Welcome to the 11th ScotPHO e-Newsletter

In this e-Newsletter we feature some of the projects we’ve been working on over recent months and our ScotPHO stakeholders provide updates on current and planned public health-related projects.

If you have any comments or questions about the e-Newsletter or the ScotPHO collaboration, please email us at scotpho@nhs.net.

New on the ScotPHO website

Click on the headlines and / or hyperlinks below for more details

Gambling

The 2014 Scottish Health Survey reported that around two thirds of Scottish adults had spent money on gambling within the previous 12 months and many people gamble without experiencing any adverse consequences. However, some people experience extreme difficulties with their gambling behaviour, spending more time and money gambling than they would like or can afford. Problem gamblers experience a range of health harms including depression, anxiety and poor physical health. There can also be adverse consequences for family and friends and the broader community. Problem gambling can often co-exist alongside other health problems and it is recognised as a public health concern. It is estimated that in 2014 almost one in 100 Scottish adults (0.8% of the adult population, or around 36,000

Updates from ScotPHO stakeholders

The ScotPHO collaboration comprises a number of different organisations involved in public health intelligence in Scotland - see our About us web page for further details. Below are updates from some of our partner organisations and other ScotPHO stakeholders on current and planned public health-related projects.

ISD Scotland

Forthcoming research and publications include:

Maternal smoking: Smoking during pregnancy is associated with a wide variety of adverse health impacts on mother and child, including obstetric complications, impacts on fetal growth, increases in perinatal mortality and later effects on respiratory health, neuro-behavioural and reproductive outcomes. Work is being carried out using a large linked Scottish dataset to produce current estimates of the impact of maternal smoking.

Smoking cessation: Last year’s Smoking Cessation Service Statistics (Scotland) calendar year publication included for the first time trend data (2009-2014) and also prison quit attempts data. A much more interactive way of viewing the data was developed by means of interactive tables and charts, including multiple selection criteria for stratification of data. The upcoming publication (to be published on 4th October 2016) moves to financial year reporting and will include the performance figures against the 2015/16 Local Delivery Plan Standard.

NHS Health Scotland

- The Place Standard tool for Scotland, developed in partnership by Scottish Government Architecture & Place, NHS Health Scotland and Architecture & Design Scotland, has been launched.
people) were problem gamblers. See our new Gambling section for further details.

Religion, Spirituality and Belief

This new topic area on the ScotPHO website adds to an existing suite of information focusing on each of the ‘protected characteristics’. The data presented cover health issues, demographics, geographical differences, deprivation, mortality, risk factors and wellbeing and self-assessed health. Data by social class and sex cover mortality over the period 1991-2009 for five religious groups, including for people of no religion. See our new Religion, Spirituality and Belief section for further details.

Pulling in different directions?

This report considers the impact of economic recovery and continued changes to social security on health and health inequalities in Scotland and is an update to the baseline report Making a Bad Situation Worse?, published in October 2013. It provides an update on developments in the social security system and changing economic context and monitors relevant changes in population health and health inequalities in Scotland. It also presents findings from a rapid review of the literature to identify whether and which subgroups of the Scottish population have been disproportionately affected by the social security reforms. See the report’s publication page to download the report.

Investigating the role of benzodiazepines in drug-related mortality

Owing to a lack of research on benzodiazepines, the National Forum on Drug-Related Deaths commissioned work addressing why benzodiazepines are common in DRDs and what role they play in such deaths, particularly at the high doses often reported. This report presents the findings of a systematic review of evidence in relation to the use and misuse of benzodiazepines and highlights significant gaps in knowledge. See the report’s publication page to download the report.

Smoking attributable deaths in Scotland

This report expands on the smoking attributable deaths analysis produced for the local profiles published by ScotPHO (ScotPHO profiles), focusing specifically on the results by age group and smoking-related diseases, as well as splitting the results by gender. New analyses show trends in smoking attributable deaths for 2003 and 2008-2014. There is some discussion of current and previous methodologies used to

- The final Monitoring and Evaluating Scotland’s Alcohol Strategy (MESAS) annual report was published in March 2016. This was accompanied by two journal papers exploring the role of factors external to the strategy on trends in alcohol-related deaths. An updated analyses of alcohol sales and price data was published in May 2016.
- Several journal papers which Health Scotland contributed to were published in July/August 2016, including: age, period and cohort effects in suicide trends in Scotland; life expectancy in Scotland by ethnic group; and an evaluation of the Keep Well health programme.

Glasgow Centre for Population Health

Recently published reports include:

- History, politics and vulnerability: explaining excess mortality in Scotland and Glasgow - A joint report by GCPH, NHS Health Scotland, University of the West of Scotland and University College London. (Published May 2016)
- Glasgow: health in a changing city - A descriptive study of changes in health, demography, housing, socioeconomic circumstances and environmental factors in Glasgow over the last 20 years. (Published March 2016)
- Social contexts in health - This report provides a synthesis of our learning about social contexts and health. Social contexts can be understood as the relationships and networks of support that people experience, the interconnections within communities, and the involvement of people and communities in decisions that affect their lives. (Published February 2016)

Future research and publications include:

- Analyses of income and earnings inequalities.
- Age, period and cohort effects in mortality for UK cities.
- Analysis of mortality trends in Glasgow versus the rest of Scotland by gender, age and cause over 40 years.

Scottish Government

- The Scottish Index of Multiple Deprivation 2016 (SIMD16) was published on 31st August 2016.
- The Scottish Health Survey (SHeS) 2015
calculate smoking attributable deaths, as well as a full description of the current method. Time trends and other results are presented by disease type, age group and gender. See the report's publication page to download the report.

Using routinely collected data to compare hospital admission rates by ethnic group in Scotland

This new report examines whether ethnicity coding is now of sufficient quality and completeness within routinely collected hospital data to allow regular publication and analysis of these data. This report presents the first national analyses across Scotland for all-cause hospitalisation rates, and those for coronary heart disease, presenting standardised rate ratios for ethnic groups relative to the White Scottish reference population. See the report's publication page to download the report.

Suicide in Scotland

The Suicide section has been updated with the suicide figures for 2015. There were 672 suicides registered in Scotland in 2015, compared to 696 in 2014, indicating that the declining trend in suicide rates in recent years appears to be continuing. Suicide rates are strongly related to deprivation level, and in 2011-15 the rate in the most deprived areas was three times higher than in the least deprived. This inequality has, however, decreased in absolute and relative terms over the last decade. The section includes details of the number and rate of suicides for Scotland, NHS board areas, local authority areas and for the UK overall.

Kidney Disease

Chronic kidney disease affects at least 175,000 Scots and nearly 4,800 depend on dialysis or a kidney transplant. This new web section reviews the most recent data on kidney disease in Scotland. The section includes a guide to available data sources in Scotland together with links to relevant reports. The section has been written by experts from the University of Aberdeen in collaboration with the Scottish Renal Registry. We hope it will be useful for those who are unfamiliar with the topic area and who need an accessible guide to support needs assessment or service planning. See our new Kidney Disease section for further details.

ScotPHO profiles update

Online Profiles Tool: Over the last year, two new profiles have been added to the ScotPHO Online Profiles Tool (OPT). The Mental health profiles detail a range of indicators relating to annual report will be published in September 2016. Previous publications, information on the survey content and tips for analysts using SHeS data are available on the SHeS website.

- The first set of trend data from the Scottish Surveys Core Questions (SSCQ) was published in May 2016. SSCQ provides detailed information on the composition and characteristics of Scottish households and adults across topic areas including equality characteristics, housing, employment, health and perceptions of crime.
- The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 2015 National Report will be released in October 2016.
- The next edition of Long-term Monitoring of Health Inequalities statistics will be released in March 2017. This is a delay to the usual October publication date but the report will provide a two-year update.
- Obesity Routemap indicators will be updated in December 2016.

Scottish Public Health Network

ScotPHN has completed a Review of the Obesity Route Map. It has produced guidance for public health on:

- skin cancer,
- palliative and end of life care,
- adverse childhood experiences,
- migrant health, and
- the harmful effects of gambling.

Current projects include supporting the Shared Services Portfolio – Public Health which is building on the work of the Public Health Review exploring how the public health function can be delivered using a best for Scotland approach. Also, a healthcare needs assessment of specialist podiatry and the development of best practice guidance on health and housing (which will inform a programme of work within NHS Health Scotland), will be published later in 2016.

ScotPHN continues to support various public health networks (SMaSH, HENS, SHIIAN); special interest groups on violence, mental health and pharmaceutical public health are being developed.

More details of its work are available on the ScotPHN website and via @NHS_ScotPHN.

MRC/CSO Social and Public Health Sciences Unit, University of Glasgow

Some examples of our recent publications are
mental health at local authority level. The Deprivation profiles enable users to compare a range of indicators at local authority or NHS board level by deprivation quintile. There are currently seven profiles accessible through the OPT (Health and wellbeing, Alcohol, Deprivation, Drugs, Mental health, Older people and Tobacco). Indicators within most of these profiles are updated on a continuous basis as new data becomes available.

Health and Wellbeing Profiles Storymap:
We have published a Health and wellbeing profiles interactive storymap, which provides comparative analysis and commentary around the Health and wellbeing profiles data available in the ScotPHO OPT.

Future developments:
- We are currently working on developing Children and young people's profiles and we aim to make these available in the OPT by the end of the current financial year.
- We will be working towards adjusting our profiles to enable reporting by new geographies (e.g. 2011 datazones) and organisational units such as integrated joint boards.
- Local authority Health and Wellbeing Profile reports, providing a textual summary of the key points specific to each area including spine charts and infographics, have been developed and will be disseminated in autumn 2016.

Immunisations
The Immunisations section presents data on immunisations for children, teenagers, adults and non-routine immunisations and also inequalities in uptake. Data from the Scottish Immunisation Recall System show that at 31st December 2014, while uptake rates for MMR1 are high across all SIMD deprivation quintiles, at 24 months there is a difference in the timing of the uptake (see MMR1 Chart tab in the Excel file). Children in more deprived areas are more likely to be vaccinated later in their second year than children in less deprived areas. A clear gradient exists across deprivation quintiles from 92.3% of children receiving MMR1 by 15 months of age in the least deprived quintile compared to 88.8% in the most deprived quintile.

Coming soon on the ScotPHO website
- A literature review examining the nature of ‘good work’ and its association with

summarised below:
- **Developing a new small-area measure of deprivation using 2001 and 2011 census data from Scotland**: How deprivation is measured has a great impact on its explanatory power with respect to health. We compare previous deprivation measures used in Scotland and propose a new deprivation measure - the relative index of inequality (RII) - using the 2001 and 2011 Scottish census data.
- **Adolescent smoking and tertiary education: opposing pathways linking socio-economic background to alcohol consumption**: Young adults are more likely to drink heavily if they both smoke and participate in tertiary education (college and university).
- **The impact on health of employment and welfare transitions for those receiving out-of-work disability benefits in the UK**: Transitions into employment improves health, particularly mental health.
- **How much of the difference in life expectancy between Scottish cities does deprivation explain?**: Once deprivation is accounted for, life expectancy is not systematically lower in Glasgow than elsewhere in Scotland.
- **Has Childhood Smoking Reduced Following Smoke-Free Public Places Legislation?**: Increased tobacco control, including smoke-free legislation, has reduced adolescent smoking uptake but inequalities remain.
- **Modelling Future Coronary Heart Disease Mortality to 2030 in the British Isles**: Modelling of future CHD deaths shows how many could be prevented through addressing four risk factors (smoking, physical inactivity, and salt and saturated fat intake).

A full list of outputs is available on our website at [http://www.sphsu.mrc.ac.uk/](http://www.sphsu.mrc.ac.uk/).

Scottish Learning Disabilities Observatory
People with learning disabilities and/or autism experience significant health inequalities, high rates of mental and physical multi-morbidity, and a different health profile compared to the general population. Multiple factors, along with persistent barriers to accessing health, care and community supports exacerbate these inequalities. Despite this there has been a historical dearth of good quality information available to inform the development of public
health, by occupation, industry and for different population sub-groups.

- A research report using survey data to examine health outcomes, behaviours and determinants by occupation and industry in Scotland.
- A new section on Screening covering: the basics of screening; criteria for a screening programme and what needs to be considered before one is initiated; the programmes available in Scotland and available data on uptake; and, a critique about the impact of screening on health inequalities.
- A Smoking Ready Reckoner that uses simple calculations to estimate the potential effect of reduced smoking prevalence on three outcomes: smoking-attributable deaths; smoking-attributable hospital admissions; and smoking-attributable NHS costs. This is an update of a previous report published in June 2012.

The publication of The keys to life learning disabilities strategy in 2013 and the more recent Review of Public Health in Scotland emphasise the vital role that health surveillance can play addressing health inequalities. The Scottish Learning Disabilities Observatory was established in 2015 to work with partners across public health to increase visibility of these populations within public health data, and to generate and interpret high quality evidence. Information and resources are available on the Observatory website at www.sldo.ac.uk.

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