East Midlands Gateway Phase 2 (EMG2)

Document DCO 6.17B/MCO 6.17B

ENVIRONMENTAL STATEMENT

Technical Appendices

Appendix 17B

Population and Human Health Baseline

October 2025



The East Midlands Gateway Phase 2 and Highway Order 202X and The East Midlands Gateway Rail Freight and Highway (Amendment) Order 202X

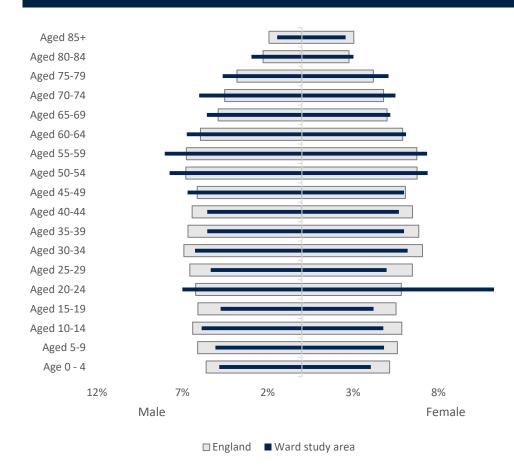


APPENDIX 17b: POPULATION AND HUMAN HEALTH BASELINE

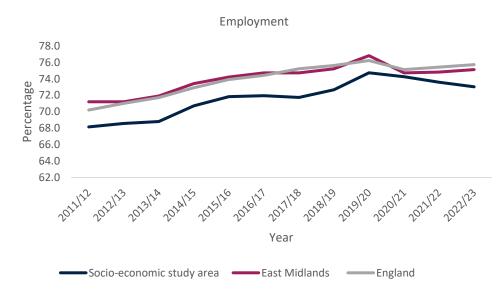
Introduction

Communities have varying susceptibility to health impacts and/or benefits due to differing demographic structure, physical and mental health, lifestyle and behavioural risk factors and socio-economic circumstance. This population and health baseline aims to put into context the local health and socio-economic circumstance of the communities surrounding the development. The district study area comprises North West Leicestershire district, using regional (East Midlands) and national (England) data as relevant comparators. The ward study area is used where possible, comprising Castle Donnington Castle, Castle Donington Central, Castle Donington Park, Daleacre Hill, Kegworth, Long Whatton & Diseworth and Worthington & Breedon.

Demography and socio-economic circumstance



Source: NOMIS



Source: OHID Fingertips

The population living in the ward study area differs to the national average as it has a higher proportion of the population (both male and female) aged 20-24 years and 50-84 years. Generally, the study area population can be considered more elderly than the national average.

The percentage of the population in the study area who are employed has been increasing and is consistently lower than the regional and national averages.

Life expectancy

Male life expectancy in the district study area has increased over the years to a level which is higher than the regional and national average since 2014-16. Female life expectancy has also increased over the years, until 2017-19 where it started decreasing; most recent statistics show that female life expectancy in the district study area is marginally higher than the regional average and lower than the national average. Leicestershire is the lowest geography that HLE data is available for; both male and female healthy life expectancy (HLE) in Leicestershire was consistently higher than the regional and national averages until recently where it has reduced to below the national average.



Source: OHID Fingertips

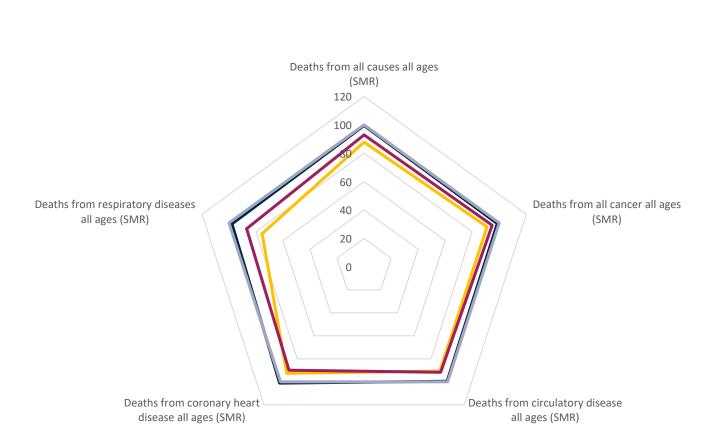
Physical health

All-age all-cause mortality, circulatory disease mortality and respiratory disease mortality in the district study area has remained relatively consistent with regional and national trends over the years. Cancer mortality in the district study area has generally been lower than the national average, and most recent statistics show a lower mortality rate than the regional and national averages.



Source: NOMIS

Physical health (cont.)



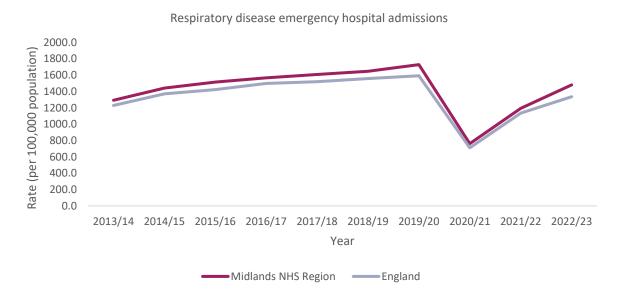
Ward study area —North West Leics —Leicestershire —England

Standardised mortality ratio (SMR) for all causes in the ward study area is lower than all relevant comparators.

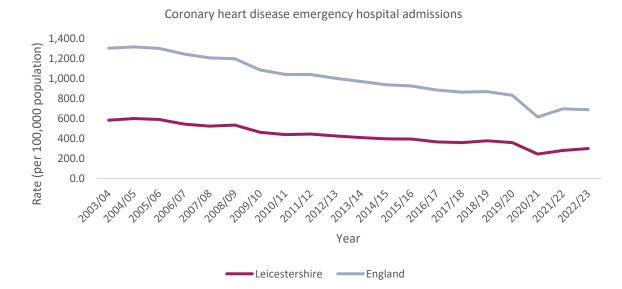
The same is true when analysing the majority of specific causes of mortality, with the exception being mortality from coronary heart disease (CHD), which is marginally higher than the Leicestershire average but remains lower than all other comparators.

Source: OHID Local Health

Physical health (cont.)



Source: OHID Fingertips

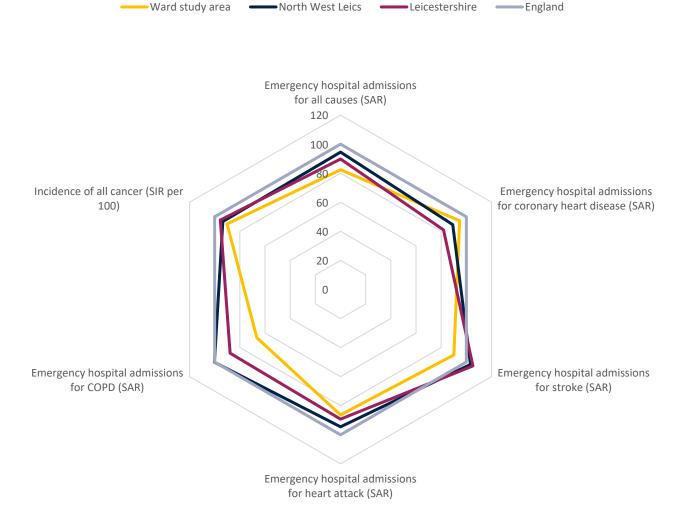


Source: OHID Fingertips

Data for emergency hospital admission for respiratory disease was only available at the NHS Region level, whereby data shows that respiratory disease hospital admissions have been consistently higher than the national average.

Leicestershire is lowest geography that data is available for coronary heart disease emergency hospital admissions. Data shows that emergency hospital admissions in Leicestershire have been consistently lower than the national average and shows a decreasing trend.

Physical health (cont.)



Standardised admission ratio (SAR) for all causes in the ward study area is lower than all relevant comparators.

The same is true when analysing the majority of specific causes of mortality, with the exception being mortality from coronary heart disease (CHD), which is higher than the North West Leicestershire and Leicestershire averages, but remains lower than all other comparators.

In the absence of admissions data, standardised incidence ratio (SIR) has been analysed for cancer and shows that cancer incidence in the ward study area is lower than all relevant comparators.

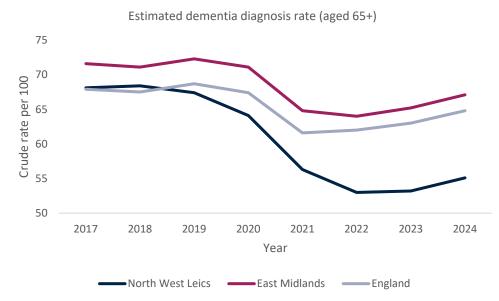
Source: OHID Local Health

Mental health

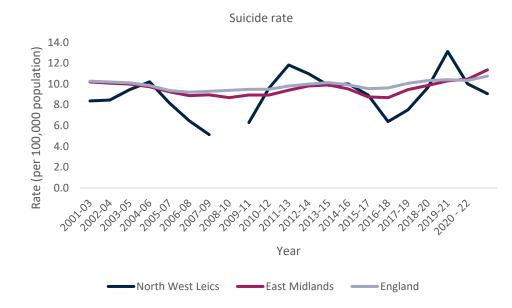
Suicide rate in the district study area has shown an overall increase over time, which is consistent with regional and national trends. While there has been fluctuation over the years, most recent statistics show that suicide rate in the district study area is lower than the regional and national averages.

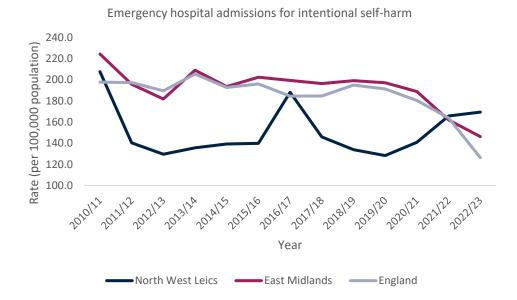
Emergency hospital admissions for intentional self harm in the district study area has shown a general decrease over time, which is consistent with regional and national trends. Trend analysis shows that hospital stays for self harm in the district study area is lower than the regional and national averages in most years. However, most recent data shows an increase to a level which is higher than the regional and national averages.

Dementia diagnosis in the district study area in those aged 65+ has decreased to a level which is lower than the regional and national averages, but has been increasing in recent years which is consistent with the regional and national trends.

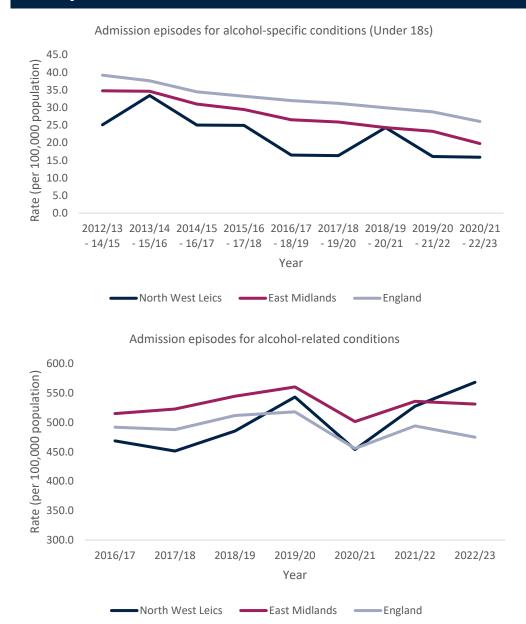








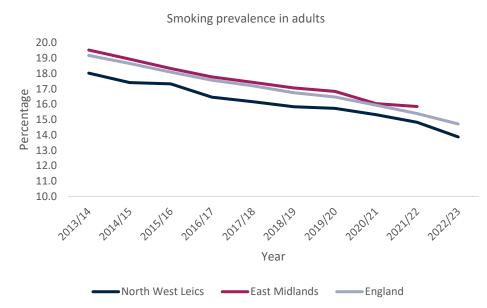
Lifestyle and behavioural risk factors



Hospital admissions for alcohol-specific conditions in under 18s in the district study area has reduced over time and has remained consistently lower than or equal to the regional and national averages.

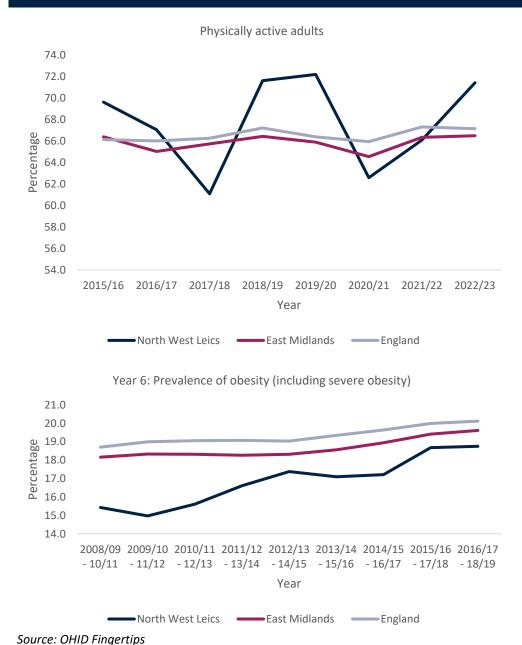
In the adult population, hospital admissions for alcohol-related conditions has shown a general increase over time to a level which is higher than the regional and national averages.

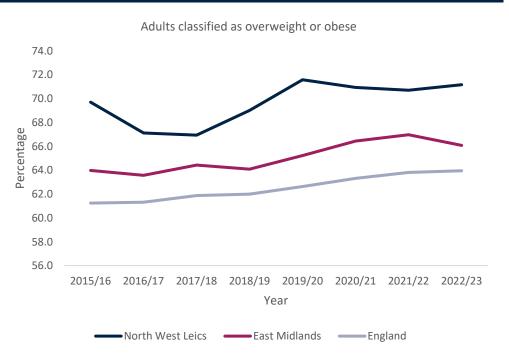
Smoking prevalence has been reducing in the district study area and has remained consistently below the regional and national averages.



Source: OHID Fingertips

Lifestyle and behavioural risk factors (cont.)





The percentage of physically active adults in the study area has fluctuated over the years and recently shows an increase to a level which is higher than all relevant comparators. However, the percentage of adults classified as overweight or obese in the district study area has been consistently higher than the regional and national averages and has increased over time.

The prevalence of obesity in children (Year 6) has been increasing in the study area, consistent with regional and national trends, but remains consistently lower than all relevant comparators.