



## INTRODUCTION AND OBJECTIVES

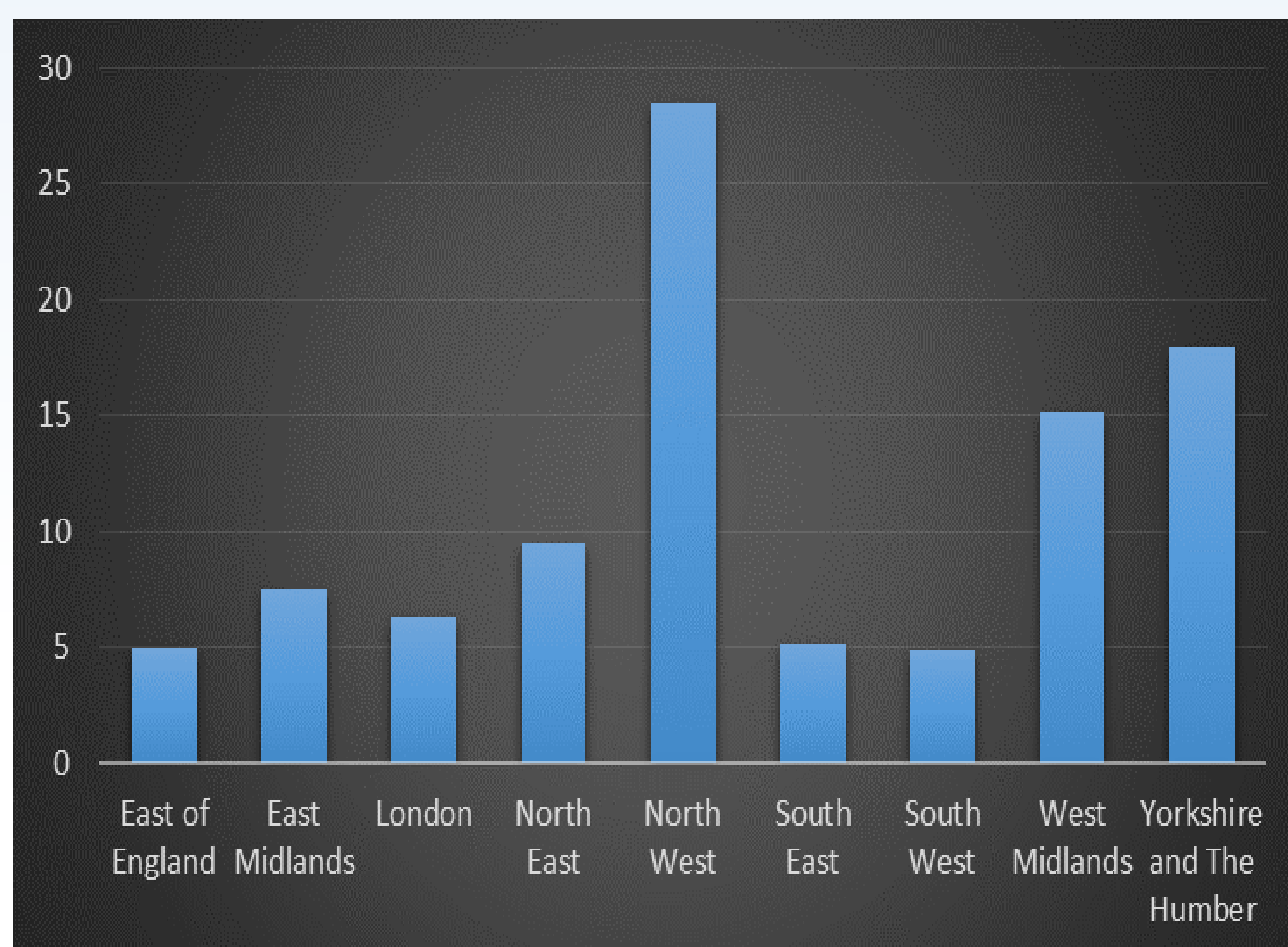
The Index of Multiple Deprivation indicated that the northern part of England was more deprived than the southern (Jenkins, 2010). Furthermore, NHS reforms in the 80's changed the way that people received medical care and several people did not have access to proper treatment (Weale, 1 2015). The objectives of this research are:

- Ways of mapping the data to identify any spatial patterns.
- Analysing demographic characteristics and research of policies that might have contributed to the deprivation.
- Identifying reasons behind differences in IMD by region.

## DATA

Four kinds of data were used:

- Population by age, region and IMD decile
- Hospital emergency admission rates by different types of admission and by age.
- Map of England with GOR as output areas.
- Demographic characteristics of each area (from Casweb).



People aged 60-70 in IMD 1 by region produced in Microsoft Excel.

## METHODOLOGY

1

- Plot the data to identify patterns by age.

2

- Aggregate the data for visualisation.

3

- Mapping the data to identify spatial patterns of IMD in England.

4

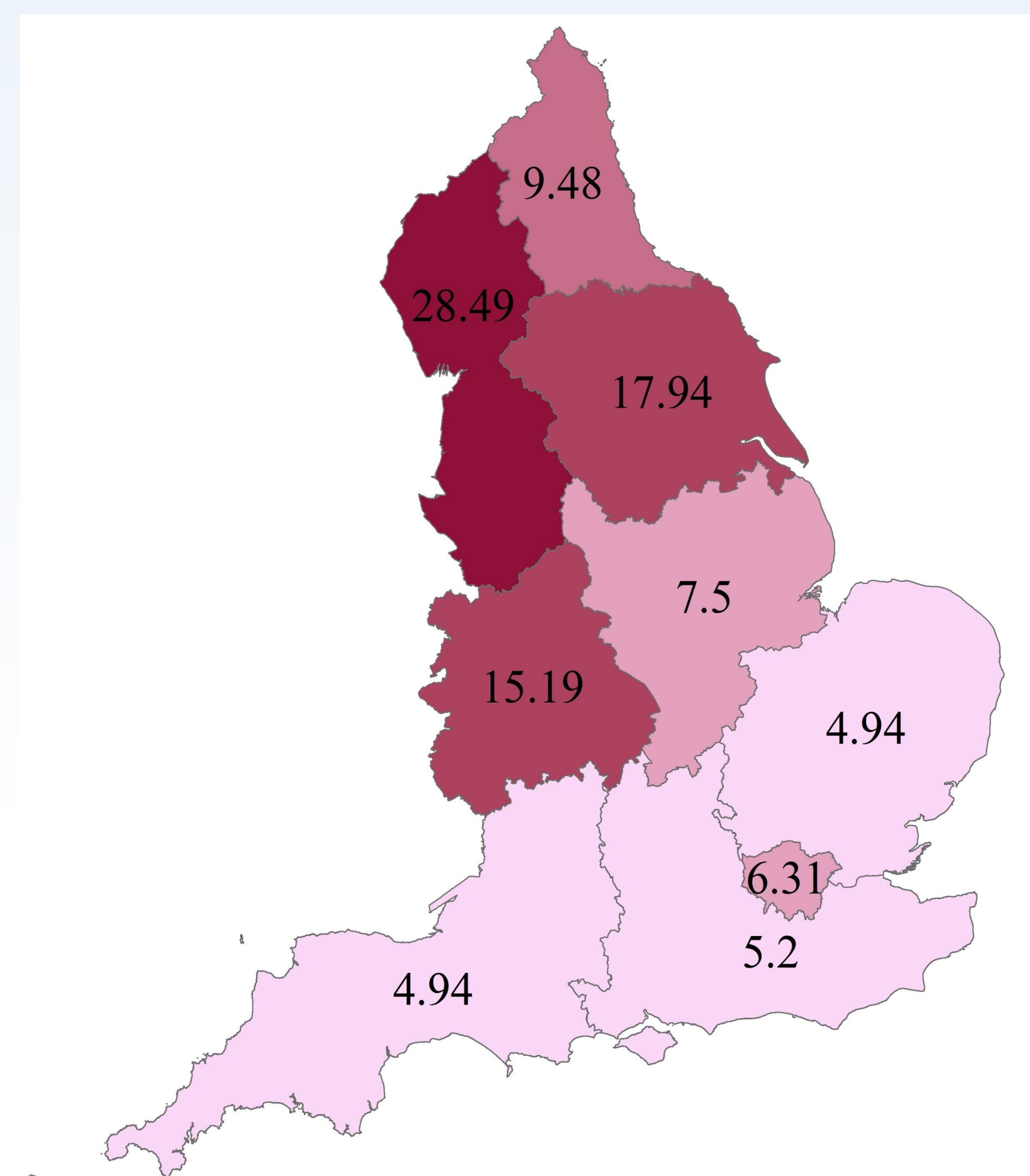
- Analysing the admission rates.

5

- Research of health policies and demographics in the areas in the 80's.

6

- Compare results from research and identify the reasons behind IMD differences.



Ratio of people in IMD 1 by region, produced in ArcGIS.

## PROVISIONAL RESULTS

- Southern areas less deprived than the northern.
- The ages 60-70 reflect the greatest differences in deprivation rates amongst other age groups.
- NHS reformations could have an impact on the IMD, GP fundholding led to people seeking private medical care.
- People in southern areas more wealthy.
- Immigration rates not valid in the 80's.
- Location of industries in the northern part of England in the most deprived areas comprising of blue collar workers.
- Further research will be conducted with newly acquired data about the hospital admission rates.

## KEY REFERENCES

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