



## Kintore Hydrogen Plant

### Environmental Impact Assessment Report Appendix 14.1: Population and Health Baseline

Date: May 2024

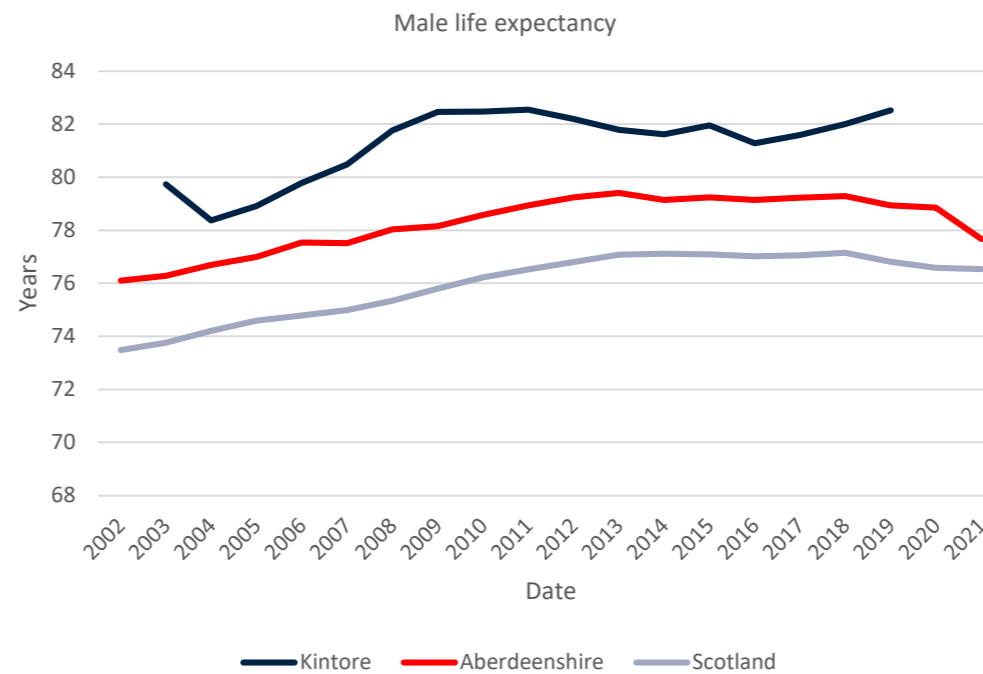
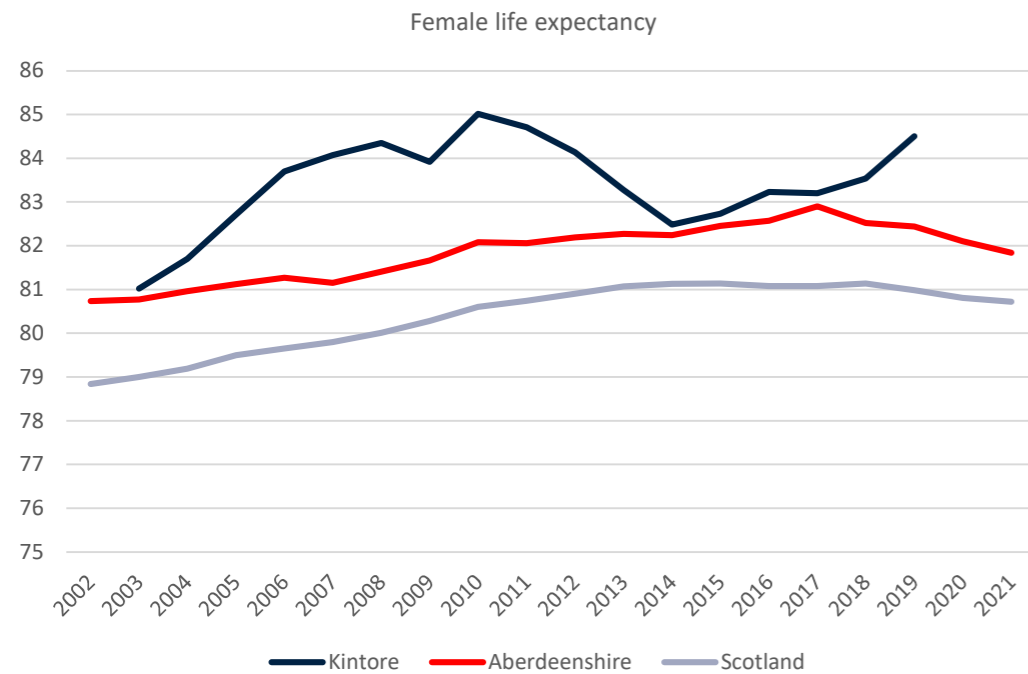
# APPENDIX 14.1: POPULATION AND HEALTH BASELINE

## 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.

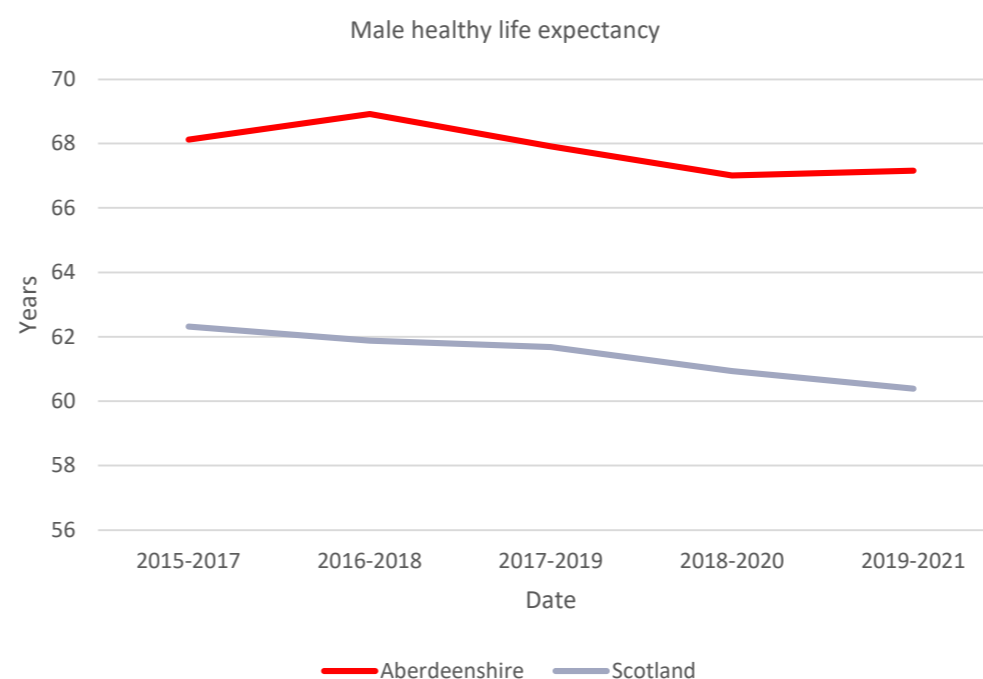
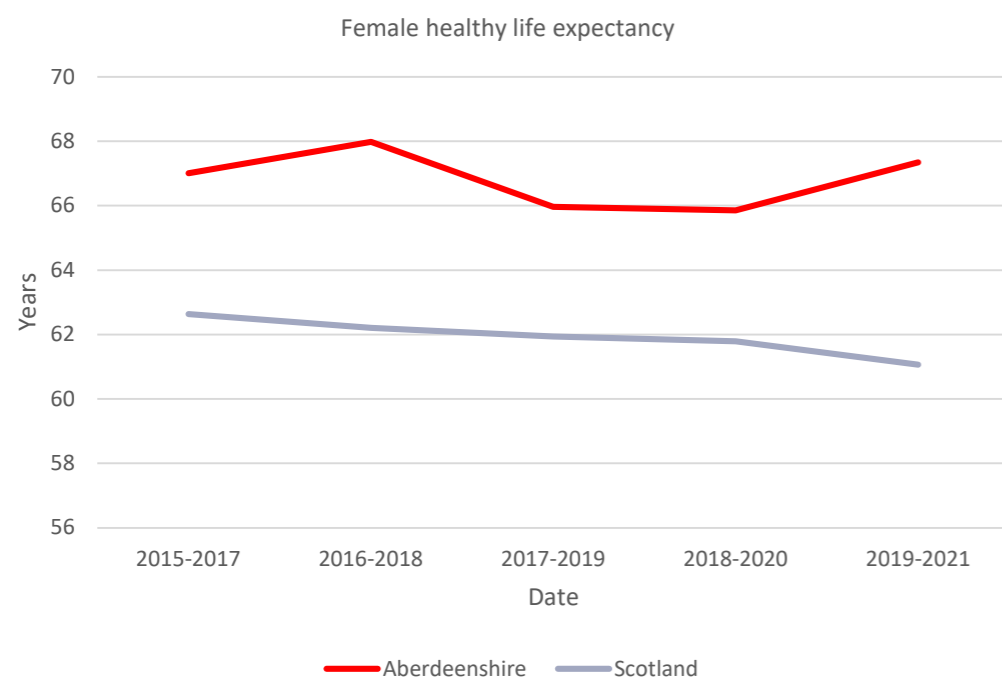
This health baseline aims to put into context the local health and socio-economic circumstance of the communities surrounding the proposed Kintore Hydrogen Plant (the proposed development). The study area comprises Kintore intermediate zone (a statistical geography that sit between data zones and Council areas), using the Aberdeenshire Council area average and national (Scotland) data as relevant comparators. For baseline statistics analysed, the latest available data is used, which may not necessarily be the current year due to delay in publishing and/or discontinuation of data collection/publishing.

## Life expectancy and healthy life expectancy



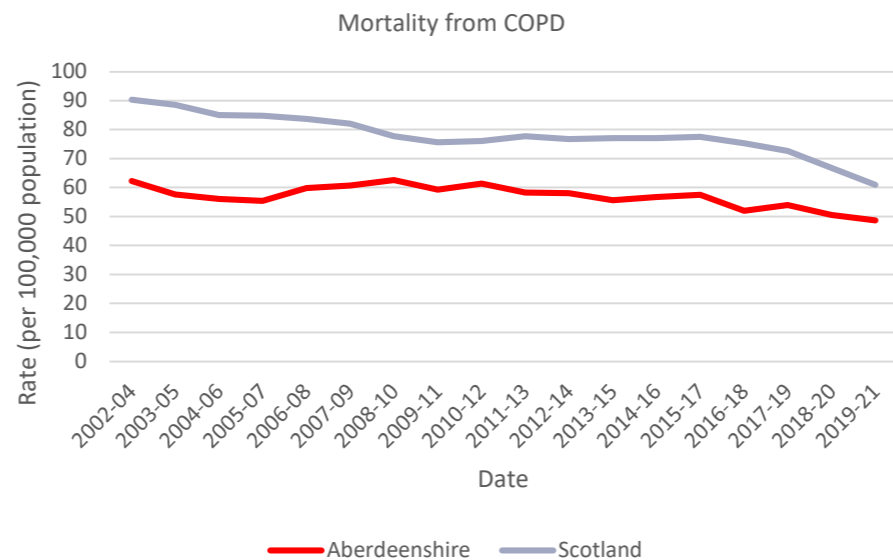
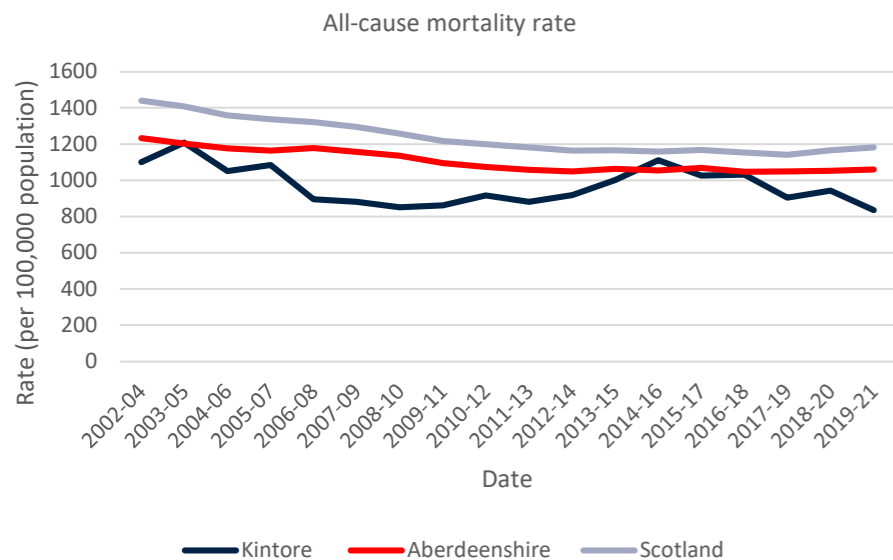
Male and female life expectancy are consistently higher in Kintore compared to the Aberdeenshire and Scotland averages. While there has been some fluctuation over the years (particularly for females where there was a decrease between 2010 and 2014), generally, life expectancy has been increasing.

Healthy life expectancy data is only available at the Council area level, where healthy life expectancy (i.e. the number of years spent in good health) is consistently higher in Aberdeenshire than the Scotland average.

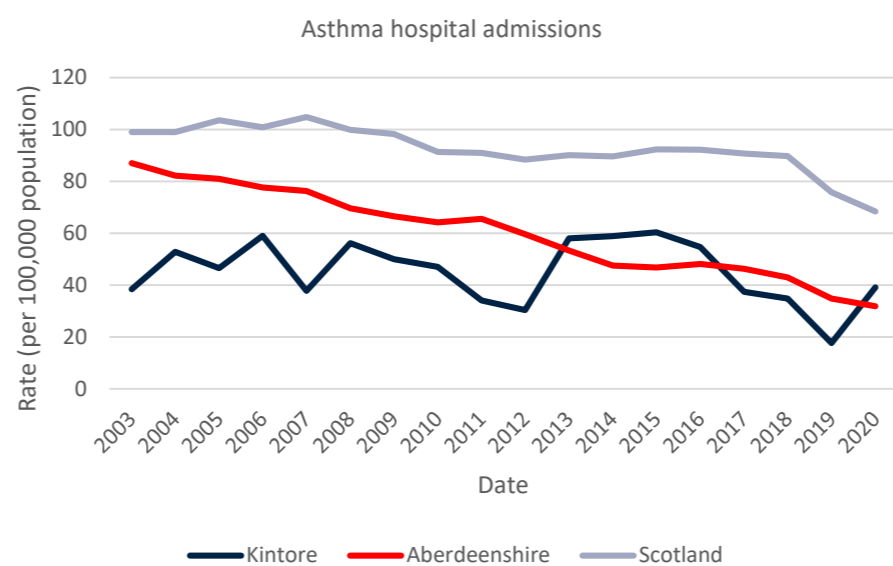
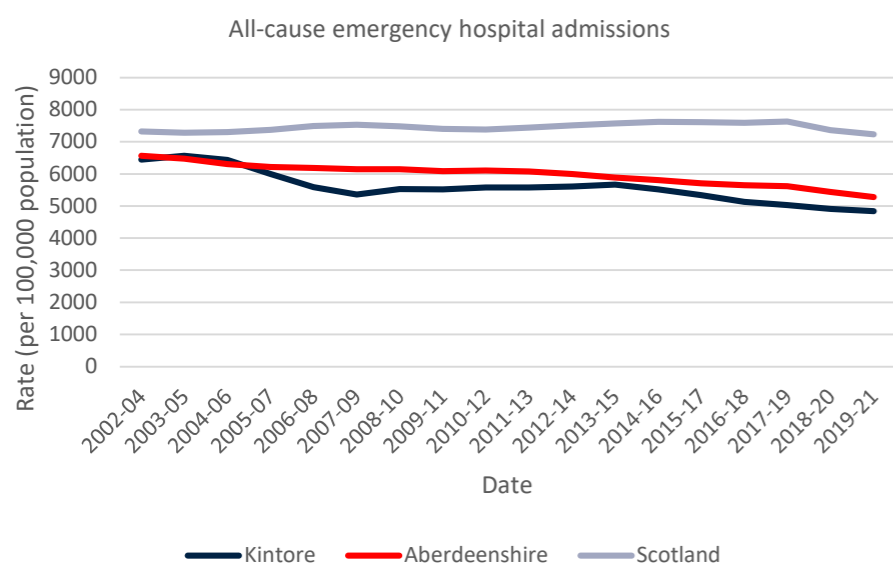




# Mortality, hospital admissions and disease incidence

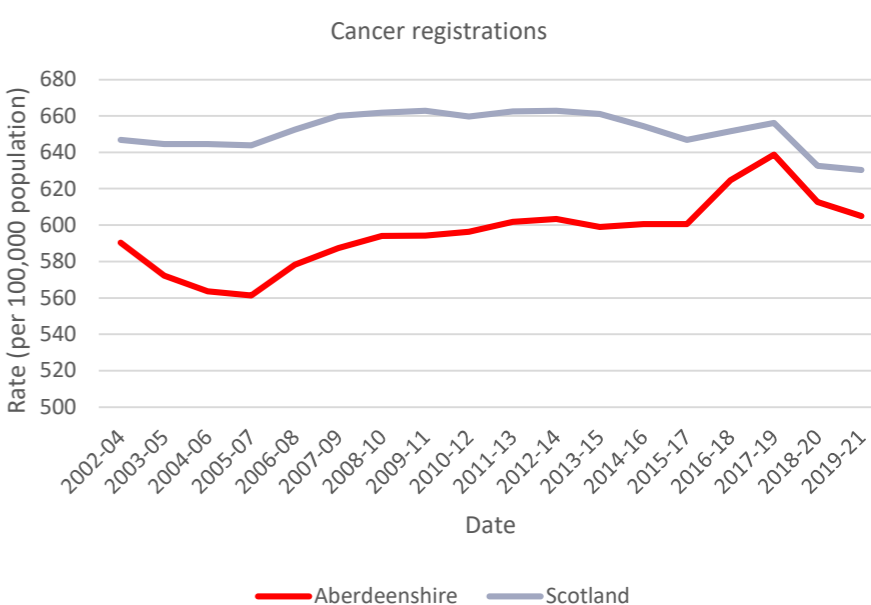
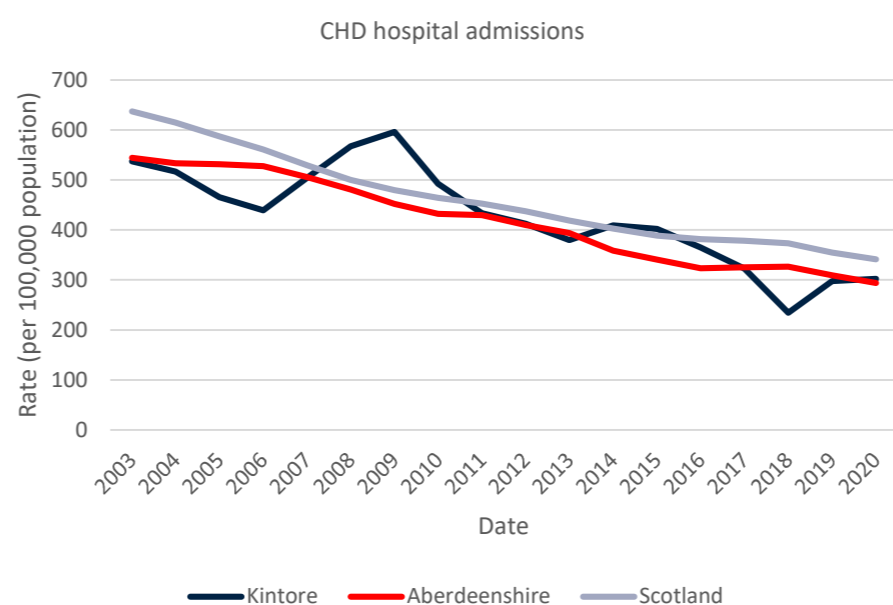
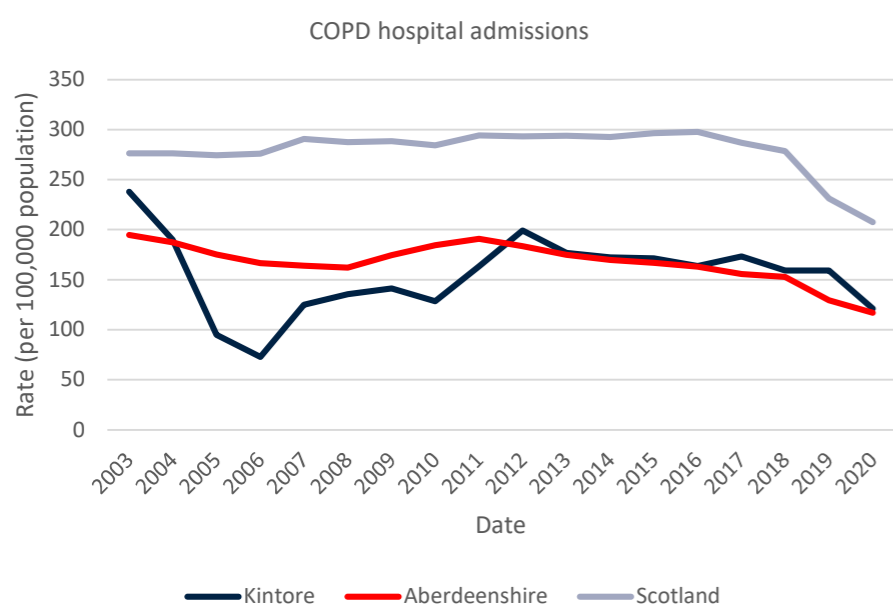


All-cause mortality in Kintore has generally remained lower than the Aberdeenshire and Scotland averages and shows a decreasing trend overall. COPD is the only specific cause of death available to be analysed and shows that there is a lower rate of mortality in Aberdeenshire when compared to the Scotland average.



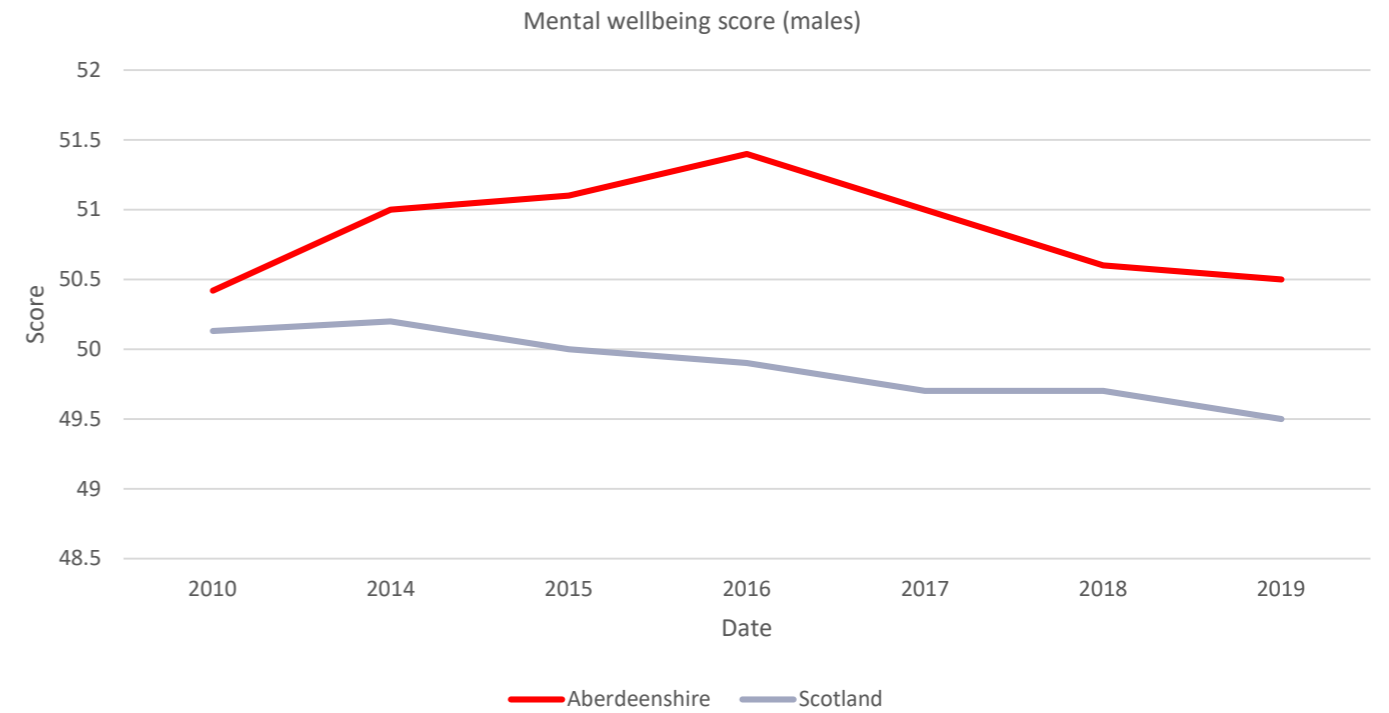
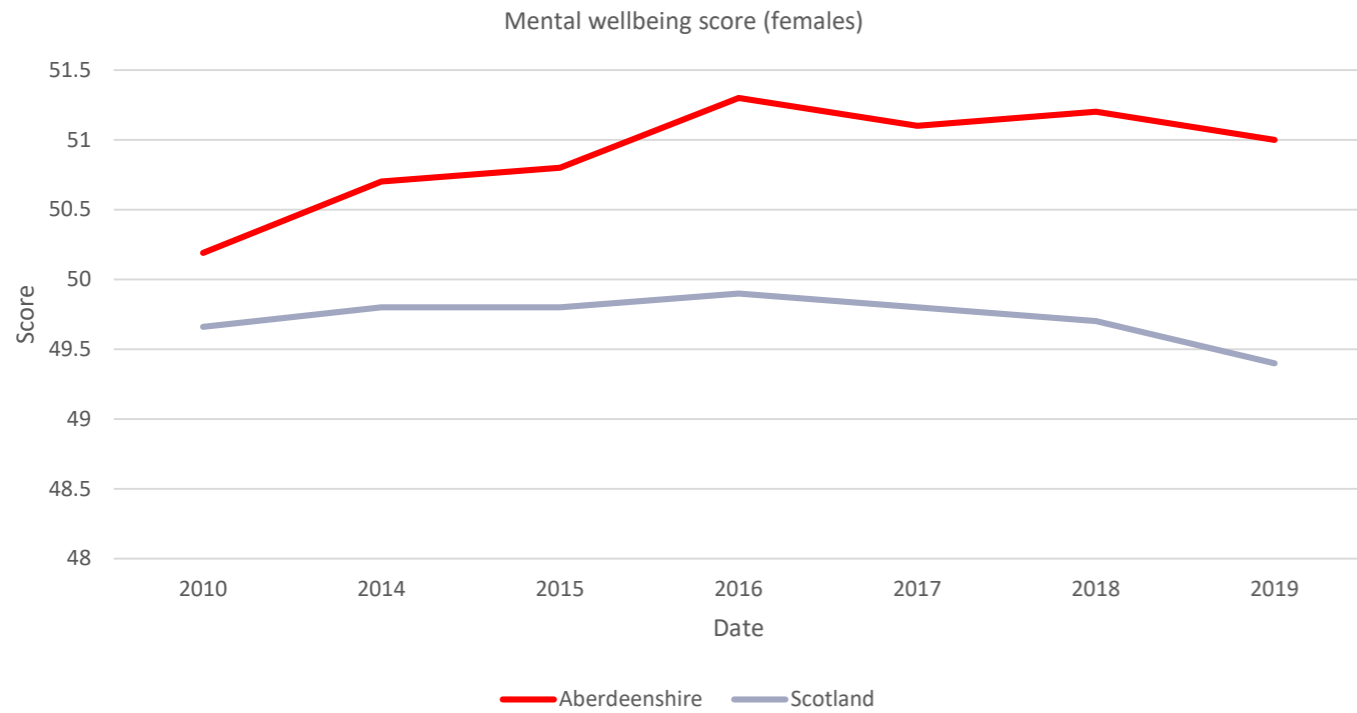
Since 2005-07, all-cause emergency hospital admissions in Kintore have been lower than the Aberdeenshire and Scotland averages and show a decreasing trend.

When analysing specific causes of hospital admissions, rates in Kintore show a relative amount of fluctuation. Hospital admissions for asthma and COPD in Kintore fluctuate above and below the Aberdeenshire average, and do not show a clear decreasing trend over time. Hospital admissions for CHD in Kintore fluctuate above and below both the Aberdeenshire and Scotland average and most recent statistics show a similar rate of hospital admissions in Kintore to these averages.



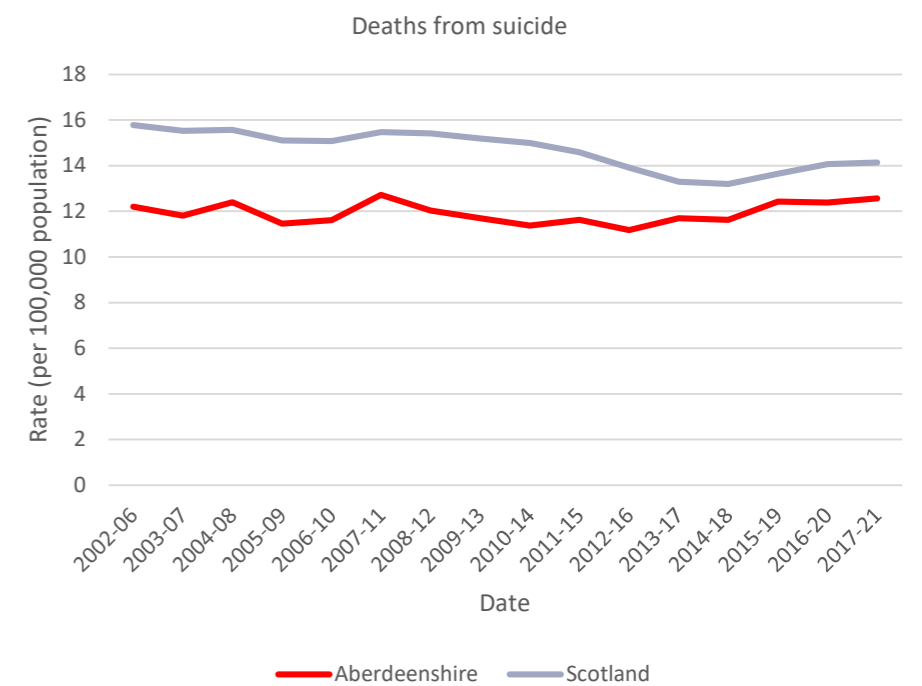
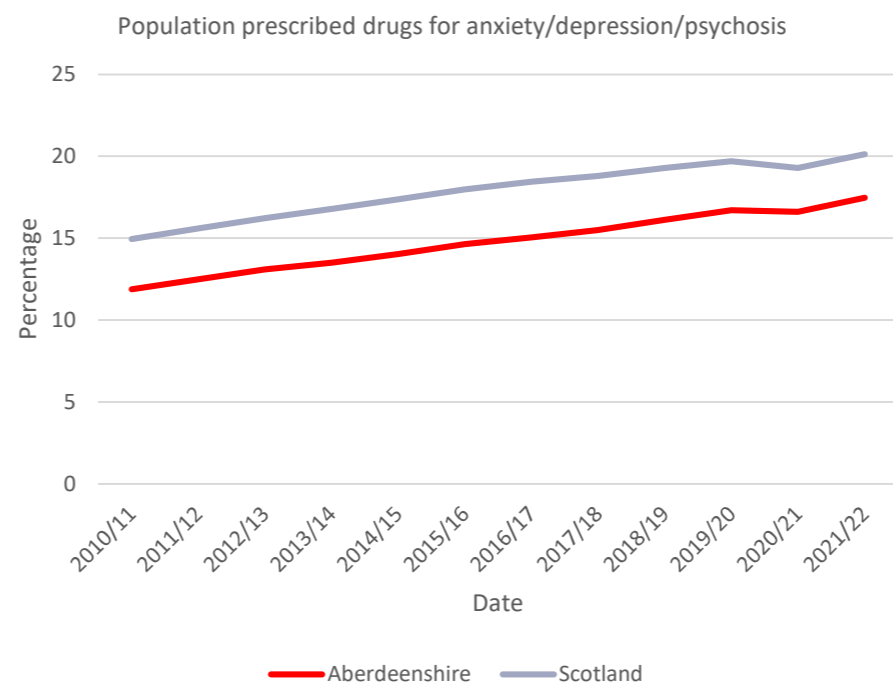
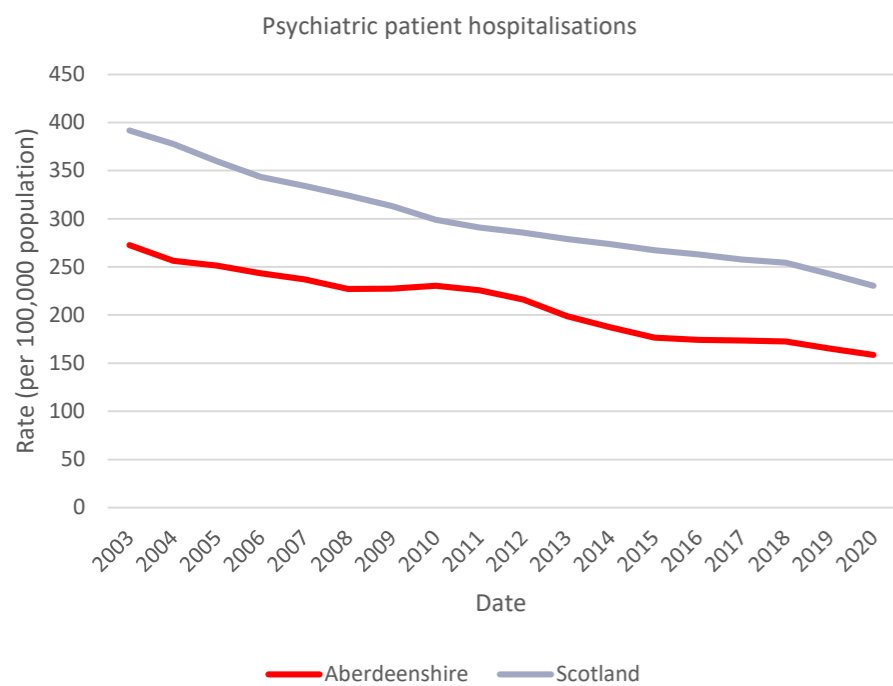
Cancer registrations have been collected as a more appropriate measure compared to hospital admissions. Data is only available at the Council area level and show a consistently lower rate of cancer registrations compared to the Scotland average.

# Mental health

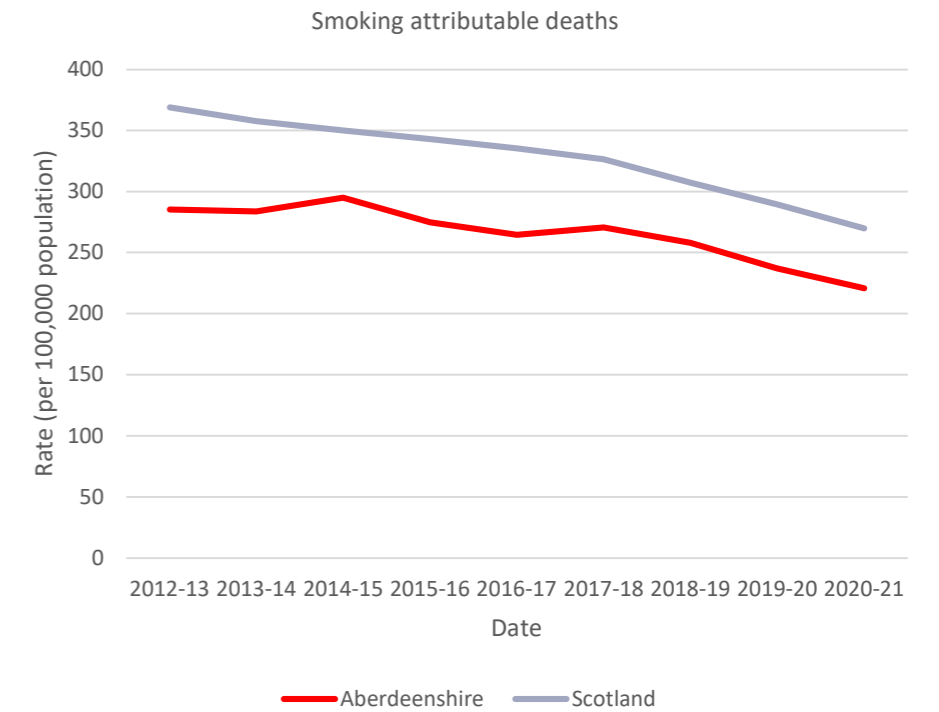
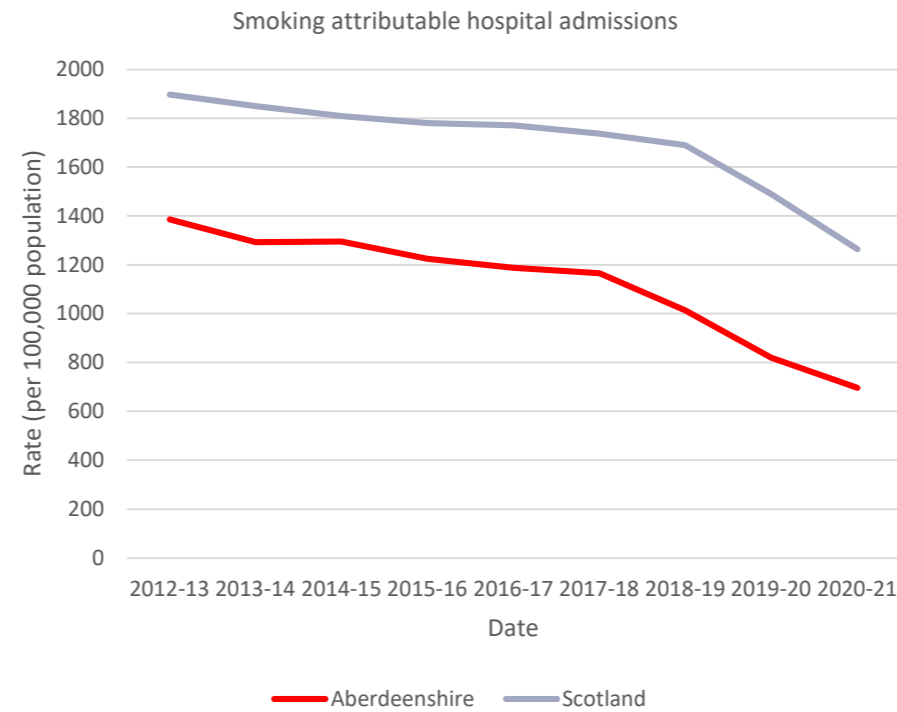
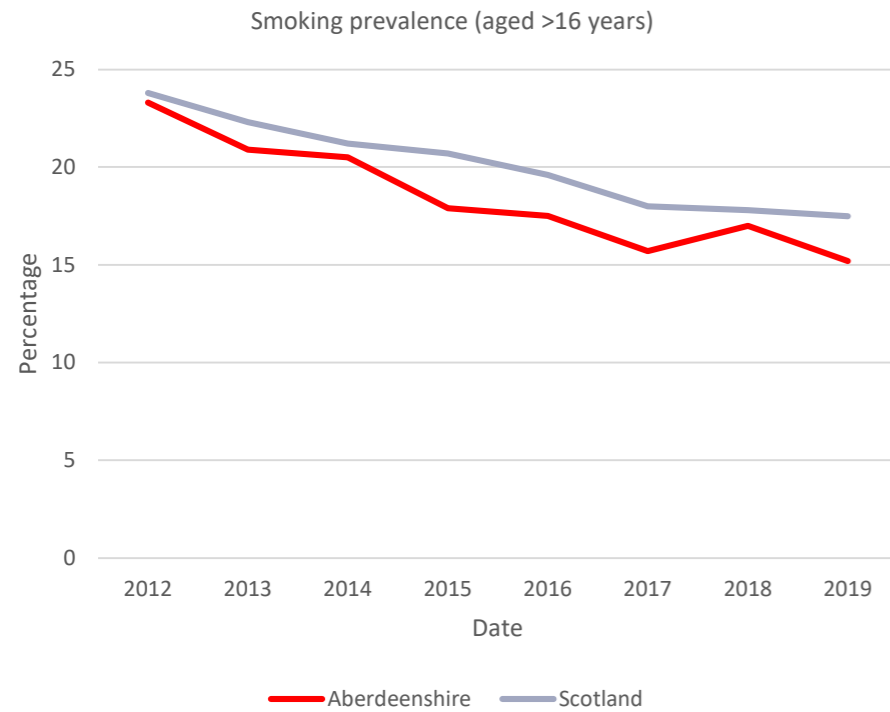


The Warwick-Edinburgh Mental Well-Being Scale (WEMWBS) is a 14-item scale with five response categories which is summed to provide a single score, where a higher score is representative of better mental wellbeing. On this basis, mental wellbeing for both females and males is consistently higher in Aberdeenshire compared to the Scotland average. Female mental wellbeing in Aberdeenshire between 2016 and 2019 has remained relatively static, while the Scotland average for females has started to decrease. Male mental wellbeing in Aberdeenshire also shows a decreasing trend between 2016 and 2019, occurring later than the decreasing Scotland trend which began in 2014.

The rate of psychiatric patient hospitalisations in Aberdeenshire has been decreasing over the years and remains consistently lower than the Scotland average. An increasing trend is seen for the percentage of people who are prescribed drugs for anxiety, depression or psychosis, where a lower proportion of the population is prescribed such drugs in Aberdeenshire compared to the Scotland average. With regard to deaths from suicide, the rate in Aberdeenshire has remained relatively static over the years, whereas the rate in Scotland has shown a general decrease. Overall, deaths by suicide in Aberdeenshire have remained consistently lower than the Scotland average.

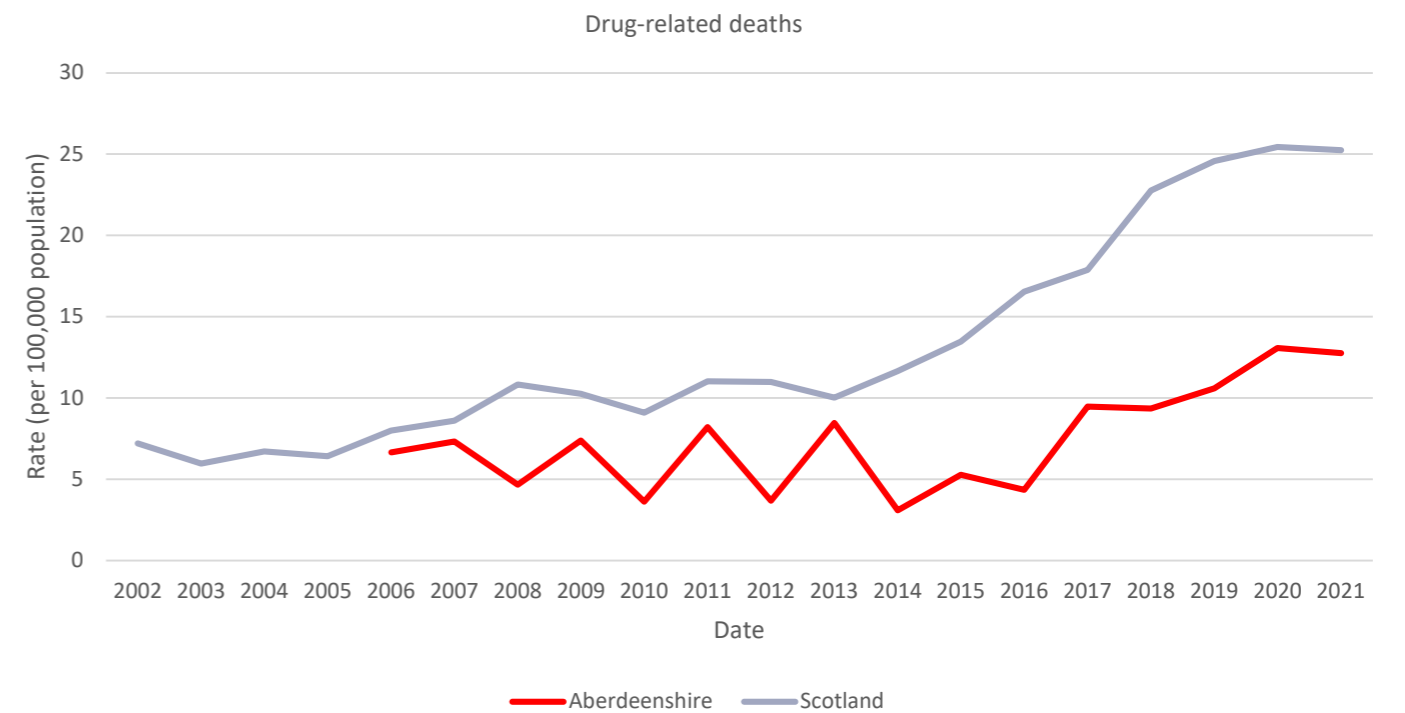
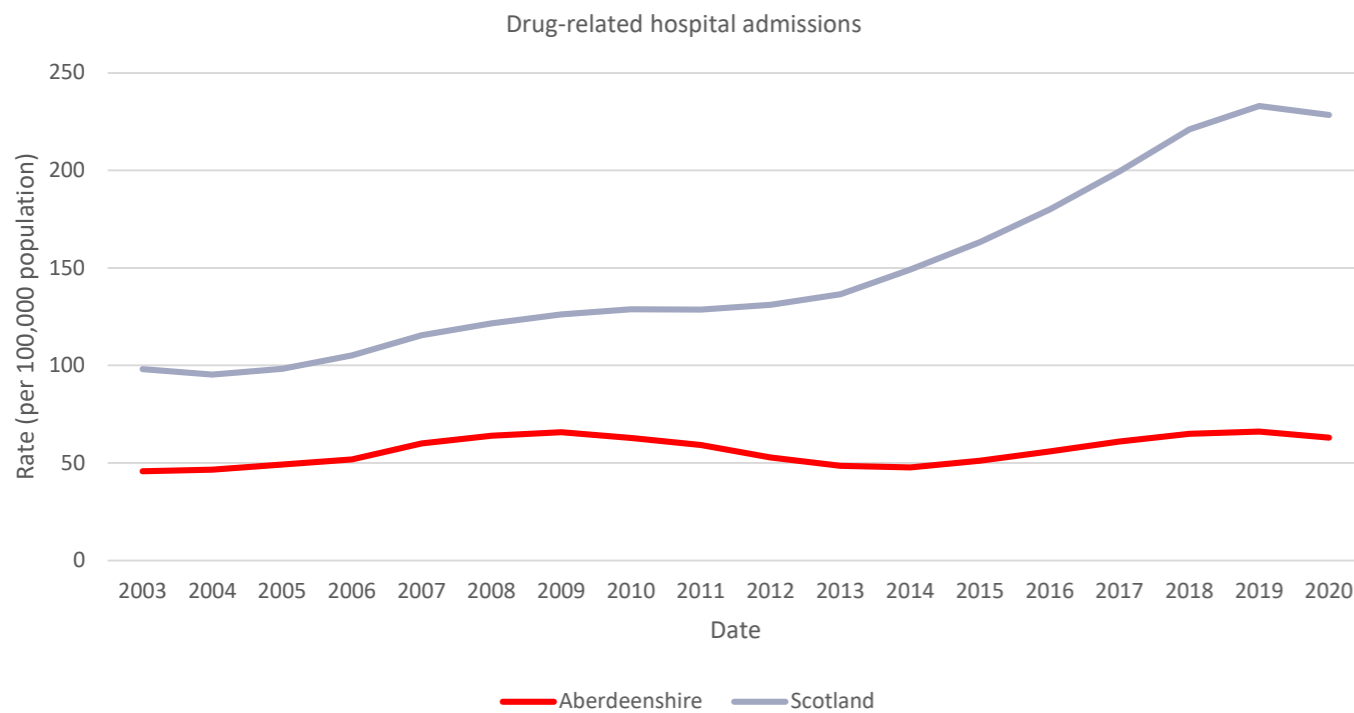


# Lifestyle and behavioural factors



Within Aberdeenshire, smoking prevalence is consistently lower than the Scotland average and shows a decreasing trend. Consistent with this, hospital admissions and deaths attributable to smoking have been decreasing and are consistently lower than the Scotland average.

Drug-related hospital admissions in Aberdeenshire have remained relatively static over the years and consistently lower than the Scotland average; this is in contrast to an increasing trend for Scotland. Drug-related deaths in Aberdeenshire have fluctuated year on year and since 2014 have shown a general increase; the increasing trend in Aberdeenshire is consistent with the Scotland average but remains consistently lower.



## Conclusion

In conclusion, the vast majority of public health indicators analysed show better health and wellbeing circumstance in Kintore (or Aberdeenshire where data for Kintore is unavailable) than the regional and Scottish average. The exceptions to this are hospital admissions for asthma, COPD and CHD, where the rate in Kintore is similar to and fluctuates above/below the Aberdeenshire average, and in the case of CHD above/below the Aberdeenshire and Scotland averages. As a result, it can be concluded that the population living in Kintore does not have a higher sensitivity than the general Scottish population to changes in environmental and/or socio-economic conditions associated with the proposed development.