



# Improving *Health*.

## Part of the Sussex Uncovered Series.

FEBRUARY 2026

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# Introduction

Sussex Community Foundation is a registered charity that exists to make Sussex a fairer and more equal place. We do this by enabling local people to support local causes, making grants to small charities and voluntary groups working in communities across Sussex.

Through our philanthropy advice we help to match our supporters' aims with the many, effective local grassroots charities offering solutions to local issues.

We use national and local data to focus our impact on four funding priorities where we believe we can make the biggest difference:

- Tackling poverty
- Improving health
- Reaching potential
- Acting on climate

Our goal is to provide sustainable funding that strengthens our vibrant community and charity sector. Together, we're helping to create a Sussex where people and communities thrive.

A key part of our strategic approach to grant making is publishing a series of data-led reports to inform our stakeholders about the needs of Sussex. Each report is built around one of our funding priorities.

This third report focuses on Improving Health - helping people live longer, better lives. Health and wellbeing are fundamental to quality of life. But too many people across Sussex don't get the support they need. Our Improving Health funding priority addresses that gap, by supporting organisations that positively impact local people's physical and mental health and wellbeing.

The findings of our research were stark and will be surprising to those who see Sussex as a wealthy, privileged community. They present very significant challenges for our mental and physical health services, which are struggling to meet the level of local need. The report found four key findings:

1. Multiple health problems in our coastal communities.
2. High levels of disability and poor health among working-age adults.
3. High and rising adult mental health needs.
4. Overlapping health challenges for young people in disadvantaged areas.

These issues are deep-rooted and interconnected, particularly in coastal and deprived urban areas. Addressing these complex problems requires a targeted, place-based approach that recognises the link between disadvantage and health. The Foundation will use these insights to inform our grant making and donor advice, ensuring resources are directed to where they can make the biggest difference.

We hope this report serves as a valuable resource for local community groups, helps philanthropists decide where their charitable giving can have the greatest impact, and provides a clear baseline for future action. By working together and focusing funding where it's needed most, we have a real opportunity to improve health outcomes and help people across Sussex live longer, healthier, more connected lives.

## Executive Summary

This executive summary presents key findings from the Improving Health report. The report focuses on neighbourhood level data for Sussex, compared against regional and national averages, to explore patterns in general health, long-term illness and disability, life expectancy and mortality, mental health, child health, health behaviours, informal care and health inequalities by demographic.

The summary highlights the most significant findings from the main report and the communities most affected by overarching health challenges - offering a clear picture of where health outcomes are poorest and where efforts to improve health and reduce inequalities should be prioritised across Sussex.

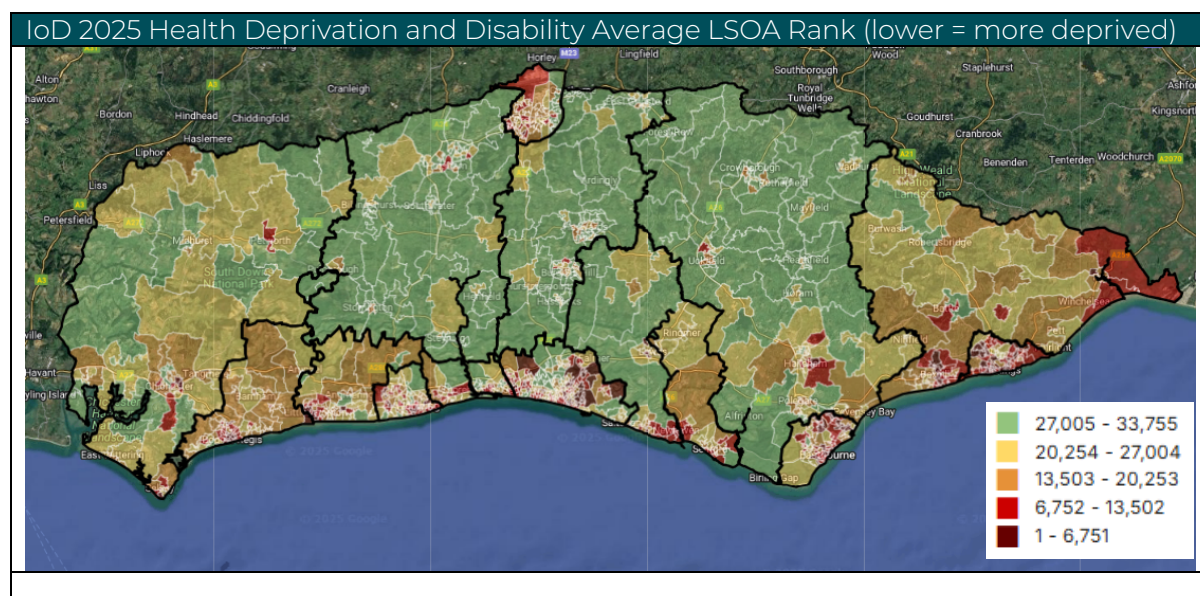
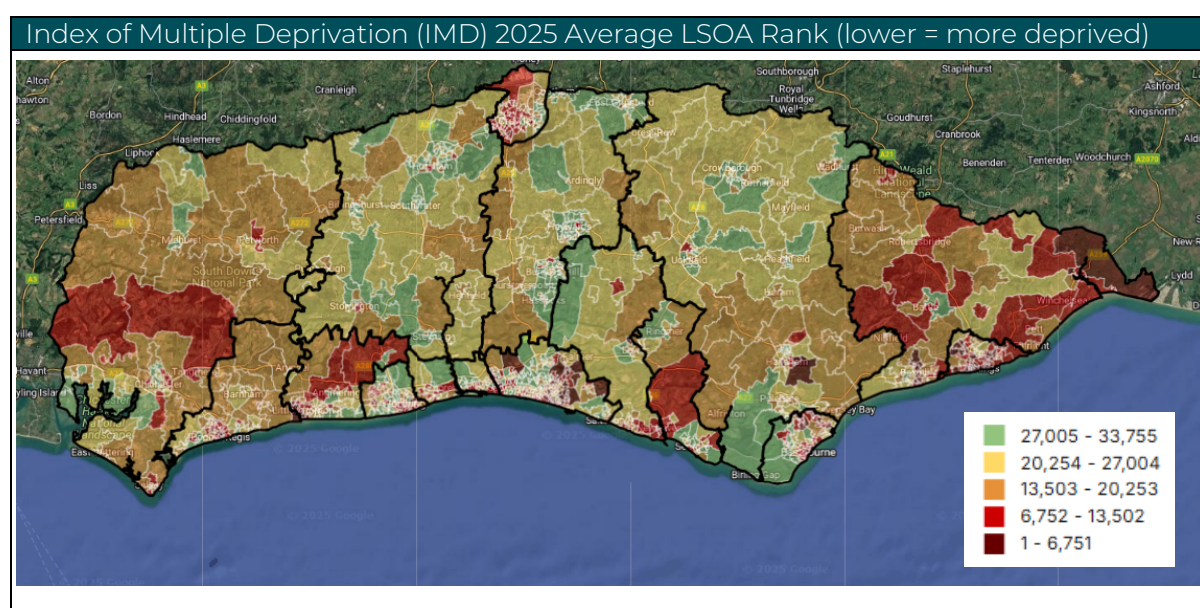


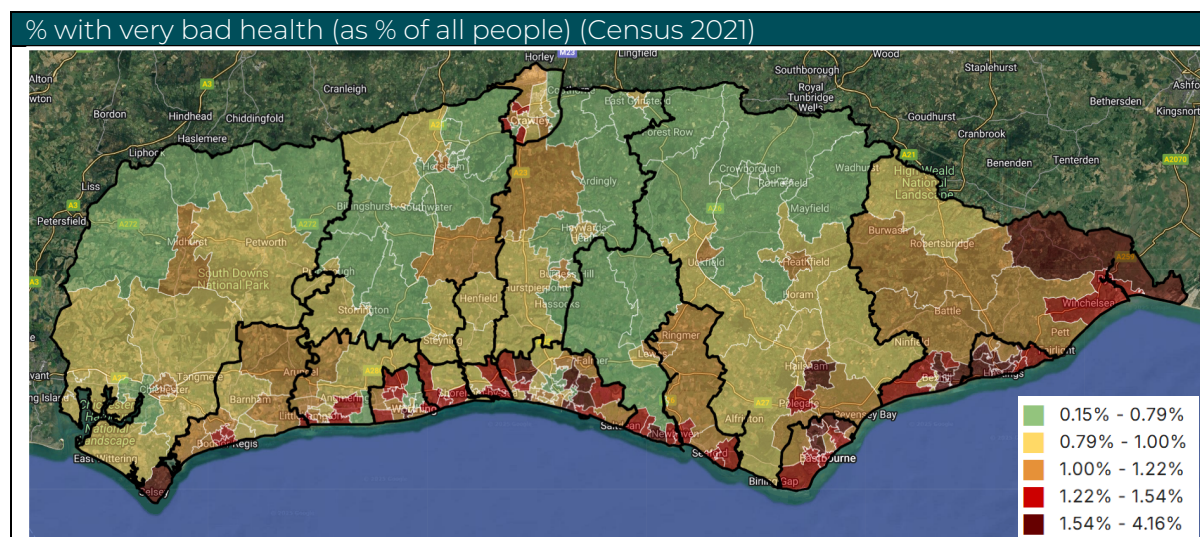


## Key finding one: Multiple health problems in our coastal communities.

Sussex's disadvantaged neighbourhoods experience overlapping health problems that reflect a national pattern of coastal deprivation. Across Sussex, 48 Lower-layer Super Output Areas (LSOAs) are in the top 10% most deprived in England on the Index of Multiple Deprivation (IMD) 2025 (up from 42 on the IMD 2019), with around 80,000 residents living in these areas. This report has identified that these same neighbourhoods show some of the worst health outcomes in the region – appearing across multiple indicators as having the poorest health outcomes. Many of these areas are also within the top 5% or even top 1% most health deprived areas in England.

The following maps highlight this overall picture, showing how general deprivation, health-specific deprivation and poor health outcomes are concentrated in many of the same Sussex neighbourhoods (shaded dark red on the maps) – with coastal communities experiencing a particularly stark overlap of disadvantage.





The table below provides more detail on the specific neighbourhoods that are experiencing the most severe health challenges in Sussex and across England. These communities, all located in coastal or urban parts of larger coastal towns and cities, also face the highest levels of deprivation (in the top 10% most deprived in England on the IMD).

The table illustrates the strong interplay between socioeconomic deprivation and health, showing how coastal deprivation hotspots are also the areas with the most notable and multifaceted health inequalities. These neighbourhoods are mostly located in Brighton and Hove and Hastings, as well as Eastbourne, Arun (Bognor Regis and Littlehampton) and Rother (Bexhill).

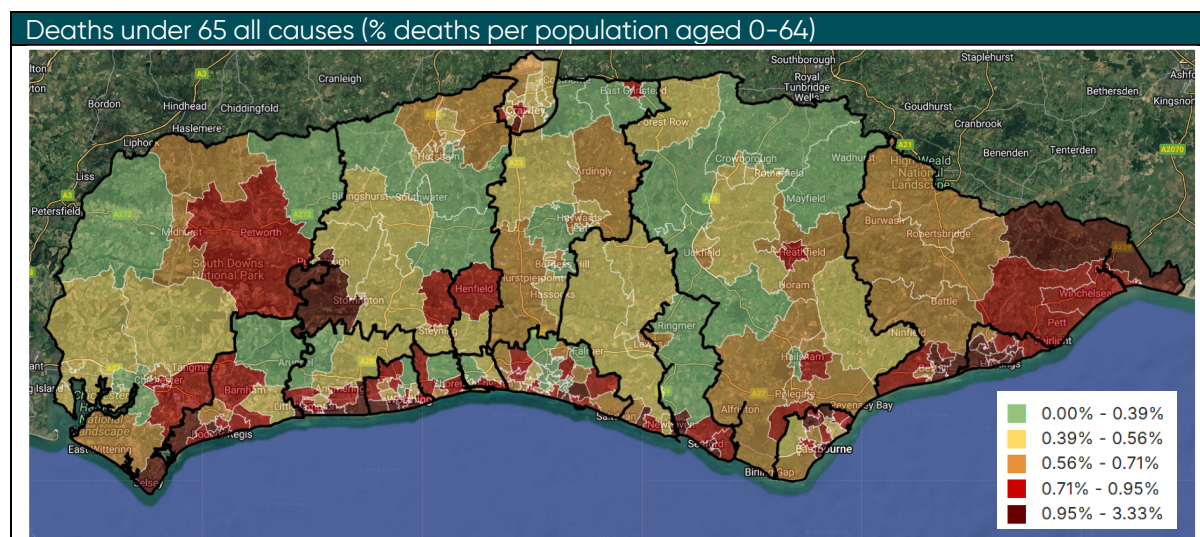
Local Authority	Neighbourhood	Summary of Poor Health Outcomes
Brighton and Hove	Coldean & Moulsecoomb North	One LSOA in top 10% most deprived on IMD, >22% of under-65s claim disability benefits; high emergency admissions; high mental health needs, among top 20 for lowest GP provision in Sussex
	Hangleton	Two LSOAs in top 10% most deprived on IMD, >10% report bad/very bad health; carers allowance claimants above average
	Hollingdean & Moulsecoomb	One LSOA in top 10% most deprived on IMD, 22.2% of under-65s on disability benefits; 11% report bad health; very high mental health need
	Kemptown	One LSOA in top 10% most deprived on IMD, very high health-deprivation; very high bad health, high disability benefit claimants; high emergency and self-harm hospital admissions, high preventable premature mortality, acute mental health needs
	Whitehawk	Multiple LSOAs in top 10% deprived, >27% of under-65s claim disability benefits; >11% report bad health; in top 1% for health deprivation; among highest self-harm admission rates in Sussex
Hastings	Broomgrove	Two LSOAs in top 10% most deprived on IMD, 26.7% under-65s on disability benefits; 11.2% report bad health; high carers allowance claims; emergency admissions and self-harm rates well above average
	Central Hastings	Multiple LSOAs in top 10% most deprived on IMD, >11% report bad health; very high levels of self-

		harm admissions; long-term illness and depression prevalence
	Central St Leonards	Multiple LSOAs in top 10% deprived, >11.9% bad health, high emergency admissions; elevated mental health needs
	Hollington	Multiple LSOAs in top 10% deprived, >25% disability claims; 13.2% report bad/very bad health; high hospital admissions for emergency and mental health issues
	Ore	One LSOA in top 10% most deprived on IMD, >20% of working-age population claim disability benefits; 8.9% carers allowance
Eastbourne	Hampden Park	Multiple LSOAs in top 10% most deprived on IMD, high bad health; high disability benefits under 65 years; high rates of unpaid care, high emergency admissions; among lowest GP access scores
	Langney East	One LSOA in top 10% most deprived on IMD, 20% of under-65s on disability benefits; high depression prevalence
	Pier	Two LSOAs in top 10% most deprived on IMD, >22% disability claims in under-65s; high emergency hospital use
Arun	Bognor Regis Central	One LSOA in top 10% most deprived on IMD, >9.8% report bad health; high self-harm and emergency admissions; notably above England average in acute admissions
	South Bersted	One LSOA in top 10% most deprived on IMD, very high emergency admissions; >9.8% bad health; very high health deprivation
	Wick & Toddington	Two LSOAs in top 10% most deprived on IMD, high emergency admissions; high diabetes and obesity, high mental health needs
Rother	Bexhill	Two LSOAs in top 10% most deprived on IMD, among top 20 for poor health in Sussex; high rates of obesity, diabetes, hypertension; high premature mortality, high proportion of child carers and mental health needs

High rates of preventable deaths, emergency admissions and life expectancy gaps reveal unmet health needs in Sussex's most deprived coastal areas.

In parts of Sussex – particularly Hastings, Eastbourne and Brighton and Hove – many individuals are experiencing premature deaths linked to largely preventable conditions. The areas with the highest preventable mortality rates under 75 include Pier in Eastbourne, Whitehawk and St James's Street & Queen's Park in Brighton and Hove and Central St Leonards in Hastings, all with rates more than double the England baseline. Many of these same communities also experience lower life expectancy, with males in Hastings living on average 2 years less than the England average, and Brighton and Hove recording the lowest healthy life expectancy in Sussex, with men and women expected to live in good health for 60.6 and 61.5 years, respectively.





Alongside high premature mortality, emergency hospital admissions are sharply elevated in the most deprived neighbourhoods such as Whitehawk, Hollington, St Leonards, Sidley, and Broomgrove – where admission rates can be up to 60% higher than the national average.

Middle Layer Super Output Area (MSOA)	Local Authority	Emergency Admissions Ratio (All)
Broomgrove - Hastings 005	Hastings	162.67
Hollington - Hastings 003	Hastings	157.12
Northbrook - Worthing 006	Worthing	133.73
Central St Leonards - Hastings 011	Hastings	133.21
Whitehawk - Brighton and Hove 025	Brighton and Hove	130.61
Bexhill North & Sidley - Rother 007	Rother	128.95
Littlehampton West and River - Arun 011	Arun	128.41
Selsey - Chichester 014	Chichester	127.54
Wick & Toddington - Arun 004	Arun	126.94
College Lane & Oaklands - Chichester 008	Chichester	126.02
South Bersted - Arun 014	Arun	125.98
Pier - Eastbourne 010	Eastbourne	125.01
Central Hastings - Hastings 009	Hastings	124.35
Ore - Hastings 004	Hastings	124.28
Bognor Regis Central - Arun 017	Arun	123.17
East Worthing - Worthing 009	Worthing	122.24
Durrington North - Worthing 003	Worthing	119.36
Hawthorn Road - Arun 016	Arun	118.38
Tangmere, Mundham & Hunston - Chichester 012	Chichester	117.49
Braybrooke & Bohemia - Hastings 008	Hastings	115.37

Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021



These overlapping patterns of high preventable death rates, poor life expectancy and acute care demand highlight deeply entrenched and persistent unmet health needs across Sussex, particularly in those communities that are often already deprived on other measures.

## Key finding two: High levels of disability and poor health among working-age adults.

There is a high level of disability and poor health among Sussex's working-age adults, with rates in some areas more than three times the national average. Long-term health conditions and disability among working-age adults present a significant and growing challenge across Sussex, particularly in coastal and deprived areas. These conditions limit people's ability to work, access services and maintain independence – with wider impacts on economic participation and health inequalities across the region.

The need is most acute in a number of specific neighbourhoods, where disability benefit claims among under-65s reach more than three times the national average of 8%. Kemptown in Brighton and Hove stands out as the most affected, with nearly one in three under 65 years (31.7%) claiming disability benefits. Other parts of Brighton and Hove also face severe challenges – particularly Whitehawk, Hollingdean & Moulsecoomb West, Bevendean, and Hangleton South – all with 20–28% of under-65s on disability benefits.

Hastings is similarly affected, with multiple neighbourhoods in Hollington, Broomgrove, and Ore showing claimant rates of 20–27%. Eastbourne follows closely, with high levels of disability in Hampden Park, Pier, and Langney East. Outside of these urban centres, neighbourhoods in Sidley (Rother), Peacehaven (Lewes) and Littlehampton and Bognor Regis (Arun) also appear prominently, showing elevated rates of disability benefit claims and long-term sickness.

Lower-layer Super Output Areas (LSOA)	Local Authority	% under 65 years claiming disability benefits
Kemptown – Brighton and Hove 031C	Brighton and Hove	31.73%
Whitehawk – Brighton and Hove 025E	Brighton and Hove	27.85%
Hollington – Hastings 003E	Hastings	26.65%
Broomgrove – Hastings 005A	Hastings	26.27%
Whitehawk – Brighton and Hove 025B	Brighton and Hove	26.19%
Hollington – Hastings 003C	Hastings	25.34%
Hampden Park South – Eastbourne 004A	Eastbourne	23.49%
Broomgrove – Hastings 005D	Hastings	23.47%
Lewes West – Lewes 005B	Lewes	23.28%
Bexhill North & Sidley – Rother 007E	Rother	23.19%
Whitehawk – Brighton and Hove 025C	Brighton and Hove	22.99%
Hollington – Hastings 003A	Hastings	22.95%
Pier – Eastbourne 010C	Eastbourne	22.40%
Hollingdean & Moulsecoomb West – Brighton and Hove 008A	Brighton and Hove	22.17%
Bexhill North & Sidley – Rother 007D	Rother	20.87%
Whitehawk – Brighton and Hove 025D	Brighton and Hove	20.47%

Ore – Hastings 004B	Hastings	20.27%
Langney East – Eastbourne 003B	Eastbourne	20.13%
Bevendean & Moulsecoomb East – Brighton and Hove 009C	Brighton and Hove	20.09%
Hangleton South – Brighton and Hove 013B	Brighton and Hove	19.97%
Source: Consumer Data Research Centre (CDRC), 2024		

These geographic patterns reflect deeper inequalities in long-term health. East Sussex consistently shows higher prevalence of serious chronic conditions such as high blood pressure, chronic kidney disease, cancer, COPD and heart disease – all of which are closely linked to disability in middle age. West Sussex fares better overall, but still includes neighbourhoods with notable health challenges, particularly in coastal areas such as Worthing, Arun, and Adur.

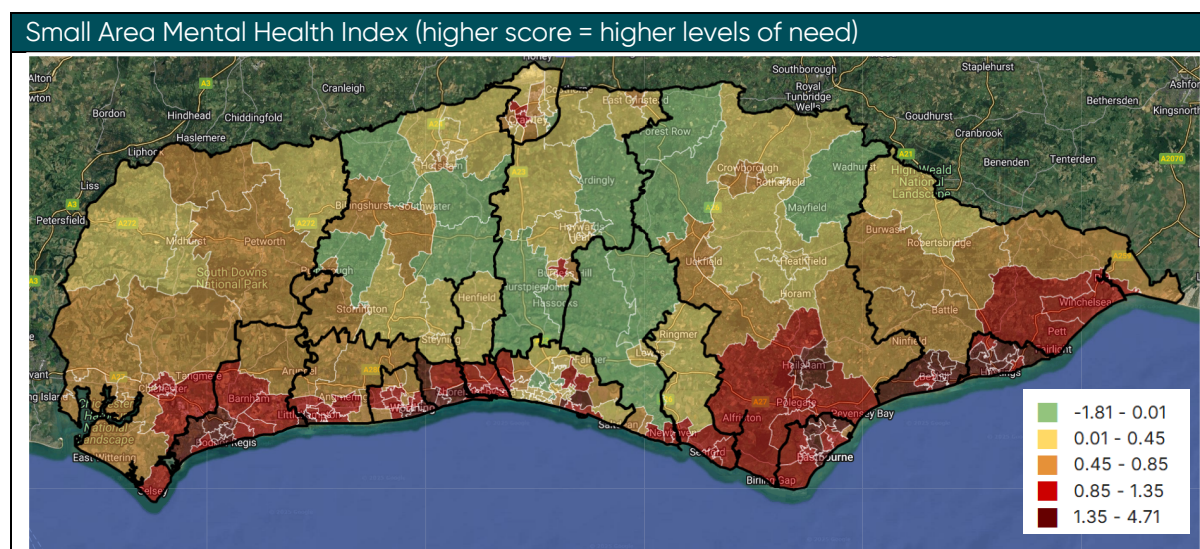
The data highlights clear clusters of concentrated need across Sussex. In the most affected communities, poor health and disability are not only more common, but deeply entrenched – contributing to cycles of disadvantage and widening health inequalities between places.

## Key finding three: High and rising adult mental health needs.

Adult mental health needs are notably higher across Sussex than the England average – and they're worsening, particularly in coastal towns and deprived urban areas. Mental health continues to be one of the biggest public health challenges facing Sussex, with strong links to social isolation, deprivation, economic hardship and poor physical health.

The data explored in this report shows that Hastings and Eastbourne face particularly acute mental health challenges. Hastings ranks highest in Sussex on nearly every mental health indicator measured, including the Indices of Deprivation (IoD), Mental Health Indicator (0.84), the Small Area Mental Health Index (SAMHI) (1.71), the Loneliness Index (2.76) and the rate of Personal Independence Payment (PIP) mental health claimants (5.52%). It also has the highest rate of serious mental illness (1.5%) and schizophrenia/psychoses prevalence (1.66%). Eastbourne also fares poorly, with a SAMHI score of 1.42, depression prevalence at 17.46%, and high rates of self-harm hospital admissions. Brighton and Hove stands out for its high suicide rates and hospital admissions for self-harm. The city has the highest suicide mortality rate in Sussex, with 16.5 per 100,000 in 2021–23, notably above the national average. Neighbourhoods like St James's Street, Queen's Park and Whitehawk also have among the highest self-harm admission rates (over 330 per 100,000).

Coastal and deprived neighbourhoods show consistently high mental health needs. In addition to Hastings, Eastbourne and Brighton, communities in Worthing (Heene, Worthing Central), Rother (Bexhill), Lewes (Newhaven, Peacehaven) and Arun (Littlehampton, Bognor Regis) face high rates of depression, self-harm and benefit claims for mental illness. These patterns highlight a clear geographic concentration of need, with particular intensity in coastal and deprived areas.



## Key finding four: Overlapping health challenges for young people in disadvantaged areas.

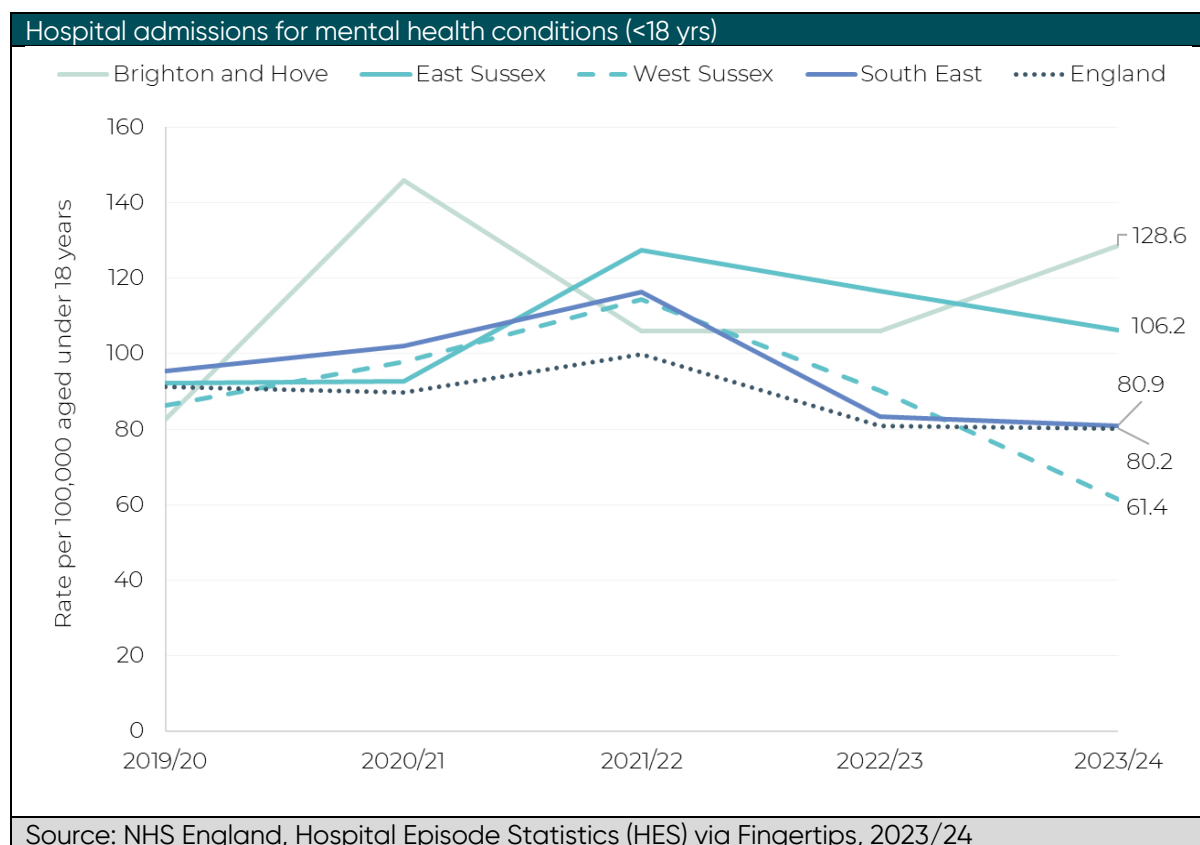
Children and young people in some of Sussex's most deprived areas face disproportionately high levels of caring responsibility, disability and mental health need. Bexhill Central (6.19%) and areas of Wealden (Pevensey) and Brighton (Hollingdean and Moulsecoomb) stand out with the highest proportion of child carers in the region – reaching over 5%, compared to just 1.1% nationally.

LSOA	Local Authority	Child Carers
Bexhill Central – Rother 011E	Rother	6.19%
Stone Cross, Westham & Pevensey Bay – Wealden 020F	Wealden	6.10%
Hollingdean & Moulsecoomb West – Brighton and Hove 008D	Brighton and Hove	5.83%
Mayfield & Wadhurst – Wealden 005A	Wealden	5.32%
Bevendean & Moulsecoomb East – Brighton and Hove 009D	Brighton and Hove	5.29%
East Blatchington – Lewes 011D	Lewes	5.08%
Goldsmid West – Brighton and Hove 019A	Brighton and Hove	5.06%
Langney West – Eastbourne 001B	Eastbourne	5.02%
Hollington – Hastings 003C	Hastings	5.00%
North Laine & the Lanes – Brighton and Hove 027F	Brighton and Hove	4.92%
Haywards Heath South & Cuckfield – Mid Sussex 011H	Mid Sussex	4.82%
Yapton & Climping – Arun 006A	Arun	4.58%
Hailsham East – Wealden 017B	Wealden	4.58%
King Edward's Parade – Eastbourne 011D	Eastbourne	4.52%
St James's Street & Queen's Park – Brighton and Hove 030C	Brighton and Hove	4.52%
Polegate – Wealden 019E	Wealden	4.50%
Hollingdean & Moulsecoomb West – Brighton and Hove 008C	Brighton and Hove	4.15%
East Saltdean & Telscombe Cliffs – Lewes 006E	Lewes	4.08%
North Laine & the Lanes – Brighton and Hove 027C	Brighton and Hove	4.07%
Bexhill North & Sidley – Rother 007D	Rother	4.06%
Source: Census 2021		

Many of these areas show a clear overlap between high levels of young carers and childhood disability. Bevendean & Moulsecoomb East, Hollingdean & Moulsecoomb West, Bexhill North & Sidley, Polegate and parts of Langney and Hollington also show above average rates of Disability Living Allowance (DLA) claims for under-16s, highlighting the multiple pressures on children and families in many of these most vulnerable communities. Overall, Brighton and Hove has the highest concentration of neighbourhoods with elevated child Disability Living Allowance (DLA) claimants, particularly in areas like Whitehawk, Moulsecoomb, Bevendean, and Hollingdean, with some rates exceeding 20%. Eastbourne also shows several hotspots, especially in Hampden Park and Langney, with rates around 17-18%. Lewes (Peacehaven West) and Hastings (Hollington) also feature prominently, alongside pockets in Rother, Chichester, Wealden, Worthing and Adur.



Compounding this, young people in these communities are often more likely to face mental health challenges. Trends across Child and Adolescent Mental Health Services (CAMHS) across Sussex show rising mental health needs in the region, with referrals increasing steeply in Brighton and Hove, East Sussex and West Sussex alike. Hospital admissions for mental health conditions among those aged under 18, and self-harm hospital admissions among 10–24-year-olds remain highest in East Sussex and Brighton and Hove, exceeding the national average.



Together, these findings paint a concerning picture for children and adolescents in Sussex's most disadvantaged coastal areas, where the intersecting challenges of care, disability and mental ill health are notable in many neighbourhoods. Targeted support in these communities is critical to tackling long-term health inequalities and improving life chances for the next generation.

## Conclusion

The findings in this report highlight the urgent and uneven health challenges across Sussex, particularly in coastal and deprived urban neighbourhoods. These patterns are consistent, multifaceted and deeply rooted – spanning poor physical and mental health, high disability, premature mortality and growing pressures on children and working-age adults. Addressing these issues requires targeted, place-based approaches that recognise the complex interplay of disadvantage and health. By focusing action and investment on the communities most affected, there is a real opportunity to reduce health inequalities and improve outcomes for people across Sussex.



# Improving Health: Demographic Context

Understanding the population profile of Sussex is essential for interpreting patterns of health and care needs. This section summarises the demographic structure of Sussex – including rurality, deprivation, population change, age structure, ethnicity, and LGBTQ+ identity. Together, these provide important context for the health challenges and inequalities explored throughout the rest of this report.

## Population Profile: Key Facts and Figures

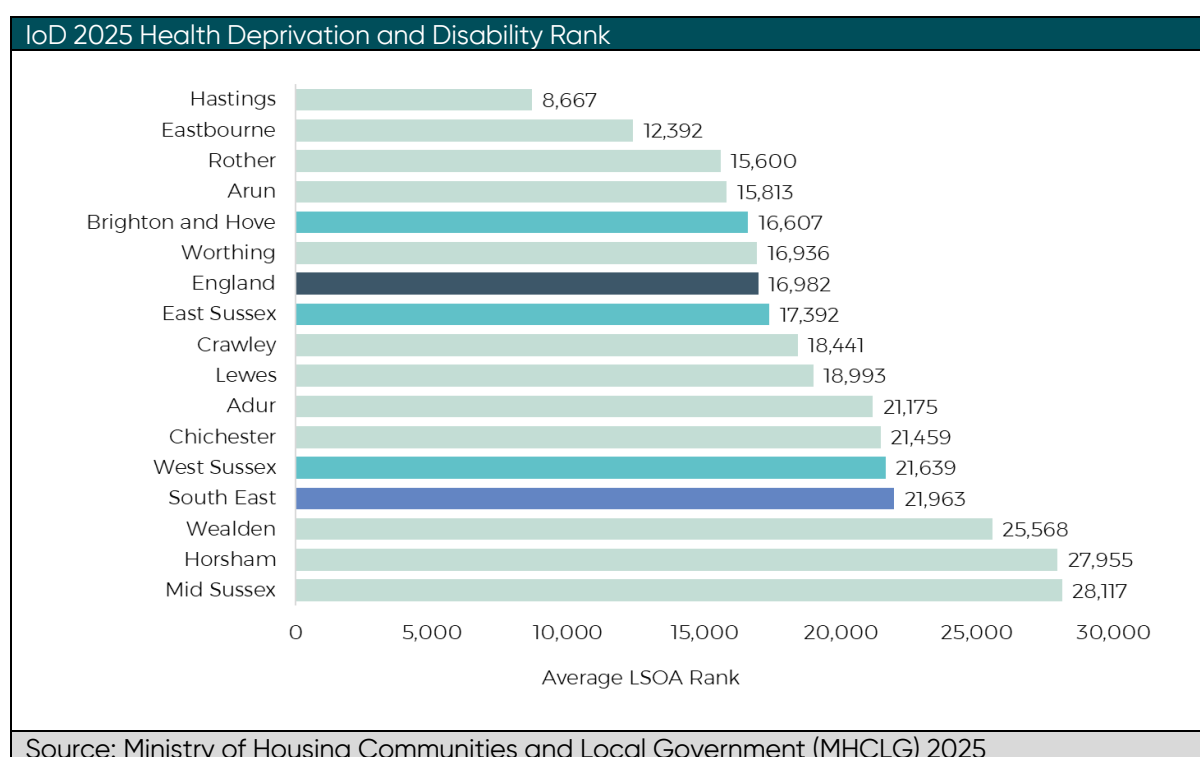
- The total population living in Sussex in 2021 was 1,705,626.
- Approximately 1-in-5 Sussex residents live in rural areas (20.3% – 346,000 people) with the majority living in urban areas (79.7%).
- 48 Sussex LSOAs are in the top 10% most deprived in England according to the Indices of Deprivation (IoD) 2025, with nearly 80,000 people living in these most deprived neighbourhoods. The majority of these areas are located in Brighton and Hove (e.g. Whitehawk, Hollingdean, Moulsecoomb, Kempdown and Hangleton) and Hastings (e.g. Central St Leonards, Hollington, Central Hastings, Broomgrove, Ore). A few are also in Arun (e.g. Wick & Toddington, Bognor Regis), Eastbourne (e.g. Hampden Park, Pier, Langney East), and Rother (Bexhill North & Sidley).
- Sussex has seen a 6.1% population increase over the last 10 years. This is lower than the increase across the South East (7.5%) and England as a whole (6.6%) over the same period.
- There are a higher proportion of people aged 65+ in Sussex (22.4%) compared to the South East (19.5%) and England as a whole (18.4%). This is projected to increase in Sussex between 2020 and 2040, with a 41.3% rise in the older population. Again, this is relatively high compared to the projected increase of 39.1% across the South East and 39.3% across England for this age bracket.
- The working age population in Hastings and Eastbourne is expected to fall by a considerable amount in the next 20 years (5.6% and 3.3%, respectively) relative to the small projected growth expected across Sussex, the South East and England.
- Sussex has a higher proportion of people identifying as 'White British' (83.9%) compared to the regional average (78.8%) and national average (73.5%).
- The Asian community make up the highest proportion of Non-White residents, but they still only account for 3.7% of the population in Sussex. One third of these Asian residents identify as Indian (1.2%).
- People who identify with the LGBTQ community are a significant feature of the Sussex population – Brighton and Hove has the highest proportion of residents identifying as not straight or heterosexual out of all Local Authorities in England and Wales (11.7%). Additionally, whilst the majority of the Sussex population still identify as straight or heterosexual (95.3%), Sussex has a greater proportion of residents identifying as not straight or heterosexual (4.7%) compared to both the national average (3.4%) and regional average (3.3%).

## Overview of Health across Sussex

Health outcomes vary significantly across Sussex, shaped by a complex mix of social, economic, and environmental factors. This section provides an overarching look at health across the region, using the Health Deprivation and Disability domain of the Index of Multiple Deprivation to explore geographical patterns of health-related disadvantage. In addition to this, it examines self-reported general health (how individuals rate their own health as good or bad) and Healthy Life Expectancy, a key measure of how long people can expect to live in good health. Together, these indicators offer a fuller picture of population health and help highlight where poor health is most concentrated – supporting more targeted action to reduce inequalities and improve wellbeing.

### Deep-rooted health inequalities concentrated in Sussex's coastal urban neighbourhoods reflect a persistent pattern of deprivation

The Indices of Deprivation (IoD) 2025 Health Deprivation and Disability Domain measures the risk of premature death and the impairment of quality of life through poor physical or mental health. The chart below shows Average LSOA Rank on this domain, with a lower rank indicating that an area is experiencing high levels of health deprivation.



As shown in the chart above, there is notable variation in health deprivation across Sussex, with coastal and urban areas such as Hastings, Eastbourne, Rother, Arun and Brighton and Hove ranking worse in terms of health deprivation than both the South East and England average.

This contrast highlights a geographic health divide across Sussex, with more persistent health deprivation concentrated in coastal communities suggesting the need for targeted investment and health interventions in these areas.



The table below further highlights these findings, showing the 20 LSOAs with the highest levels of health deprivation across all Sussex areas. 37 LSOAs across Sussex rank in the top 10% of all LSOAs in England on the health deprivation domain. 14 of these are in Brighton and Hove, 12 in Hastings, 7 in Eastbourne, 2 in Arun and 2 in Rother.

LSOA	Local Authority	IoD 2025 Health Dep Rank
Broomgrove - Hastings 005A	Hastings	176
Hollington - Hastings 003E	Hastings	227
Pier - Eastbourne 010C	Eastbourne	280
St James's Street & Queen's Park - Brighton and Hove 030C	Brighton and Hove	282
Whitehawk - Brighton and Hove 025E	Brighton and Hove	301
Central Hastings - Hastings 009B	Hastings	367
Kemptown - Brighton and Hove 031C	Brighton and Hove	388
Hollingdean & Moulsecoomb West - Brighton and Hove 008A	Brighton and Hove	559
Hollington - Hastings 003C	Hastings	749
Whitehawk - Brighton and Hove 025B	Brighton and Hove	770
Hampden Park South - Eastbourne 004A	Eastbourne	852
Broomgrove - Hastings 005D	Hastings	927
Central St Leonards - Hastings 011B	Hastings	1,042
Bexhill North & Sidley - Rother 007D	Rother	1,240
Hollington - Hastings 003A	Hastings	1,273
Whitehawk - Brighton and Hove 025C	Brighton and Hove	1,461
Central St Leonards - Hastings 011E	Hastings	1,600
Langney West - Eastbourne 001B	Eastbourne	1,798
Hollington - Hastings 003B	Hastings	1,971
Hangleton South - Brighton and Hove 013B	Brighton and Hove	2,046
Source: Ministry of Housing Communities and Local Government (MHCLG) 2025		

As shown in the table, there is a concentrated pattern of health deprivation in urban coastal areas, particularly in Brighton and Hove and Hastings, which consistently rank among the most deprived areas in England on the Index of Multiple Deprivation (IMD) 2025 Health Domain. The most deprived area is Broomgrove (Hastings 005A), ranked 176th out of 33,755 LSOAs nationally, placing it in the top 0.6% most health-deprived areas in England. Other highly deprived areas include Hollington (Hastings 003E) ranked 227 in England, Pier (Eastbourne 010C) at 280 and St James's Street & Queen's Park (Brighton and Hove 030C) at 282.

As detailed in the table, there are also clusters of health deprivation within specific neighbourhoods across Sussex, suggesting a multitude of deep-rooted, place-based challenges. For example, Whitehawk and Kemptown (both in Brighton and Hove) have multiple LSOAs ranked within the bottom 5% nationally, while Hollington (Hastings) also appears repeatedly. These patterns reflect a broader trend of coastal deprivation, where communities in once-thriving

seaside towns face poor health outcomes often linked to long-term economic decline, ageing populations and under-resourced health infrastructure.

The poorest general health in Sussex is found in deprived coastal areas such as Brighton, Hastings, Bexhill, Eastbourne and Bognor Regis, where rates of bad or very bad health are highest

The table below shows the proportion of residents by their self-reported ratings of general health. Figures are taken from responses to the 2021 Census.

Area Name	Good or Very Good Health	Fair Health	Bad or Very Bad Health
Adur	80.32%	14.11%	5.57%
Arun	79.76%	14.81%	5.43%
Brighton and Hove	83.35%	11.59%	5.06%
Chichester	83.31%	12.39%	4.31%
Crawley	84.06%	11.61%	4.33%
Eastbourne	78.48%	15.25%	6.28%
Hastings	77.22%	15.52%	7.27%
Horsham	85.42%	11.05%	3.53%
Lewes	80.35%	14.17%	5.49%
Mid Sussex	85.99%	10.51%	3.50%
Rother	78.36%	15.64%	5.99%
Wealden	82.96%	12.62%	4.42%
Worthing	80.91%	13.85%	5.24%
East Sussex	79.91%	14.39%	5.70%
West Sussex	83.04%	12.50%	4.46%
South East	83.99%	11.77%	4.24%
England	82.20%	12.65%	5.15%
Source: Census 2021			

Hastings (7.27%), Eastbourne (6.28%) and Rother (5.99%) have the highest levels of bad or very bad health in Sussex - all notably above the national (5.15%) and South East (4.24%) averages.

At a neighbourhood level, the disparities are even more stark. Kemptown in Brighton and Hove reports the highest rate of poor health in Sussex (19.02%), nearly four times the national average. Other hotspots include parts of Hollington in Hastings, Whitehawk in Brighton and Hampden Park in Eastbourne, further underlining a clear pattern of poor health concentrated in deprived coastal communities.

LSOA	Local Authority	Bad or Very Bad Health
Kemptown – Brighton and Hove 031C	Brighton and Hove	19.02%
Hollington – Hastings 003C	Hastings	13.26%
Hollington – Hastings 003E	Hastings	13.26%
Hampden Park South – Eastbourne 004A	Eastbourne	12.20%
Whitehawk – Brighton and Hove 025E	Brighton and Hove	12.12%
Central St Leonards – Hastings 011B	Hastings	11.93%
Hollington – Hastings 003A	Hastings	11.91%
Bexhill North & Sidley – Rother 007E	Rother	11.80%
Whitehawk – Brighton and Hove 025C	Brighton and Hove	11.47%
Whitehawk – Brighton and Hove 025D	Brighton and Hove	11.31%
Broomgrove – Hastings 005A	Hastings	11.16%
Hollingdean & Moulsecoomb West – Brighton and Hove 008A	Brighton and Hove	11.16%
Broomgrove – Hastings 005D	Hastings	10.95%
Bexhill North & Sidley – Rother 007A	Rother	10.79%
Hangleton South – Brighton and Hove 013B	Brighton and Hove	10.68%
Heene – Worthing 010A	Worthing	10.40%
Bevendean & Moulsecoomb East – Brighton and Hove 009A	Brighton and Hove	10.29%
Selsey – Chichester 014E	Chichester	10.21%
Hangleton North – Brighton and Hove 006D	Brighton and Hove	10.00%
Bognor Regis Central – Arun 017F	Arun	9.86%
Source: Census 2021		

## People living in Brighton and Hove have lower healthy life expectancy than other Sussex areas, with those living in West Sussex more likely to live for longer in good health

The healthy life expectancy measure below shows the years a person can expect to live in good health based on contemporary mortality rates and prevalence of self-reported good health.

Brighton and Hove has the lowest healthy life expectancy in Sussex, with women and men expected to live in good health for 61.5 and 60.6 years, respectively. These figures are below both the South East (64.4 for women, 63.5 for men) and England averages (61.9 for women, 61.5 for men), highlighting the area's poorer health outcomes. East Sussex performs slightly better but still falls short of regional benchmarks. In contrast, West Sussex fares best, with a healthy life expectancy of 64.9 years for women and 63.8 years for men, exceeding both regional and national averages. This data reinforces the pattern of poorer health outcomes in more deprived and urban parts of Sussex.

Area Name	Female	Male
Brighton and Hove	61.50	60.60
East Sussex	62.24	61.81
West Sussex	64.86	63.79
South East	64.40	63.54
England	61.88	61.52
Source: Office for National Statistics (ONS), 2021-2023		

Building on this overview of health deprivation, general health and healthy life expectancy, the following sections explore the key factors contributing to health inequalities across Sussex. These include long-term health and disability, life expectancy and mortality, access to health services, mental health, informal care, child health, health behaviours, general wellbeing and healthy inequalities. Together, these topics help uncover the complex and interconnected drivers behind poor health outcomes in the region.



# Long-term Health and Disability

Living with a long-term health condition or disability can significantly affect an individual's quality of life, economic participation and use of or access to services. This section explores the prevalence and distribution of key chronic conditions such as cancer, diabetes, chronic obstructive pulmonary disease (COPD), heart disease and mental health-related disabilities across Sussex areas. These insights are essential for designing effective prevention strategies, improving access to care and supporting people to live independently and with dignity.

## Disability benefit claims are highest in Hastings, Eastbourne, and Brighton and Hove – with nearly one-third of working-age residents claiming in some neighbourhoods

The table below gives an overview of key indicators of long-term health and disability across East Sussex, West Sussex, the South East and England. The cells shaded green show the areas which fare the worst on each measure.

The data in the table highlights notable health disparities within Sussex, with East Sussex facing more severe disability and health-related challenges. East Sussex consistently records higher proportions of disability benefit claimants – including Personal Independence Payment (PIP) recipients – across all age and gender groups compared to West Sussex and the wider South East. It also shows a larger share of economically inactive individuals due to long-term sickness or disability and a higher illness and disability ratio, indicating a greater overall challenge of health issues. In contrast, West Sussex displays substantially lower rates, closer to or below regional averages. These patterns suggest that East Sussex residents experience more pronounced health difficulties, posing ongoing social and economic challenges for the area.

Indicator	East Sussex	West Sussex	South East	England
Disability Benefit Claimants (PIP + DLA) as proportion of total population	8.33	6.21	6.53	8.04
Personal Independence Payment (PIP) as proportion of working age population	10.01%	7.15%	7.21%	9.41%
Personal Independence Payment (PIP), female	10.80%	7.96%	7.89%	10.22%
Personal Independence Payment (PIP), male	9.17%	6.31%	6.50%	8.58%
Personal Independence Payment (PIP), claimants aged 16-24	8.53%	6.08%	6.16%	6.10%
Proportion of people on UC Health Journey: Total	6.16%	4.24%	4.27%	5.73%
Proportion of terminally ill Universal Credit claimants	0.04%	0.03%	0.02%	0.03%
Disabled and economically inactive due to long-term sick/disability (Census 2021)	17.46%	14.81%	15.79%	18.99%
IoD 2025 Comparative illness and disability ratio indicator	108.50	85.60	90.86	113.29

Source: PIP + DLA (PIP Jan-2025, DLA Nov-2024), PIP (Jan-2025), UC (Dec-2024), Census 2021, IoD 2025

The table below shows the proportion of disability benefit recipients amongst children (0-15) receiving Disability Living Allowance (DLA), working-age people receiving DLA or PIP and older people receiving DLA or Attendance Allowance. The cells shaded green show the areas which fare the worst on each measure.

Hastings and Eastbourne stand out as the areas with the greatest disability-related challenges in Sussex. Hastings has the highest proportion of disability claimants among children (9.23%), working-age adults (14.71%), and older people (17.75%), all well above the England averages. Eastbourne follows closely, with similarly elevated rates across these groups. This suggests that Hastings and Eastbourne face more severe social and health challenges compared to other parts of Sussex, the South East and England.

Area Name	0-15 receiving disability benefits (DLA)	Working age receiving disability benefits (DLA+PIP)	Older people receiving disability benefits (DLA+AA)
Adur	7.87%	9.74%	16.50%
Arun	7.32%	9.95%	15.46%
Brighton and Hove	7.81%	9.23%	15.99%
Chichester	5.71%	7.36%	12.71%
Crawley	7.01%	7.99%	15.35%
Eastbourne	9.35%	12.59%	16.94%
Hastings	9.23%	14.71%	17.75%
Horsham	5.24%	5.81%	11.94%
Lewes	9.29%	10.37%	14.83%
Mid Sussex	5.91%	5.69%	12.19%
Rother	8.79%	11.76%	15.35%
Wealden	7.36%	7.45%	13.42%
Worthing	7.77%	9.29%	16.14%
East Sussex	8.64%	10.92%	15.26%
West Sussex	6.54%	7.78%	14.05%
South East	6.95%	7.79%	14.22%
England	6.95%	9.81%	16.68%
Source: DWP (PIP - Jan 2025, DLA and AA - Nov 2024)			

The table below shows the 20 LSOA neighbourhoods in Sussex with the highest proportion of people aged under 65 years claiming disability benefits (DLA or PIP claimants).

At a neighbourhood level, the highest concentrations of under-65 disability benefit claimants are predominantly found in Brighton and Hove, Hastings, and Eastbourne. Kemptown in Brighton and Hove has the highest rate at 31.7%, followed by several other Brighton neighbourhoods exceeding 20%, including Whitehawk and Hollingdean & Moulsecoomb West. Hastings also features multiple LSOAs with rates above 20%, with Hollington and Broomgrove particularly affected, while Eastbourne areas including Hampden Park South and Pier show similarly elevated claimant proportions.

These figures indicate severe pockets of disability-related disadvantage within Sussex, with some neighbourhoods having nearly one-third of their working-age population claiming disability benefits.

LSOA	Local Authority	% under 65 years claiming disability benefits
Kemptown – Brighton and Hove 031C	Brighton and Hove	31.73%
Whitehawk – Brighton and Hove 025E	Brighton and Hove	27.85%
Hollington – Hastings 003E	Hastings	26.65%
Broomgrove – Hastings 005A	Hastings	26.27%
Whitehawk – Brighton and Hove 025B	Brighton and Hove	26.19%
Hollington – Hastings 003C	Hastings	25.34%
Hampden Park South – Eastbourne 004A	Eastbourne	23.49%
Broomgrove – Hastings 005D	Hastings	23.47%
Lewes West – Lewes 005B	Lewes	23.28%
Bexhill North & Sidley – Rother 007E	Rother	23.19%
Whitehawk – Brighton and Hove 025C	Brighton and Hove	22.99%
Hollington – Hastings 003A	Hastings	22.95%
Pier – Eastbourne 010C	Eastbourne	22.40%
Hollingdean & Moulsecoomb West – Brighton and Hove 008A	Brighton and Hove	22.17%
Bexhill North & Sidley – Rother 007D	Rother	20.87%
Whitehawk – Brighton and Hove 025D	Brighton and Hove	20.47%
Ore – Hastings 004B	Hastings	20.27%
Langney East – Eastbourne 003B	Eastbourne	20.13%
Bevendean & Moulsecoomb East – Brighton and Hove 009C	Brighton and Hove	20.09%
Hangleton South – Brighton and Hove 013B	Brighton and Hove	19.97%
Source: Consumer Data Research Centre (CDRC), 2024		

## Poor health outcomes are more prevalent across East Sussex than the regional and national averages for the majority of health conditions

The table below shows the estimated prevalence of a number of different health conditions, ordered by the highest incidence across England. Cells shaded green show the area with the highest prevalence of each health condition.

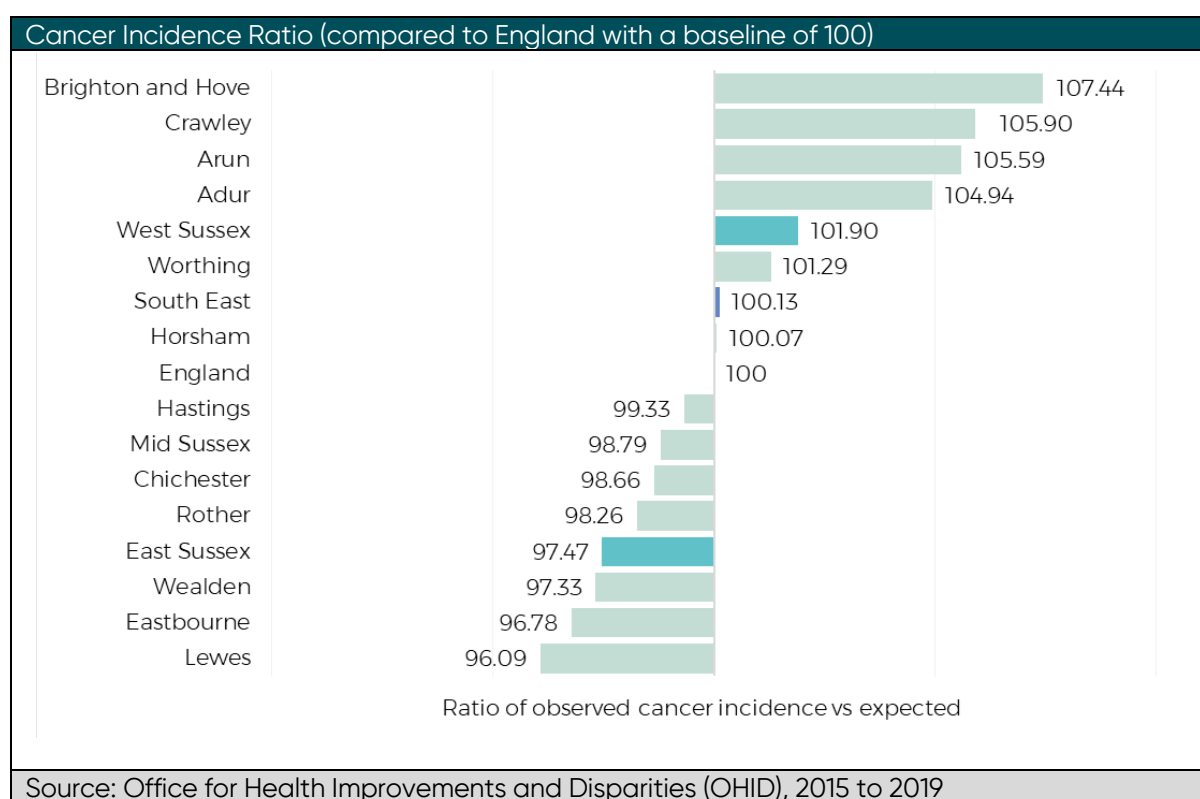
East Sussex shows a notably higher prevalence of 14 out of the 18 health conditions listed in comparison to West Sussex, the South East and England averages – this includes high blood pressure, chronic kidney disease, cancer, coronary heart disease, stroke and dementia. These elevated rates highlight significant ongoing health challenges in East Sussex, particularly related to cardiovascular and chronic illnesses. West Sussex also fares worse than the South East average on many conditions, including diabetes, pre-diabetes, asthma and stroke, but generally has lower rates than East Sussex.

Indicator	East Sussex	West Sussex	South East	England
High Blood Pressure prevalence	17.43%	16.32%	14.69%	14.63%
Obesity prevalence	10.47%	10.48%	10.31%	11.55%
Diabetes prevalence	7.48%	7.58%	6.92%	7.54%
Pre-Diabetes prevalence	7.65%	9.23%	6.51%	7.18%
Asthma prevalence	7.06%	7.26%	6.46%	6.60%
Chronic Kidney Disease prevalence	6.19%	4.84%	4.10%	4.27%
Cancer prevalence (diagnosis since 2003)	4.93%	4.44%	4.00%	3.56%
Coronary Heart Disease prevalence	3.64%	3.51%	2.83%	3.04%
Atrial Fibrillation prevalence	3.40%	2.85%	2.40%	2.18%
COPD prevalence	2.29%	1.77%	1.66%	1.88%
Stroke and Transient Ischaemic Attack prevalence	2.53%	2.20%	1.86%	1.88%
Heart Failure prevalence	1.18%	1.01%	0.96%	1.01%
Osteoporosis prevalence	1.42%	1.14%	1.22%	0.94%
Epilepsy prevalence	0.88%	0.78%	0.78%	0.82%
Rheumatoid Arthritis prevalence	0.88%	0.85%	0.77%	0.78%
Dementia prevalence	1.10%	1.00%	0.80%	0.76%
Peripheral Arterial Disease prevalence	0.73%	0.57%	0.52%	0.58%
Learning Disabilities prevalence	0.64%	0.57%	0.53%	0.56%
Source: NHS Digital via House of Commons Library, 2022/2023				

## Brighton and Hove and parts of West Sussex show the highest cancer incidence, exceeding the England average and showing regional variation in cancer outcomes

The chart below shows the number of cases of cancer as an age-sex standardised registration ratio (number of new cases as a percentage of expected new cases), calculated relative to England.

Brighton and Hove has the highest cancer incidence ratio in Sussex at 107.4, notably above the England average. Local Authorities in West Sussex – Crawley (105.9), Arun (105.6) and Adur (104.9) – also report elevated cancer rates above the national benchmark. These figures highlight a concentration of higher cancer incidence in urban and coastal parts of West Sussex and Brighton and Hove, suggesting these areas face greater cancer related health challenges compared to much of Sussex and England overall.



# Life Expectancy and Mortality

Life expectancy remains one of the clearest indicators of population health and this section highlights where people in Sussex are living longer – and where notable inequalities persist. In addition to overall life expectancy, the data explores premature mortality and avoidable deaths under 75, with breakdowns by cause such as cancer, circulatory and respiratory diseases. This section also considers infant and child mortality to build a fuller picture of the health challenges facing people across Sussex.

Life expectancy is lower for males than females across all Sussex areas, with the lowest estimates in Hastings where life expectancy is notably below the England average

Life expectancy at birth is the measure of the age a person being born today can expect to live until. Figures are derived from rebased mid-year population estimates aligned with the most recent Census in combination with death registrations to calculate mortality rates used in life tables.

The cells shaded green show the areas which fare the worst on each measure.

The data reveals that Hastings fares worst in Sussex for life expectancy, with males living on average 77 years and females 81 years – both below the England averages of 79 and 83 years respectively. Other areas with lower life expectancy in Sussex include Brighton and Hove, Eastbourne, Worthing and Arun, where male life expectancy is around 79 years and female life expectancy around 83 years, although this matches the national average.

In contrast, areas like Horsham, Lewes, Mid Sussex and Wealden record higher life expectancy, with males living up to 82 years and females up to 85 years. This highlights stark regional inequalities within Sussex, with urban and coastal towns facing greater health and longevity challenges.

Area Name	Male	Female
Adur	81	84
Arun	79	84
Brighton and Hove	79	83
Chichester	80	84
Crawley	80	84
Eastbourne	79	83
Hastings	77	81
Horsham	82	85
Lewes	81	85
Mid Sussex	81	85
Rother	80	83
Wealden	82	84
Worthing	79	83

East Sussex	80	83
West Sussex	80	84
South East	80	84
England	79	83
Source: Office for National Statistics (ONS), 2020 to 2022		

## Inequality in life expectancy is higher amongst males than females across all Sussex local authorities, but lower than average across England

The table below shows a measure of inequality in life expectancy at birth within each local authority. Life expectancy at birth is calculated for each deprivation decile of LSOAs within each area, then the slope index of inequality (SII) is calculated based on these figures. A higher SII means a larger gap in life expectancy between the most and least deprived areas. The cells shaded green in the table show the areas which fare the worst on each measure and represent areas with greater health inequality.

While there are clear gaps in life expectancy linked to deprivation within Sussex local authorities, all areas report smaller inequalities than the England average (10.5 years for males, 8.3 for females). Arun and Brighton and Hove have the largest gaps in Sussex, with male inequalities around 9–10 years and female inequalities between 6–7.6 years, but are below the England average.

Other areas such as Eastbourne, Hastings, and Worthing also show noticeable but comparatively lower inequalities. Meanwhile, Chichester, Horsham, Adur, and Mid Sussex have the smallest gaps. Overall, this suggests that while deprivation related health inequalities exist across Sussex, they are less extreme than seen across England as a whole.

Area Name	Male	Female
Adur	3.96	5.66
Arun	10.17	7.59
Brighton and Hove	9.43	6.01
Chichester	5.21	4.15
Crawley	7.02	6.06
Eastbourne	8.18	6.79
Hastings	8.40	5.14
Horsham	3.72	4.37
Lewes	5.69	5.46
Mid Sussex	4.71	2.89
Rother	5.98	7.60
Wealden	5.07	4.30
Worthing	7.01	8.01

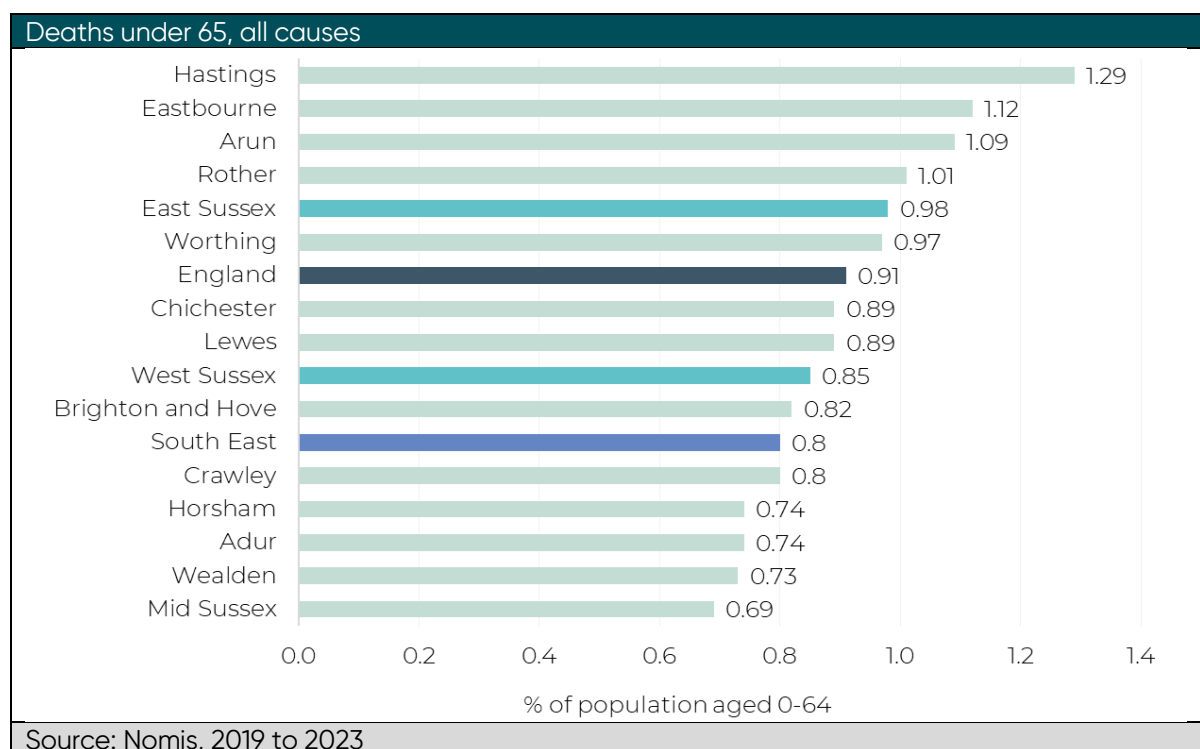


South East	8.53	6.62
England	10.50	8.32
Source: Office for Health Improvements and Disparities (OHID) , 2021 – 23		

## Higher under-65 death rates concentrated in coastal and more deprived parts of Sussex

The chart below shows the crude rate of mortality of those aged under 65 for all causes of death across Sussex areas, displayed as a proportion of the total population aged 0-64 years.

As the chart shows, Hastings has a notably higher rate of premature mortality (1.29%), followed by Eastbourne (1.12%) and Arun (1.09%) – all coastal areas with high levels of deprivation. These figures are well above the England (0.91%) and South East (0.80%) averages. Inland and more affluent areas such as Mid Sussex (0.69%), Wealden (0.73%), and Horsham (0.74%) have the lowest rates, suggesting a clear health divide, with premature mortality more prevalent in deprived coastal communities.



## Premature deaths under 65 in Sussex are driven by circulatory diseases, with coastal areas showing higher rates across all causes

The table below shows mortality rates under 65 by cause of death across Sussex areas, the South East and England.

Area Name	Respiratory system diseases	External causes	Digestive system diseases	Circulatory system diseases
Adur	50.82	40.66	40.66	538.68
Arun	45.58	135.02	107.5	944.26
Brighton and Hove	46.51	173.39	85.68	658.89
Chichester	31.28	72.62	74.85	769.75
Crawley	34.96	109.88	63.93	688.28
Eastbourne	76.54	197.18	99.89	1,054.64
Hastings	100.14	167.36	130.32	973.97
Horsham	23.05	102.84	41.67	605.52
Lewes	41.28	157.13	69.24	844.23
Mid Sussex	20.63	95.72	61.06	570.17
Rother	56.01	70.01	94.9	860.37
Wealden	26.01	78.04	47.83	521.94
Worthing	47.61	75.49	99.87	846.61
East Sussex	56.3	129.73	83.71	815.61
West Sussex	34.51	96.12	71.54	717.43
South East	44.75	108.18	70.99	667.65
England	56.92	123.89	83.85	773.44
Source: Nomis, 2019 to 2023				

The data shows that circulatory diseases are one of the leading causes of death under 65 across all Sussex areas, with the highest rates in Eastbourne (1,054.6 per 100,000), Hastings (974.0), and Arun (944.3). Coastal areas also stand out for elevated death rates from other causes – particularly respiratory diseases and digestive conditions – with Hastings and Eastbourne again among the highest. External causes (such as injuries and suicide) are notably high in Brighton and Hove, Hastings and Eastbourne. In contrast, more affluent inland areas like Mid Sussex and Wealden have consistently lower death rates across all categories, reflecting wider health inequalities across the region.

# Health Services

Access to timely and appropriate healthcare services is a cornerstone of good health outcomes. This section explores the availability and use of NHS services across Sussex, including emergency admissions, hospital accessibility and GP provision. Indicators on travel time to services also help to highlight geographic and transport related inequalities that can impede care. Understanding where demand for services is highest and where access is limited supports planning for a more equitable and efficient healthcare system. These findings can guide resource allocation and service design in response to the unique needs of different communities across Sussex.

## Rural Sussex faces health access issues, while urban areas struggle with service availability

The table below shows an overview of measures that summarise access to health services across Sussex areas. It includes:

- The Access to Healthy Assets and Hazards (AHAH) Health Services domain – measuring accessibility in health services, which includes access to GPs, hospitals, pharmacies, dentists and leisure services. A higher score indicates that an area has a poorer health-related environment.
- AHAH Drive-time to nearest GP Practice (minutes)
- Travel times in minutes to a GP (general practitioner)/Hospital by public transport/walking and cycling.
- GP appointments per 1,000 patients based on NHS England data on the number of patients registered at the practice and the number Full-Time Equivalent (FTE) GPs.

The cells shaded green show the areas that fare the worst on each of the measures.

Area Name	AHAH Health Services domain (Score)	AHAH drive time to GP	Travel time to GP (public transport/walk)	Travel time to Hospital (public transport/walk)	GP appt per 1,000 patients
Adur	-0.19	2.45	11	36	490.67
Arun	0.16	2.84	13	50	615.39
Brighton and Hove	-0.79	1.78	9	29	443.49
Chichester	0.53	5.24	19	49	568.43
Crawley	-0.08	2.29	10	57	477.27
Eastbourne	-0.38	2.49	12	30	560.26
Hastings	-0.38	1.94	11	25	514.56
Horsham	0.47	4.6	18	73	471.29
Lewes	0.05	3.83	14	46	505.7
Mid Sussex	0.25	4.11	14	42	463.49
Rother	0.34	4.43	16	51	624.78
Wealden	0.46	4.79	17	58	596.71
Worthing	-0.48	1.93	12	27	548.61

East Sussex	0.07	3.65	14	44	563.73
West Sussex	0.14	3.48	14	49	522.63
South East	0.06	3.49	14	45	504.73
England	-0.11	3.06	13	41	513.12
Source: AHAH (Consumer Data Research Centre (CDRC), 2024); Travel time (DfT, 2019); GP appt (NHS England, 2022)					

As the data in the table shows, access to health services varies widely across Sussex, with rural local authorities such as Chichester, Horsham, Wealden and Rother facing the greatest challenges. These places score poorly on the AHAH Health Services domain and also have some of the longest average drive times to GPs, with Chichester at 5.24 minutes and Wealden at 4.79 minutes. Public transport and walking times to hospitals are especially long in Horsham (73 minutes) and Wealden (58 minutes), highlighting the physical barriers many rural residents face when trying to reach health services.

In contrast, urban areas such as Brighton and Hove and Crawley have much shorter travel times but are affected by low availability of GP appointments, with Brighton and Hove offering just 443 appointments per 1,000 patients – the lowest in the region. Semi-urban areas Mid Sussex and Horsham also record lower availability of GP appointments. This suggests that while geography limits access in rural areas, demand and workforce pressures are more significant issues in urban settings, creating a dual challenge in ensuring equitable healthcare across the county.

## Low GP availability in Sussex is concentrated in urban areas across East Grinstead, Hastings and parts of Brighton and Hove

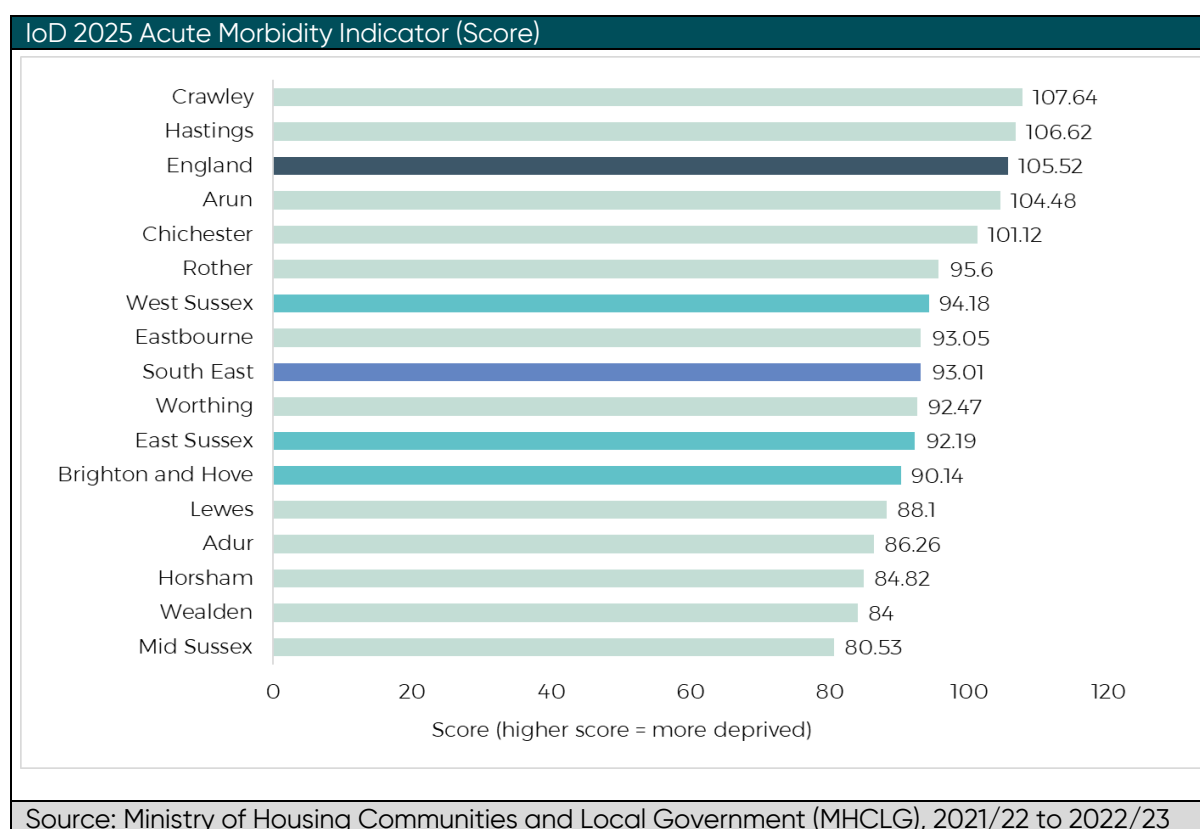
The table below shows the 20 LSOAs in Sussex which have the lowest availability of GPs per 1,000 patients. Besides East Grinstead, the areas with low GP-to-population ratios include parts of Hastings (Central St Leonards and Hollington) and Brighton and Hove (Coldean & Moulsecoomb North).

LSOA	Local Authority	GP per 1,000
East Grinstead West & South – Mid Sussex 004A	Mid Sussex	112.87
East Grinstead West & South – Mid Sussex 004B	Mid Sussex	115.89
East Grinstead East – Mid Sussex 003E	Mid Sussex	137.81
East Grinstead Central & North – Mid Sussex 001H	Mid Sussex	148.17
East Grinstead Central & North – Mid Sussex 001G	Mid Sussex	181.83
East Grinstead East – Mid Sussex 003D	Mid Sussex	190.19
East Grinstead East – Mid Sussex 003A	Mid Sussex	235.44
East Grinstead West & South – Mid Sussex 004D	Mid Sussex	254.93
Central St Leonards – Hastings 011B	Hastings	256
East Grinstead East – Mid Sussex 003C	Mid Sussex	268.68
Hollington – Hastings 003C	Hastings	269.34
East Grinstead West & South – Mid Sussex 004C	Mid Sussex	277.36
East Grinstead West & South – Mid Sussex 004E	Mid Sussex	279.74
Coldean & Moulsecoomb North – Brighton and Hove 002B	Brighton and Hove	280.14

Central St Leonards – Hastings 011C	Hastings	285.06
East Grinstead Central & North – Mid Sussex 001A	Mid Sussex	291.01
East Grinstead Central & North – Mid Sussex 001D	Mid Sussex	300.09
East Grinstead Central & North – Mid Sussex 001B	Mid Sussex	301.07
East Grinstead Central & North – Mid Sussex 001C	Mid Sussex	306.03
East Grinstead Central & North – Mid Sussex 001E	Mid Sussex	306.89
Source: Consumer Data Research Centre (CDRC), 2024		

## Emergency admissions are higher in urban neighbourhoods or urban areas located in or near seaside towns

The chart below shows the Indices of Deprivation (IoD) 2025 Acute Morbidity Indicator which measures the level of emergency admissions to hospital, based on administrative records of inpatient admissions. The table below also shows the 20 LSOAs which have the highest acute morbidity scores across Sussex, meaning neighbourhoods that are facing greater healthcare challenges related to acute conditions requiring urgent hospital care.



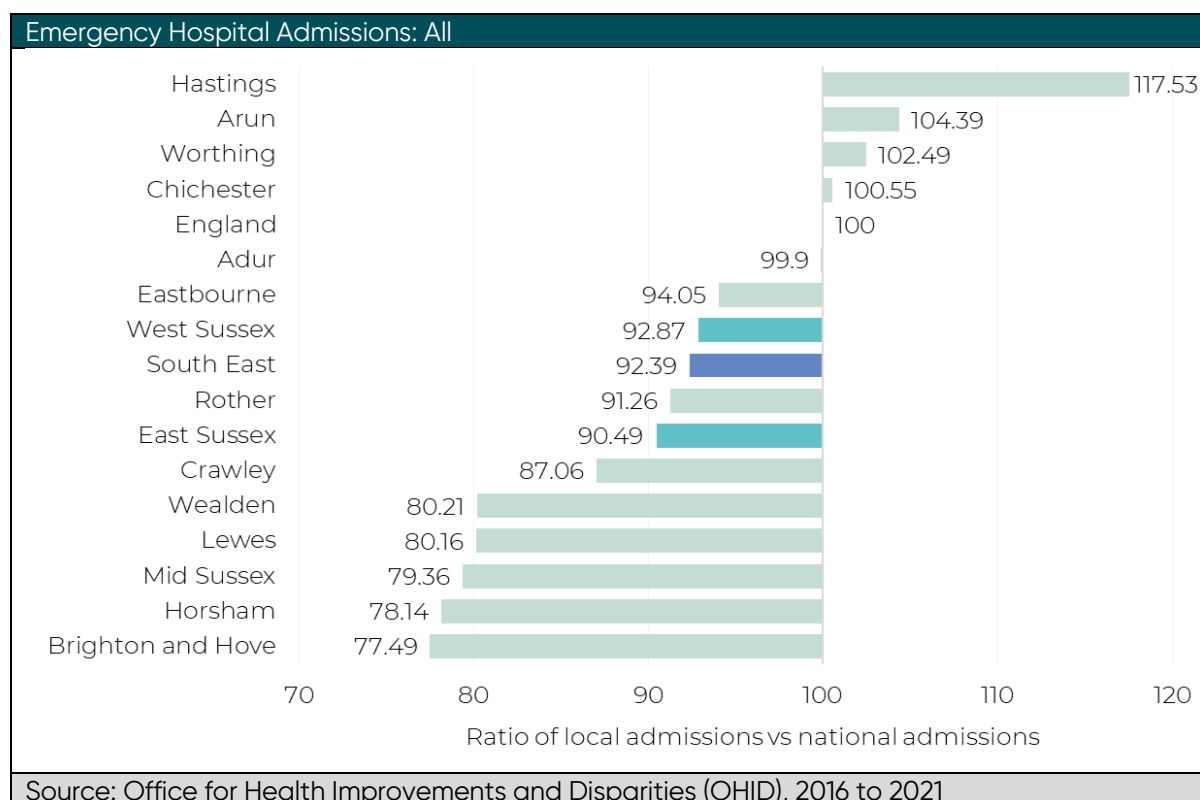


The worst affected neighbourhoods are primarily concentrated within the local authorities of Hastings, Crawley and Arun. Hastings' Hollington LSOA (003E) has the highest acute morbidity score of 166.40. Arun and Crawley each have multiple LSOAs appearing on the list, reflecting a widespread challenge of emergency admissions in these regions.

LSOA	Local Authority	IoD 2025 Acute morbidity (Score)
Hollington - Hastings 003E	Hastings	166.40
Southgate - Crawley 007C	Crawley	157.93
Bewbush - Crawley 010A	Crawley	154.48
Whitehawk - Brighton and Hove 025B	Brighton and Hove	152.62
Bognor Regis Central - Arun 017D	Arun	151.08
Central Hastings - Hastings 009B	Hastings	149.22
Southgate - Crawley 007A	Crawley	146.43
South Bersted - Arun 014A	Arun	145.77
St James's Street & Queen's Park - Brighton and Hove 030C	Brighton and Hove	144.69
Hawthorn Road - Arun 016B	Arun	144.03
Broadfield East - Crawley 013D	Crawley	143.61
Hollingdean & Moulsecoomb West - Brighton and Hove 008A	Brighton and Hove	143.00
Pier - Eastbourne 010C	Eastbourne	142.25
Central St Leonards - Hastings 011B	Hastings	140.66
Bognor Regis Central - Arun 017B	Arun	140.34
Easebourne & Petworth - Chichester 005E	Chichester	139.20
Northbrook - Worthing 006F	Worthing	138.63
Tangmere, Mundham & Hunston - Chichester 012B	Chichester	137.89
Bewbush - Crawley 010C	Crawley	136.86
Wick & Toddington - Arun 004H	Arun	136.80
Source: Ministry of Housing Communities and Local Government (MHCLG), 2015 to 2017		

## Hastings and parts of Worthing, Arun and Chichester have the highest emergency hospital admissions in Sussex

The chart below shows emergency admissions to hospital for all causes as an indirectly age-standardised ratio. The NHS Data Model and Dictionary defines emergency admissions as those which are 'unpredictable and at short notice because of clinical need'. Data shows the ratio of local admissions vs national admissions where England is set to a baseline of 100.



The highest prevalence of emergency hospital admissions in Sussex occur in Hastings, with several areas there showing the highest admission ratios (Broomgrove, Hollington, St Leonards and Central Hastings). Other towns with notably high emergency admission rates include Worthing, Arun (Littlehampton, South Bersted, Bognor Regis) and Chichester (Selsey). Brighton and Hove (Whitehawk) and Eastbourne (Pier) also have specific areas with elevated admission ratios, but Hastings stands out as the area with the highest rates of emergency hospital admissions, highlighting significant local health challenges.

MSOA	Local Authority	Emergency Admissions Ratio (All)
Broomgrove - Hastings 005	Hastings	162.67
Hollington - Hastings 003	Hastings	157.12
Northbrook - Worthing 006	Worthing	133.73
Central St Leonards - Hastings 011	Hastings	133.21
Whitehawk - Brighton and Hove 025	Brighton and Hove	130.61
Bexhill North & Sidley - Rother 007	Rother	128.95
Littlehampton West and River - Arun 011	Arun	128.41

Selsey - Chichester 014	Chichester	127.54
Wick & Toddington - Arun 004	Arun	126.94
College Lane & Oaklands - Chichester 008	Chichester	126.02
South Bersted - Arun 014	Arun	125.98
Pier - Eastbourne 010	Eastbourne	125.01
Central Hastings - Hastings 009	Hastings	124.35
Ore - Hastings 004	Hastings	124.28
Bognor Regis Central - Arun 017	Arun	123.17
East Worthing - Worthing 009	Worthing	122.24
Durrington North - Worthing 003	Worthing	119.36
Hawthorn Road - Arun 016	Arun	118.38
Tangmere, Mundham & Hunston - Chichester 012	Chichester	117.49
Braybrooke & Bohemia - Hastings 008	Hastings	115.37
Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021		

# Mental Health

Mental health is a major public health concern, often closely linked to social isolation, economic hardship and poor physical health. This section draws on a wide range of indicators – including suicide rates, self-harm, diagnoses of depression, serious mental illness and prevalence of loneliness – to illustrate the scope of mental health needs across Sussex. These insights are critical to developing more compassionate, inclusive policies that prioritise early intervention, community support and access to specialist services.

## Hastings and Eastbourne experience notably worse mental health outcomes compared to England averages

The table on the next page provides a summary of a collection of indicators that measure mental health outcomes across Sussex areas. It includes the following measures:

- The Indices of Deprivation (IoD) 2025 Mental Health Indicator is a broad measure of levels of mental ill health in the local population. The definition used for this indicator includes mood (affective), neurotic, stress-related and somatoform disorders, based on: prescribing data; hospital episodes data, suicide mortality data and health benefits data. Although none of the four sources on their own provide a comprehensive measure of mood and anxiety disorders, used in combination they represent a large proportion of all those suffering mental ill health. A higher score represents higher levels of mental ill health.
- The Small Area Mental Health Index (SAMHI) is a composite annual measure of population mental health and combines data on mental health from multiple sources (NHS – Mental health related hospital attendances, Prescribing data – Antidepressants, QOF – depression, and DWP – claimants of Disability Living Allowance (DLA) and Personal Independence Payment (PIP) for mental health reasons and learning difficulties) into a single index – a higher score represents higher levels of need.
- The Loneliness Index is created by using GP prescription data to find areas with above-average prescriptions for five conditions where loneliness has been shown to be a risk factor: Alzheimer's, depression, high blood pressure, anxiety and insomnia.
- PIP mental health claimants – Shows the proportion of working age people receiving Personal Independence Payment (PIP) for mental health reasons.
- IB/ESA mental health claimants – The figures for the number and proportion of people with mental health issues are based on the claimants of Incapacity Benefit who are claiming due to mental health related conditions.

The cells shaded green highlight the areas that fare worst on each of these measures.

Hastings shows the highest mental health needs across Sussex, with an IoD Mental Health score of 0.84 (compared to -0.02 for England) and the highest Small Area Mental Health Index score at 1.71. It also has the highest Loneliness Index (2.76) and the largest proportions of mental health claimants: 5.52% for PIP and 2.66% for IB/ESA, well above the England averages of 3.62% and 1.70%. Eastbourne and Worthing also face notably high mental health challenges, with Eastbourne's IoD score at 0.71, SAMHI at 1.42, and PIP claimant rate at 4.76%, while Hastings scores 0.40, 1.28, and 4.01% respectively. In contrast, Horsham (IoD -0.49, PIP 0.96%) and Mid Sussex (IoD -0.45, PIP 1.02%) report much lower levels of mental ill health. Overall, East Sussex exhibits greater mental health and loneliness issues than West Sussex and the South East, reflecting wider health challenges.

Area Name	IoD 2025 Mental Health (Score)	Small Area Mental Health Index (Score)	Loneliness Index (Score)	PIP mental health claimants	IB/ESA mental health claimants
Adur	0.12	1.22	0.72	3.26%	1.69%
Arun	0.25	1.25	0.7	3.62%	1.77%
Brighton	0.34	0.44	1.52	3.89%	2.18%
Chichester	-0.11	0.8	1.39	2.74%	1.17%
Crawley	-0.23	0.56	-0.29	2.91%	1.30%
Eastbourne	0.71	1.42	1.1	4.76%	2.32%
Hastings	0.84	1.71	2.76	5.52%	2.66%
Horsham	-0.49	0.21	1.24	2.12%	0.96%
Lewes	0.34	0.65	1.02	3.92%	1.77%
Mid Sussex	-0.45	0.19	0.86	2.17%	1.02%
Rother	0.38	1.15	1.93	4.23%	1.83%
Wealden	-0.16	0.66	1.61	2.56%	1.09%
Worthing	0.40	1.28	1.11	3.44%	1.99%
East Sussex	0.35	1.06	1.66	4.01%	1.84%
West Sussex	-0.10	0.74	0.84	2.84%	1.37%
South East	-0.21	0.57	0.88	2.91%	1.30%
England	-0.02	0.67	0.07	3.62%	1.70%

Source: IoD (MHCLG, 2025); SMHI (Place-Based Longitudinal Data Resource (PLDR), 2022); Loneliness Index (ONS Data Science Campus /NHS /Red Cross, 2019); PIP (DWP Jan-25); IB/ESA (DWP, May-24)

The 20 neighbourhoods listed in the table below are the LSOAs in Sussex with the most severe mental health challenges according to the Small Area Mental Health Index (SAMHI) scores. Hastings stands out with the highest concentration (e.g. Central Hastings, St Leonards and Hollington), underscoring significant mental health needs across the town. Worthing and Eastbourne also feature multiple neighbourhoods (e.g. Worthing Central, Heene, Upperton and Pier) reflecting widespread challenges. Rother's Bexhill areas and parts of Arun and Wealden also show prominent mental health challenges.

LSOA	Local Authority	SAMHI Index (Score)
St James's Street & Queen's Park - Brighton and Hove 030C	Brighton and Hove	3.32
Central Hastings - Hastings 009B	Hastings	3.23
West St Leonards - Hastings 010B	Hastings	3.23
Central St Leonards - Hastings 011B	Hastings	3.21
Worthing Central - Worthing 011D	Worthing	3.19
Heene - Worthing 010E	Worthing	2.98
Hollington - Hastings 003E	Hastings	2.96
Upperton - Eastbourne 008D	Eastbourne	2.93



Bexhill Central – Rother 011E	Rother	2.76
Hollington – Hastings 003C	Hastings	2.74
Hailsham Central & East – Wealden 015D	Wealden	2.7
Pier – Eastbourne 010A	Eastbourne	2.68
Westergate, Eastergate & Walberton – Arun 003F	Arun	2.65
Central St Leonards – Hastings 011E	Hastings	2.57
Heene – Worthing 010B	Worthing	2.55
King Edward's Parade – Eastbourne 011C	Eastbourne	2.54
Bexhill North & Sidley – Rother 007A	Rother	2.51
Langney East – Eastbourne 003E	Eastbourne	2.51
Heene – Worthing 010A	Worthing	2.49
Bexhill East & Pebsham – Rother 008B	Rother	2.46
Source: Place-Based Longitudinal Data Resource (PLDR), 2022		

Depression is most common in parts of West Sussex (Adur and Worthing), whilst Hastings and Eastbourne show both high depression rates and the highest prevalence of serious mental illness

The table below shows the estimated percentage of mental health issues by type. The estimates are calculated based on the number of people listed on GP registers and the number of people recorded as having the relevant health conditions. The cells shaded green highlight the areas that fare worst on each of these measures.

Adur reports the highest depression prevalence in Sussex at 19.02%, followed by Hastings (18.18%) and Eastbourne (17.46%), all well above the England average of 13.41%. Eastbourne and Brighton and Hove stand out with the highest prevalence of schizophrenia, bipolar disorder, and psychoses among Sussex areas at 1.37% and 1.36%, and a serious mental illness rate of 1.30%, both notably higher than the England averages of 0.99% and 0.90%. Hastings has the highest rates of serious mental illness (1.50%) and psychoses (1.66%), emphasising the notable mental health challenges in the area. Worthing, Rother and Lewes also show above average prevalence across these measures.

Area Name	Depression prevalence	Schizophrenia, bipolar disorder and psychoses	Serious Mental Illness prevalence
Adur	19.02%	1.05%	0.90%
Arun	13.93%	1.12%	1.00%
Brighton and Hove	13.43%	1.36%	1.30%
Chichester	11.74%	0.93%	0.80%
Crawley	13.35%	0.86%	0.80%
Eastbourne	17.46%	1.37%	1.30%
Hastings	18.18%	1.66%	1.50%
Horsham	11.22%	0.81%	0.70%

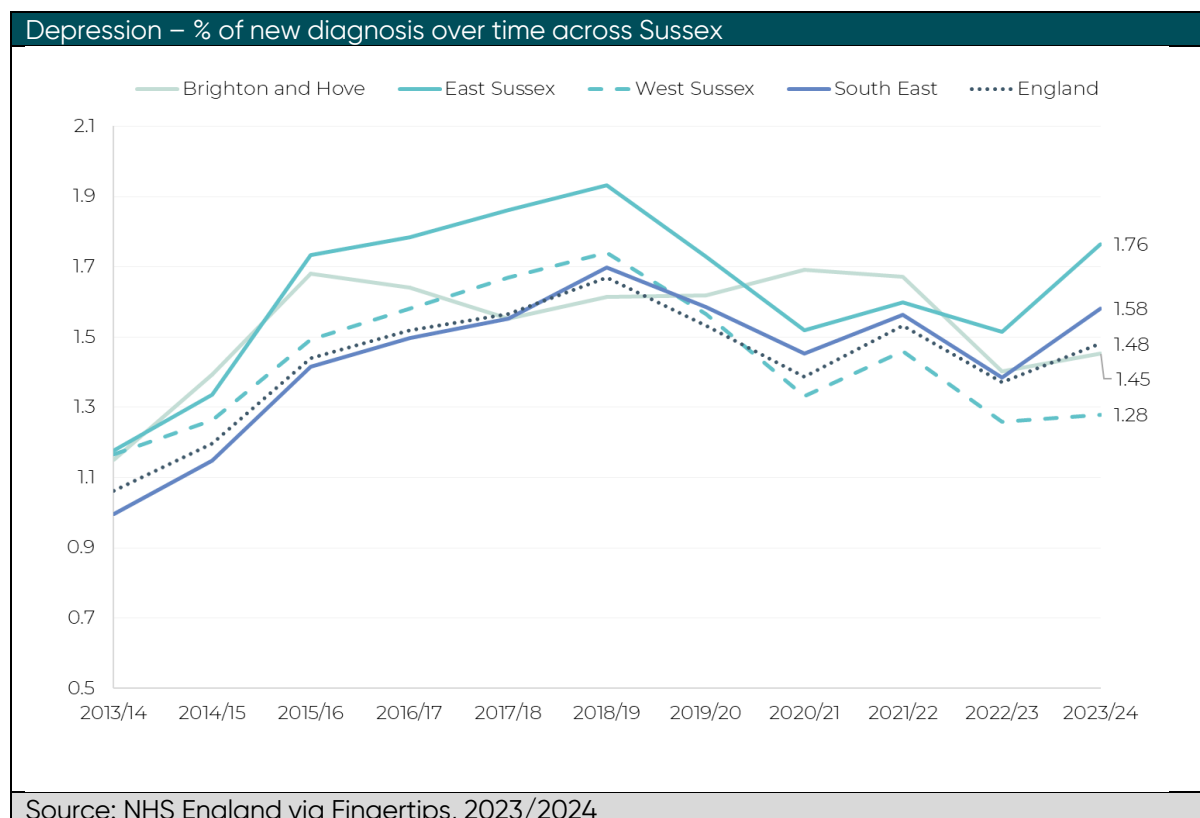
Lewes	14.55%	1.21%	1.10%
Mid Sussex	13.09%	0.80%	0.70%
Rother	15.42%	1.14%	1.00%
Wealden	14.93%	0.92%	0.90%
Worthing	16.21%	1.34%	1.20%
East Sussex	15.96%	1.22%	1.10%
West Sussex	13.61%	0.97%	0.90%
South East	13.83%	0.91%	0.80%
England	13.41%	0.99%	0.90%
Source: NHS Digital via House of Commons Library (SMI 2017/2018, Depression, Schizophrenia Prevalence 2022/2023)			

Depression prevalence in Sussex is notably high in several coastal urban areas. Adur stands out with multiple neighbourhoods consistently exceeding 19%. Similarly, Eastbourne shows high rates across Langney and Hampden Park, as does Worthing (Heene and Worthing Central) and Hastings (Central Hastings, Broomgrove and Hollington) – all indicating notable mental health challenges in these areas.

MSOA	Local Authority	Depression Prevalence
Hailsham East - Wealden 017	Wealden	21.50%
Cokeham & Sompting - Adur 006	Adur	21.36%
Langney West - Eastbourne 001	Eastbourne	21.29%
Heene - Worthing 010	Worthing	20.70%
Worthing Central - Worthing 011	Worthing	20.66%
East Worthing - Worthing 009	Worthing	20.38%
Central Hastings - Hastings 009	Hastings	20.31%
Marsh Barn & Widewater - Adur 007	Adur	20.20%
South Lancing - Adur 008	Adur	20.05%
Hailsham South & West - Wealden 016	Wealden	19.83%
Broomgrove - Hastings 005	Hastings	19.76%
North Lancing - Adur 003	Adur	19.60%
Hollington - Hastings 003	Hastings	19.19%
Central St Leonards - Hastings 011	Hastings	19.09%
Newhaven West - Lewes 009	Lewes	19.04%
Hampden Park North - Eastbourne 002	Eastbourne	18.99%
Langney East - Eastbourne 003	Eastbourne	18.98%
Stone Cross, Westham & Pevensey Bay - Wealden 020	Wealden	18.88%
Kingston & Southwick - Adur 004	Adur	18.68%
Hampden Park South - Eastbourne 004	Eastbourne	18.58%
Source: NHS Digital via House of Commons Library, 2022/2023		

## New diagnoses of depression have increased since 2022/2023, with notable increases in East Sussex areas compared to the England average

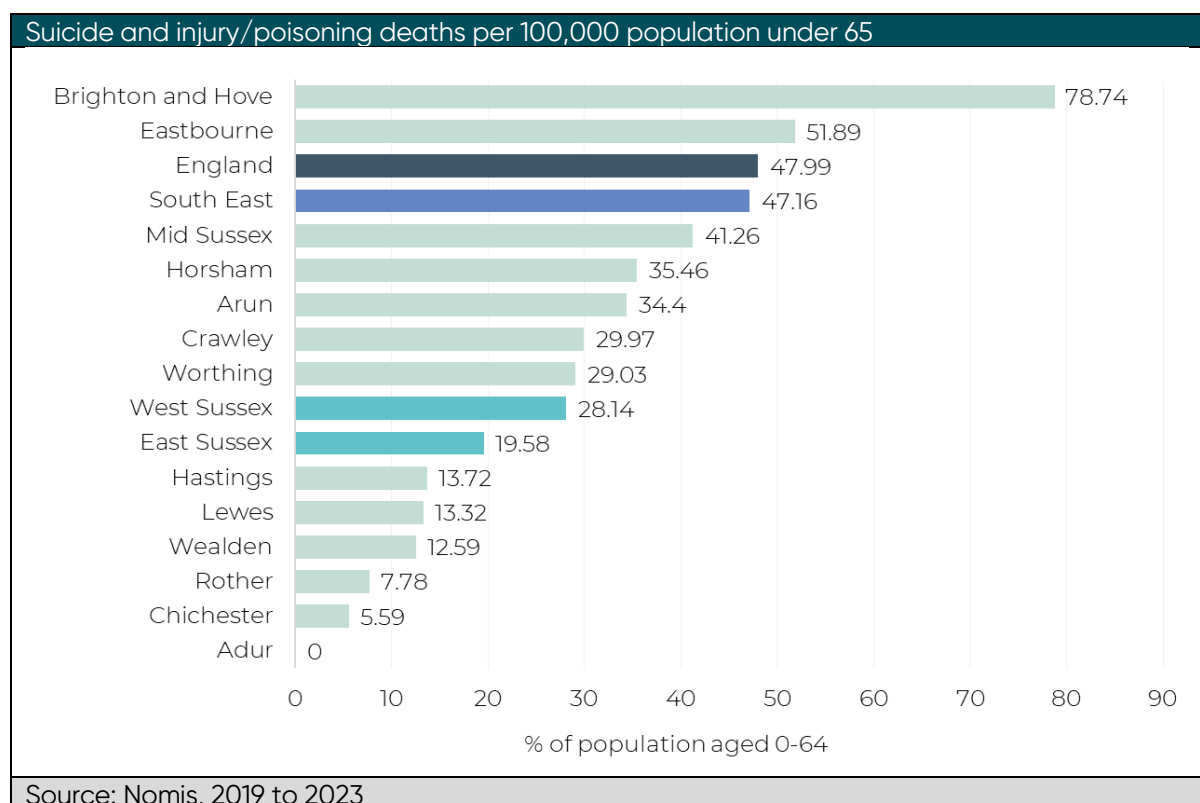
The chart below shows new diagnosis of depression over time based on the percentage of patients aged 18 and over with depression recorded on practice disease registers for the first time in the financial year.



New diagnoses of depression have increased since 2022/23, with East Sussex seeing a notable rise from 1.56 to 1.76 per 100 patients – well above the England average of 1.48. All areas showed a dip around 2020/21, likely due to the pandemic, before rates began to climb again. East Sussex has consistently had the highest rates, peaking at 1.93 in 2018/19, while West Sussex remains the lowest, falling to 1.28 in 2023/24. Brighton and Hove and the South East sit in the middle, with recent rates around 1.4 to 1.6. Overall, the trend shows a renewed rise in depression diagnoses, most sharply in East Sussex.

## Brighton and Hove has the highest suicide mortality rate of all Local Authorities in Sussex, notably above the average for England

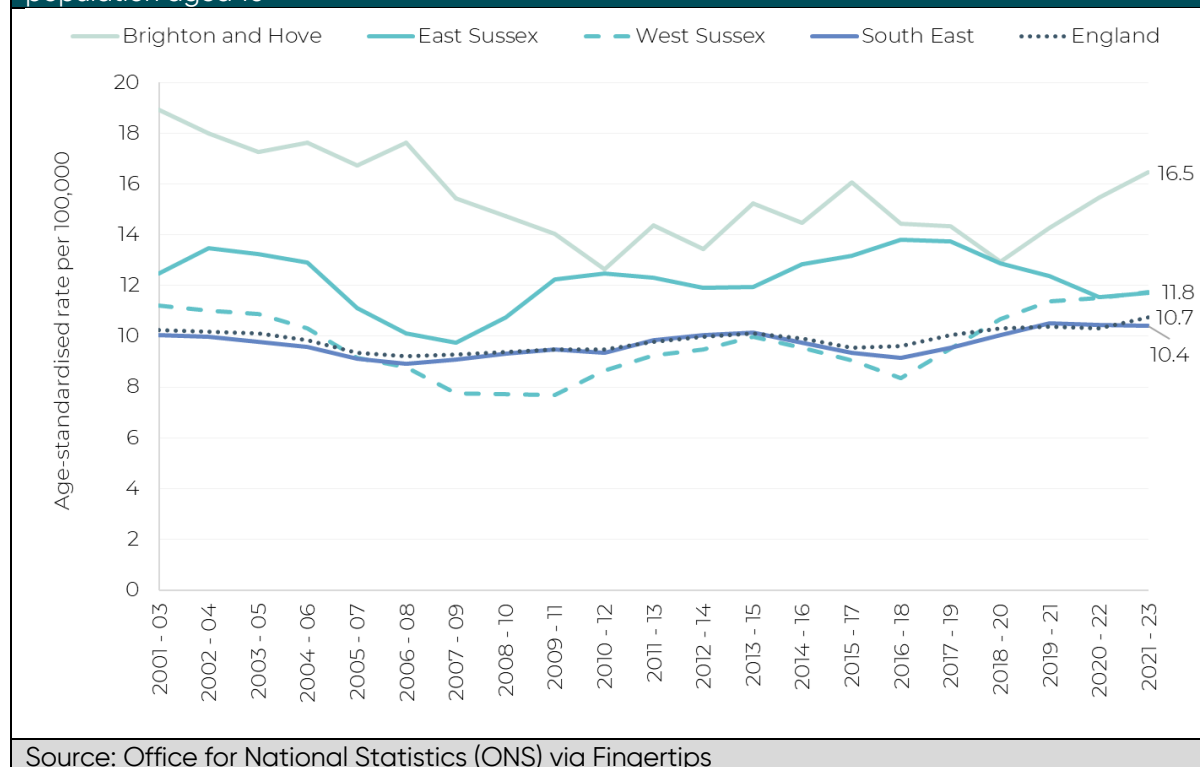
Suicide is a significant cause of death in young adults, and is seen as an indicator of underlying rates of mental ill-health. The chart below shows the crude rate of mortality per 100,000 of those aged under 65 from suicide and injury or poisoning of undetermined intent.



The chart highlights that Brighton and Hove has the highest suicide mortality rate in the region at 78.74%, well above both the England average (47.99%) and the South East average (47.16%). Eastbourne also fares poorly, with a rate of 51.89%, placing it notably above national and regional levels. These two areas stand out as having the most concerning rates in Sussex, suggesting a need for focused mental health support and suicide prevention efforts in these localities.

There has been a notable increase in suicide rates in Brighton and Hove since 2019/2021

Age-standardised mortality rate from suicide and injury of undetermined intent per 100,000 population aged 10+



Brighton and Hove has consistently had the highest suicide rates in the region over the past two decades. While there was a gradual decline in rates during the mid-2000s, the figures have remained notably above South East and England averages. Most recently, the rate in Brighton and Hove has risen sharply again, reaching 16.5 per 100,000 in 2021-23 – almost double the national average of just over 10 per 100,000 population.

This trend highlights a long-standing and growing concern in the city. While other areas such as East and West Sussex have seen more stable or moderate changes over time, Brighton and Hove stands out for its persistently elevated and now rising suicide rate, underlining the need for targeted mental health and suicide prevention efforts.

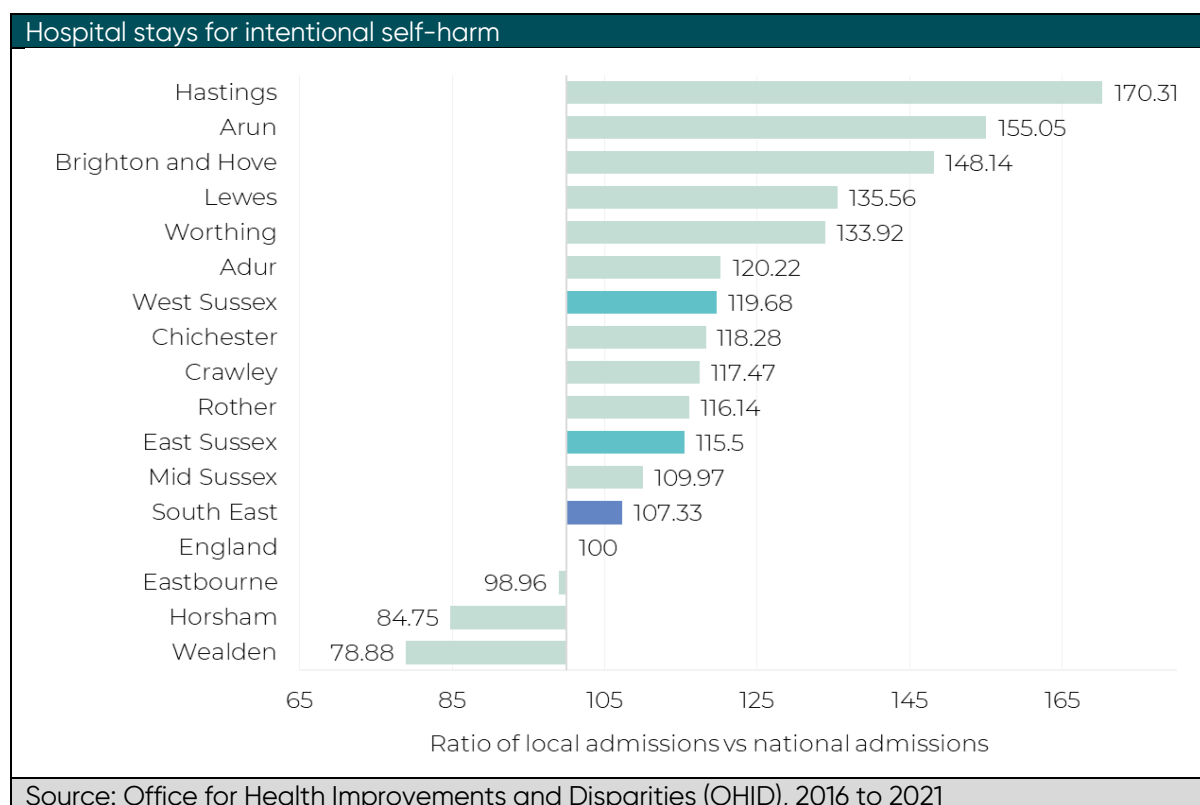


## Neighbourhoods in Brighton and Hove – along with other coastal areas in Hastings, Arun and Lewes – have some of the highest self-harm hospitalisation rates in Sussex

The chart below shows the standardised emergency admission ratio (SAR) for hospital stays for intentional self-harm. An SAR is a measure of how likely a person living in that area is to have an emergency admission to hospital compared to the England average. An SAR higher than 100 indicates that the area has higher than average emergency admission rates, lower than 100 indicates lower than average emergency admission rate.

Hastings has the highest rate at 170.31, about 70% above the national average. Arun and Brighton and Hove also show notably elevated rates, at 155.05 and 148.14 respectively, with Lewes and Worthing following behind.

These numbers highlight that self-harm admissions are a significant issue in these areas, well above both national and regional levels. This suggests a pressing need for focused mental health and prevention efforts in places like Hastings, Arun, and Brighton and Hove.



The table below shows the 20 MSOAs in Sussex with the highest rates of hospital stays due to intentional self-harm. Brighton and Hove (Kemptown, Whitehawk), along with the coastal towns of Hastings (Broomgrove, Hollington, Central St Leonards), Littlehampton (Littlehampton West), Bognor Regis (South Bersted, Bognor Regis Central), Peacehaven, and Newhaven, have some of the highest self-harm hospitalisation rates in Sussex.

MSOA	Local Authority	Hospital stays intentional self-harm
St James's Street & Queen's Park - Brighton and Hove 030	Brighton and Hove	334.88
Whitehawk - Brighton and Hove 025	Brighton and Hove	331.99
Broomgrove - Hastings 005	Hastings	302.2
Hollington - Hastings 003	Hastings	278.39
Burgess Hill Central - Mid Sussex 014	Mid Sussex	266.87
Kemptown - Brighton and Hove 031	Brighton and Hove	265.5
Littlehampton West and River - Arun 011	Arun	255.24
King Alfred - Brighton and Hove 028	Brighton and Hove	247.37
South Bersted - Arun 014	Arun	243.71
Central St Leonards - Hastings 011	Hastings	242.92
Bognor Regis Central - Arun 017	Arun	232.35
College Lane & Oaklands - Chichester 008	Chichester	214.88
Heene - Worthing 010	Worthing	212.49
Haywards Heath East - Mid Sussex 010	Mid Sussex	202.5
Goldsmid West - Brighton and Hove 019	Brighton and Hove	199.07
Aldrington South - Brighton and Hove 023	Brighton and Hove	198.09
Peacehaven West - Lewes 007	Lewes	192.63
Newhaven West - Lewes 009	Lewes	191.13
Bexhill North & Sidley - Rother 007	Rother	191.1
Northbrook - Worthing 006	Worthing	190.14
Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021		

# Informal Care

Informal care is vital for supporting those with health needs but it can impact carers' own wellbeing. This section reviews carers allowance claimants and unpaid care hours, helping to identify where extra support is needed to improve health outcomes for carers and those they care for.

## Unpaid and intensive care is highest in Hastings, Eastbourne and Rother

The table below includes an overview of measures on unpaid and intensive care across Sussex areas, including those claiming Carers Allowance and measures of unpaid care per week based on self-reported data from the Census.

Area Name	Carers Allowance Claimants	35-49 hours unpaid care a week	50+ hours unpaid care a week	Children providing unpaid care
Adur	2.22%	0.82%	2.85%	1.07%
Arun	2.17%	0.86%	2.88%	1.25%
Brighton	1.67%	0.78%	2.05%	1.19%
Chichester	1.66%	0.72%	2.42%	1.20%
Crawley	2.05%	0.98%	2.37%	1.02%
Eastbourne	2.70%	1.09%	3.22%	1.42%
Hastings	3.14%	1.28%	3.29%	1.54%
Horsham	1.38%	0.66%	2.03%	0.98%
Lewes	2.17%	0.83%	2.99%	1.17%
Mid Sussex	1.25%	0.64%	2.00%	1.02%
Rother	2.67%	0.98%	3.33%	1.36%
Wealden	1.73%	0.77%	2.51%	1.21%
Worthing	1.90%	0.82%	2.67%	1.39%
East Sussex	2.39%	0.96%	3.00%	1.32%
West Sussex	1.76%	0.78%	2.43%	1.12%
South East	1.93%	0.80%	2.39%	1.18%
England	2.51%	0.97%	2.63%	1.06%
Source: Census 2021, Carers Allowance: DWP Nov-2024				

Hastings stands out as the area facing the greatest challenges related to unpaid care, with the highest percentage of Carers Allowance claimants at 3.14%, well above the England average of 2.51%. It also has the highest rates of intensive unpaid care, with 1.28% providing 35-49 hours weekly and 3.29% providing 50+ hours, both above the national averages of 0.97% and 2.63% respectively. Additionally, Hastings has the highest proportion of children providing unpaid care at 1.54%, exceeding the England average of 1.06%.

Other areas with notably high levels of unpaid care include Eastbourne and Rother, both with Carers Allowance claimants (2.70% and 2.67%) and intensive care hours well above average. Eastbourne has 1.09% providing 35–49 hours and 3.22% providing 50+ hours, while Rother has 0.98% and 3.33% in these categories respectively. Worthing and Lewes also have elevated rates of unpaid care, particularly in the 50+ hours category, indicating heavier care responsibilities and reflecting the older demographic age profiles in these areas.

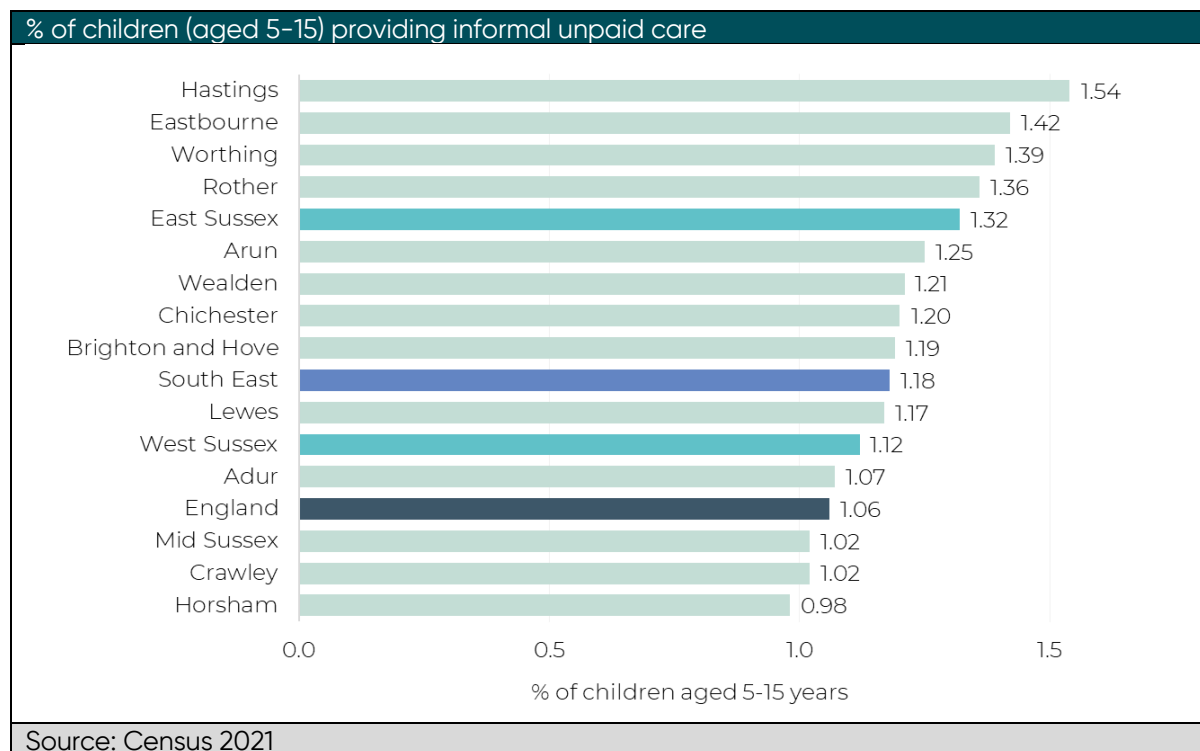
## Highest rates of Carers Allowance claimants concentrated in Hastings, Brighton and Hove and Eastbourne

The highest proportions of Carers Allowance claimants in Sussex are found in specific LSOAs within Hastings, Brighton and Hove, and Eastbourne. Hastings leads with several areas exceeding 8%, including parts of Ore, Broomgrove and Hollington, while Brighton and Hove's Whitehawk and surrounding neighbourhoods also show high claimant rates. Eastbourne's Hampden Park area follows closely behind. These concentrations highlight communities where informal caregiving is particularly common, indicating potential pressure on local support services.

LSOA	Local Authority	Carers Allowance
Ore - Hastings 004B	Hastings	8.90%
Whitehawk - Brighton and Hove 025B	Brighton and Hove	8.85%
Broomgrove - Hastings 005D	Hastings	8.31%
Broomgrove - Hastings 005A	Hastings	8.24%
Hollington - Hastings 003B	Hastings	8.02%
Hollington - Hastings 003C	Hastings	7.87%
Hampden Park North - Eastbourne 002A	Eastbourne	7.75%
Whitehawk - Brighton and Hove 025E	Brighton and Hove	7.56%
Whitehawk - Brighton and Hove 025C	Brighton and Hove	7.16%
Hangleton South - Brighton and Hove 013B	Brighton and Hove	7.14%
Hollington - Hastings 003A	Hastings	6.90%
Hollington - Hastings 003E	Hastings	6.90%
Whitehawk - Brighton and Hove 025F	Brighton and Hove	6.82%
Hampden Park South - Eastbourne 004A	Eastbourne	6.38%
Coldean & Moulsecoomb North - Brighton and Hove 002D	Brighton and Hove	6.28%
Hampden Park North - Eastbourne 002D	Eastbourne	6.27%
Bevendean & Moulsecoomb East - Brighton and Hove 009C	Brighton and Hove	6.20%
Rye & Winchelsea - Rother 004E	Rother	6.13%
Hampden Park South - Eastbourne 004C	Eastbourne	6.03%
Hangleton North - Brighton and Hove 006D	Brighton and Hove	5.88%
Source: DWP, Nov-2024		

## There is a higher proportion of child carers in Hastings, Eastbourne and Worthing, notably above England

The chart below shows that the highest percentages of children aged 5–15 providing unpaid care are in Hastings (1.54%), Eastbourne (1.42%), and Worthing (1.39%) – all notably above the England average of 1.06%. These areas may face greater pressure on family and care support systems.



## The highest proportions of child carers are found in neighbourhoods in Rother, Wealden and Brighton and Hove

The table below shows the 20 LSOAs in Sussex which have the highest proportion of child carers (aged 5–15 years). Several LSOAs in Rother, Wealden and Brighton and Hove show particularly high levels of child carers, with Bexhill Central (6.19%) and areas of Wealden (Pevensey) and Brighton (Hollingdean and Moulsecomb) reaching over 5% – as well as East Blatchington in Lewes, Langney West in Eastbourne and Hollington in Hastings. These hotspots suggest concentrated need for targeted support for young carers in specific communities.

LSOA	Local Authority	Child Carers
Bexhill Central - Rother 011E	Rother	6.19%
Stone Cross, Westham & Pevensey Bay - Wealden 020F	Wealden	6.10%
Hollingdean & Moulsecomb West - Brighton and Hove 008D	Brighton and Hove	5.83%
Mayfield & Wadhurst - Wealden 005A	Wealden	5.32%
Bevendean & Moulsecomb East - Brighton and Hove 009D	Brighton and Hove	5.29%
East Blatchington - Lewes 011D	Lewes	5.08%
Goldsmid West - Brighton and Hove 019A	Brighton and Hove	5.06%

Langney West - Eastbourne 001B	Eastbourne	5.02%
Hollington - Hastings 003C	Hastings	5.00%
North Laine & the Lanes - Brighton and Hove 027F	Brighton and Hove	4.92%
Haywards Heath South & Cuckfield - Mid Sussex 011H	Mid Sussex	4.82%
Yapton & Climping - Arun 006A	Arun	4.58%
Hailsham East - Wealden 017B	Wealden	4.58%
King Edward's Parade - Eastbourne 011D	Eastbourne	4.52%
St James's Street & Queen's Park - Brighton and Hove 030C	Brighton and Hove	4.52%
Polegate - Wealden 019E	Wealden	4.50%
Hollingdean & Moulsecoomb West - Brighton and Hove 008C	Brighton and Hove	4.15%
East Saltdean & Telscombe Cliffs - Lewes 006E	Lewes	4.08%
North Laine & the Lanes - Brighton and Hove 027C	Brighton and Hove	4.07%
Bexhill North & Sidley - Rother 007D	Rother	4.06%
Source: Census 2021		



# Child Health

The early years of life lay the foundation for lifelong health and wellbeing. This section examines child health indicators such as low birth weight, obesity rates, emergency admissions and the prevalence of special educational needs. It also includes data on children providing care and the number of children receiving disability related benefits. Monitoring child health across Sussex is vital for ensuring that every child has the best possible start in life, as well as preventing future health issues. The evidence here can inform decisions around family support, early years services and school health initiatives.

## General Health

### Hastings, Eastbourne and pockets of Brighton and Hove show notably high rates of children living with a disability

The table below shows an overview of measures relating to vulnerable children across Sussex areas, including children claiming Disability Living Allowance (DLA), children who are disabled under the Equality Act (day to day activities limited a little or a lot) and children who do not have good health. Cells shaded green show the areas that fare worse on each of these measures.

Eastbourne, Hastings and Lewes fare worse than England across all three measures, indicating higher levels of child disability and poor health. Eastbourne has the highest proportion of DLA claimants at 9.35% (compared to 6.95% nationally), with 8.30% classified as disabled under the Equality Act and 3.56% reporting not good health, well above the England averages of 6.02% and 2.78%. Hastings and Lewes show similarly elevated figures, with Hastings recording 9.23% DLA claimants and 4.00% reporting not good health – the highest in the region.

Rother and East Sussex overall also exhibit higher than average rates of child disability and poor health, further emphasising regional disparities.

Area Name	Disability Living Allowance Claimants (Under 16)	Disabled under the Equality Act aged 14 years and under	Not good health aged under 15 years
Adur	7.87%	6.32%	2.55%
Arun	7.32%	6.27%	2.57%
Brighton and Hove	7.81%	6.61%	2.77%
Chichester	5.71%	5.05%	2.04%
Crawley	7.01%	6.02%	2.87%
Eastbourne	9.35%	8.30%	3.56%
Hastings	9.23%	8.23%	4.00%
Horsham	5.24%	4.92%	1.88%
Lewes	9.29%	8.41%	3.04%
Mid Sussex	5.91%	5.04%	1.96%
Rother	8.79%	7.77%	3.08%
Wealden	7.36%	6.14%	2.32%
Worthing	7.77%	6.44%	2.71%

East Sussex	8.64%	7.60%	3.11%
West Sussex	6.54%	5.65%	2.33%
South East	6.95%	6.17%	2.50%
England	6.95%	6.02%	2.78%
Source: DLA – DWP, Nov-2024; Census 2021			

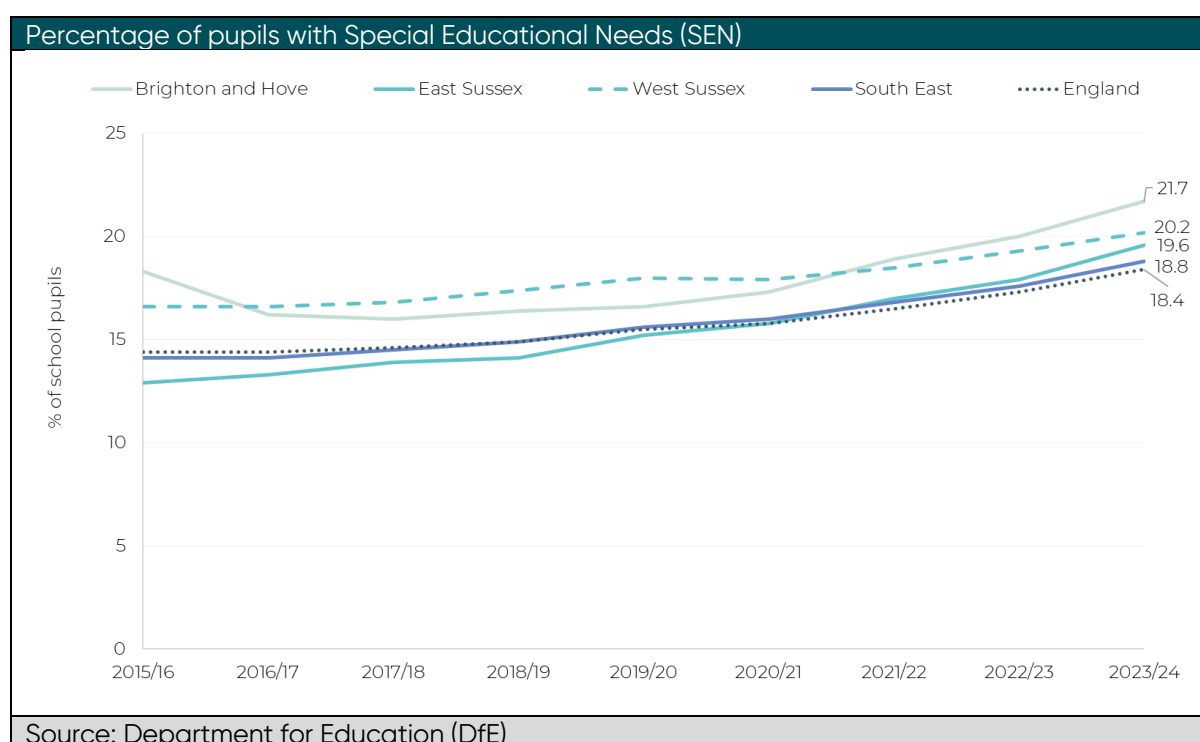
The table below shows the 20 LSOAs across Sussex with the highest proportion of children aged under 16 who are claiming Disability Living Allowance.

LSOA	Local Authority	DLA under 16
Whitehawk – Brighton and Hove 025E	Brighton and Hove	23.19%
Bevendean & Moulsecoomb East – Brighton and Hove 009D	Brighton and Hove	21.13%
Coldean & Moulsecoomb North – Brighton and Hove 002C	Brighton and Hove	21.00%
Stockbridge & Fishbourne – Chichester 011B	Chichester	18.96%
Peacehaven West – Lewes 007B	Lewes	18.85%
Whitehawk – Brighton and Hove 025A	Brighton and Hove	18.77%
Bexhill North & Sidley – Rother 007F	Rother	18.48%
Whitehawk – Brighton and Hove 025B	Brighton and Hove	18.42%
Polegate – Wealden 019E	Wealden	18.39%
Langney East – Eastbourne 003B	Eastbourne	18.14%
Bevendean & Moulsecoomb East – Brighton and Hove 009A	Brighton and Hove	18.09%
Hampden Park South – Eastbourne 004C	Eastbourne	18.08%
Hampden Park North – Eastbourne 002A	Eastbourne	17.72%
Hollingdean & Moulsecoomb West – Brighton and Hove 008E	Brighton and Hove	17.65%
Coldean & Moulsecoomb North – Brighton and Hove 002D	Brighton and Hove	17.53%
Hollington – Hastings 003E	Hastings	17.47%
Durrington North – Worthing 003E	Worthing	17.26%
Marsh Barn & Widewater – Adur 007A	Adur	17.14%
Selsey – Chichester 014E	Chichester	17.09%
Langney West – Eastbourne 001E	Eastbourne	17.07%
Source: DWP, Nov-2024		

Brighton and Hove has the highest concentration of neighbourhoods with elevated child Disability Living Allowance (DLA) claim rates, particularly in Whitehawk, Moulsecoomb, Bevendean, and Hollingdean, with some rates exceeding 20%. Eastbourne also shows several hotspots, especially in Hampden Park and Langney, with rates around 17-18%. Lewes (Peacehaven West) and Hastings (Hollington) also feature prominently, alongside pockets in Rother, Chichester, Wealden, Worthing and Adur.

## Special Educational Needs are increasing across all areas, now highest in Brighton and Hove with West Sussex and East Sussex also above the England average

The chart below shows the percentage of pupils with Special Educational Needs (SEN) across Sussex areas, the South East and England between 2015/16 and 2023/24. It shows that SEN rates have steadily increased across all Sussex areas over recent years, consistently surpassing the England average. Brighton and Hove shows the highest rate, rising from 18.3% in 2015/16 to 21.7% in 2023/24, now exceeding East Sussex, where the proportion of SEN pupils grew from 12.9% to 19.6% over the same period. West Sussex also saw a rise from 16.6% to 20.2%. All Sussex areas are notably above the England average of 18.4% in 2023/24, reflecting a growing demand for SEN support in the region. This trend highlights the urgent need for expanded educational resources and targeted interventions across Sussex to support children with additional learning needs.



## Health Behaviours and Outcomes

East Sussex has higher rates of smoking in pregnancy, West Sussex sees slightly more low birth weight births and Brighton and Hove has the highest rate of low birth weight at full term

Although rates of smoking during pregnancy are falling across all areas (see Appendix A for more details), East Sussex stands out with a higher rate of 8.2%, above the England average of 7.4%. West Sussex records the highest rate of very low birth weight babies at 1.43%, compared to 1.25% nationally. Brighton and Hove has the highest rate of low birth weight among term babies at 2.88%, exceeding both the national (2.40%) and regional (2.79%) averages. This suggests that factors beyond premature delivery – such as maternal health, deprivation or access to antenatal care – may be contributing to restricted foetal growth. These patterns may also reflect broader inequalities affecting children's health from the very start of life.

Area Name	Smoking at time of delivery	Low birth weight of term babies	Low birth weight of all babies	Very low birth weight of all babies
Brighton	5.7	2.88	7.23	1.04
East Sussex	8.2	2.56	6.56	0.95
West Sussex	6.0	2.18	7.56	1.43
South East	6.8	2.79	7.23	1.19
England	7.4	2.40	7.43	1.25
Source: Office for Health Improvements and Disparities (OHID); LBW, 2022; Smoking 2023/2024				

## Although child obesity rates are lower in Sussex than the England average, areas with lower physical activity levels tend to show higher rates of childhood obesity

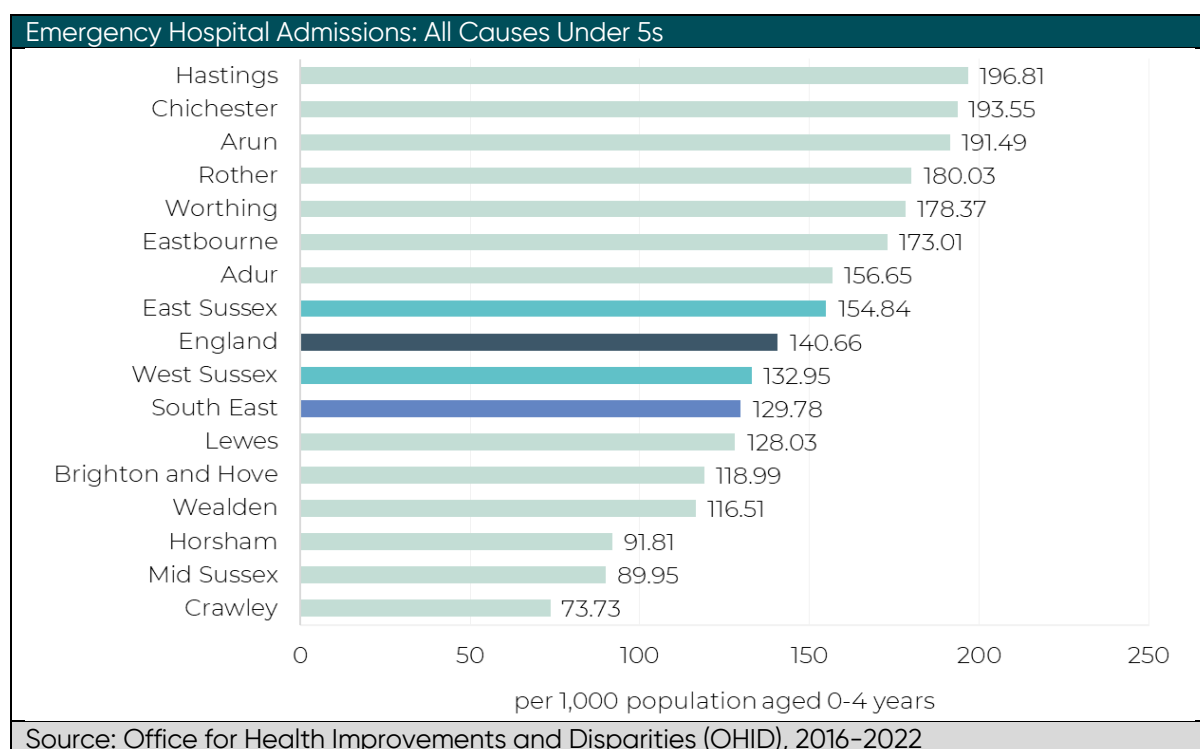
Although childhood obesity rates in East Sussex (18.37%) and West Sussex (18.59%) are generally lower than the England average (22.73% in Year 6), several areas with lower physical activity levels report higher obesity rates. Crawley (22.17%) and Arun (21.91%) have among the highest Year 6 obesity rates in Sussex, both with lower-than-average physical activity levels at 46.14% and 47.61% respectively. Eastbourne and Worthing also show elevated obesity rates (20.26% and 21.17% in Year 6), paired with less active children from low-income families and children with disabilities. This pattern highlights a link between lower physical activity and higher obesity in certain Sussex areas, especially where children face additional barriers to being active.

Area Name	Obesity		Physical activity		
	Obesity in Year 6	Obesity in reception year	% Active children (age 5-16)	Less active children with low family affluence	Less active children with a disability
Adur	18.18%	7.75%	49.83%	32.74%	30.07%
Arun	21.91%	9.54%	47.61%	34.33%	31.40%
Brighton	17.02%	7.54%	51.26%	33.06%	30.32%
Chichester	18.17%	8.24%	45.45%	35.83%	32.63%
Crawley	22.17%	8.85%	46.14%	36.51%	33.38%
Eastbourne	20.26%	9.43%	46.39%	35.01%	32.47%
Hastings	21.97%	8.97%	49.60%	32.81%	30.85%
Horsham	14.45%	5.79%	56.77%	28.74%	25.74%
Lewes	17.17%	8.06%	53.73%	29.95%	27.01%
Mid Sussex	14.43%	6.06%	48.19%	33.95%	30.53%
Rother	19.06%	9.29%	53.60%	30.37%	27.76%
Wealden	15.01%	7.34%	47.69%	34.94%	31.70%
Worthing	21.17%	7.11%	48.14%	34.39%	31.61%
East Sussex	18.37%	8.48%	49.88%	32.90%	30.17%
West Sussex	18.59%	7.54%	48.96%	33.73%	30.68%
South East	19.51%	8.43%	49.94%	33.09%	29.96%
England	22.73%	9.64%	49.22%	33.37%	30.54%
Source: Office for Health Improvement and Disparities (OHID), 2021-2024; Sport England, Nov-2021					

## Child emergency admissions are higher in Hastings and Chichester

The chart below shows the crude rate of emergency hospital admissions for children (aged under 5 years), per 1,000 resident population.

The rate of emergency hospital admissions for children under five is notably higher in several parts of Sussex compared to the England average. The local authorities of Hastings, Chichester, Arun, Rother, Worthing, Eastbourne and Adur have higher rates than both the regional and national averages, indicating systemic pressures on child health and access to early intervention.



At the neighbourhood level, the highest emergency admission rates are seen in Selsey in Chichester (259.7 per 1,000) and Bexhill Central (255.1) in Rother, followed closely by areas in Middleton-on-Sea, Sidley and central Chichester. Chichester dominates the list, with six of the top twenty neighbourhoods for under-5 emergency admissions. Rother, Arun and Hastings also feature repeatedly, highlighting clusters of high need in towns such as Bexhill, Hastings (Hollington, Bohemia, St Helens), and Worthing (Northbrook and East Worthing). These findings point to persistent inequalities in child health outcomes, especially in coastal and rural areas, and underline the importance of targeted early years health and prevention services.

MSOA	Local Authority	Emergency admission under 5 years
Selsey - Chichester 014	Chichester	259.74
Bexhill Central - Rother 011	Rother	255.1
Middleton-on-Sea - Arun 013	Arun	253.16
Bexhill North & Sidley - Rother 007	Rother	251.64
Central Chichester - Chichester 010	Chichester	248.47
Wittering & Birdham - Chichester 013	Chichester	238.43
Conquest & St Helens - Hastings 002	Hastings	234.38

College Lane & Oaklands – Chichester 008	Chichester	226.16
Westergate, Eastergate & Walberton – Arun 003	Arun	223.24
Felpham – Arun 015	Arun	223.09
Westbourne & Funtington – Chichester 007	Chichester	222.67
Northbrook – Worthing 006	Worthing	222.51
Braybrooke & Bohemia – Hastings 008	Hastings	220.48
East Worthing – Worthing 009	Worthing	220.41
Hollington – Hastings 003	Hastings	220.17
Upperton – Eastbourne 008	Eastbourne	220.05
South Lancing – Adur 008	Adur	214.29
Broomgrove – Hastings 005	Hastings	213.04
Hailsham South & West – Wealden 016	Wealden	212.98
Tangmere, Mundham & Hunston – Chichester 012	Chichester	208.68
Source: Census 2021		

## Chichester, Worthing and Eastbourne show highest child mortality rates in Sussex

The table below shows the crude rate of child mortality for all causes of death by age band. The cells shaded green show the areas which fare the worst on each measure.

Within Sussex, Chichester has the highest child mortality rates across all measures, including neonatal (2.20%), infant (0.59%), and under-15 deaths (2.70%) – notably above the England averages. Worthing, Eastbourne, Hastings and Arun also report elevated rates, particularly in neonatal and under-15 mortality. While East and West Sussex overall have averages below the national level, this data highlights specific challenges in certain parts of Sussex that may require focused health interventions.

Area Name	Neonatal Mortality (under 28 days)	Infant Mortality (under 1 year)	Child Mortality (under 5 years)	Deaths under 15 years
Adur	0.00%	0.00%	0.00%	0.00%
Arun	1.33%	0.43%	0.13%	2.00%
Brighton and Hove	1.25%	0.28%	0.09%	1.51%
Chichester	2.20%	0.59%	0.17%	2.70%
Crawley	0.66%	0.23%	0.10%	1.19%
Eastbourne	1.44%	0.47%	0.14%	2.56%
Hastings	1.58%	0.30%	0.10%	1.58%
Horsham	0.37%	0.14%	0.06%	0.75%
Lewes	0.64%	0.13%	0.04%	0.77%
Mid Sussex	1.24%	0.25%	0.08%	1.37%
Rother	0.00%	0.13%	0.04%	0.75%



Wealden	0.38%	0.20%	0.06%	1.14%
Worthing	1.98%	0.54%	0.17%	1.98%
East Sussex	0.82%	0.25%	0.07%	1.39%
West Sussex	1.13%	0.32%	0.10%	1.47%
South East	1.20%	0.35%	0.13%	1.62%
England	1.43%	0.42%	0.16%	1.95%
Source: Nomis, 2019 to 2023				

## Child Mental Health

### Referrals to Child and Adolescent Mental Health Services (CAMHS) continue to rise across Sussex, highlighting the growing mental health needs among children and young people

Whilst there is no neighbourhood-level data available on CAMHS use across Sussex areas, a review of relevant reports and needs assessments on children's mental health services in West Sussex and East Sussex shows that Child and Adolescent Mental Health Services (CAMHS) are seeing a significant rise in referrals and caseloads – highlighting both the growing mental health needs among children and young people and increasing pressure on local services. This review of available information found the following trends in CAMHS service use across Sussex:

- West Sussex: The CAMHS caseload has escalated continuously, with growth already evident pre-pandemic and accelerating through 2021. Between June 2022 and June 2023, the Single Point of Access (SPOA) received about 8,500 referrals, marking a 21% increase over previous years. Monthly accepted referrals by CAMHS range between 485 and over 1,000, depending on neurodevelopmental disorder cases. Waiting times remain longer than the England average, adding to service pressure. Source: [jsna.westsussex.gov.uk](https://jsna.westsussex.gov.uk).
- East Sussex: CAMHS received 3,607 new referrals in 2022/23, continuing an upward trend. The increase in referrals, especially for neurodevelopmental disorders, is driving significant pressure on services. Waiting times are longer than the national average. Source: <https://democracy.eastsussex.gov.uk/documents/g5565/Public%20reports%20pack%2012th-Dec%2023%2014.30%20East%20Sussex%20Health%20and%20Wellbeing%20Board.pdf?T=10>
- Brighton and Hove: In the year ending March 2022, there were 971 new CAMHS referrals with 959 accepted, and 1,997 open cases by year-end. Referrals and caseloads are rising, contributing to increased demand and longer waiting times in the area. Source: <https://www.brightonandhovenews.org/2024/03/06/child-self-harm-rates-rise-in-brighton-and-hove>
- Sussex Wide: Referrals to children's mental health services surged by 53% between 2021–22 and 2022–23, parallel to the national trend. Source: NHS Sussex Annual Report 2023–24) [sussex.ics.nhs.uk](https://sussex.ics.nhs.uk); Since September 2020, there's been a significant increase in referrals to CAMHS Sussex, attributed to the pandemic and post-lockdown rebound. This spike has adversely impacted waiting times for initial assessments and treatment. Source: Sussex Partnership NHS Foundation Trust [sussexcamhs.nhs.uk](https://sussexcamhs.nhs.uk).

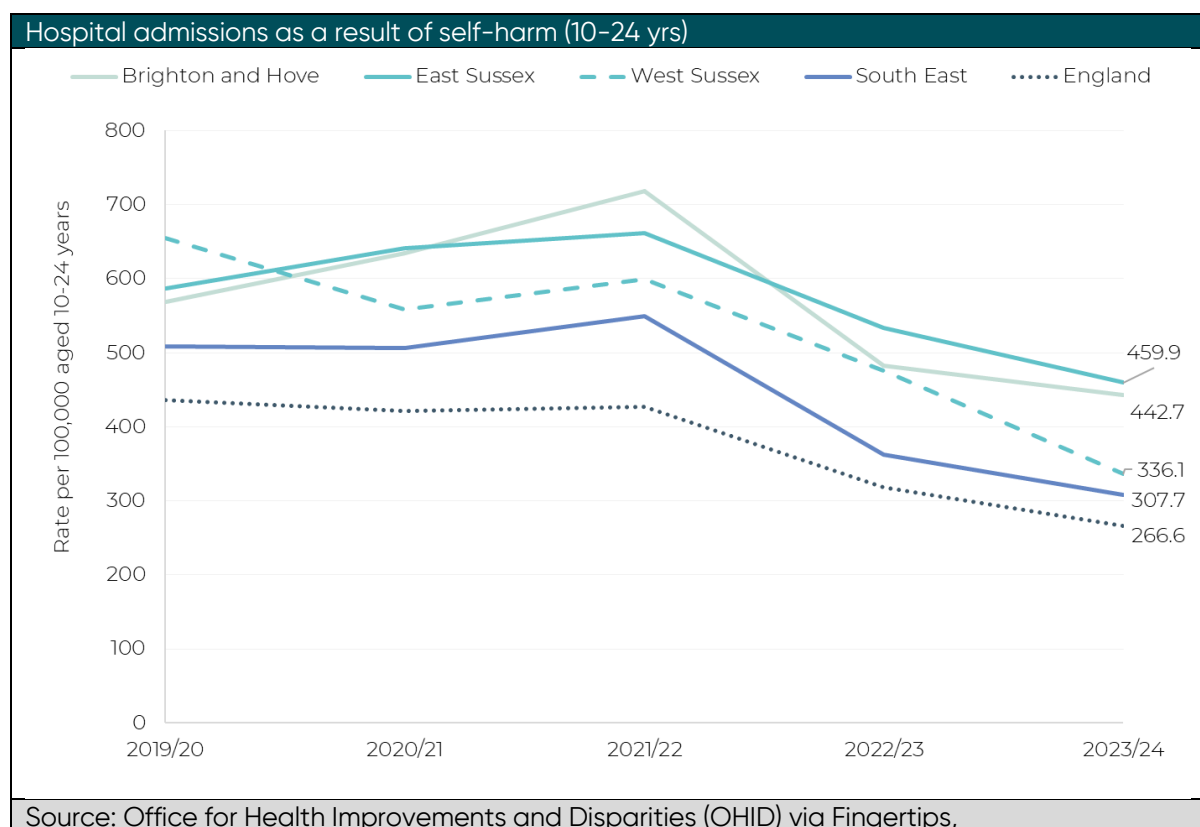
Overall, across Sussex, the demand for CAMHS is increasing steadily, placing growing pressure on services. This trend highlights the urgent need for additional resources and strategic planning to support the mental health needs of children and young people across the region.

The data below provides further insight into child mental health needs across Sussex.

## There has been a slight decline in hospital admissions for young people due to self-harm since the pandemic, but admissions remain highest in East Sussex and Brighton and Hove

Hospitalisations due to self-harm among 10–24-year-olds have declined across all areas since 2019/20, but rates in Sussex remain notably above the national average. In 2023/24, East Sussex (459.9 per 100,000) and Brighton and Hove (442.7) had the highest rates in the region, well above the England average of 266.6. Although West Sussex has seen the largest drop – from 654.9 in 2019/20 to 336.1 in 2023/24 – its rate also remains above both national and regional levels.

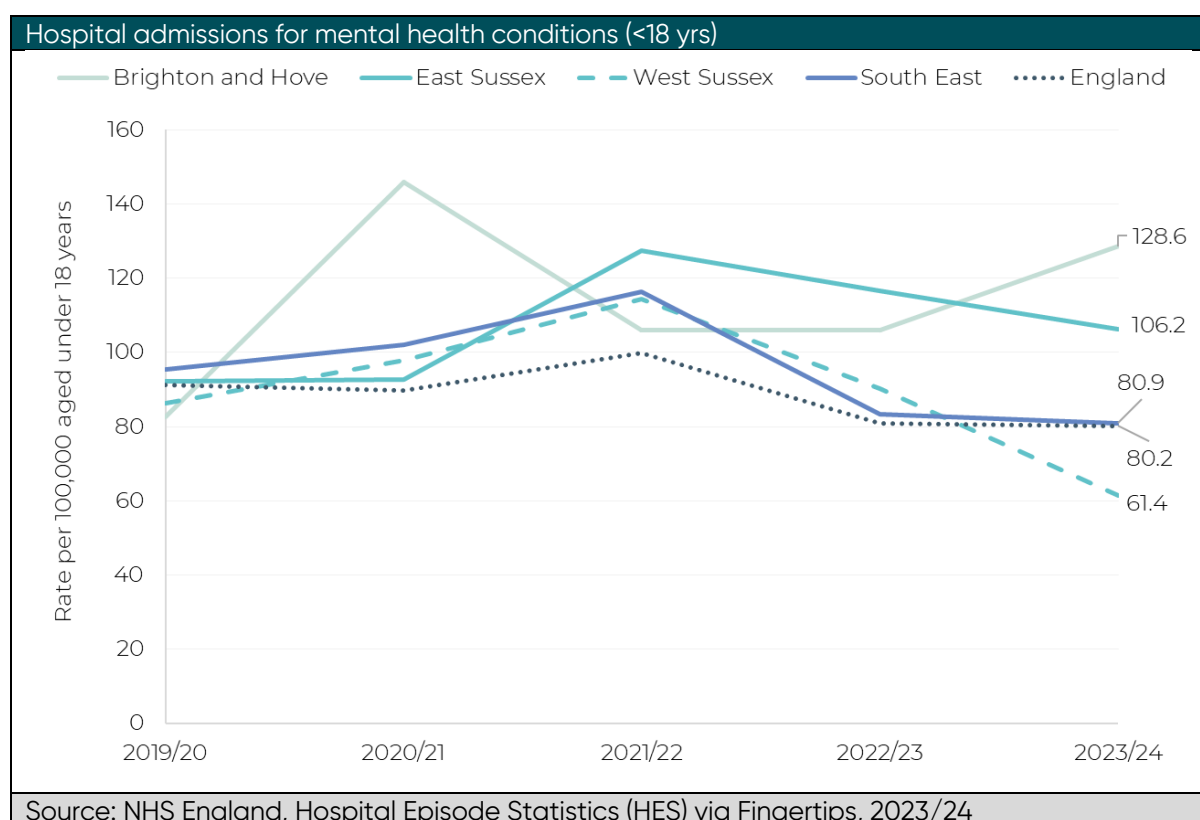
While all areas have seen improvements, the pace of decline in Sussex has been slower than in England overall, where rates have fallen by nearly 40% over five years. This suggests that despite some progress, young people in Sussex – particularly in East Sussex and Brighton and Hove – continue to experience disproportionately high levels of mental health-related harm, highlighting the need for sustained local support and intervention.



## Hospital admissions for mental health conditions for children under 18 years are on the rise in Brighton and Hove and higher in East Sussex than other parts of the county

Hospital admissions for mental health conditions among children and young people (aged 0–17) remain elevated in Brighton and Hove and East Sussex compared to national and regional levels. In 2023/24, Brighton and Hove recorded 128.6 admissions per 100,000, over 60% above the England average (80.2). East Sussex also remains above average at 106.2, despite a slight decrease from the previous year. In contrast, West Sussex has seen a substantial drop, falling to 61.4, now below both regional and national rates.

Although there has been a general decline since peak levels in 2021/22, the sustained high admission rates in Brighton and Hove and East Sussex suggest ongoing pressures on child and adolescent mental health services and a continuing need for targeted prevention and early intervention support in these areas.

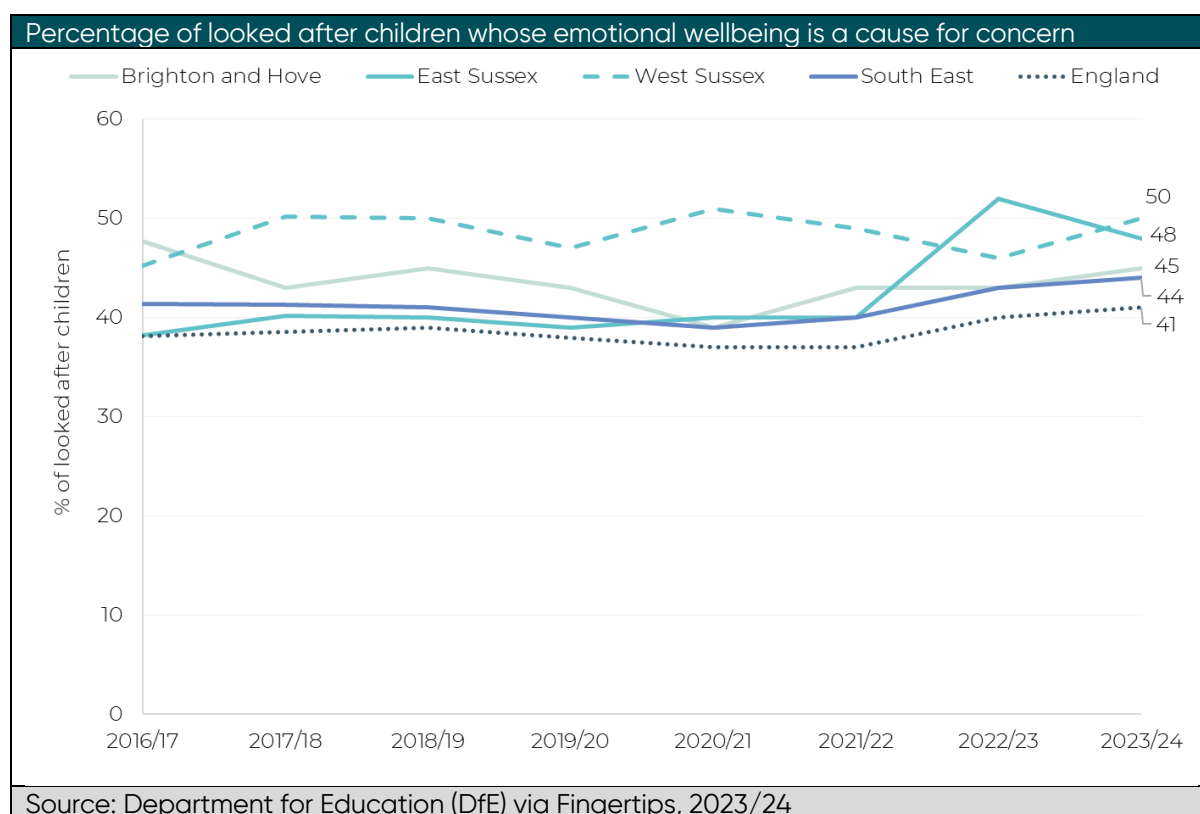


## West Sussex and East Sussex have higher proportions of looked after children whose emotional wellbeing is a cause for concern than the South East and England averages

The chart below shows the percentage of looked after children whose emotional wellbeing is a cause for concern in Sussex areas, the South East and England. The data shows that looked after children in Sussex continue to experience poorer emotional wellbeing than the national average, with some areas seeing notably high proportions of concern.

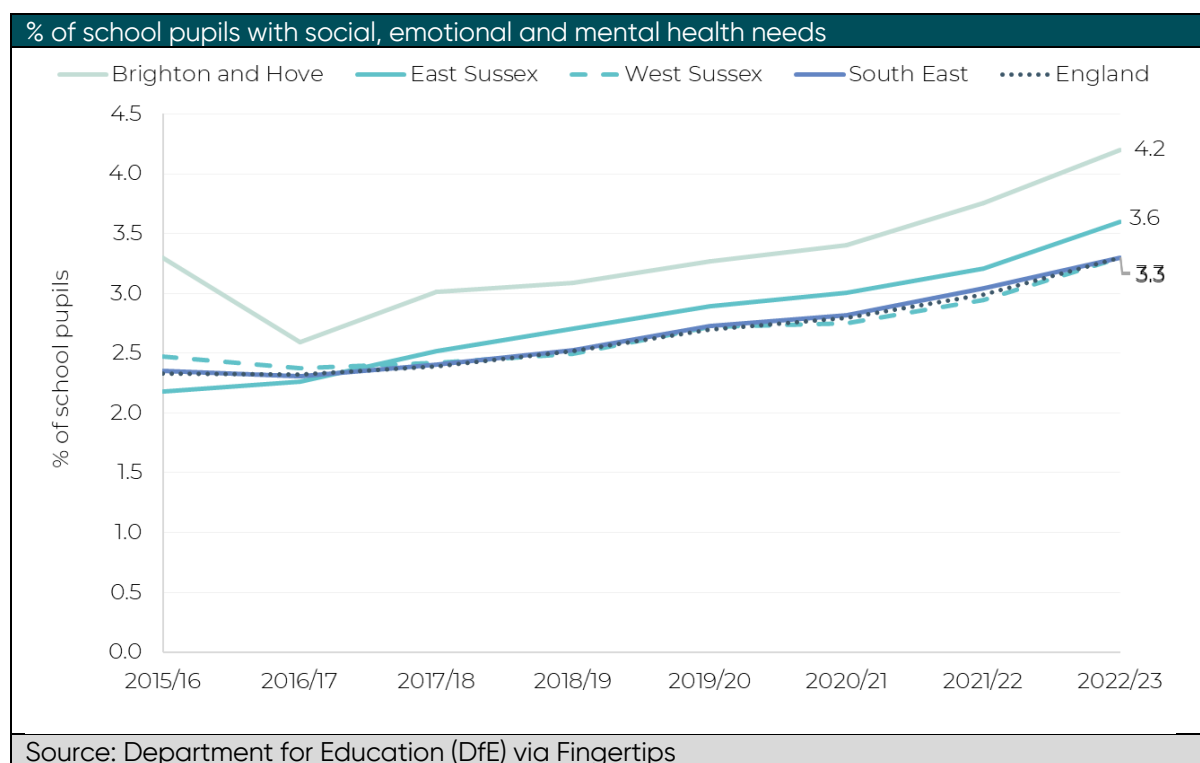
In 2023/24, West Sussex recorded the highest percentage of looked after children whose emotional wellbeing was a cause for concern at 50%, above both the England average of 41% and the South East average of 44%. East Sussex also remains high at 48%, despite a slight drop from its peak of 52% in 2021/22. Brighton and Hove has remained relatively stable in recent years, reporting 45% in 2023/24, however this is still above regional and national levels.

While the national trend has remained fairly consistent around 38–41%, all three Sussex areas have consistently reported higher rates, suggesting ongoing challenges in supporting the emotional wellbeing of children in care across the region. This underscores the need for enhanced mental health and wellbeing support for looked after children in Sussex, particularly in West Sussex and East Sussex.



## The proportion of pupils with social, emotional and mental health needs is now above the national average across East Sussex, with Brighton and Hove notably higher still

Brighton and Hove has consistently had a higher proportion of pupils with Social, Emotional and Mental Health (SEMH) needs than the national average, rising from 3.3% in 2015/16 to 4.2% in 2022/23. East Sussex also now shows rates at above the national average, with 3.6% of pupils affected, while West Sussex is in line with the England average of 3.3%. This suggests that schools in East Sussex, particularly in Brighton and Hove, are supporting a larger proportion of children with emotional and mental health needs compared to elsewhere in the country. See more details with breakdowns by gender and school age in Appendix A.



# Health Behaviours

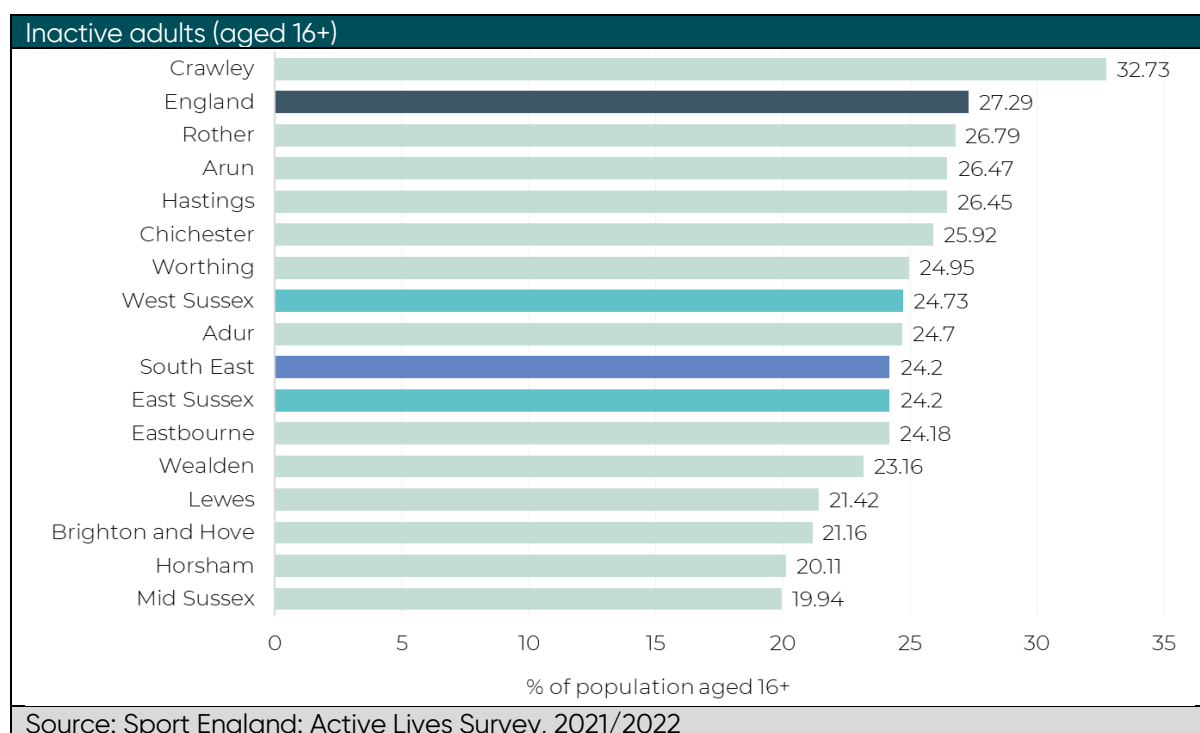
Lifestyle behaviours play a major role in shaping health outcomes across the population. This section brings together data on physical activity, smoking, alcohol-related harm and immunisations to give an overview of key behaviours and their impact on population health, highlighting areas of concern and opportunities for targeted intervention.

## Sussex has lower physical inactivity rates than the England average, but rates remain notably higher among the long-term unemployed and people with a disability

Physical inactivity rates among adults in Sussex are lower than the England average, with both East Sussex and West Sussex reporting inactivity levels around 24%, compared to 27.3% nationally. However, inactivity is notably higher among more vulnerable groups. Adults who are long-term unemployed or have never worked show particularly high inactivity rates, at over 42% in East Sussex and nearly 45% in West Sussex, although still slightly below the England average of 46.7%. Similarly, adults with a disability also experience high levels of inactivity, with rates of 42.7% in East Sussex and 44.3% in West Sussex, again somewhat lower than the national figure of 47%. This highlights persistent challenges in promoting physical activity among disadvantaged populations in Sussex.

Inactive adults (age 16+)	East Sussex	West Sussex	South East	England
Total	24.20%	24.73%	24.20%	27.29%
Long term unemployed/never worked	42.25%	44.71%	44.09%	46.73%
With a disability	42.65%	44.34%	43.44%	46.98%

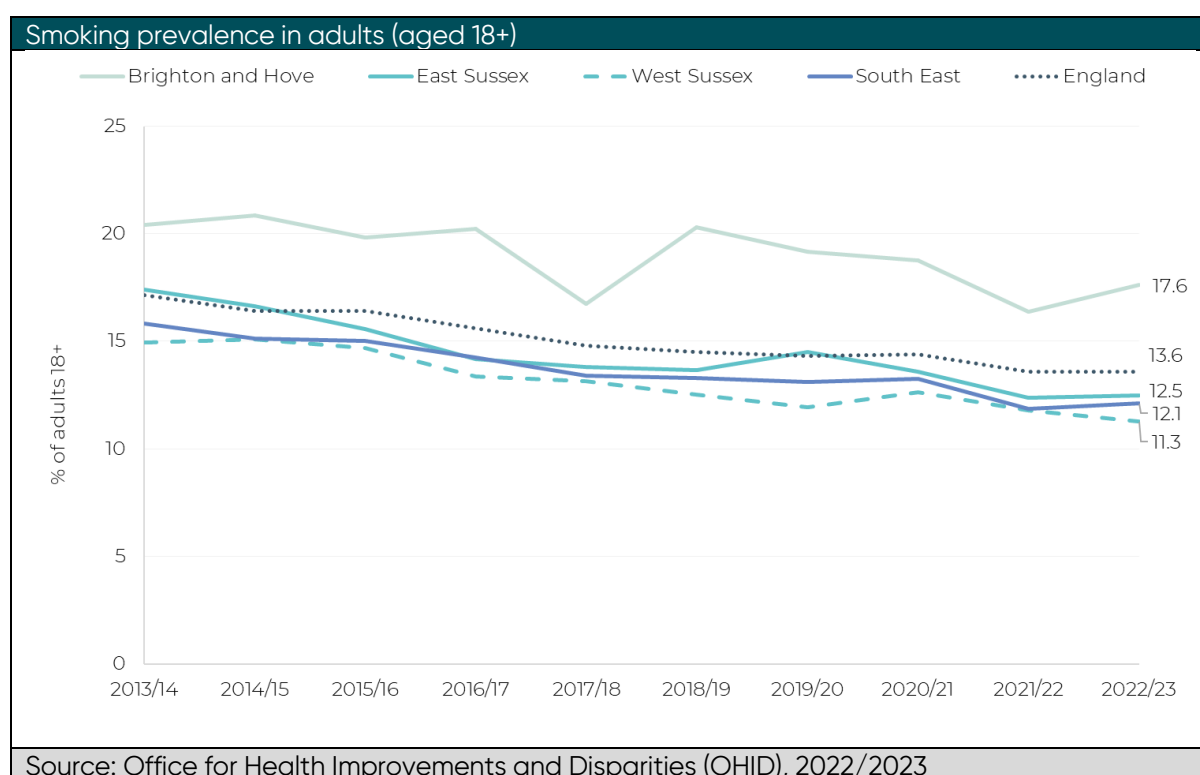
Source: Sport England: Active Lives Survey, 2021/2022



Physical inactivity among adults varies across Sussex local authorities, with Mid Sussex (19.9%) and Horsham (20.1%) reporting notably lower inactivity rates than the England average of 27.3%. In contrast, Crawley stands out as the area with the highest proportion of inactive adults in Sussex (32.7%), well above the national average (27.3%). Overall, while Sussex generally performs better than England on adult inactivity, there are clear local variations, with some districts facing greater challenges.

## Smoking prevalence has decreased slightly over time across Sussex areas, but remains highest in Brighton and Hove where 17.6% of adults are current smokers

The chart below shows smoking prevalence in adults (aged 18 and over) based on the percentage of the population who classify themselves as either occasional or regular smokers according to the GP Patient Survey.



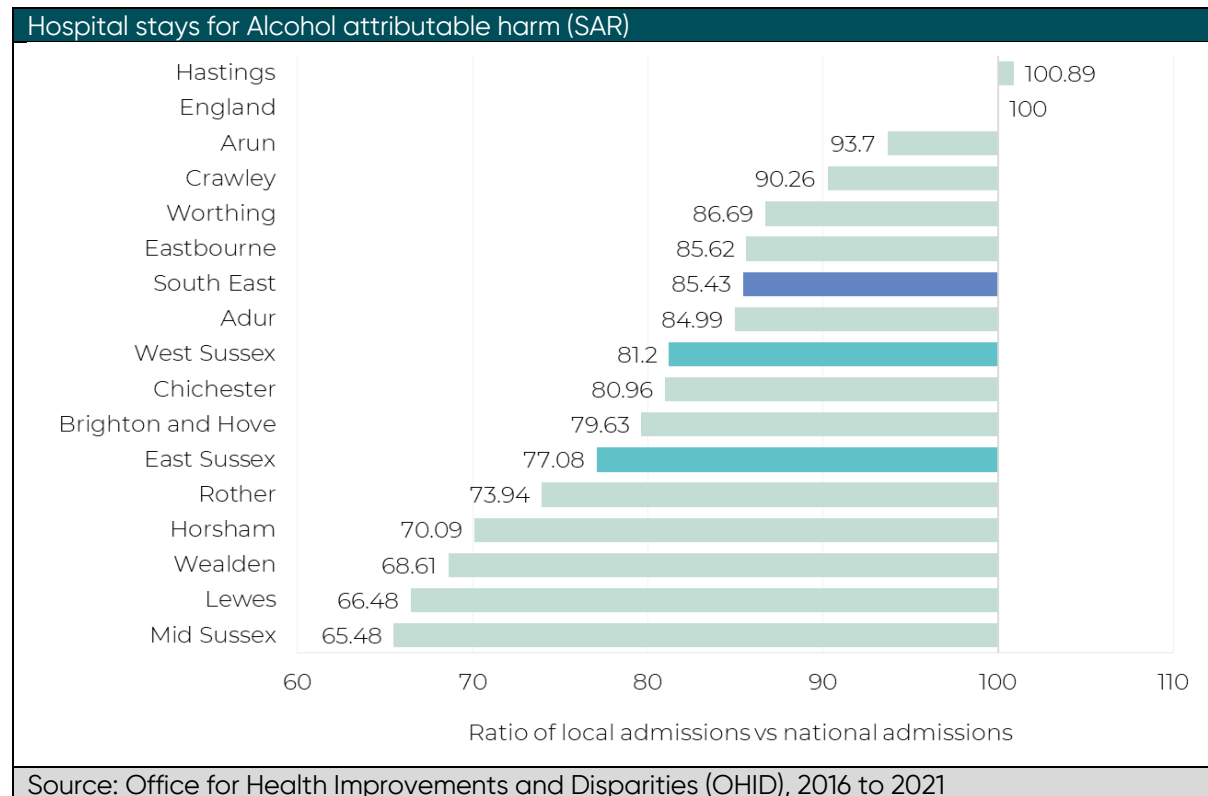
Smoking prevalence among adults in Sussex has gradually declined over recent years, but notable differences remain between areas. Brighton and Hove consistently has the highest proportion of current smokers, with 17.6% of adults identifying as regular or occasional smokers in 2022/23, well above the England average of 13.6%. East Sussex also fares worse than the regional average, with 12.5% of adults smoking, while West Sussex shows the lowest prevalence at 11.3%.

Although all areas have seen some improvement since 2013/14, smoking rates in Brighton and Hove remain a concern, suggesting a need for targeted public health interventions in this area.



## Hospital stays due to alcohol-attributable harm are highest in coastal urban and deprived areas, particularly in Hastings and parts of Brighton and Hove

The chart below shows the standardised emergency admission ratio (SAR) for hospital stays where the primary diagnosis or any of the secondary diagnoses are alcohol-attributable. An SAR higher than 100 indicates that the area has higher than average emergency admission rates.



The table below shows the 20 MSOAs in Sussex with the highest ratio of hospital stays due to alcohol-attributable harm.

The highest rates are seen in Brighton and Hove, with St James's Street & Queen's Park at nearly double the England baseline (190.8), followed by other Brighton neighbourhoods like Whitehawk, Kempdown and King Alfred all well above 100. Hastings also shows a cluster of high rates, including Hollington, Central Hastings, Central St Leonards and Broomgrove, all ranging from 134 to 138.

Coastal towns in Arun (Littlehampton West & River, Bognor Regis Central, South Bersted, Hawthorn Road) and Worthing (Worthing Central, East Worthing) similarly have elevated hospital stays related to alcohol harm, as do other urban pockets like Crawley (Manor Royal & Northgate, Bewbush) and parts of Chichester (Oaklands and Selsey). Overall, these high rates are largely concentrated in deprived neighborhoods within seaside towns and urban centres, highlighting where alcohol-related health interventions may be most urgently needed.

MSOA	Local Authority	Alcohol attributable harm
St James's Street & Queen's Park - Brighton and Hove 030	Brighton and Hove	190.83
Pier - Eastbourne 010	Eastbourne	155.93
Littlehampton West and River - Arun 011	Arun	152.42
Hollington - Hastings 003	Hastings	138.28
Bognor Regis Central - Arun 017	Arun	137.26
Central Hastings - Hastings 009	Hastings	135.78
Central St Leonards - Hastings 011	Hastings	134.8
Worthing Central - Worthing 011	Worthing	133.71
Broomgrove - Hastings 005	Hastings	133.39
Whitehawk - Brighton and Hove 025	Brighton and Hove	128.78
South Bersted - Arun 014	Arun	122.07
Hawthorn Road - Arun 016	Arun	117.53
Kempdown - Brighton and Hove 031	Brighton and Hove	115.1
East Worthing - Worthing 009	Worthing	113.95
Manor Royal & Northgate - Crawley 004	Crawley	110.6
College Lane & Oaklands - Chichester 008	Chichester	110.43
Bewbush - Crawley 010	Crawley	108.02
King Alfred - Brighton and Hove 028	Brighton and Hove	106.38
Herstmonceux & Ninfield - Wealden 014	Wealden	105.75
Selsey - Chichester 014	Chichester	105.59
Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021		

## Brighton and Hove records some of the lowest immunisation rates compared to Sussex and England averages, with notably lower vaccination coverage for flu in older adults and children in care immunisations

The table below shows population vaccination coverage by type of vaccination across Sussex, the South East and England. Cells shaded green show the areas that fare the worst on each measure of population vaccination coverage.

Population vaccination coverage	Brighton and Hove	East Sussex	West Sussex	South East	England
Rotavirus (Rota) (1 year)	86.9	88.6	89.6	90.8	88.5
DTaP and IPV booster (5 years)	81.1	85.8	85.9	85.5	82.7
Dtap IPV Hib HepB (1 year old)	90.5	91.6	92.6	93.5	91.2
Flu (6 months–64 yrs at risk individuals)	39.4	41.3	45.1	44.2	41.4
Flu (2 to 3 years old)	51.1	47.8	54.6	52.2	44.4
Flu (aged 65 and over)	73.1	78.1	81.4	79.9	77.8
Hib and MenC booster (2 years old)	89.3	90.4	90.0	91.0	88.6
MenB (1 year)	90.9	91.2	94.0	92.9	90.6
MenB booster (2 years)	88.0	89.8	89.7	90.3	87.3
Meningococcal ACWY conjugate vaccine (MenACWY) (14 to 15 years)	70.9	66.9	75.0	79.4	73.0
MMR for one dose (2 years old)	89.3	90.2	92.2	91.5	88.9
MMR for one dose (5 years old)	90.5	92.4	94.4	93.5	91.9
MMR for two doses (5 years old)	83.0	86.6	87.5	86.8	83.9
PCV	92.7	93.5	95.2	94.9	93.2
PCV booster	88.8	90.2	90.0	90.7	88.2
Children in care immunisations (<18 yrs)	76.0	80.0	92.0	85.0	82.0

Source: NHS England, 2023/2024, Children in Care – Department for Education (DfE)

Brighton and Hove has some of the lowest immunisation rates in Sussex, with notable gaps compared to the England average. Flu vaccination coverage for older adults (73.1%) and at-risk groups aged 6 months to 64 years (39.4%) is below the national averages of 77.8% and 41.4%, respectively. Children in care immunisations are also lower at 76.0%, compared to 82.0% nationally. While routine childhood vaccine rates are closer to the England average, these shortfalls in flu and vulnerable children's immunisations highlight potential areas for improvement.

## General Wellbeing

General wellbeing reflects how people feel about their lives, communities, and day-to-day experiences. This section explores key indicators of wellbeing, including levels of anxiety and life satisfaction, feelings of belonging to the local neighbourhood, and satisfaction with the local area as a place to live. It also provides an overview of wider determinants of health – such as poverty, deprivation, education, crime, and access to green spaces – which all play a vital role in shaping people's quality of life and long-term health outcomes.

### Brighton and Hove reports higher anxiety and lower happiness than other Sussex areas and England, while low life satisfaction and self-worth are more common nationally than in Sussex overall

The table below includes wellness index measures taken from the Annual Population Survey and forming part of a series of questions designed to measure personal wellbeing including high anxiety, low happiness, low life satisfaction and low self-worth.

Area Name	High anxiety	Low happiness	Low life satisfaction	Low self-worth
Brighton and Hove	26.08%	9.65%	4.70%	4.28%
East Sussex	21.36%	9.37%	5.09%	4.26%
West Sussex	20.97%	8.10%	4.18%	3.13%
South East	20.87%	8.37%	4.70%	3.70%
England	21.09%	9.15%	5.50%	4.31%
Source: Office for National Statistics/Annual Population Survey, 2023				

Brighton and Hove has the highest level of high anxiety at 26.1%, notably above the England average of 21.1%, and also reports the highest percentage of low happiness at 9.7%, compared to 9.2% nationally. East Sussex and West Sussex have slightly lower anxiety rates of 21.4% and 21.0%, and lower low happiness levels at 9.4% and 8.1% respectively. For low life satisfaction and low self-worth, Sussex areas generally fare better than England, with Brighton and Hove at 4.7% and 4.28%, below the national rates of 5.5% and 4.3%.

This indicates that while high anxiety and low happiness are areas of concern across Brighton and Hove in terms of overall wellbeing, low life satisfaction and low self-worth are less prevalent across Sussex compared to England.

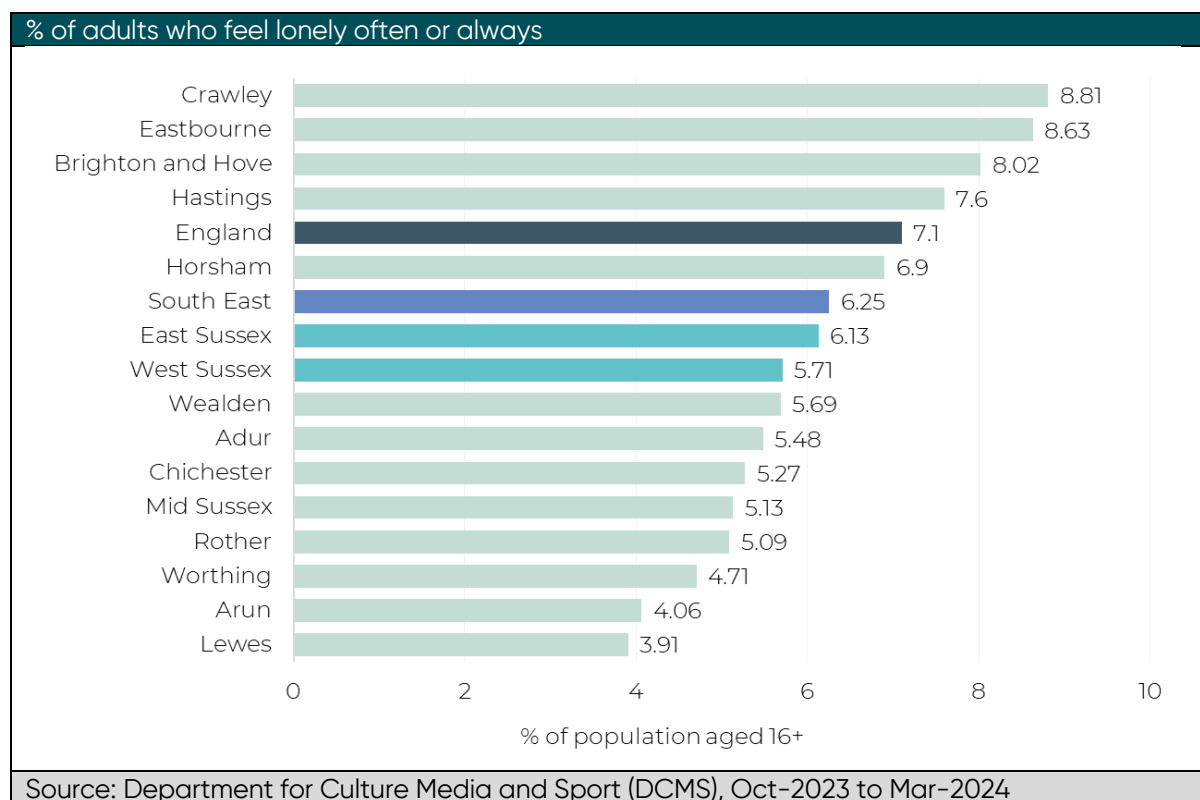
## Sussex areas report higher satisfaction with local areas than the England average, but Brighton and Hove shows lower neighbourhood belonging and higher loneliness than both Sussex and national averages

The table below shows measures from the Community Life Survey (CLS) covering neighbourhood belonging and cohesion. Figures are taken from the CLS Annual Publication which is a key evidence source for understanding more about community engagement and social cohesion, sampling adults (aged 16+) throughout England.

CLS indicator (%)	Brighton and Hove	East Sussex	West Sussex	South East	England
Have emotional support network	97.62%	96.66%	95.45%	95.86%	95.39%
Has availability of company	93.93%	93.41%	92.47%	92.53%	91.86%
Has available support network	96.28%	96.18%	95.38%	95.30%	94.40%
Overall satisfied with local area	79.81%	77.63%	79.92%	76.74%	73.44%
Recommend local area as place to live	76.72%	71.39%	72.60%	69.79%	66.02%
Find local area attractive	68.20%	66.89%	67.11%	63.85%	57.29%
Has pride in local area	61.88%	62.87%	64.09%	61.80%	59.28%
Satisfied with green spaces	84.11%	79.94%	81.98%	79.47%	75.36%
Good community cohesion	86.56%	81.20%	85.65%	83.37%	81.35%
Trusts neighbours	42.39%	48.34%	49.65%	45.41%	40.50%
Neighbour interactions at least once a month	64.08%	72.63%	74.17%	70.42%	69.45%
Good neighbourhood cooperation	52.56%	57.33%	58.96%	57.74%	55.65%
Very/fairly strong sense of neighbourhood belonging	56.85%	61.67%	61.91%	60.39%	61.09%
Often/always feel lonely	8.02%	6.13%	5.71%	6.25%	7.10%
Source: Department for Culture Media and Sport (DCMS), Oct-2023 to Mar-2024					

Sussex areas generally report higher satisfaction with their local surroundings than the England average, with around 78–80% of people in Brighton and Hove, West Sussex, and East Sussex expressing overall satisfaction, compared to 73.4% nationally. However, Brighton and Hove stands out with a lower sense of neighbourhood belonging at 56.9%, below the England average of 61.1% and other Sussex areas, which are above 61%. Additionally, loneliness is more common in Brighton and Hove, where 8.0% often or always feel lonely, compared to 7.1% nationally, and lower rates across East and West Sussex (6.1% and 5.7%). Despite this, Brighton and Hove residents report slightly better emotional support networks (97.6%) than the national average (95.4%).

Overall, while Sussex residents are more satisfied with their local areas, Brighton and Hove faces particular challenges around community connection and loneliness. The chart below shows the percentage of adults who feel lonely often or always, broken down by local authority in Sussex compared to regional and national averages.



As the chart shows, Lewes (3.91%) and Arun (4.06%) report the lowest percentages of people who often feel lonely, performing better than the England average of 7.1%. In contrast, urban areas such as Hastings (7.6%), Brighton and Hove (8.02%), Eastbourne (8.63%) and Crawley (8.81%) have higher rates of frequent loneliness, exceeding both the regional and national averages. These figures highlight clear variation across Sussex, with some urban areas experiencing notably higher levels of loneliness.

## Wider determinants of health and wellbeing highlight the complex and interconnected factors that influence general wellbeing across Sussex local areas

Wider determinants of health cover many factors – such as poor education or skills, limited employment, disadvantaged housing, high crime rates, lack of access to important services and availability of green spaces. Each one of these, and many other factors, intersect across Sussex to affect overall well-being at a local level.

Many of these topics were explored in the previous two reports in the Sussex Uncovered series (Tackling Poverty and Reaching Potential), with some of the key findings related to health outcomes highlighted below:

- In addition to the general health challenges that arise from long-term illness and disability, there's strong evidence that people with disabilities are more likely to face material deprivation issues.

- People with a disability are more likely to experience unemployment: only 44.6% of working-age people with a disability are employed, compared with 76.2% of those without a disability.
- People with a disability in Sussex are also more likely to be living in the most deprived areas.
- Brighton and Hove, Hastings and Crawley all have higher rates of households assessed as 'homeless' than the national average.
- 91 LSOAs in Sussex rank among the 20% of neighbourhoods in England with the highest levels of deprivation on the IMD 2025, and 48 of these are in the most deprived 10%.
- The 20 neighbourhoods with the highest levels of deprivation in Sussex are concentrated mainly in coastal urban areas. These include multiple neighbourhoods within Brighton and Hove (Whitehawk, Kemptown, Moulsecoomb and Bevendean), as well as several in Hastings (Hollington, Central Hastings, St Leonards). Other coastal towns with highly deprived areas include Bexhill, Eastbourne, Bognor Regis, Littlehampton, Peacehaven, and Portslade, with the highest levels of deprivation strongly clustered around Sussex's coastal communities, highlighting persistent socioeconomic challenges in these urban and seaside areas.

The data in the table below also summarises some of these key wider determinants of health and well-being across Sussex areas, colour coded red to green to show the areas that fare worst to best on each measure. It includes the following measures:

- Unemployment = Unemployment benefit claimants as proportion of working age population
- Jobs = Jobs density per 100 working-age people
- Skills = People with no qualifications as a proportion of all people over 16 years
- Homelessness = Households assessed as homeless as a proportion of all households
- Crime = Total crime offences (12 months) per 1,000 population
- Greenspace = Green space (% households with access)
- Community assets = Community owned assets per 100,000 population
- Sport assets = Number of sports facilities per 100,000 population
- CNI = Community Needs Index 2023 rank
- IMD = Indices of Multiple Deprivation 2025 rank

Area name	Unemployment	Jobs	Skills	Homeless	Crime	Greenspace	Comm assets	Sport assets	CNI	IMD
Adur	2.99%	59	19.51%	5.07	70.9	19.93%	234.29	771.53	17,847	20,482
Arun	3.67%	57	19.73%	7.41	79.6	17.31%	459.74	579.8	8,717	17,164
Brighton	4.37%	73	12.41%	8.47	115.6	24.85%	1,283.28	843	22,368	17,375
Chichester	3.40%	91	14.84%	3.97	69.4	18.29%	858.27	713.37	14,973	19,469
Crawley	4.83%	115	17.83%	9.55	124.9	14.89%	62.57	772.19	13,354	15,270
Eastbourne	4.81%	67	18.41%	10.66	116.8	23.68%	564.05	877.2	12,916	14,812
Hastings	5.08%	61	20.13%	10.22	111.6	33.82%	1,347.78	508.81	15,418	8,288
Horsham	2.00%	70	12.49%	2.39	52.6	14.03%	848.11	716.02	15,105	25,578
Lewes	3.47%	65	16.07%	3.03	64.7	22.82%	889.43	676.65	14,070	19,094
Mid Sussex	1.87%	68	11.72%	3.78	56.3	20.52%	519.07	796.37	18,782	26,644
Rother	3.28%	70	18.88%	6.42	71.3	21.59%	616.09	650.89	11,216	14,669
Wealden	2.25%	59	14.94%	3.71	44.7	14.32%	1,282.55	609.43	10,981	22,570
Worthing	3.15%	75	16.22%	6.68	87.9	15.88%	242.19	797.58	21,670	19,778
England	4.24%	79	18.08%	7.38	91.1	23.04%	755.79	826.68	17,040	16,746

Sources: DWP, May-2025; Bres, 2023; Census 2021; Lang Registry, Mar-2024 to Feb-2025; DLUHC, 2023/24; Police UK, Mar-2024 to Feb-2025; DEFRA, 2024; Power to Change, 2023; Sport England, 2023; OCSI and Local Trust, 2023, MHCLG, 2025



Hastings and Eastbourne face some of the most notable challenges, with the highest homelessness rates at 10.22% and 10.66% respectively, alongside high unemployment (5.08% in Hastings) and elevated crime rates (111.6 in Hastings and 116.8 in Eastbourne per 1,000 population). Both areas also rank poorly on deprivation, with Hastings having an IMD rank of 8,288 and Eastbourne 14,812, indicating higher levels of need in these areas.

Crawley has the highest crime rate across Sussex at 124.9 but also the highest jobs density (115), while still experiencing relatively high unemployment (4.83%) and homelessness (9.55%). Brighton and Hove shows high unemployment (4.37%) and homelessness (8.47%) with substantial crime levels (115.6), but benefits from higher skills, better access to green spaces and strong community assets. Meanwhile, parts of West Sussex, such as Adur and Arun, face lower jobs density and higher proportions of people with no qualifications, combined with fewer community assets, with Arun notably having the lowest Community Needs Index ranking of all Sussex Local Authorities.

Overall these patterns highlight how coastal and urban areas in Sussex tend to face the broadest set of social and economic disadvantages, but they also highlight the complex and interconnected factors that influence health and wellbeing across different parts of the county. The data shows that each set of areas face their own unique combination of challenges and strengths – some performing better on certain indicators while struggling in others. These wider determinants often overlap and interact, so understanding the full context in each place could help build more effective, locally relevant responses to improving wellbeing.

# Health Inequalities by Demographic

Health outcomes are not experienced equally across the population. This section explores how demographic factors – such as gender, age, ethnicity, and LGBTQ+ identity – can influence people’s health and wellbeing. Where data is available, it highlights disparities and patterns that show how different groups may face unequal risks, barriers to healthcare, or varying health outcomes, helping to inform more targeted and inclusive approaches to improving public health.

## Females are more likely to be claiming disability benefits than males across Sussex, with young people also most affected in coastal areas

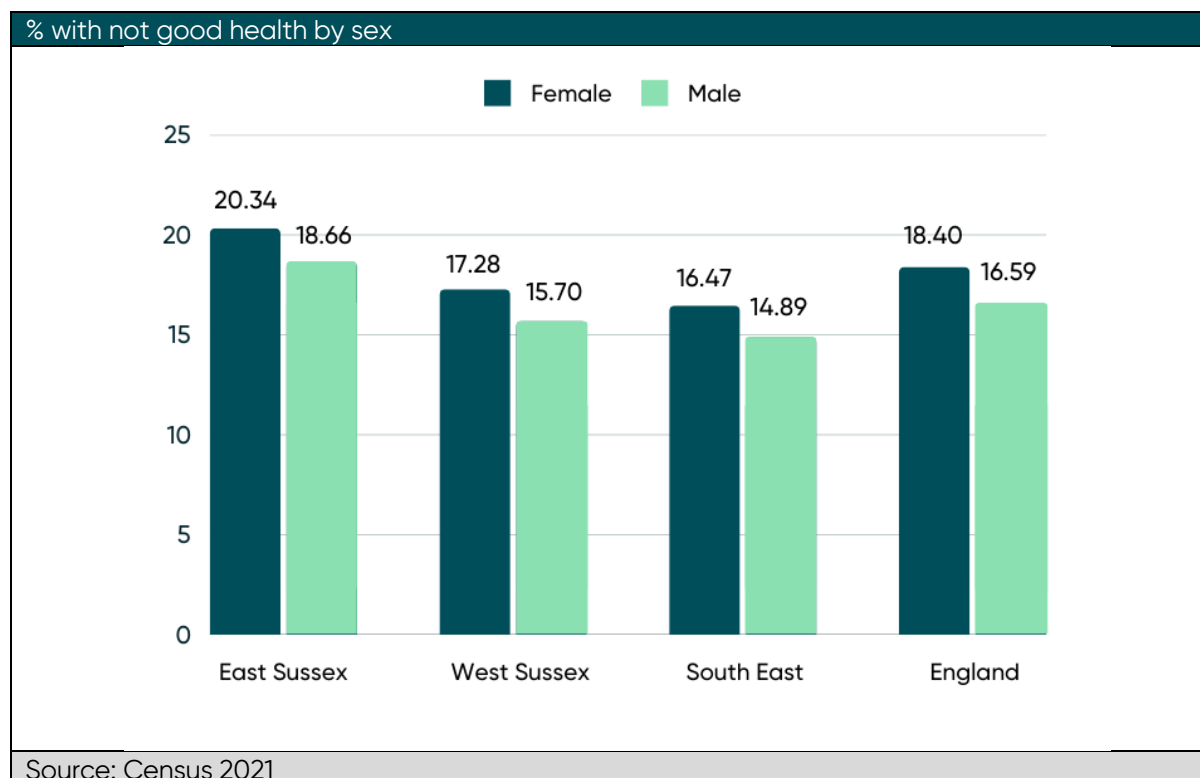
The table below shows the proportion of Personal Independence Payment (PIP) claimants by gender and among young people (aged 16–24) across Sussex. Across nearly all areas, females have higher rates of PIP claimants than males, with the gender gap particularly pronounced in places like Adur, Eastbourne, and Crawley. Hastings has the highest overall rate and also the highest rate among young people (10.96%), notably above the England average for this age group (6.10%). In contrast, Brighton and Hove shows relatively low claimant rates among young people (4.45%), despite higher overall rates. These patterns suggest both geographic and demographic inequalities in disability-related benefit claims.

Local Authority	Total	Females	Males	Young people (16–24)
Adur	8.82%	10.16%	7.44%	7.30%
Arun	9.09%	9.89%	8.26%	6.90%
Brighton and Hove	8.46%	8.85%	8.06%	4.45%
Chichester	6.72%	7.26%	6.15%	4.95%
Crawley	7.56%	8.70%	6.44%	6.47%
Eastbourne	11.58%	12.44%	10.64%	8.55%
Hastings	13.45%	14.33%	12.54%	10.96%
Horsham	5.37%	5.96%	4.76%	4.85%
Lewes	9.57%	10.24%	8.85%	8.50%
Mid Sussex	5.27%	5.85%	4.66%	5.70%
Rother	10.75%	11.51%	9.94%	9.45%
Wealden	6.80%	7.59%	5.97%	6.58%
Worthing	8.43%	9.48%	7.33%	7.31%
East Sussex	10.01%	10.80%	9.17%	8.53%
West Sussex	7.15%	7.96%	6.31%	6.08%
South East	7.21%	7.89%	6.50%	6.16%
England	9.41%	10.22%	8.58%	6.10%

Source: Department for Work and Pensions (DWP), Jan-2025

## Females are more likely to report not good health than males across all comparator areas, with the highest rates shown in East Sussex

The chart below shows the proportion of females and males who have self-reported that their health is not good as a percentage of the total female or male population respectively. Figures are based on responses to the 2021 Census and only those who have responded to the general health self-assessment are included in the denominator.



The chart highlights consistent gender differences in self-reported “not good” health across Sussex and beyond, with females reporting poorer health than males in every area. The gap is most pronounced in East Sussex, where 20.34% of females report not good health compared to 18.66% of males – a difference of 1.68 percentage points. In West Sussex and the South East more broadly, the gap narrows slightly (1.58 points), but still persists. This is also the case nationally where females also report worse health (18.40%) than males (16.59%).

## People of white ethnicity were more likely to report their health as not good across all areas, with the highest rates in East Sussex for all ethnic groups

The chart below shows the proportion of people within each ethnic group who have self-reported that their health is not good as a percentage of the total number of respondents within the ethnic group. Figures are based on responses to the 2021 Census and only those who have responded to the general health self-assessment are included in the denominator.



The chart shows that people of White ethnicity consistently report the highest levels of “not good” health across all geographic areas. This trend is especially pronounced in East Sussex, where 21.41% of White individuals report poor health – the highest rate across all ethnic groups and regions shown. However, East Sussex shows elevated levels of poor health across nearly all ethnic groups, showing how it faces broader health challenges irrespective of ethnicity. It is also important to note that differences in self reported health across ethnic groups may reflect differences in age profile among these groups, with a higher proportion of people aged 70 and over in white ethnic groups.

The table below shows the same data broken down by local authority across Sussex. The cells shaded green show the areas with the highest values for each ethnic group.

Area Name	Asian	Black	Mixed	White	Other
Adur	13.90%	12.45%	10.13%	21.13%	18.42%
Arun	13.24%	14.11%	12.86%	21.39%	15.55%
Brighton and Hove	13.25%	12.48%	12.63%	17.89%	17.53%
Chichester	10.45%	7.76%	9.72%	17.74%	10.58%
Crawley	14.11%	12.21%	10.48%	18.16%	13.90%

Eastbourne	13.93%	14.18%	12.17%	23.30%	16.06%
Hastings	11.95%	17.35%	16.61%	24.68%	18.28%
Horsham	9.77%	8.73%	8.66%	15.66%	15.30%
Lewes	14.61%	15.17%	14.26%	20.84%	16.45%
Mid Sussex	9.09%	11.77%	7.89%	15.16%	11.86%
Rother	12.76%	12.08%	14.62%	22.83%	16.40%
Wealden	12.12%	14.29%	9.96%	18.03%	12.96%
Worthing	10.55%	11.93%	11.04%	20.73%	15.21%
East Sussex	13.10%	15.00%	13.40%	21.41%	16.39%
West Sussex	12.25%	11.56%	10.00%	18.33%	14.22%
South East	11.53%	9.26%	9.71%	17.71%	12.79%
England	14.75%	13.07%	11.32%	19.79%	15.55%
Source: Census 2021					

Across Sussex, Hastings stands out with particularly poor self-reported health outcomes among ethnic minority groups – especially Black (17.35%), Mixed (16.61%), and Other (18.28%) communities. Eastbourne and Lewes also show higher rates among several minority groups compared to regional and national averages. While White populations consistently report the highest rates of poor health across most areas, the data suggests that health inequalities are also prominent among ethnic minority communities in certain coastal local authorities.

## Self-reported poor health is notably higher amongst people identifying as trans and non-binary, particularly in Brighton and Hove

The table below shows the proportion of people with bad or very bad health by sexual orientation and gender identity. The data is shown as percentage of each population group who self-reported that they had bad or very bad health in the 2021 Census. Cells shaded green show the areas that fare the worst on each indicator.

Area Name	Brighton and Hove	East Sussex	West Sussex	South East	England
Sexual Orientation					
Straight or Heterosexual	5.60%	6.48%	5.15%	4.93%	6.04%
LGBTQ+	6.56%	7.52%	6.20%	6.03%	6.47%
Gender Identity					
Cisgender	5.69%	6.54%	5.20%	4.97%	6.06%
Trans and Gender Diverse	11.70%	11.47%	8.88%	8.18%	8.59%
Source: Census 2021					

This data shows clear disparities in self-reported poor health by both gender identity and sexual orientation across Sussex, the South East and England. People who identify as trans and gender diverse report notably higher levels of not good health than cisgender people in all areas – most

notably in Brighton and Hove (11.70%) and East Sussex (11.47%), compared to 5–6.5% among cisgender people.

Similarly, those who identify as LGBTQ+ report worse health outcomes than those who are straight or heterosexual across all areas, with the highest rate seen in East Sussex (7.52% compared to 6.47% nationally). The disparity is more pronounced in Sussex compared to the South East average, indicating that LGBTQ+, trans and gender diverse communities in this region may be experiencing greater health inequalities.

## Sussex has lower physical inactivity rates than on average across England, but across all areas physical inactivity is notably higher amongst ethnic minority groups

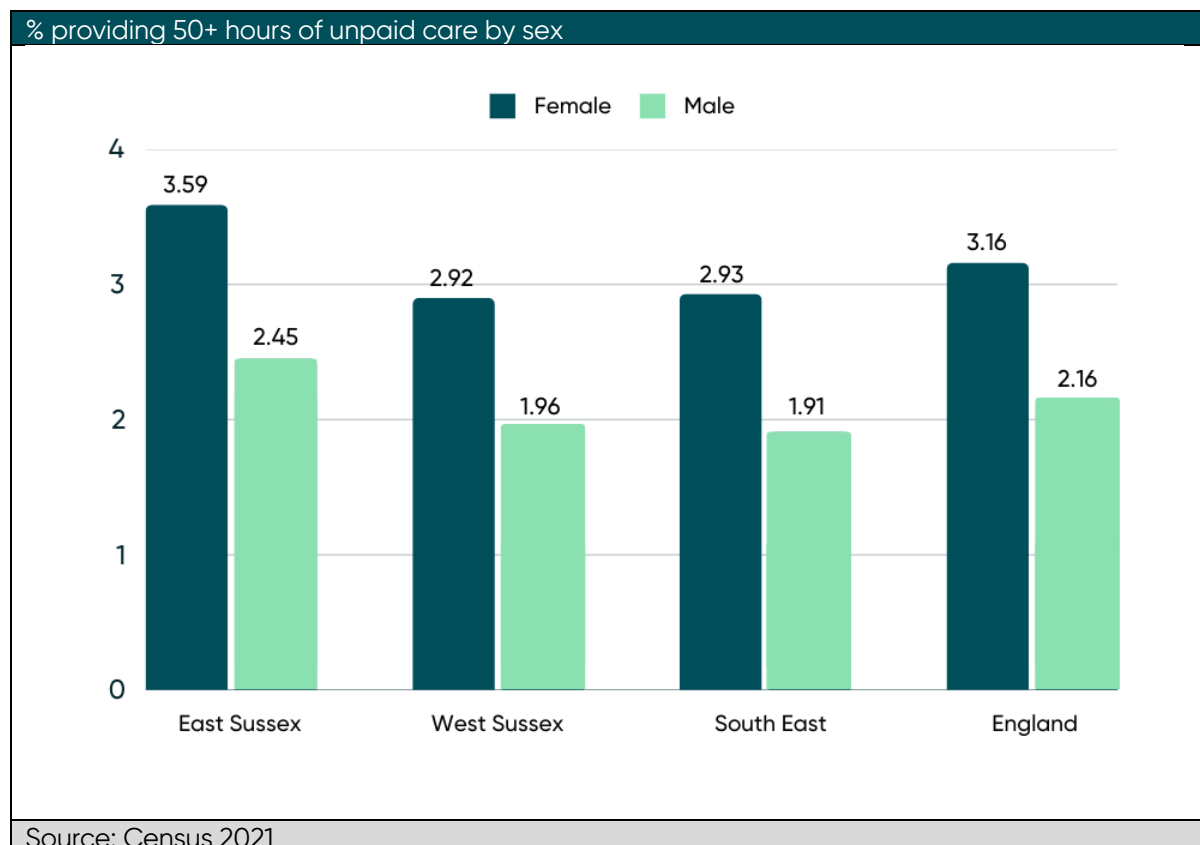
The table below shows inactive adults aged 16+ by ethnicity. The data shows that although physical inactivity rates in East and West Sussex are generally lower than the national average across all ethnic groups, a consistent pattern emerges where ethnic minority groups report higher inactivity compared to White British, White Other and Mixed ethnicities. For example, inactivity among Asian groups is over 31% in both East and West Sussex, compared to around 24% for White British residents. Similarly, Black, Chinese, and Other ethnic groups also show elevated inactivity levels. This highlights a clear ethnic disparity in physical activity, even in areas like Sussex that perform better than the national average overall.

Inactive adults (age 16+):	East Sussex	West Sussex	South East	England
Asian (excl. Chinese)	31.33%	32.12%	31.66%	34.72%
Black	27.42%	28.64%	27.41%	30.74%
Chinese	27.15%	28.12%	27.54%	30.09%
Mixed	19.35%	19.87%	19.23%	21.61%
Other ethnic group	30.74%	32.00%	31.57%	34.51%
White British	24.08%	24.27%	23.46%	25.94%
White Other	23.98%	24.41%	23.77%	26.22%

Source: Sport England: Active Lives Survey, 2021/2022

## Females are far more likely to be providing intensive unpaid care than males across all comparator areas, with the highest rates in East Sussex

The chart below shows the proportion of females and males providing 50+ hours of unpaid care a week as a proportion of each population group.



The chart shows a clear difference between men and women when it comes to unpaid care, with all areas showing that women spend more hours each week doing unpaid care than men. In East Sussex, women provide an average of 3.59 hours a week, while men provide 2.45 hours. This is the biggest gender gap among the regions. The same pattern appears in West Sussex (2.92 hours for women compared to 1.96 for men), the South East (2.93 vs. 1.91), and England as a whole (3.16 vs. 2.16).



## Hospital admissions as a result of self-harm (10–24 yrs) are notably higher amongst females than males across all areas, particularly in East Sussex and Brighton

The table below shows the standardised rate of finished admission episodes for self-harm per 100,000 population aged 10 to 24 years, by gender.

Area Name	All	Female	Male
Brighton and Hove	442.73	747.72	107.21
East Sussex	459.90	760.54	176.80
West Sussex	336.07	555.92	127.05
South East	307.66	506.32	116.62
England	266.62	432.83	104.34
Source: Office for Health Improvements and Disparities (OHID) via Fingertips, 2023/2024			

As shown in the table, hospital admissions for self-harm among 10–24-year-olds are consistently higher for females than males across all areas. In East Sussex, the rate for females is 760.54 per 100,000, compared to 176.80 for males, while in Brighton and Hove, the female rate is 747.72 compared to just 107.21 for males. West Sussex also shows a clear gap, with 555.92 for females and 127.05 for males. This pattern continues across the South East and England, where female rates (506.32 and 432.83) are more than four times higher than those for males (116.62 and 104.34). The data highlights a consistent and notable gender difference in self-harm admissions, with the highest rates seen in East Sussex and Brighton.

## Child hospital admissions for mental health conditions are notably higher for females than males, particularly in Brighton and Hove where females are admitted at a rate over 4.5 times that of males

The table below shows the rate of hospital admissions for mental health conditions among children and young people (aged 0–17) per 100,000 population aged under 18 years, by gender.

Area Name	All	Female	Male
Brighton and Hove	128.57	196.39	42.10
East Sussex	106.17	139.17	65.66
West Sussex	61.45	86.18	38.05
South East	80.95	109.37	51.48
England	80.20	106.82	53.49
Source: NHS England, Hospital Episode Statistics (HES) via Fingertips, 2023/24			

Hospital admissions for mental health conditions among children and young people (aged 0–17) are consistently higher for females than males across all areas. The most striking difference is seen in Brighton and Hove, where the female admission rate is 196.39 per 100,000 compared to just 42.10 for males – over 4.5 times higher. Similar patterns are observed elsewhere, with females in East Sussex and West Sussex admitted at rates more than double those of males. This trend

continues at the regional and national levels, highlighting a clear gender disparity in mental health-related hospital admissions among young people.

## Brighton and Hove has the highest SEN rates for Social, Emotional and Mental Health needs – higher amongst boys than girls across all areas

The tables below show the proportion of school children with Special Education Needs (SEN) where Social, Emotional and Mental Health (SEMH) is identified as the primary type of need, expressed as a percentage of all school pupils, by gender and by school age.

Area Name	All	Female	Male
Brighton and Hove	4.2	3.2	5.1
East Sussex	3.6	2.4	4.7
West Sussex	3.3	2.2	4.3
South East	3.3	2.1	4.4
England	3.3	2.1	4.4
Source: Department for Education (DfE) via Fingertips, 2022/2023			

The data shows clear demographic differences in SEN pupils with SEMH, with Brighton and Hove having the highest rates across all groups. Boys are notably more likely than girls to be identified with SEMH needs – for example, 5.1% of boys in Brighton and Hove compared to 3.2% of girls, a pattern consistent across the region. While SEMH needs are generally higher among secondary school pupils, the gap between primary and secondary is smaller in Brighton and Hove and East Sussex than in the South East or England, suggesting earlier or more consistent identification of need in these areas.

Area Name	Primary school age	Secondary school age
Brighton and Hove	4.0	4.4
East Sussex	3.3	3.4
West Sussex	2.6	3.7
South East	2.9	3.4
England	2.8	3.5
Source: Department for Education (DfE) via Fingertips, 2022/2023		

## Across all areas males are more likely to die by suicide than females, with the gap between sexes slightly smaller in Brighton and Hove

The tables below show the age-standardised mortality rate from suicide and injury of undetermined intent per 100,000 population, by gender and age.

Area Name	All	Female	Male
Brighton and Hove	16.45	12.61	20.46
East Sussex	11.70	5.92	18.11
West Sussex	11.76	5.27	18.69
South East	10.40	5.61	15.55
England	10.75	5.45	16.41
Source: Office for National Statistics (ONS) via Fingertips, 2021-23			

Suicide rates are higher among males than females across all areas, reflecting a consistent national trend. In East Sussex and West Sussex, male rates are more than three times higher than female rates, with 18.11 and 18.69 per 100,000 for males compared to 5.92 and 5.27 for females, respectively. Similarly, in the South East and England overall, male rates remain higher at 15.55 and 16.41, versus 5.61 and 5.45 for females. Brighton and Hove shows a smaller gap between the sexes (and the highest suicide rates overall), with a male rate of 20.46 and a female rate of 12.61, though male suicide remains notably higher. This data underlines the ongoing gender disparity in suicide mortality, with men consistently at greater risk.

Area Name	10-24 yrs	25-44 yrs	45-64 yrs	65+ yrs
Brighton and Hove	8.87	17.13	23.81	7.62
East Sussex	5.23	15.31	15.28	8.98
West Sussex	6.43	13.35	15.45	8.98
South East	5.59	12.20	13.37	8.44
England	5.44	12.64	13.64	8.15
Source: Office for National Statistics (ONS) via Fingertips, 2019-2023				

As shown in the table above, suicide rates are highest among people aged 25-64 in most areas, particularly in Brighton and Hove, where the rate reaches 23.81 per 100,000 for 45-64-year-olds. Rates are generally lowest among the 10-24 age group, though Brighton and Hove again stands out with a higher rate of 8.87 in this age band (compared to 5.44 per 100,000 nationally). Across all regions, suicide rates tend to increase with age up to midlife and then decline slightly in the 65+ age group.

## Conclusion

Sussex is often seen as a healthy and relatively affluent region, but this report reveals a much more complex reality. The data reveals a clear and persistent pattern of health inequality across Sussex, with the most severe outcomes concentrated in a relatively small number of disadvantaged neighbourhoods – particularly in coastal areas and urban areas within larger coastal towns such as Hastings, Eastbourne, Brighton and Hove, Arun and Rother. These communities experience overlapping challenges including poor physical and mental health, high disability rates, lower life expectancy, elevated emergency admissions and preventable mortality.

The data shows a high level of long-term illness and disability among working-age adults, with some neighbourhoods reporting disability benefit claim rates more than three times the national average. Mental health needs are also notably above average, especially in areas with high levels of deprivation and social isolation. For children and young people, the picture is similarly troubling – with elevated rates of young carers, child disability and mental health issues in many of these same communities.

These intersecting issues are not evenly distributed across Sussex. Instead, they are concentrated in specific places where health deprivation compounds other forms of disadvantage. This points to the importance of place-based approaches, targeting support, resources and interventions at the neighbourhoods most in need to break cycles of poor health and reduce long-term inequalities.

At Sussex Community Foundation, our Improving Health funding priority does just this, supporting grassroots organisations that positively impact local people's physical and mental health and wellbeing. You can help us now by donating to the Improving Health Fund. Donations are pooled with others in the community to enable impactful grant making in this area. You can make a donation of any size and it will make a real difference to people's lives in Sussex. [Find out more.](#)



## Appendix A: Additional Analysis

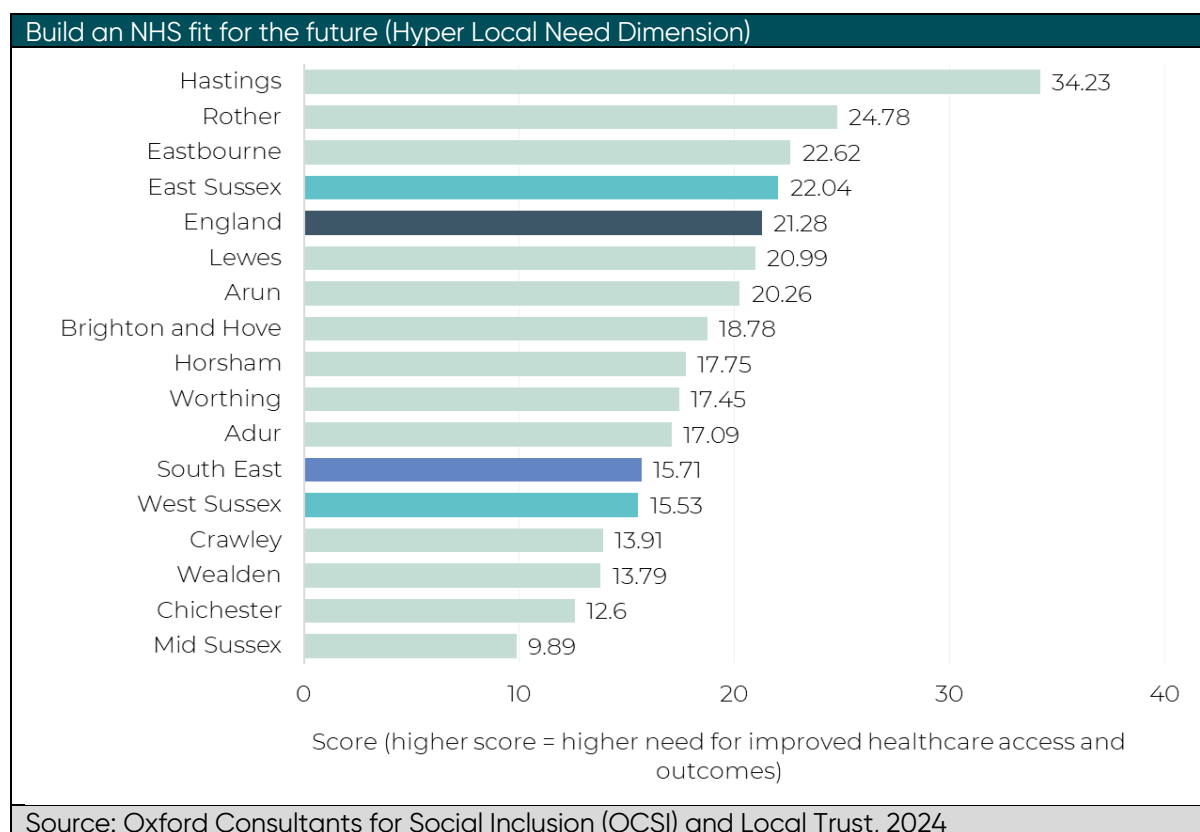
This appendix presents further data and analysis that provide valuable context on health needs across Sussex. It includes a range of indicators and breakdowns that complement the main report, offering deeper insight into specific population groups, behaviours, and health outcomes.

### Hyper local health needs are highest in coastal urban areas with particular pockets of need across Hastings, Brighton and Hove, and Bexhill

The chart below shows the 'Build an NHS fit for the future' dimension score, which is one of the five dimensions used to construct the Hyper Local Need measure. The Hyper Local Need measure has been created in order to demonstrate the ways in which complex and multiple social and economic disadvantages cluster in particular communities around the country. This measure has been created based on an evidence review that was centred around datasets that relate to the achievement of the Labour government's five mission objectives <https://labour.org.uk/change/mission-driven-government/>.

The 'Build an NHS fit for the future' dimension provides evidence to support Mission 5 of the government's five mission objectives, reflecting disability and social care needs in local areas, general health, access to services and mortality. This dimension is comprised of four sub-dimensions: Disability and social care (claimants of Disability benefit, Personal Independence Payment and/or Attendance Allowance and People with a limiting long-term illness), General health (People with bad or very bad health), Access (travel time to nearest Hospital/GP by public transport or walking, GP appointments per 1,000 patients) and Mortality (Life expectancy at birth by gender, Deaths from all causes).

A higher score on this dimension = higher need for improved healthcare access and outcomes.



The table below builds on this by showing the top 20 LSOAs with the highest scores on the Hyper Local Need 'Build an NHS fit for the future' measure.

LSOA	Local Authority	Build an NHS fit for the future (Score)
Hollington - Hastings 003E	Hastings	88.78
Bevendean & Moulsecoomb East - Brighton and Hove 009A	Brighton and Hove	87.94
Kempton - Brighton and Hove 031C	Brighton and Hove	87.72
Whitehawk - Brighton and Hove 025E	Brighton and Hove	87.21
Hollington - Hastings 003C	Hastings	84.75
Whitehawk - Brighton and Hove 025C	Brighton and Hove	83.48
Central St Leonards - Hastings 011B	Hastings	82.05
Whitehawk - Brighton and Hove 025D	Brighton and Hove	79.02
Hollington - Hastings 003A	Hastings	78.16
Hollingdean & Moulsecoomb West - Brighton and Hove 008A	Brighton and Hove	77.43
Whitehawk - Brighton and Hove 025B	Brighton and Hove	76.77
Bevendean & Moulsecoomb East - Brighton and Hove 009D	Brighton and Hove	74.57
Bexhill North & Sidley - Rother 007E	Rother	73.32
Broomgrove - Hastings 005A	Hastings	71.38
Hampden Park South - Eastbourne 004A	Eastbourne	70.89
Bexhill Central - Rother 011E	Rother	70.08
Bognor Regis Central - Arun 017F	Arun	69.56
Bevendean & Moulsecoomb East - Brighton and Hove 009C	Brighton and Hove	69.51
Coldean & Moulsecoomb North - Brighton and Hove 002D	Brighton and Hove	69.49
Whitehawk - Brighton and Hove 025F	Brighton and Hove	68.63
Source: Oxford Consultants for Social Inclusion (OCSI) and Local Trust, 2024		

The data shows that the highest levels of hyper local health need are concentrated in coastal urban areas, particularly within specific neighbourhoods of Brighton and Hove, Hastings, and Bexhill. Several LSOAs in these locations consistently rank at the top of the 'Build an NHS fit for the future' dimension score, which reflects high levels of poor general health, disability, limited access to healthcare and higher mortality.

In Brighton and Hove, areas such as Whitehawk, Moulsecoomb, and Kempton appear repeatedly, indicating a cluster of need in the city's eastern and northern neighbourhoods. Similarly, multiple LSOAs in Hollington and Central St Leonards highlight Hastings as another hotspot. Bexhill also shows notable need, with two LSOAs in the top 20 and Bognor Regis in Arun. These patterns suggest that health inequalities are particularly acute in deprived coastal communities, with clear geographic clusters that could benefit from targeted interventions.

## Prevalence of key health issues are also highest in coastal towns such as Lancing, Sompting, Rustington, Littlehampton, Bognor Regis, Selsey and Bexhill-on-Sea

The following 17 MSOAs are in the top 20 across Sussex on either two or three of the three most prevalent health issues in the county: High blood pressure, Obesity and Diabetes. This suggests these areas face particular challenges around multifaceted health issues. The majority of these are in coastal towns around West Sussex (Lancing, Sompting, Rustington, Littlehampton, Bognor Regis, Selsey) and East Sussex (Bexhill-on-Sea).

MSOA	Local Authority	3 most prevalent health issues – MSOA in top 20 in Sussex
Cokeham & Sompting – Adur 006	Adur	High blood pressure, Diabetes, Obesity
Hailsham East – Wealden 017	Wealden	High blood pressure, Diabetes, Obesity
Selsey – Chichester 014	Chichester	High blood pressure, Diabetes, Obesity
Bexhill Central – Rother 011	Rother	High Blood pressure, Diabetes
Bexhill East & Pebsham – Rother 008	Rother	High Blood pressure, Diabetes
Bexhill North & Sidley – Rother 007	Rother	High Blood pressure, Diabetes
East Preston & Rustington East – Arun 010	Arun	High Blood pressure, Diabetes
Ferring & Kingston Gorse – Arun 008	Arun	High Blood pressure, Diabetes
Littlehampton East – Arun 009	Arun	Diabetes, Obesity
Littlehampton West and River – Arun 011	Arun	Diabetes, Obesity
Marsh Barn & Widewater – Adur 007	Adur	Diabetes, Obesity
North Lancing – Adur 003	Adur	Diabetes, Obesity
Nyetimber & Pagham – Arun 019	Arun	Diabetes, High blood pressure
Rustington North – Arun 007	Arun	Diabetes, Obesity
South Lancing – Adur 008	Adur	Diabetes, Obesity
Wick & Toddington – Arun 004	Arun	Diabetes, Obesity
Yapton & Climping – Arun 006	Arun	High Blood pressure, Obesity
Source: NHS Digital via House of Commons Library, 2022/2023		

## Cancer incidence and early diagnosis rates vary widely across Sussex by cancer type and location, highlighting variation in outcomes and access across the region

The table below shows data on cancer incidence (for breast, colon, lung, and prostate cancers) and the percentage of early-stage diagnoses (stage 1 and 2) across local authorities in Sussex, compared to regional and national averages. The figures are indexed to England (=100), with values above 100 indicating higher-than-average incidence. The cells shaded green indicate the worst-performing local authorities for each indicator.

The data shows that cancer incidence across Sussex varies by type and location, with different local authorities facing higher rates for specific cancers – with Breast cancer incidence highest in Crawley, Colon cancer in Horsham, Lung cancer in Hastings and Prostate cancer in Chichester. Rates of early-stage diagnosis also differ, ranging from below (Lewes, Hastings, Eastbourne, Brighton) to above the national average – highlighting the variation in outcomes and access across the region.

Area Name	Breast Cancer	Colon Cancer	Lung Cancer	Prostate Cancer	Cancer diagnosis (stage 1 and 2)
Adur	105.11	90.87	97.14	114.17	56.34%
Arun	98.36	103.53	94.42	122.45	54.42%
Brighton and Hove	102.45	98.99	105.84	92.08	53.84%
Chichester	100.8	95.35	69.5	131.62	55.95%
Crawley	113.96	103.77	99.33	118.17	59.04%
Eastbourne	92.9	103.37	88.7	99.82	53.40%
Hastings	97.07	93.78	108.59	106.3	52.97%
Horsham	110.22	107.08	59.61	130.07	57.92%
Lewes	94.45	106.46	77.53	100.28	51.39%
Mid Sussex	106.97	105.25	59.43	114.05	55.32%
Rother	104.23	103.44	79.76	116.91	58.33%
Wealden	107.36	93.5	73.35	118.39	55.81%
Worthing	107.23	105.94	88.03	108.21	56.76%
East Sussex	100.25	99.79	82.91	109.83	54.61%
West Sussex	105.31	102.42	78.91	121.13	56.26%
South East	105.58	100.37	87.18	109.3	56.18%
England	100	100	100	100	54.42%
Source: Office for Health Improvements and Disparities (OHID), 2015 to 2019					



## Hastings, Brighton and Hove and Crawley show the highest rates of premature deaths (under 75 years) across key causes

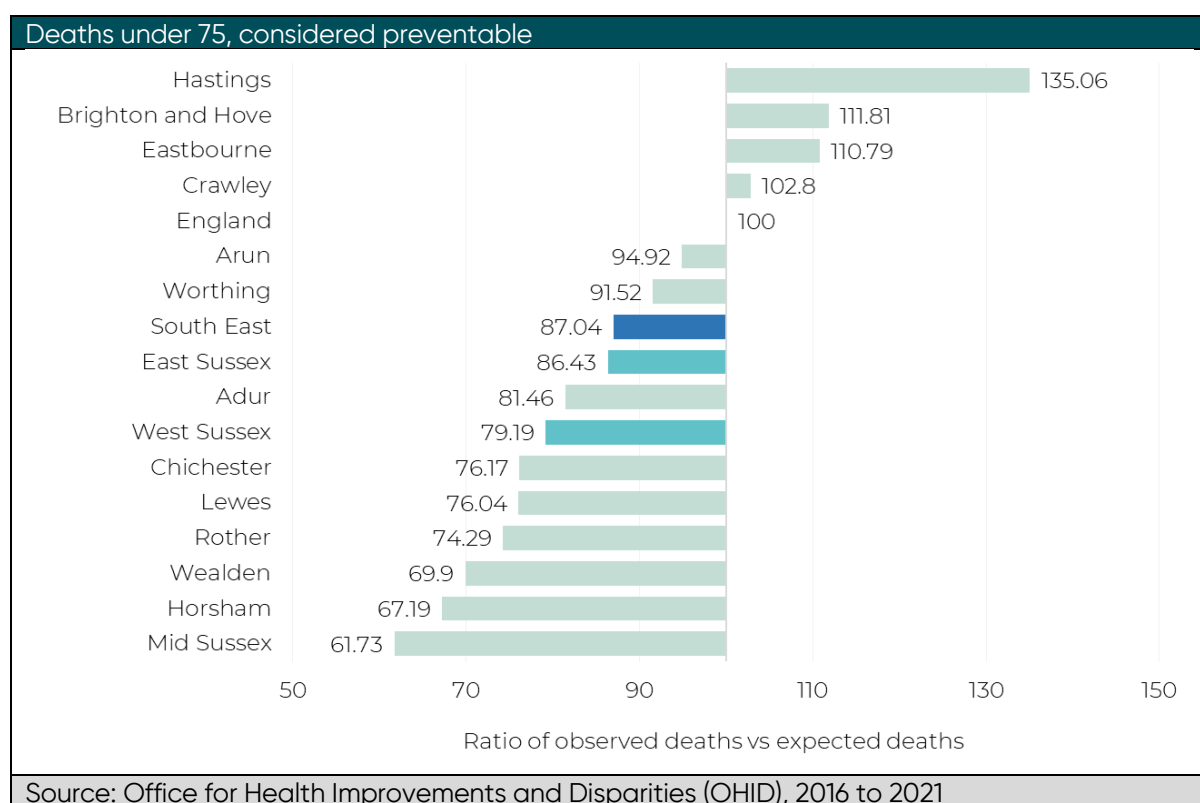
The data in the table below shows rates of death under the age of 75 (premature mortality) by selected causes, standardised against the England average (set at 100). Hastings stands out with notably higher rates across all categories, particularly for circulatory disease (143.71), indicating substantial health challenges in the area. In contrast, Horsham and Mid Sussex report some of the lowest rates of premature death, suggesting better overall health outcomes. Other areas, such as Brighton and Hove, Eastbourne and Crawley also exceed national averages, especially for cancer. These patterns highlight geographic disparities in early mortality and the need for targeted prevention and health improvement efforts in higher-risk areas.

Area Name	All Causes	Circulatory disease	All Cancers
Adur	86.62	83.32	99.15
Arun	93.90	94.58	100.69
Brighton and Hove	106.14	96.89	107.25
Chichester	80.36	74.22	86.49
Crawley	99.33	100.27	104.11
Eastbourne	102.98	82.74	103.75
Hastings	130.59	143.71	120.37
Horsham	70.78	63.86	83.22
Lewes	81.47	74.16	85.94
Mid Sussex	72.22	61.73	84.59
Rother	80.33	67.37	84.94
Wealden	75.07	66.91	82.49
Worthing	93.82	92.20	96.30
East Sussex	90.44	82.43	92.86
West Sussex	84.28	80.17	92.52
South East	88.72	83.62	93.98
England	100	100	100
Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021			

## Preventable deaths under 75 are highest in coastal urban areas, especially Hastings, Brighton and Hove and Eastbourne

The chart below shows the standardised mortality ratio (SMR) for deaths from causes considered preventable, aged under 75 years.

The 20 Sussex areas with the highest rates of preventable deaths under 75 are concentrated in coastal and urban communities, particularly in Brighton and Hove, Hastings, and Eastbourne.



The table below shows the 20 MSOAs with the highest ratio of preventable deaths under 75 years. Brighton and Hove is the most prominent, with seven areas in the top 20, including Whitehawk, Kemptown, Queen's Park, and Moulsecoomb. Hastings also features strongly, with five MSOAs such as Central St Leonards, Hollington and Silverhill. Eastbourne has particularly high rates in Pier and Hampden Park North. Other coastal areas like Bognor Regis, Littlehampton, Worthing, and Bexhill also feature, while Crawley has two neighbourhoods in the top 20. Overall, coastal towns – especially Brighton and Hove and Hastings – show the highest concentration of early, preventable mortality.

MSOA	Local Authority	Preventable deaths under 75
Pier – Eastbourne 010	Eastbourne	243.84
Whitehawk – Brighton and Hove 025	Brighton and Hove	241.09
St James's Street & Queen's Park – Brighton and Hove 030	Brighton and Hove	216.19
Central St Leonards – Hastings 011	Hastings	213.69
Kemptown – Brighton and Hove 031	Brighton and Hove	212.78
Hollington – Hastings 003	Hastings	195.07

North Laine & the Lanes – Brighton and Hove 027	Brighton and Hove	183.82
Hollingdean & Moulsecoomb West – Brighton and Hove 008	Brighton and Hove	183.14
Bognor Regis Central – Arun 017	Arun	181.59
Central Hastings – Hastings 009	Hastings	170.02
Littlehampton West and River – Arun 011	Arun	163.98
Broomgrove – Hastings 005	Hastings	160.25
Brunswick – Brighton and Hove 029	Brighton and Hove	159.99
Portslade Village – Brighton and Hove 012	Brighton and Hove	143.74
Worthing Central – Worthing 011	Worthing	142.9
Hampden Park North – Eastbourne 002	Eastbourne	142.75
Silverhill – Hastings 006	Hastings	138.48
Langley Green & Gatwick Airport – Crawley 001	Crawley	138.34
Broadfield East – Crawley 013	Crawley	137.81
Bexhill North & Sidley – Rother 007	Rother	137.06
Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021		

## Winter mortality is higher across Sussex, with COVID-19 driving excess winter deaths in coastal areas

The table below shows the Winter Mortality Index (including or excluding COVID-19 deaths) expressed as a percentage. The purpose of the winter mortality measure is to compare the number of deaths that occurred in the winter period (December to March) with the average of the non-winter periods (August to November and April to July). A low percentage can be because of either a large number of deaths in the non-winter months (such as 2021 to 2022) or fewer deaths in the winter months. Note: A negative percentage represents a lower number of deaths in winter than non-winter months.

Winter mortality across Sussex exceeds the national average (35.4%) in most areas when COVID-19 deaths are included, with Hastings (83.0%), Crawley (72.7%) and Eastbourne (67.6%) recording some of the highest levels. However, when COVID-19 is excluded, all areas show far lower winter excess, suggesting that COVID-19 notably increased deaths during winter months, particularly in vulnerable coastal or urban areas across Hastings, Crawley and Eastbourne.

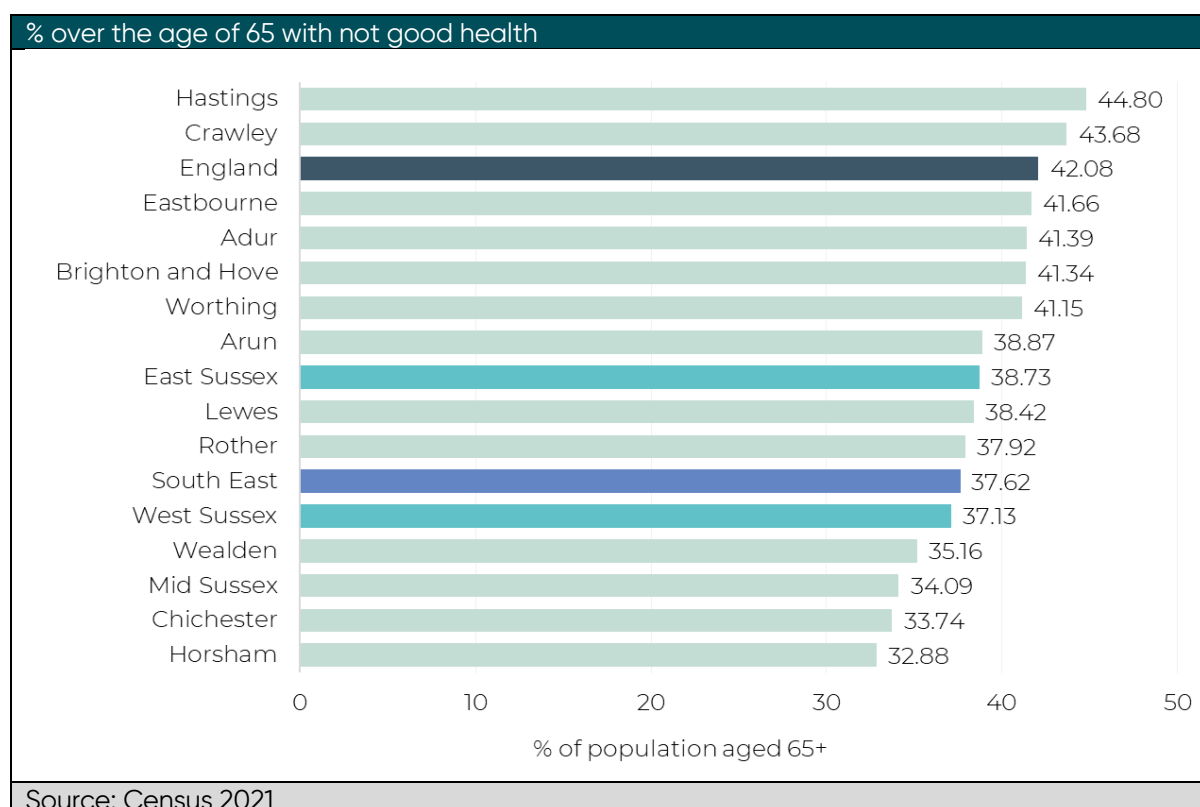
Area Name	Winter Mortality Index	Winter Mortality Index: Excluding Covid
Adur	10.8%	-8.3%
Arun	43.0%	4.0%
Brighton and Hove	46.1%	7.9%
Chichester	32.8%	-11.0%
Crawley	72.7%	16.0%
Eastbourne	67.6%	0.0%
Hastings	83.0%	-0.8%
Horsham	23.2%	0.2%

Lewes	38.7%	-9.2%
Mid Sussex	32.9%	-4.9%
Rother	58.7%	-8.6%
Wealden	50.4%	2.3%
Worthing	39.4%	9.3%
East Sussex	58.3%	-2.9%
West Sussex	36.0%	0.3%
South East	46.6%	1.6%
England	35.4%	1.2%

Source: Office for Health Improvements and Disparities (OHID), 2016 to 2021

## There is a higher proportion of vulnerable older adults in Hastings, Crawley and pockets of Brighton and Hove

The chart below shows people over the age of 65 with bad or very bad health (Census 2021). The table provides an overview of the health status of older adults across areas in Sussex, measuring those living with long term illness or disability, as well as a measure of inactivity based on data from Sport England for adults aged 75+.



The cells shaded green in the table below show the areas that fare worst on each of these measures.

The data reveals notable variation across Sussex local authorities in measures of disability and poor health among older adults, with several areas standing out as potentially more vulnerable. Crawley consistently shows some of the highest rates, particularly for inactive adults aged 75+ (61.59%), and for disability among those aged 85+ (55.71%) and 75–84 (37.48%), all exceeding national averages. Hastings also fares poorly, especially among those aged 65–74, where 30.61% are disabled – notably above the England average (27.22%) and with high rates of limiting long-term illness and inactivity. Brighton and Hove similarly records above-average levels across all age groups

Area Name	Limiting long-term illness (aged 65+)	Disabled under the Equality Act 85+	Disabled under the Equality Act 75-84	Disabled under the Equality Act 65-74	Inactive adults (aged 75+)
Adur	32.80%	55.45%	36.29%	26.00%	49.23%
Arun	30.13%	51.06%	34.04%	24.14%	49.76%
Brighton and Hove	33.00%	54.55%	37.14%	27.71%	48.62%
Chichester	26.97%	47.77%	29.83%	21.14%	48.89%
Crawley	34.07%	55.71%	37.48%	27.93%	61.59%
Eastbourne	32.40%	51.30%	36.08%	27.39%	47.43%
Hastings	33.86%	51.80%	39.00%	30.61%	51.44%
Horsham	26.32%	49.15%	30.54%	19.33%	42.62%
Lewes	30.70%	51.84%	34.52%	24.43%	43.10%
Mid Sussex	27.23%	51.03%	30.37%	20.79%	42.86%
Rother	30.34%	51.13%	33.09%	25.04%	48.39%
Wealden	27.76%	51.35%	31.20%	21.53%	45.32%
Worthing	30.82%	52.81%	34.76%	25.33%	50.12%
East Sussex	30.46%	51.44%	34.00%	25.05%	46.85%
West Sussex	29.11%	51.12%	32.66%	22.92%	48.85%
South East	29.54%	51.57%	33.42%	23.48%	49.49%
England	32.83%	54.01%	37.14%	27.22%	54.32%

Source: Census 2021, Inactive adults: Sport England 2021/22

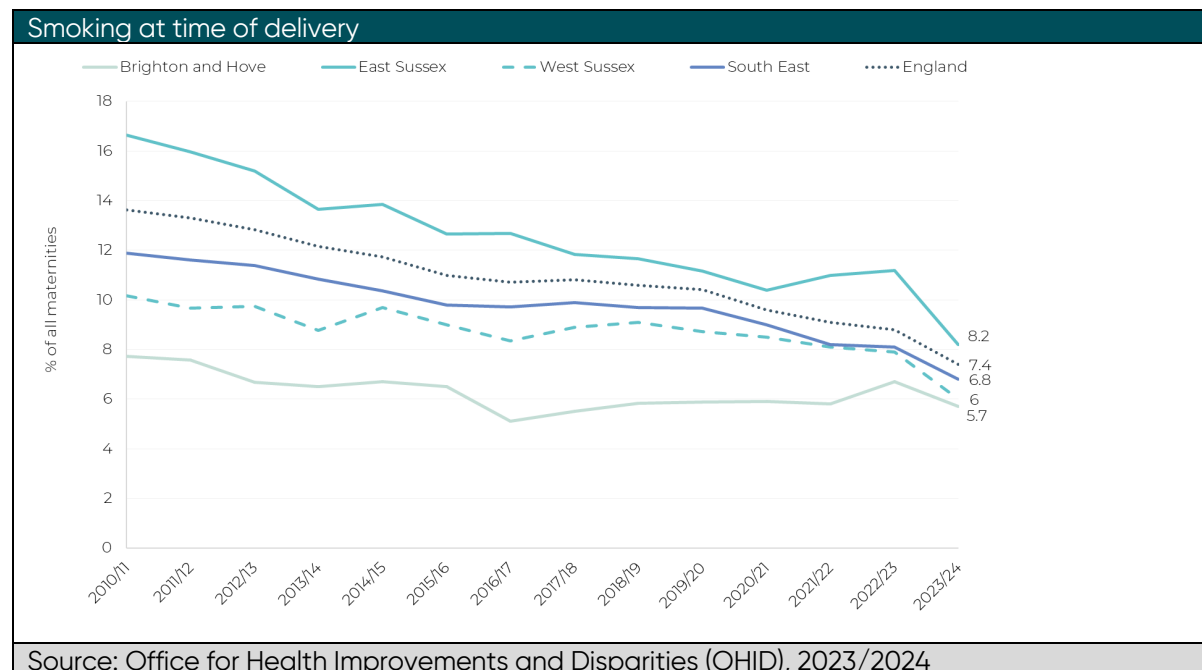
The table below shows the top 20 LSOAs for people with a limiting long-term illness (aged 65+) (Census 2021). In Census 2021, a *limiting long-term illness* is defined as a physical or mental health condition lasting 12 months or more that reduces a person's ability to carry out day-to-day activities.

LSOA	Local Authority	Limiting long-term illness (65+)
Maidenbower West & Furnace Green – Crawley 009F	Crawley	98.74%
Goldsmid West – Brighton and Hove 019C	Brighton and Hove	81.30%
Polegate – Wealden 019G	Wealden	78.67%
Coldean & Moulsecoomb North – Brighton and Hove 002B	Brighton and Hove	76.21%
Southbourne, Bosham & Thorney – Chichester 009C	Chichester	76.21%
Northbrook – Worthing 006F	Worthing	75.92%
North Laine & the Lanes – Brighton and Hove 027G	Brighton and Hove	73.64%
Langney West – Eastbourne 001E	Eastbourne	73.37%
Manor Royal & Northgate – Crawley 004F	Crawley	73.24%
Hove Central – Brighton and Hove 026B	Brighton and Hove	72.64%
Kempton – Brighton and Hove 031E	Brighton and Hove	71.62%
Hailsham North, Alfriston & East Dean – Wealden 018I	Wealden	67.96%
Kempton – Brighton and Hove 031D	Brighton and Hove	65.42%
Goring-by-Sea – Worthing 013E	Worthing	64.68%
Haywards Heath West – Mid Sussex 009F	Mid Sussex	63.13%
Whitehawk – Brighton and Hove 025B	Brighton and Hove	63.02%
Bexhill Central – Rother 011A	Rother	62.41%
North Laine & the Lanes – Brighton and Hove 027A	Brighton and Hove	61.49%
East Grinstead Central & North – Mid Sussex 001H	Mid Sussex	61.49%
Littlehampton East – Arun 009C	Arun	61.33%
Source: Census 2021		

The data shows that Brighton and Hove is the most prominent area, with eight neighbourhoods in the top 20 for older adults with limiting long-term illness, including Goldsmid West, Kempton, and Whitehawk. Crawley also stands out, particularly Maidenbower West & Furnace Green, which has the highest rate at 98.74%. Other areas with multiple affected neighbourhoods include Wealden, Worthing and Mid Sussex, highlighting concentrated pockets of older adults with significant health challenges.

## Smoking during pregnancy is steadily falling in all areas, but remains highest in East Sussex

The chart below shows the number of mothers known to be smokers at the time of delivery as a percentage of all maternities with known smoking status.



As shown in the chart, smoking during pregnancy has steadily declined across all areas since 2010. In East Sussex, rates dropped from around 16.6% in 2010/11 to 8.2% in 2023/24, remaining the highest in Sussex but showing notable improvement. Brighton and Hove started much lower at about 7.7% and fell to 5.7% in 2023/24. West Sussex also saw a drop from around 10.2% to 6% over the same period. Overall, Sussex areas are improving faster than the national average, which fell from 13.6% to 7.4%, but East Sussex still has the highest smoking rates at delivery, highlighting a need for continued focus and support in the county.

**Improving *Health*.**  
**Part of the Sussex Uncovered Series.**



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