Postcards from the Coast

Coastal Communities in East Sussex, their health, wellbeing and assets.

East Sussex
County Council

Contents

1. Foreword

For many of us, our coast is a source of pleasure, fond memories and hope. Much of the East Sussex coast is shaped by our desire to enjoy the shoreline for a few hours, a holiday or a lifetime.

As children we may have made a trip to the seaside and beach on a sunny summer's day, this would have been full of exciting sights and experiences for the young mind. The Victorians saw our coastline as a holiday destination, for health and happiness, which set the path for the development of seaside resorts with piers and other forms of leisure and pleasure being built, much of that exists to some extent today. Whilst, in the modern age, many see the coast as a place to enjoy a well-earned retirement and our later years.

Our coastal towns, villages and communities in East Sussex are places that bring joy to so many people, it felt appropriate to use this year's annual report to show case our coastal communities. This report aims to balance what is great and precious about our coastal communities whilst acknowledging that there are health, wellbeing and other challenges associated with our coastal communities. Let's be clear, it's people in our coastal communities that experience fewer years of good health and shorter lives compared to their counterparts in non-coastal parts of East Sussex. We can and should take action to address the extremes that exist within East Sussex, such as the likelihood that a person living in St Leonards will have 20 fewer years in good health compared to a person living in north Wealden.

I see East Sussex as one of the most diverse coastal counties and I believe we are the only county council in which all our related district and borough councils have a coastal strip of their own. Each of these places has a range of assets that support the health, wealth and happiness of those that live and visit there.

This report builds on the previous reports that have been published since I became Director of Public Health at East Sussex County Council. These reports have sought to highlight the range of factors that influence the health and wellbeing of our local population, beyond the provision of free universal NHS healthcare.

Previous reports have included the following titles:

- Creativity for Healthier Lives
- Social Connections and Multi-agency Work to Tackle Loneliness
- Work, Skills, and Health
- COVID-19 in East Sussex
- Health and Housing

I have tried to ensure that we cover these topics again within this report with a focus on coastal communities. I am keen to demonstrate, that to improve health, we must continue to take collective and sustained action on the availability and quality of available housing, the need to improve school attendance to help drive performance in education and developing our local economy so it supports good work and skills. We must also support activities that improve social connection and reduce loneliness whilst supporting people to have access to creative and cultural opportunities throughout their lives. These are the essential building blocks for a healthy life that is well lived.

Each section of this report highlights local action that improves and protects the health of our local population. I am delighted by the many contributions received by partners and elected members across East Sussex that have helped to produce this report.

I hope you enjoy this report and share with me, the need to address the health, wealth and happiness of our coastal communities. I also hope it inspires you to Experience Sussex, visit our coastal towns and villages and enjoy all they have to offer you, your friends and family.

2. Executive Summary

The lives of some East Sussex residents living on our coast are being cut short. We know that this is due to some of the following factors:

- Housing,
- Education,
- Skills and employment,
- Income,
- Transport,
- Safe and well-connected communities

On average, residents who live in non-coastal communities enjoy ten years of extra life and can expect to spend an extra twenty years of good health compared to their coastal counterparts.

In addition to the factors listed above, East Sussex has long seen an in-migration of older, retired citizens posing an increased demand on health and social care services combined with an outmigration of younger populations in search of education and employment opportunities. This skews the age profile of East Sussex but poor health outcomes for coastal communities are not solely due to the older population.

Many coastal communities were historically built around single industries like tourism, fishing, or port work, which have since declined, largely due to globalisation and this has contributed to increasingly scarce, low-paid, or seasonal employment.

Census data from 2021 shows that coastal communities have higher levels of deprivation, fewer and lower level qualifications and higher unemployment rates. The differences in health and wellbeing between coastal communities and non-coastal communities can be seen at every age. In coastal communities (compared to non-coastal communities):

- Childhood vaccination rates are lower leading to poorer immunity,
- School children are more likely to have a poor diet,
- Adults are more likely to smoke,
- Older people are more likely to have non communicable conditions such as hypertension and coronary heart disease, and
- Across the ages, there are higher incidents of depression and hospital admissions for self-harm.

This report explores the above issues in detail but also celebrates coastal communities as places of beauty, history and home to thriving communities in the words of those living there.

The report also highlights several key programmes that the council and our partners have been implementing to improve the health and prosperity of those in our coastal communities. This includes interventions that aim to improve local housing, develop skills and our future health and care work force, workplace health initiatives and programmes that aim to reduce loneliness.

Despite the health inequalities that exist in our coastal communities in East Sussex, we know what measures can address and improve these. The recommendations in this report outline a number of areas for action to improve the health and wellbeing of coastal communities.

Recommendations

The Building Blocks of Health

1. Build and sustain, long term, multi-agency action on the building blocks of health. These include programmes that support:

    1.1 Increased educational attainment and aspiration for those in coastal communities,

    1.2 Increased availability of better-quality and affordable housing and homes for those in coastal communities, and

    1.3 The development of the local economy to support high quality and secure employment opportunities in coastal communities

2. Undertake an assessment of the opportunities that local government reform and a combined Sussex Mayoral Authority could present in addressing the factors that influence coastal health and opportunity inequalities in East Sussex.

3. Build on our community development programmes such as Making It Happen and Mr Hastings and St Leonards, and work alongside people in their coastal neighbourhoods who want to take action to create positive change.

4. Further develop our cultural and nature based coastal assets locally to ensure those living in and near them can access them and benefit from them for their health and wellbeing.

5. Recognise all the impacts of climate change on our coastal communities. Work collaboratively with partners to protect our coastal communities from current and future risks of climate change and ensure they can take proactive measures to protect themselves and livelihoods from climate hazards in the short, medium and longer term.

6. Build on the Aspirations programme delivered in schools in Hastings that aims to address the health and care workforce shortages in coastal communities by promoting medical, health and care careers in Hastings.

7. Further develop our local tourist economy and the 'Experience Sussex' initiative to support local prosperity in coastal communities in East Sussex.

Research and Data

8. Develop further research partnerships and enhanced data collection and sharing opportunities that provides detailed local evidence on what works to improve the health, wealth and happiness of our local coastal communities in the county.

9. Ensure and advocate that large scale health and care research programmes, such as the Our Future Health study actively recruits coastal communities to their studies similarly in a way they would recruit participants with protected characteristics or from an inclusion group.

Targeted initiatives and Prevention

10. Explore the feasibility and acceptability of specific national health inequalities initiatives such as becoming a Marmot Coast and build on the learning from initiatives by the Coastal Navigators Network over the next two years.

11. Build on existing targeted and enhanced interventions to increase the uptake of national vaccinations and screening programmes.

12. Develop our targeted and enhanced primary prevention programmes that reduce and delay the burden of non-communicable diseases such as cancer and cardiovascular disease in our coastal communities.

13. Work with our NHS partners, particularly GP practices to ensure that secondary and tertiary prevention of cardiovascular diseases is maximised in our coastal communities.

14. Build on our workplace health programme to ensure that workplaces in coastal communities are supporting the health and wellbeing of their employees.

15. Build on our extensive programme of work to improve cliff safety and reduce the number of deaths at cliffs in East Sussex.

16. Develop our county wide Public Health approach to gambling and ensure that our coastal communities are not disproportionately exposed and affected by harms caused by gambling.

17. Build on action on healthy ageing and tackling ageism and promoting age friendly communities and employers within our coastal communities.

3. Introduction

East Sussex has a nationally significant and internationally recognised coastline including the Seven Sisters, Cuckmere Haven, Beachy Head and Camber Sands. These local natural wonders neighbour many coastal towns, villages and communities. These places are enjoyed by residents and visitors alike. Each of our coastal towns and communities have their own unique history and character and this report aims to showcase this as well as outline their health and wellbeing.

This report builds on the Chief Medical Officers 2021 report, Health in Coastal Communities[1]. Hastings was included within the report as a case study, and we hope this report will provide local partners with an opportunity to learn more about the health and wellbeing assets in each of these coastal communities from East Saltdean in the west and Camber in the east of East Sussex.

Living by the coast offers numerous opportunities that benefit both mental and physical health. Coastal living can encourage an active lifestyle with opportunities for walking, swimming, and other outdoor activities. However, poor transport connectivity and the limited labour catchment area, restricted by the sea, are often paired with the socio-economic challenges, in most cases originated by a long process of de-industrialisation[2] therefore our communities aren't achieving their full potential.

The health and wellbeing of these coastal communities could be improved, and this report profiles the health and wellbeing of each place whilst celebrating what makes these great places to live.

A range of data sources have been used within the report, including Census, Quality and Outcomes Framework GP practice data and Hospital Episode Statistics. Rather than reproducing data that is already available, e.g. Area profiles for Eastbourne and Hastings, these are signposted to within this report. Where other types of relevant local reports, such as East Sussex area snapshots are also published for Peacehaven, Newhaven, Hollington in Hastings and areas of Bexhill-on-sea they are also sign posted to rather than reproduced.

A key term to note is the building blocks of health. These are the wider determinants of health and these include education, housing, employment and occupation and the need to belong to a community. These topics have been covered in previous annual reports and will be revisited themes through a coastal perspective.

Attention has been drawn to several issues that affect our coast. This includes coastal flooding and climate change, bathing water quality and the persistence of cliff locations used by too many people to end their lives.

Action can be taken to improve the health of our coastal communities, this in turn will reduce the health inequalities that exists in the whole county.

This report shares what is great about the coastal communities we have in East Sussex, all of which have key strengths to build on and can work together to build a fairer, happier and healthier East Sussex.

4. Defining Coastal Communities

What is a coastal community? There is no agreed definition and other reports from different agencies have used a variety of definitions for coastal communities. For this report, we have taken several different approaches to try and include all our coastal communities in the county. However, each approach to defining them has advantages and disadvantages.

The ONS published a report in 2020 that defined coastal towns and cities[3], it split them as 169 coastal towns between seaside towns and other coastal (non-seaside) towns. To make the distinction between a seaside town and other coastal town, they consulted several lists of seaside towns previously published as well as examining a range of information on each town. Their aim has been to split the towns depending on whether the town has a tourist beach and associated visitor attractions or whether the town is focused on other activities such as being a port town or a town with an industrial heritage. However, this definition means some of our smaller coastal communities in East Sussex, such as Camber, would be not captured.

Since then, the ONS has published Census 2021 data using a Coastal Built-up area classification. Built-up areas (BUAs) are a geography based on the physical built environment, using Ordnance Survey topographic data to recognise developed land, such as cities, towns, and villages. This allows economic and social statistics to be investigated based on actual settlements where most people live[4].

Coastal BUAs included have a boundary within 1 kilometre (km) of the coastline and with a surface area of 50% or more within 3km of the coastline or BUAs which have a perimeter of more than 2.5km within 25 metres of the coastline. These are then classified by the size of the population.

Table 1: ONS Coastal Built-Up Area classifications.

| Population range (Usual resident population)	BUA size classification	Approximate settlement type	East Sussex Coastal community
0-4,999	Minor	Hamlet or village	Camber Crumbles East Saltdean Fairlight Pett Pevensey Bay Telscombe Cliffs Winchelsea Beach
5,000-19,999	Small	Larger village / small town	Newhaven Peacehaven
20,000-74,999	Medium	Medium towns	Bexhill-on-Sea Seaford
75,000-199,999	Large	Large towns / smaller cities	Eastbourne Hastings
200,000+	Major	Cities	

It is this definition that we have used as the basis of our report. This definition allows for the breadth of our coastal communities to be included within the report.

The majority of health and wellbeing data is not available for BUAs, and where this is the case the ONS Lower Super Output Area (LSOA) best fit lookup to BUAs has been used. This lookup maps BUAs to LSOAs, and the LSOAs that coastal BUAs are mapped to, become 'coastal LSOAs', and LSOAs that non-coastal BUAs map to become 'non-coastal LSOAs'.

Therefore, coastal / non-coastal BUAs are not the same populations as coastal / non-coastal LSOAs. For example, some of our minor coastal BUAs in Rother district align to an LSOA that predominantly includes populations in non-coastal locations and so are not captured within coastal LSOAs. There are also a number of LSOAs within the county that the best fit lookup means that no BUA is assigned to it, and hence are not included within the coastal areas, or within a non-coastal comparator Map 1.

Some data presented within this report is based on school or GP practice level data. In these instances, the coastal classification of the LSOA of residence of pupils / patients has been used to determine whether the school/practice can be considered as coastal or non-coastal.

Map 1: East Sussex Build Up Areas and LSOA best fit map.
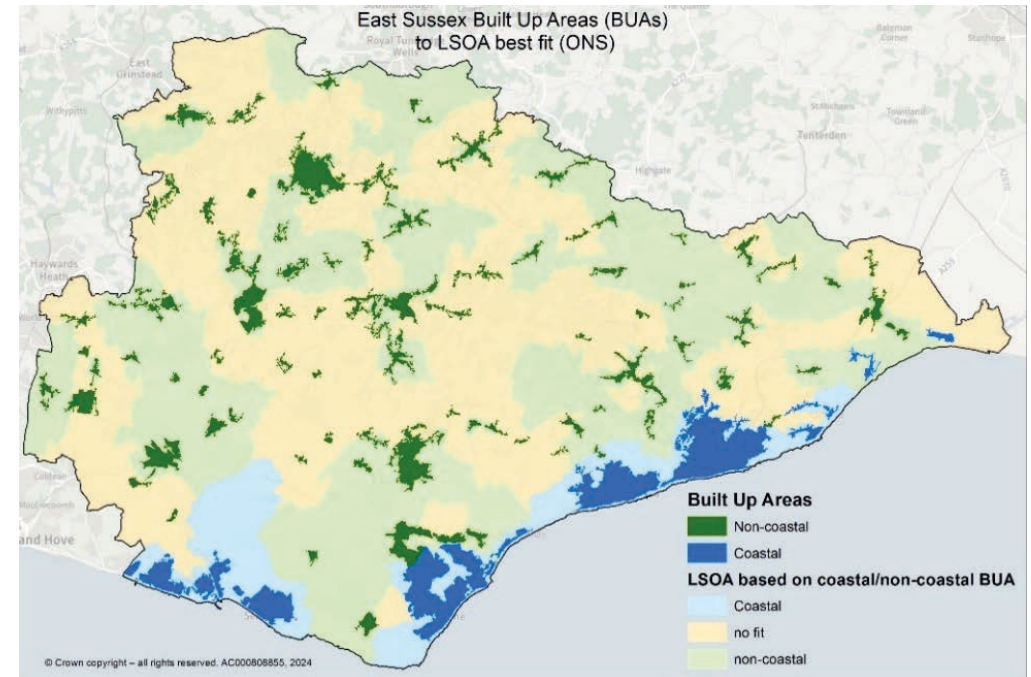
Other definitions also exist with The Coastal Communities Alliance describes a coastal community [5] 'as any coastal settlement within an English local authority area whose boundaries include English foreshore, including local authorities whose boundaries only include estuarine foreshore. Coastal settlements include seaside towns, ports and other areas which have a clear connection to the coastal economy'.

Whilst research led by the University of Plymouth, Understanding the research and policy needs of English coastal communities, towards a new coastal classification project[6] aims to co-design, implement, and make publicly available a geodemographic classification of English coastal communities. The initiative is driven by the growing

awareness of the challenges faced by these communities, which have some of the worst health outcomes in England, as highlighted in the 2021 Chief Medical Officer's annual report and the 2022 Levelling up White Paper.

Despite increasing policy attention, there are barriers to developing effective solutions due to insufficient knowledge about the nature and diversity of coastal communities. Some communities are struggling, while others are thriving. The relationships between economic, social, cultural, political, and historical factors are not well understood, and the specific needs of coastal communities often go unreported due to the lack of targeted data.

The project aims to create an evidence-based classification of coastal communities linked to granular data. It involves stakeholder engagement to identify key variables, provide technical advice, and ensure the classification is relevant and updatable. The project will collect and analyse a wide range of data at a small area level, using a coastal 'flag' to explore the unique attributes of coastal communities and the impact of contextual factors on health, education, social mobility, and other socio-economic outcomes.

Ultimately, the classification will enhance understanding of the varied characteristics and needs of coastal communities, supporting the development of effective policy responses and facilitating shared learning from applied research and local interventions.

5. National Coastal Health and Wellbeing

5.1 England's Chief Medical Officer (CMO) Professor Chris Whitty's 2021 report, Health in coastal communities

England's Chief Medical Officer (CMO) Professor Chris Whitty's 2021 report, Health in coastal communities[7], highlighted the persistent health challenges faced by coastal communities despite the efforts of local leaders. These communities experience a high burden of physical and mental health conditions, lower life expectancy, and higher rates of major diseases.

The report recommended the development of a cross-government national strategy to improve the health of coastal communities. Professor Whitty collaborated with Directors of Public Health in coastal regions, examining case studies from large port cities and smaller seaside towns.

These case studies provided insights into the demographic structure, health and wellbeing outcomes, and the strengths and challenges of these communities. Hastings was one of the case studies included in the report.

Key points from the report include:

Older population: Coastal regions often attract older, retired citizens who have more health problems but lack the same access to healthcare as urban areas. In 2019, 31% of the population in smaller seaside towns were aged 65 or over, compared to 22% in smaller non-coastal towns.

Healthcare staff shortages: Coastal communities face difficulties in attracting NHS and social care staff. The report found that these areas have 14.6% fewer postgraduate medical trainees, 15% fewer consultants, and 7.4% fewer nurses per patient than the national average, despite higher healthcare needs.

Housing and deprivation: An oversupply of guest housing has led to houses in multiple occupation (HMOs), resulting in concentrations of deprivation and ill health. Poor quality but cheap HMOs attract vulnerable people from other parts of the UK, often with complex health needs.

Geographical barriers: The sea acts as both a benefit and a barrier. It is harder to attract healthcare staff to peripheral areas, catchment areas for health services are foreshortened, and transport is limited, which in turn limits job opportunities. The least wealthy often then have the worst health outcomes.

The report also noted that coastal communities with poor health outcomes share more similarities with other coastal areas than with their nearest inland neighbours. For example, Blackpool has more in common with Hastings, Skegness, or Torbay than with Preston, just 18 miles inland.

Despite these challenges, the report highlighted the paradox that coastal areas are generally healthier than inland counterparts due to the physical and mental health benefits of living near the coast. These benefits include better access to outdoor spaces for exercise, social contact, and lower air pollution.

The CMO made three key recommendations:

1. National Strategy: Develop a cross-government national strategy to improve the health and wellbeing of coastal communities, incorporating key drivers such as housing, environment, education, employment, and transport.

2. Healthcare Workforce: Address the mismatch between health and social care worker deployment and disease in coastal areas. This should be actioned by NHS England.

3. Research and Data: Improve the lack of granular data and actionable research into the health needs of coastal communities. Research funders should provide incentives for research aimed specifically at improving coastal community health.

These recommendations aim to address the unique challenges faced by coastal communities and improve their overall health and wellbeing.

5.2 The decline of English seaside towns and possible solutions

In her book, The Seaside, England's Love Affair, Madeleine Bunting [8]considers five trends that have contributed to the deprivation of seaside towns. She looks at possible paths to turning their fortunes around, she calls this pattern of social and economic decline England's 'salt fringe', analogous to the US rust belt as a process of deindustrialisation and social decline. It afflicts towns on every English coastline from Hastings on the south coast to Clacton on the east and Weston-Super-Mare on the west. At the root of this plight is the challenge of dealing with an exceptional combination and concentration of five trends. The decline of English seaside towns can be attributed to five main factors:

1. Wage levels in seaside resorts are among the lowest in the country due to the dominance of low-paid sectors like care and hospitality, and the prevalence of seasonal work.

2. The population in many seaside resorts is ageing, with towns like Minehead and Skegness having the oldest populations in the country. This ageing population, combined with the exodus of young people seeking better job opportunities, contributes to high rates of long-term health conditions and loneliness among retirees.

3. There is a persistent problem of low educational achievement and low aspiration in many coastal towns. This is compounded by difficulties in recruiting and retaining quality teachers, resulting in low social mobility and trapping unskilled youngsters in low-paying jobs.

4. A dysfunctional housing market is crippling these towns' search for a future. In some places, there is a lack of affordable housing, making it difficult for local employers to fill jobs. In other areas, former hotels and boarding houses have been converted into cheap bedsits, attracting vulnerable populations and putting a strain on public services.

5. Seaside towns attract a highly vulnerable population, including people coming out of prison, fleeing domestic violence, or struggling with substance abuse and mental health issues. This concentration of vulnerability puts intense strain on public services like the NHS, social services, and the police.

Similarly to the CMO report, Bunting outlines possible solutions to address disadvantage in English coastal towns. These include:

1. Raising political awareness about the importance of coastal deprivation is crucial. Seaside resorts, though representing a small percentage of the national population, attract millions of visitors annually, contributing significantly to people's wellbeing and life satisfaction. For instance, Blackpool sees 13 million visitors each year, while Skegness attracts 4 million.

2. Better data collection, particularly more granular data, could improve awareness and debate about coastal poverty, which often clusters in small pockets not captured by broader statistical measures.

3. Investing in infrastructure, especially connectivity, is essential. Good public transport and digital connections are key areas for improvement. The rise of home working since COVID-19 has opened new opportunities for some seaside resorts, with young families moving from urban centres like London and Manchester to more affordable coastal towns.

4. Community groups around the coast are mobilising around local heritage and welfare projects, such as soup runs, food banks, and creative initiatives to inspire youngsters. Ambitious projects like the Campus for Future Living in Mablethorpe, involving Lincoln medical school and a café for care workers, address prevalent health issues. Similarly, the new Eden North visitor attraction in Morecambe and East Quay in Watchet, combining an art gallery with workshops and studios, offer inspiring examples of how England can re-imagine and revitalise its beloved coastal areas.

5. The health and care workforce in coastal communities

Following on from the CMO report, programmes in East Sussex have acknowledged the challenges associated with recruiting to the health and care workforce. Attracting and retaining NHS and social care staff in these areas is sometimes difficult. Health Education England's analysis within the Chief Medical Officer's Annual Report 2021 Health in Coastal Communities report shows that coastal communities, despite having older and more deprived populations, have significantly fewer postgraduate medical trainees, consultants, and nurses per patient. Health service catchment areas are also limited, and transport to major NHS centres is often restricted.

There is a notable lack of data and research on the health of coastal communities, with most data only available at broader local authority, masking the true extent of deprivation and health.

A national strategy, alongside local and regional initiatives, is needed to address these recurring problems. Without systematic action, the poor health outcomes in coastal communities will worsen as the population ages. The medical profession, researchers, public health officials, and all levels of government have a responsibility to tackle these public health challenges. Within East Sussex we have started to address this workforce challenge.

Aspirations: Inspiring Future Health and Social Care Workers in Hastings

Working in health and social care is considered personally and professionally rewarding. It offers countless career streams[9] from nursing and medicine to social work, physiotherapy, dentistry and scientific roles. However, many children, especially those from disadvantaged backgrounds, may not realise these options are open to them. In Hastings, 'Aspirations' is trying to change these perceptions by showing young students what is possible.

Originally called 'Grow your own GP', Aspirations was initially designed and funded as one of the prototypes tested within the Universal Healthcare programme in Hastings. This programme[10] saw a collaborative effort between academics and health and care leaders toward the shared purpose of making healthcare fair for all. It recognised the role of social, economic, and environmental factors as building blocks of health, and it focused on testing innovative ways to guarantee equal access to healthcare services and opportunities for all. Public Health at East Sussex County Council has decided to continue funding Aspirations for the next three academic years.

Aspirations aims at breaking down barriers, inspiring ambition, and helping children from disadvantaged backgrounds in Hastings choose for a brighter future; it is delivered by a local organisation called Education Futures Trust[11].

Targeting Year 5 students (ages 9-10) from schools in high areas of deprivation, the project offers seven interactive sessions. Children meet local health and social care professionals, including critical care nurses, junior doctors, midwives, school nurses, social workers, and microbiologists. These sessions are not just about listening; they

include practical activities like learning cardiopulmonary rehabilitation (CPR) and using a defibrillator. This hands-on approach makes the careers feel real and achievable.

The power of seeing role models from their local neighbourhoods, challenging stereotypes, and experiencing hands-on activities constitutes the basis of Aspirations, which believes in the motto: If you can see it, you can be it. By introducing children to real healthcare professionals, they can imagine themselves in those roles and see that these careers are within reach.

Pupils also get to ask questions and learn about essential skills such as communication, problem-solving, empathy, compassion and leadership. This helps them understand the transferable skills they will need and the subjects to focus on in school, empowering them to pursue these careers.

Teachers and parents are invited to some of the sessions to become more confident on pathways around job opportunities in health and care.

The first year of Aspirations reached 104 children in four Hastings schools. At the start, only 13% of the students were interested in health and social care careers. By the end, this had jumped to 32%. Students could also name more health and care professions, going from 15 to 25.

Additionally, 88% recognised that English and maths are crucial for all future careers, and 72% gained a better understanding of what it's like to work in the NHS.

Over the next three years, Aspirations will continue to reach more schools in Hastings, with a particular focus on engaging with parents. By helping them identify what jobs are available, the programme aims to inspire whole families with intergenerational impact. Another key priority is to work with healthcare, education and academic partners to create a pathway from primary school up until employment, including work experiences, placements, or mentoring.

This initiative not only raises aspirations but will lead to improved access to high quality jobs. This means secure income and positive effect on mental health and wellbeing. Long term, this project aims to contribute to the sustainability of the local health and care workforce, currently considered a priority particularly in coastal areas.

6. Our County and Our Coastal Communities

6.1 East Sussex

The geography of East Sussex

East Sussex is located on the southeast coast of England. It is currently a two-tier local authority, with an upper tier local authority (East Sussex County Council) and five lower tier local authorities (Eastbourne Borough Council, Hastings Borough Council, Lewes District Council, Rother District Council and Wealden District Council) covering a population of 545,800 as per the Census 2021.

East Sussex lies between Kent to the north and east, and Brighton and West Sussex to the west. The most populated areas are along the coast with other inland towns surrounded by more rural areas.

The county includes the iconic Seven Sisters coastline, the South Downs National Park and the High Weald area of Outstanding Natural Beauty. Within Lewes district there is a port at Newhaven with cross channel connections to Dieppe for both commercial and private passengers.

Map 2: Map of East Sussex.

6.2 Demographics

6.2.1 Age

The population of East Sussex was 545,800 as per the Census 2021, 303,955 (55.60%) of those live in coastal BUAs. There is considerable variation in the graphical and population size of East Sussex Coastal BUAs. BUAs are classified by population size as minor, small, medium, large or major, and characteristics are explored using Census 2021 data.

East Sussex has two large, two medium, two small and eight minor Coastal BUAs. The median age for East Sussex Coastal BUAs is outlined in table 2. The majority of East Sussex of coastal BUAs have a median age that is older than the median age for England and Wales coastal BUAs of the same size.

However, all coastal areas closest to the neighbouring major city of Brighton and Hove have a median age lower than the average of the for England and Wales coastal BUAs of the same size. The only other exception is Camber with a median age of 50 which is younger than the median age for minor coastal BUAs in England and Wales of 53.

An older population brings benefits, they often contribute to the economy through volunteer work, family care and part-time jobs[12]. However, the natural ageing process brings about physiological changes. This gradual decline increases the risk of chronic conditions such as heart disease, arthritis, and diabetes[13].

In addition to the biological aspects, older populations might face challenges in accessing healthcare. Limited mobility, financial constraints, and inadequate transportation can make it difficult for

seniors to visit healthcare providers. These barriers often lead to delays in diagnosis and management of health conditions, exacerbating their severity.
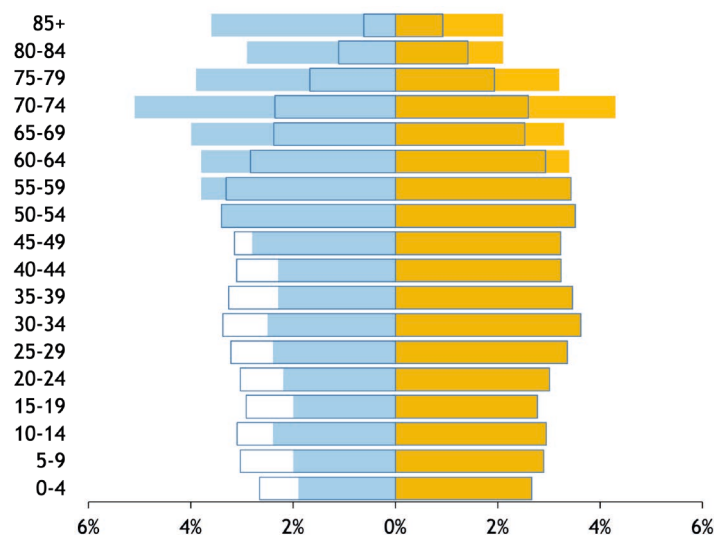
Table 2: The median age of East Sussex Coastal BUAs compared to the Median age for England and Wales Coastal BUAs of same size.

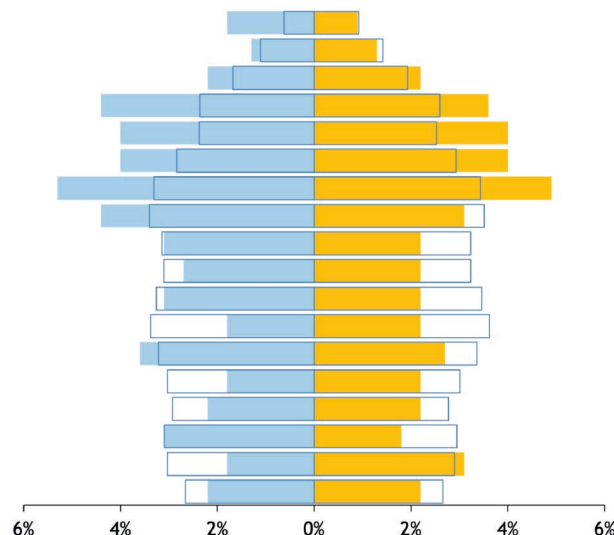| BUA Size classification and median age for England and Wales	BUA Name	Median age
Large Median age = 41	Eastbourne	45
	Hastings	43
Medium Median age = 44	Bexhill-on-Sea	54
	Seaford	54
Small Median age = 48	Newhaven	40
	Peacehaven	46
Minor Median age = 53	Camber	50
	Crumbles	54
	East Saltdean	51
	Fairlight	63
	Pett	58
	Pevensey Bay	59
	Telscombe Cliffs	45
	Winchelsea Beach	60

Figure 1: Population pyramids of East Sussex Coastal Built-Up Areas England 2021   ☐ England Male   ☐ England Female   ■ Location Male   ■ Location Female

The following pages include the population pyramids for our 14 coastal build up areas. These are split by gender and five-year age bands and are compared to England. They highlight the range of age profiles we see between these communities. Our coastal communities to the West of county, Telscombe Cliffs, Peacehaven and Newhaven are closer to the national age profile, as are our larger towns of Hastings and Eastbourne. Bexhill – on – sea, Camber, Crumbles, East Saltdean, Fairlight, Pevensey Bay, Pett, Seaford and Winchelsea Beach have noticeable higher populations of retired adults compared to England, although all East Sussex coastal communities have larger older female populations compared to nationally. Every coastal area in the county has a smaller proportion of adults aged 20-24 than England. The charts also show that women make up larger proportions of our 85+ groups in our coastal locations.

Bexhill-on-sea age profile, 2021 Total population 43750   Camber age profile, 2021 Total population 1,125   Crumbles age profile, 2021 Total population 3,060
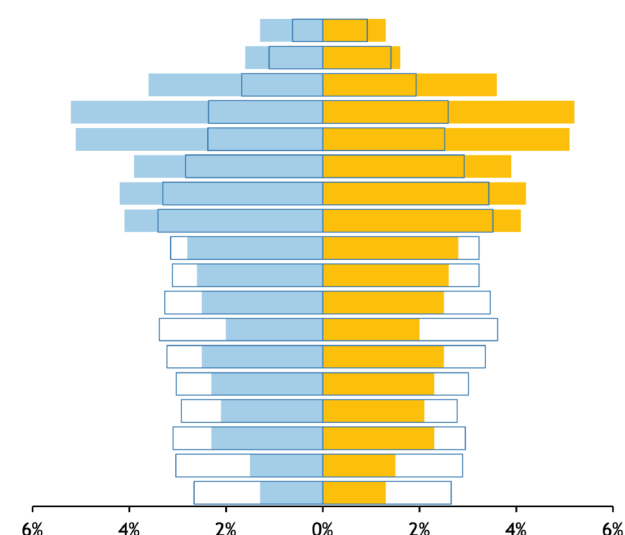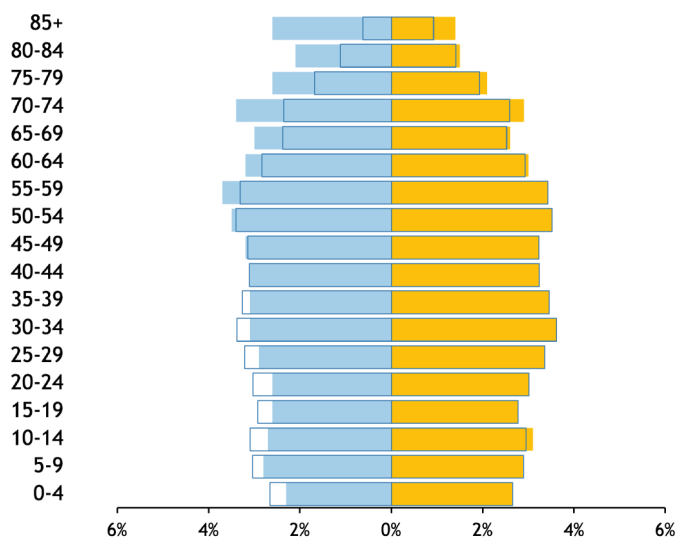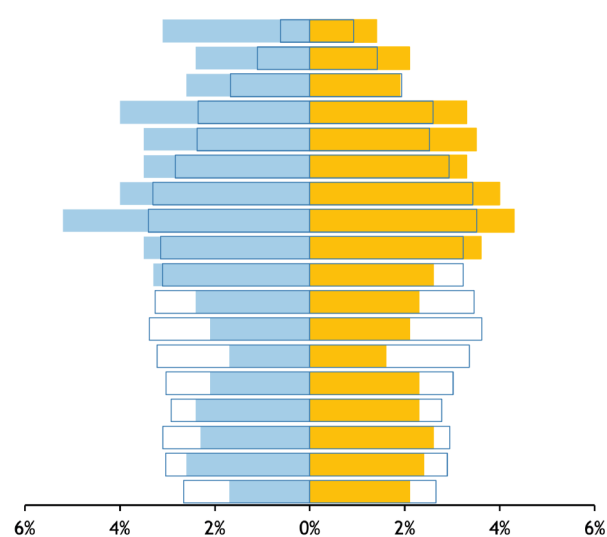
Figure 1: Population pyramids of East Sussex Coastal Built-Up Areas England 2021

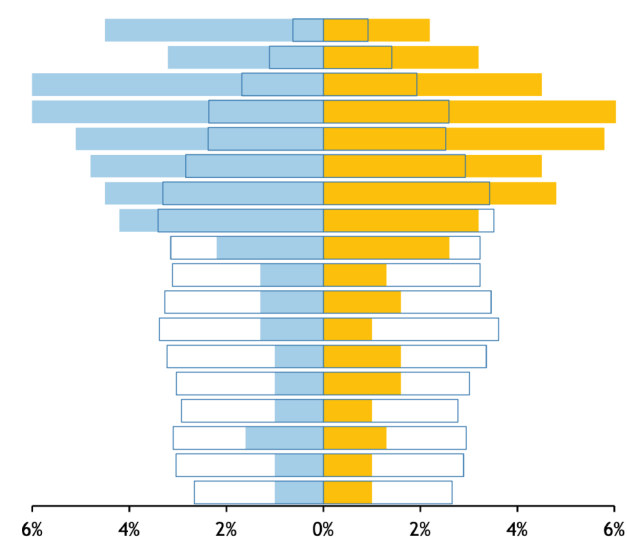Legend: England Male, England Female, Location Male, Location Female

Eastbourne age profile, 2021 Total population 99,185

East Saltdean age profile, 2021 Total population 2,880

Fairlight age profile, 2021 Total population 1,560

Hastings age profile, 2021 Total population 91,485
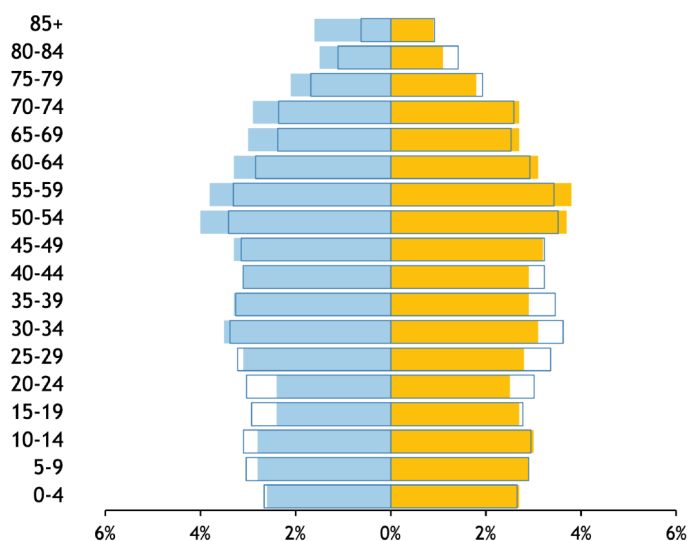
Newhaven age profile, 2021 Total population 12,850
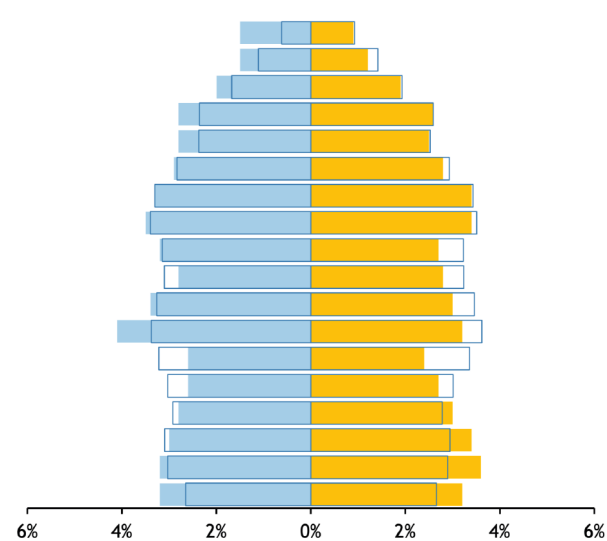
Peacehaven age profile, 2021 Total population 15,705

Figure 1: Population pyramids of East Sussex Coastal Built-Up Areas England 2021

Pett age profile, 2021 Total population 345* Multiple age categories have suppressed data
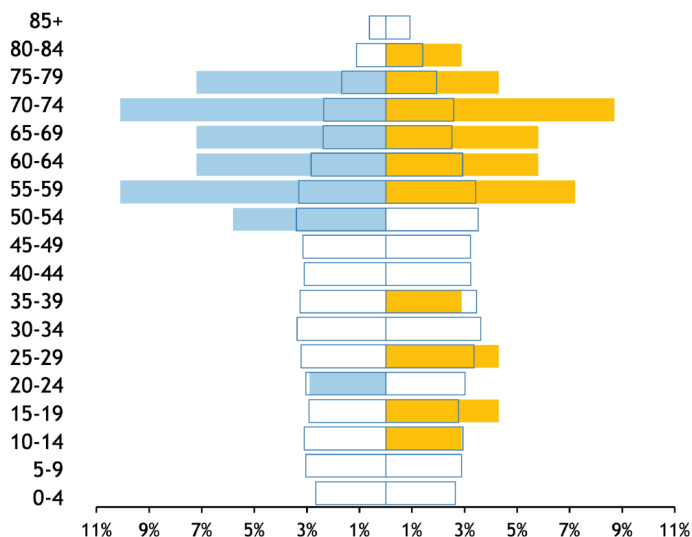
Pevensey Bay age profile, 2021 Total population 2,895
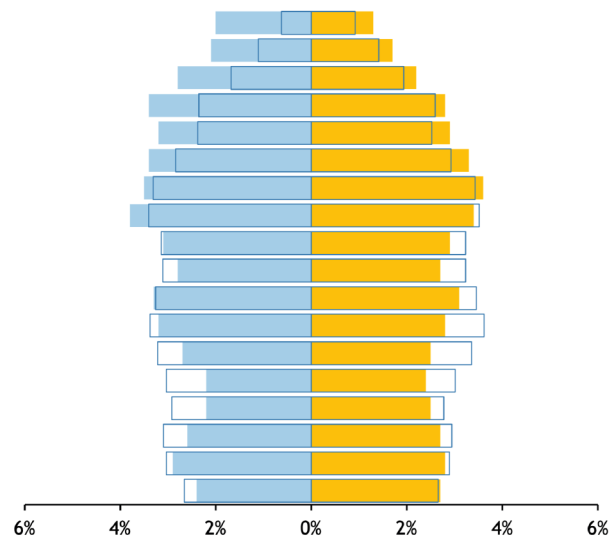
Seaford age profile, 2021 Total population 23,850
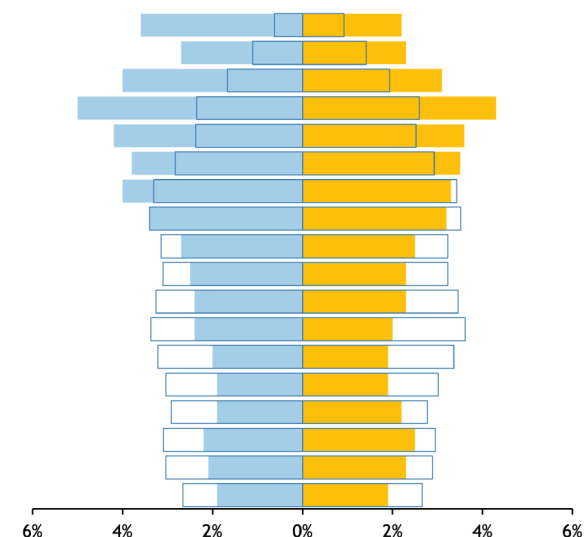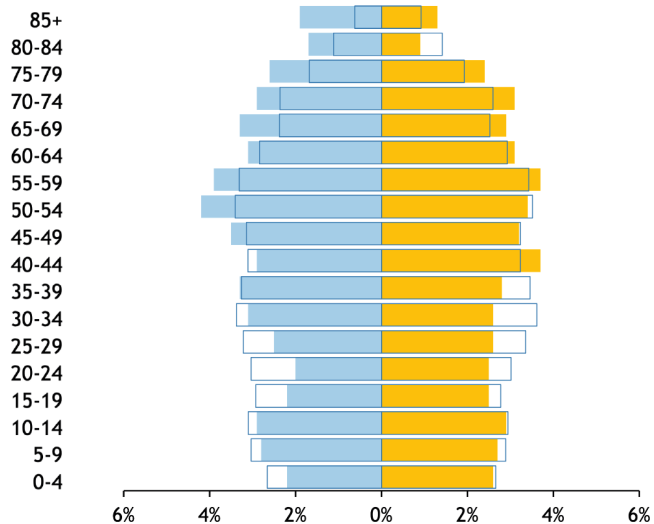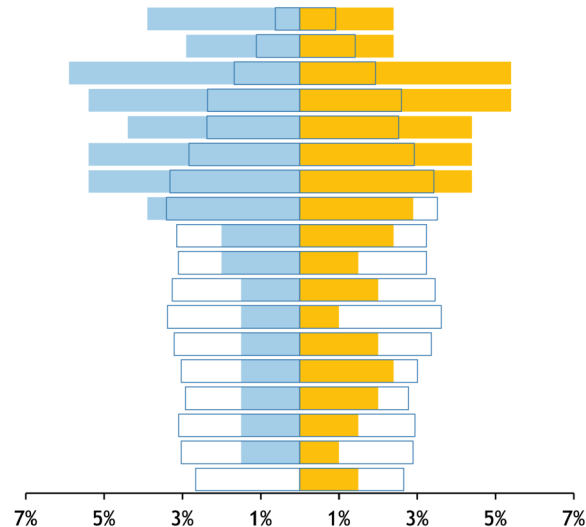
Telscombe Cliffs age profile, 2021 Total population 4,240

Winchelsea Beach age profile, 2021 Total population 1,025

Action on an ageing population and ageism

Given the age profile of the county, especially in our coastal communities, there is a wealth of multi-agency action on healthy ageing in the county.

The County Council's scrutiny review on healthy ageing[14] in Autumn 2024 made recommendations to increase physical activity and tackle ageism. Physical activity initiatives include embedding physical activity in adult social care and rolling out the Stronger for Life programme, targeting early prevention of falls. The review also emphasised the importance of tackling ageism and celebrating the positive contributions of older people to our county.

Age-Friendly Communities initiatives with Hastings Borough and Rother District Councils to become an age-friendly community, which involves a needs assessment, community engagement, and developing a plan based on the World Health Organisation's framework. The first year in 2025 focuses on appointing an officer, conducting assessments, and creating a plan. The initiative covers various domains, including housing, transport, social respect, outdoor spaces, and health services.

Intergenerational activities and ageism awareness raising work on a project to encourage intergenerational activities, which help tackle ageism. The council is developing a guide for setting up intergenerational activities and showcasing best practice. The council also supports the national campaign Age Without Limits that aims to raise awareness of ageism.

Employer engagement and volunteering efforts are being made to promote age-friendly employer pledges through the Wellbeing At Work programme. Encouraging accessible volunteering and using

positive language and images to highlight the contributions of older people are also priorities.

A new Healthy Ageing Partnership Group has been established to coordinate efforts and resources for healthy ageing and falls prevention.

Figure 2: A new Healthy Ageing Partnership Group has been established to coordinate efforts and resources for healthy ageing and falls prevention within the county.

6.3 Coastal Deprivation

6.3.1 Index of Multiple Deprivation (IMD)

Health inequalities often exist because of inequalities in the building blocks of health. These are the social, environmental and economic factors that shape our health and wellbeing throughout our lives[15].

Deprivation refers to a lack of basic necessities like adequate housing, food, income, or education, which are considered crucial building blocks of health, meaning they significantly impact a person's overall wellbeing and ability to maintain good health. When deprived of these essential elements, individuals are more likely to experience poor health outcomes due to increased stress, limited access to transport and diet options, more difficulty in accessing healthcare, and more likely to engage in unhealthy behaviour.

The Index of Multiple Deprivation is the official measure of relative deprivation in England and is part of a suite of outputs that form the Indices of Deprivation. It follows an established methodological framework in broadly defining deprivation to encompass a wide range of an individual's living conditions[16].

Within East Sussex, most of our areas of deprivation are within the coastal strip. This means there is a complex interplay between deprivation, demographics and coastal features influencing the health of the coastal population. Map 2 shows the East Sussex coastal BUAs and the most deprived quintile or fifth of the population in England.

Other than a small area in Lewes, East Hailsham, a community north of Bexhill and our rural boarder with Kent north of Rye and Camber,

large parts of our most deprived populations reside in coastal communities. It is within these communities we often see differences in educational, employment and health outcomes.

Map 2: Coastal Built-Up Areas and the most deprived quintile of population in England.
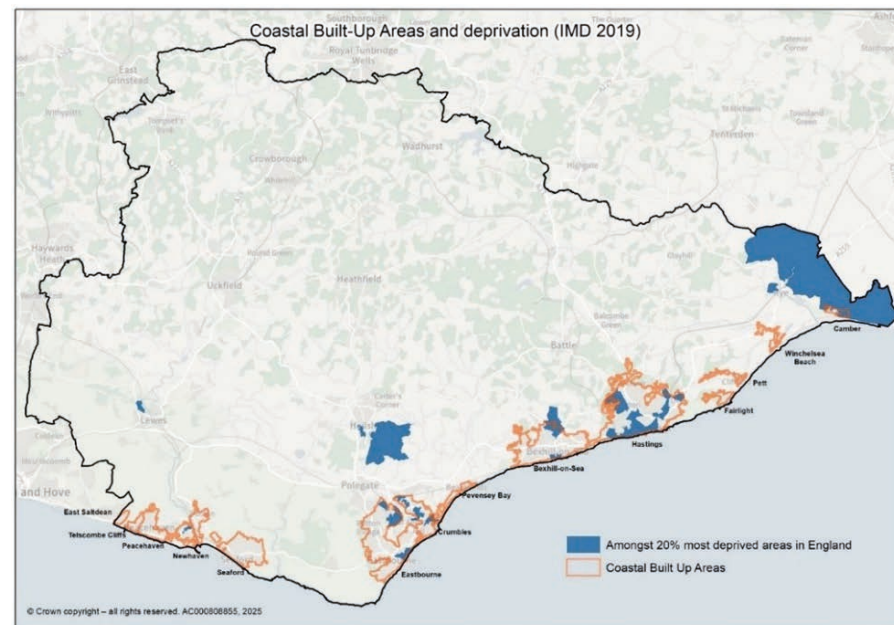
6.3.2 The Income Deprivation Affecting Children Index (IDACI)

IDACI measures the proportion of all children aged 0 to 15 living in income deprived families[17]. It is a subset of the Income Deprivation Domain which measures the proportion of the population in an area experiencing deprivation relating to low income. The definition of low income used includes both those people that are out-of-work, and those that are in work but who have low earnings.

Deprivation can impact a child's development and wellbeing. It can lead to poor health outcomes, limited access to education, increased absence at school, and increased stress. Children in deprived areas may face challenges such as inadequate housing, food insecurity, and limited access to healthcare, which can hinder future career and employment opportunities[18].

Maps 3 highlights East Sussex coastal BUAs and the most deprived quintile or fifth of the population in England. Similar to the IMD map 2, other than areas in East Hailsham, north of Bexhill and our rural boarder with Kent north of Rye and Camber, large parts of our most deprived populations reside in coastal communities. IDACI also highlights children living in deprivation within parts of Peacehaven.

Maps 3 East Sussex coastal BUAs and Income Deprivation Affecting Children Index (IDACI) 2019.

Coastal Built-Up Areas and Income Deprivation Affecting Children (IDACI, IMD 2019)
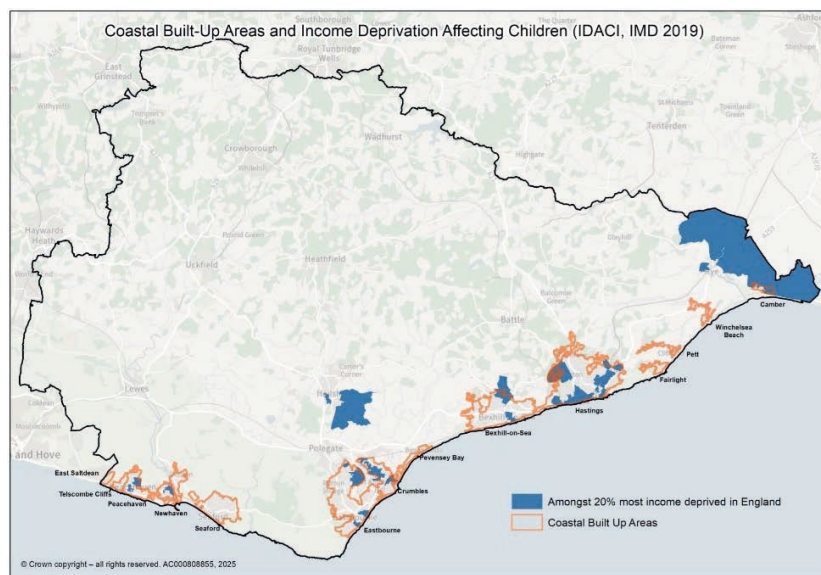
These areas in blue should be considered as priority areas for actions to support child health and education.

6.3.3 Income Deprivation Affecting Older People Index (IDAOPI)

Income Deprivation Affecting Older People Index (IDAOPI) measures the proportion of all those aged 60 or over who experience income deprivation[19].

It is a subset of the Income Deprivation Domain which measures the proportion of the population in an area experiencing deprivation relating to low income. The definition of low income used includes both those people that are out of work, and those that are in work but who have low earnings.

Deprivation significantly impacts older adults aged 60 and above. It can lead to poor health outcomes, including increased risk of chronic diseases like heart disease and diabetes. Social isolation and loneliness are prevalent, contributing to mental health issues such as depression and anxiety. Limited access to healthcare and financial constraints further exacerbates these challenges.

Map 4 highlights how our coastal BUAs contain amongst the most income deprived over 60s in the county. Apart from a small area in Hailsham and Rye, nearly all those affected by income deprivation reside in our coastal communities.

Map 4: East Sussex coastal BUAs and Income Deprivation Affecting Older People Index (IDAOPI) 2019.
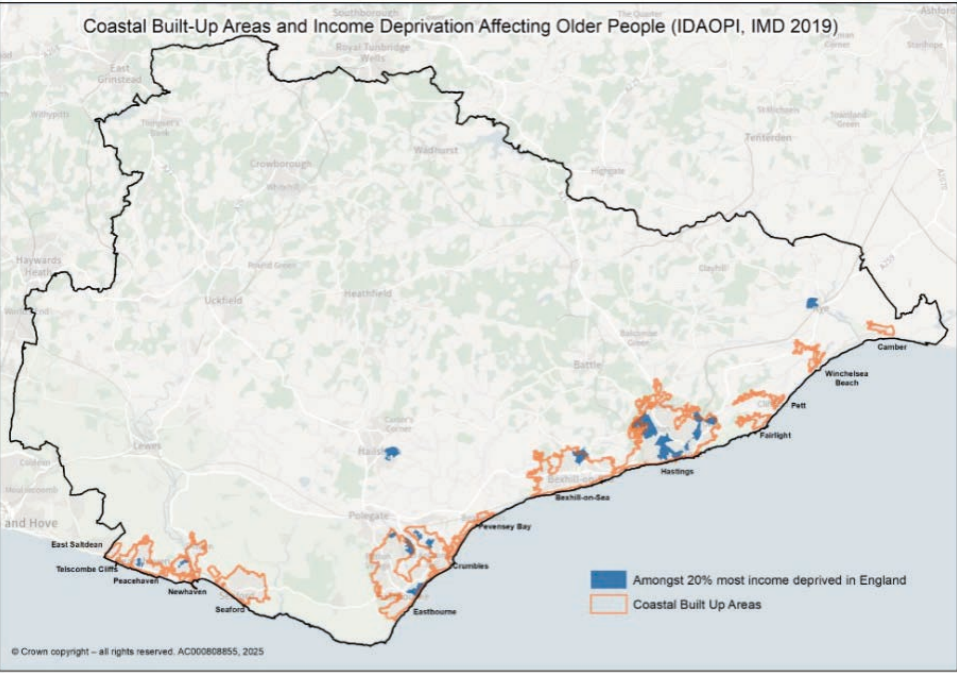
The areas in blue should be prioritised for action to improve the health of older people living there.

6.4 Life and Healthy Life Expectancy

Life expectancy refers to the average number of years a person can expect to live based on current mortality rates, with Healthy Life Expectancy (HLE) the number of these years someone can expect to live in good general health. In East Sussex there is a significant disparity in both between coastal and non-coastal areas.

Figure 3: Healthy Life Expectancy and Life Expectancy difference in East Sussex.
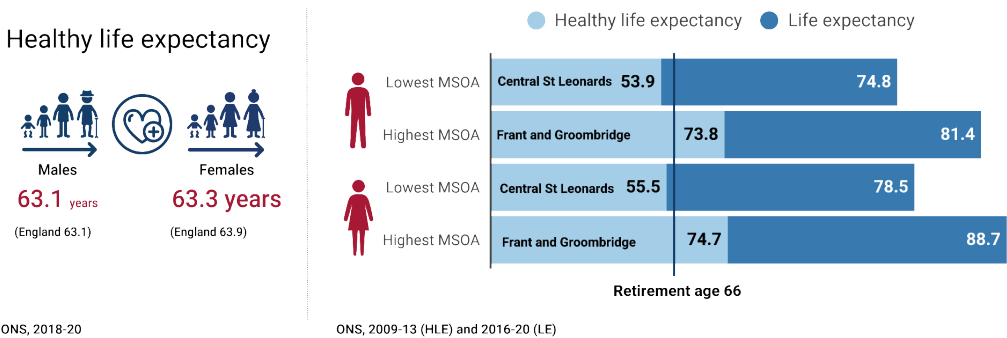
Life expectancy within coastal areas can be up to 10 years lower with men in Central St Leonards having an average life expectancy of 74.8 years whilst for women it is 78.5 years. Within East Sussex there is a 20-year difference in how long someone could expect to live in good health, depending on where they live. The lowest HLE in the county is in Central St Leonards, with women expecting to live 55.5 years in good health and 53.9 years for men. This is below the age of the state pension, meaning these groups may have to work in poorer health, access welfare benefits or live on a reduced income.

In contrast its men and women in Frant and Groombridge which is in the north of the county and in the part furthest away from the coast, that has both the highest life expectancy and HLE.

Action to address life expectancy

All of our public health programmes will be contributing to efforts to increase life expectancy across our coastal communities. However, The Mr Hastings and St Leonards project [20] is based on the belief that men in Hastings and St Leonards will live happier, healthier, and longer lives if they are at the heart of decision making and live in strong, supportive, and well-connected communities, where they can fulfil their potential. This project is reflecting this belief by supporting men to talk about what matters for them.

Research shows that life expectancy for men in Hastings and St Leonards is significantly lower than the national average. There have been many great initiatives across the borough that have made a real difference to individual men's health and wellbeing. However, this hasn't changed the bigger picture around men's life expectancy locally.

The project is hosted by Hastings Voluntary Action.

6.5 Accommodation tenure of households

Housing plays a pivotal role in determining an individual's health and wellbeing. Given this importance, our 2019 report was on this topic Annual Public Health Report 2019/20 - Health and Housing.

Adequate housing provides shelter, which is important for maintaining proper health. This protection helps reduce the risk of hypothermia, heat stroke, respiratory illnesses, and other health issues aggravated by poor living conditions.

Moreover, housing stability is directly linked to mental health[21]. Those with secure, stable housing tend to experience less stress and anxiety compared to individuals faced with housing insecurities or homelessness. Constant worries about eviction or moving can lead to chronic stress, which, in turn, negatively impacts mental and physical health[22].

A stable home also facilitates access to healthcare. Living in a safe neighbourhood with reliable transportation options makes it easier for residents to attend medical appointments, receive timely diagnoses, and follow up on treatments. Conversely, poor housing conditions or unstable locations can make leaving the home and visiting healthcare providers a daunting task, resulting in neglected health needs.

Indoor environmental quality significantly impacts health as well. Houses that are free from mould, lead, or other allergens create healthier living environments. Mould exposure can lead to respiratory issues, while lead exposure can result in serious developmental problems, especially in children. Quality housing minimises these risks.

Additionally, adequate housing provides a safe space for individuals and families to practice healthy habits, such as cooking nutritious meals and exercising. Overcrowded or unsanitary conditions can impede such practices, contributing to poor diet and increased susceptibility to illness.

Figure 4 shows the proportion of accommodation tenure of households by East Sussex Coastal BUAs and England (Census 2021). Some East Sussex coastal locations have higher levels of home ownership, with East Saltdean (84%), Fairlight (93%) and Winchelsea Beach (81%) having the highest. Eastbourne (60%) and Hastings (57%) have lower levels of home ownership compared to England (62%).

All East Sussex coastal locations have lower levels of social rented homes compared to England (18%) and range from 1% in the Crumbles to 16% in Newhaven. Whilst some of coastal BUAs have lower levels of private rent or lives rent free compared to England (21%), Camber (23%), Crumbles (29%), Eastbourne (27%), Hastings (29%) and Newhaven (23%) all have higher percentages.

Figure 4: Percentage of accommodation tenure of households by East Sussex Coastal BUA and England. Census 2021.

■ Owned, mortgage or shared ownership
■ Social rented
■ Private rented or lives rent free
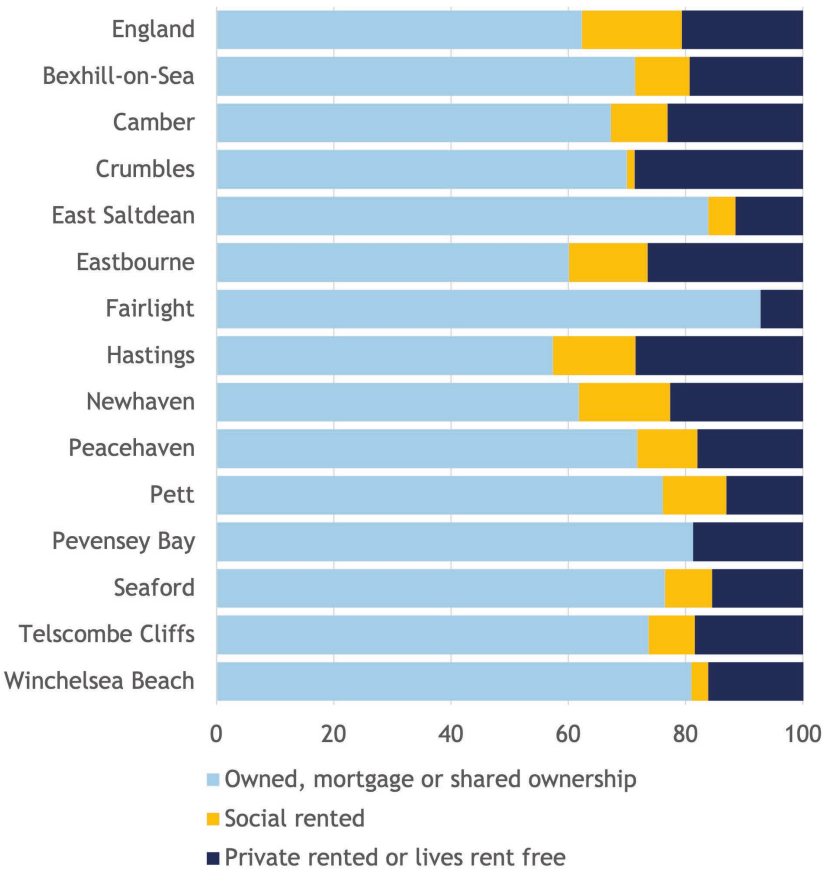
Many coastal areas face a significant challenge with high numbers of people living in temporary accommodation. Recent figures found 580 households living in temporary accommodation in Hastings and 309 households in Eastbourne, including 1,027 children. Strengthening homelessness prevention is key, this has included the creation of multi-agency hubs to improve early access to housing advice, such as the ones in Eastbourne and Bexhill.

The Public Health department within ESCC have been collaborating with housing partners, including additional investment in home-visiting, wellbeing and employment services. The East Sussex Wellbeing and Employment (ESWE) service was recently subject to an NIHR external evaluation, one participant spoke about the importance of the project in reducing social isolation "they were ringing me up every week and they were tremendous. Because all they're trying to do is to get you to get involved back again into the community".

Action on improving health by working with housing

During the pandemic, Public Health further integrated with housing partners on several key areas including infection control and the vaccine roll out, responding to the 'Everyone In' instruction for rough sleepers and providing additional capacity for access to substance dependency, mental health services and training and employability support.

Partners were keen to explore how we could enable ongoing cross - sector collaboration, which has led to the creation of a refreshed strategic housing partnership board supported by a series of specialist groups. The aim of the partnership is to set a medium - and long -term vision for the development of the housing sector locally and support partners to make the best use of capacity, resources and expertise across the sectors.

The structure of the partnership reflects the comments from the Institute for Health Equity that "addressing housing-related health inequalities requires a multifaceted approach that encompasses not only improving housing quality, security and affordability, and improving the neighbourhoods where individuals and families live".

The partnership will continue to lead cross sector collaboration through devolution and local government reorganisation.

Public Health and housing authorities are working in partnership to develop a place-based retrofit strategy. A key aim of the strategy will be to build on successful partnership work to address fuel poverty and reduce health inequalities. The strategy will include a focus on people living in the private rented sector, which in some coastal communities can account for almost a third of the total housing stock.

The Director of Public Health's report on housing and health, highlighted the need to build more affordable homes. Since then, the government introduced new mandatory housing targets for all local authorities. Hastings saw its target increase by 47%. Much of the coastal strip is already urban and work is underway across the housing authorities to develop a partnership approach to meeting the new targets, including links to community-led approaches.

Homelessness

Local data from housing authorities state the number of people rough sleeping is usually higher in coastal, urban areas. The latest snapshot counts of the number of people rough sleeping were 41 in Hastings, 26 in Eastbourne and 12 in Rother.

To help address this, housing partners are keen to work to expand the range of temporary and move on accommodation options for people leaving the streets. A holistic approach with health, mental health, substance dependency and social care services is also key for people with multiple compound needs, building on the good practice started through the local Rough Sleeping Initiative and Changing Futures programmes and the findings of a recent needs assessment.

7. Education and qualifications

Education serves as an important building block of health enabling individuals to improve their own health and contribute positively to societal health outcomes[23].

Higher educational attainment often leads to better job opportunities, higher income, and economic security. With more financial resources, individuals can afford healthier food, safe housing, healthcare, and fitness activities, all contributing to improved health.

Education can enhance self-esteem, social status, and coping skills, leading to better mental health. Educated individuals are more likely to engage in social networks and communities, which provide emotional support and reinforce healthy behaviours. Education correlates with healthier lifestyle choices. Educated individuals tend to smoke less, drink less alcohol, and engage in physical activities more frequently. These lifestyle choices significantly reduce risks for chronic diseases like heart disease, diabetes, and certain cancers[24].

Education improves an individual's ability to understand health information and navigate the healthcare system. This increased health literacy helps in making informed decisions about diet, exercise, and medical care, leading to better health management and preventative care[25].

Educated individuals are more likely to be employed in jobs that provide private health insurance and other benefits. Better access to private healthcare services ensures timely medical interventions and regular health check-ups in addition to those by the NHS.

Education influences parental behaviours, with educated parents more likely to provide a healthy environment for their children. This includes nutritious meals, promoting physical activity, and setting a foundation for educational success, perpetuating a cycle of health and wellbeing[26].

Studies show that higher levels of education correlate with longer life expectancy[27]. Education influences the development of health-promoting policies and societal changes, with educated populations advocating for healthier environments and policies.

Within East Sussex a number of our coastal BUAs have higher populations that have no qualifications compared to England (18%). These include Camber (26%) Pevensey Bay (23%) and Fairlight (22%). Only Winchelsea Beach and East Saltdean (both 36%) have a larger percentage of residents with higher education qualifications compared to England (34%).

Figure 5: Percentage of highest level of qualification of usual residents of East Sussex Coastal BUAs and England and Wales, Census 2021.
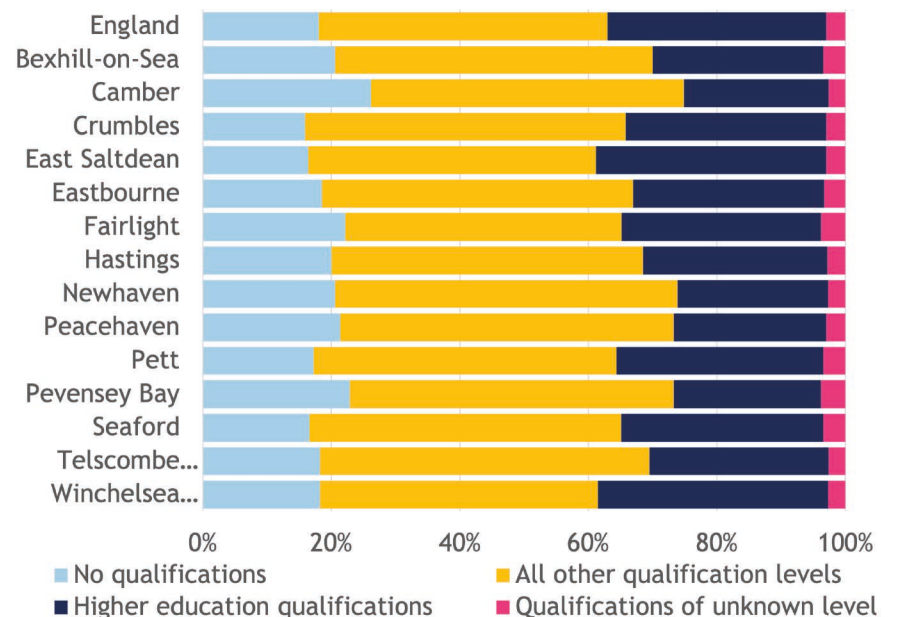
Skills development enhances social mobility by providing individuals with the knowledge and abilities needed to access better job opportunities. This leads to higher income, improved living standards, and greater economic stability. Additionally, skilled individuals can contribute more effectively to their communities, fostering overall societal growth and reducing inequality.

The Annual public health report 2021/22 - Work Skills and Health highlighted the role of developing skills to improve prosperity and health in the county.

Action on skills and housing retrofit

Skills East Sussex is the county's strategic body for employability and skills. The group works together to improve local employment and skills levels to increase economic prosperity in East Sussex.

Since the publication of the work, skills and health report there has been multi-agency action on developing an East Sussex Retrofit Skills Plan.

The East Sussex Retrofit Skills Plan was developed in response to the Skills East Sussex (SES) priority 'green skills for a net zero future' and workstream activity in the SES Construction and Built Environment Sector Task Group strategic plan 2024/25.

The plan highlights the urgent need for targeted skills training and recruitment efforts to ensure that the local workforce can meet the demands of the housing retrofit sector and support the region's goals for a net-zero and greener future.

£240,000 of Department for Energy Security and Net Zero funding was awarded to boost green skills through a Retrofit Skills Strategy,

mapping the current green skills picture, identifying gaps and developing activities to address this.

More information about the work of Skills East Sussex (SES) can be found online.

7.1 Employment and economic activity status

Employment is a pivotal factor in determining an individual's health and overall quality of life.

First and foremost, having a job provides a steady income, which is essential for securing necessities like food, housing, and transport to healthcare. This financial stability ensures that individuals can afford nutritious and balanced meals, can live in more healthy environments, and access medical services when needed, thereby directly impacting their physical wellbeing[28]. Moreover, employment contributes to mental health by offering structure, purpose, and a sense of identity. Engaging in meaningful work can boost self-esteem,

provide a sense of accomplishment, and facilitate social connections with colleagues. These aspects help combat feelings of isolation and depression, promoting overall mental wellness.

Workplaces can also be vital in providing access to healthcare benefits, sick leave, and health and wellbeing programmes. These benefits make medical care more accessible and affordable, enabling early detection and treatment of health issues, thereby enhancing long-term health outcomes.

Employment often encourages the development of healthy lifestyle habits. Many workplaces promote wellness initiatives, such as exercise programmes or mental health days.

The social aspect of employment cannot be underestimated either. Interaction with colleagues provides opportunities for social support and engagement, which are essential components of mental health. These relationships can offer emotional support during challenging times, fostering resilience and reducing stress levels. However, it's important to note that not all employment situations are beneficial. Jobs with high stress, long hours, or hazardous conditions can negatively impact health. Therefore, the quality and nature of employment are fundamental in determining its overall impact on health.

Figure 6 highlights Economic activity status, East Sussex Coastal BUAs and England and Wales from the Census 2021. All our BUAs have higher percentages of retired residents compared to England and Wales (21.5%), this ranges from Fairlight (49.5%) to Newhaven (22.6%). Several of our coastal BUAs have larger percentages of people not economically active due to sickness and disability compared to England and Wales generally (4.2%), these are Camber (6.8%), Hastings (6.3%) and Newhaven (5.9%). Most of our coastal BUAs have lower levels of unemployment compared to England and

Wales (3.5%) except for Camber (4.2%), Hastings (3.8%) and Newhaven (3.6%).

Figure 6: Economic activity status, East Sussex Coastal BUAs and England and Wales. Census 2021.
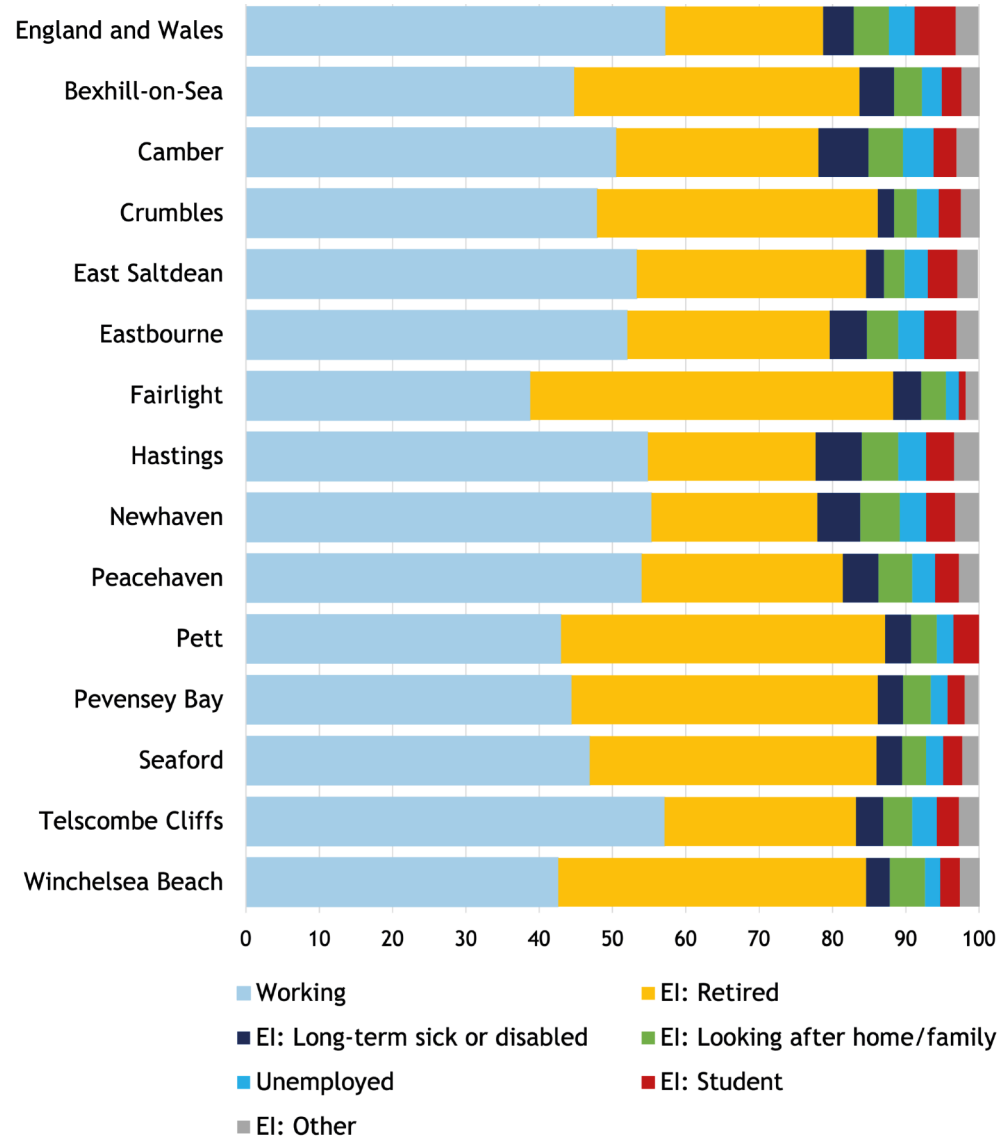
Key: EI = Economically inactive

Action on health, employment and workplaces

The ESTAR (Employment Support, Training, Advice and Resources[29]) Homeless Prevention Employment Brokers work across the county, receiving referrals from Housing Officers, Wellbeing Coordinators, The Department for Work and Pensions and other statutory services to support residents at risk of homelessness to remain in their homes by helping them with employment support.

Brokers provide support with employability, budgeting, and referrals to other support or specialist services to meet wider client needs. To date, the team has engaged 120 residents in coastal East Sussex, directly supporting 21 families from becoming homeless. The team is currently working with over 35 residents living in the coastal strip.

The Wellbeing at Work Programme

Offers workplace health resources, training, events and a signposting service to those working in East Sussex.

It operates a free Accreditation Scheme for East Sussex employers, providing a framework to improve employee health and wellbeing, whilst rewarding organisations who are actively working to do so.

Is free to all organisations with more than one employee based in East Sussex (excluding Brighton and Hove). Is funded and delivered by Public Health at East Sussex County Council.

The Let's Do Business Group based in Hastings have participated in the Wellbeing at Work Programme since March 2023.

Shaun Hook, Finance Manager from Let's do Business group shared his thoughts on how the programme is supporting the health and wellbeing of people in work.

How has wellbeing at work helped your organisation succeed?

"   Wellbeing at Work helped us focus on areas we may not have considered as a company but also recognise what we were already doing. The programme ensured that wellbeing initiatives, and events were communicated and promoted to all employees in the best way. It encouraged us to initiate a new Employee Assistance Programme and provide menopause awareness training for all Managers.

The introduction of the wellbeing survey allowed us to receive invaluable employee feedback and showed a measured increase in staff satisfaction which acknowledged our commitment to their wellbeing in and out of work with an increased awareness of physical and mental health, a supportive culture for all.

How has your organisation engaged with our resources and training offer?

"   The training is, relevant, timely and free. The newsletter is useful, and the information is often used for wider circulation. Regular one to ones with the Wellbeing at Work team are encouraging and helpful.

Would you recommend the programmes to other businesses?

"   Without doubt the programme is a great framework for businesses who are not sure how to start this process or where to go next. The information and support provided is outstanding and I would recommend it to all local businesses.

7.2 Health Status

Self-reported health status in England is an indicator used by health authorities to understand population wellbeing[30]. This subjective measure gives individuals the opportunity to evaluate their own health, providing insights that are often inaccessible through clinical assessments alone. The importance of self-reported health lies in its ability to reflect both physical conditions and mental wellbeing, capturing a broader perspective of the population's health.

Studies have shown that self-reported health status can sometimes predict mortality and morbidity outcomes almost as effectively as objective health measures. People who report their health as 'poor' are more likely to experience adverse health events, highlighting the importance of this measure in identifying at-risk populations. A previous study from the 2001 census shown coastal populations were more likely to report 'good health' compared to inland populations[31].

One trend in England is the disparity in self-reported health status across socioeconomic groups. Individuals from affluent backgrounds generally report better health compared to those from deprived areas. This disparity underscores the social determinants of health, such as income, education, and housing, and their impact on overall wellbeing.

Age is another significant factor affecting self-reported health. Younger individuals are more likely to report 'very good' health, while older age groups increasingly report 'fair' or 'bad' health as chronic conditions become more prevalent.

For East Sussex coastal BUAs, residents reported very good health in a range from 50.5% in East Saltdean to 42.2 % in Hastings compared

to 47.5% nationally. Whilst several coastal BUAs had larger proportions of their residents reported bad health compared to England (4.1%). These include Bexhill on sea (4.8%) Camber (4.2%) Eastbourne (4.7%), Hastings (5.5%), Newhaven (5.3%), Peacehaven (4.8%), Pett (4.5%).

Figure 7: Age standardised general health status of usual residents by East Sussex Coastal BUAs and England 2021.
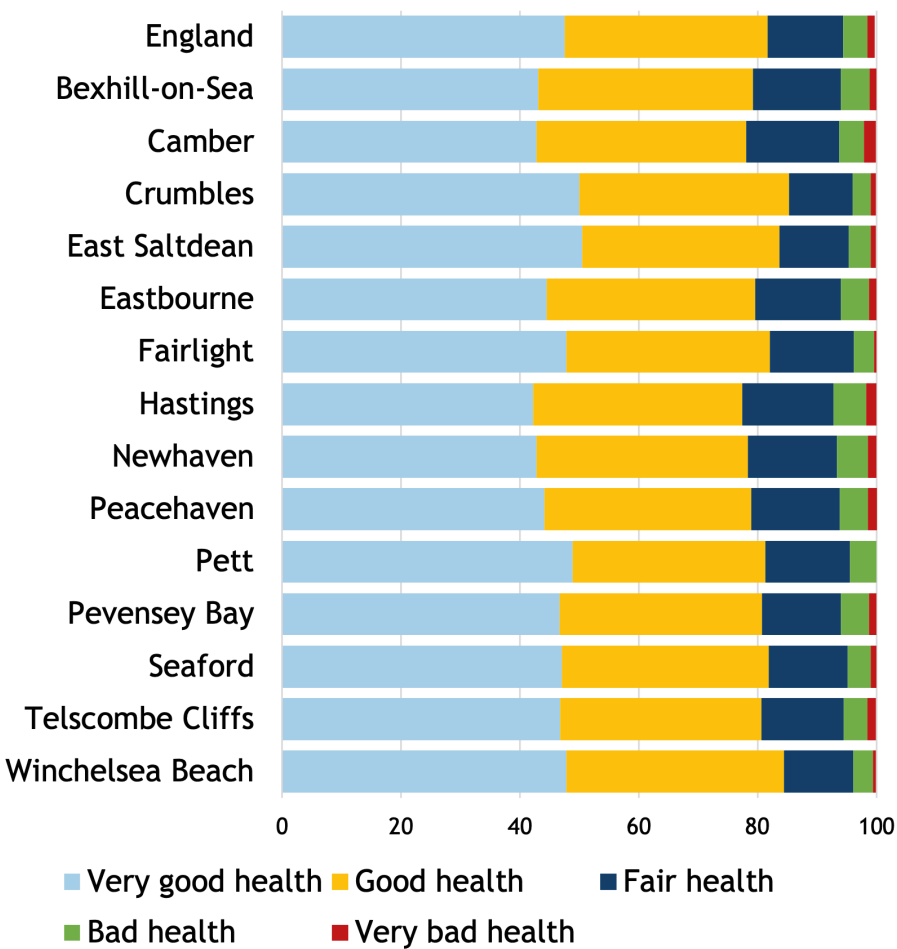
7.3 Disability

The health of disabled people is a multifaceted issue that encompasses physical, mental, and social dimensions. Disabled individuals often face unique health challenges, including limited access to healthcare services, which can exacerbate their conditions. Physical health issues are prevalent, with many disabled people experiencing chronic pain, mobility limitations, and secondary health conditions such as respiratory or cardiovascular problems[32].

Mental health is another critical aspect, as disabled individuals are more likely to experience conditions like depression and anxiety. The psychological stress of living with a disability, combined with social isolation and stigma, can significantly impact their mental wellbeing. Social determinants of health, such as income, education, and housing, play an important role in shaping the health outcomes of disabled people. Those from lower socioeconomic backgrounds are particularly vulnerable to poor health due to limited resources and support.

Furthermore, the caregiving responsibilities often fall on unpaid carers, whose health can also suffer as a result. The physical demands and emotional strain of caregiving can lead to physical ailments, stress, and mental health issues, highlighting the need for comprehensive support systems. Addressing these multifaceted health challenges requires a holistic approach, encompassing medical, social, and economic interventions to improve the overall wellbeing of disabled people.

Figure 8 highlights the percentage of residents by disability status (Age-standardised percentages) in East Sussex Coastal BUAs and England. Several East Sussex coastal BUAs have a higher percentage of residents who are disabled under the equality act in which their day to day lives are impacted a little. These include Bexhill on sea (12.7%), Camber (11.8%), East Saltdean (10.8%), Eastbourne (12.1%), Fairlight (11.1%), Hastings (12.7%) Newhaven (13.1%), Peacehaven (11.9%), Pett (10.3%), Pevensey Bay (11.7%), Seaford (11.9%), Telscombe Cliffs (10.9%). Only Winchelsea Beach, Pevensey Bay, Fairlight (7%) East Saltdean (5.9%) and Crumbles (4.6%) have a smaller percentage of residents who are disabled under the Equality Act whose day-to-day activities are limited a lot compared to England (7.5%).

Figure 8: Percentage of residents by disability status (Age-standardised percentages) in East Sussex Coastal BUAs and England. Census 2021.

■ Disabled under the Equality Act: Day-to-day activities limited a lot

■ Disabled under the Equality Act: Day-to-day activities limited a little
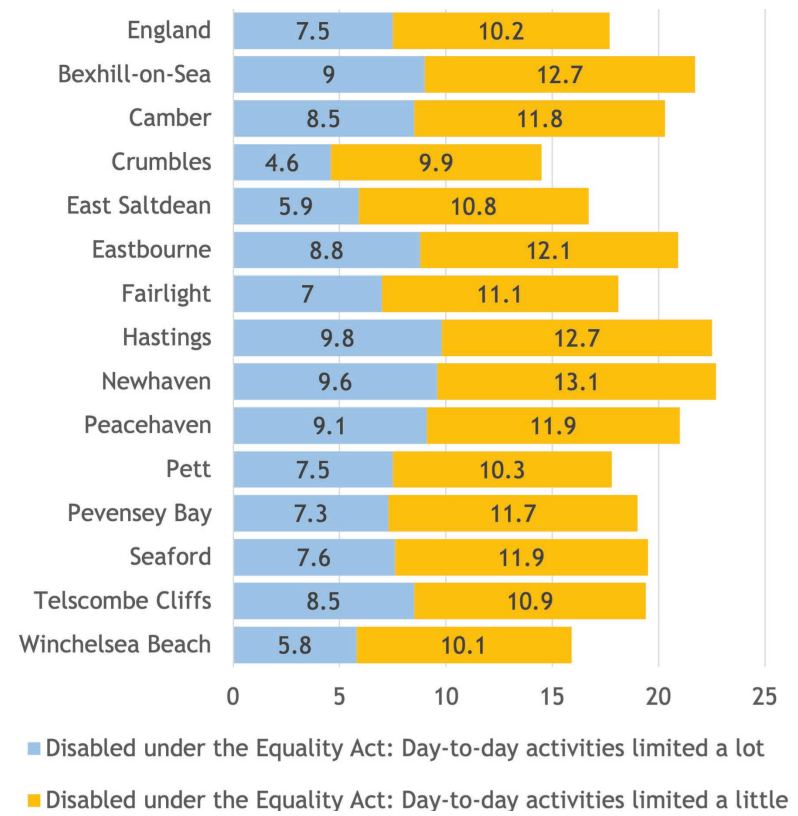
7.4 Unpaid carer status

Unpaid carers play an essential role in society, providing care and support to family members or friends who are ill, older, or disabled. Their contributions often go under recognised, yet they are indispensable to the healthcare system. However, the health and wellbeing of unpaid carers can be profoundly affected by their responsibilities, leading to numerous challenges that need to be addressed.

Physical health is a significant concern for unpaid carers. Many carers experience back pain, fatigue, and other physical ailments due to the physical demands of caregiving. The tasks may involve lifting, assisting with mobility, and managing daily activities, all of which can take a toll on a carer's body over time. Additionally, the stress associated with caregiving can weaken the immune system, making carers more susceptible to illness.

Mental health issues are also prevalent among unpaid carers[33]. The constant demands and emotional strain of caring for a loved one can lead to stress, anxiety, and depression. Social isolation is a common experience, as carers often have less time to engage in their personal interests or socialise with friends and family. This isolation can exacerbate feelings of loneliness and mental health issues[34].

Furthermore, financial strain is a reality for many unpaid carers. Balancing caregiving responsibilities with work can be challenging, leading some to reduce work hours or leave their jobs entirely. This situation not only impacts personal finances but also limits access to employer-based support services and benefits[35].

Figure 9 highlights the age-standardised percentages of people aged five years and over who provided any amount of unpaid care in East

Sussex Coastal BUAs and England from the Census 2021. All the East Sussex BUAs have a higher proportion of people providing any amount of unpaid care compared to England, with the exception of Crumbles. Fairlight and Hastings have largest proportion with 12.2%.

Figure 9: Percentages (age-standardised) of people aged five years and over who provided any amount of unpaid care in East Sussex Coastal BUAs and England. Census 2021.
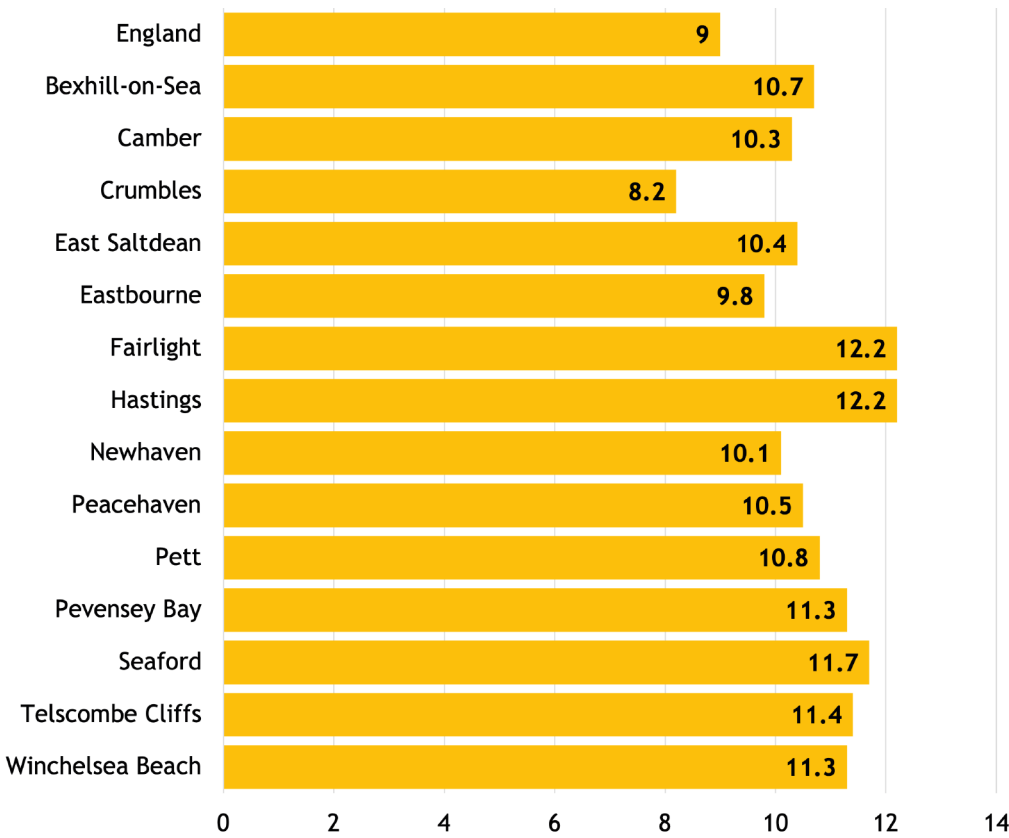
7.5 Ethnicity

Data from the 2021 census shows that East Sussex has a higher percentage (approximately, 88%) of White British and Northern Irish compared to England (approximately, 74%)[36]. However, Figure 10, shows that our coastal communities have larger proportions of all ethnic groups compared to non-coastal areas.

Ethnic minority groups often face significant health inequalities compared to the majority population. These disparities are influenced by a range of social, economic, and environmental factors that impact their overall wellbeing[37].

Access to healthcare is one of the primary issues contributing to health inequalities among ethnic minorities. Language barriers, cultural differences, and discrimination can hinder their ability to receive timely and appropriate medical care[38]. Additionally, ethnic minorities are more likely to live in deprived areas in East Sussex, with our most ethnically diverse communities also being the most deprived.

Socioeconomic factors, the building blocks of health, also play a critical role in the health outcomes of ethnic minority groups. Unemployment, lower income levels, and inadequate housing conditions are prevalent within these communities. These factors can lead to increased stress, poor nutrition, and limited opportunities for physical activity, all of which negatively affect health.

Chronic diseases such as diabetes, hypertension, and cardiovascular diseases are more common among ethnic minority populations[39]. These conditions are often linked to lifestyle factors, genetic predispositions, and limited access to preventive health and wellbeing services. Moreover, the stigma and discrimination faced by ethnic minorities can contribute to mental health issues, such as anxiety and depression, further impacting their overall health[40].

It is essential to address these health inequalities through targeted interventions and policies that promote equity and inclusiveness in healthcare. Culturally sensitive health education programmes, improved access to health and wellbeing services, and efforts to combat discrimination are crucial steps toward reducing health disparities and improving the wellbeing of ethnic minority communities.

Figure 10 Ethnicity groups by coastal classification (LSOA-based), Census 2021.
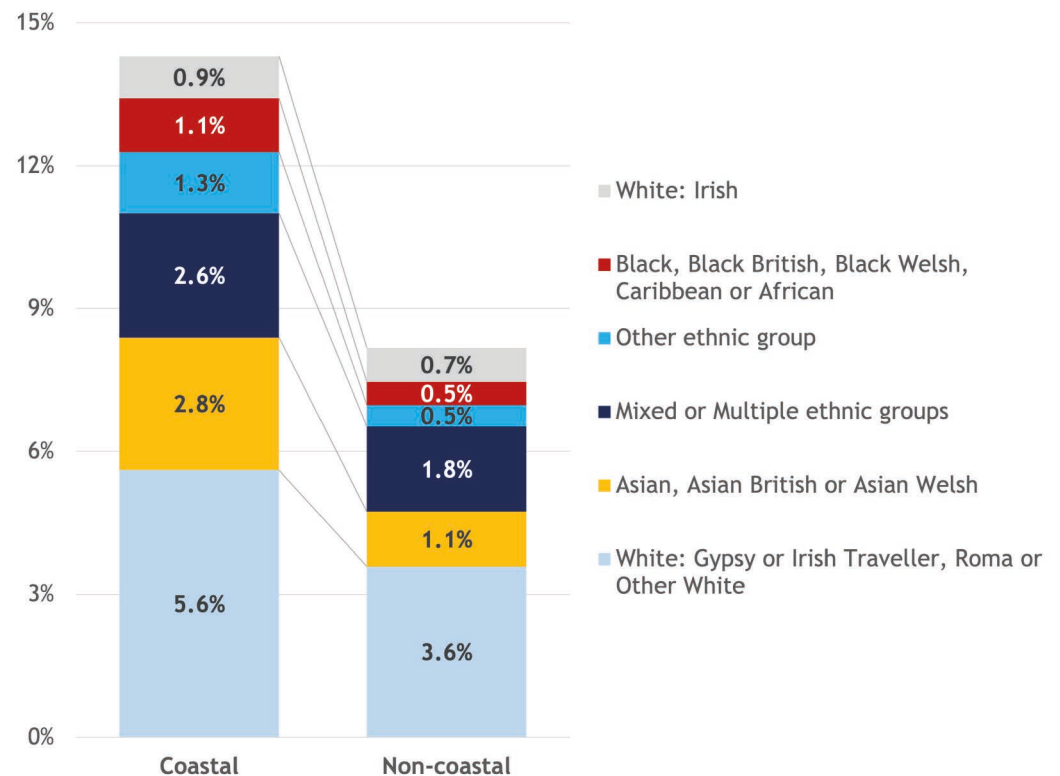
Note - White: English, Welsh, Scottish, Northern Irish or British not shown

8. Local Health Profiles and Assets of our Coastal Communities

8.1 Bexhill-on-Sea

Table 3: Bexhill–on–sea headline health, demographic and building blocks of health data.

Population size	43,754
Median age	54
Percentage of retirees	38.9
Percentage of carers	10.7
Percentage with a disability	21.7
Percentage with no qualifications	20.6
Self-reported good and very good health	79.2
Percentage of social rent	9.3

Bexhill-on-Sea, commonly known as Bexhill, offers a blend of history, cultural attractions, and a shingle coastline. The first reference to Bexhill is in a charter of King Offa in 772AD. There were certainly people living here before this time, but we know almost nothing about them[41].

It was a Victorian seaside resort. The Bexhill Museum offers insights into this history, with exhibits ranging from local archaeology to the town's role in the development of motoring in the UK.

In more contemporary times, one of Bexhill's most famous landmarks is the De La Warr Pavilion, an iconic modernist building opened in 1935. The pavilion serves as an arts centre and gallery, hosting a variety of contemporary art exhibitions, live performances, and cultural events throughout the year. It's a centrepiece of cultural life in the town.

The seafront in Bexhill is known for its shingle beaches and promenade, providing a perfect setting for leisurely walks and relaxation. Views of the English Channel are magnificent, especially during the sunrise and sunset.

Bexhill offers beautiful parks and gardens, such as Egerton Park, which features a boating lake, children's play areas, and well-maintained gardens. The nearby High Weald Area of Outstanding Natural Beauty provides further opportunities for hiking and exploration.

Bexhill's town centre offers a mix of shops, cafés, and restaurants, catering to a variety of tastes and preference. There something for everyone, whether it's history, art, or simply scenic beauty and tranquillity.

The [Area Report](#) for Bexhill Central and Sackville[42] provides a comprehensive overview of the area, focusing on the Making it Happen (MIH) programme from November 2019 to December 2024. The aim is to offer background information and insights to support conversations about neighbourhoods in East Sussex, complementing statistical data with qualitative insights.

Stewart Drew, Director and CEO, De La Warr Pavilion shares what role De La Warr Pavilion has in supporting the health and happiness of residents and visitors alike.

" One of the founding principles of De La Warr Pavilion when it opened in 1935 was to promote health in mind, body and soul.

We continue with that ethos today, providing creative and cultural experiences to help boost the health and wellbeing of our local community. Our packed programme includes free fortnightly making sessions, creative holiday clubs for children eligible for benefits-related free school meals, art and craft workshops for people living with dementia and their carers, and creative groups for young people experiencing social, emotional or mental health challenges and from asylum seeker, refugee and migrant backgrounds.

We host shows by local dance and drama groups and work with organisations including Create Music and Bexhill Festival of Music to give young people hugely valuable professional performance experience. This is in addition to our year-round programme of uplifting and inspiring gigs, performances, comedy shows, talks and free exhibitions.

Action on Employment and Housing Security in Bexhill-on-Sea

In response to the findings of the CMO Report of 2021, NHS England alongside other coastal areas delivered the Turning The Tide[43] programme aimed at tackling the considerable health and employment inequalities which exist in coastal communities. One of the recommendations was the establishment of a Coastal Navigators Network of NHS ICBs that can share best practice and deliver collective action. NHS Sussex is one of six locations collaborating as part of [The Coastal Navigators' Network](#) (CNN) Programme.

Bexhill-on-sea is a priority area for the CNN programme within East Sussex. Employment and housing security is the local focus with local stakeholders wanting to emphasise the importance of better coordination of skills and employability funding, improved data for tailoring programmes, and addressing the insufficient supply of affordable housing through strengthened partnerships and integrated support services.

8.2 Camber

Table 4: Camber headline health, demographic and building blocks of health data.

Population size	1,125
Median age	50
Percentage of retirees	27.6
Percentage of carers	10.3
Percentage with a disability	20.3
Percentage with no qualifications	15.9
Self-reported good and very good health	78.1
Percentage of social rent	9.6

Nestled among the most eastern coast of Rother District, Camber is known for its sandy beaches. Originally a collection of fishermen's dwellings has grown to population of over 1000.

Unlike many other shingle beaches in the region, Camber boasts expansive sand dunes. The beach at Camber Sands stretches for miles, offering vast open spaces for visitors to enjoy. Its golden sands are perfect for sunbathing and building sandcastles[44].

The flat, wide shoreline is ideal for a variety of water sports, including kite surfing, windsurfing, and paddle boarding. The consistent winds and gentle waves make it a hotspot for enthusiasts of these activities, drawing visitors from near and far.

One of the unique features of Camber Sands is its tidal range. At low tide, the beach expands even further, revealing tidal pools and mudflats that are teeming with marine life. This makes it a fantastic spot for families, as children can spend hours exploring and discovering the wonders of the shoreline.

Camber Sands is not just about the beach. The surrounding dunes and marshlands are part of the Rye Harbour Nature Reserve, a haven for birdwatchers and nature lovers. The diverse habitats support a wide variety of bird species, making it an excellent location for wildlife photography and peaceful walks. The reserve is well-maintained, with multiple trails and observation points that allow visitors to immerse themselves in the natural beauty of the area[45].

Camber Sands beach is designated smoke free[46], along with Bexhill beach from the De La Warr Pavilion to the Coronation Bandstand on East Parade. Visitors are being asked to support the voluntary initiative by choosing not to smoke on these beaches, helping to protect children and young people as well as the environment from the harmful effects of smoking and the associated litter of cigarette butts.

8.3 East Saltdean and Telscombe Cliffs

Table 5: East Saltdean and Telscombe cliffs headline health, demographic and building blocks of health data.

	East Saltdean	Telscombe Cliffs
Population size	2,880	4,240
Median age	51	45
Percentage of retirees	31.3	31.3
Percentage of carers	10.4	11.4
Percentage with a disability	16.7	19.4
Percentage with no qualifications	16.4	18.2
Percentage of self-reported good and very good health	83.7	80.6
Percentage of social rent	4.6	7.9

East Saltdean and Telscombe Cliffs are coastal communities located within the Lewes District of East Sussex. Telscombe Cliffs, developed in the 20th century, is home to around 4,000 residents and features a primary school and a civic centre. East Saltdean, part of the larger Saltdean area, which is part of the city of Brighton and Hove, is known for its scenic cliff-top views and proximity to the South Downs National Park. East Saltdean and Telscombe Cliffs are part of Telscombe Town Council, hence why they are merged for this section.

Both areas are characterised by Telscombe Tye providing a natural break between the settlements. The communities are part of the Brighton to Newhaven Cliffs Site of Special Scientific Interest, known for its geological and biological significance.

Cllr Michele Lawrie East Saltdean and Telscombe Town Councillor shared what makes these two coastal communities great places to live.

"

Everyone has their own ideas about what makes somewhere a 'great place to live'. When house hunting for our family home, neither my husband nor I had much of a checklist. We had two dogs, two cats, and two small children. I was raised in the Irish countryside with no local facilities; my husband, raised in an Essex town, wanted a village pub and somewhere to walk the dogs! We agreed that we wanted to be close to the natural environment but with facilities nearby. East Saltdean and Telscombe Cliffs seemed to tick those boxes, and so we found ourselves next to the South Downs, looking out over the Channel.

We love the Art Deco buildings, the warmth of the community, and the beautiful land and seascapes. There are good local schools and nurseries, plenty of parks and playgrounds with football pitches and skateboard parks, and access to tennis courts and a trampoline park. The local beaches are an obvious attraction for swimming, paddle boarding and kayaking, and of course the recently beautiful renovated, Lido, which is open all year round. There's a wide range

of children's clubs and activities; ballet, musical theatre, football clubs, a Swimming and Surf Club, and local Scout groups.

Telscombe Tye, part of the South Downs National Park, is great for hiking, kite-flying and dog walking. The whole area is particularly dog friendly - designated beaches where dogs are permitted, parks where they can be walked off lead (but under control!) pet shops and vets, and Dogtember swims at the Lido specifically for our furry friends!

For the humans the wide range of cafés and restaurants, mostly owned and run by local families, mean you can choose from sushi, Turkish, Italian, Asian cuisine to name but a few, and tennis courts and gyms in which to work it all off! You can run or cycle on the undercliff, find yoga and Pilates classes in private studios as well as in church halls, the civic centre or at the lido, and even groups for cold water swimmers! The local bowls club is very popular and there are local Community and church groups.

There are dental and medical centres, pharmacies, banks and libraries. Post offices, now central hubs for Amazon and Evri drop-offs, along with local services like window-cleaning, gardening, hairdressing, and garages for MOTs and car repairs, meet most day-to-day needs.

A great bus service connects us to cinemas, theatres, music venues, shopping areas, and offers easy access to train stations, airports, and ferry terminals for longer trips. The ferry at Newhaven gives easy access to Europe, and buses to Brighton Station give easy access to Gatwick airport and London. Two decades later, what a great decision it was to come here and raise a family! If I were to be writing that checklist now, East Saltdean and Telscombe Cliffs would tick every box!

8.4 Eastbourne and The Crumbles

Table 7: Eastbourne and The Crumbles headline health, demographic and building blocks of health data.

	Eastbourne	Crumbles
Population size	99,185	3,060
Median age	45	54
Percentage of retirees	27.6	38.3
Percentage of carers	9.8	8.2
Percentage with a disability	20.9	14.5
Percentage with no qualifications	18.5	15.9
Self-reported good and very good health	79.6	85.3
Percentage of social rent	13.4	1.3

Eastbourne known for its Victorian charm, is a popular destination for tourists and a beloved home for residents. The town boasts a seafront with Eastbourne Pier as a centrepiece. Built in the late 19th century, the pier offers entertainment, cafés, and panoramic views of the

English Channel. The Eastbourne seafront promenade is perfect for leisurely strolls or faster paced runs and is lined with well-preserved Victorian hotels.

The Crumbles is a shingle beach located between Eastbourne and Pevensey Bay[47]. The Sovereign Harbour development is situated on an area of Eastbourne known as The Crumbles hence why the Crumbles has been incorporated within the section on Eastbourne.

Eastbourne's natural beauty is enhanced by Beachy Head and the South Downs National Park. Beachy Head, the highest chalk sea cliff in Britain, offers breathtaking views and is a popular spot for hiking and photography. The South Downs provide a diverse landscape with trails for walkers and cyclists.

Culturally, Eastbourne hosts various events, including the annual Eastbourne Airshow and the annual Eastbourne International Tennis Tournament. The town is home to the Congress Theatre, which, along with other venues, showcases a wide range of performances from plays to live music.

Eastbourne also has several museums and historical sites. The Eastbourne Redoubt Fortress, a circular seaside defence built during the Napoleonic Wars, offers visitors insight into the town's military history[48]. Art lovers can explore the galleries at the Towner Art Gallery, which features contemporary works and exhibitions[49].

We know that engaging in cultural and creative activities is good for health and wellbeing. Research has suggested a direct association between those who engage in two hours of arts engagement per week and significantly better wellbeing, compared to those who engage in less than two hours a week[50].

The Annual Report of the Director of Public Health in East Sussex 2023 / 24 - Creativity for Healthier Lives highlights the importance of creative and cultural pursuits to support health. The report highlighted local work in Eastbourne.

Nathan Gardner, Producer, Photographer and Filmmaker shared thoughts on Eastbourne ALIVE, an ambitious cultural programme coinciding with Towner Eastbourne hosting Turner Prize 2023 which presented partnerships, exhibitions and community projects all aimed at providing long lasting cultural change in Eastbourne, following the Turner Prize.

" Eastbourne Alive and the Turner Prize brought a challenge to our town that asked us to reflect on our identity as a town. So, when we invited young creatives across the town to help us capture Eastbourne through their lens, we didn't really know what to expect. Through our workshops and conversations, some of the folks felt that we're seen as old-fashioned, that youth are invisible, and they lack true representation.

But through this project, we played with these perceptions—exploring what Eastbourne truly means to its young community. The sea? Its our ultimate comfort on the sad days and a hangout spot with our mates. Quirky spots like Camilla's, the much-loved bookshop with equally loved parrot make this our town, alongside all the familiar high street shops, and then recently through the Turner Prize we had street interventions of amazing public art in the library, in the town centre and outside the Towner Gallery.

Its almost like the video helped us see Eastbourne fresh through young people's lens, and maybe start redefining and rediscovering our town as a place that embraces the old, welcomes the new, loves the quirky nature of being by the sea and celebrates all those things that make Eastbourne truly alive!

Councillor Jenny Williams BEM

"I've lived on the coast for nearly 30 years, with the last 18 in Eastbourne. In that time, I've built a business, raised my children, and developed a strong network of friends from Worthing to Hastings. Eastbourne has been a brilliant place to bring up a family—safe, well-connected, and with good schools, fantastic outdoor spaces, and a real sense of community.

But it's also been a great place to work and build something for the future.

People sometimes assume Eastbourne is just a summer town, but that couldn't be further from the truth. Yes, the warmer months bring a great energy to beach days, long evenings, and visitors enjoying the seafront. There's nothing better than the buzz of the busy promenade during Airborne or my own personal tradition—prosecco on the beach with friends at sunset.

But this town is for all year round. The world-class Towner Gallery, which hosted the Turner Prize last year, is a hub for contemporary art. Our theatres bring in top productions, and the town's independent cafés and restaurants serve up great food no matter the season.

Eastbourne's digital infrastructure is strong, making it easier than ever to live and work here with Brighton and London within easy commuting distance, access to 'City-life' is readily available.

One of Eastbourne's greatest strengths is its natural surroundings. The sea, the Downs, and our green spaces aren't just beautiful; they add to the quality of life, supporting mental health and wellbeing. I love the

days when I finish work and head out on the seafront or take a walk on the Downs. That balance of work and lifestyle is something I cherish.

Of course, no town is without challenges, and Eastbourne has its fair share-economic shifts, changing visitor trends, and evolving demographics. But there are also huge opportunities. More people are looking to move their businesses out of larger cities, and coastal towns are at a turning point. Investment in infrastructure, smart business support, and new business models post-COVID mean there is real potential for growth.

That's why I've been involved in shaping Eastbourne's Seafront Strategy 2050, a vision for a Seafront for Every Generation, ensuring that our coastline is a place where people of all ages can live, work, visit, and enjoy together. Eastbourne's future must build on what makes it special, while also evolving in a way that strengthens its economy, enhances its public spaces, and ensures it remains a vibrant, thriving place to be.

For me, Eastbourne has always been more than just a place to live. It's where I've built my life, watched my children grow, and had the privilege of being part of a coastal community. The town is evolving, and as we look ahead, it's crucial that we continue to create opportunities, whether that's supporting local businesses, investing in our cultural spaces, or making sure the seafront remains a space for everyone to enjoy.

Eastbourne, which includes the Crumbles also known as Sovereign Harbour is one of two coastal areas which is a borough council and an Integrated community team. The geography of the ICT is not an exact match between local authority district and NHS practice / PCN catchment, however the ICT profiles gives local demographics, health needs, social determinants and wider determinants of health.

8.5 Fairlight

Table 8: Fairlight headline health, demographic and building blocks of health data.

Population size	1,560
Median age	63
Percentage of retirees	49.5
Percentage of carers	12.2
Percentage with a disability	18.1
Percentage with no qualifications	22.1
Self-reported good and very good health	82.1
Percentage of social rent	Suppressed data

Fairlight, in Rother District, nestled between Hastings and the serene coastal views, Fairlight offers a unique blend of countryside tranquillity and seaside allure. Known for its picturesque landscapes, the village is part of the High Weald Area of Outstanding Natural

Beauty, providing both residents and visitors with rural vistas and opportunities for outdoor activities like hiking and birdwatching.

The village is adjacent to Fairlight Country Park, a popular local attraction featuring rugged cliff tops, verdant woodlands, and meadows. This park is home to a variety of wildlife, making it a haven for nature lovers. One of the highlights of the park nature reserve, where you can enjoy breathtaking views of the English Channel and explore its rich biodiversity.

The Bale House is a visitor centre at the Country Park Nature Reserve that in opened in 2021[51].

The centre provides an exciting facility for visitors to the park to find out about this special landscape, for school visits, activities and family events. You will be able to find information about the park, its geology, habitats, species that live there, and heritage all in one place.

8.6 Hastings and St Leonards

Table 9: Hastings and St Leonards headline health, demographic and building blocks of health data.

Population size	91,485
Median age	43
Percentage of retirees	22.9
Percentage of carers	12.3
Percentage with a disability	22.5
Percentage with no qualifications	20
Percentage of self-reported good and very good health	77.4
Percentage of social rent	14.1

Set between hills that reach to the sea, Hastings is an oyster that comes with its own grit, where the smooth bustle of modern life rubs along with the rough edges of tradition.

Look up and you'll see the ruins of the castle watching over Hastings, as they have in one guise or another for nearly 1,000 years. The three-mile seafront of Hastings stretches from the fishing fleet at the eastern end through the hustle and bustle of the arcades and funfair rides, to the pier and unique double-decker promenade Bottle Alley, arriving finally at peaceful Grosvenor Gardens.

Hastings and St Leonards-on-Sea are neighbouring coastal towns. These towns are renowned for their historical significance. Hastings is famously tied to the Battle of Hastings in 1066, a pivotal moment in English history when William the Conqueror defeated King Harold II. Although the battle took place in nearby Battle, Hastings serves as a cultural and historical hub for exploring this era. The town boasts Hastings Castle, the first Norman castle in England, providing panoramic views and an exhibit detailing the conquest.

The Old Town in Hastings offers a blend of narrow streets, timbered houses, and independent shops. It has character, with its bustling seafood restaurants and pubs. The Fishermen's Museum and Shipwreck Museum provide insights into Hastings' maritime heritage, while the Hastings Contemporary Gallery showcases contemporary British art.

St Leonards-on-Sea, developed in the early 19th century by James Burton as a purpose-built seaside resort, features beautiful Regency and Victorian architecture. The town is known for its artistic community, with galleries, studios, and creative spaces thriving throughout. The St Leonards Gardens offers a green retreat with landscaped gardens and serene water features.

Both Hastings and St Leonards share a lively cultural calendar, including events like the Hastings International Piano Concerto

Competition and the Jack in the Green festival. The towns also have a vibrant music scene, with live performances and festivals attracting crowds.

Hastings and St Leonards are our second coastal community which is a Borough, primary care network and Integrated Community Team.

Cllr Hilton – Deputy Leader of Hastings Borough Council

" For me it is the landscape of Hastings that makes it so special alongside the amazingly lively, outspoken and creative community that lives here. Before I moved here seventeen years ago, I had no idea there were still such wild and beautiful spaces along the south coast. Swimming out from the beach below the country park and just seeing woodland and cliffs down to the sea or walking along the beach at Rock a Nore at low tide to see dinosaur footprints are a real privilege and we need to be doing more to promote our amazing landscapes at this end of East Sussex.

Alongside these beautiful green spaces, we are so lucky to have community groups across the town who are passionate about helping looking after them as well as running community orchards, gardens, greenhouses and growing projects. There is more to be done to encourage everyone to access the health and wellbeing benefits of our green spaces, and while we have a lively and creative town there are still too many people struggling with long term health issues as well as a lack of decent affordable housing. However, I am hugely grateful to the many people running a huge range of charities and community groups that work so hard to support people to have a better life.

Our beachfront and areas such as St Leonards has been brought to life over recent years by many independent businesses and there seems to be a festival or event to attend pretty much every weekend of the year. It would be hard to ever be bored in Hastings! Over the next few years I look forward to our project to improve and green our town centre as well as investments in key heritage sites like Hastings Castle and St Mary in the Castle which will all contribute to promoting our town as a great place to live and visit.

Action on the building blocks of health, Regeneration in Hastings

Hastings Commons

Hastings Commons take derelict and difficult buildings around the White Rock area of Hastings into community custody, transforming them into social spaces, homes and workspaces that will always be affordable and open to all.

They celebrate people's ideas, energy and together they shape the places and share the stories of this special, historic neighbourhood.

Dominant models of regeneration, ownership and development have failed and exploited our communities for decades. Too often local people have been disempowered and displaced, geographic divisions exacerbated, inequality increased, our environment damaged, and the physical and social fabric of a place destroyed.

Hastings Commons is an ambitious, pioneering approach to community-led regeneration in the White Rock neighbourhood of Hastings that seeks to challenge this by offering a real alternative.

It aims to challenge traditional models of regeneration, ownership, and development that have often disempowered and displaced local communities. Hastings Commons offers a real alternative by focusing

on community ownership and collaborative management of buildings and spaces.

Hastings Commons seeks to create a place shaped by local people for local benefit. The goal is to retain the character and diversity of the area while ensuring that spaces and homes remain affordable and inclusive for future generations.

Since 2014, Hastings Commons has brought over 8,500 square meters of floor space into community ownership across a cluster of buildings in the centre of Hastings.

These buildings have been renovated to a high quality, offering genuinely affordable rents and supporting residents and businesses to collaborate and take more control of where they live and work.

The Observer Building

The Commons is a collection of buildings and spaces where 'commoners' (people who take action for the common good) can connect, grow, have fun, and make an impact.

Action on education and skills attainment in Hastings

Steps to Success

The Department for Education has funded Steps to Success in Hastings, providing opportunities for 84 persistently absent year 10 children from six Hastings schools to benefit from one-to-one coaching, workshops, and work experience from February 2024. The project aim is to improve participants' school attendance and engagement and to raise aspirations. 78 (93%) students remain on the programme. 65 (86%) have had at least 3 coaching sessions to date. Comparing the cohort's Year 11 attendance with Year 9, there is a 3% improvement in attendance. The programme concludes in March.

Expanding on the success of the first Careers and Enterprise-funded Effective Transitions Fund pilot (ETF1), and the above project in Hastings, Steps to Success ('EFT2') is now working with 315 year 10 participants, of which 203 are in coastal East Sussex. Almost all (94%) are on Free School Meals, and all are either persistently absent from school and/or have SEND, cohorts which are most at risk of becoming NEET (Not in Education, Employment or Training). Students are supported to commit to positive career and personal goals, to improve their school attendance, engagement, and attainment, and to progress into a high-quality post-16 pathway that matches their talents and ambitions.

More information about how Skills East Sussex (SES) works together to improve local employment and skills levels to increase economic prosperity in East Sussex is available online.

8.7 Newhaven

Table 10: Newhaven headline health, demographic and building blocks of health data.

Population size	12,850
Median age	40
Percentage of retirees	22.6
Percentage of carers	10.1
Percentage with a disability	22.7
Percentage with no qualifications	20.6
Percentage of self-reported good and very good health	78.4
Percentage of social rent	15.6

Newhaven is a coastal town in East Sussex, situated at the mouth of the River Ouse. It is positioned on the English Channel coast, approximately nine miles east of Brighton and features a significant maritime heritage. Historically, Newhaven emerged as a pivotal port town due to its strategic location, establishing itself as a key crossing point to France which still has a ferry service to Dieppe.

The town is part of the Lewes district and boasts a rich history dating back to the Saxon era, initially known as Meeching. Its port has played a crucial role over the centuries, especially during the 19th and 20th centuries when it became a major transportation hub for cross-Channel ferries. Today, Newhaven continues to operate a ferry service that links England with Dieppe in France.

Newhaven offers a charming mix of natural beauty and industrial functionality. The town has several residential areas and is characterised by a combination of historic buildings and modern developments. The Newhaven Fort, a 19th-century fortification, is a key attraction that provides insights into the town's military history while offering panoramic views of the surrounding coast.

Newhaven's natural surroundings include the sweeping cliffs of the South Downs National Park and the picturesque Seaford Bay, which offer numerous opportunities for outdoor activities such as hiking and birdwatching. The Ouse Estuary Nature Reserve is a significant local natural reserve, providing a habitat for diverse wildlife.

The Newhaven Area Snapshot[52] provides comprehensive overview of the Newhaven Meeching and Newhaven Valley areas, focusing on the Making it Happen (MIH) programme from November 2019 to December 2024. The aim is to offer background information and insights to support conversations about neighbourhoods in East Sussex, complementing statistical data with qualitative insights.

Stephen Honey - Executive Officer, Newhaven Town Council

" I moved to Newhaven over 20 years ago from London via Brighton and have never looked back. Although I had not crystallised why until 2020 when the lockdowns started.

It was only then that I realised what made Newhaven a great place to live. I could spend my 'allocated exercise time' each day to walk through the Ouse Estuary Nature Reserve, just 5 minutes from my house. I could walk a mile or two and wander through the lost village of Tide Mills. Then onto the beach with views across the Channel, up to Newhaven Fort and the glorious, world renowned Seven Sisters. If I walked half a mile in the opposite direction, I would be on the South Downs, from where, I could see from the Seven Sisters around to Newhaven Harbour, Newhaven town, north along the Ouse River towards Lewes.

It is a terrible thing to admit that it took an event like the Covid-19 pandemic for me to realise what a tremendous place I lived in especially when considering health and wellbeing. It was at this point that I along with many others came to realise what a vital role, spending time outdoors in 'nature' held for both physical and mental health.

Newhaven has suffered in recent years from having a poor reputation but that is changing with many artistic ventures over the past 18 months and many more to come. Millions of pounds in funding will be helping to revitalise the town centre and a new Health hub on its way. There is also a wayfinding exercise to provide pedestrian-focused streetscape improvements and to improve access to the centre of the town from the railway station.

Ultimately, whilst the location of Newhaven, at the mouth of the Ouse River on the South coast and the South Downs in easy reach is important, as with most towns, it is the people of Newhaven that make it what it is. I recently started to work for Newhaven Town Council to try and 'give back' a little to my community.

What I have now realised is that I am a minnow in the 'giving back' stakes as there are so many people in this town that give so much of their time and energy to push the town forward to even greater things.

From the Councillors who give so much time and effort for no recompense to the landlady of our local pub that turned it into a community shop during the pandemic making it easier for local residents to get their groceries. There are many local groups and initiatives aimed at promoting social connections and community engagement, which are well known for improving mental wellbeing.

Newhaven is a town that offers the perfect balance of coastal charm, historical significance, and modern convenience. With its natural surroundings, powerful sense of community, excellent transport links, and ongoing regeneration, it is no wonder that more people are choosing to make Newhaven their home. Whether you are looking for a fresh start or a place to put down roots, Newhaven is a great place to live.

Action on tackling loneliness in Peacehaven, Newhaven and across our coastal communities

Gill Reynolds, Tackling Loneliness Programme Facilitator, Sussex Community Development Association (SCDA)

" Whoever you are, whatever your age and circumstance, wherever you live, it's important to remember that feeling lonely is a natural part of feeling human, and everyone, at some point in our lives will feel lonely.

The Tackling Loneliness Programme is a 2-year funded programme completing in December 2025. It builds on the Annual Public Health Report 2022/23 - Connecting People and Places which set out recommendations of what we need to do to tackle loneliness in East Sussex.

We define loneliness as the 'a subjective negative feeling that emerges when our expectations for connection and the reality of our connections don't match up'. We understand that anyone can experience loneliness and it is often transient, but when it is prolonged and severe, it can become a significant problem.

We recognise that there is a wealth of local community support groups and services which help people to feel more connected to each other and have a greater sense of belonging to their local communities. We have been creating shared learning spaces for the many services to connect with each other and share their learning about loneliness.

We have convened shared learning groups for Peacehaven, Newhaven and Hastings. We have representation from over 70 people from a wide range of Voluntary, Community and Social Enterprise (VCSE),

NHS Health and Statutory sector services, all committed to collaboratively connecting to tackle loneliness and learning together.

Loneliness can be triggered by life events at various points throughout the life course from birth to the end of life, which ranges from experiencing bullying in childhood, bereavement, becoming a career, loss of a job or relationship and loved one, including pets, all puts a person at risk of experiencing loneliness.

We know that people who are lonely are often less resilient and have lower self-esteem and that loneliness is associated with 'poorer sleep'. Experiencing chronic loneliness can increase the risk of early mortality by 50%. We are delivering our Loneliness Matters workshops across the county, which takes a deeper dive into identifying loneliness in ourselves and others, understanding how loneliness exacerbates both physical and mental health problems and explores who are the loneliest people in our communities.

Loneliness is a risk factor for the progression of frailty and poorer cognitive function among older adults. In Eastbourne, Linking Lives Befriending service connects Link Friends with volunteers.

" At first I just wanted some company at home, but over time I felt able to leave my flat and go to my local lunch club.

In Seaford, Friends of Bishopstone Station (FOB) provide a space for people to connect.

" I have made new friends and contacts, I used to be quite lonely since my husband passed away; Meet up Mondays has made a huge difference to my week, people to chat to, human companionship. Sundays are very lonely days.

We understand that being lonely is not simply about feeling socially isolated/lacking communal ties, it's also about being heard and understood. Compass Arts in Eastbourne recognises this as important to their artists who experience serious mental illness.

"   Without Compass Arts I wouldn't have the impetus to explore and to have a sense of agency. I have found my voice again. I also have found mutual respect, camaraderie and validation.

Tackling Loneliness Project • SCDA

8.8 Peacehaven

Table 11: Peacehaven headline health, demographic and building blocks of health data.

Population size	15,705
Median age	46
Percentage of retirees	27.4
Percentage of carers	10.5
Percentage with a disability	21
Percentage with no qualifications	21.4
Percentage of self-reported good and very good health	78.9
Percentage of social rent	10.2

Peacehaven is a coastal town located in Lewes District, East Sussex, it is perched atop the scenic chalk cliffs of the South Downs, offering views over the English Channel.

Founded in 1916 by Charles Neville, Peacehaven began as a planned community, initially named 'New Anzac-on-Sea' to honour the

Australian and New Zealand Army Corps. The name was eventually changed to Peacehaven, reflecting a more tranquil appeal.

The town lies approximately six miles east of Brighton, making it a peaceful residential retreat for those seeking to escape the hustle and bustle of city life while still being relatively close to urban amenities.

One of the key features of Peacehaven is its rural charm and beautiful landscapes, including the South Downs National Park nearby, which offers opportunities for walking and outdoor activities.

Peacehaven comprises mostly residential homes, with a mix of architecture styles ranging from early 20th-century houses to modern developments. It has essential amenities that cater to its residents, such as schools, shops, parks, and community centres.

The cliff top promenade is a popular attraction, providing breathtaking coastal views and access to several walking and cycling paths, including the Undercliff Walk leading towards Brighton. The point where the Prime meridian of the world crosses the coast is marked by a 3.5m (11ft) tall obelisk, commissioned by Charles Neville. It was unveiled on 10 August 1936, and has been relocated twice due to erosion of the cliffs.

The climate is generally mild, typifying the maritime climate of southern England.

The Peacehaven Area Snapshot[53] provides a comprehensive overview of the Peacehaven West and Peacehaven North areas, focusing on the Making it Happen (MIH) programme from November 2019 to December 2024. The aim is to offer background information and insights to support conversations about neighbourhoods in East Sussex, complementing statistical data with qualitative insights.

8.9 Pett

Table 12: Pett headline health, demographic and building blocks of health data.

Population size	345
Median age	58
Percentage of retirees	44.2
Percentage of carers	10.8
Percentage with a disability	17.8
Percentage with no qualifications	12.2
Percentage of self-reported good and very good health	81.3
Percentage of social rent	10.9

Pett is a village in Rother District, East Sussex, Pett Level, part of the larger Pett Parish, features a coastline with prehistoric forest remnants visible during low tides and an array of bird life, making it a popular spot for nature enthusiasts.

Cllr David Tasker shares what makes Pett and Pett Level: A Wonderful Place to Live.

Living in Pett and Pett Level

" I've come to appreciate what makes these small communities so special. Nestled between the High Weald and the coast, the area offers a unique blend of natural beauty, a strong sense of community, and some fantastic local businesses. It's the kind of place where you feel connected to both the landscape and the people around you.

A Rich Natural Environment

" For me, one of the highlights of living here is the stunning natural surroundings. Pett Level Beach is the perfect spot for a peaceful walk, with its wide, open skies and views that stretch for miles. The marshlands and nearby Rye Harbour Nature Reserve are teeming with wildlife, making it a haven for nature lovers. The Saxon Shore Way passes right through Pett, offering incredible walking routes that combine the best of the coast and countryside.

A Community That Comes Together

" What makes Pett truly special is its people. The village hall is the heart of the community, hosting everything from yoga classes to craft fairs and community events. The Pett Flower Show and Art on the Beach festival are standout moments in the calendar, bringing everyone together and showcasing the creative energy of the area. Our Parish Council works tirelessly to address local issues and ensure Pett remains a great place to live.

Local Businesses That Bring Character

" Pett and Pett Level are home to some brilliant local businesses that add so much to the community. The Two Sawyers and the Royal Oak are both fantastic pubs where you can enjoy a good meal and a warm, welcoming atmosphere. The Tic Tocory tea shop is a favourite of mine – a cosy spot to enjoy homemade cakes and a good cup of coffee. For fresh, organic produce, the Stonelynk Organic Farm Shop is unbeatable.

Down at Pett Level, Eaters@Pett is a lovely beach café where I often stop for a bite to eat after a walk. The New Beach Club, with its events, live music, and sea views, is another great addition to the area. It's also home to the New Beach Sea Angling Club, a reminder of the community's deep connection to the coastline.

Looking After Our Village

" Of course, there are challenges too. The public toilets at Pett Level Beach have been closed by Rother District Council, which has been inconvenient for residents and visitors alike and led to justified concerns about public health and wellbeing. Thankfully, our Parish Council has taken these concerns raised by both locals and visitors, seriously and is actively working on finding a solution to reopen them – a reflection of the care and attention they put into looking after the community.

Living in Pett and Pett Level means being part of a place where people truly care about each other, the environment, and the future of the area. It's not flashy or over-polished, but it's a place with real heart, and I wouldn't want to live anywhere else.

8.10 Pevensey Bay

Table 13: Pevensey Bay headline health, demographic and building blocks of health data.

Population size	2,895
Median age	59
Percentage of retirees	41.8
Percentage of carers	11.3
Percentage with a disability	19
Percentage with no qualifications	22.9
Percentage of self-reported good and very good health	80.7
Percentage of social rent	Suppressed

Sarah Mosedale, Clerk to Pevensey Parish Council shared the following. The villages of Pevensey and Pevensey Bay in the Wealden District of East Sussex offer a wonderful combination of traditional seaside and historical importance with a nod towards Pevensey's important place in the natural world.

Pevensey Bay enjoys a strong sense of community with a thriving social cohesiveness. With the attendant beaches and organisations devoted to a life on the ocean wave, surfing, fishing and sailing is within easy reach and enjoyed by many.

The vibrant village is well served with eateries and cafés drawing people together through special events and live music. Community facilities host tourists and residents alike and encourage visitors to stay awhile at the local camping sites, refurbished hotel and in the Airbnb properties that have been created over the years.

The King Charles III England Coast Path visits Pevensey Bay and along with the 31 mile 1066 Country Walk starting at Pevensey Castle in nearby Pevensey village offers a popular destination for all.

Nearby Pevensey village was the home of a Roman Fort dating from 290AD. Pevensey was also the landing place of William the Conqueror's army in 1066. The famous Bayeux Tapestry was inspired by the events of 1066 and was recently part of television series Lucy Worsley Investigates.

Later it was pressed back into service as an emergency stronghold in the Second World War. Managed by English Heritage, the Castle enjoys many visitors annually who are given a warm welcome at local inns and tea rooms.

Pevensey has a rich history and Pevensey Court House, Museum and Gaol and the recently opened Ye Olde Mint House both in Pevensey High Street are both open to the public and enthusiastic in their offer of special events focusing on local history, the area's Smuggling past and some grizzly moments that occurred.

Excitingly, Sussex Wildlife Trust and National Highways has funding for the Pevensey Levels Wetland Restoration Project.

The Pevensey Levels is a lowland grazing marsh, covering 4,300 hectares between Eastbourne and Bexhill-on-Sea. It is one of the most environmentally important wetland areas in southern Britain, being of national and international importance for its biological diversity and rare plants and invertebrates, including the fen raft spider. It is designated as a Site of Special Scientific Interest, a Ramsar site and a Special Area of Conservation.

The aim is to create a mosaic of habitats by blocking and meandering ditches, digging scrapes and creating deeper ponds as well as undulations. Together, these measures will help 're-wet' the Levels, allowing wetland species to re-colonise lost territories.

Pevensey plays host to the Recreation Ground that serves both villages in terms of multi sports development and provides an events venue for village initiatives including those organised by Pevensey Parish Council.

Historically, the villages have played host to the elderly demographic, however Wealden District Council predict Wealden is the only district in East Sussex likely to see a significant increase in the number of children and young people between 2020 and 2035.

The NHS offers three surgeries in Pevensey Bay, Westham and Stone Cross for an increasing population moving to the new estates appearing along the Westham-Stone Cross Corridor. Pevensey and Pevensey Bay work hard through their network of 3 Village Halls to offer social cohesion, support and remedy for social isolation often experienced in rural communities.

Many groups focus on physical and mental wellbeing through sports and arts sessions alongside successful lunch clubs with community transport included. Pevensey village is the home of St Nicolas Church.

For eight centuries St Nicolas Church has stood at the centre of Pevensey. The oldest building still in use here for its original purpose, the church is a mainstay of Christian belief and local life, a living link between today's village community and Pevensey's medieval seaport heritage. It is joined in worship with St Wilfrid's Church In Pevensey Bay.

Public transport links serve the two villages offering routes into Eastbourne and major supermarkets via Service 8 and routes to Bexhill, St Leonards and Hastings can be found via Service 99. There is no direct bus to Conquest Hospital which is of concern to the villages.

8.11 Seaford

Table 14: Seaford headline health, demographic and building blocks of health data.

Population size	23,850
Median age	54
Percentage of retirees	39.1
Percentage of carers	11,7
Percentage with a disability	19.5
Percentage with no qualifications	16.6
Percentage of self-reported good and very good health	80.6
Percentage of social rent	8

Seaford, Lewes District, is blessed with a beautiful seafront that sweeps around the bay, encompassed by the striking presence of Seaford Head and the cliffs on the eastern side and Newhaven Harbour with Mount Pleasant in the distance on the western side. The views and experience of living within this breath-taking environment can bring both joy and solace to residents who seek to live along this coastal path.

Cllr Sally Markwell writes what makes Seaford a great place to live.

"As chair of Seaford Health Stakeholders Working Group, I have recognised the benefits of living in this asset rich location, not only because of its genteel town with a colourful past. There appears to be a golden thread of opportunity that connects our residents across all ages to a robust core of community concern which identifies local need and harnesses the skills and energy of local volunteers.

Being Mayor of Seaford, I have also been privileged to engage with the many community groups who enrich our neighbourhoods from enhancing communication and belonging, to finding volunteers and making the positive connections which helps to address social needs. Through dedicated, collaborative commitment, civic-level, community cantered and service-based interventions have been addressing, for example, isolation and loneliness by bringing people together to chat, share stories and build friendships; this was further encouraged by suggesting community picnics during the summer.

Others create opportunities for everyone to get the most from our precious green spaces to improve physical/mental health or be part of community events, through organising park runs, encouraging cycling and walking, team-sports for all ages and abilities, as well as building community ownership, enhancing skills in tree planting and food growing. We are host to some incredible musicians, artists, crafters and creators who continuously share their skills and talents. Some also responded to our challenge to develop a Community Coat this autumn

with over 90 patches representing groups in Seaford. Our communities thrive on their achievements and gifts.

Our business community embraces local need through their recurrent goodwill, generosity, and celebration of Seaford youth as well as combining their skills and resources to enhance many aspects of our community. A spontaneous community Christmas Eve lunch for more isolated residents arose from just this type of giving. Our leisure services not only inspire active lifestyles but also support our primary care networks to offer social prescribing through programmes which include a Men's Shed and local chat groups. Local faith groups foster a multitude of volunteers, making a tangible difference across our diverse neighbourhoods.

Through my visits to local schools, the dedication of staff and local parents ensure our young people grow in confidence and realise their potential. The children asked me, "What advice would you give to kids who want to help make the town better?" We considered how to make impossible things happen, by all working together and recognising that everyone has something to offer, and where we can find the strength and support we need. These reflections are a reminder of how, through combined enterprise we can ensure that Seaford residents stay happy, healthy, and connected.

8.12 Winchelsea Beach

Table 15 Winchelsea Beach headline health, demographic and building blocks of health data.

Population size	1,025
Median age	60
Percentage of retirees	42
Percentage of carers	11.3
Percentage with a disability	15.6
Percentage with no qualifications	18.2
Percentage of self-reported good and very good health	84.4
Percentage of social rent	2.9

Here marshland meets the sea to create a friendly and relaxing little resort. There is no soft sand to sit on, and rather a lot of mud to wade through at low tide. We love it though, like the many families who look back with great nostalgia on the happy days they spent here

from the 1930's onwards. The beach is still here, unspoiled, for young and old to enjoy, but do not expect any amenities. There is very little parking. In the summer there is an ice cream van, and there are several benches on the sea wall. Really, there is only sea and shingle, with flat wet sand at low tide and lots of little pools. Many species of birds frequent the sands, and it is their beach, which they graciously allow us to share. Winchelsea Beach is popular with dog walkers, lug diggers and folk with shrimping nets. It is also a good place for swimming and wind surfing.

9. Difference across the life course

This section of the report looks at the differences between coastal and non-coastal areas and key health issues, it takes a life course approach and explores a range of data sets and the three domains of public health[54].

9.1 Children and Young people

9.1.1 Childhood vaccination and immunisations

Childhood vaccination is important. First, it provides direct protection for children against severe and potentially life-threatening diseases, such as measles, polio, and whooping cough. These vaccinations help the immune system recognise and combat specific pathogens, reducing the risk of severe illness[55].

Second, vaccinations contribute to herd immunity. When a significant portion of the population is vaccinated, it reduces the spread of the disease, protecting those who cannot be vaccinated, such as infants, pregnant women, or immunocompromised individuals. This communal protection is vital in preventing outbreaks and keeping diseases at bay.

Third, vaccines are cost-effective[56]. Preventing illness through vaccination is more economical than treating diseases. The costs of hospitalisation, medication, and long-term healthcare for preventable diseases can be immense. Thus, investing in vaccination saves resources and reduces the financial burden on healthcare systems.

Furthermore, childhood vaccination has led to the near eradication of certain diseases. For instance, smallpox has been eradicated globally, and polio is close to being eliminated in many regions[57]. These successes showcase the power of vaccines.

Finally, vaccinated children have better opportunities for education and development, as they are less likely to suffer from illnesses that can cause school absences and developmental delays, ensuring healthier and more productive lives.

GP practices provide childhood vaccination and immunisations. For this analysis they have been classed as 'coastal' if at least 75% of their patients live in LSOAs that are deemed 'coastal' using ONS best fit BUAs to LSOAs (October 2024 list size data). For coastal practices the lowest % of their patients in a coastal LSOA is 76%. The next practice after this would be 43%, it seemed a very clear cut-off to use 75% natural break in the data.

The pneumococcal conjugate vaccine (PVC) is essential in England for protecting against serious illnesses caused by pneumococcal bacteria, such as pneumonia, meningitis, and sepsis[58]. This vaccine is particularly important for vulnerable groups, including babies, older adults, and individuals with certain medical conditions.

In England, the PCV is part of the routine immunisation schedule for infants, who receive it at 8 weeks, 16 weeks, and one year of age. This early protection is crucial as young children are at higher risk of severe pneumococcal infections. The vaccine helps prevent the spread of pneumococcal bacteria within the community, contributing to herd immunity and protecting those who cannot be vaccinated[59].

Figure 11: Percentage of pneumococcal conjugate vaccine (PVC) uptake. by coastal and non-coastal classification in East Sussex.
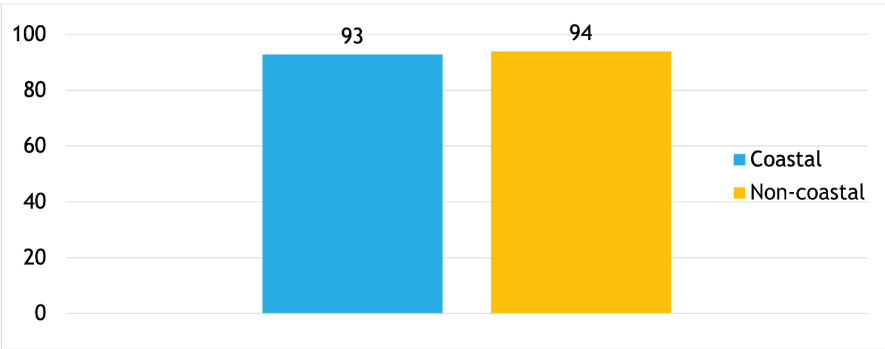

Figure 11 shows the percentage of pneumococcal conjugate vaccine uptake by coastal and non-coastal GP practices with data from the annual GP vaccination coverage statistics for children aged up to 1 years in England 2023 to 2024. Nationally in 2023/24, 93 percent of children had received the primary PCV immunisation by their first birthday[60]. Our coastal GP practices have a vaccination uptake of 93% compared to 94% in non-coastal practices.

Public health campaigns and vaccination programmes in England emphasise the importance of the PCV to ensure high coverage rates and protect public health. Maintaining high vaccination rates is essential to prevent outbreaks and protect vulnerable populations from this potentially life-threatening infection.

The DTaP/IPV/Hib/HepB vaccine also known as the 6-in-1 vaccine[61], is a crucial immunisation that protects against six serious diseases: diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b (Hib), and hepatitis B. This combination vaccine is

administered to young children to provide comprehensive protection with fewer injections, making it more convenient and less painful for both children and parents.

Diphtheria is a bacterial infection that can cause severe throat and breathing problems, and in some cases, heart failure or paralysis. Tetanus, also known as lockjaw, is a bacterial infection that affects the nervous system and can lead to muscle stiffness and spasms. Pertussis, or whooping cough, is a highly contagious respiratory disease that can cause severe coughing fits and is particularly dangerous for infants.

Polio is a viral infection that can lead to paralysis and even death. Hib is a bacterial infection that can cause severe illnesses such as meningitis, pneumonia, and epiglottis. Hepatitis B is a viral infection that affects the liver and can lead to chronic liver disease or liver cancer.

The importance of the DTaP / IPV / Hib / HepB vaccine lies in its ability to protect against these six diseases simultaneously. By combining multiple vaccines into one, it reduces the number of injections required, which can improve vaccination rates and ensure timely protection for children[62]. High vaccination coverage is essential to prevent outbreaks and protect vulnerable populations, such as infants who are too young to be vaccinated and individuals with compromised immune systems.

Despite the proven safety and efficacy of the DTaP / IPV / Hib / HepB vaccine, it is essential to continue public education and awareness campaigns to address vaccine hesitancy and ensure high vaccination coverage.

Figure 12 shows that the Percentage of DTaP/IPV/Hib/HepB vaccine uptake is 1.2% lower in coastal GP practices compared to non-coastal.
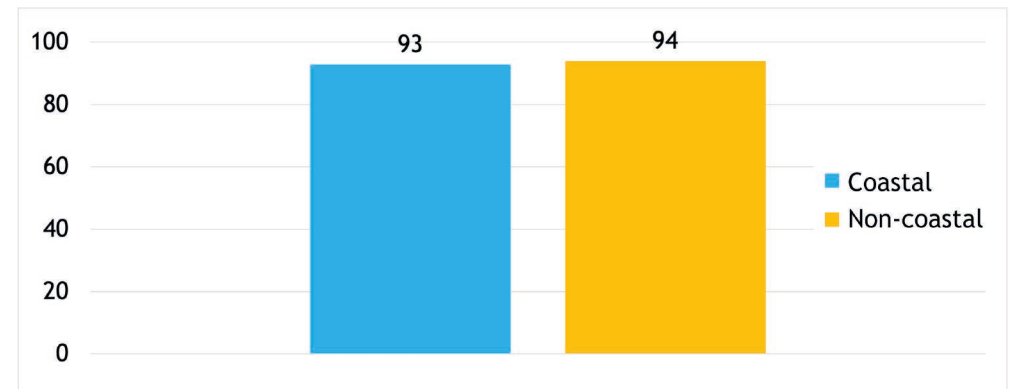
The MMR vaccine protects individuals and communities from measles, mumps, and rubella[63]. These diseases can have severe health consequences, and vaccination is the most effective way to prevent outbreaks and ensure public health.

Measles is a highly contagious viral infection that can lead to serious complications such as pneumonia, encephalitis, and even death. Before the introduction of the measles vaccine, the disease caused widespread illness and fatalities. The MMR vaccine has significantly reduced the incidence of measles, but recent declines in vaccination rates have led to outbreaks in various regions.

Mumps is another viral infection that can cause painful swelling of the salivary glands, fever, and headache. In some cases, mumps can lead to complications such as meningitis, encephalitis, and hearing loss. The MMR vaccine has been effective in reducing the prevalence of mumps, but maintaining high vaccination coverage is essential to prevent resurgence.

Rubella, also known as German measles, is generally a mild illness in children but can have devastating effects if contracted by pregnant women. Rubella infection during pregnancy can lead to congenital rubella syndrome (CRS), causing severe birth defects such as heart abnormalities, deafness, and intellectual disabilities. The MMR vaccine has been instrumental in preventing rubella and protecting unborn children from CRS.

Despite the proven safety and efficacy of the MMR vaccine, misinformation and vaccine hesitancy have led to decreased vaccination rates in England[64]. It is vital to address these concerns through public education and awareness campaigns, emphasising the importance of vaccination for individual and community health. Figure 12 shows that by the age of 5 when a child should have received a second dose of the MMR vaccine, a smaller proportion of children from coastal GP practices have received this. Nationally MMR2 coverage at 5 years decreased to 83.9%, the lowest level since 2009-10.

Figure 13 Percentage of second dose of the MMR vaccine uptake. Coastal, non-coastal and East Sussex. Annual GP vaccination coverage statistics for children aged up to 5 years in England 2023 to 2024.
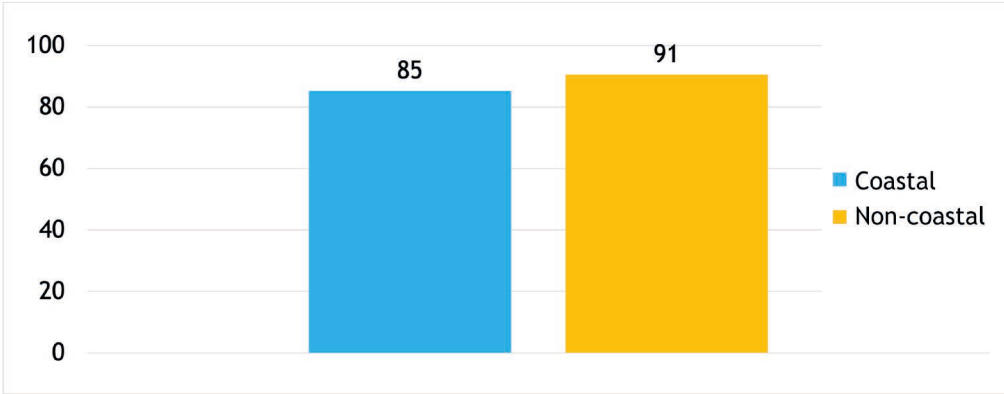
9.2 Health and Wellbeing of School Aged Children My Health My School

The My Health, My School survey is a pupil perception survey that asks children and young people a range of questions under ten key themes: All About Me, Healthy Eating, Social, Emotional and Mental Health (SEMH), Gambling, Physical Activity and Sport, Play. Physical Education (PE) in School, Drugs Alcohol and Tobacco, Sexual Health and My School / College.

Each are tailored age-appropriately with year group log-ins. The survey is available to years 3, 4 (PE in school only), 5, 6, 7, 9 and 11, Post 16 and there are SEND surveys for children with Special Educational Needs and Disabilities. This ensures we have a large amount of data capturing the perceptions of our children and young people [65].

Schools are free to choose which year groups they survey, although are encouraged to include year 6 and 9 to improve statistical analysis. Where numbers are lower, we can be less certain statistically that a result is representative of the wider school population. For example, only a small number of young people from Hastings secondary schools completed the survey, which may bias the overall findings as the borough contains some of the most deprived areas of the county.

Schools are also free to choose which term they conduct the survey, and it is likely that some pupils would answer the same question differently as they settle into school or encounter new challenges such as exams. Again, we are now encouraging completion during terms 5 and 6 to achieve greater consistency.

Response rates vary across the different year groups from 7% of Year 11s to 60% of Year 6s. All year groups percentage responses. This can be seen in Table 16 where the number of responses to survey is compared to the School Census May 2024.

Table 16: Percentage response rate for each year. Number of responses to MHMS survey compared to School Census May 2024.

Year Group	Number of responses	School Census May 24	Percentage completion
Year 5	2,654	5,331	50%
Year 6	3,345	5,531	60%
Year 7	1,560	5,494	28%
Year 8	1,749	5,408	32%
Year 9	2,596	5,242	50%
Year 10	1,397	5,040	28%
Year 11	344	5,081	7%

Overall, the data is considered representative of East Sussex children and young people in terms of gender, ethnicity and deprivation (using FSM eligibility as a proxy). However, there is an under representation of secondary students from schools in Hastings.

Due to the anonymous nature of the dataset, pupils have been classified as coastal or non-coastal based on their school alliance. School alliance coastal classifications have been based on pupil's LSOA of residence from the school roll.

This survey contains self-reported information and views from children and young people in East Sussex. Survey findings should not be viewed in isolation. It is important to consider the findings alongside other sources of data relevant to the subject or question. They are a useful starting point to explore an issue/theme in more depth.

Confidence intervals are used on some charts. They represent the range of values that you can be 95% certain contains the true average for the school population. If the line does not overlap with the value you are comparing to, you can be confident there is a true difference between the two results. The lower the number of survey results, the wider the interval will be.

9.2.1 A healthy diet

The '5 a day'[66] concept, which encourages consuming five portions of fruits and vegetables daily, is vital for children for several reasons. First, it ensures they receive essential vitamins and minerals, crucial for growth and development. Fruits and vegetables provide dietary fibre, supporting a healthy digestive system and preventing constipation. Establishing healthy eating habits early on, reducing the risk of obesity and related diseases, such as diabetes and heart disease, later in life[67]. Additionally, a varied diet rich in fruits and vegetables boosts the immune system, helping children ward off common illnesses and stay active and energetic.

The costs of overweight and obesity, and physical inactivity are significant on our economy. The NHS is estimated to spend £6.1 billion each year treating obesity-related ill health[68]. Local authority social care costs are estimated at £352 million per year, England's poorest areas are fast food hotspots[69] and the wider societal costs are estimated at £27 billion. The cost of malnutrition in England is estimated to be £19.6 billion per year. The cost of malnutrition in England[70]. Meanwhile, the costs of physical

inactivity are estimated to be around £7.4 billion per year, including £0.9 billion to the NHS alone[71].

Figure 14 shows a higher percentage (35%) of non-coastal primary school aged children eating five or more portions of fruit and vegetables on a normal school day, compared to 30% of coastal primary school aged children. Figure 15 shows a higher of percentage of coastal primary school aged children eating three or more snacks that are high in fat or high in sugar on a normal school day (31%), compared to the non-coastal counter parts (28%).

Figure 16 highlights that the percentage of secondary students that are eating five or more portions on a normal school day is higher in non-coastal secondary schools (22%) compared to coastal secondary schools (20%).

Figure 14 Percentage of children eating five or more portions of fruit and vegetables on a normal school day. Primary (Year 5 and 6). May 2024.
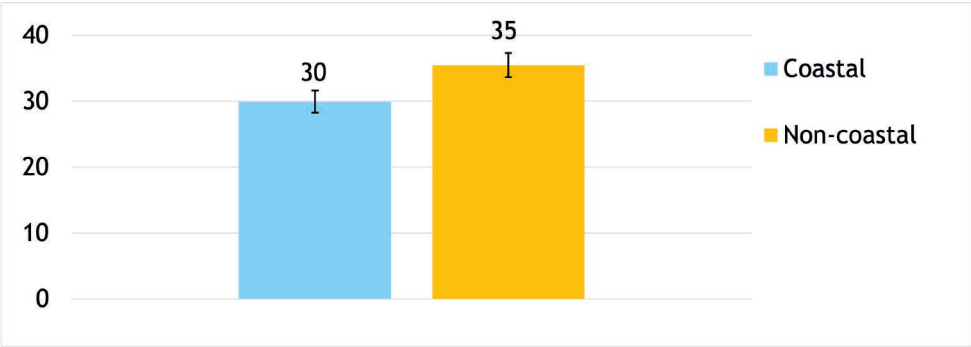
Figure 15 Percentage of children eating three or more snacks that are high in fat or high in sugar on a normal school day Primary (Year 5 and 6). May 2024.
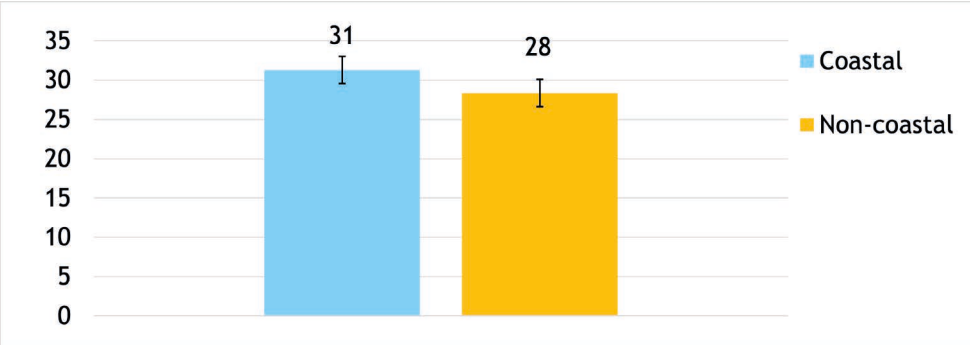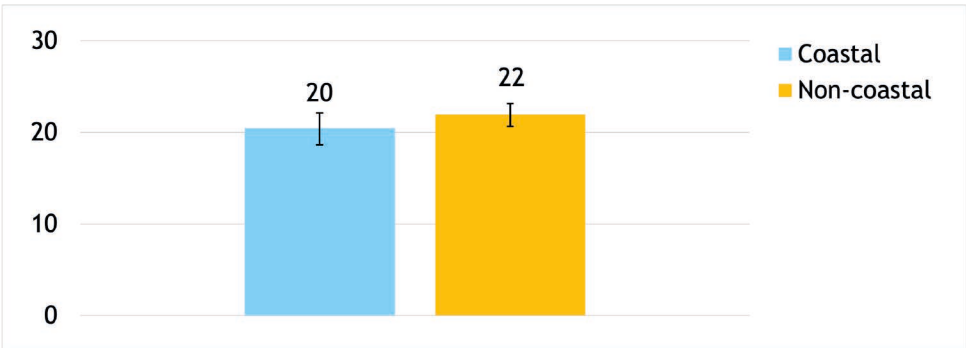

Figure 16 Percentage of students that are eating 5 or more portions on a normal school day. Secondary. May 2024.


East Sussex County Council commissions the East Sussex School Health. They are a team of public health practitioners, led by school nurses, who work with children, young people and families in East Sussex. Children do not have to be in school to use this service.

The school health service supports children and families with a range of issues including healthy eating.

Find out more at School Health | East Sussex and watch the East Sussex School Health Service for parents and carers on Vimeo

The Eatwell Guide[72] shows how much of what we eat overall should come from each food group to achieve a healthy, balanced diet.

You do not need to achieve this balance with every meal but try to get the balance right over a day or even a week.
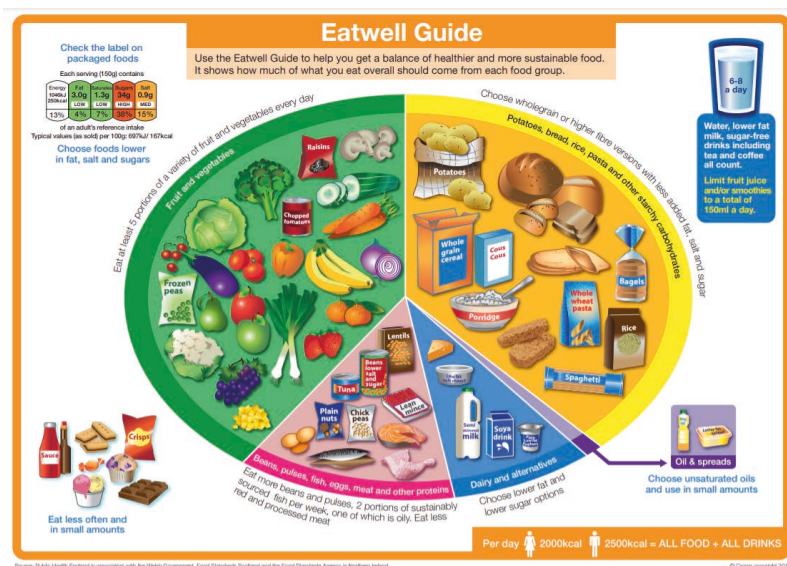

There is evidence to show that some people do not always make informed decisions regarding the healthfulness of their food. Hot Food Takeaway outlets (HFTs) are one source of food which has received attention as food from these places is often referred to as High Fat Salt and/or Sugar. Due to this, the food is often calorific and nutritionally poor. More generally, living in areas which have lots of HFT outlets increases the likelihood of buying and eating less healthy food England's poorest areas are fast food hotspots.

Map 4 shows the county in terms of deprivation, overlaid with the HFT data. Correlation can be seen between the locations of the areas of highest deprivation, in the dark blue, and the biggest concentrations of HFTs. This correlation corresponds to Map 4 where childhood rates of overweight (including obesity) for Year 6 is mapped against deprived wards. While this does not suggest that obesity is caused by the HFTs, it does demonstrate a pattern where the elements of obesity and HFT overlap in their location.

Map 4 Hot food takeaways and deprivation in East Sussex.
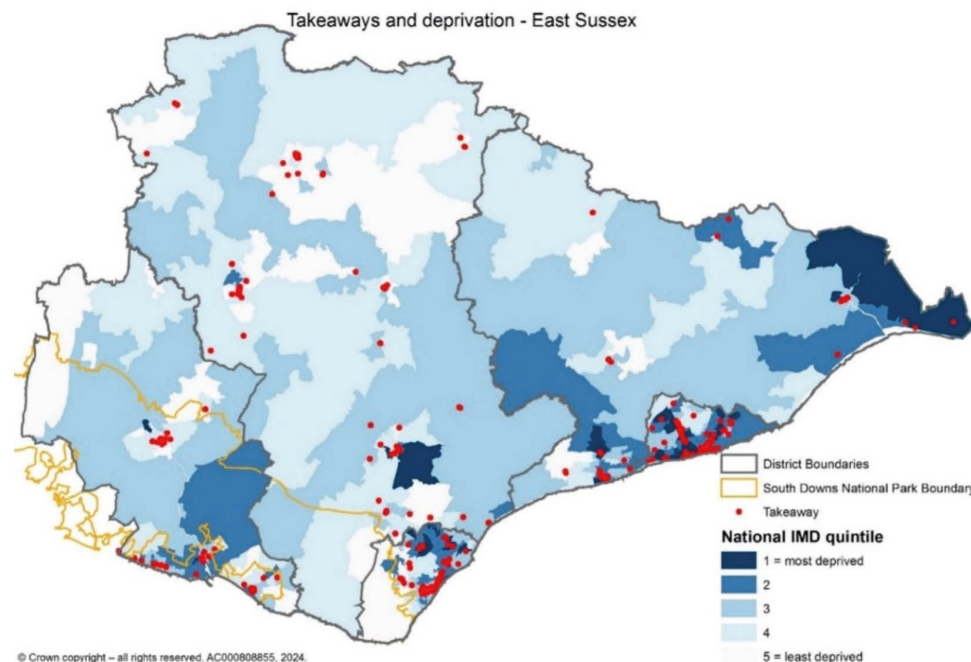
Map 5 Year 6 overweight and obesity prevalence and HFTs.
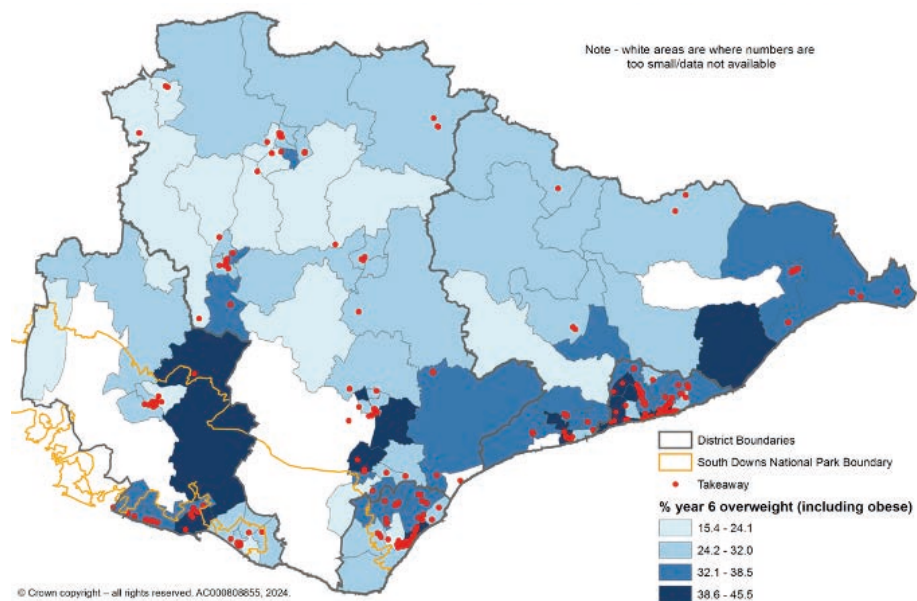
To address this issue East Sussex County Council have developed guidance that supports local authority public health and planning teams to use the powers of the planning system to promote healthy weight environments. It helps to support local authorities taking proportionate actions to protect vulnerable and at-risk groups, such as young children, from less healthy environments.

9.2.2 Physical activity

Physical activity offers numerous benefits for children, impacting their physical, mental, and emotional wellbeing[73].

Figures 17 and 18 highlight within primary school, our coastal children are usually physically active for at least 60 minutes (1 hour) on most days (84%) which is less activity than their non-coastal peers

at 86%. This difference increases as they age, with our local data highlighting 74% of coastal students that are usually physically active for at least 60 minutes compared to 77% in non-coastal areas.

Figure 17 Percentage of students that are usually physically active for at least 60 minutes (1 hour) on most days. Secondary. May 2024.
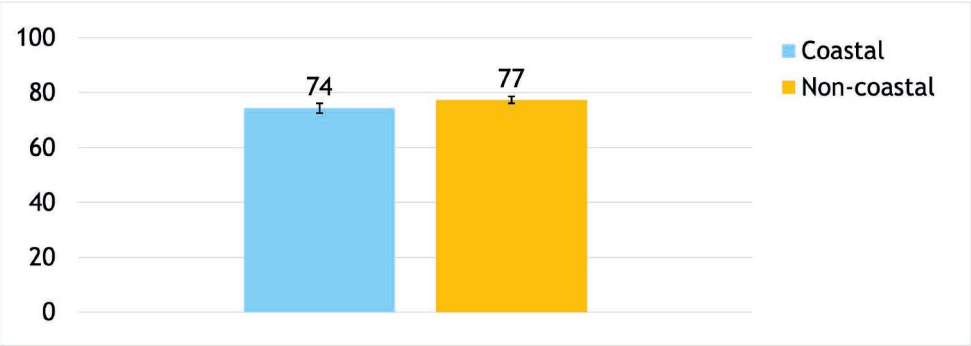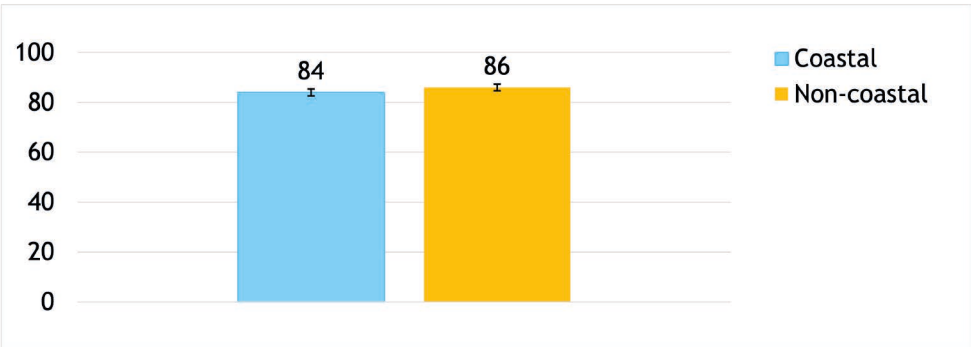

Figure 18 Percentage of children usually physically active for at least 60 minutes (1 hour) on most days. Primary (Year 5 and 6). May 2024.

9.2.3 Loneliness

Loneliness affects everyone at times, whether in a city, rural area, on social media or alone. Recognising why we feel lonely can help manage these feelings[74].

Loneliness can significantly affect children's health and wellbeing. Emotionally, it can lead to feelings of sadness, anxiety, and low self-esteem, impacting mental health. Socially, lonely children may struggle to develop essential social skills, limiting their ability to form friendships and connections. This isolation can lead to further detachment and exacerbate the loneliness. Physically, chronic loneliness can weaken the immune system, making children more susceptible to illnesses[75]. It can also lead to poor sleep patterns, fatigue, and a lack of energy. Over time, these factors can hinder academic performance, personal growth, and overall happiness[76].

Figures 19 and 20 show that between 12 and 15 percent of children in our coastal schools are no more likely to report feeling lonely every day or most days compared to 11 and 15 percent in their non-coastal peers. This trend is observed in both primary and secondary age children, noting the confidence intervals overlap.

Figure 19. Percentage of children that feel lonely everyday or most days. Primary (Year 5 and 6). May 2024.
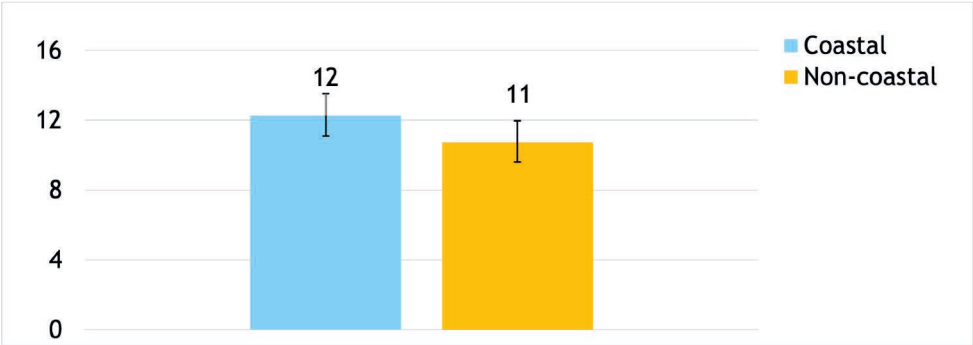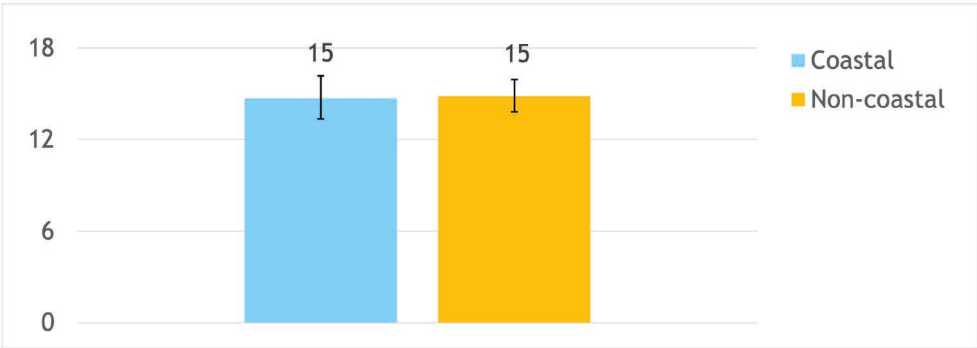

Figure 20. Percentage of students that feel lonely everyday/most days. Secondary. May 2024

9.2.4 Free School Meal Free Eligibility

Children in Year 3 and above may get free school meals (FSM) if their parents or carers receive specific welfare benefits[77].

Free school meals are intended as additional support to low-income families during the school term.

These meals ensure access to nutritious food, promoting balanced diets important for physical growth and development. They provide essential vitamins and minerals, supporting immune function and reducing the risk of malnutrition-related health issues. Better nutrition enhances concentration, cognitive ability, and academic performance[78].

For low-income families, FSM alleviate financial stress, allowing for improved household food security. This support reduces hunger, contributing to emotional wellbeing, increased self-esteem, and social inclusion.

As previously outlined in this report, our coastal communities are where our more disadvantage populations are, therefore, we would

expect to see more pupils eligible for FSM in our coastal communities compared to our non-coastal primary and secondary schools. Figures 21 and 22 show that our coastal primary and secondary schools have a higher percentage of children eligible for FSM in both primary and secondary schools.

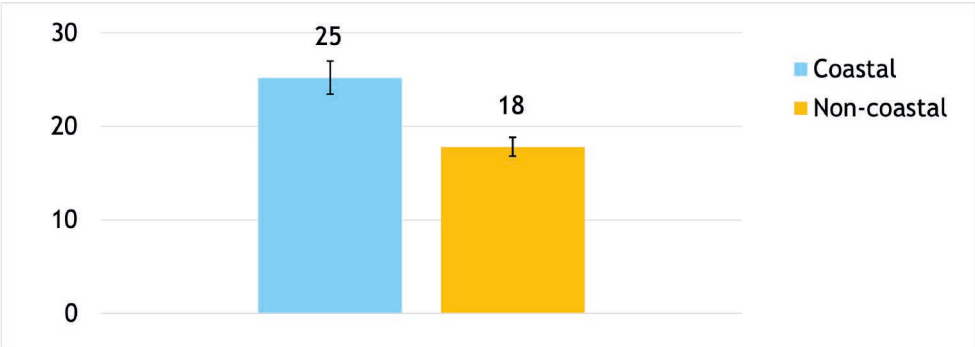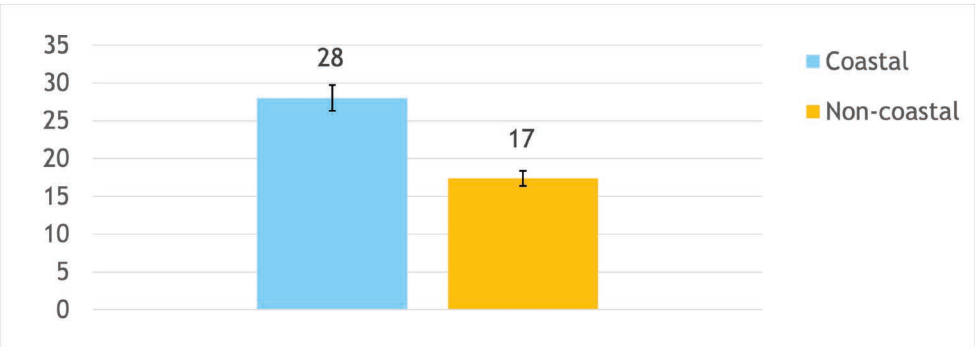Figure 21 Percentage of students eligible for a FSM. Secondary. May 2024.

Figure 22 Percentage of students eligible for a FSM. Primary (Year 5 and 6). May 2024.

9.2.5 Secondary aged school children

Vaping poses significant health risks to children and is not advised[79], affecting their physical and mental wellbeing. E-cigarettes often contain nicotine, a highly addictive substance that can hinder brain development in adolescents, impacting memory, attention, and learning capabilities. Nicotine exposure at a young age increases the risk of addiction, potentially leading to long-term dependence.

Vaping can also cause respiratory issues, such as lung irritation and inflammation, and may contribute to the development of chronic respiratory conditions. The aerosol from e-cigarettes contains harmful chemicals, including heavy metals and volatile organic compounds, which can be detrimental to children's developing lungs. The appealing flavours of e-liquids may entice young individuals to try vaping, promoting use among non-smokers.

Figure 23 shows that our non-coastal secondary aged students have a higher percentage of students that are a regular vape users (10%) compared to coastal secondary aged students (8%).

Although from a different data source, national data on young people and vaping prevalence (including occasional and regular vaping) has shown an increase to 8.6% in 2022 (compared with 4% in 2021 and 4.8% in 2020)[80].

Government have started a ten year study to shed light on youth vaping[81]. The research will investigate the long-term health effects of vaping on children, supporting major plans to tackle youth vaping and create a smoke-free generation. The £62 million research project into adolescent health, funded by UK Research and Innovation, will track 100,000 young people aged 8 to 18 years over a decade, collecting data on behaviour, biology and health records to

understand what affects young people's health and wellbeing, including the impact of vaping.

While vaping is less harmful than smoking and can be a useful tool to help adult smokers quit.

Figure 23 Percentage of students that are a regular vape user. Secondary. May 2024.
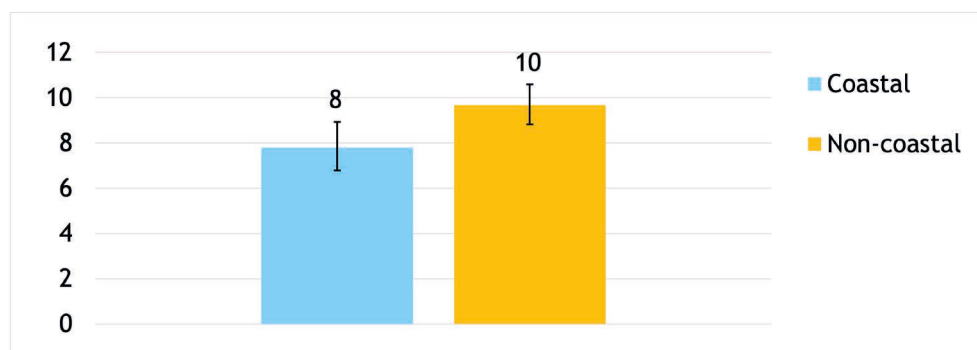
9.2.6 Alcohol Consumption

Drinking alcohol at a young age can harm brain development, impair cognitive functions, and increase the likelihood of developing substance use disorders later in life. Additionally, it can lead to poor academic performance, risky behaviours, and long-term health issues such as liver damage and cardiovascular problems[81].

Due to the small amount of older secondary school aged students completing the survey, combined with the small amount of Hastings secondary schools participating in the survey and therefore not included within the data, data on alcohol consumption by coastal and non-coastal school is not presented. The full report on the My Health My School data provides information on alcohol consumption by this age group on a county level. This report can be found on the JSNA website.

9.2.7 Substance use

Trying drugs as a child can have significant implications for future health. Early drug use is associated with various brain structure differences that may predispose individuals to substance use and addiction later in life. The teenage brain is still developing, making it more susceptible to the harmful effects of drugs, which can impair cognitive functions such as memory, learning, and decision-making[82].Additionally, early drug use is linked to mental health issues like anxiety and depression and increase the risk of developing chronic health conditions[83].

Overall, early drug experimentation can have long-lasting negative impacts on both physical and mental health. Being a drug user in secondary school can have severe health impacts. Drug use during adolescence can impair brain development, affecting memory, learning, and decision-making abilities. It can also lead to mental health issues such as anxiety, depression, and increased risk of addiction. Physically, drug use can cause delayed puberty, reduced growth potential, and damage to vital organs like the liver[84]. Additionally, it can result in poor academic performance, increased absenteeism, and higher dropout rates. The long-term consequences include potential criminal records, unplanned pregnancies, and strained relationships with family members.

Due to the small amount of older secondary school aged students completing the survey, combined with the small amount of Hastings secondary schools participating in the survey and therefore not included within the data, data on substance mis-use by coastal and non-coastal school is not presented. The full report on the My Health My School data provides information on substance use by this age group on a county level. This report can be found on the JSNA website.

9.2.8 Self Harm

Child self-harm is a complex and alarming indication of underlying issues related to a child's health and wellbeing. It often serves as a coping mechanism for emotional distress, indicating that the child is experiencing significant psychological turmoil[85]. Self-harm can be a manifestation of underlying mental health conditions such as depression, anxiety, or borderline personality disorder. It reflects an urgent need for emotional support and mental health intervention.

Children who self-harm often experience feelings of isolation, low self-esteem, and worthlessness. They may struggle with interpersonal relationships and have difficulties expressing emotions in a constructive manner. Self-injury might provide temporary relief from emotional pain, or serve as a way to exert control in situations where they feel powerless.

It is important to understand that self-harm is not typically an attention-seeking behaviour, but rather a cry for help and an expression of distress. The presence of self-harm points to potential stressors in a child's environment, such as bullying, academic pressures, family conflict, or trauma. It highlights the need for an in-depth assessment of the child's life circumstances and social support systems. By identifying and addressing these stressors, caregivers and professionals can begin to address the root causes of the behaviour.

Self-harm also indicates the necessity for comprehensive support systems within schools, communities, and families. Schools can play a vital role by implementing mental health education programmes, creating safe spaces for discussions, and providing access to counsellors. Families should be encouraged to foster open communication, showing empathy and understanding to their child.

Figure 24 highlights that for both 10-24 years and all ages, coastal areas have significantly higher admission rates compared to non-coastal areas. Intervention is vital to prevent worsening self-harm behaviours and severe mental health issues. Professional support can help children develop healthier coping strategies and resilience.

It's important to know that support is available for anyone who self-harms or thinks about self-harm, as well as their friends and family.

It's best to speak to a GP about self harm, but you may also find it helpful to speak to a free listening service or support organisation. More information and support can be found at the at the following webpage Self harm | East Sussex.

Figure 24 Self-harm admissions (10-24 years) by coastal classification, 2021/22 to 2023/24, directly age-standardised rate per 100,000 population.
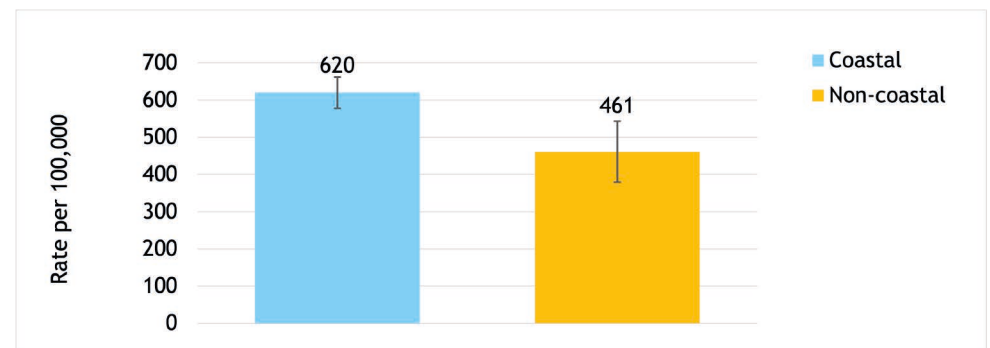
10. Adults

10.1 Quality Outcomes Framework Data

GP practices have been classed as 'coastal' if at least 75% of their patients live in LSOAs that are deemed 'coastal' using ONS best fit BUAs to LSOAs (October 2024 list size data). For coastal practices the lowest % of their patients in a coastal LSOA is 76%. The next practice after this would be 43% it seemed a very clear cut-off to use 75%, natural break in the data.
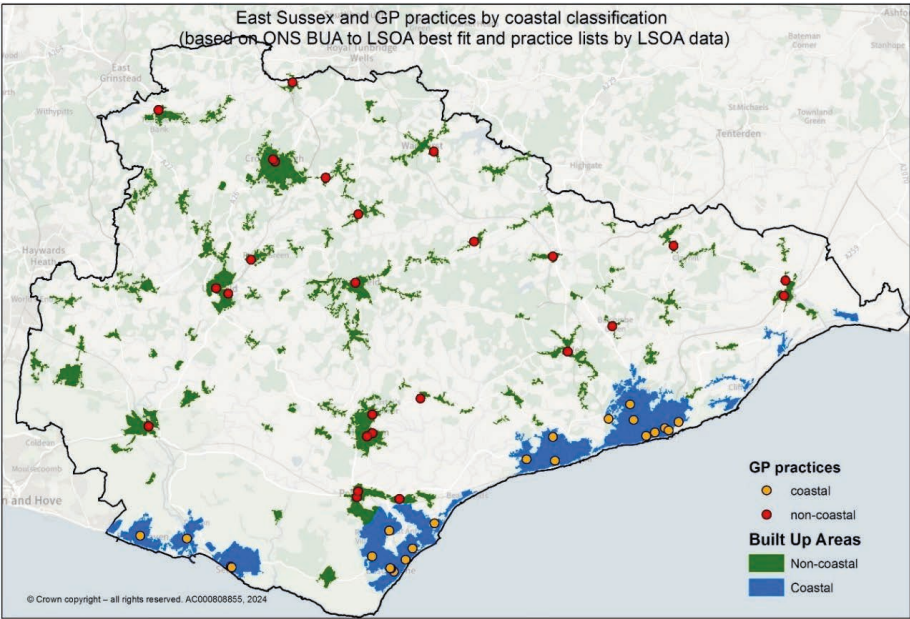
10.1.1 Smoking

Adult smoking remains a significant public health issue, particularly in East Sussex. The prevalence of smoking among adults in East Sussex is higher than the national average. The Annual Population Survey 2023 showed that adult smoking prevalence in 2023 was 11.6%. With notable disparities across different demographic groups[86]. Smoking is a leading cause of preventable diseases, including cardiovascular diseases, respiratory conditions and various cancers[87].

Efforts to reduce smoking rates include targeted interventions and support programmes, such as smoking cessation services provided by community pharmacies and wider public health initiatives. These programmes aim to help individuals quit smoking by offering support, nicotine replacement therapies, and other resources. Addressing smoking prevalence requires ongoing public health campaigns, education, and support to encourage smokers to quit and prevent initiation among non-smokers.

GP practice quality outcomes framework (QOF) data, has been used to compare Smoking Prevalence 15 years + in East Sussex coastal and non-coastal practices. From Figure 24, its within coastal GP practices that the higher smoking prevalence is observed.

Figure 25 Smoking Prevalance 15 years +, East Sussex coastal and non-coastal pactices. QOF 2023-24.

Stop smoking services in East Sussex are designed to help residents quit smoking through various support mechanisms. The main pathway for smoking cessation is through the Integrated Health and Wellbeing Service, known as [One You East Sussex](). This service offers free access to trained advisors who provide personalised support for up to 12 weeks. Additionally, Community Pharmacy provides an alternative pathway, with 22 pharmacies offering 12 weeks of support and free Nicotine Replacement Therapy (NRT) to residents. The Maternity Pathway is also available, delivered by the Tobacco Dependence Treatment Services Midwife and Healthy Pregnancy Workers.

10.1.2 Screening for cervical cancer

Screening for cervical cancer is important in promoting women's health and preventing life-threatening conditions. Cervical cancer, primarily caused by persistent infection with the human papillomavirus (HPV)[88], is preventable and treatable if detected early. Screening programmes are vital for identifying precancerous changes in the cervix, enabling timely intervention and reducing the incidence and mortality of cervical cancer.

Cervical screening is free for women and people with a cervix from age 25 to 64. This includes women and some trans men and non-binary people assigned female at birth. People need to be registered with a GP to get screening invitations every three to five years in England. People may get a first invitation for screening in the 6 months before they turn 25. People are invited every three years aged 25 to 49. After that, it every five years until age 64[89].

The primary method of screening involves collecting cells from the cervix to detect abnormal changes. With advancements in medical technology, HPV testing has enhanced screening efficiency by identifying high-risk HPV types that are most likely to lead to cervical cancer. Combining these tests enables the identification of people at increased risk, ensuring they receive appropriate monitoring or treatment. Early detection through screening is imperative because cervical cancer often lacks noticeable symptoms in its precancerous stages. By identifying abnormalities before they develop into invasive cancer, screening offers the best chance of successful treatment and cure. It empowers individuals to take proactive steps in managing their health, as early-stage cervical cancer has a high survival rate.

Cervical cancer screening also significantly reduces healthcare costs by preventing the need for more extensive and expensive treatments associated with advanced cancer[90]. It contributes to public health by decreasing the overall cancer burden and improving the quality of life for countless women.

In 2023–2024, 68.8% of women and people with a cervix aged 25–64 in England were screened for cervical cancer within the recommended time frame, [according to NHS England](). Promoting awareness around the significance of screening and improving access to these vital services, especially in underserved communities, can lead to substantial public health benefits. Routine cervical cancer screening is a key public health strategy, offering women the opportunity to protect their wellbeing and save lives through early detection and prevention. Figure 26 highlight the achievement of cervical screening by coastal and non-coastal GP Practices. Data for both people aged 25–49 and people aged 50–64 has been combined to form a single achievement figure. The non-coastal GP practices have lower levels of cervical screening uptake compared to their coastal peers.

Figure 26 Achievement of cervical screening, coastal and non-coastal GP Practices. East Sussex 2023-24. QOF 2023-24.
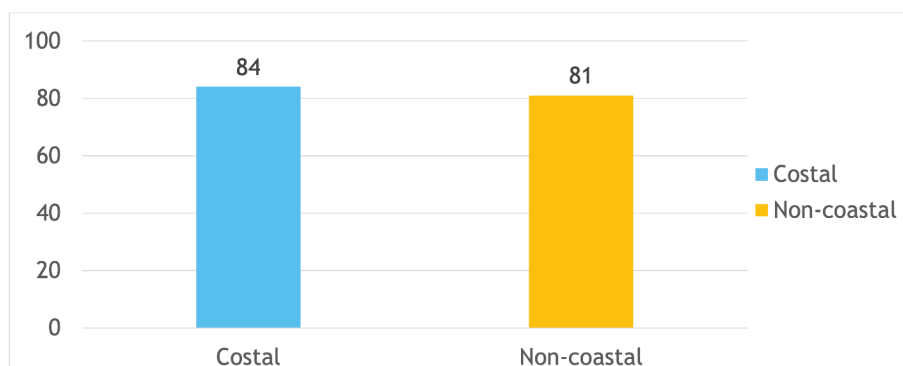
10.1.3 Major Conditions

Major non-communicable diseases are chronic conditions that are not passed from person to person. They are primarily caused by a combination of genetic, physiological, environmental, and behavioural factors. The four main types of are cardiovascular diseases, cancers, chronic respiratory diseases, and diabetes. Cardiovascular diseases, such as heart attacks and strokes, are the leading cause of non-communicable diseases deaths globally. They are often linked to risk factors like high blood pressure, high cholesterol, and smoking[91].

Cancers, which can affect various parts of the body, are the second leading cause of non-communicable diseases deaths. Risk factors include tobacco use, unhealthy diets, and exposure to carcinogens.

Chronic respiratory diseases, including chronic obstructive pulmonary disease (COPD) and asthma, are also significant contributors to mortality. These conditions are often exacerbated by air pollution, and tobacco smoke. Diabetes, particularly type 2 diabetes, is another major condition that is closely associated with obesity and physical inactivity and poor diet[92].

Preventing and managing major conditions requires a multifaceted approach, including promoting healthy lifestyles, early detection through screening, and effective treatment. Public health initiatives play a crucial role in raising awareness and implementing strategies to reduce the burden of these diseases.

Non-communicable diseases are more prevalent in English coastal communities due to several factors. These areas often have higher levels of deprivation, with many residents living in poverty and facing unemployment. Higher rates of smoking, obesity, and physical inactivity are also more common in these areas. These populations in coastal communities tends to be older, with a significant number of retired citizens who have multiple health conditions.

By addressing the risk factors and improving healthcare access, we can significantly reduce the impact of major conditions on individuals and communities

NHS Health Checks in East Sussex[93] are a vital preventive health measure aimed at adults aged 40-74. These checks assess the risk of developing conditions such as heart disease, stroke, diabetes, and kidney disease. The programme is designed to identify early signs of these conditions and provide personalised advice to help individuals reduce their risk.

In East Sussex NHS Health Checks are available through eligible residents GP practice and the integrated health and wellbeing service One You East Sussex.

Figure 27 Crude prevalence of major conditions. East Sussex coastal and non-coastal practices. QOF 2024.
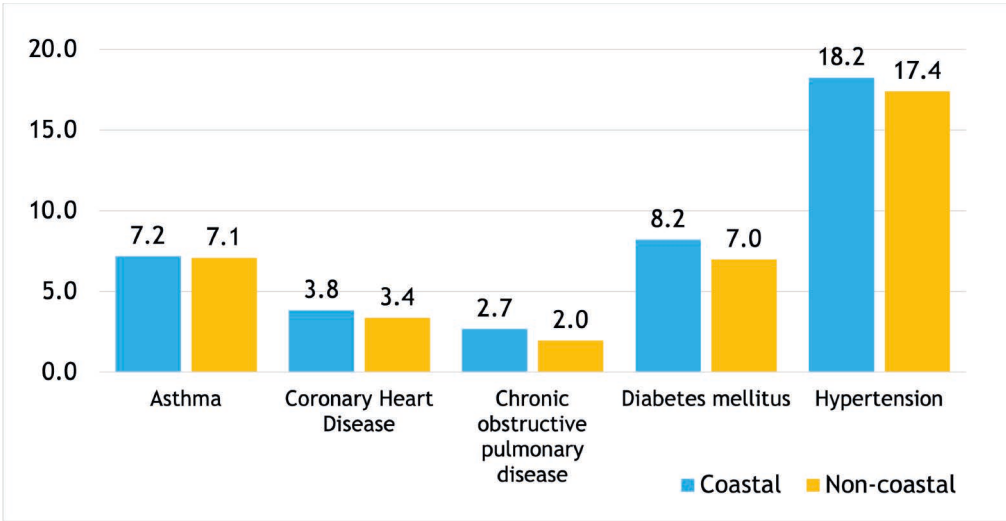
10.1.4 Mental health and self-harm

The causes of depression and self-harm is a complex indication of underlying issues related to a person's mental health and wellbeing.

There's no single cause of depression. It can occur for a variety of reasons, and it has many different triggers[94].

Self-harm may serve as a coping mechanism for emotional distress, indicating significant psychological turmoil. Self-harm can be a manifestation of underlying mental health conditions such as depression, anxiety, or borderline personality disorder. It reflects an urgent need for emotional support and mental health intervention.

Individuals who self-harm often experience feelings of isolation, low self-esteem, and worthlessness. They may struggle with interpersonal relationships and have difficulties expressing emotions in a constructive manner. Self-injury might provide temporary relief from emotional pain or serve as a way to exert control in situations where they feel powerless. It is crucial to understand that self-harm is not typically an attention-seeking behaviour, but rather a cry for help and an expression of inner suffering.

The presence of self-harm points to potential stressors in a person's environment, such as bullying, academic pressures, family conflict, or trauma. It highlights the need for an in-depth assessment of the individual's life circumstances and social support systems. By identifying and addressing these stressors, caregivers and professionals can begin to address the root causes of the behaviour.

For both incidents of depression and rates of self-harm, we observed more depression diagnosis and self-harm related hospital admissions of those from coastal populations compared to non-coastal populations.

Figure 28 Incidents of depression coastal and non-coastal East Sussex Practices. QOF 2024.
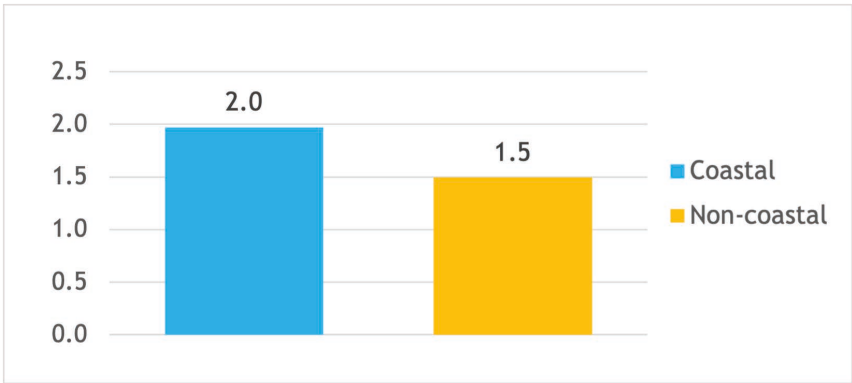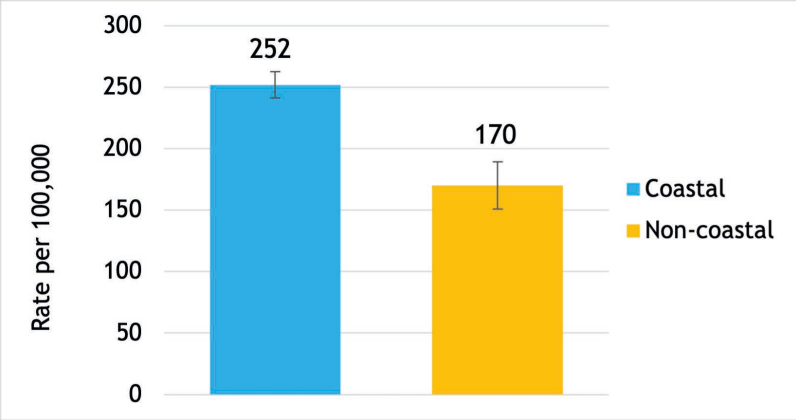
Figure 29 Self-harm admissions (all ages) by coastal classification, 2021/22 to 2023/24, directly age-standardised rate per 100,000 population.

11. Older people

## 11.1 Falls

Falls are a significant concern for older people, as they can lead to serious injuries and long-term health issues[95].

The risk of falling increases with age due to factors such as decreased muscle strength, balance issues, and chronic health conditions. Falls can result in fractures, particularly hip fractures, which often require extended hospital stays and can lead to long-term disability.

Several factors contribute to the high incidence of falls among older adults. These include poor vision, hearing loss, and slower reflexes, which can affect balance and coordination. Medications that cause dizziness or confusion can also increase the risk of falling.

Additionally, environmental hazards such as slippery floors, loose rugs, and inadequate lighting can pose significant risks.

Preventing falls is essential for maintaining the health and independence of older adults. Regular exercise to improve strength and balance, managing medications, and making homes safer by removing tripping hazards and installing grab bars can help reduce the risk of falls. It is also important for older adults to have regular vision and hearing checks to address any issues that may affect their balance.

More information on preventing falls can be found at Reduce your risk of falls. By taking these preventive measures, older adults can reduce their risk of falling and maintain a higher quality of life.

Figure 30 Falls injury admissions (65+ years) by coastal classification, 2021/22 to 2023/24, directly age-standardised rate per 100,000 population.
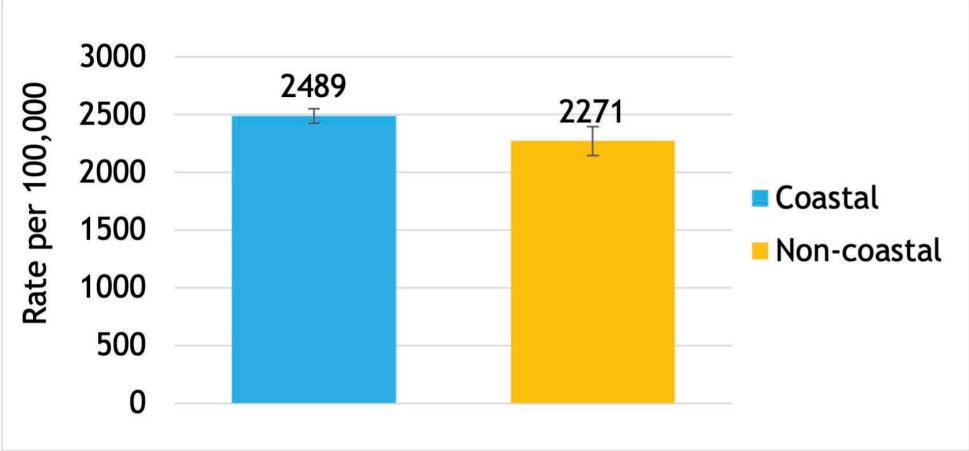
11.2 Respiratory diseases, including COVID-19

Respiratory diseases, including COVID-19, pose significant threats to older people due to several factors[96]. As people age, their immune systems weaken, making it harder for their bodies to fight off infections. This increased vulnerability means that older adults are more likely to experience severe symptoms and complications from respiratory illnesses.

COVID-19 has highlighted the risks faced by older populations. Studies have shown that individuals over the age of 65 are at a much higher risk of severe illness, hospitalisation, and death from COVID-19 compared to younger age groups. The presence of underlying health conditions, such as heart disease, diabetes, and chronic respiratory diseases, further exacerbates these risks.

Preventative measures are crucial in protecting older adults from respiratory diseases. Vaccinations, including the flu vaccine and the COVID-19 vaccine, play a vital role in reducing the risk of severe illness.

The Annual Public Health Report 2020/21 - 2020: A Year of COVID-19 outlined the impact of COVID-19 in the county. Figure 31 shows the deaths involving COVID-19 by coastal classification, age-standardised rate per 100,000, 2020 and 2021. The death rate was higher in our coastal populations than our non-coastal populations.

It's important for those aged 65 and older, and other eligible groups to receive their winter flu and COVID-19 vaccinations. Getting vaccinated every year tops up protection and reduces the risk of getting severe symptoms[97].

Figure 31 Deaths involving COVID-19 by coastal classification, age-standardised rate per 100,000, 2020 and 2021.
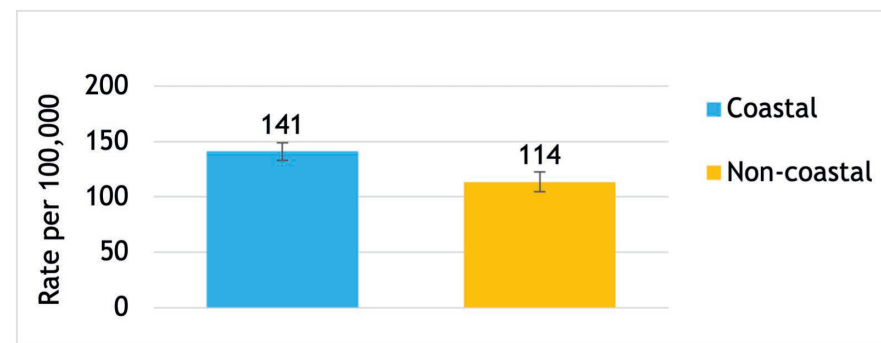
11.3 Premature mortality

Premature mortality in East Sussex is a significant public health concern, with various factors contributing to early deaths. The leading causes of premature mortality include cardiovascular diseases, cancers, respiratory diseases.

Premature mortality is highest in Hastings and lowest in Wealden. Premature mortality is highest in the most deprived quintile.

Educational attainment, disability, and chronic illness significantly impact life expectancy. Higher levels of education are associated with greater social mobility, fewer co-morbidities, and longer life expectancy. Disability and chronic physical and mental illnesses are strongly linked to shorter life expectancy.

Efforts to reduce premature mortality focus on addressing these risk factors through public health initiatives, improving healthcare access, and promoting healthy lifestyles. By tackling the root causes

of early deaths, it is possible to improve overall life expectancy and quality of life for individuals across England.

Figure 32 Deaths in under 75s by coastal classification, age-standardised rate per 100,000, 2021 to 2023.
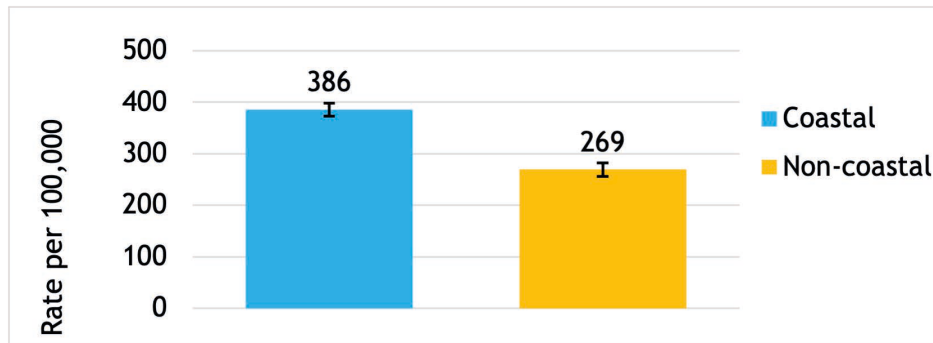
12. Gambling

Coastal towns conjure images of holidays, days out, fish and chips, the beach, the seaside, the pier and arcades full of noisy machines waiting to devour bags of coins clasped in little hands. Gambling may be seen as a pleasant leisure activity for individuals and families, a source of jobs and economic growth or a growing industry capable of causing significant harm to individuals and those around them that possess sophisticated techniques to lure customers.

A recent House of Lords Grand Committee discussion discussed some of the alarming statistics about gambling harm:[98]

- Over 1.5 million adults in the UK struggle with the public health effects of gambling addiction and more than 60,000 teenagers and a third of a million adults are formally diagnosed with some sort of gambling addiction. It is estimated that as many as 500 people across the UK take their own lives each year due to gambling harm.

- The economic cost of gambling harm could be as high as £5 billion covering increased healthcare expenditure, higher welfare support, criminal justice costs and homelessness services for those affected. The cost to families and individuals caught in gambling harm is incalculable.

- Individuals experiencing problem gambling are nine times more likely to require hospital treatment and four times more likely to need homelessness support.

The Gambling Commission was appointed as the industry regulator in 2005 and legislation was designed to be future proofed [99]. It's fair to say that the rise in ownership and use of smart phones was

unanticipated and has opened a door to ever sophisticated and prolific marketing opportunities. The gambling industry generates over £15 billion in profits annually and for many year has been responsible for funding gambling safety and awareness. More recently, new legislation has been planned to introduce a levy on gambling operators which is expected to raise £100 million each year[100]. The funding will be split so that 50% is directed to the NHS to develop and offer of support and treatment, 30% will be used to fund prevention initiatives and 20% will be directed to further research[101].

Coastal communities face economic challenges, and so gambling establishments may appear as attractive sources of employment and revenue for both individuals and local councils. However, the offer of leisure activities such as amusement arcades may lead to increased gambling related problems in the local population.

The heatmap highlights the concentration of licensed Family Entertainment Centres (FEC), often called arcades, within coastal communities. Potentially leading to more harm for disadvantaged coastal residents.

In East Sussex we have started work with partners to raise awareness and assess the risk to local residents of both land based and online gambling availability. We will link with and learn from work already carried out by other authorities to develop a local action plan to address the availability, accessibility, advertising, awareness and environment of gambling products.

13. Water quality

People swimming in the English Channel is now a common site across East Sussex sea bathing and swimming spots. Sea swimming and sea dipping have become increasingly popular.

The Outdoor Swimming Society (OSS) has seen its membership expand in recent years and has conducted a new survey of its community. The results reveal outdoor swimming is a way of life and a liberation for many, it is community-binding, life-affirming and deeply satisfying. More than a thousand people responded to the survey with 94% confirming they felt happier after a swim. Respondents enjoyed swimming for physical fitness benefits (68%) and also the social (58%) and spiritual (55%) benefits[102].

There are many physical and mental health benefits from sea swimming and dipping. The Royal National Lifeboat Institution outlines[103] many of the reasons people love a cold water dip:

- It can improve your fitness levels and your metabolism.
- It may help with aches and pains.
- It can improve your circulation.
- It may help to boost your immune system.
- It helps some people manage their mental health.
- It can reduce your stress levels.
- It can help people find a community by meeting friendly fellow swimmers.
- It gives you a natural high, leaving you feeling euphoric and exhilarated.
- It's a great chance to get out and about in nature.

Water quality at designated bathing water sites in England is assessed by the Environment Agency. From May to September, weekly assessments measure current water quality, and at several sites daily pollution risk forecasts are issued. Annual ratings classify each site as excellent, good, sufficient or poor based on measurements taken over a period of up to four years[104].

Bathing water quality water annual classifications for 2024

Bexhill ★☆☆ sufficient

Birling Gap ★★★ excellent

Camber ★★☆ good

Eastbourne ★★☆ good

Hastings Pelham Beach ★★★ excellent

Norman`s Bay ★★★ excellent

Pevensey Bay ★★☆ good

Saltdean ★★★ excellent

Seaford ★★★ excellent

St Leonards ★★★ excellent

Winchelsea Pevensey Bay ★★☆ good

Bathing water quality | environmental data .gov.uk

However, despite these tests and ratings, the quality of our coastal (and river) waters has gained considerable attention in recent years.

Data published by Surfers Against Sewage state there were 604,833 discharges of raw sewage into UK waterways in 2023[105].

Sickness facts and figures - Surfers Against Sewage • Data HQ

We want our residents and visitors to the county to enjoy the physical and mental health benefits of sea swimming. Therefore we encourage people to take note of the Swim healthy Guidance.

Firstly its important to think where and when to swim

Up to date bathing water quality information is available online during the bathing season between May and September. Other considerations to help you choose where to go include:

- Checking the water quality information for over 400 designated bathing waters in England
- Avoiding bathing on higher risk days, by checking the pollution risk forecast, or look for signs at the beach

Before you swim

There are a number of steps that people can take to protect themselves:

- Choosing the location carefully and avoid swimming in water with blue-green algal blooms or scums in freshwaters
- Covering cuts, scratches or sores with a waterproof plaster before swimming
- Wearing appropriate protective clothing such as a wetsuit, gloves or protective footwear

Figure 33 Numbers of 'self reported sickness' after bathing at location.
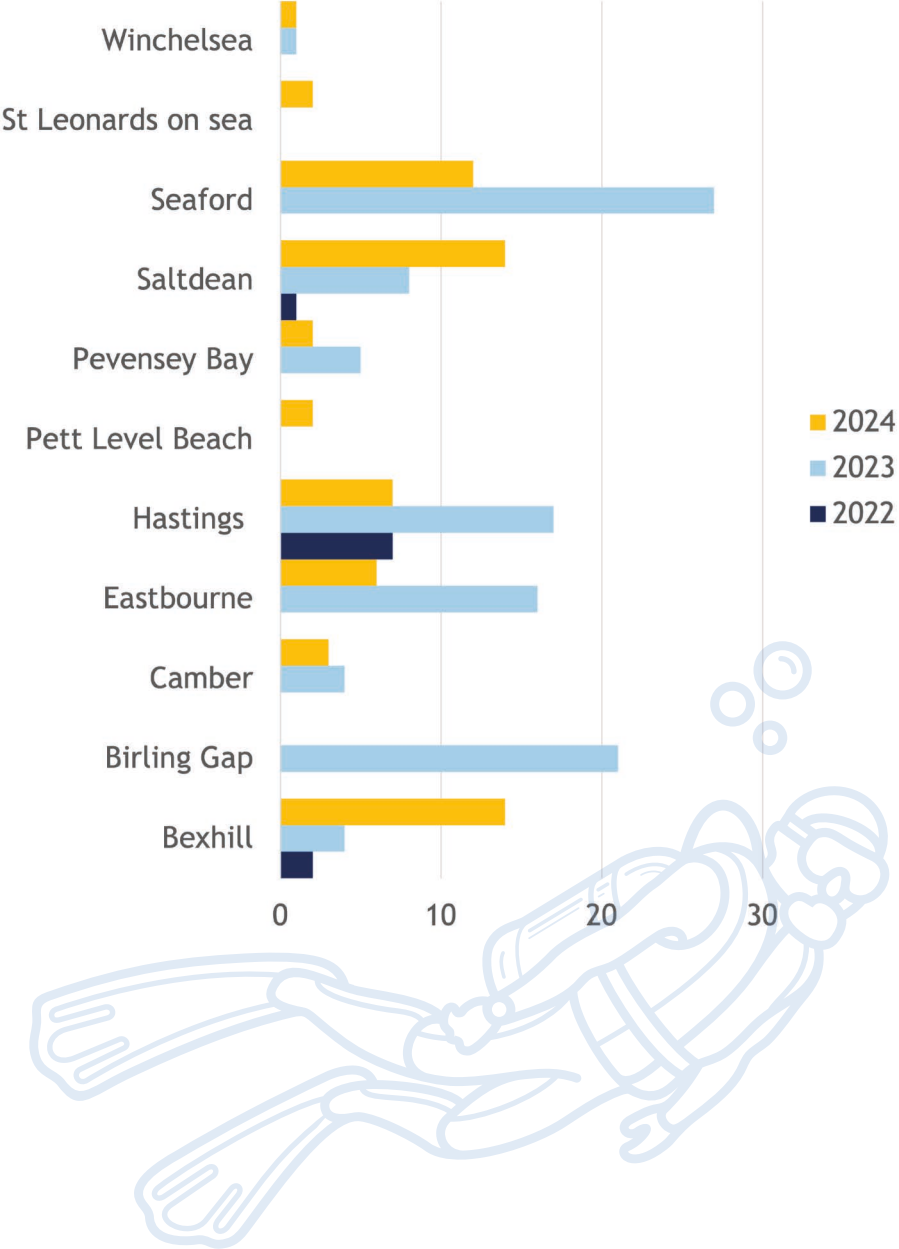
While you are swimming

Remember to:

- Observe local safety advice
- Avoid stream water running across the beach
- Try to avoid swallowing or splashing water into your mouth

After swimming

Following a swim, you can minimise the risk of becoming ill by:

- Cleaning your hands thoroughly with soap and water ensuring that all wet sand is removed from hands before eating or handling food
- Thoroughly cleaning cuts or abrasions using soap and water
- Handle your wetsuit with care after use. Rinse it with clean water as soon as is practicable after swimming. Clean with detergent and rinse as advised by the manufacturer. Always wash your hands with soap and water after handling or cleaning your wetsuit. Allow the suit to dry thoroughly before reusing.

14. Cliffs and coastal safety

East Sussex is blessed with a iconic coastline including chalk cliffs, world-renowned sites such as the Seven Sisters and both shingle and sandy beaches. Millions of people enjoy these places every year for walking, running and relaxing with friends, family and their pets. Events such as the Beachy Head Marathon, Ultra marathon, Half and 10k events, make this running event one of the most gruelling in the country with its off-road course twisting and turning through the South Downs National Park, including the infamous starting hill and the scenic Seven Sisters.

However, coastal cliffs and beaches in East Sussex, particularly at Beachy Head, are a significant health and safety concern. The highest point of the cliff face is 160 meters (530 feet) high.

In 2024, there were 36 deaths at the coastal cliffs in East Sussex. Not all of these occurred at Beachy Head; however, it is likely that Beachy Head is now the highest frequency location for deaths at coastal locations in the UK and possibly the world.

There are multi agency efforts to prevent deaths at Beachy Head. They include general safety measures, the implementation of harm reduction programmes and the work of the Beachy Head Chaplaincy Team: Saving lives at Beachy Head, a search and rescue charity that seeks to save lives at Beachy Head. They patrol on foot and by car and respond to emergency calls locating anyone at risk. They use skills in crisis intervention, offer supportive listening, aim to start a dialogue and to encourage more hopeful solutions to those in crisis. These programmes aim to provide support and intervention to individuals in distress. Additionally, there are ongoing efforts to improve communication and collaboration between local authorities, the police, and other agencies to address this issue.

Drownings are also a concern. People often fail to appreciate the dangers associated with unsuitable clothing that may weigh them down or jumping from a height causing injury and impeding their ability to swim to safety. The combination of high cliffs and the proximity to the sea makes Beachy Head particularly dangerous.

Camber Sands is known for its sandy beach, dunes and its flat and calm nature. However, drownings at Camber Sands have been a tragic issue, with several incidents reported over the years. In 2016, five young men drowned in a single day, highlighting the dangers of the area.

There is some important safety information to note when enjoying the sea:

- Beware of fast incoming tides – check the tide times
- Beware of sandbars – the tide can cut you off from the shore
- Always wear clothing designed for swimming – when wet, normal clothes can cause you to sink!
- Beware of soft sand and mud exposed at low tide

Naturally, there is a rise in tourism during the summer months. Some are visiting from within East Sussex or neighbouring counties and others are from much further away.

Tourists, sightseers and visitors may be unfamiliar with dangers associated with our coastline, especially cliff safety. A lack of awareness may result in a minor incident but the risks can be life threatening.

The iconic images of the south downs and Beachy Head bring in tourists eager to capture the perfect picture and experience the beauty first-hand. However, often people go far too close to the edge, unknowingly putting themselves and others in grave danger.

Cliff edges are unstable and crumble without any warning, so enjoy the scene from a safe distance. Your life is worth more than a photo, it might be the last one you take!

While many people think only the cliff edge poses a risk, cliff bases can also be very dangerous. Cliff edges can crumble and break apart suddenly, making the base of a cliff a dangerous place to be if this happens. The best way to keep yourself safe is to stay away from the base to avoid any crumbling cliffs or falling rocks. If you are having a picnic or sunbathing, ensure you set up station away from the base.

It is easy to get cut off by the sea at high tide. Unless you have grown up by the coast, you may not realise that the sea rises and falls twice a day. When the sea (or tide) comes in, the sea level rises and there will often be little beach left. This is especially dangerous when walking on the beaches below the cliffs. Every year, the coastguard has to rescue people that have got cut off by the sea and stranded.

Before you visit the beach, always check the tide times and plan your trip around them. It's also advised that you carry a mobile phone with you in case you need to call for help. When unsure, do your research and always opt on the side of being safe. A nice walk is never worth the risk!

What do I do in an emergency? If you find yourself in an emergency, call 999 and ask for the coastguard. If you witness an emergency incident, do not attempt a rescue or put yourself at risk. Instead, call 999 and ask for the coastguard and wait somewhere safe for help to arrive.

15. Climate and Coast

Climate change poses significant threats to coastal communities in East Sussex, impacting various aspects of life, including health, infrastructure, and the economy[106]. These communities are particularly vulnerable due to their proximity to the sea.

One of the most immediate impacts of climate change on coastal communities is sea-level rise. As global temperatures increase, polar ice melts, and thermal expansion occurs, leading to higher sea levels. This rise in sea levels can result in more frequent and severe flooding[107], which can damage homes, businesses, and critical infrastructure. Coastal erosion, a natural process,[108] is another consequence, where the shoreline gradually wears away, threatening properties and natural habitats.

Coastal erosion is an ongoing challenge along the coast of East Sussex. The County has a significant stretch of the south coast, from past Camber in the east border with Kent, to Telscombe Cliffs in the west, on the border with Brighton and Hove City Council. The risk of coastal erosion in East Sussex varies, as it lies across several Shoreline Management Plans with varying management approaches.

All coastal towns, such as Eastbourne, Bexhill-On-Sea, Hastings, Fairlight, Rye and Camber are being protected with the 'Hold the

Line' approach, along with the Pevensey Levels. However, there are three stretches which have 'No Active Intervention' and are at greatest risk of coastal erosion: Birling Gap to Cuckmere; Hastings Country Park Nature Reserve; and from the outskirts of Fairlight to the outskirts of Pett Level. In the future, even the 'Hold the Line' locations could experience challenges, as sea level rises, and East Sussex will experience more frequent and severe floods and storm surges[109].

In addition to physical damage, climate change can have profound social and economic effects on coastal communities. Flooding and erosion can lead to the displacement of residents, loss of livelihoods, and increased insurance costs.

Coastal areas often rely on tourism, fishing, and trade, all of which can be disrupted by climate-related events. For instance, the degradation of coastal ecosystems, such as wetlands and marsh lands, can reduce the natural protection these areas provide against storms and flooding.

The health impacts of climate change are also a major concern. Rising temperatures and changing precipitation patterns can lead to the spread of diseases and exacerbate existing health conditions[110].

For example, increased humidity and heat can worsen respiratory and cardiovascular diseases. Additionally, flooding can contaminate drinking water supplies, leading to waterborne diseases.

The mental health of residents can also be affected, as the stress and anxiety of dealing with climate-related disasters like flooding, often repeatedly take a toll on individuals and communities[111].

The UK government is taking steps to address these challenges through climate adaptation strategies. These include building new flood defences, planning for more green spaces in urban areas, and developing infrastructure that can withstand extreme weather events[112].

For example, the construction of sea walls and barriers can help protect against storm surges and high tides. Additionally, efforts to restore natural habitats, such as salt marshes and dunes, can enhance the resilience of coastal areas.

Public health initiatives are also crucial in mitigating the impacts of climate change on coastal communities. These include monitoring and managing the health effects of climate change, such as heatwaves and flooding, and promoting community resilience through education and preparedness programmes. For instance, local authorities can develop emergency response plans and conduct drills to ensure that communities are ready to respond to climate-related events such as flooding and heat waves.

The economic burden of climate adaptation measures can be significant, requiring substantial investment from both the government and private sector.

Collaboration between various stakeholders, including local authorities, businesses, and residents, is essential to effectively address the impacts of climate change.

The Pevensey Bay to Eastbourne Coastal Management Scheme

There are aims to enhance the resilience of the area between Cooden Beach and Holywell to coastal flooding and erosion over the next 100 years. This initiative is a significant response to the escalating

climate emergency and is one of the largest coastal flood risk projects in the country. It will be delivered by the Environment Agency in partnership with Eastbourne Borough Council, East Sussex County Council, Rother District Council, Wealden District Council, JBA Consulting, and Volker Stevin.

The scheme's primary objectives are to protect up to 18,000 properties (homes and businesses), key infrastructure including transport and utilities, heritage sites, and nature conservation areas from coastal flooding and erosion. Additionally, the project aims to increase biodiversity by 20%, reduce carbon emissions generated in managing the coastline by at least 45% by 2030, and deliver wider community benefits.

Covering 15km of coastline between Holywell, to the west of Eastbourne, through to Cooden Beach, the area features varied landscapes such as chalk cliffs, shingle beaches, long promenades, heritage sites, and a large marina. It is a popular destination for both locals and tourists.

The scheme is necessary due to the predicted rise in sea levels by more than a metre over the next 100 years and the expected increase in the frequency of storms, which heightens the risk of coastal flooding and erosion. Without updating the approach to managing the coastline, the chance of defence failure (breach) and water flowing over the defences will increase. The scheme will model predicted future coastal conditions and deliver a plan to adapt as the threat increases, ensuring continued resilience to coastal flooding.

If the defences fail, a breach could allow the sea to flow inland at high tide, causing extensive damage with lasting impacts on lives and livelihoods. The low elevation of land behind the defences means that a breach at any location along the 15km coastline could flood a much wider area. The flood area is expected to increase over time based on predicted sea level changes.

For more information go to Pevensey Bay to Eastbourne Coastal Management Scheme

16. Regeneration and coastal communities

Regeneration efforts focus on improving economic growth, job opportunities, healthy environments, social cohesion, and access and availability of housing and education. These are factors that together can enhance quality of life and support healthier, longer lives for local residents.

In East Sussex, significant regeneration funding has been secured over time, particularly under national 'levelling up' strategies aimed at boosting local economies and addressing deprivation. This includes (amongst others) funding from the Levelling Up Fund[113], UK Shared Prosperity Fund (UKSPF)[114], Rural England Prosperity Fund (REPF), Towns Fund[115] and the Plan for Neighbourhoods[116]. Lower tier local authorities have accountability of the funds, which are overseen by boards made up of business, communities, public sector representatives and others.

The Levelling Up Fund is supporting Rother and Hastings with £40 million for developing affordable housing, improving connectivity, increasing access to healthcare, with a focus on community hubs and skills development across these two geographies.

The UKSPF, which replaced former EU funding, allocated around £1 million to each District and Borough Council in East Sussex (with Wealden receiving slightly more), to be spent between 2022 and 2025 to support economic development and employment initiatives. Additional allocations have also been announced this year[117].

For the UKSPF, The Ministry of Housing, Communities and Local Government (MHCLG) is currently undertaking an extensive evaluation and has selected Hastings[118] as one of the case studies to be included in the analysis[119].

Hastings[120] and Newhaven[121] received a share of the government's £3.6bn Towns Fund and are currently completing projects focused on delivering jobs, strengthening local economy, improving leisure facilities, homes, skills, town centre regeneration and actions to reduce carbon emissions.

The Plan for Neighbourhoods, investing £1.5 billion in 75 areas over the next decade, gives Local Authorities and the designated boards the opportunities to develop a long-term strategy to revitalise local areas, tackle deprivation at root cause by strengthening social capital and using community led solutions.

The three major coastal towns in East Sussex, Hastings, Bexhill-on-Sea and Eastbourne, have been selected, according to specific metrics (e.g. deprivation indexes, population size, healthy life expectancy, Gross Value Added per hour worked, skill level) and will receive the funding. Community engagement, bottom-up approaches and more flexibility on how the funding can be spent (e.g. roll underspends into later years of the programme) are some of the characteristics of this new plan which is based on three strategic objectives which are thriving places, stronger communities, taking back control.

These are only some examples of recent funding secured within coastal areas in East Sussex. The list is not exhaustive and has the purpose of highlighting that within these geographic areas the financial incentives have been diversified, with mixed lengths and focus. Hastings has consistently been a key focus for multiple funding streams, as an area of high deprivation and need.

It is important to recognise that achieving lasting impact requires more than funding. It depends on deep understanding of local needs, coordinated planning across sectors, genuine community involvement, and strong evaluation practices to ensure meaningful change[122].

Nevertheless, the specific impact of regeneration on health outcomes and inequalities, especially in coastal areas, remains unclear and in some cases, there appears to be little or no noticeable improvement in life expectancy or healthy life expectancy within deprived communities[123]. More targeted, high-quality research, is essential to better understand how this funding influences long term health and wellbeing of coastal communities[124].

17. Conclusions

Right now, the lives of some people living in our coastal communities are being cut short. Some people, particularly those affected by deprivation in our coastal communities are often less healthy than their non-coastal peers.

This report re-enforces what is known about coastal communities in East Sussex. Much of our work, undertaken over many years, to address health inequalities in East Sussex has focused on our more disadvantaged communities based in our large urban coastal communities, notably Hastings.

The report underscores the importance of addressing health inequalities with a focus on addressing the building blocks for heath,

by improving the quality and availability of housing, enhancing aspiration and supporting educational outcomes and improving employment opportunities to support the wellbeing of residents. It also emphasises the need for multi-agency collaboration and sustained efforts to build resilient and thriving coastal communities.

The recommendations provided in the report aim to create a comprehensive approach to addressing the building blocks of health by tackling the social, economic, and environmental determinants of health. By focusing on increasing educational attainment, developing affordable housing, and supporting local economies, we can create a healthier and more prosperous future for our coastal communities. Additionally, the report calls for further research and data collection to inform evidence-based interventions and policies.

As we move forward, it is crucial to recognise the strengths and assets of our coastal communities, including their natural beauty, cultural heritage, and strong sense of community.

By leveraging these assets and addressing the challenges outlined in the report, we can work towards a healthier, happier, fairer and safer East Sussex for people to live work and visit.

Recommendations

The Building Blocks of Health

1. Build and sustain, long term, multi-agency action on the building blocks of health. These include programmes that support:

   1.1 Increased educational attainment and aspiration for those in coastal communities.

   1.2 Increase the availability of better-quality and affordable housing and homes for those in coastal communities

   1.3 Support the development of the local economy to support high quality and secure employment opportunities in coastal communities

2. Undertake an assessment of the opportunities that local government reform and a combined Sussex Mayoral Authority could present in addressing the factors that influence coastal health and opportunity inequalities in East Sussex.

3. Build on our community development programme such as Making It Happen and Mr Hastings and St Leonards, and work alongside people in their coastal neighbourhoods who want to take action to create positive change.

4. Further develop our cultural and nature based coastal assets locally to ensure those living in and near them can access them and benefit from them for their health and wellbeing.

5. Recognise all the impacts of climate change on our coastal communities. Work collaboratively with partners to protect our coastal communities from current and future risks of climate

change and ensure they can take proactive measures to protect themselves and livelihoods from climate hazards in the short, medium and longer term.

6. Build on the Aspirations programme delivered in schools in Hastings that aims to address the health and care workforce shortages in coastal communities by promoting medical, health and care careers in Hastings.

7. Further develop our local tourist economy and the 'Experience Sussex' initiative to support local prosperity in coastal communities in East Sussex.

Research and Data

8. Develop further research partnerships and enhanced data collection and sharing opportunities that provides detailed local evidence on what works to improve the health, wealth and happiness of our local coastal communities in the county.

9. Ensure and advocate that large scale health and care research programmes, such as the Our Future Health study actively recruits coastal communities to their studies similarly in a way they would recruit participants with protected characteristics or from an inclusion group.

Targeted initiatives and prevention

10. Explore the feasibility and acceptability of specific national health inequalities initiatives such as becoming a Marmot Coast and build on the learning from initiatives by the Coastal Navigators Network over the next two years.

11. Build on existing targeted and enhanced interventions to increase the uptake of national vaccinations and screening programmes.

12. Develop our targeted and enhanced primary prevention programmes that reduce and delay the burden of non-communicable diseases such as cancer and cardiovascular disease in our coastal communities.

13. Work with our NHS partners, particularly GP practices to ensure that secondary and tertiary prevention of cardiovascular diseases is maximised in our coastal communities.

14. Build on our workplace health programme to ensure that workplaces in coastal communities are supporting the health and wellbeing of their employees.

15. Build on our extensive programme of work to improve cliff safety and reduce the number of deaths at cliffs in East Sussex.

16. Develop our county wide public health approach to gambling and ensuring that our coastal communities are not disproportionately exposed and affected by harms caused by gambling.

17. Build on action on healthy ageing and tackling ageism and promoting age friendly communities and employers within our coastal communities.

Updates on previous Annual Reports of the Director of Public Health

Health and Housing 2019/20 update for the 2024/25 DPH report

The [2019/20 Annual Report of the Director of Public Health](#) focused on [Health and Housing](#) in East Sussex. Housing is an important determinant of health, alongside employment and social connections with family, friends and others.

Since the report was published, Public Health and housing authorities worked together on an integrated response to the coronavirus pandemic. This included ensuring infection control measures were in place and vulnerable people had access to health services, increasing substance dependency and mental health support for former rough sleepers accommodated during the 'Everyone In' instruction and developing a bespoke training and employability offer for people using homelessness services. Following the pandemic, housing and Public Health colleagues have created a sustainable cross-sector approach by developing the East Sussex Housing Partnership.

The East Sussex Housing Partnership is a multi-agency group led by the five housing authorities working collaboratively with partners from across local housing providers, public health, health, adult social care, children's services, criminal justice, and the voluntary and community sector. The aim of the partnership is to set a medium- and long-term vision for the local housing sector, provide a collective voice on housing issues and support partners to make the best use of capacity, expertise and resources. The partnership is supported by a joint role across Public Health and the five housing authorities.

Key areas of work over the past 18 months have included:

1. Co-producing the first East Sussex Housing Partnership Strategy. The partnership strategy will sit alongside and complement the individual strategies in each of the district and borough authorities and provide a framework for ongoing partnership working. The draft strategy builds on the evidence base created through the earlier annual report. The partnership strategy is due to be adopted by the district and borough Cabinets and lead member for Adult Social Care in autumn 2025.

2. Establishing new governance and reporting lines between the housing partnership and senior management teams in the housing authorities and county council, East Sussex Chief Executives Group and the East Sussex Health and Care System Partnership Board. The partnership is also collectively responsible for the housing workstream within the East Sussex Health and Wellbeing Shared Delivery Plan. The workstream includes a focus on homelessness prevention and expanding support for people with multiple compound needs.

3. Establishing a partnership approach to supporting people with multiple compound needs, including people with a history of rough sleeping. The public health department recently completed a [multiple compound needs assessment](#), which will help shape ongoing service planning for the Rough Sleeper Prevention Programme and [Changing Futures](#) programme.

4. Developing joint programmes and services, including additional investment in homelessness prevention and wellbeing services, creating a domestic retrofit strategy for East Sussex, re-designing housing related floating support and supported accommodation services.

Work Skills and Health 2021/22 update for the 2024/25 DPH report

The [Annual public health report 2021/22 on Work Skills and Health](#) considers the relationship between work, skills, and health. Since the publication of the report, there continues to be several programmes of work that are progressing the recommendations.

The Employment and Skills Team.

The [team,](#) based within ESCC, brings together the Skills and Employment East Sussex Board, coordinating skills and employment provision across East Sussex. The Board brings together a multi-agency network to support residents and families with accessing opportunities and raising ambitions.

The [Transform Service](#) enables Small and Medium Enterprises to access apprenticeships, training and workforce development support, including through apprenticeship levy transfers from the council to fund apprenticeship training. Initiatives such as Moving on Up and [Level Up](#) provide tailored guidance, training, and employer-led experiences for unemployed residents, including for adults who are on an low-income, housing-insecure, or NEET young people aged 16–24, helping to improve confidence, employability and access to sustainable work.

The Homeless Prevention Employment Service works with those at risk of homelessness via local housing teams to improve financial stability, while Support into Work offers bespoke employment support for refugees and migrants, from CV preparation to qualification translation.

The [Careers Hub](#) strengthens links between education and employers, coordinating initiatives like careers fairs, Open Doors, and Industry

Champions, and [Steps to Success](#) is a NEET prevention programme providing 1:1 career coaching and work experience for young people at risk of becoming NEET, with a focus on those facing multiple barriers to progression. Resources such as the Careers East Sussex website offers information and signposting about skills and jobs for residents and businesses.

New employability programmes delivered via the ESCC Employment and Skills Team such as [Connect to Work](#), include support for employers, to enable them to develop inclusive workplaces, understand Access to Work and to recruit and support people from vulnerable cohorts.

ESCC also delivers several programmes to support those furthest from employment, offering an integrated approach to work and wellbeing.

Level Up – uses District and Borough Shared Prosperity Funds to offer stepping stones employment support to adults and young people with low confidence levels who need a higher level of support with accessing skills and work.

Under the Homes for Ukraine scheme, ESCC offers employment support to refugees and migrants and signposts into wellbeing and health provision.

Connect to Work offers employment support to people who have mental and physical health needs and supports them into and in work over the course of the year, linking into health and other services.

The Employment and Skills Team has been awarded £2.6m of [Skills Bootcamp](#) funding to support people in work towards higher level qualifications at Level 3 and above.

East Sussex Wellbeing at Work.

Since 2022 The Centre For Wellbeing At Work East Sussex, has awarded 88 awards through the East Sussex Wellbeing at Work scheme, an accreditation programme which provides a free framework for employers to improve wellbeing in the workplace.

Major employers within East Sussex, like ESCC and East Sussex NHS Healthcare Trust, have both achieved silver awards and are now aiming for gold. The Wellbeing at Work scheme appeals especially to the voluntary sector and small/micro businesses but also includes large anchor institutions.

The programme is evolving to address changing workforce needs, such as remote working and micro employers, and is expanding its offer to include MSK (musculoskeletal) training and foster partnerships with organisations like Age UK and Health in Mind.

There are ongoing collaborations with a range of partners to set up a mental health business club, and with the domestic abuse team to provide workplace resources and webinars.

The scheme is always seeking novel and innovative ways to support employees, including integrating creative health offerings and making workplace processes (like supervisions and meetings) more creative.

The programme will also be evaluated as part of the WHISPER network research project, with involvement from universities.

Connecting People and Places 2022/23 update for 2024/25 DPH report

The 2022/23 annual Director of Public Health (DPH) report, 'Connecting People and Places - Bringing communities together in East Sussex', focused on social connections and multi-agency work to tackle loneliness across the county. Headline recommendations of the report included:

- establishing a System Stewardship Group to build and maintain the required collaborative leadership to tackle loneliness across the system
- 'connecting the connectors' by creating learning communities that learn and test ideas together and model and incentivise ongoing learning
- mobilising and equipping a movement of connectors stretching across all public facing roles, businesses and communities.

The stewardship approach seeks to encourage system partners to make best use of available resources to tackle loneliness, make decisions collectively and hold joint responsibility for the achievement of improved outcomes. To enable the development of this approach the county council, the East Sussex Voluntary, Community and Social Enterprise (VCSE) Sector Alliance and a wide range of system partners collaborated to design support requirements and then appoint a convenor to facilitate multi-agency progress.

In 2023 the council entered into a two-year grant agreement with Sussex Community Development Association (SCDA) to bring together partners and support the creation and development of the Stewardship Group and its associated programme activities. East Sussex Community Voice (ESCV) is providing evaluation, data and

monitoring capacity, and other local VSCE organisations are also helping reach target communities and involve other organisations as the initiative develops.

The multi-agency Stewardship Group first met in 2024 and agreed an aspirational long-term vision for East Sussex to be a place where no-one feels lonely. The programme's mission is to reduce loneliness and build a connected and supportive community for all.

Learning opportunities, community engagement and the lived experience of individuals and communities have formed important elements of the programme. Initiatives delivered include:

- insight gathering relating to groups most affected by loneliness, enabled through a small grants programme
- 'Connecting the Connectors' events and 'Shared Learning Lunches' for frontline practitioners to learn about loneliness and share their experience with others
- training/learning opportunities, including 'Knowledge Exchange' webinars and 'Loneliness Matters' workshops, to provide better understanding of loneliness, the importance of social connections and how people can help tackle the problem
- an online East Sussex Tackling Loneliness Hub which is a learning and exchange space to support people to work collaboratively and generate action on tackling loneliness locally
- a public facing communications campaign, 'Face Loneliness', aimed initially at raising awareness of what loneliness is, how it can affect anyone and how to recognise it in yourself and others (eastsussex.gov.uk | loneliness).

As the initial phase of support for the programme concludes in December 2025 the evaluation will seek to explore the effectiveness of this work in supporting the stewardship approach and delivering its aims. Partners have already committed to continuing to collaborate using the stewardship approach. The forthcoming evaluation will inform the future support arrangements needed for effective system-wide action on tacking loneliness.

Creativity for Healthier Lives 2023/24 update for 2024/25 DPH report.

Since the publication of The Annual Report of the Director of Public Health in East Sussex 2023 / 24 - Creativity for Healthier Lives several initiatives linked to the recommendations have been progressed.

This report aimed to be a key resource in making East Sussex a creative health county and highlights the creative health assets and organisations involved. A number of creative health related reports and papers are available on the Arts and Culture section of the East Sussex Joint Strategic Needs Assessment website. This includes the Evaluation of Eastbourne ALIVE an ambitious project led by Towner Eastbourne that brought together local creative partner organisations, artists and young people to develop a partnership across the town to maximise the value of Turner Prize 2023 coming to Eastbourne.

Research and insight projects.

ESCC is part of the Coastal Community & Creative Health project, is a three year project (2024-27) funded by the Arts and Humanities Research Council's 'Mobilising community assets to tackle health inequalities'. It focuses on three coastal areas of England, Hastings, Weston-Super-Mare, and Blackpool, which have poor health outcomes but a rich cultural and creative heritage. The project aims to integrate creative community activities into local health systems. It

recognises the powerful impact that cultural and creative resources can have on improving health, yet these are often underutilised in local government and NHS health policies.

As part of the East Sussex Research Collaborative Hub (RCH), a partnership between the University of Brighton (UoB) and ESCC delivered a research study titled Using Creativity to Support Health and Wellbeing: Experiences of Parents in Coastal Communities.

It explores how parents in the coastal communities of Hastings, St Leonards, and Bexhill engage with creative activities to support their mental health and wellbeing.

Drawing on interviews and photo elicitation with 28 parents, the study highlights the value of both 'everyday creativity' such as crafting, gardening, and reading and engagement with creative community assets like museums and workshops.

It identifies significant barriers to participation, including financial constraints, lack of childcare, poor transport, and limited awareness of available opportunities. Despite these challenges, many parents found creative activities to be essential for mental health, identity, and social connection.

The report recommends intersectoral collaboration, increased access to creative opportunities in deprived areas, and better signposting through health and community services to embed creative health into everyday life and public health strategies.

Creative Health Charter Mark with the East Sussex Wellbeing at Work Programme.

The Creative Health Charter mark is being considered as a complementary addition to the East Sussex Wellbeing at Work Programme. The Charter mark is being developed to encourage employers to commit to at least two hours per week of personal creativity, which could be fulfilled through activities like creative journaling, painting, drawing, collage, writing, or poetry.

The Wellbeing at work team is exploring how employers can encourage staff to meet this creativity commitment and how the Charter mark could serve as an incentive or recognition within the workplace health awards programme, potentially allowing employers to badge their commitment.

There is ongoing work to integrate the Charter mark into the mental health area of the awards programme, and discussions are underway about its practical implementation and evidence base, including literature reviews and pilot sessions.

The Charter mark is seen as a tool to promote both individual wellbeing and broader workplace culture, but the team is still determining the best approach for employer engagement and integration.

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Peacehaven Town Council - Homepage

Pevensey Bay to Eastbourne Coastal Management Scheme - Pevensey Bay

Pevensey Parish Council - Home - Pevensey Parish Council

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Surfers Against Sewage - Surfers Against Sewage -

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