greater percentage decrease in Northern Ireland when compared with Belfast HSCT.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the lowest percentage of people aged 16 years and over with very high levels of feeling worthwhile before and during the second full year of the COVID-19 pandemic (2021/22); however, during the first full year of the pandemic (2020/21), Belfast HSCT had the equal second highest percentage. Overall, although there was no change in the relative position of Belfast HSCT among HSCTs,

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during the first full year of the pandemic there appears to have been a temporary increase in feeling worthwhile which resulted in a temporary change in position from Belfast HSCT having the lowest value to Belfast HSCT having the equal second highest.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast HSCT had the median percentage decrease in the percentage of people aged 16 years and over with very high levels of feeling worthwhile at 23.68%
- South Eastern HSCT had the greatest percentage decrease at 31.82%
- Southern HSCT had the smallest percentage decrease at 14.29%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over with very high levels of feeling worthwhile decreased overall in all HSCTs, including Belfast HSCT, and in Northern Ireland, which may reflect increasing levels of stress in those populations as the pandemic progressed.

For people aged 16 years and over in Belfast HSCT, the COVID-19 pandemic has been associated with a decrease in feeling worthwhile.

Inequalities with the potential for inequity in Northern Ireland

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very high levels of feeling worthwhile decreased in all Northern Ireland's deprivation quintiles:

- The greatest percentage decrease was in Quintile 1, the most-deprived areas, at 32.50%
- The smallest percentage decrease was in Quintile 2, the second most-deprived areas, at 13.95%
- The median percentage decrease was in Quintile 3 at 22.92%

In 2021/22, approaching 3 out of every 10 people aged 16 years and over in Quintile 1, people in the most-deprived areas, had very high levels of feeling worthwhile compared with over 3 out of every 10 people aged 16 years and over in Quintile 5, and almost 4 out of every 10 people in Quintile 4.

The percentage of people aged 16 years and over with very high levels of feeling worthwhile was 5 percentage points lower in Quintile 1, the most-deprived areas, when compared with Quintile 5, the least-deprived areas, and 12 percentage points lower in Quintile 1 when compared with Quintile 4, the second least-deprived areas.

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SECTION 10

Anxiety: Average Score

DATA SOURCE

Information is from The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.4 Anxiety 2021-22.³⁴

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21 and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Wellbeing in Northern Ireland 2021/22 report, it states:

"With the lifting of some restrictions, from the month of July 2021, CSU implemented the knock to nudge method. This meant that interviewers could once again call at sampled addresses to encourage people to participate in the survey while adhering to the COVID health and safety advise/restrictions. Interviewers were not permitted to enter the property, only to collect contact information to complete the survey using CATI (Computer assisted Telephone Interviewing) at an agreed time. The achieved response rate was 41% (4,103 individuals), which is a lower response compared with the normal achieved response rate of approximately 55% in face-to-face mode but much higher than the achieved response rate in 2020/21 (16%)."

The data-publisher advises caution when comparing current data to that collected prior to 2020/21 due to changes in the survey methodology. ³⁵

^{34.} Wellbeing in Northern Ireland Report 2021/22 | The Executive Office (executiveoffice-ni.gov.uk) (Last accessed 12 April 2023)

Annex A: Technical notes, Data collection and analysis, Continuous Household Survey, Sample, page Wellbeing in Northern Ireland Report 2021-22 (executiveoffice-ni.gov.uk) (Last accessed 7 July 2023)

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PROFILE FINDINGS

In Belfast LGD, the average score out of 10 for anxiety in people aged 16 years and over:

- In 2020/21, the first full year of the COVID-19 pandemic, was 3.4
- In 2021/22, the second full year of the pandemic, was 3.5

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast LGD, the average score out of 10 for anxiety in people aged 16 years and over increased overall by 0.2 points, from 3.3 to 3.5.

Differences by Belfast assembly area

There was variation in the average score out of 10 for anxiety in people aged 16 years and over across Belfast's assembly areas in:

- 2019/20, before the COVID-19 pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 22)³⁶

In 2019/20, before the COVID-19 pandemic:

- Belfast East and Belfast South had the lowest average score for anxiety in people aged 16 years and over at 3.0
- Belfast West had the highest average score at 3.9 (see COVID-19 People Figure 22)

In 2021/22, the second full year of the COVID-19 pandemic:

- Belfast South had the lowest average score for anxiety in people aged 16 years and over at 3.2
- Belfast West had the highest average score at 3.9 (see COVID-19 People Figure 22)

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^{36.} The average score out of 10 for anxiety is not available for 2020/21 in Belfast North and in Belfast West due to small sample sizes

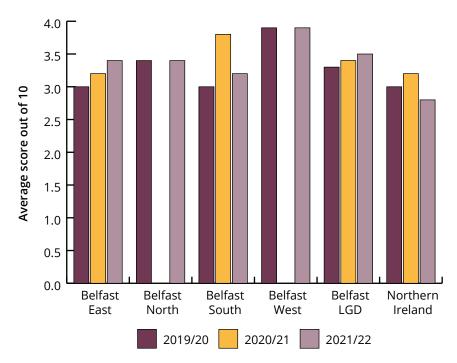
PEOPLE

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for anxiety in people aged 16 years and over:

- Increased overall in Belfast East and Belfast South
- Remained the same overall in Belfast North and Belfast West (see COVID-19 People Figure 22)

COVID-19 PEOPLE FIGURE 22:

Average score out of 10 for anxiety in people aged 16 years and over by Belfast assembly area, Belfast LGD, and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.4 Anxiety 2021-22

See pages 153-158, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, the average score out of 10 for anxiety in people aged 16 years and over in Belfast LGD was higher in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 22)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for anxiety in people aged 16 years and over:

- Increased in Belfast LGD by 0.2 points out of 10, from 3.3 to 3.5 (a percentage increase of 6.06%)
- Decreased overall in Northern Ireland by 0.2 points out of 10, from 3.0 to 2.8 (a percentage decrease of 6.67%; see COVID-19 People Figure 22)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

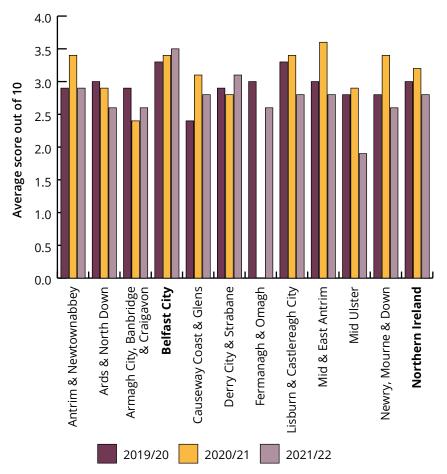
- In 2019/20, before the COVID-19 pandemic, the equal highest average score out of 10 for anxiety in people aged 16 years and over, together with Lisburn & Castlereagh LGD, at 3.3
- In 2020/21, the first full year of the pandemic, the equal second highest average score at 3.4, together with 3 other LGDs
- In 2021/22, the second full year of the pandemic, the highest average score at 3.5 (see COVID-19 People Figure 23)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score out of 10 for anxiety in people aged 16 years and over:

- Decreased overall in 7 LGDs,
- Increased overall in 3 LGDs, including Belfast LGD
- Remained the same overall in one LGD (see COVID-19 People Figure 23)

COVID-19 PEOPLE FIGURE 23:

Average score out of 10 for anxiety in people aged 16 years and over by LGD and Northern Ireland, 2019/20, 2020/21, and 2021/22³⁷



Source: The Executive Office, Wellbeing in Northern Ireland Report 2021/22, 3.4 Anxiety 2021-22

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the average score out of 10 for anxiety in people aged 16 years and over was higher in Belfast LGD before and during the first two full years of the COVID-19 pandemic; the gap between the two widened due to a percentage increase in Belfast LGD compared with a percentage decrease in Northern Ireland.

37. There is no average score for anxiety in Fermanagh & Omagh LGD in 2020/21 due to a small sample size

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Comparison with other LGDs

Of all the LGDs, Belfast LGD had the equal highest average score out of 10 for anxiety in people aged 16 years and over before and during the second full year of the COVID-19 pandemic (2021/22); during the first full year of the pandemic (2020/21), Belfast LGD had the equal second highest score, together with three other LGDs due to an increase in average score for all 4 LGDs. Between 2020/21 and 2021/22, owing to a further increase in average score in Belfast LGD, compared with a decrease in average score in 8 LGDs, there was no change overall in the relative position of Belfast LGD among LGDs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Of the 3 LGDs that had a percentage increase in the average score out of 10 for anxiety in people aged 16 years and over, Belfast LGD had the smallest percentage increase at 6.06%, and Causeway Coast & Glens had the greatest percentage increase at 16.67%
- Of the 7 LGDs that had a percentage decrease, Mid Ulster LGD had the greatest percentage decrease at 32.14% and Mid & East Antrim had the smallest percentage decrease at 6.67%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the average score for anxiety in people aged 16 years and over:

- Increased overall in 3 LGDs, including Belfast LGD
- Decreased overall in 7 LGDs
- Remained the same overall in one LGD
- Decreased in Northern Ireland

For people aged 16 years and over in Belfast LGD, the COVID-19 pandemic has been associated with an increase in anxiety.

Inequalities with the potential for inequity

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the average score for anxiety in people aged 16 years and over increased in Belfast East by 13.33% and in Belfast South 6.67%, whereas it remained the same in Belfast North and Belfast West, however: Belfast West had the highest average score for anxiety in 2019/20 and in 2021/22 Belfast North had the second highest average score in 2019/20 and the equal second highest average score in 2021/22

In 2021/22, the average score for anxiety in people aged 16 years and over in Belfast West was 1.1 points out of 10 higher than that in people aged 16 years and over Northern Ireland.

PEOPLE

SECTION 11

Anxiety: Very Low Levels

DATA SOURCE

Information is from the Department of Health, Health survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Anxiety.³⁸

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for the 2020/21 and 2021/22 survey moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21 and 2021/22.

 Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 22 March 2023)

BELFAST: Profiling Health, Wellbeing & Prosperity

Specific to this indicator

None reported by the data-holder.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10):

- In 2020/21, the first full year of the COVID-19 pandemic, was 35%
- In 2021/22, the second full year of the pandemic, was 32%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) decreased by 5 percentage points, from 37% to 32%.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) was lower in Belfast HSCT in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 24)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) decreased in:

- Belfast HSCT by 5 percentage points, from 37% to 32% (a percentage decrease of 13.51%)
- Northern Ireland by 6 percentage points, from 47% to 41% (a percentage decrease of 12.77%; see COVID-19 People Figure 24)

Comparison with other HSCTs

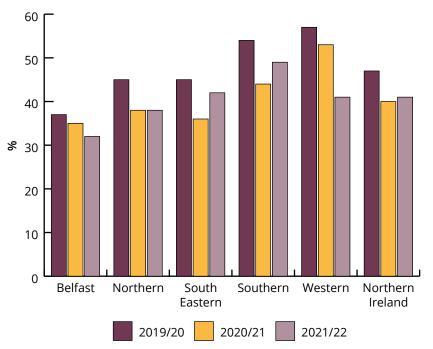
When compared with other HSCTs, Belfast HSCT had the lowest percentages of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 24)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering first two full years of the pandemic, the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) decreased overall in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 24).

COVID-19 PEOPLE FIGURE 24:

Percentage (%) of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland, Health Survey NI Trend Tables, Anxiety

Differences by deprivation in Northern Ireland

There was variation in the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) across the quintiles of deprivation in Northern Ireland:

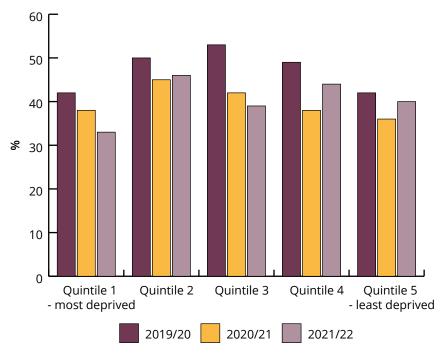
- The highest percentage was in Quintile 3 at 53% in 2019/20, and in Quintile 2 at 45% in 2020/21 and at 46% in 2021/22
- The lowest percentage was in Quintiles 1 and 5 at 42% in 2019/20, Quintile 5 at 36% in 2020/21, and Quintile 1 at 33% in 2021/22
- The median percentage was in Quintile 4 at 49% in 2019/20, Quintiles 1 and 4 at 38% in 2020/21, and Quintile 5 at 40% in 2021/22 (see COVID-19 People Figure 25)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) decreased overall in all quintiles of deprivation, however:

- In Quintiles 1 and 3 the decrease was linear
- In Quintiles 2, 4 and 5, there was a decrease between 2019/20 and 2020/21, followed by an increase between 2020/21 and 2021/22; however, these increases in the percentages of people aged 16 years and over with very low levels of anxiety did not reach the respective pre-pandemic levels of anxiety (see COVID-19 People Figure 25)

COVID-19 PEOPLE FIGURE 25:

Percentage (%) of people aged 16 years and over with very low levels of anxiety (a score of 0-1 out of 10) by deprivation quintile in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland, Health Survey NI Trend Tables, Anxiety

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over with very low levels of anxiety was lower in Belfast HSCT before and during the first two full years of the COVID-19 pandemic; however, the gap between the two widened due to a greater percentage decrease in Belfast HSCT when compared with Northern Ireland.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the lowest percentage of people aged 16 years and over with very low levels of anxiety before and during the first two full years of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs. Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast HSCT had the median percentage decrease in the percentage of people aged 16 years and over with very low levels of anxiety at 13.51%
- Western HSCT had the greatest percentage decrease at 28.07%
- South Eastern HSCT had the smallest percentage decrease at 6.67%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over with very low levels of anxiety decreased overall in:

- All HSCTs, including Belfast HSCT
- Northern Ireland

This may reflect increasing levels of stress in those populations as the pandemic progressed.

For people aged 16 years and over in Belfast HSCT, the COVID-19 pandemic has been associated with an increase in anxiety levels.

Inequalities with the potential for inequity in Northern Ireland

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over with very low levels of anxiety decreased in all Northern Ireland's deprivation quintiles:

- The greatest percentage decreases were in Quintile 3 and in Quintile 1, the latter being the most-deprived areas (26.42% and 21.43%, respectively)
- The smallest percentage decrease was in Quintile 5, the least-deprived areas, at 4.76%
- The median percentage decrease was in Quintile 4 at 10.20%

In 2021/22, over 3 out of every 10 people aged 16 years and over in Quintile 1, the most-deprived areas, had very low levels of anxiety compared with 4 out of every 10 people aged 16 years and over in Quintile 5, the least-deprived areas, and in Quintile 3, the mid-quintile; however, between 4 and 5 out of every 10 people aged 16 years and over in Quintiles 2 and 4 had very low levels of anxiety.

SECTION 12

Standardised Prescription Rate for Mood and Anxiety

DATA SOURCE

Information is from the Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Prescription Rate – Mood and Anxiety.³⁹

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Calendar years 2020, and 2021

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Introduction to the Health Inequalities Annual Report 2023, it states:

"The most recent figures reported in this release typically include data from 2020 and 2021, and therefore reflect to an extent, the impact of the coronavirus (COVID-19) pandemic. In particular, figures related to hospital admissions, dental indicators and childhood obesity have been significantly impacted due to service restrictions."⁴⁰

39. Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 31 March 2023)

 Introduction, page 7 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 6 July 2023) Ľ

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In Belfast LGD, the standardised prescription rate for mood and anxiety:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 250 persons prescribed per 1,000 population
- In 2021, covering the first calendar year of the pandemic, was 254 per 1,000 population (see COVID-19 People Figure 26)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the COVID-19 pandemic, in Belfast LGD, the standardised prescription rate for mood and anxiety increased overall by 1 person prescribed per 1,000 population from 253 to 254 persons prescribed per 1,000 population (see COVID-19 People Figure 26).

In deprived areas of Belfast LGD, the standardised prescription rate for mood and anxiety:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 346 persons prescribed per 1,000 population
- In 2021, covering the first calendar year of the pandemic, was 351 persons prescribed per 1,000 population (see COVID-19 People Figure 26)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, in deprived areas of Belfast LGD, the standardised prescription rate for mood and anxiety increased overall by 2 per 1,000 population from 349 to 351 persons prescribed per 1,000 population (see COVID-19 People Figure 26).

In Belfast HSCT, the standardised prescription rate for mood and anxiety:

- In 2020, covering the first 9 months of the COVID-19 pandemic, was 240 persons prescribed per 1,000 population
- In 2021, covering the first calendar year of the pandemic, was 244 persons prescribed per 1,000 population (see COVID-19 People Figure 26)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the COVID-19 pandemic, in Belfast HSCT, the standardised prescription rate for mood and anxiety remained the same at 244 persons prescribed per 1,000 population (see COVID-19 People Figure 26).

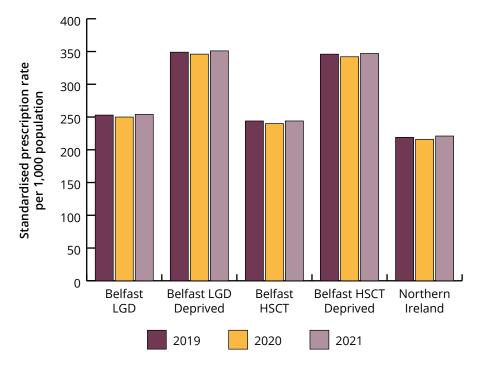
In deprived areas of Belfast HSCT, the standardised prescription rate for mood and anxiety:

- In 2020, covering the first 9 months of the pandemic, was 342 persons prescribed per 1,000 population
- In 2021, covering the first calendar year of the COVID-19 pandemic, and 347 persons prescribed per 1,000 population (see COVID-19 People Figure 26)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, in deprived areas of Belfast HSCT, the standardised prescription rate for mood and anxiety increased overall by 1 person prescribed per 1,000 population from 346 to 347 persons prescribed per 1,000 population (see COVID-19 People Figure 26).

COVID-19 PEOPLE FIGURE 26:

Standardised prescription rate for mood and anxiety, persons prescribed per 1,000 population, by Belfast LGD, Belfast LGD Deprived, Belfast HSCT, Belfast HSCT Deprived, and Northern Ireland, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Indicator, Standardised Prescription Rate – Mood and Anxiety

Differences by Belfast DEAs

There was variation in the standardised prescription rate for mood and anxiety across Belfast's DEAs.

In 2020, covering the first 9 months of the COVID-19 pandemic, the standardised prescription rate for mood and anxiety was:

- Equal highest in Black Mountain DEA and Oldpark DEA at 328 persons prescribed per 1,000 population, closely followed by Court DEA at 327 persons prescribed per 1,000 population
- Lowest in Botanic DEA at 180 persons prescribed per 1,000 population (see COVID-19 People Figure 27)

The median was 250 persons prescribed per 1,000 population.

In 2021, covering the first calendar year of the COVID-19 pandemic, the standardised prescription rate for mood and anxiety was:

- Highest in Oldpark DEA at 334 persons prescribed per 1,000 population
- Lowest in Botanic DEA at 184 persons prescribed per 1,000 population (see COVID-19 People Figure 27)

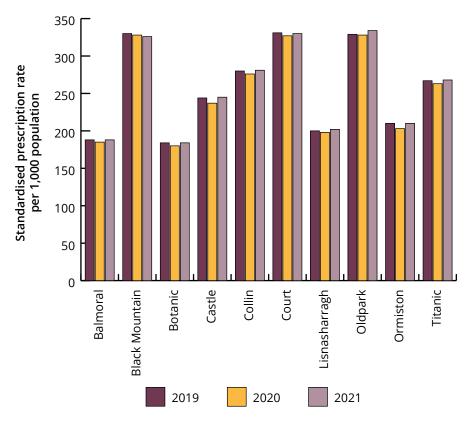
The median was 257 persons prescribed per 1,000 population.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the standardised prescription rate for mood and anxiety:

- Increased overall in 5 DEAs
- Decreased overall in 2 DEAs
- Remained the same overall in 3 DEAs (see COVID-19 People Figure 27)

COVID-19 PEOPLE FIGURE 27:

Standardised prescription rate for mood and anxiety, persons prescribed per 1,000 population, by Belfast DEA, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Indicator, Standardised Prescription Rate – Mood and Anxiety

See pages 159-166, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, the standardised prescription rates for mood and anxiety in Belfast LGD, in deprived areas of Belfast LGD, in Belfast HSCT, and in deprived areas of Belfast HSCT were higher than that in Northern Ireland in:

- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 26)

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Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the standardised prescription rate for mood and anxiety:

- In Belfast LGD increased overall by 1 person prescribed per 1,000 population, from 253 to 254 per 1,000 population (a percentage increase of 0.40%)
- In deprived areas of Belfast LGD increased overall by 2 persons prescribed per 1,000 population, from 349 to 351 per 1,000 population (a percentage increase of 0.57%)
- In Belfast HSCT remained the same overall at 244 persons prescribed per 1,000 population
- In deprived areas of Belfast HSCT increased overall by 1 person prescribed per 1,000 population, from 346 to 347 persons prescribed per 1,000 population (a percentage increase of 0.29%)
- In Northern Ireland increased overall by 2 persons prescribed per 1,000 population, from 219 to 221 persons prescribed per 1,000 population (a percentage increase of 0.91%; see COVID-19 People Figure 26)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

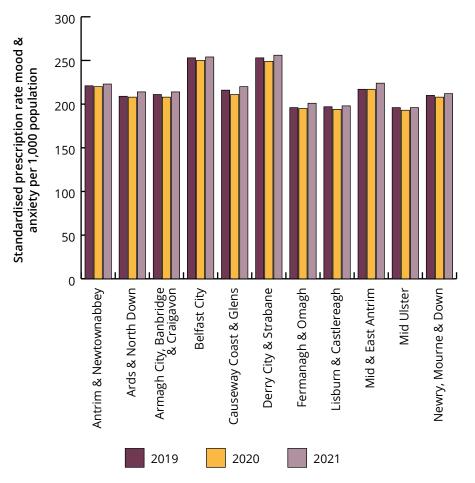
- The highest standardised prescription rate for mood and anxiety in 2020, covering the first 9 months of the COVID-19 pandemic
- The second highest in 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 28)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the standardised prescription rate for mood and anxiety:

- Increased overall in 10 LGDs, including Belfast LGD
- Remained the same overall in one LGD (see COVID-19 People Figure 28)

COVID-19 PEOPLE FIGURE 28:

Standardised prescription rate for mood and anxiety, persons prescribed per 1,000 population, by LGD, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Indicator, Standardised Prescription Rate – Mood and Anxiety

Comparison with other HSCTs

When compared with other HSCTs, Belfast HSCT had the highest standardised prescription rate for mood and anxiety in:

- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 29)

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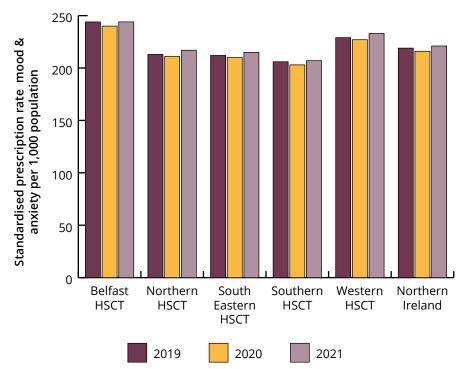
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Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the standardised prescription rate for mood and anxiety:

- Increased overall in 4 HSCTs
- Remained the same overall in Belfast HSCT (see COVID-19 People Figure 29)

COVID-19 PEOPLE FIGURE 29:

Standardised prescription rate for mood and anxiety, persons prescribed per 1,000 population by HSCT, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables - by Indicator, Standardised Prescription Rate - Mood and Anxiety

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, before and during the first year and 9 months of the COVID-19 pandemic, the standardised prescription rate for mood and anxiety was higher in:

- Belfast LGD than that in Northern Ireland
- · Belfast HSCT than that in Northern Ireland

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the gap in the standardised prescription rate for mood and anxiety narrowed slightly between:

- Belfast LGD and Northern Ireland, with a slightly greater percentage increase in Northern Ireland
- Belfast HSCT and Northern Ireland, with a slight percentage increase in Northern Ireland whereas Belfast HSCT remained the same

In comparison with Northern Ireland, before and during the first year and 9 months of the COVID-19 pandemic, the standardised prescription rate for mood and anxiety was higher in:

- Deprived areas of Belfast LGD than that in Northern Ireland
- Deprived areas of Belfast HSCT than that in Northern Ireland

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the gap in the standardised prescription rate for mood and anxiety narrowed slightly between:

- Deprived areas in Belfast LGD and Northern Ireland, with a slightly greater percentage increase in Northern Ireland
- Deprived areas in Belfast HSCT and Northern Ireland, with a slightly greater percentage increase in Northern Ireland

Comparison with other LGDs

Of all the LGDs, Belfast LGD had:

- The equal highest standardised prescription rate for mood and anxiety before the COVID-19 pandemic (2019), together with Derry City & Strabane LGD
- The highest during the first 9 months of the pandemic (2020)
- The second highest during the first calendar year of the pandemic (2021)
- Thus, there was a slight change in the relative position of Belfast LGD among LGDs overall with a greater percentage increase in Derry City & Strabane LGD leading to that LGD being the highest from it being equal highest with Belfast LGD, and Belfast LGD becoming the second highest.

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Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the COVID-19 pandemic:

- Belfast LGD had the lowest percentage increase in the standardised prescription rate for mood and anxiety at 0.40%
- The greatest percentage increase was in Mid & East Antrim LGD at 3.23%
- The median percentage increase was 1.31%

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the highest standardised prescription rate for mood and anxiety before the COVID-19 pandemic and during the first year and 9 months of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the standardised prescription rate for mood and anxiety remained the same overall in Belfast HSCT whereas it increased in the 4 other HSCTs.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first year and 9 months of the COVID-19 pandemic, the standardised prescription rate for mood and anxiety increased in:

- Increased in 10 LGDs, including Belfast LGD
- · Remained the same overall in one LGD
- Increased in 4 HSCTs
- Remained the same overall in Belfast HSCT
- Increased in Northern Ireland

For people in Belfast LGD, the first year and 9 months of the COVID-19 pandemic have been associated with a slight increase in the standardised prescription rate for mood and anxiety. This finding agrees with the finding that the average score for anxiety increased in Belfast LGD from 2019/20 to 2021/22 (see page 000).

For people in Belfast HSCT, the first year and 9 months of the COVID-19 pandemic were associated with no overall change in the standardised prescription rate for mood and anxiety. This finding contrasts slightly with the finding that the percentage of people with very low levels of anxiety in Belfast HSCT decreased between 2019/20 and 2021/22 (see page 000). Possible explanations, include:

- The prescription rate may not reflect levels of anxiety due to reduced access to primary care services during the early phases of the pandemic
- Some people may not have sought help for anxiety during the pandemic through fear of infection

Inequalities with the potential for inequity

From before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the standardised prescription rate for mood and anxiety was higher in:

- Deprived areas of Belfast LGD than that in Belfast LGD
- Deprived areas of Belfast HSCT than that in Belfast HSCT

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the COVID-19 pandemic, the gap in the standardised prescription rate for mood and anxiety widened very slightly between:

- Deprived areas of Belfast LGD than that in Belfast LGD, with a slightly greater percentage increase in deprived areas of Belfast LGD
- Deprived areas of Belfast HSCT than that in Belfast HSCT, with a slight percentage increase in deprived areas of Belfast HSCT whereas Belfast HSCT remained the same overall

For people in the deprived areas of Belfast LGD and Belfast HSCT, the first year and 9 months of the COVID-19 pandemic have been associated with a slight increase in the standardised prescription rate for mood and anxiety.

In 2019, 2020, and 2021, the three DEAs with the highest standardised prescription rates for mood and anxiety were Black Mountain DEA, Court DEA, and Oldpark DEA:

- In 2019, Court DEA had the highest rate, Black Mountain the second highest, and Oldpark DEA the third highest
- In 2020, Black Mountain and Oldpark DEAs had the equal highest rates, and Court the third highest
- In 2021, Oldpark DEA had the highest rate, Court DEA had the second highest, and Black Mountain DEA had the third highest

During the first year and 9 months of the COVID-19 pandemic:

- Oldpark DEA and Lisnasharragh DEA had the greatest percentage increases in the standardised prescription rate for mood and anxiety at 1.52%, and 1.00%, respectively
- Black Mountain DEA and Court DEA were the only DEAs in which there was a percentage decrease at 1.21%, and 0.30%, respectively

SECTION 13

People aged 18 years and over who drank alcohol

DATA SOURCE

Information is from the Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Alcohol prevalence & limits.⁴¹

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for 2020/21 and 2021/22 moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

^{41.} Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 20 February 2023)

The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21

Specific to this indicator

and 2021/22.

Information to calculate drinking within weekly limits was not collected in 2020/21 and 2021/22.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 18 years and over who drank alcohol:

- In 2020/21, the first full year of the pandemic, was 82%
- In 2021/22, the second full year of the pandemic, was 83%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, the percentage of people aged 18 years and over who drank alcohol increased overall by 1 percentage point, from 82% to 83%.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, however, the percentage of people aged 18 years and over who drank alcohol remained the same at 82%. Thus, between 2020/21 and 2021/22, the percentage of people aged 18 years and over who drank alcohol increased by 1 percentage point, from 82% to 83%.

See pages 115-123, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, Belfast HSCT had a higher percentage of people aged 18 years and over who drank alcohol in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 30)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 18 years and over who drank alcohol increased overall:

- In Belfast HSCT, by 1 percentage point from 82% to 83% (a percentage increase of 1.22%)
- In Northern Ireland, by 2 percentage points, from 77% to 79% (a percentage increase of 2.60%; see COVID-19 People Figure 30)

Comparison with other HSCTs

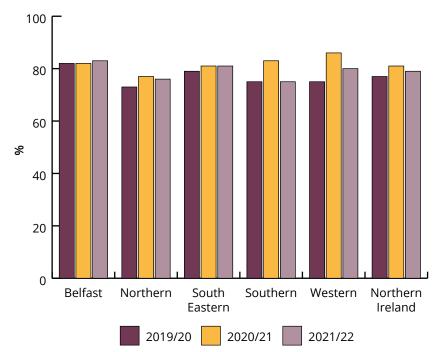
When compared with the other HSCTs, Belfast HSCT had the highest percentage of people aged 18 years and over who drank alcohol in 2019/20, before the COVID-19 pandemic, and in 2021/22, the second full year of the pandemic, at 82.0% and 83.0%, respectively, but only the median percentage in 2020/21, the first full year of the pandemic, at 82.0%, when Western HSCT had the highest percentage at 86.0%, followed by Southern HSCT at 83.0% (see COVID-19 People Figure 30).

Between 2029/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 18 years and over who drank alcohol:

- Increased overall in four HSCTs, including Belfast HSCT
- Remained the same in one HSCT (see COVID-19 People Figure 30)

COVID-19 PEOPLE FIGURE 30:

Percentage (%) of people aged 18 years and over who drank alcohol by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Alcohol prevalence & limits

Differences by deprivation in Northern Ireland

There was variation in the percentage of people aged 18 years and over who drank alcohol across the deprivation quintiles in Northern Ireland.

The highest percentage of people aged 18 years and over who drank alcohol was in Quintile 5, the least-deprived areas, in:

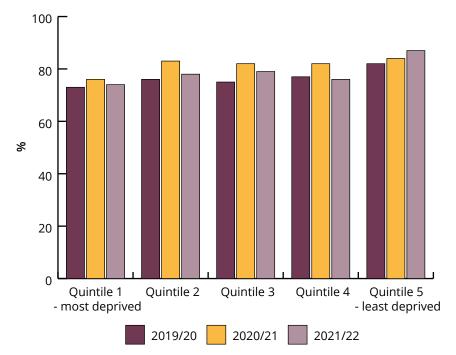
- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 31)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 18 years and over who drank alcohol:

- Increased overall in Quintiles 1, 2, 3 and 5
- Decreased overall in Quintile 4 (see COVID-19 People Figure 31)

COVID-19 PEOPLE FIGURE 31:

Percentage (%) of people aged 18 years and over who drank alcohol by deprivation quintile in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Alcohol prevalence & limits

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 18 years and over who drank alcohol was higher in Belfast HSCT, both before and during the first two full years of the COVID-19 pandemic; however, the gap between the two narrowed during the first two years of the pandemic, with a greater percentage increase in Northern Ireland compared with Belfast HSCT.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the highest percentage of people aged 18 years and over who drank alcohol both before the COVID-19 pandemic and during the second full year of the pandemic (2021/22). Consequently, there was no overall change in the relative position of Belfast HSCT among HSCTs, however, during the first full year of the pandemic (2020/21), Belfast HSCT had the median percentage of people aged 18 years and over who drank alcohol because Belfast HSCT's percentage

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remained the same between 2019/20 and 2020/21, whereas it increased in the four other HSCTs over the same time-period, with a percentage increase ranging from 2.53% in South Eastern HSCT to 14.67% in Western HSCT.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, of the four HSCTs in which there was a percentage increase in the percentage of people aged 16 years and over who drank alcohol:

- The smallest percentage increase was in Belfast HSCT at 1.22%
- The greatest percentage increase was in Western HSCT at 6.67%

Overall, in Southern HSCT, the percentage of people aged 16 years and over who drank alcohol remained the same.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first two full years of the COVID-19 pandemic, the percentage of people aged 18 years and over who drank alcohol increased overall in four HSCTs, including Belfast HSCT, and in Northern Ireland, which may reflect increasing levels of stress in those populations as the pandemic progressed.

For people in Belfast HSCT, the COVID-19 pandemic has been associated with a slight increase in the percentage of people who consume alcohol.

Inequalities with the potential for inequity in Northern Ireland

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 18 years and over who drank alcohol:

- Increased overall in Quintiles 1, 2, 3 and 5
- Decreased overall in Quintile 4

The greatest percentage increases overall, however, were in Quintile 5, the leastdeprived areas, and Quintile 3, the mid-quintile, at 6.10% and 5.33%, respectively.

Although the COVID-19 pandemic has been associated with an increase in the percentage who consumed alcohol in Quintiles 1 and 2, the most-deprived and second most-deprived areas of Northern Ireland, these quintiles have not undergone the greatest percentage increases, whereas Quintile 5, the least-deprived areas, has.

SECTION 14

People Aged 16 Years and Over Who Smoked Cigarettes

DATA SOURCE

Information is from the Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Cigarette smoking.⁴²

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for the 2020/21 and 2021/22 moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

BELFAST: Profiling Health, Wellbeing & Prosperity

^{42.} Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 20 February 2023)

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The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21 and 2021/22.

Specific to this indicator

None reported by the data-holder.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 16 years and over who smoked cigarettes:

- In 2020/21, the first full year of the COVID-19 pandemic, was 17%
- In 2021/22, the second full year of the pandemic, was 21%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, the percentage of people aged 16 years and over who smoked cigarettes increased overall by 2 percentage points, from 19% to 21%.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, however, the percentage of people aged 16 years and over who smoked cigarettes decreased by 2 percentage points, from 19% to 17%. Thus, between 2020/21 and 2021/22, the percentage of people aged 16 years and over who smoked cigarettes increased by 4 percentage points, from 17% to 21%.

See pages 104-109, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, Belfast HSCT had a higher percentage of people aged 16 years and over who smoked cigarettes in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 32)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who smoked cigarettes:

- In Belfast HSCT, increased overall by 2 percentage points, from 19% to 21% (a percentage increase of 10.53%)
- In Northern Ireland, remained the same overall at 17% (see COVID-19 People Figure 32)

Comparison with other HSCTs

When compared with the other HSCTs, Belfast HSCT had the highest percentage of people aged 16 years and over who smoked cigarettes in:

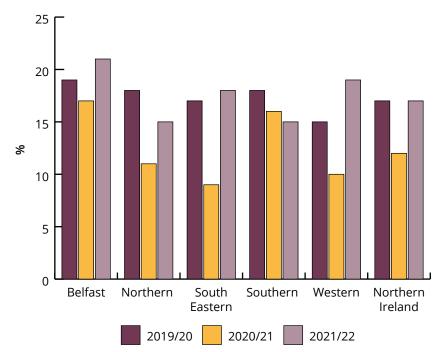
- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 32)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who smoked cigarettes:

- Increased overall in three HSCTs, including Belfast HSCT
- Decreased in two HSCTs (see COVID-19 People Figure 32)

COVID-19 PEOPLE FIGURE 32:

Percentage (%) of people aged 16 years and over who smoked cigarettes by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22



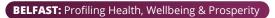
Source: Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Cigarette smoking

Differences by deprivation in Northern Ireland

There was variation in the percentage of people aged 16 years and over who smoked cigarettes across the quintiles of deprivation in Northern Ireland.

The highest percentage of people aged 16 years and over who smoked cigarettes was in Quintile 1, the most-deprived areas, followed by Quintile 2, the second most-deprived areas, in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 33)



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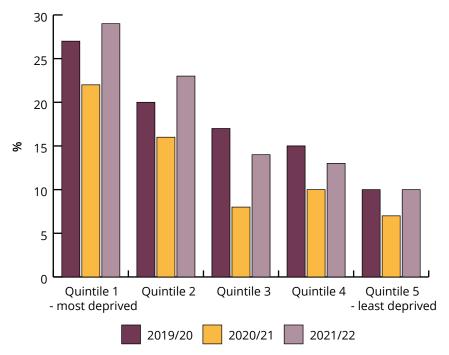
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Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who smoked cigarettes:

- · Increased in Quintiles 1 and 2 the most-deprived areas
- Decreased in Quintiles 3 and 4
- Remained the same overall in Quintile 5 the leastdeprived areas (see COVID-19 People Figure 33)

COVID-19 PEOPLE FIGURE 33:

Percentage (%) of people aged 16 years and over who smoked cigarettes by deprivation guintile in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Cigarette smoking

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over who smoked cigarettes was higher in Belfast HSCT, both before and during the first two full years of the COVID-19 pandemic; the gap between the two widened during the first two full years of the pandemic, with a percentage increase in Belfast HSCT, whereas the percentage remained the same overall in Northern Ireland.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the highest percentage of people aged 16 years and over who smoked cigarettes both before and during the first two full years of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- The median percentage increase in people aged 16 years and over who smoked cigarettes was in Belfast HSCT at 10.53%
- The greatest percentage increase was in Western HSCT at 26.67%
- The lowest percentage increase was in South Eastern HSCT at 5.88%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first full year of the COVID-19 pandemic (2020/21), the percentage of people aged 16 years and over who smoked cigarettes decreased in all HSCTs and Northern Ireland, which may have been related to people trying to reduce their individual level of risk when exposed to a respiratory virus associated with initially high death rates and serious complications.

In Belfast HSCT, and two other HSCTs, however, the percentage of people aged 16 years and over who smoked cigarettes increased during the second full year of the pandemic (2021/22) to levels that were higher than those before the pandemic. This could reflect increasing levels of stress in those populations as the pandemic progressed.

For people in Belfast HSCT, the COVID-19 pandemic has been associated with an increase in the percentage of people aged 16 years and over who smoked cigarettes. с \supset

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Inequalities with the potential for inequity in Northern Ireland

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over who smoked cigarettes increased in Quintiles 1 and 2, the most-deprived and second most-deprived areas in Northern Ireland.

In the most-deprived and second most-deprived areas of Northern Ireland, many of which are in Belfast, the COVID-19 pandemic has been associated with an increase in the percentage of people aged 16 years and over who smoked cigarettes.

SECTION 15

People Aged 16 Years and Over Who Smoked Electronic Cigarettes

DATA SOURCE

Information is from the Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Electronic cigarettes.⁴³

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

Health Survey Northern Ireland

Data collection for the 2020/21 and 2021/22 moved from face-to-face interviewing to telephone mode, which may have altered how people responded to the survey. It also necessitated a reduction in the number of questions and changes to how some of the questions were asked or presented, including the categories of responses. The response rate by telephone interview was slightly lower than that achieved by face-to-face interview, which reduced the number of cases at a household and individual level, and thereby the sample size for the survey:

- This reduced the precision of the survey estimates particularly when broken down by subgroups of the population
- This changed the demographic profile of the sample with the 16-44 agegroup under-represented in 2021/22 when compared with previous years

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BELFAST: Profiling Health, Wellbeing & Prosperity

^{43.} Health survey Northern Ireland: first results 2021/22 | Department of Health (health-ni.gov.uk) (Last accessed 21 February 2023)

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The data-holder recommends caution when interpreting the data from 2020/21 and 2021/22, and/or when comparing data from previous years with those from 2020/21 and 2021/22.

Specific to this indicator

None reported by the data-holder.

PROFILE FINDINGS

In Belfast HSCT, the percentage of people aged 16 years and over who smoked electronic cigarettes:

- In 2020/21, the first full year of the COVID-19 pandemic, was 7%
- In 2021/22, the second full year of the pandemic, was 10%

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, the percentage of people aged 16 years and over who smoked electronic cigarettes increased overall by 2 percentage points, from 8% to 10%.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first two full years of the pandemic, in Belfast HSCT, however, the percentage of people aged 16 years and over who smoked electronic cigarettes decreased by 1 percentage point, from 8% to 7%. Thus, between 2020/21 and 2021/22, the percentage of people aged 16 years and over who smoked electronic cigarettes increased by 3 percentage points, from 7% to 10%.

See pages 110-114, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, Belfast HSCT had a higher percentage of people aged 16 years and over who smoked electronic cigarettes in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 34)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who smoked cigarettes increased overall:

- In Belfast HSCT, by 2 percentage points, from 8% to 10% (a percentage increase of 25.00%)
- In Northern Ireland, by 1 percentage point, from 6% to 7% (a percentage increase of 16.67%; see COVID-19 People Figure 34)

Comparison with other HSCTs

When compared with the other HSCTs, Belfast HSCT had:

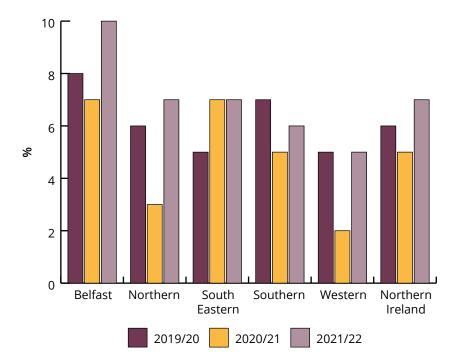
- The highest percentage of people aged 16 years and over who smoked electronic cigarettes in 2019/20, before the COVID-19 pandemic, and 2021/22, the second full year of the pandemic
- The joint highest percentage in 2020/21, the first full year of the pandemic, together with South Eastern HSCT (see COVID-19 People Figure 34)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who smoked electronic cigarettes:

- Increased overall in three HSCTs, including Belfast HSCT
- Decreased overall in one HSCT
- Remained the same overall in one HSCT (see COVID-19 People Figure 34)

COVID-19 PEOPLE FIGURE 34:

Percentage (%) of people aged 16 years and over who smoked electronic cigarettes by HSCT and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Electronic cigarettes

Differences by deprivation in Northern Ireland

There was variation in the percentage of people aged 16 years and over who smoked electronic cigarettes across the quintiles of deprivation in Northern Ireland.

The highest percentage of people aged 16 years and over who smoked electronic cigarettes was in Quintile 1, people in the most-deprived areas, in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 35)

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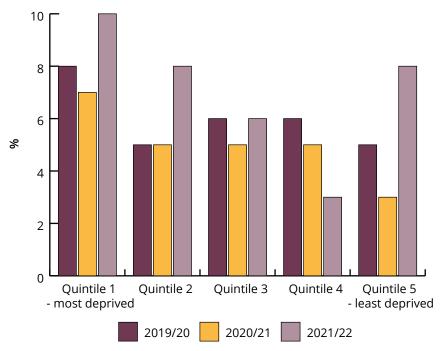
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Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the percentage of people aged 16 years and over who smoked electronic cigarettes:

- Increased overall in Quintiles 1 and 2, the most-deprived and second most-deprived areas, and Quintile 5, the least-deprived areas)
- Decreased in Quintile 4, the second least-deprived areas
- Remained the same overall in Quintile 3, the midquintile; see COVID-19 People Figure 35)

COVID-19 PEOPLE FIGURE 35:

Percentage (%) of people aged 16 years and over who smoked electronic cigarettes by deprivation quintile in Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health Survey Northern Ireland: first results 2021/22, Health Survey NI Trend Tables, Electronic cigarettes

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Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of people aged 16 years and over who smoked electronic cigarettes was higher in Belfast HSCT, both before and during the first two full years of the COVID-19 pandemic; the gap between the two widened during the first two full years of the pandemic, with a greater percentage increase in Belfast HSCT compared with Northern Ireland.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the highest percentage of people aged 16 years and over who smoked electronic cigarettes both before and during the first two full years of the COVID-19 pandemic, although in 2020/21, the first full year of the pandemic, Belfast HSCT had the equal highest percentage with South Eastern HSCT; despite this, there was no overall change in the relative position of Belfast HSCT among HSCTs.

Of the three HSCTs in which there was a percentage increase in the percentage of people aged 16 years and over who smoked electronic cigarettes:

- The greatest percentage was in South Eastern HSCT at 40.00%
- The lowest percentage was in Northern HSCT at 16.67%
- The median percentage increase was in Belfast HSCT at 25.00%

In contrast, there was a percentage decrease in Southern HSCT, whereas Western HSCT remained the same overall.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first full year of the COVID-19 pandemic (2020/21), the percentage of people aged 16 years and over who smoked electronic cigarettes:

- Decreased in four HSCTs, including Belfast HSCT
- Decreased in Northern Ireland

The decreases may have been related to people trying to reduce their individual level of risk when exposed to a respiratory virus associated with initially high death rates and serious complications, for which there was little or no cure or treatment.

During the second full year of the COVID-19 pandemic (2021/22), the percentage of people aged 16 years and over who smoked electronic cigarettes:

- Increased in four HSCTs, including Belfast HSCT, and in Northern Ireland, however, in Belfast HSCT, Northern HSCT, and Northern Ireland, the percentage increased to levels that were higher than those before the pandemic, which could reflect increasing levels of stress in those populations as the pandemic progressed
- Remained the same in South Eastern HSCT, but this followed an increase during the first year of the pandemic (between 2019/20 and 2020/21), which meant that the percentage had already increased to levels that were higher than those before the pandemic, which could reflect increasing levels of stress at an earlier point in the pandemic

For people aged 16 years and over in Belfast HSCT, the COVID-19 pandemic has been associated with an increase in the percentage of people who smoked electronic cigarettes.

Inequalities with the potential for inequity in Northern Ireland

During the first two full years of the COVID-19 pandemic, the percentage of people aged 16 years and over who smoked electronic cigarettes increased in Quintiles 1 and 2, the most-deprived and second most-deprived areas in Northern Ireland; however, it also increased in Quintile 5, the least-deprived areas.

In Quintiles 1 and 2, the most-deprived and second most-deprived areas in Northern Ireland, as well as in Quintile 5, the least-deprived areas, the COVID-19 pandemic has been associated with an increase in the percentage of people aged 16 years and over who smoked electronic cigarettes. The greatest percentage increases were seen in Quintiles 2 and 5 at 60.0%, whereas the percentage increase in Quintile 1, the most-deprived areas, was 25.0%, however, this percentage increase was on a much higher baseline than those for Quintiles 2 and 5.

Both before and during the COVID-19 pandemic, the percentages of people aged 16 years and over who smoked electronic cigarettes in Belfast HSCT were the same as those in Quintile 1, the most-deprived areas in Northern Ireland.

SECTION 16

Smoking during Pregnancy

DATA SOURCE

Information is from the Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Area, Smoking during Pregnancy.⁴⁴

In the Health Inequalities Annual Report 2023, the data-holder has advised that data for this indicator from 2018 onwards have been revised due to a change in methodology and quality assurance processes, and, therefore, differ slightly from previous editions of the Health Inequalities Annual Report. As such, the data published in the People Chapter (pages 81-86) for this indicator differ from the datasets for 2019 and 2020 presented here.⁴⁵

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Calendar years 2020, and 2021

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Introduction to the Health Inequalities Annual Report 2023, it states:

"The most recent figures reported in this release typically include data from 2020 and 2021, and therefore reflect to an extent, the impact of the coronavirus (COVID-19) pandemic. In particular, figures related to hospital admissions, dental indicators and childhood obesity have been significantly impacted due to service restrictions."⁴⁶ O U R

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^{44.} Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 9 July 2023)

^{45.} Smoking during Pregnancy entry, Table 6, page 82 Health Inequalities Annual Report 2023 (health-ni. gov.uk) (Last accessed 6 July 2023)

^{46.} Introduction, page 7 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 6 July 2023)

PROFILE FINDINGS

In 2020, covering the first 9 months of the COVID-19 pandemic, the percentage of women who smoked during pregnancy:

- In Belfast LGD was 18.1%
- In deprived areas of Belfast LGD was 31.4%
- In Belfast HSCT was 16.5%
- In deprived areas of Belfast HSCT was 30.1% (see COVID-19 People Figure 36)

In 2021, covering the first calendar year of the COVID-19 pandemic, the percentage of women who smoked during pregnancy:

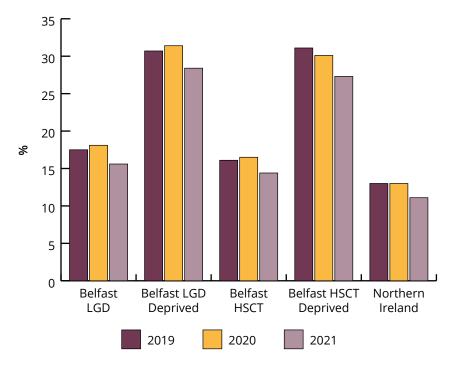
- In Belfast LGD was 15.6%
- In deprived areas of Belfast LGD was 28.4%
- In Belfast HSCT was 14.4%
- In deprived areas of Belfast HSCT was 27.3% (see COVID-19 People Figure 36)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who smoked during pregnancy decreased:

- In Belfast LGD, by 1.9 percentage points, from 17.5% to 15.6%
- In deprived areas of Belfast LGD, by 2.3 percentage points, from 30.7% to 28.4%
- In Belfast HSCT by 1.7 percentage points, from 16.1% to 14.4%
- In deprived areas of Belfast HSCT by 3.8 percentage points from 31.1% to 27.3% (see COVID-19 People Figure 36)

COVID-19 PEOPLE FIGURE 36:

Percentage (%) of women who smoked during pregnancy by Belfast LGD, Belfast LGD Deprived, Belfast HSCT, Belfast HSCT Deprived, and Northern Ireland, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Area, Smoking during Pregnancy

Differences by Belfast DEAs

There was variation in the percentage of women who smoked during pregnancy across Belfast's DEAs.

In 2020, covering the first 9 months of the COVID-19 pandemic, the percentage of women who smoked during pregnancy was:

- Highest in Oldpark DEA at 28.7%, closely followed by Court DEA at 28.4%
- Lowest in Ormiston DEA at 4.6% (see COVID-19 People Figure 37)

The median was 19.0%.

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In 2021, the percentage of women who smoked during pregnancy was:

- Highest in Oldpark DEA at 24.2%, closely followed by Court DEA at 23.9%
- Lowest in Lisnasharragh DEA at 4.1% (see COVID-19 People Figure 37)

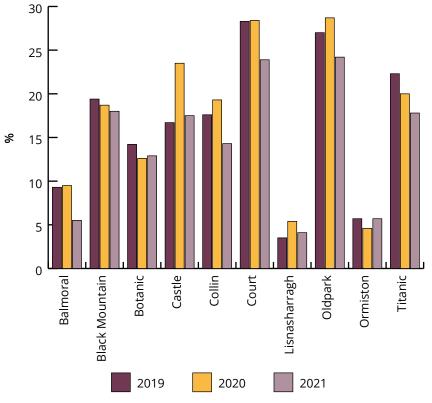
The median was 15.9%.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who smoked during pregnancy:

- Decreased overall in 7 DEAs
- Increased overall in 2 DEAs
- Remained the same in one DEA (see COVID-19 People Figure 37)

COVID-19 PEOPLE FIGURE 37:

Percentage (%) of women who smoked during pregnancy by Belfast DEA, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables - by Area, Smoking during Pregnancy

See pages 81-86, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, the percentages of women who smoked during pregnancy in Belfast LGD, in deprived areas of Belfast LGD, in Belfast HSCT, in deprived areas of Belfast HSCT were higher in:

- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 36)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who smoked during pregnancy decreased:

- In Belfast LGD, by 1.9 percentage points, from 17.5% to 15.6% (a percentage decrease of 10.86%)
- In deprived areas of Belfast LGD, by 2.3 percentage points, from 30.7% to 28.4% (a percentage decrease of 7.49%)
- In Belfast HSCT by 1.7 percentage points, from 16.1% to 14.4% (a percentage decrease of 10.56%)
- In deprived areas of Belfast HSCT by 3.8 percentage points from 31.1% to 27.3% (a percentage decrease of 12.22%)
- In Northern Ireland by 1.9 percentage points, from 13.0% to 11.1% (a percentage decrease of 14.62%; see COVID-19 People Figure 36)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had the highest percentage of women who smoked during pregnancy in:

- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 38)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months, the percentage of women who smoked during pregnancy decreased overall in all LGDs, including Belfast LGD (see COVID-19 People Figure 38).

20 18 16 14 12 % 10 8 6 4 2 0 Armagh City, Banbridge & Craigavon Derry City & Strabane Antrim & Newtownabbey Causeway Coast & Glens Lisburn & Castlereagh Newry, Mourne & Down Ards & North Down **Belfast** City Fermanagh & Omagh Mid & East Antrim Mid Ulster 2019 2020 2021

COVID-19 PEOPLE FIGURE 38:

Percentage (%) of women who smoked during pregnancy by LGD, 2019, 2020, and 2021

Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Smoking during Pregnancy

Comparison with other HSCTs

When compared with other HSCTs, Belfast HSCT had the highest percentage of women who smoked during pregnancy in:

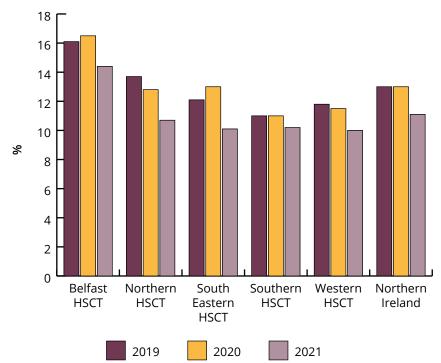
- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 39)

PEOPLE

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who smoked during pregnancy decreased overall in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 39)

COVID-19 PEOPLE FIGURE 39:

Percentage (%) of women who smoked during pregnancy by HSCT, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Smoking during Pregnancy

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, both before and during the first year and 9 months of the COVID-19 pandemic, the percentage of women who smoked during pregnancy was higher in:

- Belfast LGD, and the gap between the two widened, with a greater percentage decrease in Northern Ireland compared with Belfast LGD
- Belfast LGD Deprived, and the gap between the two widened, with a greater percentage decrease in Northern Ireland compared with deprived areas in Belfast LGD

- Belfast HSCT, and the gap between the two widened, with a greater percentage decrease in Northern Ireland compared with Belfast HSCT
- Belfast HSCT Deprived, and the gap between the two widened, with a greater percentage decrease in Northern Ireland compared with deprived areas in Belfast HSCT

Comparison with other LGDs

Of all the LGDs, Belfast LGD had the highest percentage of women who smoked during pregnancy before and during the first year and 9 months of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast LGD among LGDs.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the COVID-19 pandemic, of the LGDs that had an increase in the percentage of women who smoked during pregnancy:

- Belfast LGD had the fifth lowest percentage decrease at 10.86%
- Ards & North Down LGD had the greatest percentage decrease at 31.30%
- Lisburn & Castlereagh LGD had the smallest percentage decrease at 4.88%
- Derry City & Strabane LGD had the median percentage decrease at 13.10%

It is noticeable that in 2021 in all LGDs, including Belfast LGD, the percentages of women who smoked during pregnancy decreased to below pre-pandemic levels in 2019.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the highest percentage of women who smoked during pregnancy before and during the first year and 9 months of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the COVID-19 pandemic:

- Belfast HSCT had the second lowest percentage decrease at 10.56%
- Northern HSCT had the greatest percentage decrease at 21.90%
- Southern HSCT had the smallest percentage decrease at 7.27%
- Western HSCT had the median percentage decrease at 15.25%

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It is noticeable that in 2021 in all HSCTs, including Belfast HSCT, the percentages of women who smoked during pregnancy decreased to below pre-pandemic levels in 2019.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who smoked during pregnancy decreased in:

- All LGDs, including Belfast LGD
- All HSCTs, including Belfast HSCT
- Northern Ireland

In 2021, between 1 and 2 out of every 10 women smoked during pregnancy in Belfast LGD compared with over 1 out of every 10 in Northern Ireland and 5 other LGDs, and less than 1 out of every 10 in 5 other LGDs.

In 2021, between 1 and 2 out of every 10 women smoked during pregnancy in Belfast HSCT compared with over 1 out of every 10 in Northern Ireland and the four other HSCTs.

For women in Belfast LGD and Belfast HSCT, the first year and 9 months of the COVID-19 pandemic have been associated with overall decreases in the percentages of women who smoked during pregnancy; however, in both Belfast LGD and Belfast HSCT, there was a slight increase between 2019 and 2020, followed by a relatively larger decrease between 2020 and 2021. The slight increase between 2019 and 2020, the early stages of the pandemic, could have been due to increased stress associated with the uncertainties of the impact of the COVID-19 on pregnant women and their unborn children at that time.

Inequalities with the potential for inequity

When compared with Belfast LGD, the percentage of women who smoked during pregnancy was higher in deprived areas of Belfast LGD, both before and during the first year and 9 months of the COVID-19 pandemic. Between 2019 and 2021, although the percentage of women who smoked during pregnancy decreased in both Belfast LGD and deprived areas in Belfast LGD, the gap between the two widened, with a greater percentage decrease in Belfast LGD compared with deprived areas in Belfast LGD.

PEOPLE

When compared with Belfast HSCT, the percentage of women who smoked during pregnancy was higher in deprived areas of Belfast HSCT, both before and during the first year and 9 months of the COVID-19 pandemic. Between 2019 and 2021, although the percentage of women who smoked during pregnancy decreased in both Belfast HSCT and deprived areas in Belfast HSCT, the gap between the two narrowed, with a greater percentage decrease in deprived areas of Belfast HSCT compared with Belfast HSCT.

In 2021, it is noticeable that the percentages of women who smoked during pregnancy in deprived areas of Belfast LGD and in deprived areas of Belfast HSCT were almost double those of Belfast LGD and Belfast HSCT, respectively.

In 2019, 2020, and 2021, among Belfast's DEAs, Court DEA and Oldpark DEA had the highest percentages of women who smoked during pregnancy, with Court DEA having the highest percentage over Oldpark DEA in 2019, and Oldpark DEA having the highest percentages over Court DEA in 2020 and 2021.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who smoked during pregnancy:

- Decreased overall in 7 DEAs
- Increased overall in 2 DEAs
- Remained the same overall in one DEA

It is noticeable that in the 7 DEAs in which there was an overall decrease, the decrease was to below pre-pandemic levels.

Although in 2021 Lisnasharragh DEA had the lowest percentage of women who smoked during pregnancy, between 2019 and 2021 Lisnasharragh DEA had the greatest percentage increase in women who smoked during pregnancy at 17.14% compared with Castle DEA at 4.79%.

In 2021, between 2 and 3 out of every 10 women smoked during pregnancy in Oldpark DEA and over 2 out of every 10 in Court DEA compared with less than 1 out of every 10 in Balmoral, Lisnasharragh, and Ormiston DEAs.

SECTION 17

Breastfeeding on Discharge

DATA SOURCE

Information is from the Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Area, Breastfeeding on Discharge.⁴⁷

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Calendar years 2020, and 2021

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Introduction to the Health Inequalities Annual Report 2023, it states:

"The most recent figures reported in this release typically include data from 2020 and 2021, and therefore reflect to an extent, the impact of the coronavirus (COVID-19) pandemic. In particular, figures related to hospital admissions, dental indicators and childhood obesity have been significantly impacted due to service restrictions."48

47. Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 7 July 2023)

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Introduction, page 7 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 6 July 2023)

PEOPLE

PROFILE FINDINGS

In 2020, covering the first 9 months of the COVID-19 pandemic, the percentage of women who were breastfeeding on discharge:

- In Belfast LGD was 47.0%
- In deprived areas of Belfast LGD was 27.0%
- In Belfast HSCT was 50.0%
- In deprived areas of Belfast HSCT was 29.0% (see COVID-19 People Figure 40)

In 2021, covering the first calendar year of the pandemic, the percentage of women who were breastfeeding on discharge:

- In Belfast LGD was 46.0%
- In deprived areas of Belfast LGD was 26.0%
- In Belfast HSCT was 50.0%
- In deprived areas of Belfast HSCT was 28.0% (see COVID-19 People Figure 40)

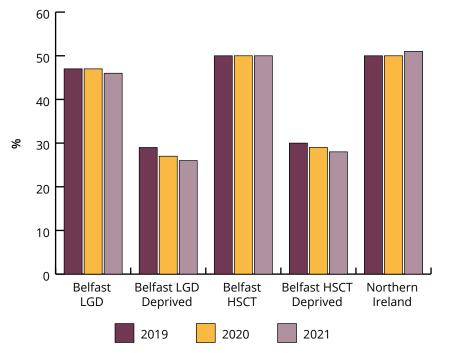
Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who were breastfeeding on discharge:

- Decreased overall in Belfast LGD by 1.0 percentage point, from 47.0% to 46.0%
- Decreased overall in deprived areas of Belfast LGD, by 3.0 percentage points, from 29.0% to 26.0%
- Remained the same in Belfast HSCT at 50.0%
- Decreased by 2.0 percentage points in deprived areas of Belfast HSCT, from 30.0% to 28.0% (see COVID-19 People Figure 40)

PEOPLE

COVID-19 PEOPLE FIGURE 40:

Percentage (%) of women who were breastfeeding on discharge by Belfast LGD, Belfast Deprived, Belfast HSCT, Belfast HSCT Deprived, and Northern Ireland, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Area, Breastfeeding on Discharge

Difference by Belfast DEAs

There was variation in the percentage of women who were breastfeeding on discharge across Belfast's DEAs.

In 2020, the first 9 months of the COVID-19 pandemic, the percentage of women who were breastfeeding on discharge was:

- Highest in Lisnasharragh DEA at 70.0%, closely followed by Ormiston, Balmoral and Botanic DEAs at 68%, 67% and 67%, respectively
- Lowest in Court DEA at 25.0%, followed by Oldpark DEA at 31% (see COVID-19 People Figure 41)

The median was 48.0%.

In 2021, covering the first calendar year of the COVID-19 pandemic, the percentage of women who were breastfeeding on discharge was:

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- Highest in Lisnasharragh DEA at 74.0%, closely followed by Balmoral DEA at 73%
- Lowest in Court DEA at 23.0% (see COVID-19 People Figure 41)

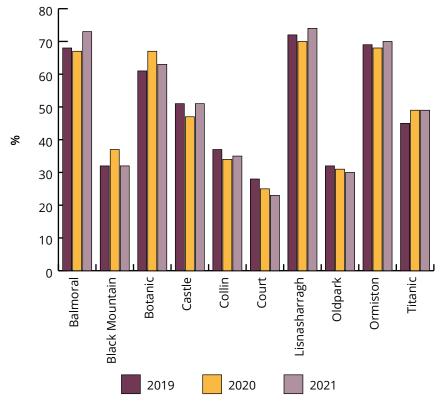
The median was 50.0%.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic the percentage of women who were breastfeeding on discharge:

- Increased overall in 5 DEAs
- Decreased in 3 DEAs
- Remained the same overall in 2 DEAs (see COVID-19 People Figure 41)

COVID-19 PEOPLE FIGURE 41:

Percentage (%) of women who were breastfeeding on discharge by Belfast DEA, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Area, Breastfeeding on Discharge

See pages 76-80, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

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Comparison with Northern Ireland

When compared with Northern Ireland, the percentages of women who were breastfeeding on discharge in Belfast LGD, and in deprived areas of Belfast LGD, were lower in:

- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 40)

When compared with Northern Ireland, the percentage of women who were breastfeeding on discharge in Belfast HSCT was:

- The same in 2019 and 2020
- Lower in 2021 (see COVID-19 People Figure 40)

When compared with Northern Ireland, the percentage of women who were breastfeeding on discharge in deprived areas of Belfast HSCT was lower:

- 2019, before the COVID-19 pandemic
- 2020, covering the first 9 months of the pandemic
- 2021, covering the first calendar year of the pandemic (see COVID-19 People Figure 40)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who were breastfeeding on discharge:

- Decreased overall in Belfast LGD by 1.0 percentage point, from 47% to 46% (a percentage decrease of 2.13%)
- Decreased overall in deprived areas of Belfast LGD, by 3.0 percentage points, from 29.0% to 26.0% (a percentage decrease of 10.34%)
- Remained the same in Belfast HSCT at 50%

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- Decreased overall in deprived areas of Belfast HSCT, by 2.0 percentage points, from 30.0% to 28.0% (a percentage decrease of 6.67%)
- Increased overall in Northern Ireland by 1.0 percentage point, from 50.0% to 51% (a percentage increase of 2.00%; see COVID-19 People Figure 40)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

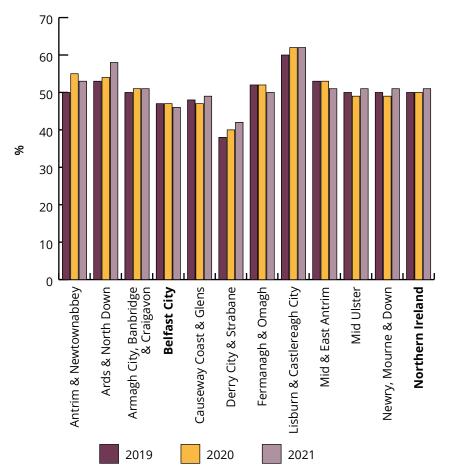
- In 2019, before the COVID-19 pandemic, the second lowest percentage of women who were breastfeeding on discharge
- In 2020, covering the first 9 months of the pandemic, the second equal lowest percentage, together with Causeway Coast & Glens LGD
- In 2021, covering the first calendar year of the pandemic, the second lowest percentage (see COVID-19 People Figure 42)

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who were breastfeeding on discharge:

- Increased in 8 LGDs
- Decreased in 3 LGDs, including Belfast LGD (see COVID-19 People Figure 42)

COVID-19 PEOPLE FIGURE 42:

Percentage (%) of women who were breastfeeding on discharge by LGD, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Indicator, Breastfeeding on Discharge

Comparison with other HSCTs

When compared with other HSCTs, Belfast HSCT had:

- In 2019, before the COVID-19 pandemic, the second equal lowest percentage of women who were breastfeeding on discharge
- In 2020 and in 2021, covering the first year and 9 months of the pandemic, the second lowest percentage of women who were breastfeeding on discharge (see COVID-19 People Figure 43)

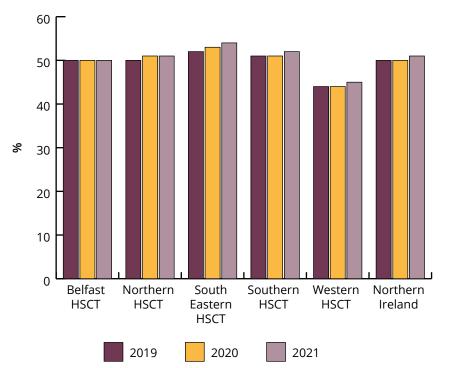
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Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the percentage of women who were breastfeeding on discharge:

- Increased in 4 HSCTs
- Remained the same in Belfast HSCT (see COVID-19 People Figure 43)

COVID-19 PEOPLE FIGURE 43:

Percentage (%) of women who were breastfeeding on discharge by HSCT, 2019, 2020, and 2021



Source: Department of Health, Health inequalities annual report 2022, Health Inequalities Annual Report 2022 Data Tables – by Indicator, Breastfeeding on Discharge

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OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage of women who were breastfeeding on discharge before and during the first 21 months of the COVID-19 pandemic, was lower:

- In Belfast LGD
- In deprived areas of Belfast LGD
- In deprived areas of Belfast HSCT

In comparison with Northern Ireland, the percentage of women who were breastfeeding on discharge was:

- The same in Belfast HSCT before and during the first 9 months of the COVID-19 pandemic in 2019 and 2020
- Lower in Belfast HSCT during the first calendar year of the pandemic in 2021

During the first year and 9 months of the COVID-19 pandemic, the gap in the percentage of women who were breastfeeding on discharge widened between:

- Belfast LGD and Northern Ireland, with an overall decrease in Belfast LGD and overall increase in Northern Ireland
- Deprived areas in Belfast LGD and Northern Ireland, with an overall decrease in deprived areas of Belfast LGD and an overall increase in Northern Ireland
- Belfast HSCT and Northern Ireland, with an overall increase in Northern Ireland whereas Belfast HSCT remained the same
- Deprived areas in Belfast HSCT and Northern Ireland, with a decrease in deprived areas of Belfast HSCT and an overall increase in Northern Ireland

Comparison with other LGDs

Of all the LGDs, Belfast LGD had the second lowest percentage of women who were breastfeeding on discharge before and during the first year and 9 months of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast LGD among LGDs except that in 2020 Belfast LGD was second equal lowest with Causeway Coast & Glens LGD because the percentage in Causeway Coast & Glens LGD had decreased to the level of Belfast LGD between 2019 and 2020 whereas between 2020 and 2021 the percentage in Causeway Coast & Glens LGD increased.

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, of the three LGDs in which there was a decrease in the percentage of women who were breastfeeding on discharge:

- Belfast LGD had the smallest percentage decrease at 2.13%
- Fermanagh & Omagh LGD had the largest percentage decrease at 3.85%

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the second lowest percentage of women who were breastfeeding on discharge before and during the first year and 9 months of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs, except that in 2019 Belfast HSCT was second equal lowest with Northern HSCT.

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first year and 9 months of the COVID-19 pandemic, the percentage of women who were breastfeeding on discharge:

- Increased in 8 LGDs
- Decreased in 3 LGDs, including Belfast LGD
- Increased in 4 HSCTs
- Remained the same in Belfast HSCT
- Increased in Northern Ireland

After the first year and 9 months of the COVID-19 pandemic, for women in Belfast LGD, the percentage breastfeeding on discharge had decreased slightly, whereas for women in Belfast HSCT it had remained the same.

In 2021, in Belfast LGD between 4 and 5 out of every 10 women were breastfeeding on discharge, compared with 5 out of every 10 in Belfast HSCT and just over 5 out of every 10 in Northern Ireland.

During the first year and 9 months of the COVID-19 pandemic, the percentage of women breastfeeding on discharge decreased in:

- Deprived areas of Belfast LGD
- Deprived areas of Belfast HSCT

Between 2019 and 2021, from before the COVID-19 pandemic and covering the first year and 9 months of the pandemic, the gap in the percentage of women breastfeeding on discharge widened between:

- Belfast LGD and deprived areas of Belfast LGD, with a greater percentage decrease in deprived areas of Belfast LGD compared with that in Belfast LGD
- Belfast HSCT and deprived areas of Belfast HSCT, with a decrease in deprived areas of Belfast HSCT whereas the percentage in Belfast HSCT remained the same

In 2021, the percentage of women who were breastfeeding on discharge in:

- Deprived areas of Belfast LGD was 20.0 percentage points lower than that in Belfast LGD, and 25.0 percentage points lower than that in Northern Ireland
- Deprived areas of Belfast HSCT was 22.0 percentage points lower than that in Belfast HSCT and 23.0 percentage points lower than that in Northern Ireland

In 2021, in deprived areas of:

- Belfast LGD approaching 3 out of every 10 women were breastfeeding on discharge
- Belfast HSCT 3 out of every 10 women were breastfeeding on discharge

The first year and 9 months of the COVID-19 pandemic have been associated with a decrease in the percentages of women in the deprived areas of Belfast LGD and in the deprived areas of Belfast HSCT who were breastfeeding on discharge.

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In 2019, 2020, and 2021, among Belfast's DEAs, Court DEA and Oldpark DEA had the lowest and second lowest percentages of women who were breastfeeding on discharge, respectively.

During the first year and 9 months of the pandemic, of the three DEAs in which there was a decrease in the percentage of women who were breastfeeding on discharge, Court DEA had the greatest percentage decrease at 17.86%, and Collin DEA had the smallest percentage decrease at 5.41%.

In 2021, in Court DEA over 2 out of every 10 women were breastfeeding on discharge compared with between 7 and 8 out of every 10 in Lisnasharragh DEA.

SECTION 18

Standardised Dental Registration Rate in Children and Young People Aged Under 18 Years

DATA SOURCE

Information is from the Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Dental Registration Rate (U18).⁴⁹

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial years 2020/21, and 2021/22

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In the Health Inequalities Annual Report, it states:

"It should be noted that due to the impact of the COVID-19 pandemic on hospital services any changes from 2020/21 should be interpreted with caution."⁵⁰ Ľ

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Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 11 July 2023)

^{50.} Footnote 20 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 3 July 2023)

PEOPLE

In the Introduction to the Health Inequalities Annual Report 2023, it states:

"The most recent figures reported in this release typically include data from 2020 and 2021, and therefore reflect to an extent, the impact of the coronavirus (COVID-19) pandemic. In particular, figures related to hospital admissions, dental indicators and childhood obesity have been significantly impacted due to service restrictions."⁵¹

In the Excel spreadsheet entitled Health Inequalities Annual Report 2023 Data Tables – by Indicator, there is a note from the data-provider that states service-based indicators, including dental treatment activity, are affected by:

"... difficulties in ascertaining whether any changes in rates are due to changes in demand (i.e., health of the population), or, as a result of changes in service provision. All figures relating to these indicators should be treated with caution as they may also be impacted by external factors that are not reflective of service demand. As unmet demand is not accounted for in the data, these indicators should therefore be viewed as indicators of service provision rather than demand."⁵²

PROFILE FINDINGS

In 2020/21, during the first full year of the COVID-19 pandemic, the standardised dental registration rate in children and young people aged under 18 years:

- In Belfast LGD was 70,336 registrations per 100,000 population
- In deprived areas of Belfast LGD was 66,346 registrations per 100,000 population
- In Belfast HSCT was 71,570 registrations per 100,000 population
- In deprived areas of Belfast HSCT was 66,526 registrations per 100,000 population (see COVID-19 People Figure 44)

^{51.} Introduction, page 7 Health Inequalities Annual Report 2023 (health-ni.gov.uk) (Last accessed 6 July 2023)

^{52.} Health inequalities annual report 2023 | Department of Health (health-ni.gov.uk) (Last accessed 11 July 2023)

In 2021/22, during the second full year of the COVID-19 pandemic, the standardised dental registration rate in children and young people aged under 18 years:

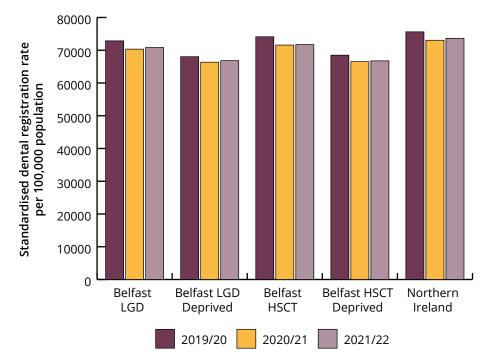
- In Belfast LGD was 70,836 registrations per 100,000 population
- In deprived areas of Belfast LGD was 66,822 registrations per 100,000 population
- In Belfast HSCT was 71,747 registrations per 100,000 population
- In deprived areas of Belfast HSCT was 66,757 registrations per 100,000 population (see COVID-19 People Figure 44)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years decreased in:

- Belfast LGD by 2,016 registrations per 100,000 population, from 72,852 to 70,836 registrations per 100,000 population
- Deprived areas of Belfast LGD, by 1,204 registrations per 100,000 population, from 68,026 to 66,822 registrations per 100,000 population
- Belfast HSCT by 2,365 registrations per 100,000 population, from 74,112 to 71,747 registrations per 100,000 population
- Deprived areas of Belfast HSCT by 1,739 registrations per 100,000 population, from 68,496 to 66,757 registrations per 100,000 population (see COVID-19 People Figure 44)

COVID-19 PEOPLE FIGURE 44:

Standardised dental registration rate in children and young people aged under 18 years by Belfast LGD, Belfast Deprived, Belfast HSCT, Belfast HSCT Deprived, and Northern Ireland, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Dental Registration Rate (U18)

Differences by Belfast DEAs

There was variation in the standardised dental registration rate in children and young people aged under 18 years across Belfast's DEAs.

In 2019/20, before the COVID-19 pandemic, the standardised dental registration rate in children and young people aged under 18 years was:

- Highest in Ormiston DEA at 85,176 registrations per 100,000 population
- Lowest in Botanic DEA at 60,709 registrations per 100,000 population (see COVID-19 People Figure 45)

The median was 79,051 registrations per 100,000 population.

In 2020/21, during the first full year of the COVID-19 pandemic, the standardised dental registration rate in children and young people aged under 18 years was:

- Highest in Ormiston DEA at 83,361 registrations per 100,000 population
- Lowest in Botanic DEA at 58,012 registrations per 100,000 population (see COVID-19 People Figure 45)

The median was 71,058 registrations per 100,000 population.

In 2021/22, during the second full year of the COVID-19 pandemic, the standardised dental registration rate in children and young people aged under 18 years was:

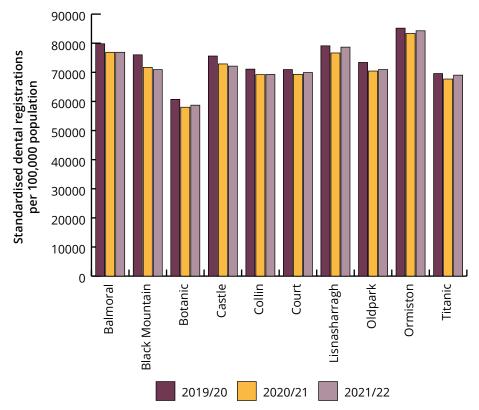
- Highest in Ormiston DEA at 84,267 registrations per 100,000 population
- Lowest in Botanic DEA at 58,717 registrations per 100,000 population (see COVID-19 People Figure 45)

The median was 70,445 registrations per 100,000 population.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years decreased overall in all DEAs (see COVID-19 People Figure 45).

COVID-19 PEOPLE FIGURE 45:

Standardised dental registration rate in children and young people under 18 years per 100,000 population by Belfast DEA, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Dental Registration Rate (U18)

See pages 87-89, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, the standardised dental registration rates in children and young people aged under 18 years in Belfast LGD, deprived areas of Belfast LGD, Belfast HSCT and deprived areas of Belfast HSCT were lower than that in Northern Ireland in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 44)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years decreased in:

- Belfast LGD by 2,016 registrations per 100,000 population, from 72,852 to 70,836 registrations per 100,000 population (a percentage decrease of 2.77%)
- Deprived areas of Belfast LGD, by 1,204 registrations per 100,000 population, from 68,026 to 66,822 registrations per 100,000 population (a percentage decrease of 1.77%)
- Belfast HSCT by 2,365 registrations per 100,000 population, from 74,112 to 71,747 registrations per 100,000 population (a percentage decrease of 3.19%)
- Deprived areas of Belfast HSCT by 1,739 registrations per 100,000 population, from 68,496 to 66,757 registrations per 100,000 population (a percentage decrease of 2.54%)
- In Northern Ireland by 1,981 registrations per 100,000 population, from 75,621 to 73,640 registrations per 100,000 population (a percentage decrease of 2.62%; see COVID-19 People Figure 44)

Comparison with other LGDs

When compared with other LGDs, Belfast LGD had:

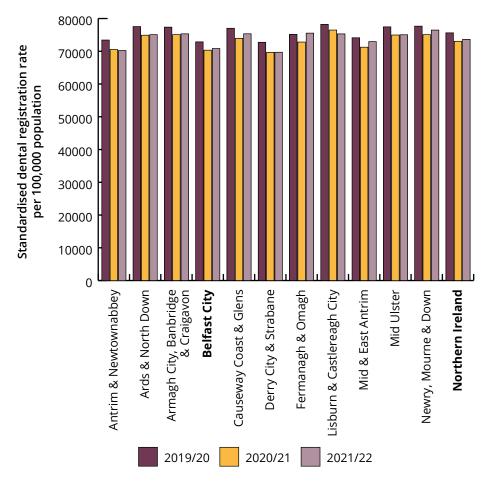
- The second lowest standardised dental registration rate in children and young people aged under 18 years in 2019/20, before the COVID-19 pandemic, and in 2020/21, during the first full year of the pandemic
- The third lowest standardised dental registration rate in children and young people aged under 18 years in 2021/22, during the second full year of the pandemic (see COVID-19 People Figure 46)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years:

- Decreased overall in 10 LGDs, including Belfast LGD
- Increased in one LGD (see COVID-19 People Figure 46)

COVID-19 PEOPLE FIGURE 46:

Standardised dental registration rate in children and young people aged under 18 years by LGD, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Dental Registration Rate (U18)

Comparison with other HSCTs

When compared with other HSCTs, Belfast HSCT had the lowest standardised dental registration rate in children and young people aged under 18 years in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic
- 2021/22, the second full year of the pandemic (see COVID-19 People Figure 47)

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering in the first two full years, the standardised dental registration rate in children and young people aged under 18 years decreased overall in all HSCTs (see COVID-19 People Figure 47) O U R

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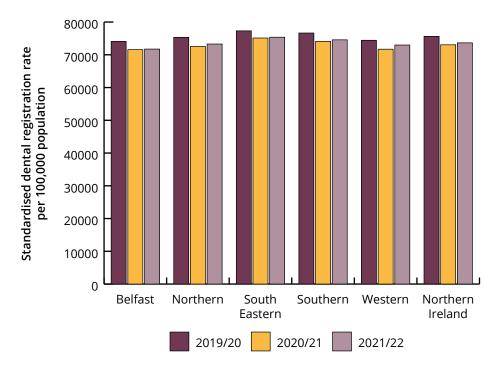
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COVID-19 PEOPLE FIGURE 47:

Standardised dental registration rate in children and young people aged under 18 years by HSCT, 2019/20, 2020/21, and 2021/22



Source: Department of Health, Health inequalities annual report 2023, Health Inequalities Annual Report 2023 Data Tables – by Indicator, Standardised Dental Registration Rate (U18)

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, in 2019/20, before the COVID-19 pandemic, and in 2020/21 and 2021/22, the first and second full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years was lower in:

- Belfast LGD
- Deprived areas of Belfast LGD
- Belfast HSCT
- Deprived areas of Belfast HSCT

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the gap in the standardised dental registration rate in children and young people aged under 18 years between Northern Ireland and:

- Belfast LGD widened very slightly with a slightly greater percentage decrease in Belfast LGD, 2.77% compared with 2.62%
- Deprived areas of Belfast LGD narrowed slightly, with a slightly smaller percentage decrease in deprived areas of Belfast LGD, 1.77% compared with 2.62%
- Belfast HSCT widened slightly with a slightly greater percentage decrease in Belfast HSCT, 3.19% compared with 2.62%
- Deprived areas of Belfast HSCT narrowed very slightly with a slightly smaller percentage decrease in deprived areas of Belfast HSCT, 2.54% compared with 2.62%

Comparison with other LGDs

In comparison with other LGDs, Belfast LGD had:

- The second lowest standardised dental registration rate in children and young people aged under 18 years in 2019/20, before the COVID-19 pandemic, and in 2020/21, the first full year of the pandemic
- The third lowest in 2021/22, the second full year of the pandemic

Consequently, there was a change in the relative position of Belfast LGD among LGDs with Belfast rising one place from second to third lowest.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast LGD had the fifth lowest percentage decrease in the standardised dental registration rate in children and young people aged under 18 years at 2.77%
- Antrim & Newtownabbey LGD had the greatest percentage decrease at 4.36%
- Newry, Mourne & Down LGD had the smallest percentage decrease at 1.54%

The median percentage decrease was 2.94%

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Comparison with other HSCTs

In comparison with other HSCTs, Belfast HSCT had the lowest standardised dental registration rate in children and young people aged under 18 years in 2019/20, before the COVID-19 pandemic, and in 2020/21 and 2021/22, the first two full years of the pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Belfast HSCT had the greatest percentage decrease in the standardised dental registration rate in children and young people aged under 18 years at 3.19%
- Western HSCT had the smallest percentage decrease at 1.95%
- Southern HSCT had the median percentage decrease at 2.72%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years:

- Decreased in 10 LGDs, including Belfast LGD
- Increased in one LGD
- Decreased in all HSCTs, including Belfast HSCT
- Decreased in Northern Ireland

For people in Belfast LGD and in Belfast HSCT, the first two years of the COVID-19 pandemic have been associated with a decrease in the standardised dental registration rate in children and young people aged under 18 years. This finding may be related to reduced access to dental services, especially during the initial stages of the pandemic.

Inequalities with the potential for inequity

In 2019/20, before the COVID-19 pandemic, and in 2020/21 and 2021/22, the first two full years of the pandemic, the standardised dental registration rate in children and young people aged under 18 years was lower in:

- Deprived areas of Belfast LGD when compared with Belfast LGD
- Deprived areas of Belfast HSCT when compared with Belfast HSCT

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, the gap in the standardised dental registration rate in children and young people aged under 18 years between:

- Deprived areas of Belfast LGD and Belfast LGD narrowed slightly, with a slightly smaller percentage decrease in deprived areas of Belfast LGD
- Deprived areas of Belfast HSCT and Belfast HSCT narrowed slightly, with a slightly smaller percentage decrease in deprived areas of Belfast HSCT

For people in the deprived areas of Belfast LGD and deprived areas of Belfast HSCT, the first two full years of the COVID-19 pandemic have been associated with a decrease in the standardised dental registration rate in children and young people aged under 18 years.

From 2019/20 to 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic, among Belfast's DEAs, Botanic, Titanic, Collin, and Court DEAs had the lowest standardised dental registration rates in children and young people aged under 18 years:

- Botanic DEA had the lowest rate and Titanic DEA had the second lowest rate
- Court DEA had the third lowest rate before the pandemic but the fourth lowest rate during the pandemic, whereas Collin DEA had the fourth lowest rate before the pandemic but the third lowest during the pandemic

Between 2019/20 and 2021/22, from before the COVID-19 pandemic and covering the first two full years of the pandemic:

- Black Mountain DEA had the greatest percentage decrease in the standardised dental registration rate in children and young people aged under 18 years at 6.68%, which meant it dropped from fourth highest before the pandemic to fifth lowest after two years of the pandemic
- Lisnasharragh DEA had the smallest percentage decrease at 0.56%, which meant it rose one place from third highest before the pandemic to second highest after two years of the pandemic

The median percentage decrease was 2.92%.

Of the four DEAs with the lowest standardised dental registration rates in children and young people aged under 18 years from 2019/20 to 2021/22, only Botanic DEA had a relatively greater percentage decrease at 3.28%, whereas Titanic, Collin, and Court DEAs all had a percentage decrease that was below the median value. Despite this, the lower rates overall represent unmet need in children and young people aged under 18 years in these DEAs.

SECTION 19

Coverage of Women Eligible for Cervical Screening

DATA SOURCE

HSC Public Health Agency Cancer Screening Team, Programme Performance and Standards, Coverage, NICSP Annual Performance Reports: 2020/21: 3-5 year coverage 2020/21, and 2019/20: 3-5 year coverage 2019/20.⁵³

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial year 2020/21

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

All invitations for the cervical cancer screening programme in Northern Ireland were paused from the week beginning 16 March 2020 as part of the HSC response to the COVID-19 pandemic. A phased resumption of invitations for cervical screening began in June 2020, with priority given to women at higher risk of cervical changes. Routine invitations re-commenced from August 2020. The programme continued to run with a 5-month delay, due to the temporary pause.⁵⁴

^{53.} Programme Performance and Standards | Cancer Screening Northern Ireland (hscni.net) (Last accessed 21 February 2023)

^{54.} Cervical cancer screening | HSC Public Health Agency (hscni.net) (Last accessed 26 February 2023)

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PROFILE FINDINGS

In 2020/21, the first full year of the COVID-19 pandemic, in Belfast HSCT, the percentage coverage of women eligible for cervical screening was 66.0%.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, in Belfast HSCT, the percentage coverage of women eligible for cervical screening decreased by 1.4 percentage points, from 67.4%% to 66.0%.

See pages 178-182, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, Belfast HSCT had a lower percentage coverage of women eligible for cervical screening in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic (see COVID-19 People Figure 48)

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, the percentage coverage of women eligible for cervical screening decreased:

- In Belfast HSCT by 1.4 percentage points, from 67.4% to 66.0% (a percentage decrease of 2.08%)
- In Northern Ireland by 1.3 percentage points, from 72.6% to 71.3% (a percentage decrease of 1.79%; see COVID-19 People Figure 48)

Comparison with other HSCTs

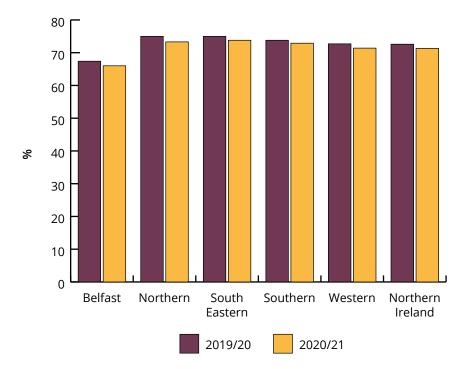
When compared with other HSCTs, Belfast HSCT had the lowest percentage coverage of women eligible for cervical screening in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic (see COVID-19 People Figure 48)

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, the percentage coverage of women eligible for cervical screening decreased in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 48).

COVID-19 PEOPLE FIGURE 48:

Percentage (%) coverage of women eligible for cervical screening by HSCT and Northern Ireland, 2019/20 and 2020/21



Source: HSC Public Health Agency, Programme Performance and Standards, Coverage, NICSP Annual Performance Reports: 2020/21: 3-5 year coverage 2020/21, and 2019/20: 3-5 year coverage 2019/20

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage coverage of women eligible for cervical screening was lower in Belfast HSCT, both before and during the first full year of the COVID-19 pandemic; the gap between the two widened slightly, with a slightly greater percentage decrease in Belfast HSCT compared with that in Northern Ireland.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the lowest percentage coverage of women eligible for cervical screening both before and during the first full year of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic:

- Belfast HSCT had the second highest percentage decrease in the percentage coverage of women eligible for cervical screening at 2.08%
- Northern HSCT had the greatest percentage decrease at 2.27%
- Southern HSCT had the smallest percentage decrease at 1.22%
- Western HSCT had the median percentage decrease at 1.79%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first full year of the COVID-19 pandemic, the percentage coverage of women eligible for cervical screening decreased slightly in:

- All HSCTs, including Belfast HSCT
- Northern Ireland

This decrease might reflect:

- The pause in cervical screening services in 2020
- An inability for some women to attend screening due to COVID-19 infection or symptoms of Long COVID

For women in Belfast HSCT, the first year of the COVID-19 pandemic has been associated with a slight decrease in the percentage coverage of cervical screening services. Furthermore, the percentage coverage of cervical screening services for eligible women in Belfast HSCT fell further below the minimum standard of coverage for the Programme, which is set at 70%.

SECTION 20

Uptake by Women Eligible for Breast Screening

DATA SOURCE

HSC Public Health Agency Cancer Screening Team, Breast Screening, Programme Performance & Standards, Coverage, Uptake Rates, Uptake Rates Links 2016-2021.⁵⁵

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial year 2020/21

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

In a press release on 7 April 2020, the Northern Ireland Health Minister announced that several routine screening programmes, including breast screening, had been suspended due to the COVID-19 pandemic.⁵⁶

Breast screening in Northern Ireland was restarted on 20 July 2020, and initially the service fulfilled appointments for the backlog of women who needed to be screened. Profile findings In 2020/21, the first full year of the COVID-19 pandemic, in Belfast HSCT and South Eastern HSCT combined⁵⁷, the percentage uptake by women eligible for breast screening was 69.00%.

^{55.} Programme Performance & Standards | Cancer Screening Northern Ireland (hscni.net) and https:// cancerscreening.hscni.net/breast-screening/performance-standards/ for uptake 20162021 Excel file (Last accessed 26 February 2023)

^{56.} Temporary pause of routine screening programmes | Department of Health (health-ni.gov.uk) (Last accessed 26 February 2023)

^{57.} Data for Belfast HSCT and South Eastern HSCT were published as combined data for the two HSCTs by the data-holder

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Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, in Belfast HSCT and South Eastern HSCT combined, the percentage uptake by women eligible for breast screening decreased by 5.39 percentage points, from 74.39% to 69.00%.

See pages 76-80, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, Belfast HSCT and South Eastern HSCT combined had a lower percentage uptake by women eligible for breast screening in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic (see COVID-19 People Figure 49)

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, the percentage uptake by women eligible for cervical screening decreased:

- In Belfast HSCT and South Eastern HSCT combined by 5.39 percentage points, from 74.39% to 69.00% (a percentage decrease of 7.25%)
- In Northern Ireland by 4.01 percentage points, from 76.01% to 72.00% (a percentage decrease of 5.28%; see COVID-19 People Figure 49)

Comparison with other HSCTs

When compared with other HSCTs, Belfast HSCT and South Eastern HSCT combined had the lowest percentage uptake by women eligible for breast screening in:

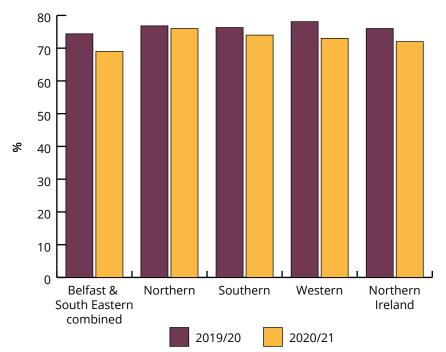
- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic (see COVID-19 People Figure 49)

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, the percentage uptake by women eligible for breast screening decreased in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 49).

PEOPLE

COVID-19 PEOPLE FIGURE 49:

Percentage (%) uptake by women eligible for breast screening by HSCT and Northern Ireland, 2019/20 and 2020/21



Source: HSC Public Health Agency, Breast Screening, Programme Performance and Standards, Coverage, Uptake Rates, Uptake Rates Links 2016-2021

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage uptake by women eligible for breast screening was lower in Belfast HSCT and South Eastern HSCT combined, both before and during the first full year of the COVID-19 pandemic; the gap between the two widened slightly, with a slightly greater percentage decrease in Belfast HSCT compared with that in Northern Ireland.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT and South Eastern HSCT combined had the lowest percentage uptake by women eligible for breast screening both before and during the first full year of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT and South Eastern HSCT combined among HSCTs.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic:

- Belfast HSCT and South Eastern HSCT combined had the greatest percentage decrease in the percentage uptake by women eligible for breast screening at 7.25%
- Northern HSCT had the smallest percentage decrease at 1.05%

The median percentage decrease was 4.77%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first full year of the COVID-19 pandemic, the percentage uptake by women eligible for breast screening decreased in:

- All HSCTs, including Belfast HSCT and South Eastern HSCT combined
- Northern Ireland
- This decrease might reflect:
- The suspension in breast screening services in 2020
- An inability for some women to attend screening due to COVID-19 infection or symptoms of Long COVID

For women in Belfast HSCT and South Eastern HSCT combined, the first full year of the COVID-19 pandemic was associated with a decrease in the percentage uptake of breast screening services.

Furthermore, the percentage uptake of breast screening services for eligible women in Belfast HSCT and South Eastern HSCT combined fell below the minimum standard for uptake of the Programme, which is set at 70%; however, none of the uptake rates in the other HSCTs or in Northern Ireland fell below this standard, even though those uptake rates decreased.

SECTION 21

Uptake for Bowel Cancer Screening

DATA SOURCE

Information is from Core tables 2020 Supporting Director of Public Health Annual Report 2021, Table 15d,⁵⁸ and Core tables 2019 Supporting Director of Public Health Annual Report 2020, Table 15d.⁵⁹

YEARS FOR WHICH DATA ARE AVAILABLE WITHIN COVID-19 TIMEFRAME

Financial year 2020/21

REPORTED IMPACT OF THE COVID-19 PANDEMIC ON DATA COLLECTION

The bowel cancer screening programme was paused in March 2020 in response to the COVID-19 pandemic. Screening colonoscopy services were reintroduced by Trusts from June 2020, for those who had had a positive screening result and were on a waiting list for this investigation.

Routine invitations for bowel cancer screening started again from week commencing 17 August 2020, beginning with people who were due to be sent a test at end March 2020. All routine invites will continue to be delayed by approximately five months until the programme has the capacity to catch up.⁶⁰

^{58.} Core Tables 2020 FINAL.pdf (hscni.net) (Last accessed 14 April 2023)

^{59.} Core Tables 2019 - final - 25-06-21.pdf (hscni.net) (Last accessed 14 April 2023)

^{60.} Bowel cancer screening | HSC Public Health Agency (hscni.net) (Last accessed 14 April 2023)

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PROFILE FINDINGS

In 2020/21, the first full year of the COVID-19 pandemic, in Belfast HSCT, the percentage uptake for bowel cancer screening was 53.71%.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the COVID-19 pandemic, the percentage uptake for bowel cancer screening increased by 5.87 percentage points, from 47.84% to 53.71%.

See pages 187-190, in the People Chapter for further detail of the findings before the COVID-19 pandemic.

KEY COMPARISONS

Comparison with Northern Ireland

When compared with Northern Ireland, Belfast HSCT had a lower percentage uptake of bowel cancer screening in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic (see COVID-19 People Figure 50)

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, the percentage uptake of bowel cancer screening increased:

- In Belfast HSCT by 5.87 percentage points, from 47.84% to 53.71% (a percentage increase of 12.27%)
- In Northern Ireland by 4.90 percentage points, from 53.04% to 57.94% (a percentage increase of 9.24%; see COVID-19 People Figure 50)

Comparison with other HSCTs

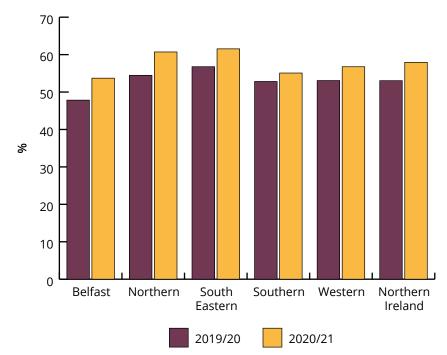
When compared with other HSCTs, Belfast HSCT had the lowest percentage uptake of bowel cancer screening in:

- 2019/20, before the COVID-19 pandemic
- 2020/21, the first full year of the pandemic (see COVID-19 People Figure 50)

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic, the percentage uptake of bowel cancer screening increased in all HSCTs, including Belfast HSCT (see COVID-19 People Figure 50).

COVID-19 PEOPLE FIGURE 50:

Percentage (%) uptake of bowel cancer screening by HSCT and Northern Ireland, 2019/20 and 2020/21



Sources: Core tables 2020 Supporting Director of Public Health Annual Report 2021, Table 15d and Core tables 2019 Supporting Director of Public Health Annual Report 2020, Table 15d

OBSERVATIONS ON THE DATA

Comparison with Northern Ireland

In comparison with Northern Ireland, the percentage uptake of bowel cancer screening was lower in Belfast HSCT, both before and during the first year of the COVID-19 pandemic; the gap between the two narrowed, with a greater percentage increase in Belfast HSCT compared with that in Northern Ireland.

Comparison with other HSCTs

Of all the HSCTs, Belfast HSCT had the lowest percentage uptake of bowel cancer screening both before and during the first full year of the COVID-19 pandemic; consequently, there was no change in the relative position of Belfast HSCT among HSCTs.

Between 2019/20 and 2020/21, from before the COVID-19 pandemic and covering the first full year of the pandemic:

- Belfast HSCT had the greatest percentage increase in the percentage uptake of bowel cancer screening at 12.27%
- Southern HSCT had the smallest percentage increase at 4.26%
- South Eastern HSCT had the median percentage increase at 8.40%

POTENTIAL IMPACT OF THE COVID-19 PANDEMIC

During the first full year of the COVID-19 pandemic, the percentage uptake of bowel cancer screening increased in:

- All HSCTs, including Belfast HSCT
- Northern Ireland

This increase occurred despite the pause in the bowel cancer screening programme in 2020.

For people in Belfast HSCT, the first full year of the COVID-19 pandemic has been associated with an increase in the percentage uptake of bowel cancer screening.

Although there was an increase in the uptake of bowel cancer screening in Belfast HSCT in 2020/21, uptake remained below the target of 55%. In 2020/21, Belfast was the only HSCT where uptake did not meet the target in contrast with 2019/20 when four of the five HSCTs including Belfast, were below target.



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