

## **Census 2011 Profile Number Two**

### **Youth and Age in Swindon (0 to 18 years and 65+ years)**

#### **Executive Summary**

- In Swindon UA at the 2011 Census, people aged 0 to 18 years numbered 48,965 and made up 23.4% of the population. People aged 65 years or more totalled 28,854 and constituted 13.8% of the population. In Shrivenham ward there were 1,258 people (25.2%) aged 0 to 18 and 769 people (15.4%) aged 65 years or more at the 2011 Census.
- Between the 2001 and the 2011 Census, the largest growth in Swindon UA was in people aged 85 to 89, a group which grew by 48.6%. All groups grew, but the age-groups 5 to 9 years, and 10 to 14 years increased by only a few percentage points. In Shrivenham ward the number of younger people decreased slightly and the number of older people increased slightly.
- The Infant Mortality Rate in Swindon UA for 2010 to 2012 was 2.8 per 1,000 and this was not significantly different to the rates for the South West, and Shrivenham, but was significantly lower than England as a whole. Low Birth Weight occurred at similar rates in Swindon UA, South West, England and Shrivenham in 2011.
- Average Life Expectancy at birth in Swindon UA, has increased from 80.2 to 82.7 years for females over the decade, while for males, the increase has been from 76.1 to 79.3 years. These levels of life expectancy are similar to those for England as a whole. Life Expectancy in Shrivenham is slightly higher than in Swindon UA.
- The ethnicity profile of Swindon UA and Shrivenham differs markedly between the age-groups. In Swindon UA in 2011 BME groups accounted for 8% of people aged 65+ years, but the proportion was much higher, 18%, in people aged 0 to 15 years. 13% of Swindon UA children had an important language other than English.
- The age-profile of the population varied greatly by electoral ward in the 2011 Census. For example, in Priory Vale 11.2% of the population were aged under five years, while in St Margaret and South Marston the proportion was 5.1%. With regard to people aged 75 years or more the respective proportions were 0.7%, and 9.6%.
- Many indicators of possible social need are available. For example, the number of lone parents with dependent children varied by ward in the 2011 Census. The three wards with the most parents in this category were Walcot and Park North, Penhill and Upper Stratton, Liden, Eldene and Park South.

- The number of pensioners living on their own also varied by ward, with higher numbers in Penhill and Upper Stratton, Walcot and Park North, Rodbourne Cheney, Gorse Hill and Pinehurst, and Blunsdon and Highworth.
- A range of indicators of child health is available. For example, smoking and drinking habits have been surveyed in Swindon and it is notable that local teenagers have an exaggerated estimate of smoking and drinking habits in their peers.
- A range of indicators of health in older people is available. For example, Immunisation against influenza and pneumonia in people aged 65+ years are basic health protection measures, but the level of immunisation varies by GP practice across Swindon and Shrivenham.
- The population of Swindon is continuing to grow year by year and the percentage increase is largest in the older age-groups. This poses the challenge of providing appropriate services, without a large increase in resources and of providing ways of helping the population to be more resilient.
- The population of Swindon is becoming more ethnically diverse and may require services more sensitive to the needs of different groups. This diversity is most pronounced in younger age-groups.
- The structure and characteristics of the population, (for example, the age-profile, the number of older people living alone, the number of lone parents) vary greatly by electoral ward, which emphasises the need for planning targeted to local needs

## **1. Introduction**

This Profile, complements Census Profile No 1, by providing an overview of the shape and structure of the Swindon population, with an emphasis on younger people (aged 0 to 18 years) and older people (aged 65 years and over). It draws mainly on the results of the 2001 Census and the 2011 Census, although these sources are supplemented with other data, in order to provide examples of some of the copious social and health intelligence, which is available. There is a focus on how ethnicity and related issues vary between age-groups in Swindon and on how the age-profile of electoral wards varies. In terms of health we also look at self-reported smoking and drinking data from pupils in selected schools. With regard to people aged 65 years or more, we look at the distribution, by ward, of pensioners who live on their own, and also at flu immunisations in older people. Data are presented, both for Swindon UA and Shrivenham electoral ward, where possible, which together make up the Swindon CCG residential population.

The issues of housing, household structures, educational attainment and employment levels will be considered in more depth in Census Profiles Number Three and Number Four.

## **2. Overall Statistics and Change between 2001 Census and 2011 Census**

### **2.1. Population Structure**

Swindon UA's population totalled 209,156 at the 2011 Census. The population increased by 16.2% from 180,051. At the same time, the population of Shrivenham ward diminished slightly, by 8.7% from 5,468 to 4,992. The population of England as a whole grew by 7.9% during the same period. A detailed breakdown of the Swindon UA population in the younger and older age-groups at the 2011 Census is given in Table 1. People aged 0 to 18 years numbered 48,965 at the 2011 Census and made up 23.4% of the population. People aged 65 years or more totalled 28,854 and constituted 13.8% of the population. Between the 2001 and the 2011 Census, the largest growth was in people aged 85 to 89, a group which grew by 48.6%. Notable growth also took place in people aged 90+ years (+38.7%), in people aged 60 to 64 years (+38.3%) and in people aged 45 to 49 years (+30.3%). All groups in the

population increased, but the age-groups 5 to 9 years, and 10 to 14 years increased by only a few percentage points.

**Table 1. Swindon UA by Age and Sex in 2011 Census.**

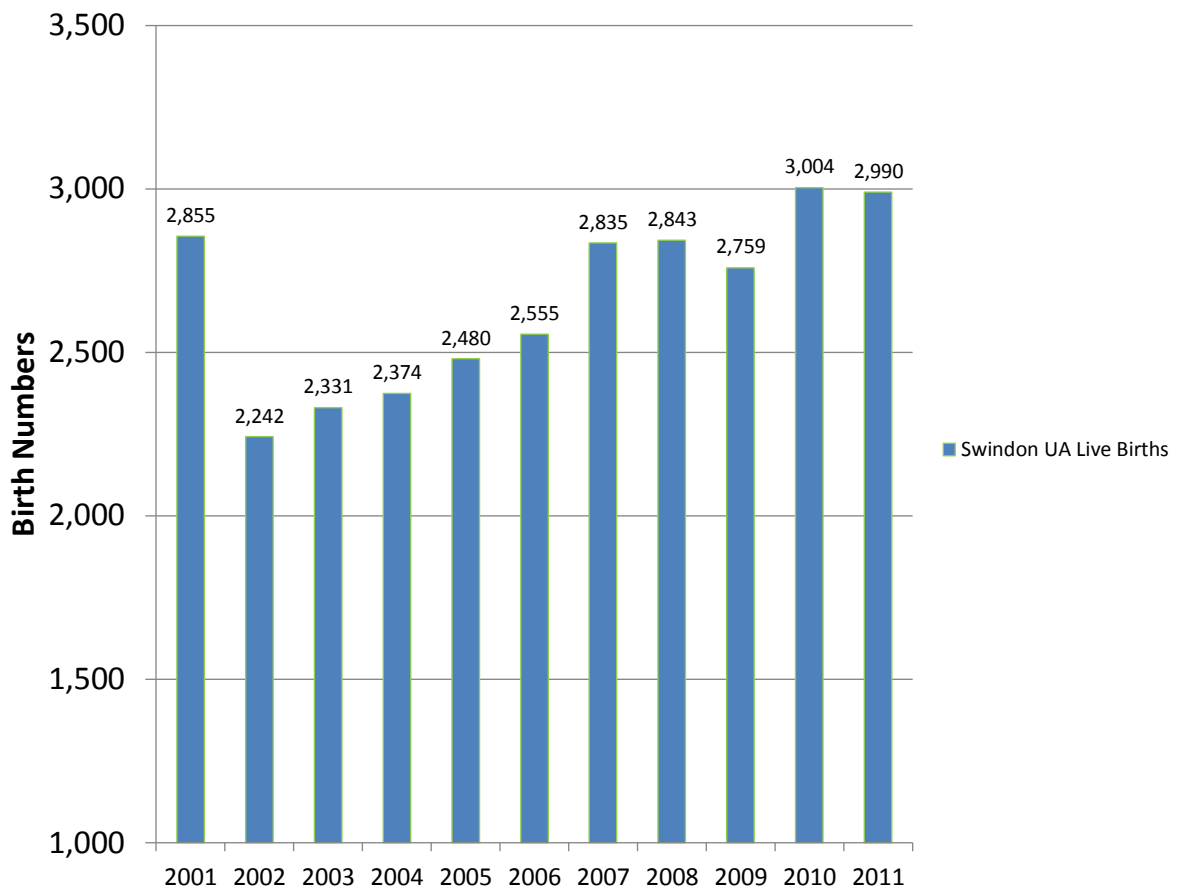
	<b>Males</b>	<b>Females</b>
Age 0 to 4	7,232	6,851
Age 5 to 7	3,895	3,656
Age 8 to 9	2,409	2,313
Age 10 to 14	6,296	6,137
Age 15 to 18	5,187	4,989
Age 65 to 69	4,119	4,334
Age 70 to 74	3,207	3,500
Age 75 to 79	2,554	3,079
Age 80 to 84	1,842	2,424
Age 85 and over	1,312	2,483
All Persons	104,618	104,538

In Shrivenham ward there were 1,258 people (25.2%) aged 0 to 18 and 769 people (15.4%) aged 65 years or more at the 2011 Census. The largest increase was also in the older age-groups, 90+ years (+128.6%) and 85 to 89 year old age-groups (+60%), although the numbers involved were relatively small. In some of the other age-groups, there was actually a small decrease in numbers. (This topic is examined in more detail in Profile One).

## 2.2. Birth Rate, Birthweight, Infant Mortality, Life Expectancy.

Figure 1 shows how, after a fall in the birth numbers in 2002 to 2,242, there was a steady rise in the number of births to highs of 3,004 in 2010 and 2,990 in 2011.

**Figure 1. All Births: Birth Numbers for Swindon UA population, 2001 to 2011**

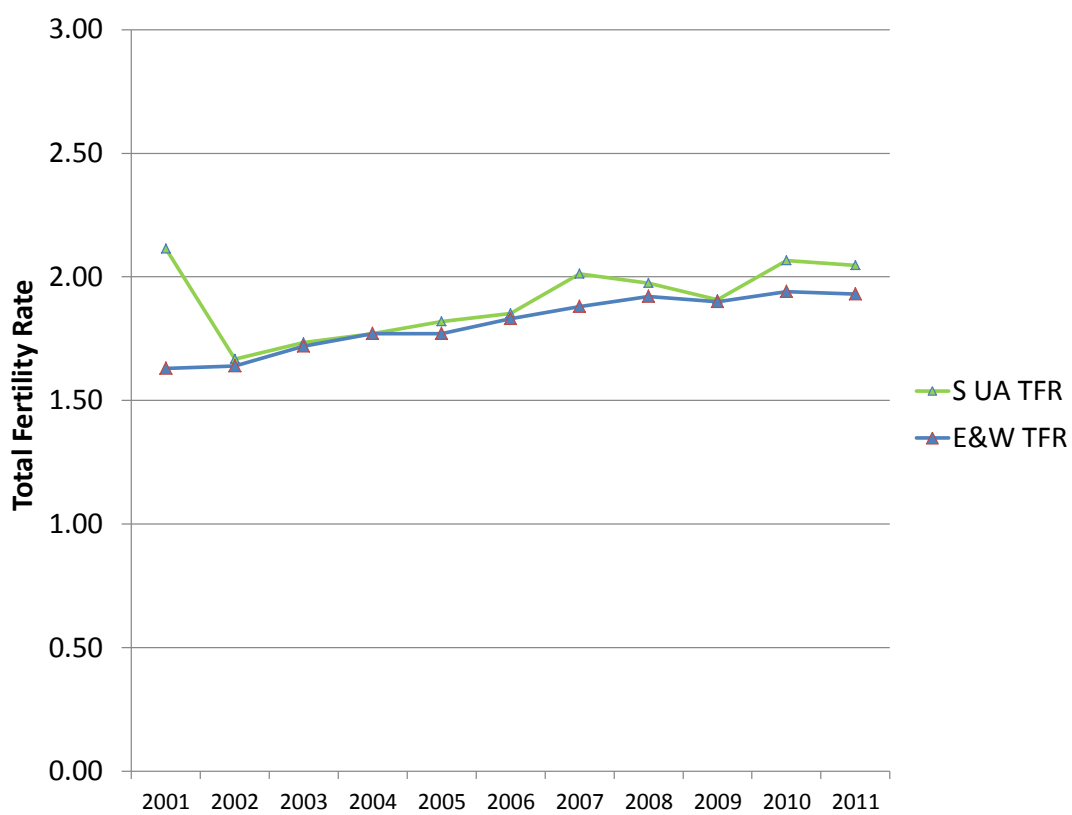


Source: ONS

Fertility is a measure of births in proportion to the size of the population. The Total Fertility Rate (TFR) for the Swindon UA population, and for England and Wales, from 2001 to 2011 is depicted in Figure 2. The TFR for a given year estimates the average number of children a woman is likely to bear in her lifetime, if her fertility were to follow the pattern of births for the population as a whole in that year. For the period 2001 to 2011, the TFR was at a similar level in Swindon UA to that for England and Wales, or was slightly higher. Thus, the TFR in Swindon UA, was 2.11

in 2001, 1.67 in 2002 and then rose to 2.05 in 2011. In England and Wales, the TFR rose from 1.63 in 2001 to 1.93 in 2011. The rise in TFRs in both Swindon and England and Wales is partly due to relatively high fertility in women from overseas who have migrated to the UK, and partly due to changes in behaviour in women born in the UK. The latter could include having babies at an earlier age or having babies at an older age, in comparison with previous generations.

**Figure 2. Total Fertility Rate for Swindon UA population and for England and Wales 2001 to 2011**



Source: ONS

In the year 2012, 6.9% of births to Swindon UA residents were classified as “low birth weight” (less than 2,500g). (The 95% Confidence Interval was 6.0% to 7.8%). This was higher than the proportion for the South West, 6.4%, although the 95% Confidence Interval for South West was 6.2 to 6.6, so the difference was not statistically significant.). The percentage for England as a whole was 7.3% (95% CI 7.2 to 7.4), so Swindon and England were not significantly different. The percentage of low birth weight births in Vale of White Horse local authority in which Shrivenham

ward is located was 6.5 (95% CI 5.3 to 7.9) (Source: ONS/Compendium of Population Health indicators.)

The Infant Mortality Rate is defined as deaths before first birthday per 1,000 live births and so is one of the most important indicators of child health in a population. The rate in Swindon UA for 2010 to 2012 pooled was 2.8 per 1,000 (95% CI 1.9 to 4.1) and this was not significantly different to the rates for the South West, but significantly lower than England as a whole. The rates for the South West and England were respectively 3.6 per 1,000 (95% CI 3.4 to 3.9) and 4.3 per 1,000 (95% CI 4.2 to 4.4). The Infant Mortality Rate for Vale of White Horse Local authority in which Shrivenham ward is located was 3.1 per 1,000 (95% CI 1.8 to 5.2). (Source: ONS/Compendium of Population Health indicators.)

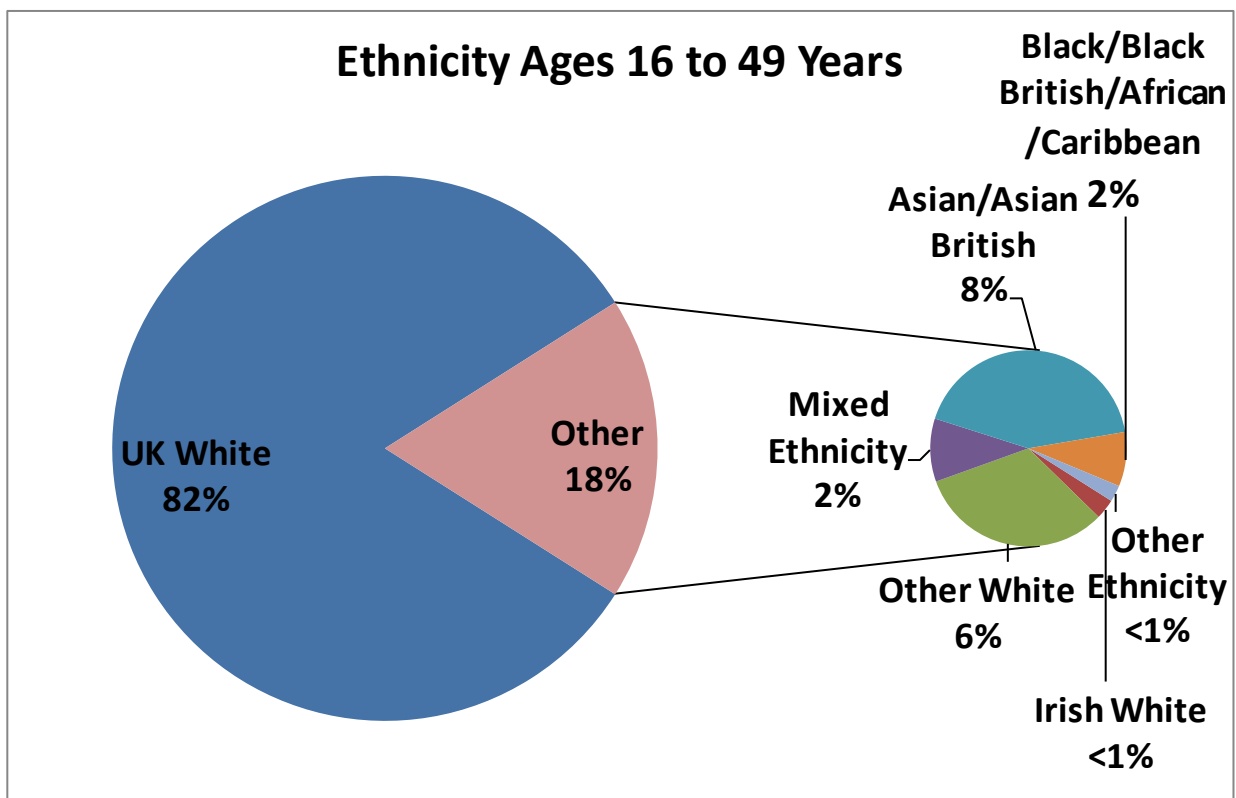
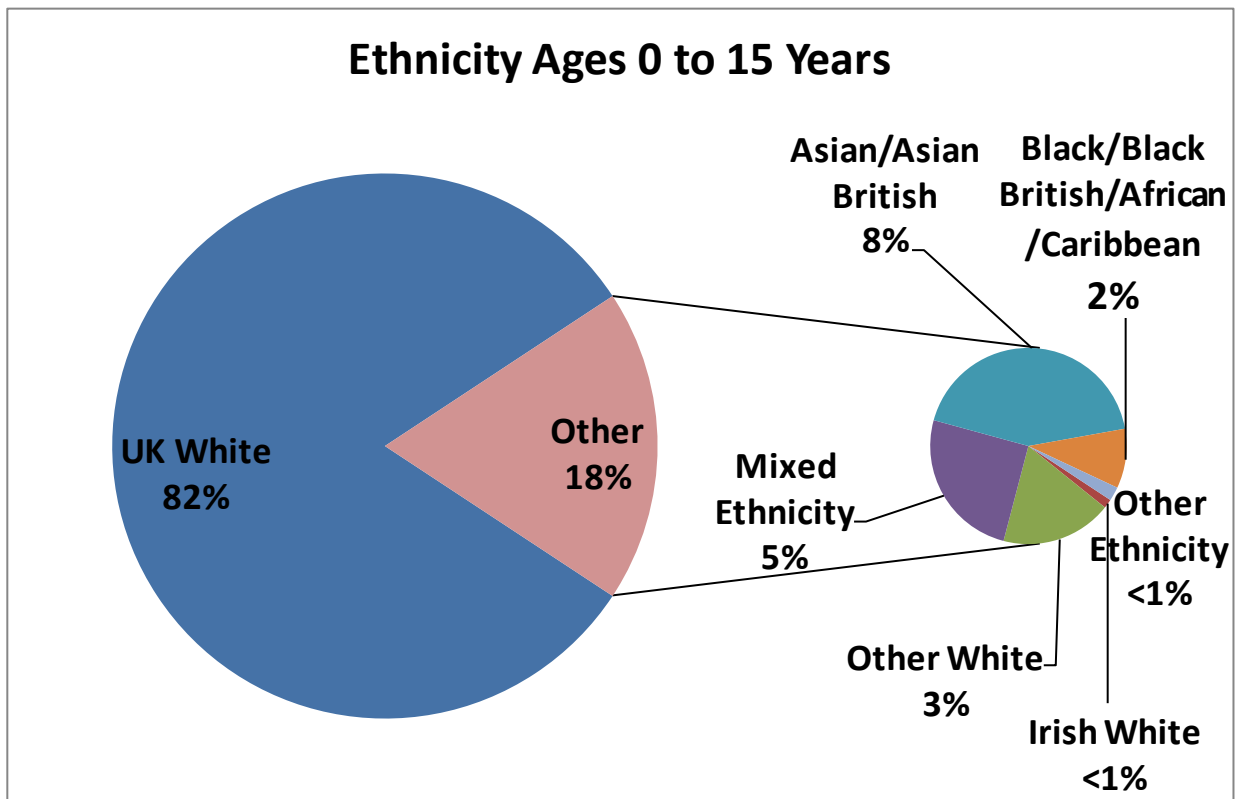
As Table 2 shows, average life expectancy at birth in Swindon UA, has increased from 80.2 years for females to 82.7 years over the decade, while for males, the increase has been from 76.1 years to 79.3 years. These levels of life expectancy are similar to those for England as a whole. Life expectancy in the Vale of White Horse District, of which Shrivenham is a part, was 81.4 years for males and 84.5 years for females in 2010-2012. However, life expectancy also varies across Swindon UA and people in the most deprived areas have a shorter life expectancy than people in the most affluent areas. The differential between most deprived and least deprived areas is 8.9 years for men and 6.5 years for women (Source: APHO Health Profile for Swindon 2013).

**Table 2. Life Expectancy at Birth in Swindon UA (England LE in brackets)  
Source:ONS/Compendium of Population Health Indicators. Jan 2014**

	<b>2000-2002</b>	<b>2009-2011</b>	<b>2010-2012</b>
<b>Males</b>	76.1 years (76)	79.2 years (78.9)	79.3 years (79.2)
<b>Females</b>	80.2 years (80.7)	82.7 years (82.9)	82.7 years (83.0)

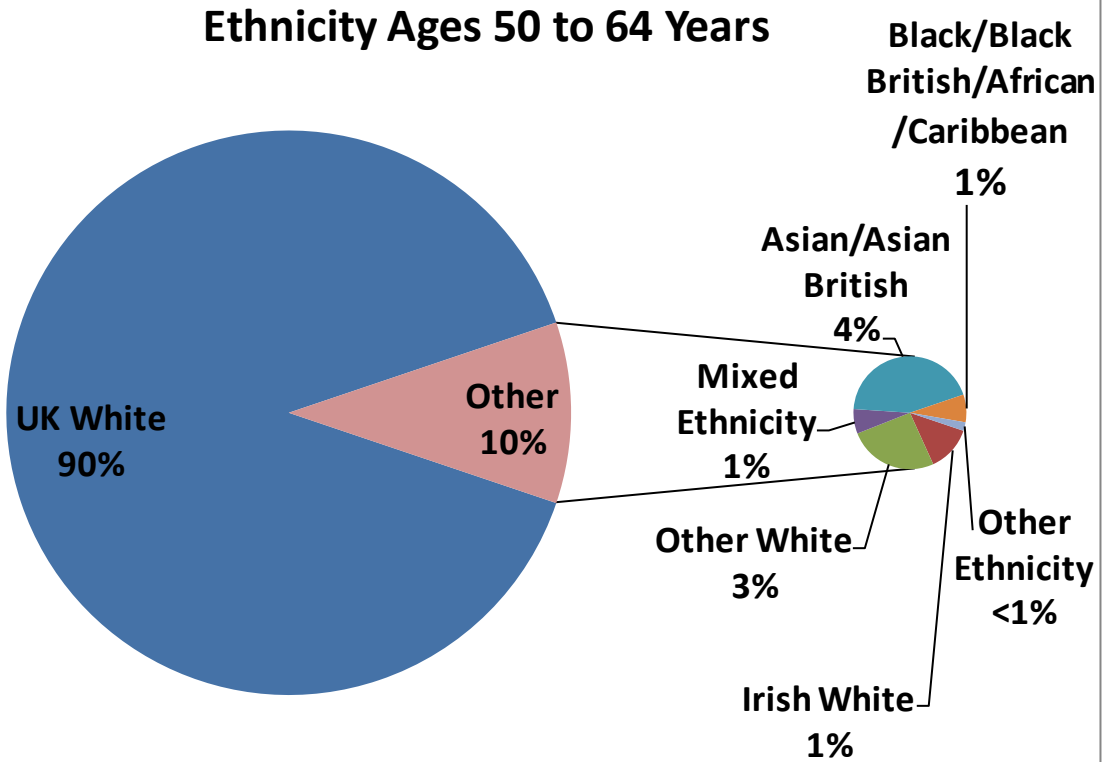
### 2.3. Ethnicity by Age-Group.

Figure 3. Ethnic Groups in Swindon UA in the 2011 Census.

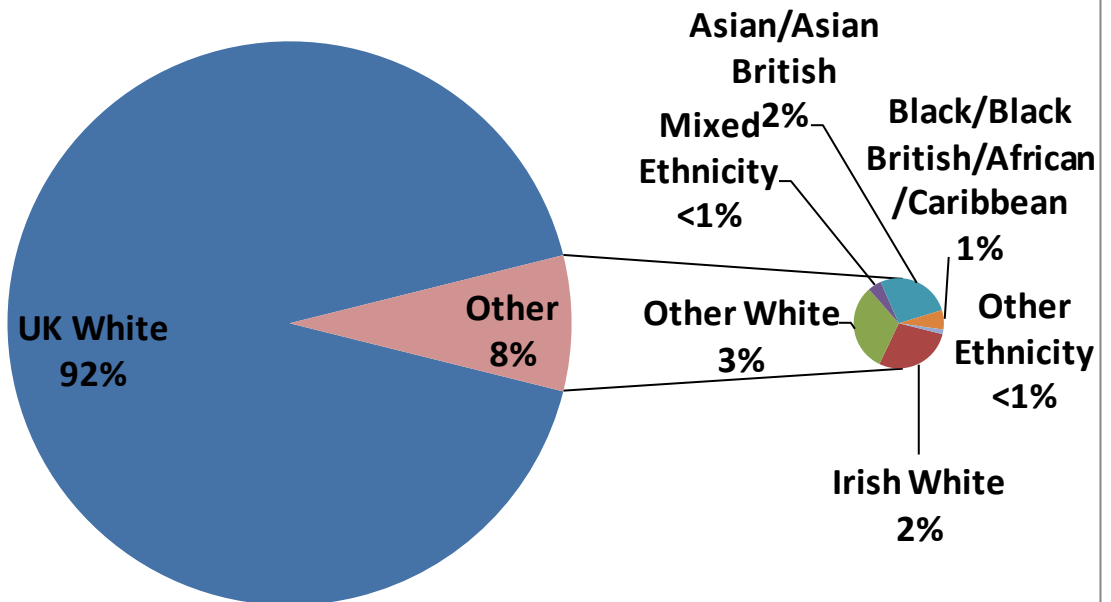




### Ethnicity Ages 50 to 64 Years



### Ethnicity Ages 65 Plus



The change in the structure of ethnicity in Swindon UA is one of the most striking developments in the population between 2001 and 2011. If we define Black and Minority Ethnic (BME) Groups broadly as everyone except people who report themselves as being White British (so BME Groups include White Irish and White Europeans), the proportion of BME people in Swindon UA has in approximate terms, doubled from 8.5% (15,344 people) in 2001 to 15.4% (32,128 people) in 2011.

Figure 3 is a set of charts, based on data from the 2011 Census, giving a breakdown of ethnic group in Swindon UA, by age-groups. (Percentages are rounded to whole numbers here.) BME groups accounted for 8% of people aged 65+ years, but in younger age-groups, the proportion was higher, 10% in people aged 50 to 64 years, 18% in people aged 16 to 49 years and 18% in people aged 0 to 15 years. The “Other White” group was at its largest, in percentage terms (6%) , in people aged 16 to 49 years, (these are people of working age mainly from European Union countries). However, the “Mixed Ethnicity” group was at its largest, in percentage terms, (5%) in people aged 0 to 15 years. The Asian/Asian British Group was at its greatest (8%) in people aged 0 to 15 years and in people aged 16 to 49 years, but it made up only 2% of the population aged 65+ years. It would therefore be wise always to view age-group together with ethnic group, when considering matters of ethnicity in the population.

Table 3 shows how, in a similar manner, the proportion of people living in Shrivenham in 2011, who were in a BME group (i.e. who were non-White British) was markedly greater in the younger age-groups (0 to 24 years and 25 to 49 years) as compared with the older age-groups (50 to 64 years, 65+ years).

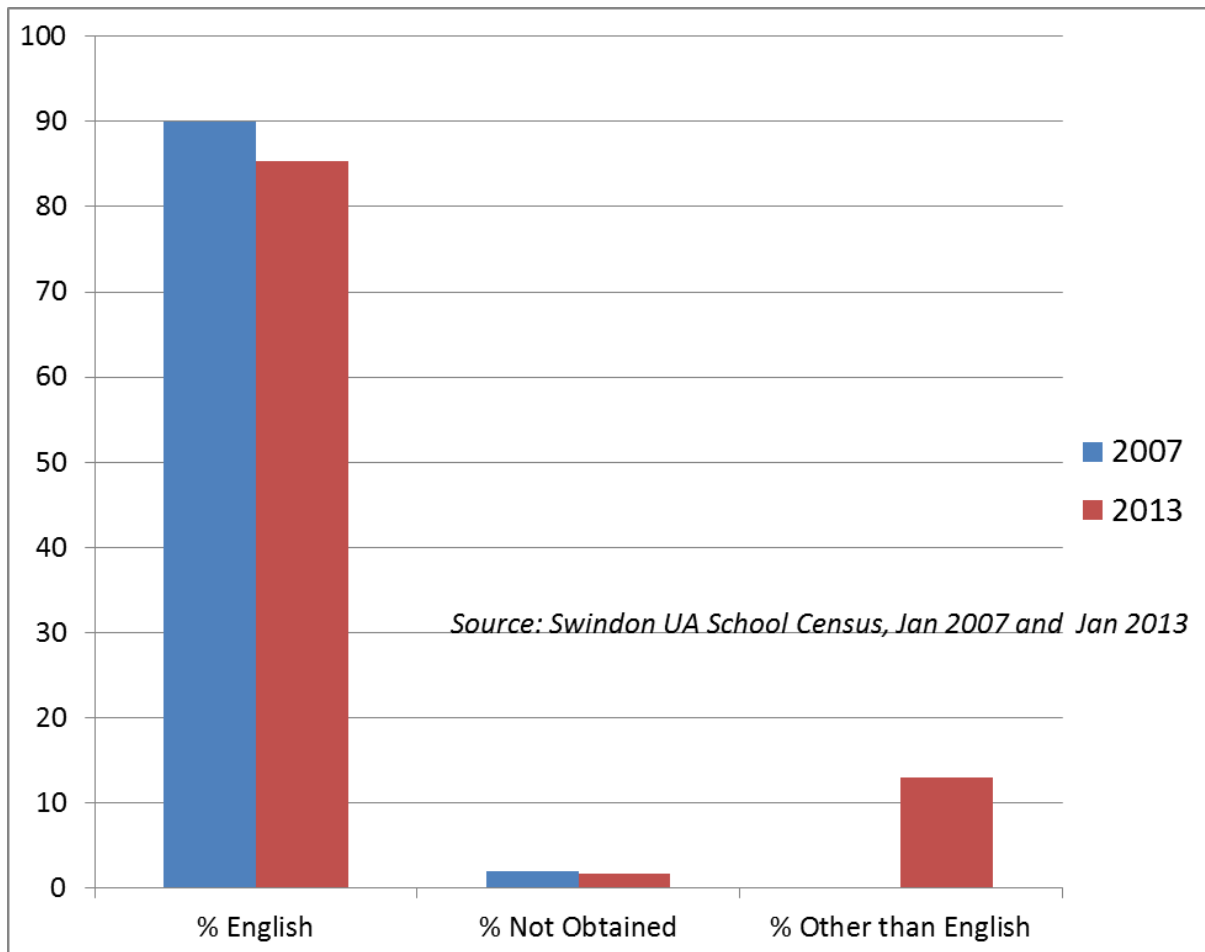
**Table 3: Percentage of Non-White British People in Shrivenham ward in 2011 Census by Age-group**

<b>Age</b>	<b>All</b>	<b>White: English/Welsh/ Scottish/Northern Irish/British</b>	<b>Non-White British</b>	<b>Percentage Non-White British</b>
Age 0 to 24	1,470	1,300	170	11.6%
Age 25 to 49	1,894	1,653	241	12.7%
Age 50 to 64	859	820	39	4.5%
Age 65 and over	769	745	24	3.1%
All categories: Age	4992	4518	474	9.5%

#### **2.4. School Census Languages**

The annual school census, undertaken primary, secondary and special schools in Swindon UA, records languages given by each child as the language that they spoke first or which is spoken at home, so which is an important language in their lives (although this is not to be taken as a reflection of the child's ability to speak English.) In January 2007, 90% of children at school (primary, secondary or special) responded with "English" in the school census, with 8.1% giving a language other than "English", and 1.7% not providing a response. In January 2013 "English" was the important language for 85.4%, with 13.0% giving a language other than "English" and 1.7% not giving a response. Figure 4 shows these percentages as absolute numbers of children by year. Table 4 lists all individual languages reported in the survey by at least 20 children, and thus illustrates the variety of linguistic backgrounds of children in Swindon UA. In total, 13.2% of children who gave a response, had an important language other than English.

**Figure 4. Percentage of Children at Swindon UA Schools reporting “English” or “Other Language” as Important Language, 2007 and 2013 compared**



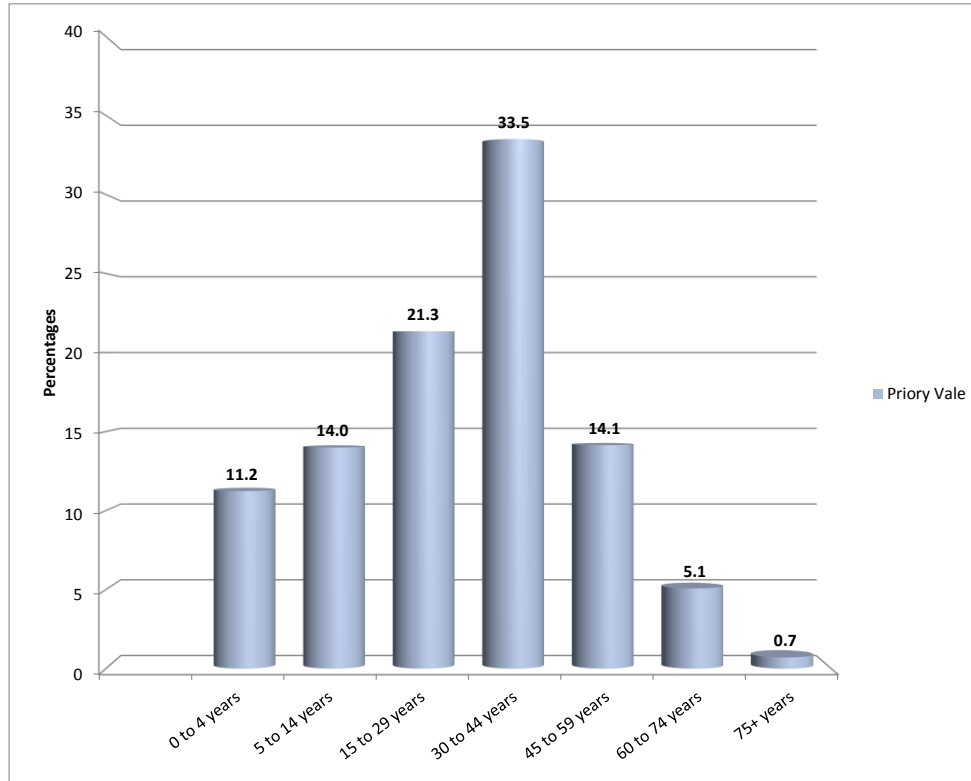
**Table 4. Languages reported as important in Swindon UA school census in January 2013 (Primary, secondary, special schools).**

<b>Language</b>	<b>Number of Speakers</b>
English	25502
Konkani	813
Polish	388
Portuguese	220
Nepali	200
Bengali	194
Urdu	138
Panjabi	124
Italian	93
Turkish	80
Tamil	72
Hindi	69
Malayalam	56
Pashto/Pakhto	50
Spanish	47
Chinese	33
French	33
Shona	33
Filipino	32
Somali	31
Tagalog	30
Telugu	28
Gujarati	26
Japanese	26
Chinese (Cantonese)	24
Swahili/Kiswahili	24
Russian	23
German	22
Dutch/Flemish	21
Other Named Languages	427
Other Unnamed Languages	516
Not Obtained	496
<b>Total</b>	<b>29,871</b>

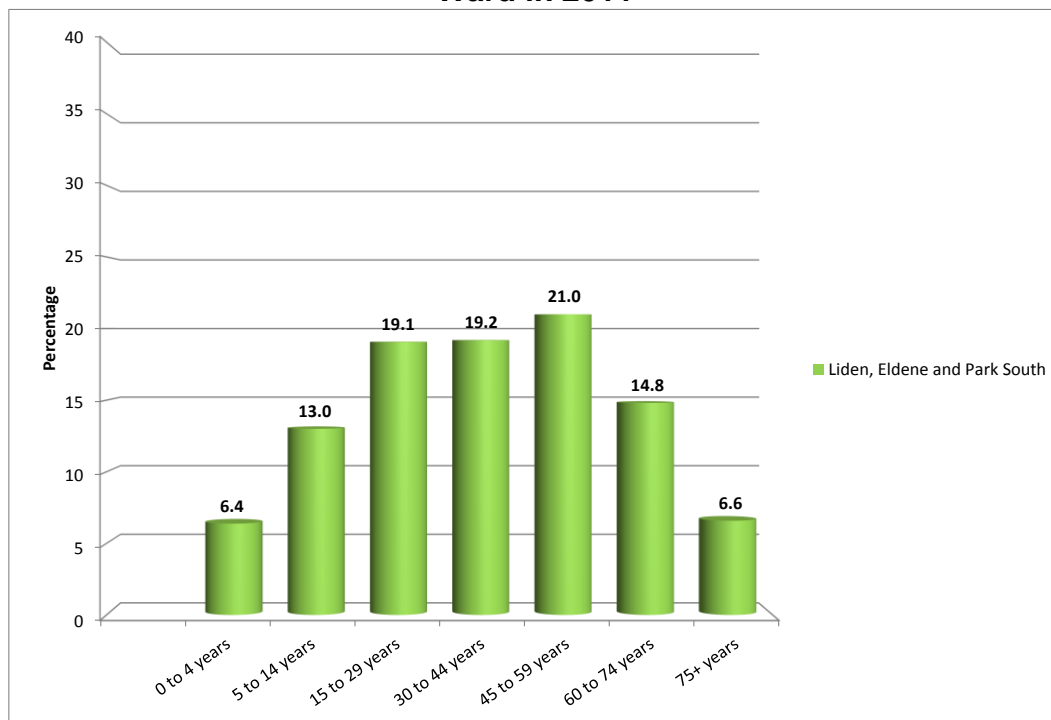
### 3. Current Data and Context (with Electoral Wards)

#### 3.1. Differing Age Profiles by Ward

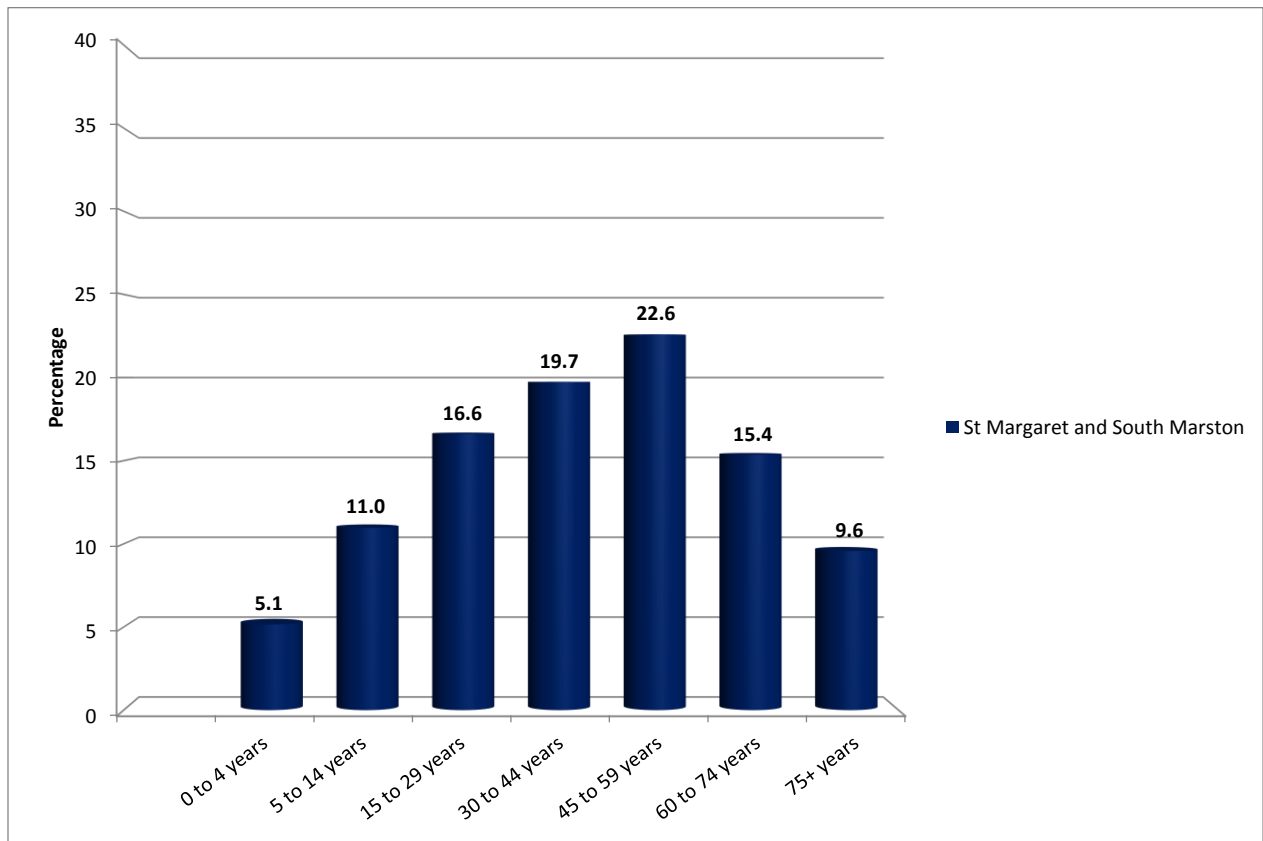
**Figure 5. Proportion of People by Age-Group in Priory Vale Ward in 2011 Census**



**Figure 6. Proportion of People by Age-Group in Liden, Eldene, Park South Ward in 2011**



**Figure 7. Proportion of People by Age-Group in St Margaret and South Marston Ward in 2011 Census**



Figures 5, 6, and 7 illustrate the differing age-profiles of electoral wards in Swindon, using the examples of a comparatively young ward (Priory Vale), a comparatively old ward (St Margaret and South Marston) and a ward that was more evenly-balanced in terms of age (Liden, Eldene and Park South). In Priory Vale 11.2% of the population were aged under five years, while in Liden, Eldene and Park South the proportion was 6.4%, and in St Margaret and South Marston the proportion was 5.1%. With regard to people aged 75 years or more the variation was also marked with respective proportions of 0.7%, 6.6% and 9.9% across these three wards. Priory Vale was also notable for having about 1 in 3 of its population in the 30 to 44 years, while in the other two wards highlighted here, about 1 in 5 of their respective populations were in this age-group.

**Figure 8. Proportion of People by Age-Group in Shrivenham Ward in 2011 Census**

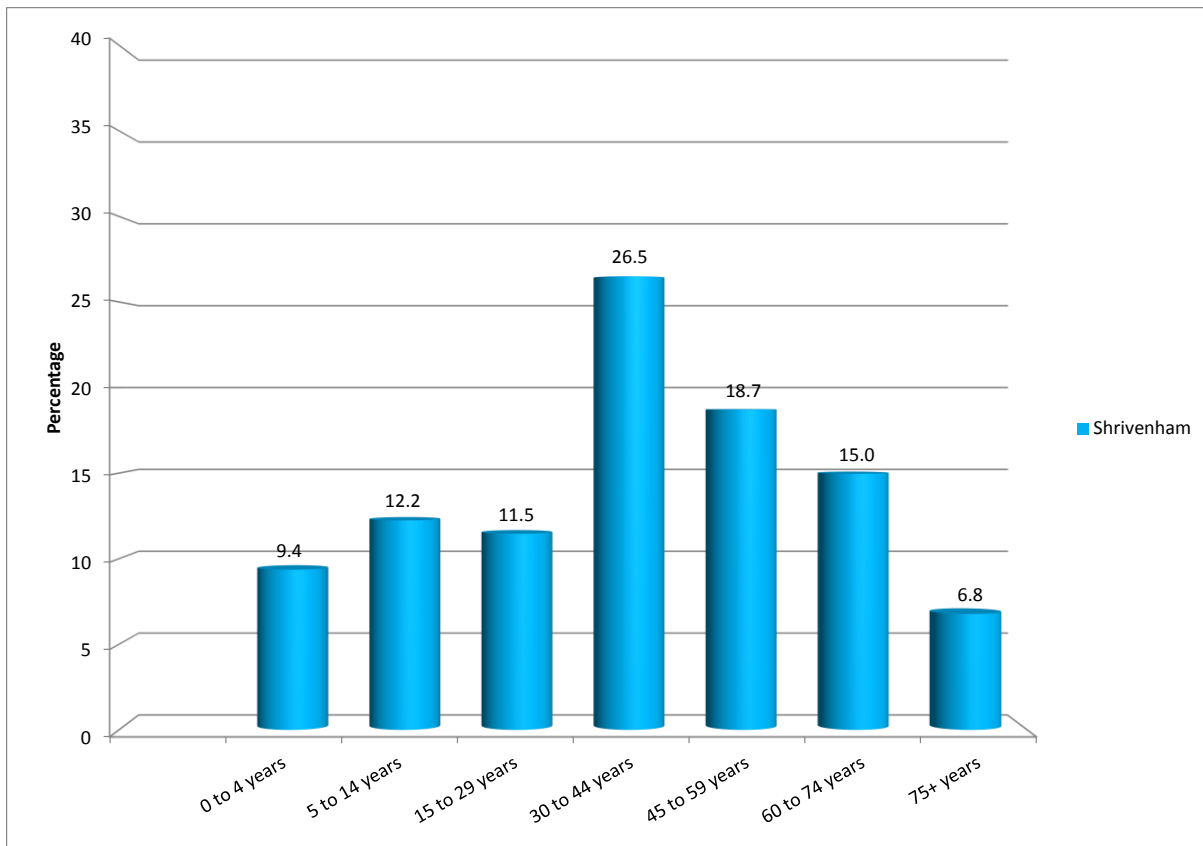


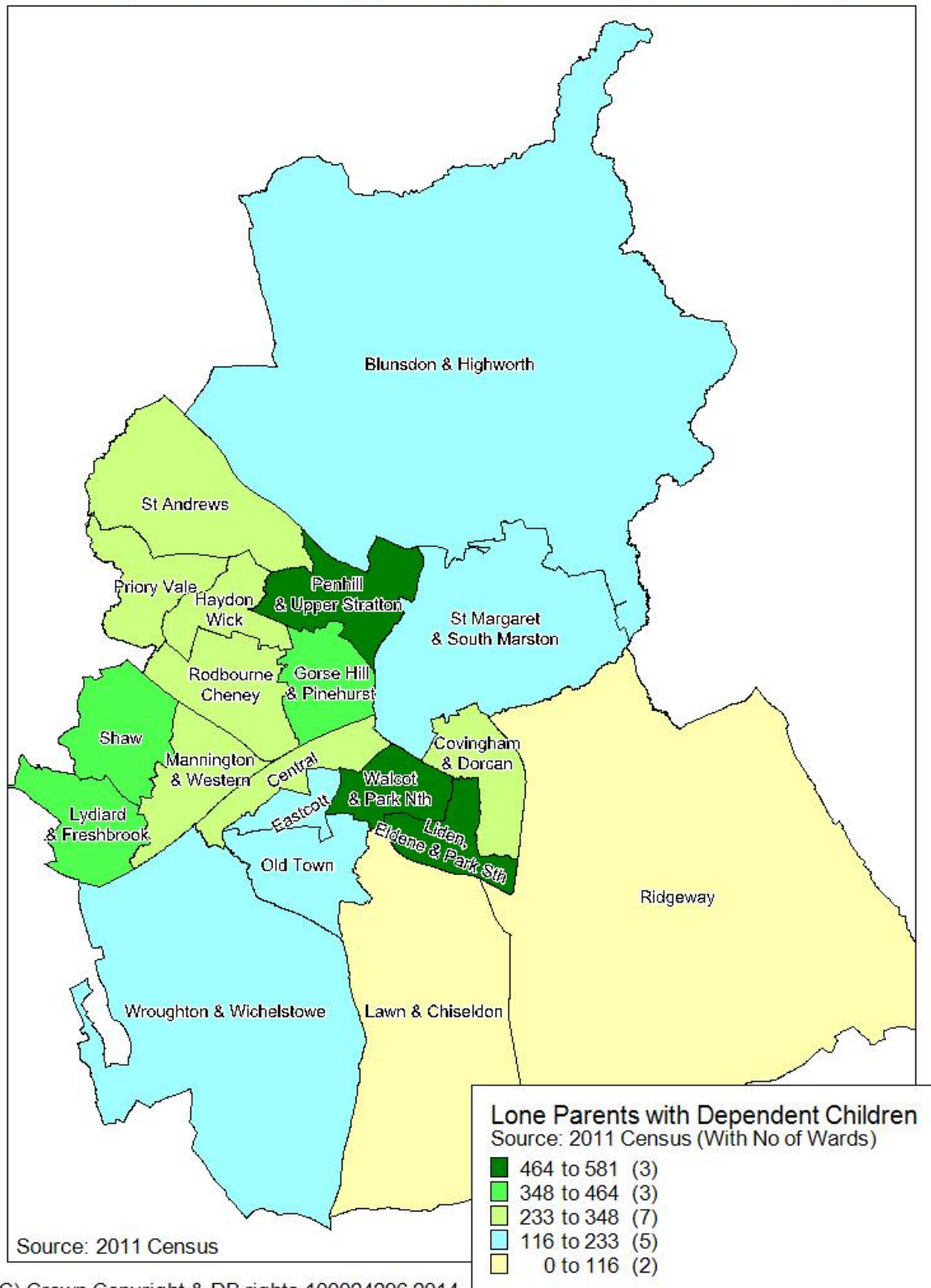
Figure 8 shows the age-profile of Shrivenham ward in the 2011 Census. It shared some of the characteristics of Priory Vale in that it had a relatively high proportion of children under 5 years (9.4%) and of people in the 30 to 44 years group (26.5%). On the other hand it had 6.8% in the 75+ years group, which was more like Liden, Eldene and Park South.



### 3.2. Lone Parents with Dependent Children

Figure 9

Counts of Lone Parents with Dependent Children in Swindon UA by Electoral Ward in 2011



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The data relating to children in our population are extensive and the needs of children and their families can be described in many ways. Figure 9 presents the example of numbers of lone parents with dependent children in each electoral ward in Swindon UA, for whom life may be more challenging in some ways than for children with two parents. Five groups are shown in Figure 9 in descending order of the number of lone parents with dependent children (LPD). The three wards with the most parents in this category (depicted in dark green in the map) were Walcot and Park North (581 LPD), Penhill and Upper Stratton, (512 LPD) and Liden, Eldene and Park South (469 LPD). These are relatively deprived wards, but the second grouping of lone parents (depicted in bright green) contains a mixture of more deprived wards and less deprived wards. These wards are Shaw (358 LPD), Lydiard and Freshbrook (354 LPD), Gorse Hill and Pinehurst (404 LPD). Although Priory Vale fell into the next group, (the third group in descending order), it was not far behind with 345 LPD. Ridgeway (46 LPD) and Lawn and Chiseldon (77 LPD) formed the group with fewest lone parents, shown in the map in yellow.

### **3.3. Children and Health Behaviours**

Many types of data relating to child health are available. Here we give an example from a survey carried out in local schools. In Autumn 2012 five schools in Swindon UA took part in the schools' "Social Norms" survey carried out by the Schools Health Education Unit. Year 9 students were surveyed early in the academic year, so the majority would have been 13 years old. Between 50% and 80% of the year group completed the survey. Selected results relating to smoking and alcohol are presented in Tables 5 and 6 respectively. The schools are denoted by a letter (A to E), together with a description of their deprivation status, (based on the postcodes of children in the school.)

As Table 5 shows, the percentage smoking at least once a month varied from 5.8% to 12.5%. The percentage of pupils smoking at least weekly varied from <2.9% to 8.3%. There was not any obvious relationship between smoking and the low or high deprivation status of the school, but the middle deprivation school had the lowest percentages. Table 6 shows that the percentage drinking more than once a month varied from 2.9% to 10.1% and the percentage drunk in the past week varied from

<2.9% to 5.4%. Again, the middle deprivation school had the lowest percentages, although the lower deprivation school also had a low percentage for drunkenness.

**Table 5. Smoking by Selected School in Swindon UA**

<b>School ID and Deprivation Status</b>	<b>Number surveyed</b>	<b>Number smoking once per month or more (with Percentage)</b>	<b>Number smoking once per week or more (with Percentage)</b>
(A) <i>Lower Deprivation</i>	88	11 (12.5%)	<5 (<5.7%)
(B) <i>Middle Deprivation</i>	173	10 (5.8%)	<5 (< 2.9%)
(C) <i>Higher Deprivation</i>	168	20 (11.9%)	14 (8.3%)
(D) <i>Higher Deprivation</i>	139	14 (10.1%)	8 (5.8%)
(E) <i>Higher Deprivation</i>	113	8 (7.1%)	5 (4.4%)

**Table 6. Alcohol Consumption by Selected School in Swindon UA**

<b>School</b>	<b>Number surveyed</b>	<b>Number drinking more than once per month (with Percentage)</b>	<b>Number drunk in the past week (with Percentage)</b>
(A) <i>Lower Deprivation</i>	88	8 (9.1%)	<5 (<5.7%)
(B) <i>Middle Deprivation</i>	173	5 (2.9%)	<5 (<2.9%)
(C) <i>Higher Deprivation</i>	168	17 (10.1%)	9 (5.4%)
(D) <i>Higher Deprivation</i>	139	11 (7.9%)	7 (5.0%)
(E) <i>Higher Deprivation</i>	113	<5 (4.4%)	0 (0)

The Local Alcohol Profiles for England (LAPE) 2013 reported that in Swindon UA the rate of hospital admissions for an alcohol-specific cause in people aged under 18 years was 58.6 per 100,000 in the years 2010/2011 to 2012/2013 which was significantly higher than the rate for England as a whole.

**Table 7. Perceptions of peer group behaviour: Smoking**

School	Number surveyed	Percent perceived to smoke once per month or more	
		Perception%	Actual %
(A) <i>Lower Deprivation</i>	88	37%	12%
(B) <i>Middle Deprivation</i>	173	34%	6%
(C) <i>Higher Deprivation</i>	168	50%	13%
(D) <i>Higher Deprivation</i>	139	41%	10%
(E) <i>Higher Deprivation</i>	113	50%	8%

**Table 8. Perceptions of peer group behaviour: Alcohol**

School	Number surveyed	Percent perceived to rarely or never drink alcohol		Percent perceived to have been drunk in the past week.	
		% Perception	% Actual	% Perception	% Actual
(A) <i>Lower Deprivation</i>	88	53%	91%	27%	5%
(B) <i>Middle Deprivation</i>	173	74%	97%	25%	1%
(C) <i>Higher Deprivation</i>	168	65%	Not Available	27%	5%
(D) <i>Higher Deprivation</i>	139	55%	Not Available	29%	9%
(E) <i>Higher Deprivation</i>	113	58%	Not Available	27%	0%

Pupils at selected schools in Swindon were also asked about their perceptions of other children’s behaviour, with regard to smoking and alcohol, for example. These are important measures, because of the significance of peer-pressure and “group norms” in influencing teenagers’ behaviour. The results are shown by school in Tables 7 and 8. In all schools the difference between perception and reality was

very great. For example, In School E the pupils assumed that about 50% of their peers smoked at least once a month, while only 8% of pupils reported this smoking behaviour. In School D the perception was that 29% of pupils had been drunk in the past week, while the reality was that 9% had reported this behaviour.

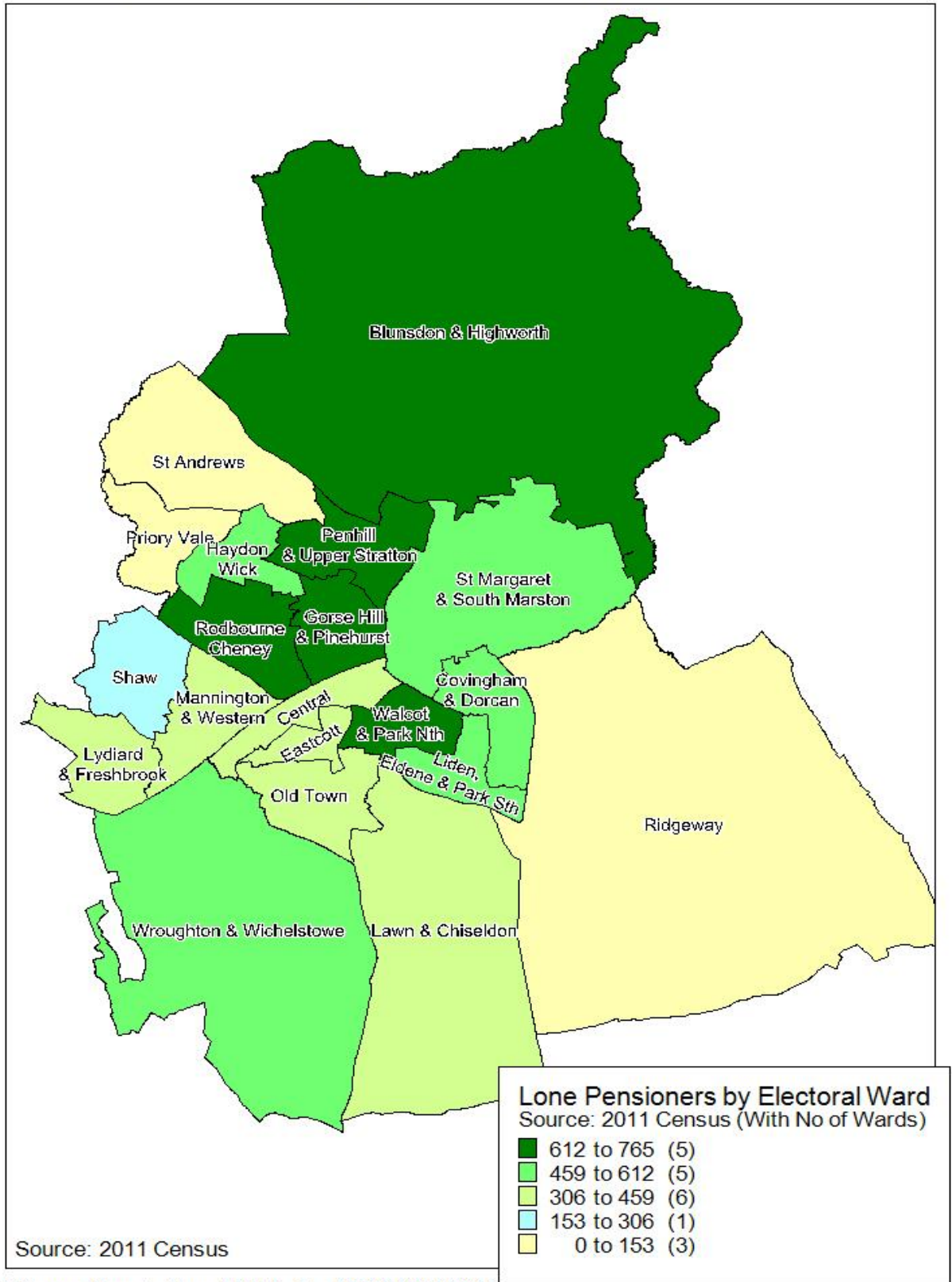
Other important health indicators for children and teenagers include immunisation levels, rates of injury and respiratory infections and teenage pregnancy. A key source of intelligence is the Child and Maternal Health Intelligence Network website ([Child and Maternal Health Observatory Website - ChiMat Home Page](#))

### **3.4. Pensioners Living Alone by Ward**

Census data provides many different ways of looking at the needs of older people, but aspects of social isolation offer one possible avenue to explore. Figure 9 maps counts of pensioners, (men aged 65 years or more, and women aged 60 years or more) living in households on their own, as reported in the 2011 Census, according to electoral ward. The most darkly-shaded wards had 612 or more pensioners living on their own. These wards were Penhill and Upper Stratton (763), Walcot and Park North (718), Rodbourne Cheney (711), Gorse Hill and Pinehurst (675), and Blunsdon and Highworth (664 pensioners). In contrast , St Andrews (109), Ridgeway (93), and Priory Vale (71) each had fewer than 153 lone pensioners each. In Shrivenham ward, 207 pensioners were living alone.

**Figure 9**

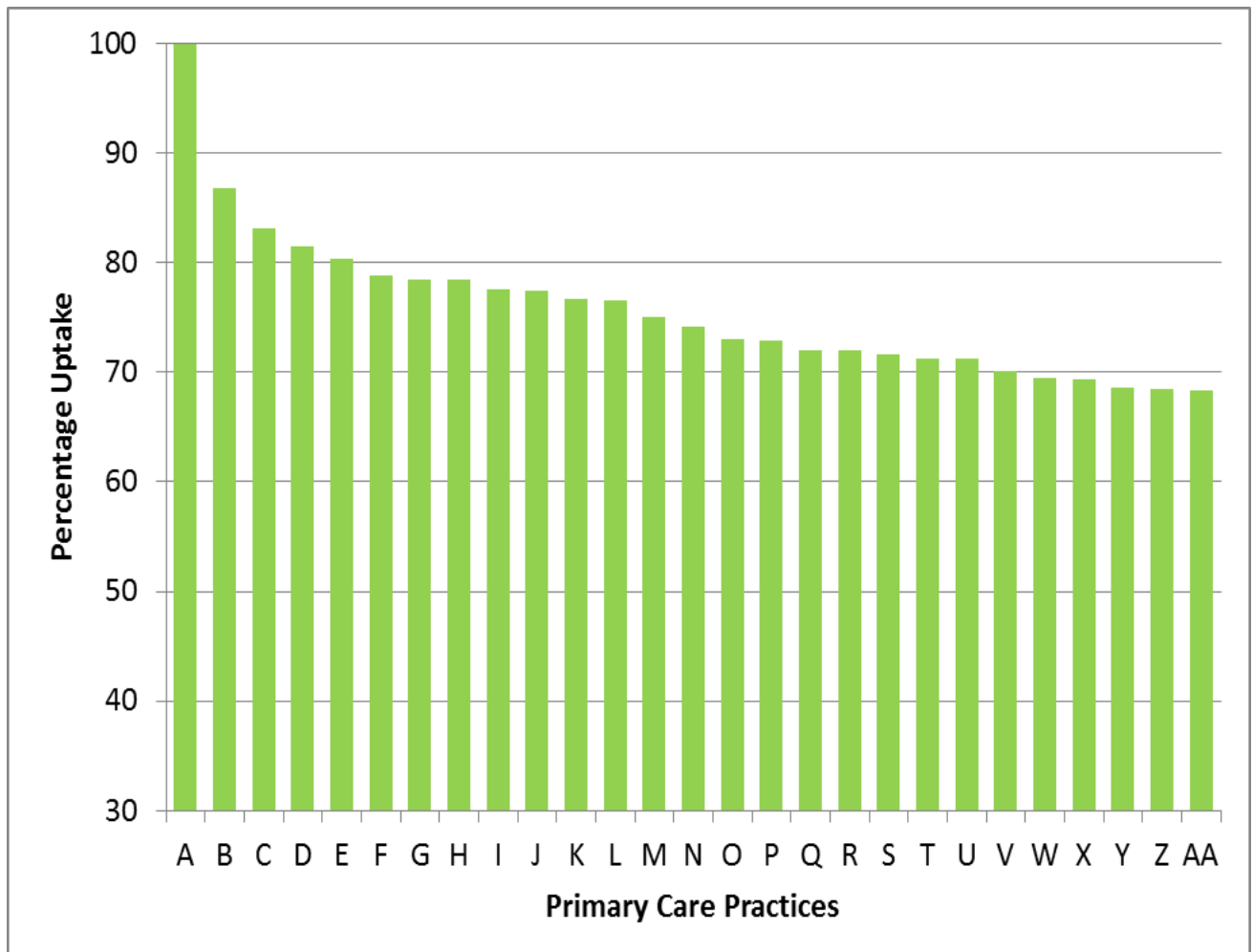
**Counts of Pensioners Living Alone in Swindon UA by Electoral Ward in 2011**



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### 3.5. Older People and Immunisations.

**Figure 10. Percentage of People aged 65+ years receiving the seasonal flu vaccine in Swindon CCG practices by 31.1.2014**



Many types of data relating to the health of older people are available. Here we give one example of such data, namely rates of immunisation against seasonal influenza. All people aged 65 years or more are eligible to receive the influenza vaccine. (People under 65 years with certain chronic health conditions are also eligible for annual flu vaccination). The composition of the vaccine is changed every year in order to combat the strains of flu virus which are circulating, and so each patient needs to be vaccinated on an annual basis. Figure 10 illustrates how the uptake of the flu vaccine, as measured at 31.1.2014 varied by GP practice in the Swindon CCG area, from 100% in Practice A to 68.3% in Practice AA. In all, 13 out of 27 practices reached the target level of 75% uptake. The uptake across all Swindon

CCG practices combined was estimated at 74.9% which was slightly above the all-England figure of 73.2%. The level of deprivation of patients did not, on the whole, appear to be a key issue, as the practices in the most deprived areas had vaccination levels spread out across the range of values (e.g. Practice E had 80.3% and Practice Z had 68.5%).

Other important health indicators for older people include rates of emergency admission to hospital, levels of Long Term Limiting Illness and morbidities (or multiple morbidities) as measured in the Quality and Outcomes Framework in Primary Care. A useful overview is provided by The Older Person's Health and Well-Being Atlas website ([WMPHO | Older People's Health and Wellbeing Atlas for England](#)).

#### **4. Implications**

The population of Swindon is continuing to grow year by year and the percentage increase is largest in the older age-groups. This poses the challenge of providing appropriate services, without a large increase in available resources and of providing ways of helping the population to be more resilient. Although Swindon UA has average life expectancies for males and females which are similar to the national figures, mortality rates are higher in more deprived areas than in affluent parts of our population. The population of Swindon is becoming more ethnically diverse and may require services more sensitive to the needs of different groups. This diversity is most pronounced in younger age-groups. The structure and characteristics of the population, (for example, the age-profile, the number of older people living alone, the number of lone parents) vary greatly by electoral ward, which emphasises the need for planning targeted to local needs.



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## Appendix

### Note on Approaches to the Population

The population of Swindon can be counted in three different ways.

(a) Swindon Unitary Authority (UA) population: population *resident* within the Swindon Borough Council boundaries.

(b) Swindon Clinical Commissioning Group (CCG) *resident* population: people living within the SBC boundaries or in the electoral ward of Shrivenham, Oxfordshire

(c) Swindon CCG *registered* population: people registered with a Swindon CCG GP, some of whom may live outside the CCG boundaries as described in (b).

This Profile focuses on Swindon UA residents (a) and also shows data for Shrivenham ward (b), so that the CCG *resident* population is thus covered.

### Most Up-to-Date Population Estimates

This Profile is based mainly on the situation in the Census year of 2011. The population is increasing yearly, so more up-to-date estimates of the overall population are now available as follows:

- Swindon UA (SBC) *resident* population totalled **214,037** people at mid-2013 (Source: ONS)
- Swindon CCG *resident* population totalled **217,216** in mid-2012 (Source: ONS)
- Swindon CCG *registered* population totalled **226,551** in March 2014 (Patients registered with a Swindon CCG GP, irrespective of where they live. Source: CSU/Open Exeter)

### **Notes on Census Data**

Occasionally census estimates for small areas, such as electoral wards, may not appear to total correctly or may differ between reports. This is because small numbers are sometimes changed by ONS to avoid the identification of individual people.

In addition, Swindon 2012 wards were not used by ONS for the 2011 Census and so we have had to estimate data at 2012 ward level, independently of ONS. Different methods can be used to assign data from Lower Super Output Area or Output Area data to the Swindon 2012 electoral wards. In this particular Profile we used the “Centroid method” (assigning Output Area data to a ward where the OA’s centre falls within the ward). ONS expected to produce 2012 ward estimates in due course, using the “centroid” approach.