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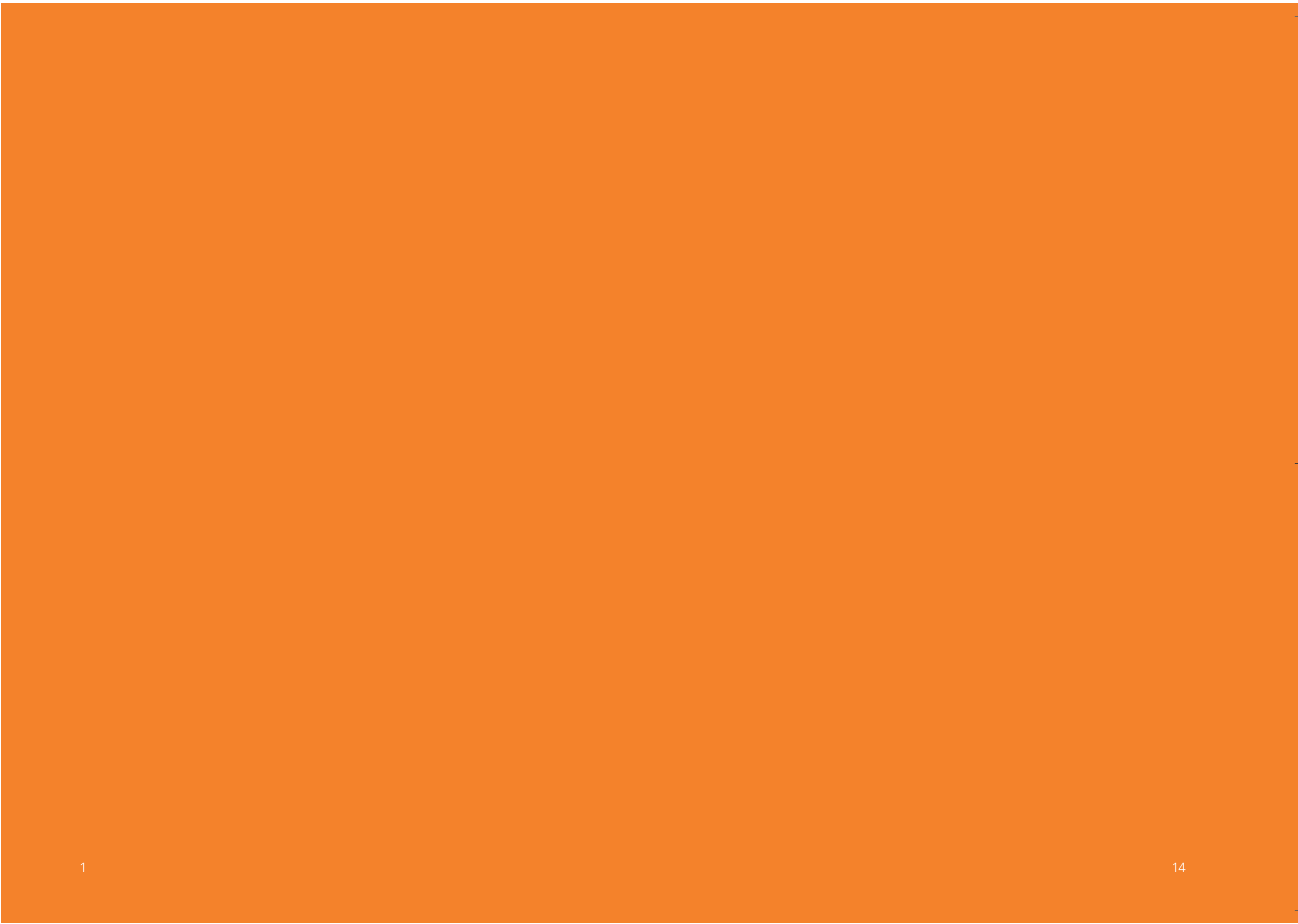
NATIONAL DEVELOPMENT PLAN

Ballymun Partnership was established in 1991. It is an independent company, limited by guarantee. Company Registration Number is 197878. It has Charitable Status, Number CHY 11441.

An aerial photograph of the Ballymun area in Dublin, Ireland, overlaid with a semi-transparent orange grid pattern. The map shows a dense residential area with a central green space and a large circular structure, possibly a stadium or arena. The text "A Picture of Health in Ballymun" is overlaid on the map in a white, sans-serif font.

A Picture of Health in Ballymun

Part 5



Comment

Here I am 25 years working for the Health Board at the cold face of social distress in places like Darndale, Finglas and Ballymun and as I read the facts and figures included here in this booklet I find myself sitting up, switching on and taking notice!

“I didn’t know that I never realised that ... that’s really interesting ... that’s really positive ... and that’s bloody awful!” Are all of the thoughts that go through my head.

These figures tell me what Ballymun is saying, and don’t mind saying and obviously want people to hear. Sure I know a lot of it – some of it unconsciously or subliminally. But there is more I didn’t know, good and bad. Welcome to the 21st century Ballymun and Thanks for the wake up call!

The statistics in the pages of these booklets show that more than ¾ of people like living in Ballymun and want to continue to do so, that’s good. The vast majority of people feel safe in their homes at night, that’s great. ¾ of parents rate schools in Ballymun as good or very good ... excellent!

But compared with the State, statistics in this booklet show that Ballymun has proportionately twice as many people describing their health as poor. I feel a sense of shock when I read this statistic. Twice as many people in this community, compared with the rest of the country, describe themselves as ill!



In a community with an average age of less than 27 years, less than 13% describe their health as excellent, compared with almost 30% in the rest of the country. "Your health is your wealth." "You don't appreciate your health till you're sick." The old hackneyed expressions of people who take their health for granted spring to mind. If it is sad to encounter an individual who is ill or who believes that they're "not in the best", it is surely tragic to hear such a proportion of people in a community with such a youthful profile articulate such a sentiment. Is this just a perception, a reflection of low self esteem perhaps, the hurt feelings of a community which has suffered years of social deprivation and neglect? Let's look at the figures ...

- Nearly twice the incidence of asthma as the rest of the state
- 1½ times the incidence of angina
- Twice the incidence of ulcers
- Twice the incidence of diabetes
- Twice the incidence of heart attack
- Almost twice the incidence of chronic bronchitis
- More than twice the incidence of 'other cancers' than skin cancer

If all these illnesses are medically diagnosed, there is a lot more to the 'poor health' syndrome than communal psychosomatic delusion!

The Good News ...

Osteoarthritis, Osteoporosis and Rheumatoid Arthritis are below the average in the State. This is hardly surprising given the youthful profile of the community.

Strangest of all ...

How can it be (given the nature of some of the high incidence of above ailments often associated with stress – e.g. ulcers, heart attach) that the incidence of hypertension is less than half of that of the rest of the State? Is this a case of under-diagnosis; or a case of under reporting by the respondents of an ailment still regarded by many as a stigma? Anecdotally, and from the perspective of my own service, I would emphatically maintain that this figure is seriously understated.

"Ballymun has twice as many people as the State describing their health as poor"

Drugs and Alcohol

The survey also examined issues of alcohol and drug use, however it should be noted that these issues were only covered in terms of health problems. One in twelve (8.3%) households include a person who has had health problems associated with drug or alcohol use.

Over two thirds (69.0%) of these sought help from health/drug services. 48.3% of these rated the service as very good, 17.2% rated the service as good, 13.8% rated it as average, 3.4% rated it as poor, and 17.2% rated the service as very poor.

The Drugs Task Force Report (2000) reported figures gathered from three sources: drug treatment services, hospitals, and Garda. The report stated that in 1998 there were 683 opiate users in Ballymun, most of whom were in the age range 15 – 49 years old. This meant that one in thirteen local people in that age range were found to be opiate users. The ratio was as high as one in five men, between the ages of 24 and 29, were found to be using opiates.

The level and nature of alcohol and drug use warrants further investigation by organisations and agencies such as Ballymun Local Drugs Task Force and the Northern Area Health Board.



So where do we go from here?

It is encouraging to note that of the people who used a health/drug service, over 65% rated the service as very good or good. Over 20% however, rated it as poor or very poor. We can and MUST do better.

3 years ago I (at 55 years of age and never darkened the doors of a hospital) found myself in need of medical services. Courtesy of Voluntary Health Insurance (VHI) I was seen by a specialist, a pathologist, diagnosed, hospitalised, operated on and back in my own bed and home all in the space of 6 weeks. Now wouldn't it be wonderful if everyone was afforded the same care!

Good news though, Ballymun has just been designated a Primary Health Care area and a Project Manager was recently appointed to drive a Pilot Health Care Project that will co-ordinate the services of professionals and voluntary groups delivery primary health care in the area. The aim of is to:

- Provide ease of access and transparency
- Be available when required
- Help people to stay healthy
- Provide appropriate care in the appropriate setting
- Improve the health of the local population
- Help people to take control and responsibility for their health
- Co-ordinate on-going care for individuals and families
- Contribute to reduction in health inequalities
- Respond to the needs of individuals and families when problems or acute needs are experienced

And finally, (God and Minister willing) a state-of-the-art facility in Ballymun that both community and professional service providers can be proud of!

Fergus Kelly, Ballymun Manager, Northern Area Health Board

Comment on drugs and alcohol

From soon after the first residents moved in, in the mid 1960s until quite recently, there was a high turnover of tenants to and from the area (30 per cent in the mid 1980s).

As more houses were built in outlying areas of Dublin more families moved out. Eventually, in the mid 1980s, there was nobody left to move in. There were more than 450 flats left unoccupied and it became common practice to let the flats to anyone who could demonstrate a need for accommodation. Many stronger, self-supporting families took advantage of housing surrender grants and moved on. The profile of the area changed to show a far weaker community in both economic and social terms. To a large extent this profile still applies to today's Ballymun, the educational profile alone could prove this. As is demonstrated across many western countries, such an area is extremely vulnerable if someone organises a supply of illegal drugs into it.

The drugs problem that became evident in the early 1980s was shown up by the high visibility on the streets of those buying, selling or using heroin. This relative few became many as the supply became more organised and the 'heroin epidemic' ravaged many areas of Dublin. According to the survey 8.9 per cent of households reported having a member with health problems associated with drug or alcohol use. This seems unfeasibly low. Given the self-reporting nature of the survey, we should not be surprised if it's on the low side. How many of us would feel comfortable divulging a family drug or alcohol problem to a stranger at the door. In fact perhaps people were surprisingly honest.

The Ballymun Local Drugs Task Force survey of 1998 figures showed that there were 683 known opiate users (heroin, methadone, etc) with Ballymun addresses. This figure did not include those with alcohol or other addictions (although dependency on other drugs would be common-place).

Indicator of general well-being

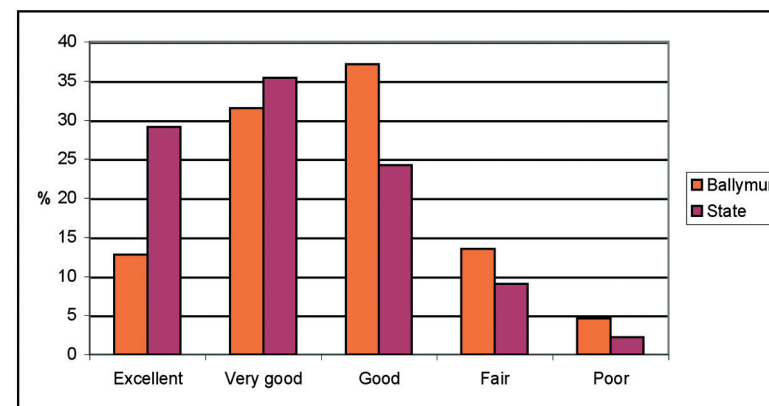
People were also asked to rate their health in general. Table 5 presents the results.

Table 5 How people perceive their own health

Rate	2002 Survey %	State* %
Excellent	12.8	29.1
Very good	31.5	35.4
Good	37.1	24.2
Fair	13.5	9.0
Poor	4.6	2.2
Don't know/not stated	0.6	0.1

Source: CSO - NQHS, 3rdQ 2001

Chart 1 illustrates that the State has proportionally more than twice as many people who describe their health as excellent. Ballymun has a proportion twice as large as the State of people describing their health as poor. Many studies suggest the health of a community is inextricably linked to social exclusion. As Ballymun is to be used by the Department of Health and Children as one of the pilot areas for a new model of primary care, we should expect some improvement in the coming years.



Types of Health Conditions

Respondents were also asked whether or not they suffered from specific health conditions. The results can be seen in Table 4. Ballymun has a slightly higher proportion of people with one or more conditions (35.7% compared to 30.4% for the State). Ballymun has a far higher rate of asthma (9.3% compared to 5.0%) and a far lower rate of hypertension (3.1% compared to 6.8%).

Table 4 Percent of people from specific conditions

Condition	2002 Survey		State*
	%		%
Asthma	9.3		5.0
Angina	3.7		2.3
Rheumatoid arthritis	3.7		3.8
Gastric/peptic/duodenal ulcer	3.7		1.7
Diabetes	3.1		1.5
Hypertension	3.1		6.8
Heart attack	2.9		1.5
Chronic bronchitis	2.5		1.4
Other cancer	2.1		1.0
Gallstones	2.1		1.3
Osteo arthritis (of the hip)	1.7		3.0
Kidney stones	1.0		0.6
Stroke	0.8		0.6
Leg ulcer requiring dressing	0.8		0.5
Osteoporosis	0.6		0.9
Under active thyroid	0.6		0.9
Skin cancer	0.2		0.3
Other	13.0		9.2
One or more	35.7		30.4

Source: CSO – NQHS, 3rdQ 2001

The drug which is most obviously consumed and which causes most unhappiness, violence and poor health in Ballymun is alcohol. There are major problems with problematic drinking here. Had there been no heroin problem, Ballymun would still have major addiction problems. The pattern is clear in socially excluded communities throughout the world. They fall short in providing a climate and culture of education, perpetuate a sense of powerlessness, do little to invest in children, families and community health, then one of the behaviours that will follow will be the development of patterns of problematic drinking and drug use. In some ways the drugs issue can be used as a gauge of community well being and hope.

So, if there is a follow up population survey in five years time and there is an increase in the reported problem of poor health as a result of a drug or alcohol problem, what could we assume? We could assume that we still have a poor climate of learning; we could assume that there is no growth in investment in children and young people. We could assume that there is little being done to cultivate a sense of future for our young people. I look forward, with hope, to the next gauge reading.

Hugh Greaves, Co-ordinator of Ballymun Drugs Task Force.



Introduction to the facts and figures

To gather the key data for this Fact File, Ballymun Partnership commissioned a company called Vision 21 to conduct a survey with ten percent of Ballymun residents, over the Christmas period 2002.

Addresses were randomly selected from a database which we constructed using information from Dublin City Council Regional Office, from Ballymun Post Office and Ballymun Regeneration Limited. The target sample size was 485 households, which was 10% of the total number of households, 4,850, in Ballymun at the time of the survey. The survey results tell us that out of these 485 households, there were 1,516 members. If we multiply this figure by 10 we can estimate that the total population for Ballymun is 15,160 people. On average there are 3.14 persons per household.

When reading the facts that follow you can refer to the total household number 4,850, and the total population number, 15,160, where relevant, in order to get a real understanding of the actual numbers of people from the percentages given.

The facts and figures

To establish a profile of Ballymun people's health, respondents in each household were asked a number of questions about health conditions, illnesses and disabilities. Much of the information is comparable to data collected by the Quarterly National Household Study (3rd Quarter 2001). The first two questions about long-lasting conditions and difficulty performing activities will be comparable to 2002 Census information, which was not available to us when going to print.

People with long lasting conditions

Table 1 illustrates that more than one in twenty people (5.8%) suffer from blindness, deafness, or a severe vision or hearing impairment. One in eight people (12.6%) has a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying.

Table 1 Percentage suffering long-lasting conditions

Conditions	%
Blindness, deafness	5.8
Limits physical activities	12.6

All respondents were asked if, because of a physical, mental or emotional condition lasting six months or more, they have any difficulty in doing any of the following activities. The results can be seen in Table 2.

Table 2 Because of condition lasting at least 6 months do you have any difficulty in ...

Activity	%
Working at a job or business	6.6
Learning, remembering or concentrating	5.6
Going outside the home alone to shop or visit a doctor's surgery	4.3
Dressing, bathing or getting around inside the home	1.7

Medical Cover

Respondents were asked to indicate what type of medical cover they had. As can be seen in Table 3, the proportion of people in Ballymun covered by a Medical card is over twice as high as the figure for the State. Ballymun has far smaller proportion of people covered by private health insurance.

Table 3 Percent of people with medical cover

Type of cover	2002 Survey %	State* %
Medical card only	58.6	25.9
Private health insurance only	9.8	46.1
Both	1.9	2.1
Neither	29.6	25.9

Source: CSO - NQHS, 3rdQ 2001