Ministry of Housing, Communities & Local Government

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deprivation.org

The English Indices of Deprivation 2025

Research report

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Preface

The Indices of Deprivation are an important tool for identifying the most deprived areas in England. Local policy makers and communities can also use this tool to ensure that their activities prioritise the areas with greatest need for services.

The English Indices of Deprivation 2025 is the seventh release in a series of statistics produced to measure multiple forms of deprivation at the small spatial scale.

This report outlines the main results from the Indices of Deprivation 2025, including the overall Index of Multiple Deprivation 2025, and provides examples and guidance on how to use and interpret the data sets. The accompanying Technical Report presents the conceptual framework of the new Indices of Deprivation 2025; the methodology for creating the domains and the overall Index of Multiple Deprivation; the quality assurance carried out to ensure reliability of the data outputs; and the component indicators and domains.

The datasets underpinning the Indices of Deprivation 2025 can be accessed at: https://www.gov.uk/government/statistics/english-indices-of-deprivation-2025

We would like to thank all those who assisted in the production of the Indices of Deprivation 2025.

Acknowledgements

The English Indices of Deprivation 2025 were developed by a joint research partnership led by Deprivation.org and Oxford Consultants for Social Inclusion (OCSI).

David McLennan (Deprivation.org) and Stefan Noble (OCSI) were the joint principal investigators.

The core research team comprised David McLennan, Michael Noble, Helen Barnes, Gemma Wright and Katrin Gasior from Deprivation.org, and Stefan Noble, Katie Leach, Ben Mason and Emma Plunkett from OCSI.

Bowie Penney oversaw the work on behalf of the Ministry of Housing, Communities and Local Government (MHCLG), and played a vital role in securing access to key datasets and coordinating the input from a wide range of stakeholders.

Karen Bloor, Adrián Villaseñor, Nils Gutacker and Veronica Dale at the University of York played an integral part in the development of the Health Deprivation and Disability Domain. Jon Fairburn at University of Staffordshire advised on the development of the Living Environment Domain and produced the air quality indicator. Glen Bramley at Heriot-Watt University advised on the development of the Barriers to Housing and Services Domain and produced the housing affordability and core homelessness indicators. Chris Dibben from the University of Edinburgh and Chris Lloyd from Queens University Belfast undertook a review of the core statistical methods employed across the project, while

Chris Lloyd also performed independent external quality assurance on the data processing steps and resultant outputs. The Building Research Establishment (BRE) produced an updated version of the housing in poor condition indicator, and Noise Consultants Ltd produced noise exposure data that fed into the construction of the noise pollution indicator.

David Avenell undertook geographic information systems work and produced the thematic maps for the accompanying Research Report, while Luke Murray at OCSI provided additional project support.

The research team would also like to thank all the suppliers of data. Particular thanks are extended to those analysts who helped to shape the design of the new or enhanced deprivation indicators, as this often required extensive data development work. This includes analysts at the Ministry of Housing, Communities and Local Government; the Department of Work and Pensions; the Home Office; the Department for Transport; the Office for National Statistics; Ordnance Survey; the Department for Environment, Food and Rural Affairs; the National Police Chiefs Council; and each of the 39 police forces across England. The project team and MHCLG would like to extend special thanks to Lancashire Constabulary for hosting a research team member for a number of months during the construction of the Crime Domain.

Chapter 1. Introduction

1.1 Introduction

1.1.1 The Ministry of Housing, Communities and Local Government (MHCLG) commissioned Deprivation.org and Oxford Consultants for Social Inclusion (OCSI) to produce the English Indices of Deprivation 2025 (IoD 2025). The project remit was to review, update, enhance and develop the Indices of Deprivation from its previous 2019 release, with particular consideration of recent changes to the policy and data landscapes, such as changes to the benefits system due to the roll out of Universal Credit, the impacts of the pandemic, the current cost-of living pressures, and deprivation in rural areas. This update addresses all lead actions from the Indices Futures: Updating the English Indices of Deprivation consultation (MHCLG, 2022)[1].

1.1.2 From the consultation, it was clear that the user community wished to retain the general model and conceptual framework of multiple deprivation used in the IoD 2019. However, there was an appetite to fundamentally review the underlying indicators, drawing on the latest developments in data and policy to ensure that the best available small area measures were incorporated into the Indices.

1.1.3 Consequently, there have been notable enhancements to the basket of indicators and methodology used to construct the IoD 2025. However, the overall domain structure and conceptual framework have remained unchanged.

1.2 Overview of the Indices of Deprivation 2025

1.2.1 The Indices of Deprivation 2025 provide a set of relative measures of deprivation for small areas (Lower-layer Super Output Areas) across England, based on seven different domains of deprivation:

- Income Deprivation
- Employment Deprivation
- Education, Skills and Training Deprivation
- Health Deprivation and Disability
- Crime
- Barriers to Housing and Services
- Living Environment Deprivation

1.2.2 Each of these domains is based on a set of indicators. Each indicator is based on data from the most recent time point available on a consistent basis across all neighbourhoods in England.

1.2.3 The Index of Multiple Deprivation 2025 combines information from the seven domains to produce an overall relative measure of deprivation. The domains are combined according to their respective weights as described in Section 2.6. In

[1] Ministry for Housing Communities and Local Government (MHCLG) (2022) Indices Futures: Updating the English Indices of Deprivation (IoD) consultation - https://www.gov.uk/government/consultations/indices-futures-updating-the-english-indices-of-deprivation-iod-consultation/outcome/indices-futures-updating-the-english-indices-of-deprivation-iod-consultation-government-reponse

addition, there are seven domain-level Indices, and two supplementary Indices: The Income Deprivation Affecting Children Index (IDACI) and the Income Deprivation Affecting Older People Index (IDAOPI).

1.2.4 The Index of Multiple Deprivation 2025 (IMD 2025), domain Indices and the supplementary Indices, together with the higher area summaries, are collectively referred to as the Indices of Deprivation 2025 (IoD 2025).

1.2.5 The IoD are designed primarily to be *small-area* measures of relative deprivation. But the Indices are also commonly used to describe relative deprivation for higher-level geographies. To facilitate this, a range of summary measures are available for higher-level geographies: Local Authority Districts and upper tier Local Authorities, Built Up Areas, Local Enterprise Partnerships, Local Resilience Forums and Integrated Care Boards. These summary measures are produced for the overall IMD, each of the seven domains and the supplementary Indices.

1.3 Uses of the Indices

1.3.1 Since their original publication in 2000, the Indices have been used very widely for a variety of purposes, including the following:

General uses

- The Indices are an important tool used by national and local organisations to target resources, develop policy and support decisions about addressing local needs.
- The Indices are frequently used in bids for funding, and are recognised by commissioners as an authoritative, nationally comparable measure of deprivation. This includes bids made by councillors for their neighbourhoods, and from voluntary and community sector groups.
- The Indices are widely used in academic research, not only to inform policy and resource allocation, but also to deepen understanding of social conditions through subsequent qualitative and/or mixed-methods studies. Researchers use the Indices to identify contrasting or changing neighbourhoods for fieldwork, to frame comparisons between areas, and to contextualise lived experiences of disadvantage. They also serve as a reference point for exploring how different groups experience deprivation within the same locality, and for critically examining how official measures align with people's everyday realities. In this way, the Indices provide both a robust statistical foundation and a catalyst for further, place-based social enquiry. The Indices are used in the development of the evidence base for setting a range of local strategies and service planning, including helping to understand current need and service demand.
- They are equally used to inform research and analysis into the challenges and performance of different areas, and to support policy and delivery. For example, understanding the relationship between pupil attainment and neighbourhood deprivation, and analysing local deprivation as a risk factor for behaviours such as smoking.
- The Indices are also used to assess programme reach and impact e.g. to identify whether the most disadvantaged areas are receiving more support

under various programmes than others; and in assessment of the impact of programmes, albeit at the neighbourhood rather than the individual level.

More specific uses

- The Indices are drawn on extensively in administering Local Government support and future service planning.
- The Indices have been used in assessing resources and demand for policing across England by the Home Office.
- The IDACI data is an integral part of both the schools and high need funding formulae administered by the Department for Education. IDACI data is used as a proxy for deprivation in the Schools National Funding Formula (NFF) and in the High Needs National Funding Formula (HNNFF).
- The Indices were, and continue to be, drawn on heavily by the Office for National Statistics (ONS) regarding a range of pandemic related analysis.
- Public Health England (PHE) has used the Indices to produce indicators for the Government's Public Health Outcomes Framework (PHOF) examining recent trends in inequalities in life expectancy and healthy life expectancy between communities. PHE has also used the Indices to illustrate inequalities in many of the other PHOF indicators, and users of the PHOF tool can now examine the relationship of every indicator with deprivation.
- The Indices have been used to identify areas of rural deprivation and were used recently in the Local Government Association (LGA) Health and Wellbeing in Rural Areas publication[2]. This stated that pockets of rural deprivation can often be masked by higher level statistics, so the Indices are a particularly valuable tool as they provide information on small geographical areas. The report recommended that rural Local Authority Districts ensure they make the best use of small area level data to identify areas of deprivation.
- The Indices are also a primary source of data in the LGA's online tool LG Inform[3] which enables users to create reports, charts and maps for all Local Authority Districts in England.
- A range of other specific uses and user feedback is also noted in the 2022 Indices Futures: Updating the English Indices of Deprivation user consultation[4].

1.4 About this Research Report

1.4.1 This report outlines the main results from the IoD 2025, including the overall IMD 2025, and provides examples and guidance on how to use and interpret the data sets. This presents a fuller and more detailed account than is presented in the MHCLG Statistical Release, and is aimed at specialist users and analysts,

[2] https://www.local.gov.uk/publications/health-and-wellbeing-rural-areas
[3] https://lginform.local.gov.uk/
[4] Ministry for Housing Communities and Local Government (MHCLG) (2022) Indices Futures: Updating the English Indices of Deprivation (IoD) consultation - https://www.gov.uk/government/consultations/indices-futures-updating-the-english-indices-of-deprivation-iod-consultation/outcome/indices-futures-updating-the-english-indices-of-deprivation-iod-consultation-government-reponse

particularly those with an interest in specific domains of deprivation or the full range of summary statistics available for higher-level geographies.

1.4.2 There is a summary of points to consider in using and interpreting the Indices in the MHCLG Statistical Release (under 'Changes' and Technical Notes' sections) and in the MHCLG Frequently Asked Questions (FAQ) guidance documentation which is aimed at both specialist and non-specialist users of the Index of Multiple Deprivation.

1.4.3 The accompanying IoD 2025 Technical Report presents the conceptual framework of the new IoD 2025; the methodology for creating the domains and the overall IMD; the quality assurance carried out to ensure reliability of the data outputs; and the component indicators and domains[5].

1.4.4 All project outputs are available to download from www.gov.uk/government/statistics/english-indices-of-deprivation-2025.

[5] Ministry of Housing, Communities and Local Government (2025). The Indices of Deprivation 2025. Technical Report.

Chapter 2. Summary of the Indices of Deprivation 2025

2.1 Measuring deprivation at the small area level

2.1.1 The English Indices of Deprivation 2025 (IoD 2025) are relative measures of multiple deprivation at the small area level. The model of multiple deprivation which underpins the Indices is based on the idea of distinct dimensions of deprivation which can be recognised and measured separately[6]. Since these deprivations are experienced by individuals living in an area, an area-level measure of deprivation for each of the dimensions (or domains) can be produced if suitable data exists.

2.1.2 The aim of the IoD 2025, and specifically the Index of Multiple Deprivation 2025 (IMD 2025), is to provide a robust and consistent measure of deprivation at small area level across England.

2.1.3 The overall IMD 2025 is the official measure of deprivation in England. The IMD 2025 is a measure of multiple deprivation based on combining together seven distinct domains of deprivation, which are described further in Section 2.5 below:

- Income Deprivation
- Employment Deprivation
- Education, Skills and Training Deprivation
- Health Deprivation and Disability
- Crime
- Barriers to Housing and Services
- Living Environment Deprivation.

2.1.4 The IMD, and each of the domains, can be used to rank every small area in England according to the deprivation experienced by the people living there.

2.1.5 Data has been published for the overall IMD and each of the domains. Chapter 3 describes in detail what has been published and how to use and interpret the data. Chapters 4 and 5 present analyses of the data.

2.1.6 The sections below outline the methods and indicators used to construct the data sets.

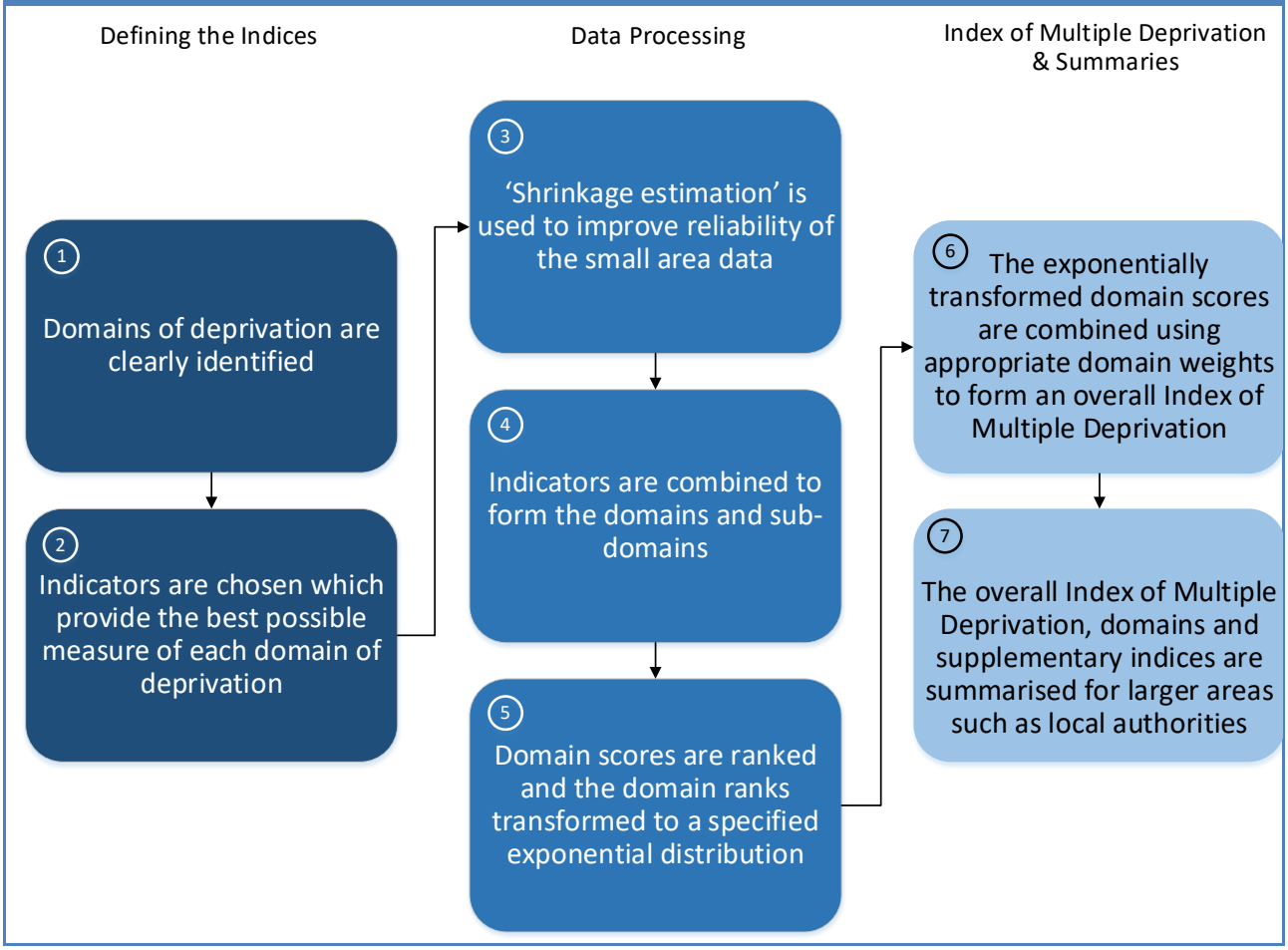
2.2 Constructing the Indices of Deprivation 2025

2.2.1 The construction of the IMD 2025 and IoD 2025 broadly consists of seven stages, see Figure 2.1. The accompanying Technical Report gives further details under each of these stages[7].

[6] Previous versions of the Indices of Deprivation followed the same framework and methodology for measuring multiple deprivation, including the Indices of Deprivation 2019, 2015, 2010, 2007, 2004 and 2000. See Noble et al. (2019), Smith et al. (2015) McLennan et al. (2011); Noble et al. (2008); Noble et al. (2004) and Noble et al (2000).

[7] Ministry of Housing, Communities and Local Government (2025). The Indices of Deprivation 2025. Technical Report.

Figure 2.1. Overview of the methodology used to construct the Indices of Deprivation 2025



2.3 Data time point

2.3.1 As far as is possible, each indicator was based on data from the most recent time point available. Using the latest available data in this way means that there is not a single consistent time point for all indicators. An itemised list can be found in Appendix A of the Technical Report.

2.3.2 As with previous Indices, the IoD 2025 uses Census data only when alternative data from administrative sources is not available. Two such indicators were derived from the 2021 Census: adult skill levels and English language proficiency in the Education, Skills and Training Deprivation Domain and household overcrowding in the Barriers to Housing and Services Domain.

2.3.3 All indicators are constructed using the best available data available at the time of production[8].

[8] Note, the data needs to be available on a nationally consistent basis, where more recent data is published for some areas, but not across England as a whole it cannot be included

2.4 Geography and spatial scale

2.4.1 The IoD 2025 have been produced at Lower-layer Super Output Area (LSOA) level, using the current (2021) LSOAs[9]. Scores and ranks have been provided at LSOA level.

2.4.2 A range of summary measures are available for higher-level geographies including Local Authority Districts and upper tier Local Authorities, Built up Areas, Local Enterprise Partnerships, Local Resilience Forums, and Integrated Care Boards. These summary measures are produced for the overall IMD, each of the seven domains and the supplementary indices.

2.4.3 Guidance is provided (Appendix A) on how to aggregate the Indices to other geographies or bespoke local areas.

2.5 The domains and indicators

2.5.1 Seven domains of deprivation are combined to produce the overall IMD, and each domain contains a number of component indicators. The criteria for inclusion of these indicators are that they should be 'domain specific' and appropriate for the purpose of measuring major features of that deprivation; up-to-date; capable of being updated on a regular basis; statistically robust; and available for the whole of England at a small area level in a consistent form.

2.5.2 The Technical Report which accompanies this Research Report provides further details about the purpose of each domain, the indicators and denominators used and how the indicators are combined into the domains[10].

Income Deprivation Domain

2.5.3 The Income Deprivation Domain measures the proportion of the population in an area experiencing deprivation relating to low income. In line with Peter Townsend's conceptualisation of deprivation as being related to people's unmet needs (e.g. lack of socially perceived necessities)[11], the Income Deprivation Domain is arguably a proxy for people's experience of material deprivation due to having low income.

2.5.4 The definition of income deprivation used here includes people who are dependent upon the state for some form of means-tested benefit, and includes both those people that are out-of-work, and those that are in work but who have low earnings and are claiming a means tested benefit:

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[9] Lower-layer Super Output Areas are homogenous small areas of relatively even size, which were originally designed in 2001 to contain approximately 1,500 people. The Indices of Deprivation 2004 and 2007 used the 2001 LSOA geography, while the Indices of Deprivation 2015 and 2019 used the 2011 Lower-layer Super Output Area geography. The Office for National Statistics has since produced an updated version of the Lower-layer Super Output Area geography using population data from the 2021 Census. The changes made between the 2011 and 2021 versions were minimal: the boundaries of approximately 6% of the 2011 Lower-layer Super Output Areas were modified.

[10] Ministry of Housing, Communities and Local Government (2025). The Indices of Deprivation 2025. Technical Report https://www.gov.uk/government/publications/english-indices-of-deprivation-2025-technical-report.

[11] Townsend, P. (1979) Poverty in the United Kingdom, London: Penguin Books

- Adults and children in Income Support benefit units.
- Adults and children in income-based Jobseeker's Allowance benefit units.
- Adults and children in income-based Employment and Support Allowance benefit units.
- Adults and children in Pension Credit (Guarantee) benefit units.
- Adults and children in Universal Credit benefit units 'out of work' [12] conditionality categories:
    - No work requirements
    - Planning for Work
    - Preparing for work
    - Searching for work
- Adults and children in Universal Credit 'in-work' conditionality groups with monthly equivalised income below 70% of the national median (after housing costs):
    - Working with requirements
    - Working – no requirements
- Adults and children in Housing Benefit claimant benefit units with monthly equivalised income below 70% of the national median (after housing costs).
- Adults and Children in Tax Credit benefit units with monthly equivalised income below 70% of the national median (after housing costs).
- Asylum seeker adults and children in dispersed accommodation receipt of support[13]

2.5.5 In addition, an Income Deprivation Affecting Children Index (IDACI) and an Income Deprivation Affecting Older People Index (IDAOPI) were created, respectively representing the proportion of children aged 0-15 years old, and people aged 60 and over, living in income deprived households.

Employment Deprivation Domain

2.5.6 The Employment Deprivation Domain measures the proportion of the 'working age' population[14] in an area that are involuntarily excluded from the labour market. This includes people who would like to work but are unable to do so due to unemployment, sickness or disability, or caring responsibilities. A combined count of employment deprived individuals per LSOA is calculated by summing the number of working age claimants of the following six non-overlapping indicators:

- Claimants of Jobseeker's Allowance (both contribution-based and income-based)
- Claimants of Employment and Support Allowance (both contribution-based and income-based)
- Claimants of Incapacity Benefit
- Claimants of Severe Disablement Allowance
- Claimants of Carer's Allowance
- Claimants of New Style Jobseeker's Allowance

[12] Note that DWP stipulated which UC conditionality groups should be regarded as 'out of work' and 'in work'.
[13] Note that we exclude Home Office-support asylum seekers who are living in 'temporary accommodation' and only include those who have been 'dispersed'.
[14] Working age is defined here as between the ages of 18 and 66, inclusive.

- Claimants of New Style Employment and Support Allowance
- Claimants of Income Support
- Claimants of Universal Credit in 'no work requirements' conditionality group
- Claimants of Universal Credit in 'searching for work' conditionality group
- Claimants of Universal Credit in 'planning for work' conditionality group
- Claimants of Universal Credit in 'preparing for work' conditionality group

Education, Skills and Training Deprivation Domain

2.5.7 The Education, Skills and Training Domain measures the lack of attainment and skills in the local population. The indicators fall into two sub-domains: one relating to children and young people and one relating to adult skills. These two sub-domains are designed to reflect the 'flow' and 'stock' of educational disadvantage within an area respectively. That is, the 'children and young people' sub-domain measures the attainment of qualifications and associated measures ('flow'), while the 'skills' sub-domain measures the lack of qualifications in the resident working age adult population ('stock').

Children and Young People sub-domain

- Key Stage 2 attainment: The scaled score of pupils taking Mathematics, English reading and English grammar, punctuation and spelling Key Stage 2 exams
- Key Stage 4 attainment: The average capped points score of pupils taking Key Stage 4 (GCSE or equivalent) exams
- Entry to higher education: A measure of young people aged under 21 not entering higher education
- Pupil absence: The proportion of authorised and unauthorised absences for pupils attending maintained Primary, Secondary and Special Schools
- Persistent pupil absence: The proportion of pupils missing 10% or more of possible school sessions

Adult Skills sub-domain

2.5.8 The Adult Skills sub-domain is a non-overlapping count of two indicators:

- Adult skills: The proportion of adults aged 25 to 66 with no or low qualifications[15], or, who cannot speak English or cannot speak English well

Health Deprivation and Disability Domain

2.5.9 The Health Deprivation and Disability Domain measures the risk of premature death and the impairment of quality of life through poor physical or mental health. The domain measures morbidity, disability and premature mortality, but not aspects of behaviour or environment that may be predictive of future health deprivation.

[15] Low qualifications refer to qualifications of level 1 or below. Level 1 qualifications are: first certificate, GCSE - grades 3, 2, 1 or grades D, E, F, G, level 1 award, level 1 certificate, level 1 diploma, level 1 ESOL, level 1 essential skills, level 1 functional skills, level 1 national vocational qualification (NVQ) or music grades 1, 2 and 3

- Comparative Illness and Disability Ratio: an age and sex standardised ratio of people receiving Disability Living Allowance (DLA), Employment and Support Allowance (ESA), Attendance Allowance (AA), Industrial Injuries Disablement Benefit/ Reduced Earnings Allowance/ Retirement Allowance, Incapacity Benefit (IB), Severe Disablement Allowance (SDA), Personal Independence Payment (PIP) and Universal Credit (UC) Health Caseload
- Years of Potential Life Lost: an age and sex standardised rate of 'premature death', defined as death before the age of 75 from any cause
- Acute Morbidity: an age and sex standardised rate of hospital spells starting with an admission in an emergency and lasting more than one calendar day
- Mental health sub-component 1: Suicide: a rate of deaths coded as intentional
- Mental health sub-component 2: Hospital admissions: a rate of hospital admissions related to mental health
- Mental health sub-component 3: Prescribing data: a rate of patients prescribed pharmaceuticals for mental ill-health
- Mental health sub-component 4: Health benefits: the number of residents claiming Personal Independence Payments (PIP) and Disability Living Allowance (DLA) in disease groupings associated with mental health or behavioural disorders as a proportion of the total population aged 0-66.

Crime Domain

2.5.10 Crime is an important feature of deprivation that has major effects on individuals and communities. The Crime Domain measures the risk of personal and material victimisation at local level using eight indicators;

- Violence with injury, rate per 1,000 at risk population
- Violence without injury, rate per 1,000 at risk population
- Stalking and harassment, rate per 1,000 at risk population
- Burglary, rate per 1,000 at risk properties
- Theft, rate per 1,000 at risk population
- Criminal damage, rate per 1,000 at risk population
- Public order and possession of weapons, rate per 1,000 at risk population
- Anti-social behaviour, rate per 1,000 at risk population.

Barriers to Housing and Services Domain

2.5.11 The Barriers to Housing and Services Domain measures the physical and financial accessibility of housing and local services. The indicators fall into two sub-domains: 'geographical barriers', which relates to the geographical (in)accessibility of key local services and amenities; and 'wider barriers' which relates to broader issues of accessibility, such to access to affordable housing and other important services.

Geographical Barriers sub-domain

- Connectivity Score: Travel time to retail, education, health, employment and leisure/entertainment destinations by walking, cycling and public transport.

Wider Barriers sub-domain

- Housing affordability: Difficulty of access to owner-occupation or the private rental market, expressed as the inability to afford to enter owner-occupation or the private rental market.
- Household overcrowding: The proportion of households judged to have insufficient space to meet the household's needs.
- Statutory Homelessness: A Local Authority District level indicator expressed as the rate of acceptances for housing assistance under the homelessness provisions of housing legislation[16]
- Core Homelessness: A Local Authority District level indicator capturing households experiencing the most extreme and immediate forms of homelessness
- Broadband speed: Average broadband upload and download line speed (Mbit/s)
- Patient-to-GP ratio: Patient to GP ratio by GP surgery, allocated to LSOA level based on patient residence distributions

Living Environment Deprivation Domain

2.5.12 The Living Environment Deprivation Domain measures the quality of the local environment. The indicators fall into two sub-domains. The 'indoors' living environment measures the quality of the home environment; while the 'outdoors' living environment measures quality outside the home in the local neighbourhood.

Indoors sub-domain

- Housing in poor condition: The proportion of social and private homes that fail to meet three components of the Decent Homes standard.
- Housing Energy Performance Score: A measure reflecting housing quality derived from the Energy Performance Certificate (EPC) data collated by MHCLG.
- Housing lacking private outdoor space: A measuring reflecting the presence of private outdoor space, derived from data provided by Ordnance Survey (OS) and the Office for National Statistics (ONS).

Outdoors sub-domain

- Air quality: A measure of air quality based on emissions rates for four pollutants.
- Road traffic accidents: a severity-weighted indicator reflecting the risk of casualties involving injury to pedestrians or cyclists.
- Noise pollution: The percentage of the population exposed to noise pollution greater than or equal to 55dB.[17]

2.6 Combining the domains

2.6.1 Each domain was constructed separately, from the respective component indicators, and each LSOA was assigned a domain score representing the

[16] Homelessness is defined as applications made to local housing authorities under the homelessness provisions of housing legislation where a decision was made, and the applicant was found to be eligible for assistance (acceptances). It therefore excludes any households found to be ineligible.

[17] This indicator uses the Lden approach, which takes a weighted average of noise pollution measurements throughout the day, evening and night.

combination of these indicators. Each area was then ranked according to this domain score.

2.6.2 The domain ranks were then transformed to an exponential distribution before combining into the overall IMD[18]. Table 2.1 sets out the weights used to combine the domains, which are the same as in the Indices of Deprivation 2019 (IoD 2019)[19].

Table 2.1. Domain weights used to construct the Index of Multiple Deprivation 2025

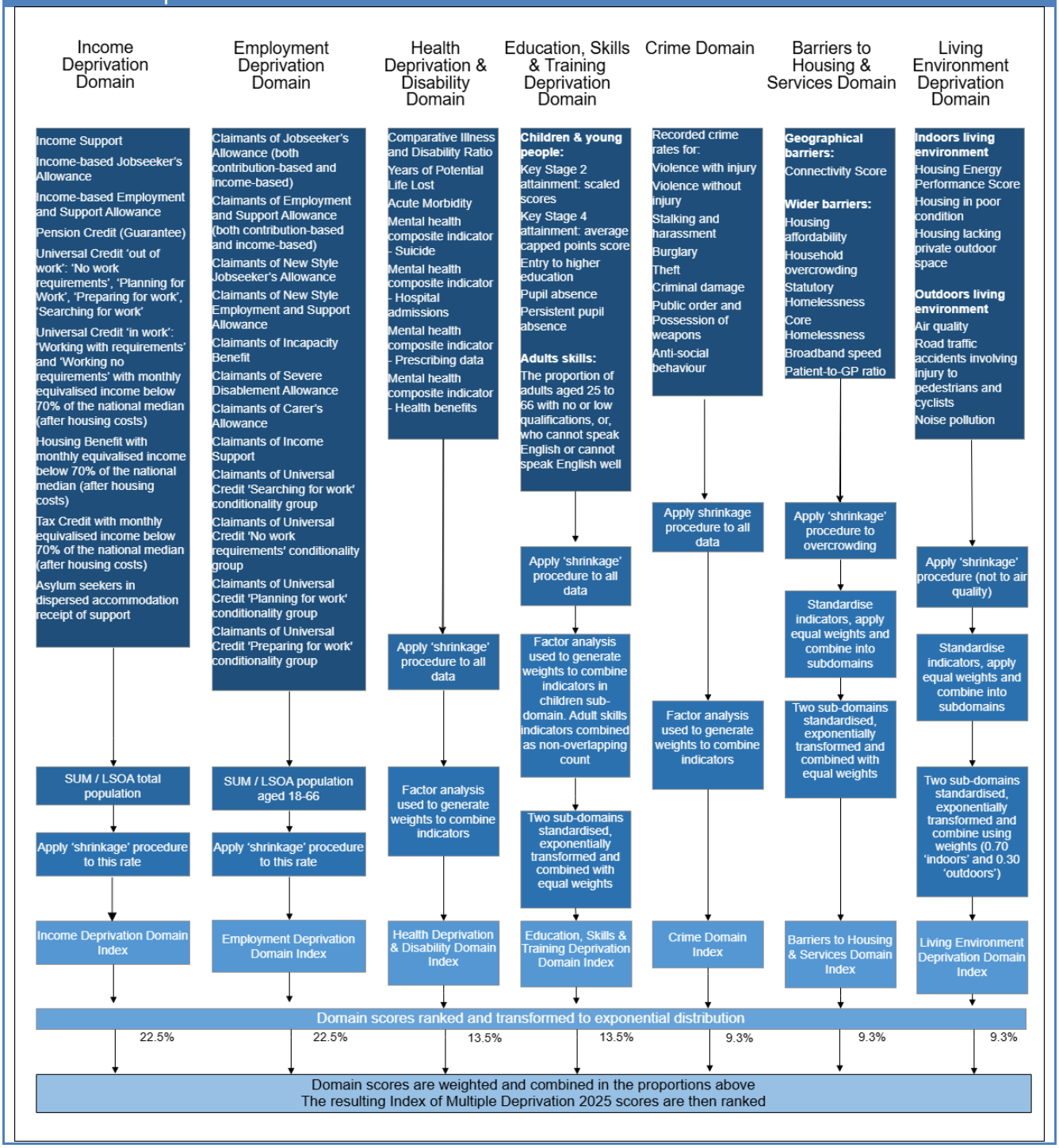
Domain	Domain weight (%)
Income Deprivation Domain	22.5
Employment Deprivation Domain	22.5
Health Deprivation and Disability Domain	13.5
Education, Skills and Training Deprivation Domain	13.5
Barriers to Housing and Services Domain	9.3
Crime Domain	9.3
Living Environment Deprivation Domain	9.3

2.7 Summary of the domains, indicators and methods used to construct the Indices of Deprivation 2025

2.7.1 Figure 2.2 on the following page summarises the domains, indicators and methods used to construct the IoD 2025.

[18] The accompanying Technical Report provides more detail on how the Indices of Deprivation are constructed, with information on the statistical methods that have been used, including how the weights were derived (see Chapter 3).
[19] Appendix B describes how users can combine the domains together using different weights for analytical purposes.

Figure 2.2. Summary of the domains, indicators and statistical methods used to create the Indices of Deprivation 2025



Chapter 3. Using and interpreting the Indices of Deprivation 2025 data

3.1 The data that has been published

3.1.1 The Indices of Deprivation 2025 (IoD 2025) have been produced at Lower-layer Super Output Area (LSOA) level, which may be thought of as a 'neighbourhood level', using the current (2021) version of the LSOA geography[20]. Ranks, deciles and scores have been published at neighbourhood level for:

- the Index of Multiple Deprivation (IMD) 2025;
- the seven domains, which are combined to make the overall IMD; and where relevant, the sub-domains that comprise the domains; and
- the two supplementary Indices: the Income Deprivation Affecting Children Index (IDACI) and the Income Deprivation Affecting Older People Index (IDAOPI).

These are collectively referred to as the neighbourhood-level Indices in this chapter.

3.1.2 Summary measures for the IMD, domains and supplementary Indices have been produced for the following higher-level geographies: Local Authority Districts, upper-tier Local Authorities, Built up Areas, Local Enterprise Partnerships, Local Resilience Forums, and Integrated Care Boards. These summary measures are described in Section 3.3 below.

3.1.3 The IMD 2025, domain Indices and the supplementary Indices, together with the higher-level geography summaries, are collectively referred to as the IoD 2025.

3.1.4 Appendix F lists the data sets that have been published for LSOAs and higher-level geographies. These data sets are available from www.gov.uk/government/statistics/english-indices-of-deprivation-2025.

3.2 Interpreting the neighbourhood-level data

Ranks, deciles and scores

3.2.1 The 33,755 LSOAs in England are ranked according to their deprivation score. For each of the neighbourhood-level Indices, the most deprived LSOA in England is given a rank of 1, and the least deprived a rank of 33,755.

3.2.2 The deciles are produced by ranking the 33,755 LSOAs and dividing them into 10 equal-sized groups. Decile 1 represents the most deprived 10 per cent of areas

[20] Lower-layer Super Output Areas are homogenous small areas of relatively even size, which were initially designed in 2001 to contain approximately 1,500 people. Since 2001, the LSOA boundaries have been modified in 2011 and 2021, and the population sizes of LSOAs have typically increased slightly to reflect the overall national population increase over those 20 years. The Indices of Deprivation 2015 and 2019 used the 2011 Lower-layer Super Output Area geography. The Office for National Statistics has since produced an updated version of the Lower-layer Super Output Area geography using population data from the 2021 Census. The changes made between the 2011 and 2021 versions were minimal: the boundaries of approximately 6% of the 2011 Lower-layer Super Output Areas were modified.

nationally and decile 10 represents the least deprived 10 per cent of areas nationally.

3.2.3 The ranks and deciles can straightforwardly be interpreted as showing broadly whether a LSOA is more deprived than any other such area in the country. The ranks (and deciles) are relative: they show that one area is more deprived than another but not by how much. For example, if an area has a rank of 1,000, it is not half as deprived as a place with a rank of 500.

3.2.4 The ranks and deciles are based on scores: the larger the score, the more deprived the area. In the case of the Income and Employment Deprivation Domains and the supplementary Indices, the scores are meaningful and relate to a proportion of the relevant population experiencing that type of deprivation (see relevant sections below for details). This means that in addition to the ranks which show *relative* deprivation, the scores for these domains (and supplementary Indices) can be used to compare areas on an absolute scale (although this does not necessarily mean that they can be used to identify 'real' change over time, as discussed in paragraph 3.4.8).

3.2.5 The scores for the IMD and the remaining five domains are less easy to interpret, as they do not relate straightforwardly to the proportion of the population experiencing deprivation. For example, an area with a score of 60 on the IMD is not simply twice as deprived as an area with a score of 30. It is recommended that ranks and deciles, but not scores, are used in the case of the IMD and these domains.

3.2.6 The purpose of the IoD is to measure as accurately as possible the relative distribution of deprivation at a small area level at a snapshot in time, but this sometimes comes at the expense of 'backwards' comparability. When exploring changes in deprivation between the IoD 2025 and previous versions of the Indices, users should be aware that changes can only be described in relative terms, for example, the extent to which an area has changed rank or decile of deprivation. However, it is important to caveat that when interpreting relative change, this should be considered in the context of the changes to the methodology, geography and component indicators that have occurred between different versions of the Indices, particularly between the IoD 2019 and the IoD 2025– see Section 3.4 Interpreting change over time for more details.

3.2.7 Section 3.4 provides guidance on how users can make certain comparisons over time and also sets out suggestions for how users might explore whether any changes seen in the IoD data can be attributed to real change over time.

Points to consider when using the data

3.2.8 The neighbourhood-level Indices provide a description of areas; but this description does not apply to every person living in those areas. Many non-deprived people live in highly deprived areas, and many deprived people live in the least deprived areas.

3.2.9 Those areas that are not identified as relatively deprived by the neighbourhood-level Indices are not necessarily *affluent* areas. It may be the case that some areas with a high proportion of people experiencing deprivation also contain a relatively high proportion of people who have high levels of income or wealth (i.e. where there is high inequality between residents living in the same area). The Indices do

not capture or compare relative levels of wealth or affluence, so a lower ranked area could be described as being less deprived, but cannot be described as being more affluent or richer. Similarly, the least deprived area in the country should not be described as the most affluent or richest. For example, the measure of income deprivation is concerned with people on low incomes who are in receipt of benefits and have an income below 70% of the median after housing costs. An area with a relatively small proportion of people (or indeed no people) on low incomes may also have relatively few or no people on high incomes. Such an area may be ranked among the least deprived in the country, but it is not necessarily among the most affluent. By contrast, an area with a relatively large proportion of people on low incomes may also contain a relatively large proportion of people with very high incomes (the presence of high earners in this area would not affect the overall income domain score, which only takes into account the income of those who fall below the threshold to be considered income deprived).

3.2.10 In addition, the IoD methodology is designed to reliably distinguish between areas at the most deprived end of the distribution, but not at the least deprived end. Differences between less deprived areas in the country are therefore less well defined than those between areas at the more deprived end of the distribution.

The IMD 2025

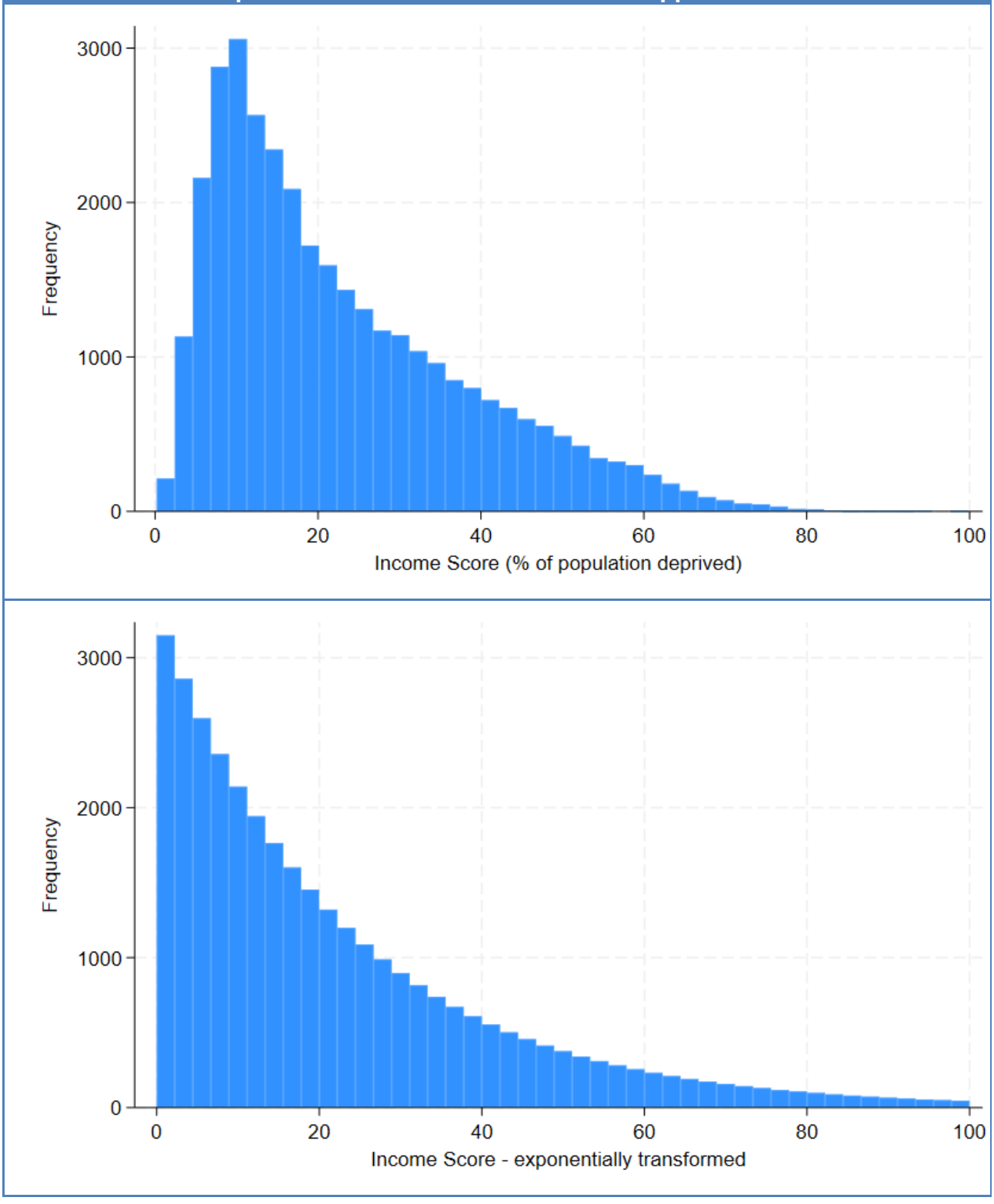
3.2.11 The overall IMD 2025 describes each LSOA by combining information from all seven domains: Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education Skills and Training Deprivation, Barriers to Housing and Services, Living Environment Deprivation, and Crime.

3.2.12 As outlined in Chapter 2, the domains were combined in two stages. First, each domain score was standardised by ranking and then transformed to an exponential distribution. Then the domains were combined using the explicit domain weights chosen. The overall LSOA level IMD score was then ranked and split into deciles.

3.2.13 As indicated in paragraph 3.2.5 above, it is recommended that the IMD ranks and deciles are used, rather than the score. The score, being the combined sum of the weighted, exponentially transformed domain rank of the domain scores, is less easy to interpret in its own right. The exponential transformation stretches out the deprived end of the distribution. This transformation enhances variation among the most deprived 10% of areas, providing finer detail about areas where deprivation is most acute.

3.2.14 Figure 3.1 illustrates the effect of the exponential distribution using the Income Deprivation Domain as an example. The first figure shows the distribution of the Income Deprivation scores, in other words the percentage of income-deprived people in each area. The second figure shows the exponentially transformed domain ranks, which range from 0 to 100. The 10 per cent most deprived LSOAs (numbering 3,375) have an exponentially transformed value of between 50 and 100. The remaining 90 per cent have an exponentially transformed value of between 0 and 50.

Figure 3.1. Distribution of Indices of Deprivation 2025 Income Deprivation Domain, before and after exponential transformation has been applied



The domains and sub-domains

3.2.15 Each of the seven domain scores, and six sub-domain scores, describe each type of deprivation in an LSOA. These enable users to focus on particular types of deprivation and to compare across LSOAs.

3.2.16 Larger scores on any of the domains or sub-domains correspond to more deprived areas. The scores for the Income Deprivation Domain and the Employment Deprivation Domain are rates and can be interpreted as the proportion of the relevant population that is 'income deprived' or 'employment deprived' respectively. For example, if a LSOA scores 0.38 in the Income Deprivation Domain, this means that 38 per cent of the population is income deprived in that area.

3.2.17 As indicated in paragraph 3.2.5 above, for the remaining five domains it is recommended that ranks and deciles are used rather than the score, as the scores are less easy to interpret. Further, these domains have different minimum and maximum values and ranges and cannot be directly compared. The scores reflect the statistical methods used to derive them (as described in Chapter 2 and the Technical Report) e.g. while the Income and Employment Deprivation Domain scores are proportions of the population, the other domains are constructed by combining multiple indicators, which have been standardised by ranking and transforming to a normal distribution, therefore these scores are less straightforward to interpret and absolute score values cannot be compared across the different domains.

3.2.18 Because of the way the domain scores have been constructed, it is possible for the Health Deprivation and Disability Domain and Crime Domain scores to have both positive and negative values. In these domains, a larger positive score indicates higher levels of deprivation, while a larger negative score indicates lower levels of deprivation. To understand how the domain scores can be both positive and negative, it is necessary to understand how the domain scores are constructed. As indicated in paragraph 3.2.17 above, the domain scores are constructed by combining multiple component indicators. Before the component indicators can be combined, they must first be standardised to ensure that they are on the same scale. Indicators are standardised by transforming to a normal distribution. This standardisation process produces both positive and negative scores, because it measures how many standard deviations a data point is from the mean, with the sign of the result simply indicating on which side of the mean the value falls. Because each of the component indicators in a domain can have both positive and negative values, the final domain scores can also have positive and negative values when these indicators are combined.

The Income Deprivation Affecting Children Index (IDACI) and Income Deprivation Affecting Older People Index (IDAOPI)

3.2.19 The IDACI is a subset of the Income Deprivation Domain, with the IDACI showing the proportion of children aged 0-15 years old in each LSOA that live in families that are income deprived.

3.2.20 The IDAOPI is similarly a subset of the Income Deprivation Domain, with the score showing the proportion of a LSOA's population aged 60 and over who are income deprived.

3.2.21 As with the Income and Employment Deprivation Domain scores, the IDACI and IDAOPI scores are rates, so can be interpreted as the proportion of the relevant population that is 'income deprived'. For example, a score of 0.24 on the IDACI would mean that 24 per cent of children aged 0-15 years old in the area live in income-deprived families.

3.3 Interpreting the higher-level geography summaries

3.3.1 The neighbourhood-level Indices data described above provide a description of deprivation levels across each of the LSOAs in England. The summary measures described in this section help users identify and understand the patterns of deprivation for larger areas such as Local Authority Districts (LADs).

3.3.2 The pattern of deprivation across large areas can be complex. In some areas, deprivation is concentrated in pockets, rather than evenly spread throughout. In some other areas the opposite picture is seen, with deprivation spread relatively evenly throughout the area, and with no highly deprived areas.

3.3.3 Higher-level areas such as LADs or upper tier Local Authorities can also vary enormously in terms of geographical area and population size[21]. Accordingly, the volume of deprivation, for example how many people are experiencing income or employment deprivation, can also be taken into account, as well as the intensity of deprivation.

3.3.4 The set of summary measures have been carefully designed to help users understand deprivation patterns for a set of higher-level areas. The measures identify the overall intensity of deprivation, how deprivation is distributed across the larger area, and the overall volume, or 'scale', of deprivation:

- The **average rank** and **average score** summaries identify the average level of deprivation in the larger area, taking into account all LSOAs in the area;
- The **proportion** of LSOAs in the most deprived 10 per cent nationally and the **extent** measure are summaries of the degree to which the higher-level area is highly deprived. These two summary measures respectively identify the proportion of the LSOAs that are in the most deprived 10 per cent of areas nationally, and a weighted-sum of the population living in the most deprived 30 per cent of areas nationally;
- The **local concentration** summary identifies those higher-level areas with extreme levels of deprivation, by comparing the most deprived LSOAs in the higher-level area against those in other areas across the country;
- The **income scale** and **employment scale** summaries identify the volume of deprivation in the larger area according to the absolute number of people who are, respectively, income deprived, or employment deprived. As with the average rank and score, these summaries are based on all LSOAs in the larger area.

3.3.5 No single summary measure is the 'best' measure. Each highlights different aspects of deprivation, and each lead to a different ranking of areas. Comparison

[21] Lower-layer Super Output Areas have been designed to cover roughly equal-sized populations, so direct comparisons of deprivation levels are appropriate.

of the different measures is needed to give a fuller understanding of deprivation in a large area. In addition, it is important to remember that the higher-area measures are *summaries*; the LSOA level data provides more detail than is available through the summaries.

3.3.6 The summary measures have been produced for the following higher-level geographies for the IMD, domains and supplementary Indices: LADs and upper tier Local Authorities, Built up Areas, Local Enterprise Partnerships, Local Resilience Forums, and Integrated Care Boards [22]. As with the LSOA data, both ranks and scores are produced, with higher scores corresponding to higher levels of deprivation[23], and areas ranked so that a rank of 1 identifies the most deprived higher-level area on that particular measure[24].

Average rank

3.3.7 The average rank measure summarises the average level of deprivation across the higher-level area, based on the ranks of the LSOAs in the area.

3.3.8 As all LSOAs in the higher-level area are used to create the average rank, this gives a measure of the whole area covering both more-deprived and less-deprived areas. The measure is population-weighted, to take account of the fact that LSOA population sizes can vary.

3.3.9 The nature of this measure – using all areas and using ranks rather than scores – means that a highly polarised LAD or other higher-level area would not tend to score highly, because extremely deprived and less deprived LSOAs will 'average out'. Conversely, a higher-level area that is more uniformly deprived will tend to score highly on this measure.

3.3.10 Note that for the construction of this higher-level summary measure, LSOAs are ranked in ascending order of deprivation, from least deprived (rank 1) to most deprived (rank 33,755). These LSOA ranks are then used to calculate the average rank score for the higher level area, with larger scores representing more deprived areas on this measure.

Average score

3.3.11 The average score measure summarises the average level of deprivation across the higher-level area, based on the scores of the LSOAs in the area.

3.3.12 As all LSOAs in the higher-level area are used to create the average score, this gives a measure of the whole area covering both deprived and less-deprived

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[22] Appendix A describes how users can aggregate the Lower-layer Super Output Area data to different geographies such as wards.

[23] In order that higher scores can consistently be interpreted as corresponding to higher levels of deprivation, those summary measures that are based on Lower-layer Super Output Area *ranks* (the average rank and local concentration summary measures) use a reversed ranking - where 33,755 rather than 1 corresponds to the most deprived area - in the calculation of the summary measure score.

[24] The ranks were constructed separately for each higher-level geography and are therefore not directly comparable between the different geographies. For example, an area ranked 20th of the Clinical Commissioning Groups is not necessarily more deprived than an area ranked 25th of the LADs. To compare between the different types of areas, the summary scores should be used rather than ranks.

areas. The measure is population-weighted, to take account of the fact that LSOA population sizes can vary within a certain threshold.

3.3.13 The main difference with the average rank measure described above is that more deprived LSOAs tend to have more 'extreme' scores than ranks. So highly deprived areas will not tend to average out to the same extent as when using ranks; highly polarised areas will therefore tend to score higher on the average score measure than on the average rank. This distinction between the average score and average rank applies most clearly to the overall IMD, which follows an approximately exponential distribution due to the weighted combination of exponentially transformed domain scores. For the individual domains however, this relationship is less consistent. It broadly holds for the Income and Employment Deprivation Domains, which naturally display exponential-type distributions, and to some extent for Education and Living Environment, where the underlying sub-domains are also exponentially scaled. In contrast, it is less applicable to the Health and Crime Domains, which are derived from normally distributed indicators, and to Barriers to Housing and Services, where the two exponentially transformed sub-domains tend to counterbalance one another due to low levels of correlation.

Proportion of LSOAs in the most deprived 10 per cent nationally

3.3.14 By contrast to the average rank and average score measures, which are based on all LSOAs in the higher-level area, this measure focuses only on the most deprived LSOAs. Higher-level areas which have no LSOAs in the most deprived 10 per cent of all such areas in England have a score of zero for this summary measure.

Extent

3.3.15 The extent measure is a summary of the proportion of the local population that live in areas classified as among the most deprived in the country. The extent measure is a more sophisticated version of the proportion of LSOAs in the most deprived 10 per cent nationally measure and is designed to avoid the sharp cut-off seen in that measure, whereby areas ranked only a single place outside the most deprived 10 per cent are not counted at all.

3.3.16 The extent measure is designed to avoid such 'cliff edges', by using a weighted measure of the population in the most deprived 30 per cent of all areas:

- The population living in the most deprived 10 per cent of LSOAs in England receive a 'weight' of 1.0;
- The population living in the most deprived 11 to 30 per cent of LSOAs receive a sliding weight, ranging from 0.95 for those in the eleventh percentile, to 0.05 for those in the thirtieth percentile.

3.3.17 Higher-level areas which have no LSOAs in the most deprived 30 per cent of all areas in England have a score of zero for this summary measure.

Local concentration

3.3.18 The local concentration measure is a summary of how the most deprived LSOAs in the higher-level area compare to those in other higher-level areas across the country. This measures the average rank for the most deprived LSOAs in the

higher-level area that contain exactly 10 per cent of the higher-level area population.

3.3.19 Note that for the construction of this higher-level summary measure, LSOAs are ranked in ascending order of deprivation, from least deprived (rank 1) to most deprived (rank 33,755). These LSOA ranks are then used to calculate the local concentration score for the higher level area, with larger scores representing more deprived areas on this measure.

3.3.20 Similar to the proportion of LSOAs in the most deprived 10 per cent nationally and extent measures, the local concentration measure is based on only the most deprived LSOAs in a higher area, rather than on all areas in the higher area. By contrast to these measures however, the local concentration measure gives additional weight to very highly deprived areas.

3.3.21 An example may help: consider two LADs, the first having one-quarter of its LSOAs ranked in the most deprived *10 per cent* of all areas in England and the second with one-quarter of its LSOAs ranked in the most deprived *1 per cent* of all areas. The two LADs would score identically on the proportion of LSOAs in most deprived 10 per cent nationally and extent of deprivation summary measures, as these do not differentiate between levels of deprivation within the most deprived decile. However, the local concentration score would be much higher for the second area, due to the large proportion of extremely highly deprived areas.

Income scale and employment scale (two measures)

3.3.22 The two scale measures summarise the number of people in the higher-level area who are income deprived (the income scale), or employment deprived (the employment scale).

3.3.23 These measures are designed to give an indication of the absolute number of people experiencing income deprivation and employment deprivation in the local area. For example, if two LADs have the same percentage of income deprived people, the larger LAD will be ranked as more deprived on the income scale measure because more people are experiencing that type of deprivation.

3.3.24 It is important to note that the two scale measures do not only pick up large overall populations, but large *deprived* populations. These measures will therefore identify LADs with large numbers of people experiencing deprivation.

Using the higher-level geography summaries to understand deprivation patterns

3.3.25 The higher-level geography summaries can help users better understand the patterns of deprivation in a local area. As an example, to help illustrate this, consider the two LADs of Torridge and Swale. Both are rural coastal LADs within large counties (Devon and Kent, respectively). Table 3.1 identifies how the two LADs rank on the summary measures.

Table 3.1. Higher-level geography summary measures for two LADs		
Higher-level geography summary measures	Swale LAD (ranks)	Torridge LAD (ranks)
Average rank	59	54
Average score	62	94
Proportion of LSOAs in the most deprived 10 per cent nationally	59	* 193
Extent	81	152
Local concentration	40	160
Income scale	120	261
Employment scale	116	261
On each summary measure, the most deprived LAD in England is ranked 1, and larger ranks correspond to lower levels of deprivation. * LADs with no LSOAs in the most deprived 10 per cent nationally receive a score of zero, and a joint rank of 193, for the proportion of LSOAs in the most deprived 10 per cent nationally summary measure.		

3.3.26 The two LADs are ranked similarly across all LADs when based on the *average rank* of the LSOAs in the LADs (Swale ranked 59th most deprived, and Torridge ranked 54th most deprived). However, they differ on the other summary measures, with Swale ranking notably more deprived than Torridge on each of the other five measures. (Remember that smaller ranks correspond to higher levels of deprivation, with the most deprived area in England being ranked 1.)

- Swale has a higher ranking (i.e. more deprived) on the local concentration measure than it has on the average rank measure.
- Torridge is more deprived on the average rank measure than on the average score measure, proportion of LSOAs in most deprived 10 per cent nationally measure, the local concentration measure and extent measure.
- The higher ranking for Swale than Torridge on the income and employment scale measure shows that Swale has a greater *volume* of income and employment deprivation than Torridge, with a larger absolute number of people who are income deprived, or employment deprived.

3.3.27 Comparison of the summary measures can be used to draw out the differences in deprivation patterns between the two areas. The analysis identifies that the most deprived parts of Swale are characterised by higher levels of deprivation than seen in the most deprived parts of Torridge, picked up in the local concentration measure. However, there are also many less-deprived areas across Swale LAD which act to 'cancel' out these highly deprived areas in the average rank measure. By comparison, there is less variation in deprivation levels across Torridge, with fewer neighbourhoods experiencing particularly high or particularly low levels of deprivation than is seen in Swale. As a consequence, Torridge is measured as less deprived on the average score, extent and local concentration summaries.

3.4 Interpreting change over time

3.4.1 While the IoD 2025 have been produced using the same conceptual framework and domain structure used to create the previous IoD 2019 (and the 2015, 2010, 2007 and 2004 versions), there have been considerable changes to the basket of indicators and certain parts of the methodology used to construct the IoD 2025.

3.4.2 The total number of indicators used to produce the IoD 2025 has increased from 39 to 55, with 20 new indicators introduced into the IoD 2025, while three indicators were removed. A further 14 indicators have been significantly modified, while 21 have been updated to more recent timepoints. There have also been changes to the way shrinkage estimation is applied (see the Technical Report for more details). Population estimates have also been updated. Finally, the unit of geography has changed, with the 2025 Indices constructed from 2021 LSOAs, compared with 2011 LSOAs used in the previous two iterations.

3.4.3 Other changes limit the ability to make comparisons over time:

- Changes to the collection methods used to record administrative data used to construct the indicators, including changes to eligibility criteria for certain benefits;
- Updates to the population denominator data;
- Changes to the area definitions and administrative geographies[25].

3.4.4 As stated earlier, the purpose of the Indices is to measure as accurately as possible the relative distribution of deprivation at a small area level, and that this comes at the expense of 'backwards' comparability with previous versions of the Indices. Given the notable changes observed above, any interpretation of change should take into consideration these differences. Moreover, where comparisons of change over time are made, these should be limited to comparing rankings as determined at the relevant time point by each of the versions – as in a snapshot in time.

3.4.5 This section outlines which types of comparisons over time are valid, and what users should consider when making comparisons over time.

Relative and absolute change

3.4.6 Changes in deprivation levels over time are relative to other areas. When exploring changes in deprivation between the IoD 2025 and previous versions of the Indices, users should be aware, and make clear in analysis, that such changes are relative to other areas and that previous iterations have been modified and updated as noted above.

3.4.7 For example, it would be possible to state (with caveats) that an area showed an increased level of deprivation, relative to other areas, if it was ranked within the most deprived 20 per cent of areas nationally based on the 2019 Indices but ranked within the most deprived 10 per cent according to the 2025 Indices. However, it is important to caveat that some of the observed relative change may be attributable to changes in the underlying component indicators used to measure different facets of deprivation. The IoD 2025 is designed to capture the most robust measure of deprivation at a snapshot in time, rather than provide a strictly consistent measure of deprivation over a prolonged time period. See the *Understanding changes in the Indices over time* section below for details of notable changes to the Indices methodology and component indicators, which need to be

[25] For example, caution should be exercised when comparing ranks on the 2025 Indices with previous updates, since there were 296 LADs at the time on the 2025 Indices compared with 317 for previous update in 2019.

taken into consideration when interpreting relative change. Moreover, it would not necessarily be correct to state that the level of deprivation in the area had increased on some *absolute* scale, as it may be the case that all areas had improved, but that this area had improved more slowly than other areas and so been 'overtaken' by those other areas.

3.4.8 Similarly, the overall rank of an area may not have changed between the 2019 and 2025 Indices, but this does not mean that there have been no changes to the level of deprivation in the area. For example, in the situation where the absolute levels of deprivation in all areas were increasing or decreasing at the same rate, the ranks would show no change.

3.4.9 Equally, when comparing the overall IMD, if improvements in one domain are offset by a decline in another domain, the overall IMD position may be about the same even if significant changes have occurred in these two underlying domains.

3.4.10 As discussed in 3.2.15, on two domains, the Income Deprivation Domain and the Employment Deprivation Domain, and the supplementary Indices, the domain scores are simple proportions of the relevant population experiencing income or employment deprivation, respectively. Nevertheless, these domains and supplementary Indices are not directly comparable with previous versions of the Indices for the reasons outlined in 3.4.2 and 3.4.3.

Understanding changes in the Indices over time

3.4.11 Users should be aware of the following to understand why changes in the IoD data should be interpreted with care.

Changes to the indicators or data used to construct the indicators

3.4.12 While the IoD 2025 have been produced using the same conceptual framework and domain structure used to create the previous IoD 2019 (and the 2015, 2010, 2007 and 2004 versions), there have been notable changes to the basket of indicators and methodology used to construct the IoD 2025. The accompanying Technical Report provides full detail of these changes.

3.4.13 There are 55 indicators in the IoD 2025, an increase from 39 in the IoD 2019. Of these, 20 are new indicators, 14 indicators have been significantly modified, while 21 have been updated to more recent timepoints.

3.4.14 Figure 3.2 summarises the updated, new and modified indicators for each of the domains.

Figure 3.2. Domains and indicators for the Indices of Deprivation 2025

Income Deprivation 22.5%	Adults and children in Income Support benefit units
	Adults and children in income-based Jobseeker's Allowance benefit units
	Adults and children in income-based Employment and Support Allowance benefit units
	Adults and children in Pension Credit (Guarantee) benefit units
	Adults and children in Universal Credit benefit units 'out of work' conditionality categories: '*No work requirements*', '*Planning for Work*', '*Preparing for work*', '*Searching for work*'
	Adults and children in Universal Credit benefit units 'in work' conditionality categories: '*Working with requirements*' and '*Working no requirements*' with monthly equivalised income below 70% of the national median (after housing costs) **
	Adults and children in Housing Benefit claimant benefit units with monthly equivalised income below 70% of the national median (after housing costs) ++
	Adults and Children in Tax Credit claimant benefit units with monthly equivalised income below 70% of the national median (after housing costs) **
	Asylum seeker adults and children in dispersed accommodation receipt of support **
Employment Deprivation 22.5%	Claimants of Jobseeker's Allowance (both contribution-based and income-based)
	Claimants of Employment and Support Allowance (both contribution-based and income-based)
	Claimants of New Style Jobseeker's Allowance ++
	Claimants of New Style Employment and Support Allowance ++
	Claimants of Incapacity Benefit
	Claimants of Severe Disablement Allowance
	Claimants of Carer's Allowance
	Claimants of Income Support ++
	Claimants of Universal Credit '*Searching for work*' conditionality group
	Claimants of Universal Credit '*No work requirements*' conditionality group
	Claimants of Universal Credit '*Planning for work*' conditionality group ++
	Claimants of Universal Credit '*Preparing for work*' conditionality group ++
Education, Skills & Training Deprivation 13.5%	Key Stage 2 attainment: scaled scores
	Key Stage 4 attainment: average capped points score
	Entry to higher education
	Pupil absence **
	Persistent pupil absence ++
	Adult skills: The proportion of adults aged 25 to 66 with no or low qualifications, or, who cannot speak English or cannot speak English well

Health Deprivation & Disability 13.5%	Comparative Illness and Disability Ratio **
	Years of Potential Life Lost
	Acute Morbidity
	Mental health composite indicator - Suicide
	Mental health composite indicator - Hospital admissions **
	Mental health composite indicator - Prescribing data
	Mental health composite indicator - Health benefits ++
Crime 9.3%	Violence with injury ++
	Violence without injury ++
	Stalking and harassment ++
	Burglary **
	Theft **
	Criminal damage **
	Public order and Possession of weapons ++
	Anti-social behaviour ++
Barriers to Housing & Services 9.3%	Geographical Barriers: Connectivity Score ++
	Housing affordability **
	Household overcrowding **
	Statutory Homelessness
	Core Homelessness ++
	Broadband speed ++
	Patient-to-GP ratio ++
Living Environment Deprivation 9.3%	Housing Energy Performance Score ++
	Housing in poor condition **
	Housing lacking private outdoor space ++
	Air quality **
	Road traffic accidents involving injury to pedestrians and cyclists **
	Noise pollution ++

++ New indicators
**** Modified indicators**
% illustrates the weight of each domain in the IMD 2025

The percentages reported in each domain box show the weight that the domain receives in the IMD 2025.

Revisions to the population denominator data used in the IoD 2019

3.4.15 In November 2024, the mid-year population estimates stretching back to 2012 were rebased to align with the figures from Census 2021[26]. These mid-year estimates are an important component of the IoD, and changes to the population estimates can result in changes to deprivation levels.

3.4.16 The earlier IoD 2019 and 2015 used mid-year population estimate data published prior to the 2024 revisions.

Changes to the component population groups used to construct the denominators for the IoD 2025

3.4.17 The Office for National Statistics provided a special bespoke series of small area population estimates for the years 2018 through to 2022 for the purpose of the IoD 2025. The extract included adjustments to the prisoner population due to improve the allocation of prisoners compared to what was available in the latest published Small Area Population Estimates open data.

[26] See https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/bulletins/annualsmallareapopulationestimates/rebasedmid2012tomid2020 for more details

3.4.18 In addition, a notable change to the denominators used in the IoD 2025 was that prisoner populations were included in the denominators for the Income, Employment, Health and Crime Domains – where previously prisoner populations had been excluded. Prisoners have been included where they are identified as at-risk of the many forms of deprivation captured in each of these domains.

Changes to the LAD definitions

3.4.19 The IoD 2025 have been produced using the latest version of LADs, which relate to the 2024 boundaries, while the previous Indices used the 2019 boundaries. The table below shows the changes made to LAD boundaries between 2019 and 2024.

Table 3.1. LADs with changed boundaries between 2019 and 2024

LAD 2019	LAD 2024
Aylesbury Vale	Buckinghamshire
Chiltern	Buckinghamshire
South Bucks	Buckinghamshire
Wycombe	Buckinghamshire
Allerdale	Cumberland
Carlisle	Cumberland
Copeland	Cumberland
Corby	North Northamptonshire
East Northamptonshire	North Northamptonshire
Kettering	North Northamptonshire
Wellingborough	North Northamptonshire
Craven	North Yorkshire
Hambleton	North Yorkshire
Harrogate	North Yorkshire
Richmondshire	North Yorkshire
Ryedale	North Yorkshire
Scarborough	North Yorkshire
Selby	North Yorkshire
Mendip	Somerset
Sedgemoor	Somerset
South Somerset	Somerset
Somerset West and Taunton	Somerset
Daventry	West Northamptonshire
Northampton	West Northamptonshire
South Northamptonshire	West Northamptonshire
Barrow-in-Furness	Westmorland and Furness
Eden	Westmorland and Furness
South Lakeland	Westmorland and Furness

3.4.20 As a result of these changes, the number of LADs has been reduced from 317 to 296[27].

[27] As a result of these changes, the least deprived Local Authority District is now ranked 296.

Considerations in assessing change over time

3.4.21 The changes described above, to geographies, population changes and data indicators, make it difficult to determine real changes in deprivation from the Indices' rankings and scores, such as those arising from social, economic or demographic trends and the impact of specific policies or interventions. Users who wish to explore whether any changes seen in the IoD data can be attributed to real change over time may wish to:

- examine the impact of new or changed indicators in the areas that they are interested in. For example, using the published domain and indicator data to identify those changes that have an impact on the final output scores and ranks;
- examine whether changes observed between the IoD 2025 and the earlier Indices could be, at least in part, due to revisions to the population estimates[28];
- check that changes in deprivation levels between the time-points are not in part caused by changes to the geographies.

3.4.22 Users may also wish to examine trends seen in other data sets. There is an increasing amount of open (i.e. published) data available for users to explore social, economic and demographic trends at local level. Users may want to analyse trends seen in the IoD data in the context of these other data sets to understand what is likely to be driving changes. For example, benefit claimant data published by the Department for Work and Pensions[29] and economic and labour market data published by the Office for National Statistics[30] can be used to understand whether changes to the size of particular groups receiving benefits may be driving changes in the Income Deprivation Domain and Employment Deprivation Domain.

3.4.23 Other local knowledge of the area can be helpful when interpreting changes in the data. For example, knowing the impact of local business growth and job creation schemes would mean that changes in the Employment Deprivation Domain could be more confidently attributed to real change.

3.5 Comparing the English Indices of Deprivation 2025 with Welsh, Scottish and Northern Irish Indices of deprivation

3.5.1 Each of the four nations of the United Kingdom produces its own nation-specific Indices of Deprivation[31]. These different national indices are based on the same broad conceptual concept and the same general methodology, however there are differences in the domains and indicators, the geographies for which the Indices

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[28] Note that the analysis of change in Chapter 5 is based on the published Indices of Deprivation data and has not been adjusted for the revisions to the population estimates.
[29] Statistics published by the Department of Work and Pensions are linked from https://www.gov.uk/government/organisations/department-for-work-pensions/about/statistics.
[30] For example, labour market trends data from the Office for National Statistics is available at http://www.ons.gov.uk/ons/rel/lms/labour-market-statistics/index.html.
[31] Scottish Index of Multiple Deprivation 2016, https://www2.gov.scot/Topics/Statistics/SIMD; Welsh Index of Multiple Deprivation 2014, http://gov.wales/statistics-and-research/welsh-index-multiple-deprivation/?lang=en; Northern Ireland Multiple Deprivation Measure 2017,https://www.nisra.gov.uk/statistics/deprivation/northern-ireland-multiple-deprivation-measure-2017-nimdm2017

are developed and the time points on which they are based. These differences mean that the ranks and scores for the English IoD published here are methodologically distinct from the measures produced in Wales, Scotland and Northern Ireland; as a result, they are discrete measures and should be treated as distinctive from on another.

3.5.2 The Office for National Statistics previously published information explaining in more detail the similarities and differences between the four Indices - https://webarchive.nationalarchives.gov.uk/ukgwa/20141119170512/http:/neighbourhood.statistics.gov.uk/dissemination/Info.do?page=analysisandguidance/analysisarticles/indices-of-deprivation.htm

Chapter 4. The geography of deprivation

4.1 Introduction

4.1.1 This and the following chapter present summary findings from analysis of the Indices of Deprivation (IoD) 2025. Chapter 5 focuses on change over time, while this chapter focuses on the geography of deprivation across England, looking at:

- deprivation at local level, showing the most deprived Lower-layer Super Output Areas (LSOAs) and Local Authority Districts (LADs) according to the Index of Multiple Deprivation (IMD);
- areas that are highly deprived on more than one domain; and
- LAD summary measures, including maps of the set of summary measures.

4.1.2 In this analysis we have described patterns of deprivation using a variety of thresholds appropriate to the analysis conducted. There is no definite threshold above which an area can be described as 'deprived'; the IoD are a continuous scale of deprivation. Users often take the most deprived 10 per cent or 20 per cent of LSOAs (or LADs) as the group of highly deprived areas, however there is no reason that other thresholds could not be used instead.

4.1.3 The maps and charts in this and the following chapter show all areas, grouped into 10 per cent bands. In addition, the most deprived areas are analysed looking at the most deprived 1 per cent, 5 per cent, 10 per cent and 20 per cent of LSOAs. Where LADs are described, we illustrate the analysis by showing the most deprived 10 LADs for the overall IMD. Some of the analysis groups all LSOAs across the country into 10 per cent bands (*deciles*) and 20 per cent bands (*quintiles*), by their deprivation rank. Based on the published data, users can of course extend the analysis in this section to examine any of the areas or issues in more detail.

4.1.4 In addition to the analysis in this chapter, Appendix C presents summary measures for Local Enterprise Partnerships and Integrated Care Boards, and Appendix D presents analysis of the domains and sub-domains, including a list of the most deprived 5 LADs for each of the domains.

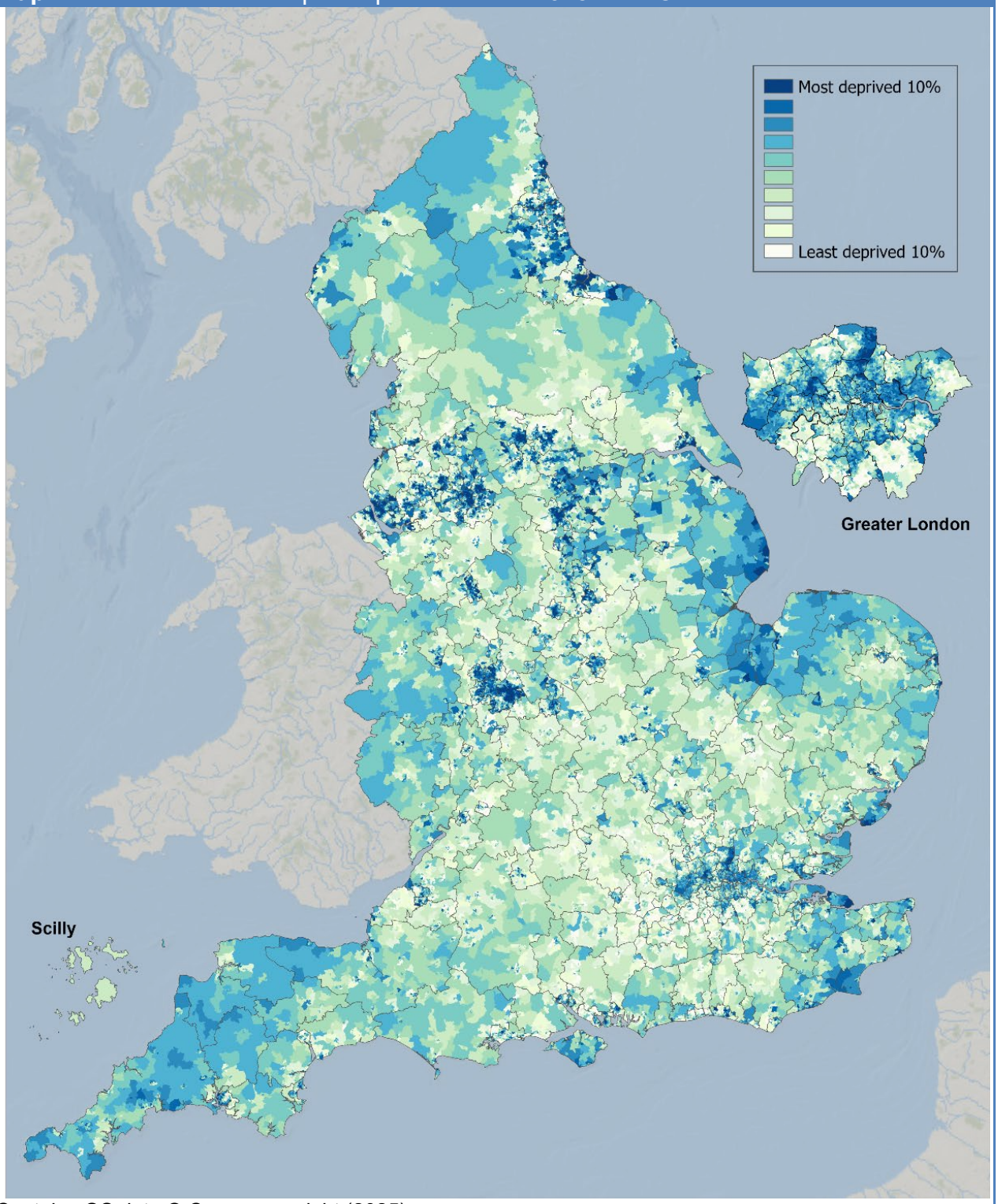
4.2 Deprivation at local level

The Index of Multiple Deprivation (IMD)

4.2.1 The patterns of deprivation across England are complex. The most deprived LSOAs and least deprived LSOAs are spread throughout England.

4.2.2 The following map shows the IMD 2025 at LSOA level across England (Map 4.1). The areas have been ranked and divided into 10 equal groups (deciles). Areas shaded dark blue are the most deprived 10 per cent of LSOAs in England, while areas shaded bright yellow are the least deprived 10 per cent.

Map 4.1. The Index of Multiple Deprivation rank 2025 at LSOA level.



4.2.3 As was the case in previous Indices, there are concentrations of deprivation in large cities and towns, including areas that have historically had large heavy industry, manufacturing and/or mining sectors, coastal towns, and large parts of East London and some rural communities, particularly in former coalfield areas.

The most deprived areas by LAD

4.2.4 This section highlights which LADs rank as most deprived, based on those LSOAs that are ranked among the 20 per cent, 10 per cent, 5 per cent and 1 per cent most deprived areas nationally (Section 4.4 looks in more detail at the full set of summary measures for LADs). As LADs vary considerably in size, the analysis here is based on those areas with the highest proportion of deprived LSOAs.

4.2.5 Tables 4.1 to 4.4 below show the ten LADs with the highest proportion of LSOAs in the most deprived 20 per cent, 10 per cent, 5 per cent, and 1 per cent nationally, respectively. Of the 296 LADs in England:

- 253 LADs have at least one LSOA in the most deprived 20 per cent;
- 192 LADs have at least one LSOA in the most deprived 10 per cent;
- 147 LADs have at least one LSOA in the most deprived 5 per cent;
- 80 LADs have at least one LSOA in the most deprived 1 per cent nationally.

Table 4.1. LADs with the highest proportion of LSOAs in the most deprived 20 per cent of areas nationally based on the Index of Multiple Deprivation

LAD	Number	Total number of LSOAs	Per cent
Middlesbrough	54	90	60.0
Manchester	174	295	59.0
Blackburn with Darwen	53	91	58.2
Sandwell	107	190	56.3
Birmingham	362	659	54.9
Blackpool	51	94	54.3
Knowsley	54	100	54.0
Liverpool	162	302	53.6
Nottingham	96	179	53.6
Hartlepool	30	57	52.6

Table 4.2. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally based on the Index of Multiple Deprivation			
LAD	Number	Total number of LSOAs	Per cent
Middlesbrough	45	90	50.0
Birmingham	282	659	42.8
Hartlepool	24	57	42.1
Kingston upon Hull, City of	70	168	41.7
Manchester	120	295	40.7
Blackpool	38	94	40.4
Knowsley	40	100	40.0
Burnley	24	60	40.0
Blackburn with Darwen	34	91	37.4
Oldham	53	142	37.3

Table 4.3. LADs with the highest proportion of LSOAs in the most deprived 5 per cent of areas nationally based on the Index of Multiple Deprivation			
LAD	Number	Total number of LSOAs	Per cent
Middlesbrough	33	90	36.7
Blackpool	32	94	34.0
Hartlepool	19	57	33.3
Kingston upon Hull, City of	50	168	29.8
Knowsley	26	100	26.0
Birmingham	170	659	25.8
Bradford	77	312	24.7
Liverpool	69	302	22.8
Burnley	13	60	21.7
Halton	16	80	20.0
Great Yarmouth	12	60	20.0

Note: In Table 4.3, Halton LAD and Great Yarmouth LAD are tied in tenth place, hence this table contains 11 LADs.

Table 4.4. LADs with the highest proportion of LSOAs in the most deprived 1 per cent of areas nationally based on the Index of Multiple Deprivation			
LAD	Number	Total number of LSOAs	Per cent
Blackpool	18	94	19.1
Middlesbrough	13	90	14.4
Hartlepool	6	57	10.5
North East Lincolnshire	10	107	9.3
Bradford	24	312	7.7
Wirral	15	209	7.2
Redcar and Cleveland	6	88	6.8
Great Yarmouth	4	60	6.7
Liverpool	18	302	6.0
Thanet	5	86	5.8

Levels of income and employment deprivation in the most deprived areas

4.2.6 Table 4.5 shows, for the most deprived 1 per cent, 5 per cent, 10 per cent and 20 per cent of LSOAs according to the IMD, the proportion of the population that is income or employment deprived, with additional detail for children and older people living in low income families. The table also shows the 20-40 per cent, 40-60 per cent, 60-80 per cent and 80-100 per cent quintiles for comparison, along with the average for all areas across England.

Table 4.5: The proportion of the population that are income or employment deprived, including the proportion of children and older people that are income deprived, for all LSOAs grouped by their Index of Multiple Deprivation 2025 rank				
	% of people who are income deprived	% of working-age people who are employment deprived	% of children who are income deprived	% of older people who are income deprived
1 per cent most deprived areas	68.1	42.0	83.7	56.9
5 per cent most deprived areas	60.2	34.8	76.7	50.6
10 per cent most deprived areas	55.1	31.1	72.3	46.5
20 per cent most deprived areas	47.9	26.5	65.8	40.6
20-40 per cent areas	28.9	15.8	44.9	24.0
40-60 per cent areas	18.5	10.8	30.3	14.4
60-80 per cent areas	12.5	7.7	20.5	9.3
80-100 per cent (least deprived areas)	7.3	5.1	11.3	5.3
All areas in England	23.2	13.4	36.6	16.8

4.2.7 The most deprived 20 per cent of LSOAs in England, that is 6,751 of the 33,755 areas, account for 11.5 million people, representing almost exactly 20 per cent of the population of England[32]. The table shows that in these areas:

- on average, nearly half (47.9 per cent) of people are income deprived;
- around one in four (26.5 per cent) of the working age population (aged 18 to 66) are employment deprived;
- nearly two thirds of children live in families that are income deprived (65.8 per cent); and
- two in five (40.6 per cent) of older people are income deprived.

4.2.8 People living in the most deprived 1 per cent of areas are more than 9 times as likely to be income deprived as those in the least deprived 20 per cent of areas (68.1 per cent compared to 7.3 per cent). In the most deprived 1 per cent of areas just over two-thirds of all people (68.1 per cent), and over four-fifths of all children (83.7 per cent), are income deprived.

4.3 Areas that are highly deprived on more than one domain

4.3.1 Many of the most deprived areas in England face multiple issues. Taking the most deprived 10 per cent (decile) of LSOAs on the overall IMD 2025, it is possible to ascertain the number of component domains on which each LSOA ranks within the most deprived 10 per cent of areas nationally.

4.3.2 Table 4.6 summarises this information and shows:

[32] As outlined in Section 3.2, it is important to remember that not all people living in deprived Lower-layer Super Output Areas are themselves deprived.

- Just two of the LSOAs in the country rank amongst the most deprived 10 per cent of areas nationally on all seven component domains. These are LSOA E01021988 located in 'Jaywick & St Osyth' within the LAD of Tendring, and LSOA E01024676 located in 'Margate Town' within the LAD of Thanet.
- A total of 224 (6.6 per cent) of the 3,375 LSOAs rank in the most deprived 10 per cent of LSOAs on six domains.
- A total of 1,256 (38.0 per cent) of the 3,375 LSOAs rank in the most deprived 10 per cent of LSOAs on five or more domains.
- A total of 2,243 (67.2 per cent) of the 3,375 LSOAs rank in the most deprived 10 per cent of LSOAs on four or more domains.
- A total of 3,317 (99.1 per cent) of the 3,375 LSOAs rank in the most deprived 10 per cent of LSOAs on two or more domains.
- All of the 3,375 LSOAs rank in the most deprived 10 per cent of LSOAs on at least one domain.

Table 4.6. LSOAs that are in the most deprived 10 per cent of areas nationally based on the Index of Multiple Deprivation, by the number of domains on which they are also in the most deprived decile

Number of domains	Number of LSOAs	Percentage of LSOAs	Cumulative Percentage
7	2	0.1	0.1
6	224	6.6	6.7
5	1,056	31.3	38.0
4	987	29.2	67.2
3	776	23.0	90.2
2	298	8.8	99.1
1	32	0.9	100.0
Total	3,375	100	

4.3.3 Table 4.7 shows more detail for the 226 LSOAs in England that are in the 10 per cent most deprived areas on six or seven domains of deprivation. These 226 LSOAs are not evenly distributed across England: the table lists the ten LADs that contain the highest proportion of LSOAs ranked among the 10 per cent most deprived on six or seven domains.

Table 4.7. LADs with the highest proportions of LSOAs that are in the most deprived 10 per cent of areas nationally for at least six of the seven domains

LAD	Number of LSOAs	Total number of LSOAs	Percentage of LSOAs in the District
Blackpool	15	94	16.0
Burnley	6	60	10.0
Hastings	5	53	9.4
Middlesbrough	7	90	7.8
Tendring	6	89	6.7
Great Yarmouth	4	60	6.7
Liverpool	20	302	6.6
North East Lincolnshire	7	107	6.5

Thanet	5	86	5.8
Hyndburn	3	53	5.7

4.4 LAD summary measures

4.4.1 The pattern of deprivation across large areas such as LADs can be complex. In some areas, deprivation is concentrated in severe pockets, rather than evenly spread throughout. In some other areas the opposite picture is seen, with deprivation spread relatively evenly throughout the area, and with no highly deprived areas. The set of summary measures described in Section 3.3 have been designed to help users understand deprivation patterns for higher-level areas such as LADs. The measures identify the overall intensity of deprivation, how deprivation is distributed across the larger area, and the overall volume, or 'scale', of deprivation. For further detail on the set of summary measures, see Section 3.3.

4.4.2 Maps 4.2 to 4.8 on the following pages show each of the summary measures of the IMD 2025 mapped for LADs across England. For each of the maps the LADs have been divided into 10 equal groups (deciles)[33] according to the level of deprivation on the summary measure. LADs in the most deprived decile are shaded dark blue, those in the next most deprived decile are shaded a lighter blue. Each successively less deprived decile is shaded through lighter blues and greens until the least deprived decile which is shaded bright yellow.

4.4.3 When interpreting maps, the eye is drawn to large swathes of colour. This can be misleading as geographically large LADs may have relatively small populations whereas geographically small LADs may contain larger populations. There is an inset for London where the 33 boroughs are geographically small and obscured on the large map.

Average rank

4.4.4 Map 4.2 shows the distribution of LADs on the average rank measure. The most deprived LADs (shaded dark blue) are widely distributed across the country. The coastal towns of Blackpool and Hastings can be seen to rank highly on this measure, with Blackpool ranking highest of all LADs in the country. The large metropolitan areas centred around Manchester, Liverpool and Birmingham are represented in this table, as well as a number of former industrial areas of the North West (Burnley, Blackburn with Darwen, Pendle, Hyndburn, Oldham, Rochdale).

Average score

4.4.5 Map 4.3 shows the distribution of LADs on the average score measure. As was observed for the average rank measure, areas in the most deprived decile on the average score measure are concentrated in larger cities in the North and the Midlands and coastal communities across England. Blackpool is ranked as the most deprived LAD on this average score measure, as it also was on the average

[33] Because there are 33,755 LSOAs in total, each of the decile bands are not precisely equal. Decile 1 (the most deprived decile) contains 3,375 LSOAs, Decile 2 = 3,376, Decile 3 = 3,375, Decile 4 = 3,376, Decile 5 = 3,375, Decile 6 = 3,376, Decile 7 = 3,375, Decile 8 = 3,376, Decile 9 = 3,375 and Decile 10 (the least deprived decile) contains 3,376 LSOAs.

rank measure. The second-highest ranked LAD is Middlesbrough, which was ranked 21st on the average rank measure.

Proportion of LSOAs in the most deprived 10 per cent nationally

4.4.6 Map 4.4 shows the distribution of LADs on the proportion of LSOAs in the most deprived 10 per cent nationally measure. This measure is based on only those LSOAs in the most deprived 10 per cent, rather than the average rank and score measures which are based on averages across all LSOAs. The measure shows a much greater concentration of LADs in the most deprived decile in northern LADs and to a lesser extent the Midlands, with only a single LAD south of Birmingham (specifically, Hastings) identified by this measure as being in the most deprived decile. Middlesbrough ranks as the most deprived LAD on this measure.

Extent of deprivation

4.4.7 Map 4.5 shows the distribution of LADs on the extent of deprivation measure. Again, areas of the North and Midlands feature most prominently. Manchester is the most deprived LAD on this measure.

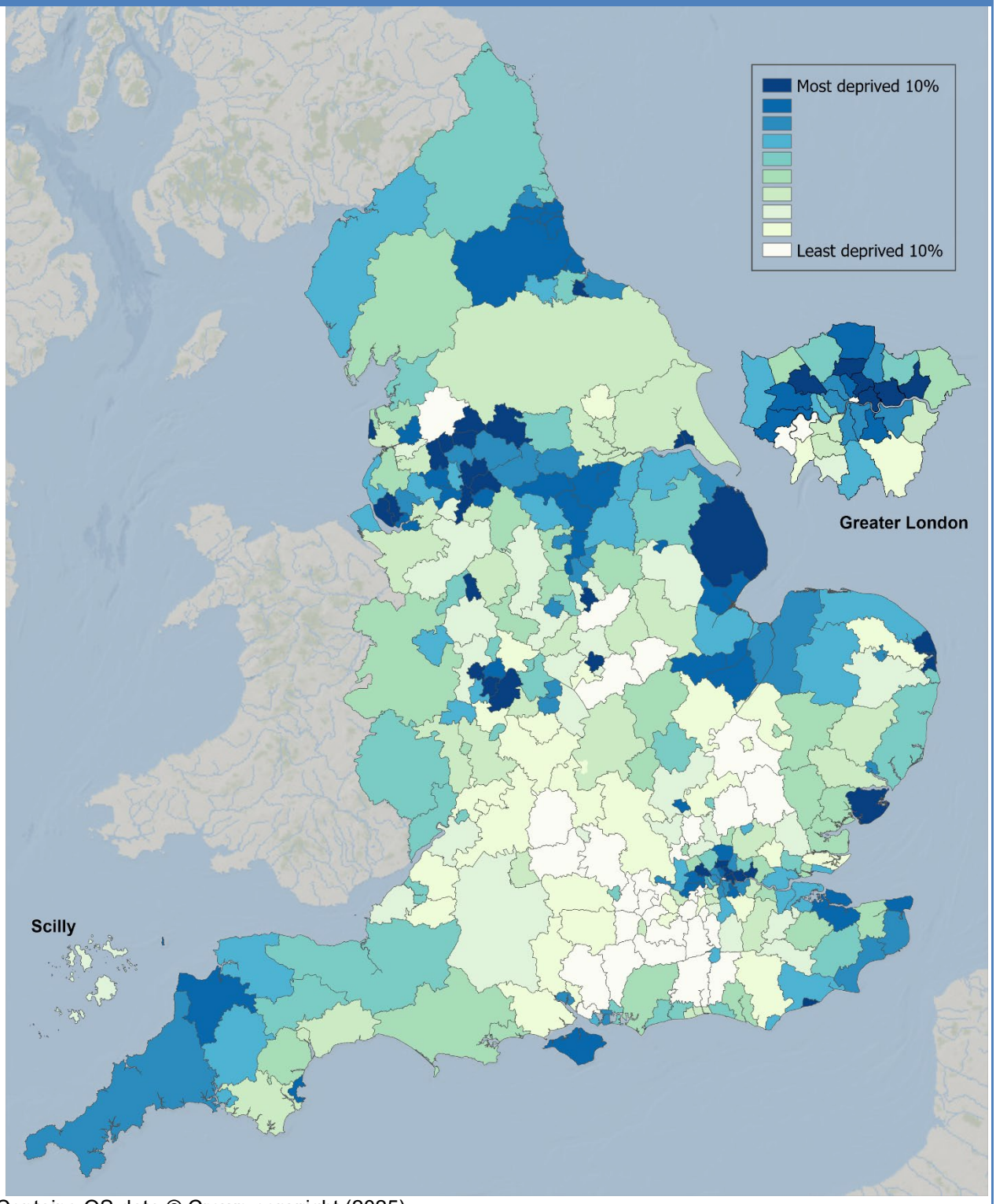
Local concentration of deprivation

4.4.8 Map 4.6 shows the distribution of LADs on the local concentration of deprivation measure. This summary measure tends to highlight those LADs with very highly deprived LSOAs and shows a different distribution of the most deprived decile to the measures above, in that there are particularly high concentrations in coastal areas with 8 of the 10 areas with the highest local concentration scores located in coastal areas. Blackpool is the most deprived LAD on this measure.

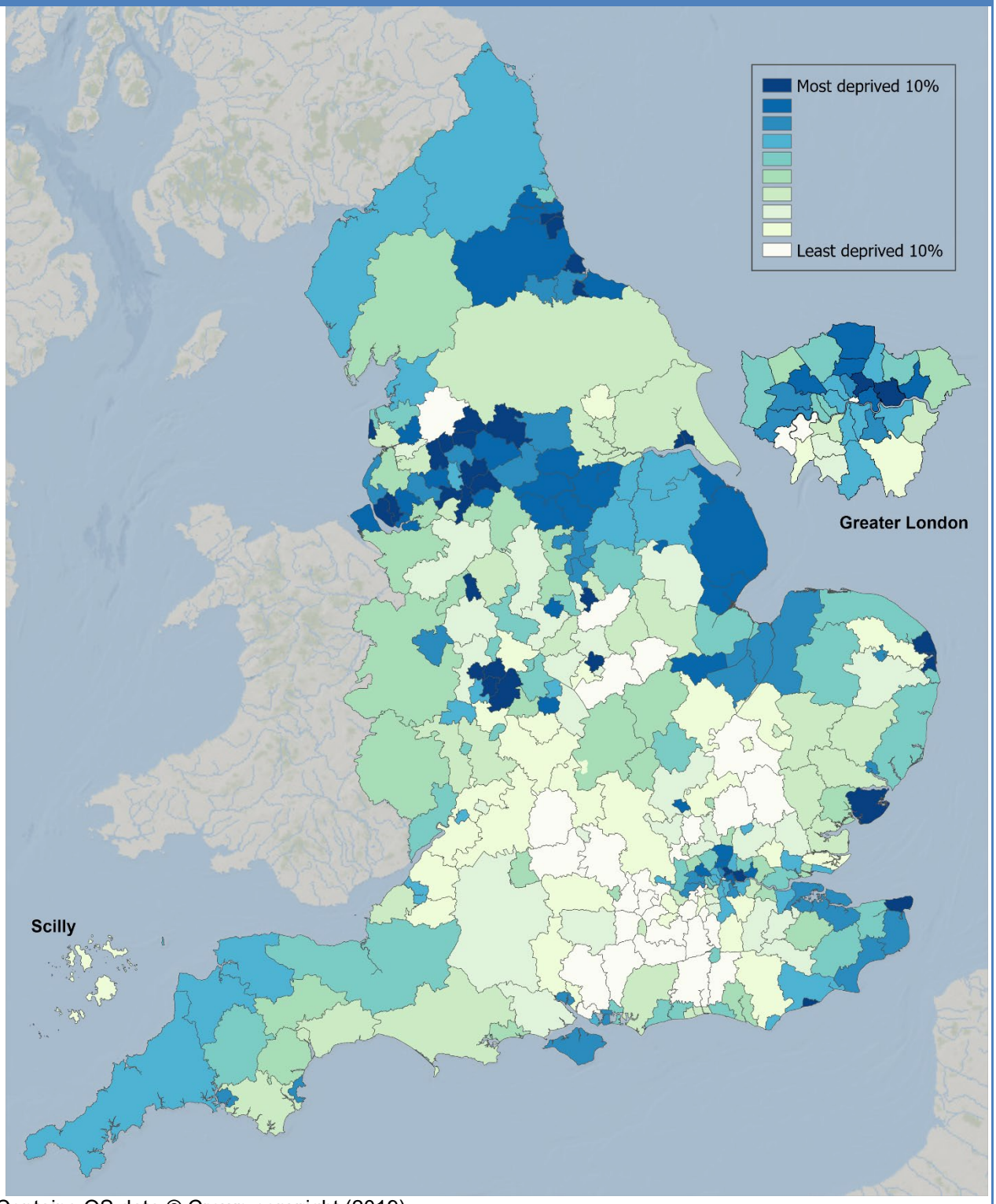
Income scale and employment scale

4.4.9 Maps 4.7 and 4.8 shows the distribution of LADs on the income and employment scale measures. As these measures are based on the scale, or number, of people who are income- and employment-deprived, the measures tend to highlight those highly deprived LADs that have large overall populations by virtue of their geographical boundaries. Some London boroughs and LADs in the North West feature in the most deprived decile on both of these measures. In addition, clusters in the Midlands and the large unitary authorities of Cornwall and County Durham are in the most deprived decile on both measures. Birmingham LAD has the largest overall number of income deprived and employment deprived people.

Map 4.2. Average rank summary measure of the Index of Multiple Deprivation 2025, for LADs



Map 4.3. Average score summary measure of the Index of Multiple Deprivation 2025, for LADs



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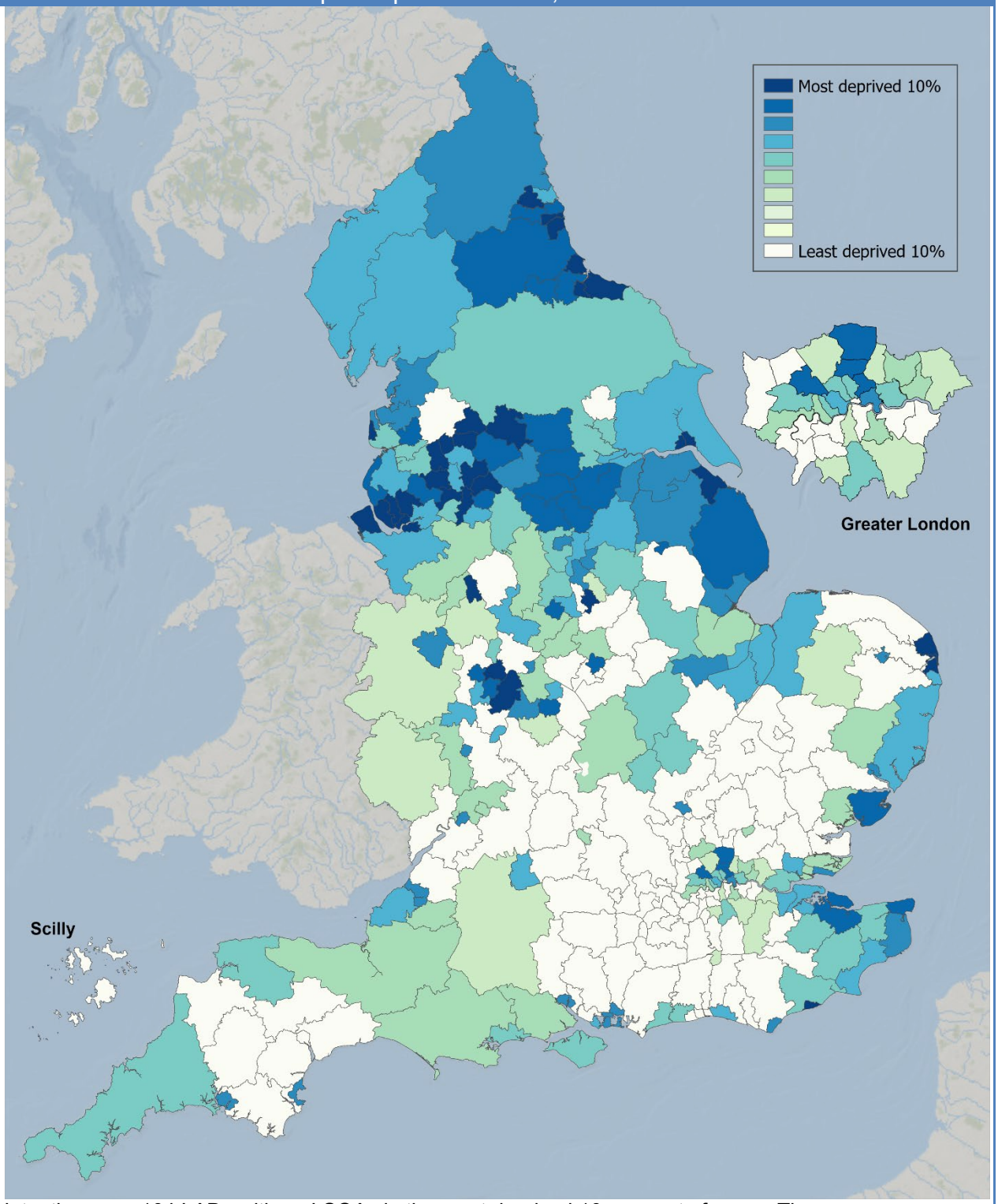
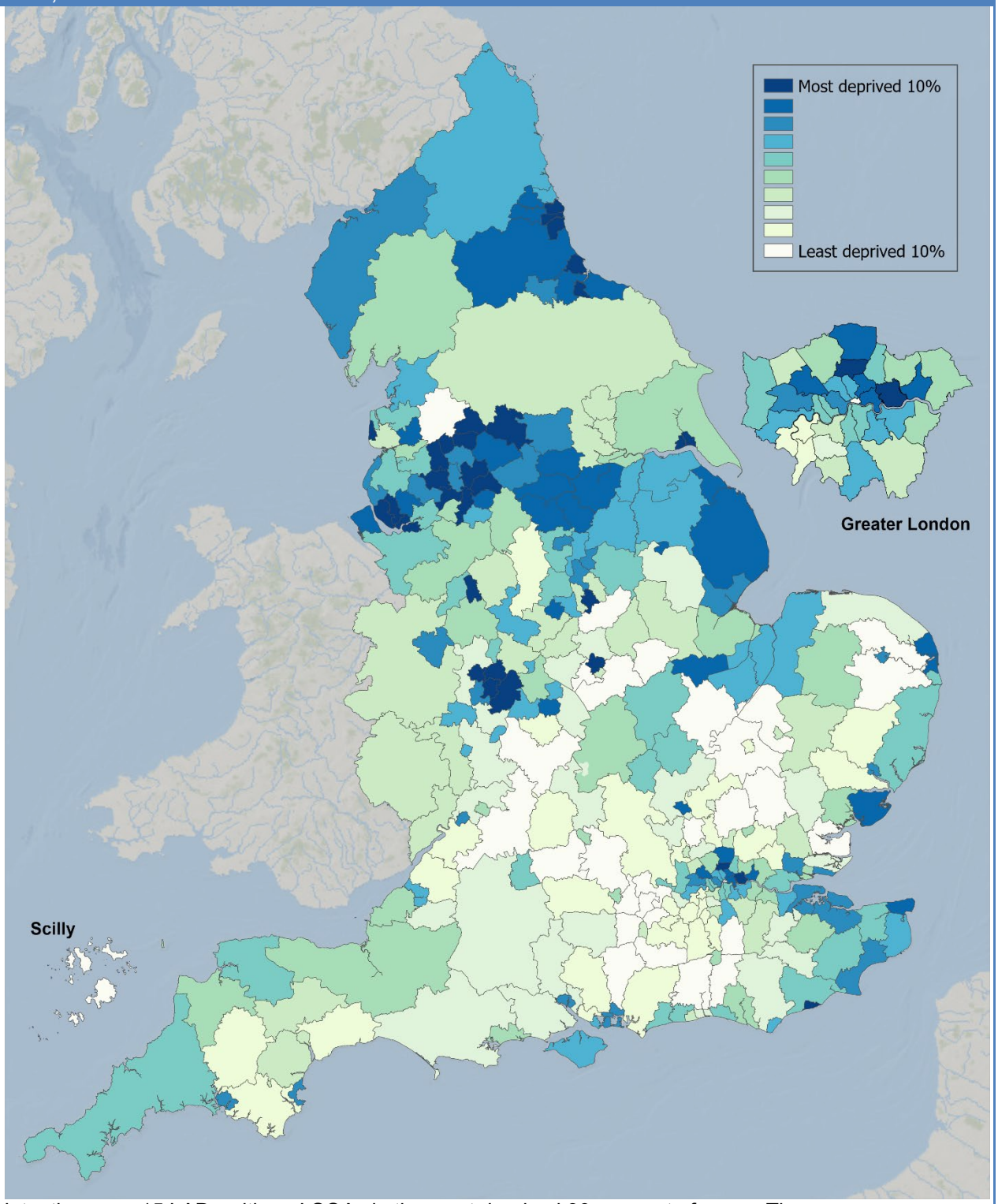
Map 4.4. Proportion of LSOAs in the most deprived 10 per cent nationally summary measure of the Index of Multiple Deprivation 2025, for LADs



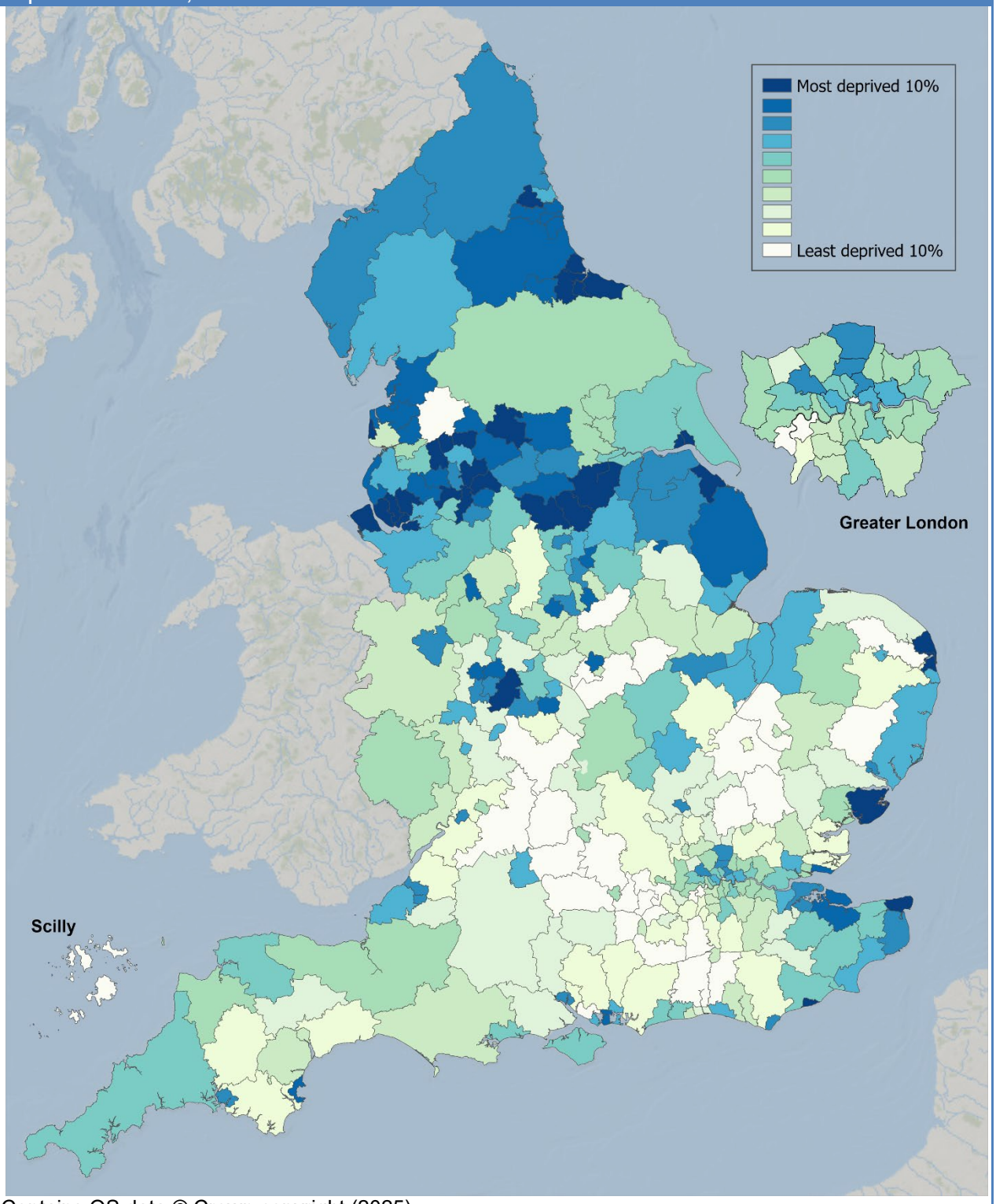
Note, there are 104 LADs with no LSOAs in the most deprived 10 per cent of areas. These areas score zero on the summary measure and are shown in the least deprived decile.

Map 4.5. Extent of deprivation summary measure of the Index of Multiple Deprivation 2025, for LADs

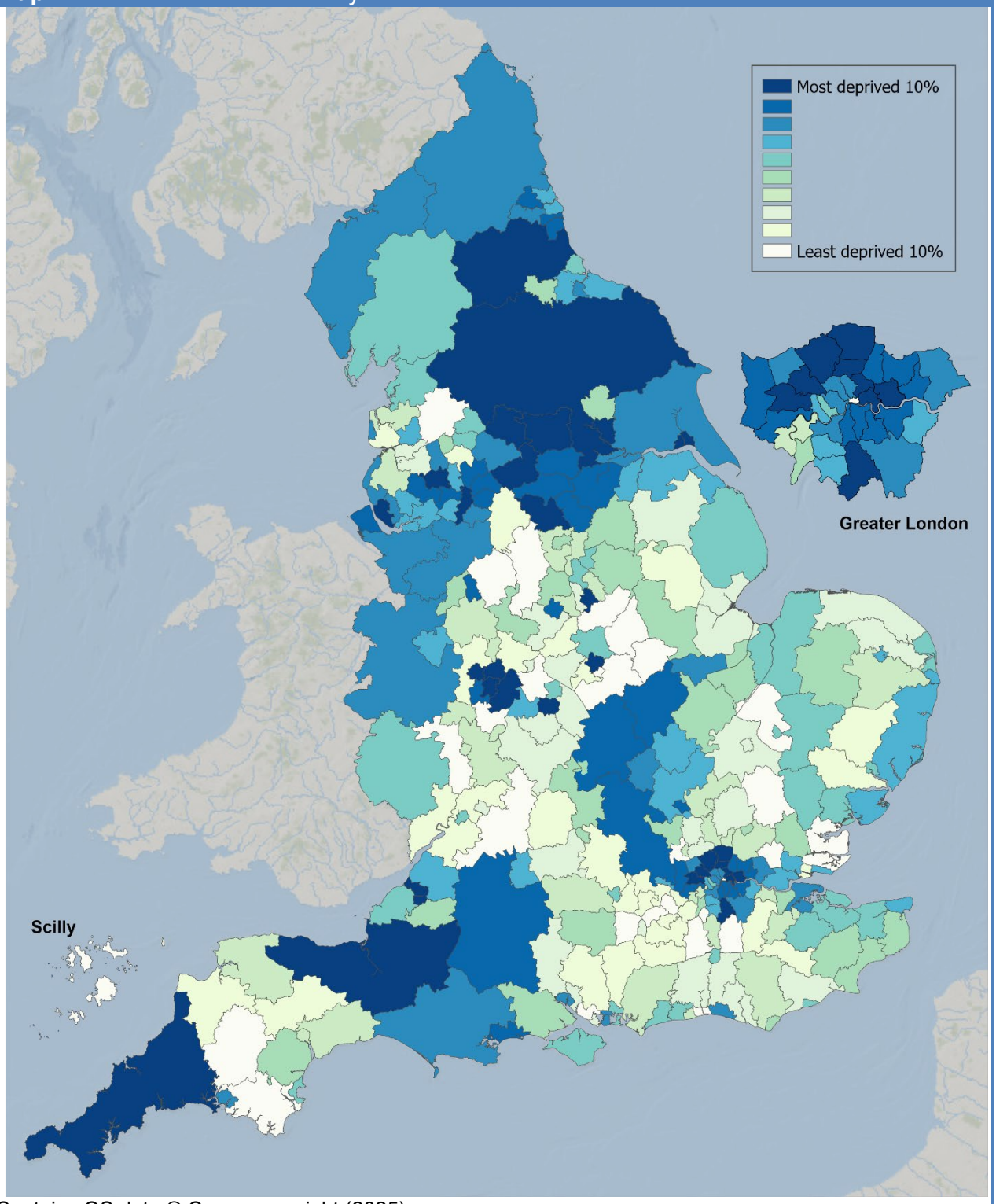


Note, there are 15 LADs with no LSOAs in the most deprived 30 per cent of areas. These areas score zero on the extent measure and are shown in the least deprived decile.

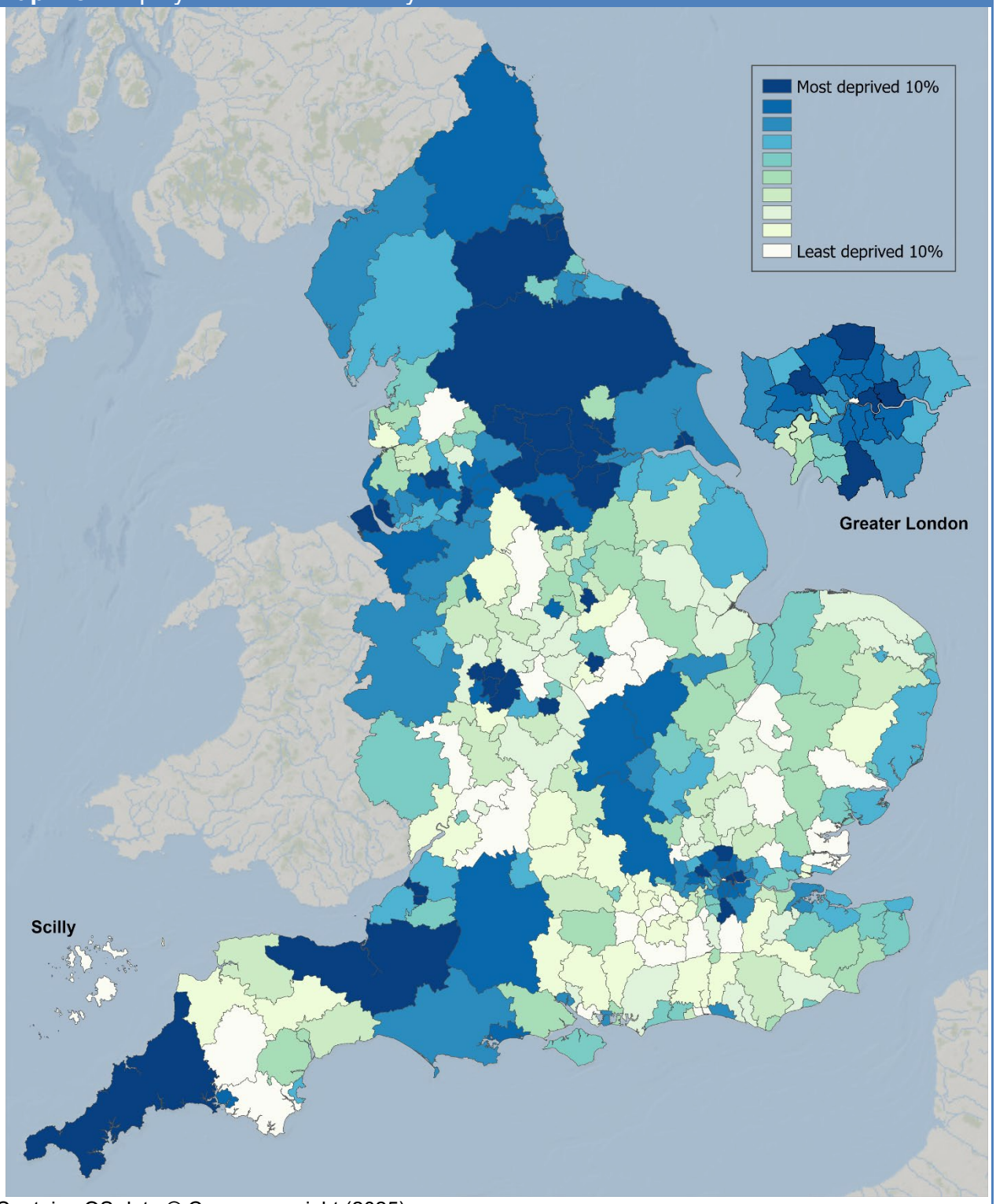
Map 4.6. Local concentration of deprivation summary measure of the Index of Multiple Deprivation 2025, for LADs



Map 4.7. Income scale summary measure for LADs



Map 4.8. Employment scale summary measure for LADs



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4.4.10 The tables below show the 20 LADs ranked as most deprived according to each of the summary measures (a rank of 1 being the most deprived). Appendix C shows the same data for Integrated Care Board and Local Enterprise Partnerships.

Table 4.8: The most deprived LADs on each of the summary measures of the Index of Multiple Deprivation 2025 and on the income and employment scale measures							
	Average Rank	Average Score	Proportion of LSOAs in the most deprived 10 per cent nationally	Extent	Local Concentration	Income Scale	Employment Scale
1	Blackpool	Blackpool	Middlesbrough	Manchester	Blackpool	Birmingham	Birmingham
2	Manchester	Middlesbrough	Birmingham	Blackburn with Darwen	Middlesbrough	Manchester	Leeds
3	Hastings	Burnley	Hartlepool	Middlesbrough	Hartlepool	Leeds	Manchester
4	Burnley	Manchester	Kingston upon Hull, City of	Birmingham	North East Lincolnshire	Bradford	Liverpool
5	Sandwell	Birmingham	Manchester	Burnley	Great Yarmouth	Liverpool	Bradford
6	Leicester	Hartlepool	Blackpool	Liverpool	Thanet	Sheffield	County Durham
7	Newham	Hastings	Burnley; Knowsley (joint 7th place)	Oldham	Redcar and Cleveland	County Durham	Sheffield
8	Birmingham	Kingston upon Hull, City of		Hartlepool	Bradford	Newham	Cornwall
9	Barking and Dagenham	Liverpool	Blackburn with Darwen	Blackpool	Wirral	Tower Hamlets	Sandwell
10	Hackney	Blackburn with Darwen	Oldham	Bradford	Hastings	Sandwell	Kirklees
11	Blackburn with Darwen	Oldham	Bradford	Kingston upon Hull, City of	Oldham	Leicester	Bristol, City of
12	Liverpool	Bradford	Liverpool	Knowsley	Rotherham	Cornwall	Nottingham
13	Pendle	Knowsley	Pendle	Sandwell	Liverpool	Brent	Somerset
14	Kingston upon Hull, City of	Hyndburn	Hastings	Hyndburn	Burnley	Enfield	Leicester
15	Oldham	Pendle	Hyndburn	Nottingham	Tendring	Kirklees	Croydon
16	Hyndburn	Leicester	Halton	Leicester	Kingston upon Hull, City of	Ealing	Wirral
17	Knowsley	Rochdale	Rochdale	Stoke-on-Trent	Stockton-on-Tees	Nottingham	Wakefield
18	Nottingham	Great Yarmouth	Nottingham	Wolverhampton	Halton	Croydon	Sunderland
19	Rochdale	Sandwell	Stoke-on-Trent	Walsall	Knowsley	Hackney	Newham
20	Tower Hamlets	Nottingham	Sunderland	Hastings	Salford	Somerset	Kingston upon Hull, City of

Chapter 5. Changes in relative deprivation

5.1 Introduction

5.1.1 The purpose of the Indices of Deprivation (IoD) is to measure as accurately as possible the relative distribution of deprivation at a small area level. They are not designed to provide 'backwards' comparability with previous versions of the Indices.

5.1.2 This means that, when exploring changes in deprivation between versions of the Indices, users should be aware that changes can only be described in relative terms, for example, the extent to which an area has changed rank or decile of deprivation between the current and previous Indices. It would not necessarily be correct to state that the level of deprivation in the area has increased on some absolute scale, as it may be the case that all areas had improved, but that some areas had improved more slowly than others. If the absolute levels of deprivation in all areas were increasing or decreasing at the same rate, the ranks would show no change. Moreover, any changes in relative deprivation between 2025 and previous Indices should be considered in the context of the changes to the methodology, geography and component indicators that have occurred between different versions of the Indices. Further guidance on how to interpret changes in relative deprivation is given in Section 3.4.

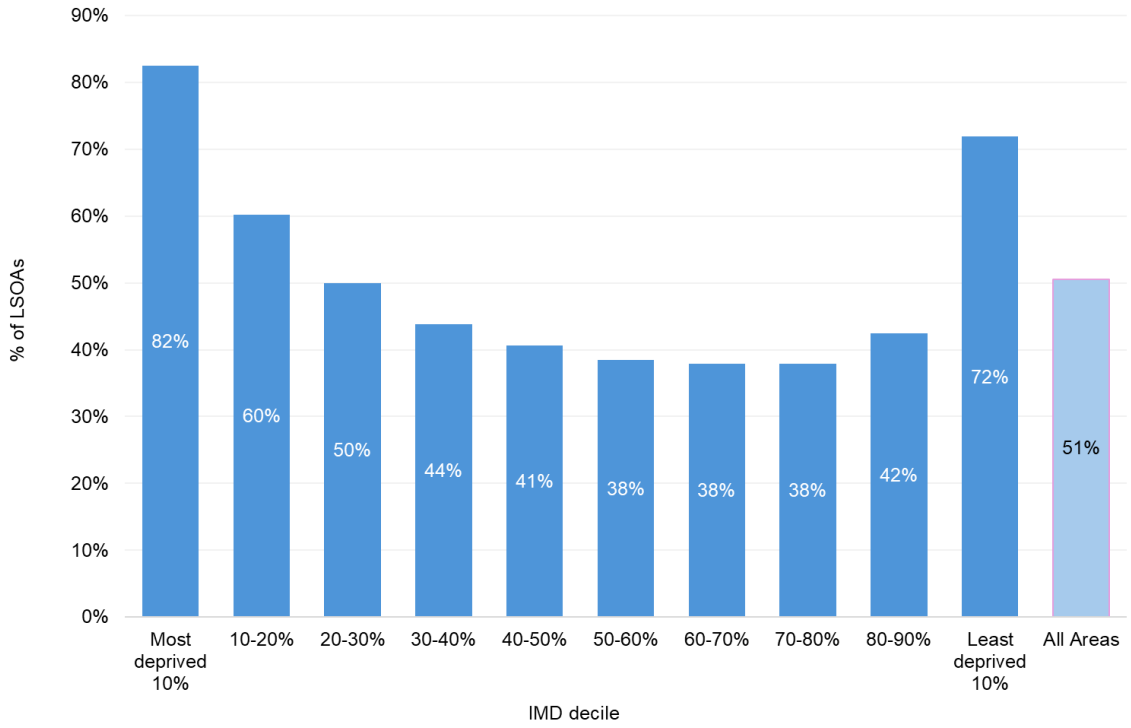
5.1.3 The aim of this chapter then is to describe how the areas identified as most deprived according to the latest IMD compare with areas identified as most deprived based on previous versions. The chapter focuses on change in relative deprivation over time, looking at:

- changes at Lower-layer Super Output Area (LSOA) level;
- changes at Local Authority District (LAD) level; and
- persistent deprivation: those areas that have been ranked consistently as highly deprived according to the IMD 2019 and earlier versions of the Index.

5.2 Changes at LSOA level

5.2.1 Chart 5.1 shows the proportion of LSOAs that were in the same decile on the IMD 2025 and 2019.

Chart 5.1. LSOAs on the Index of Multiple Deprivation 2025 that were in the same decile of the 2019 Index



The values show the percentage of LSOAs for the IMD 2025 that were in the same decile on the 2019 Index.

5.2.2 Overall, 51 per cent of LSOAs in the IMD 2025 were in the same decile as in IMD 2019. There was less movement at the extreme ends of the distribution; 82 per cent of the most deprived 10 per cent of areas on the 2025 Index were in the same decile on the 2019 Index, as were 72 per cent of the least deprived areas.

5.2.3 A more detailed analysis of movement across deciles is shown in Table 5.1, which cross-references all IMD 2025 deciles against IMD 2019. Comparing the distributions in this way shows the extent of changes in relative rankings, and how large the changes are for those areas that have moved. Although 82 per cent of the areas in the most deprived decile of in IMD 2025 were also in the most deprived decile of in IMD 2019, 592 areas (18 per cent) have moved out of the most deprived decile since the 2019 Index; 540 of these have shifted one decile to the 10-20 per cent most deprived areas, 33 have shifted to the 20-30 per cent most deprived areas, 9 to the 40-50 per cent most deprived areas and 10 LSOAs have moved even further with 1 moving to the 70-80 percent decile.

Table 5.1. LSOAs by level of deprivation on the Index of Multiple Deprivation 2019 and 2025

Number of LSOAs		Index of Multiple Deprivation 2019									
		Most deprived 10%	10-20%	20-30%	30-40%	40-50%	50-60%	60-70%	70-80%	80-90%	Least deprived 10%
Index of Multiple Deprivation 2025	Most deprived 10%	2783	541	46	5	0	0	0	0	0	0
	10-20%	540	2033	691	96	12	3	1	0	0	0
	20-30%	33	673	1687	803	161	16	2	0	0	0
	30-40%	9	89	754	1478	824	184	30	8	0	0
	40-50%	4	21	137	761	1370	804	231	42	5	0
	50-60%	3	5	27	176	762	1300	818	234	47	4
	60-70%	2	10	17	39	186	780	1279	759	281	22
	70-80%	1	1	12	15	45	236	768	1281	830	187
	80-90%	0	2	3	1	5	48	230	918	1434	734
	Least deprived 10%	0	1	1	2	6	9	16	134	778	2429

5.2.4 The table also shows that some LSOAs have experienced a considerable change in their relative level of deprivation since the IMD 2019. For example, six LSOAs which were ranked in the most deprived 10% in IMD 2019, are ranked in the least deprived 50% of areas in IMD 2025. However, as noted above, these changes in decile position may be due to enhancements to indicators, data and methods in the IoD 2025 rather than, or in addition to, real change in deprivation levels. The total number of LSOAs in England has also changed – 32,844 in 2019 to 33,755 in 2025, based on the 2021 Census.

5.3 Changes at Local Authority District (LAD) level

5.3.1 Table 5.2 shows the ten LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas, based on the IMD 2025. The table also shows the proportion of LSOAs in each LAD that were in the most deprived 10 per cent on the IMD 2019, and the percentage point change between the updates.

5.3.2 Note, there have been some revisions to LAD boundaries between 2019 and 2025. To reflect these changes, the IoD 2019 have been re-aggregated to the 2024 LAD boundaries to enable direct comparison between the IoD 2025 and the previous Indices at LAD level. Comparisons between the IoD 2019 and 2025 in this section refer to the IoD 2019 re-aggregated to the new 2024 LAD boundaries.

Table 5.2. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally based on the IMD 2025, and percentage point change since the IMD 2019

	Index of Multiple Deprivation 2025		Index of Multiple Deprivation 2019		Percentage point change from the 2019 Index
	Number	Per cent	Number	Per cent	
Middlesbrough	45	50.0	45	50.0	0.0
Birmingham	282	42.8	281	42.6	0.2
Hartlepool	24	42.1	20	35.1	7.0
Kingston upon Hull, City of	70	41.7	76	45.2	-3.6
Manchester	120	40.7	129	43.7	-3.1
Blackpool	38	40.4	39	41.5	-1.1
Knowsley	40	40.0	47	47.0	-7.0
Burnley	24	40.0	23	38.3	1.7
Blackburn with Darwen	34	37.4	33	36.3	1.1
Oldham	53	37.3	44	31.0	6.3

Based on all LSOAs. Due to boundary changes, the numbers of LSOAs should not be directly compared across the IoD 2025 and 2019; relative changes should be compared based on the percentage point change shown in the final column.

5.3.3 Middlesbrough is the LAD with the highest proportion of LSOAs in the most deprived 10 per cent on the IMD 2025, with half of all LSOAs (50 per cent) ranked among the most deprived 10 per cent. Middlesbrough also had the highest proportion of LSOAs ranked among the most deprived 10 per cent on the IMD 2019. Hartlepool experienced a notable increase in the proportion of LSOAs ranked among the most deprived 10 per cent (from 35.1 per cent to 42.1 per cent) between 2019 and 2025. Birmingham is the LAD with the largest number of LSOAs that are amongst the most deprived in the IMD 2025, which was also the case in 2019, reflecting the larger size of Birmingham.

Changes in ranks of multiple deprivation at the Local Authority District level since the IMD 2004

5.3.4 In this section the most deprived 30 LADs according to each of the summary measures of the IMD 2025 (see Section 3.3 for details) are examined as regards their position on those measures for the IMD 2004, 2007, 2010, 2015 and 2019.

Interpreting the charts

5.3.5 Charts 5.2 to 5.6 show the 30 LADs representing the most deprived 10 per cent of LADs on each of the set of summary measures of the IMD 2025. For each summary measure, the chart shows how the most deprived LADs according to the IMD 2025 were ranked in previous versions of the Index (noting that the versions are not a time series). Where a LAD's relative deprivation has changed by five or more rank positions since the IMD 2019, it is highlighted on the chart.

5.3.6 Note, these charts compare the rank position for the 276 LADs which have not experienced boundary changes between 2004 and 2025. The ranks refer to the ranks across the 276 unchanged LADs. As such, the rank of a LAD may differ from the official rank in the previous publications of the IoD. In the IoD 2004 and 2007

the published rankings refer to the relative position of 354 LADs; in IoD 2010 and 2015 the published rankings refer to the relative position of 326 LADs, in the IoD 2019 the published rankings refer to the relative position of 317 LADs and in the IoD 2025 the published rankings refer to the relative position of 296 LADs. However, in the analysis in this section, the rankings refer to the relative position across the 276 unchanged LADs i.e. those that have not experienced boundary changes between 2004 and 2025.

5.3.7 It is also important to note that any change in rank position represents *relative* change only. In other words, it is possible that an LAD may have become *less* deprived in real terms since the previous Index, but *more* deprived relative to all other LADs, or vice versa. Furthermore, a change in rank – even of five places – may not actually represent a large increase or decrease in absolute levels of deprivation. Further guidance on how to interpret changes in relative deprivation is given in Section 3.4.

5.3.8 The LADs are listed on the right-hand vertical axis, ranked from 1 to 30 where 1 represents the most deprived LAD on that particular measure. For example, in the first chart (Chart 5.2) which presents the average rank summary, Blackpool is ranked 1 signalling that Blackpool is the most deprived LAD in England on this measure in 2025. The LADs are then ordered in descending rank with Hartlepool being ranked 30th most deprived on this measure out of all 276 unchanged LADs in England.

5.3.9 The left-hand vertical axis lists the LADs that are among the 10 per cent most deprived based on the particular summary measure of the IMD 2025 that were also among the 10 per cent most deprived LADs on this measure on the 2004 Index. These LADs are named on the left-hand axis, showing their 2004 summary measure rank. So again, taking the example of the average rank chart, Blackpool (which is ranked 1 on the 2025 Index) was ranked 24 based on the 2004 Index. The gaps therefore correspond to LADs that were in the most deprived 10 per cent on that measure in the 2025 Index that were not ranked among the most deprived on this measure in the 2004 Index. As an example, again from the average rank chart, Hastings (which is ranked 3 on the 2025 Index) did not appear among the 30 most deprived LADs according to the 2004 Index.

5.3.10 The rank of each LAD on the IMD 2007, IMD 2010, IMD 2015 and IMD 2019 is given by the intermediate points on the chart. The lines connecting these points for each LAD show the trajectory of the particular LAD on the summary measure in question from the 2004 Index to the 2025 Index. To give an example, again from the average rank chart (Chart 5.2); Blackpool was ranked most deprived on this measure on the 2025 Index. On the 2019 Index it was also ranked 1st, on the 2015 Index it was ranked 4th, on the 2010 Index it was ranked 10th, on the 2007 Index it was ranked 17th, and on the 2004 Index it was ranked 24th.

5.3.11 The names of the LADs are highlighted in dark blue to indicate that the LAD has become relatively more deprived by at least five rank places than it was on the IMD 2019. Conversely, names are highlighted in light blue where the LAD has become relatively less deprived by at least five rank places than it was on the IMD 2019.

Average rank

5.3.12 Chart 5.2 shows the change in LAD rank on the average rank measure according to the six updates of the IMD (2025, 2019, 2015, 2010, 2007 and 2004). Nine LADs

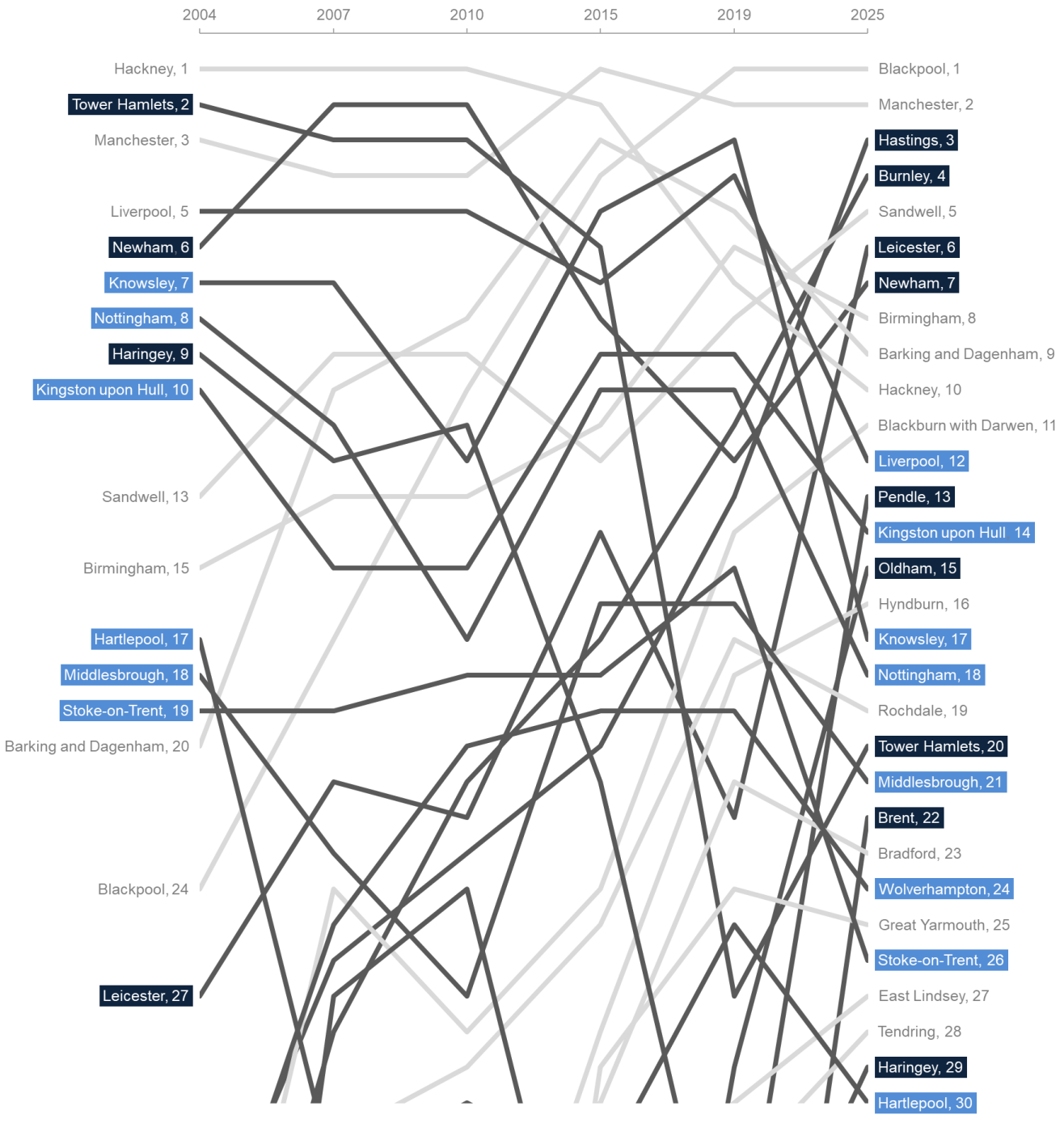
(highlighted in dark blue) have experienced an increase in relative deprivation on this measure of at least five rank places since the 2019 Index. Of those now in the 30 most deprived LADs in terms of average rank on the 2025 Index, Brent, Pendle, Leicester, Oldham and Hastings have had the greatest increase in rank changes since the 2019 Index (all with an increase of 10 or more ranks).

5.3.13 On this measure, five LADs have ranked the same or progressively more deprived, in relative terms, with each update since the 2004 Index (Blackpool, Hastings, Burnley, Hyndburn and Tendring). On the other hand, LADs such as Brent and Leicester have had a less clear trajectory: an initial decrease in relative deprivation on this measure from the 2004 Index followed by an increase by the 2025 Index.

5.3.14 There are eight LADs in the most deprived 10 per cent of LADs on the 2025 Index which have experienced a decrease in relative deprivation on this measure of at least five rank places since the 2019 Index (highlighted in light blue): Liverpool, Kingston upon Hull, Knowsley, Nottingham, Middlesbrough, Wolverhampton, Stoke-on-Trent and Hartlepool.

5.3.15 There are seven areas which have consistently ranked amongst the 15 most highly deprived areas in terms of average rank across all six updates of the IMD. These are: Manchester, Hackney, Newham, Liverpool, Sandwell, Birmingham and Kingston upon Hull.

Chart 5.2. The most deprived LADs according to the average rank summary measure of the Index of Multiple Deprivation 2025, showing changes in rank since earlier versions of the Index



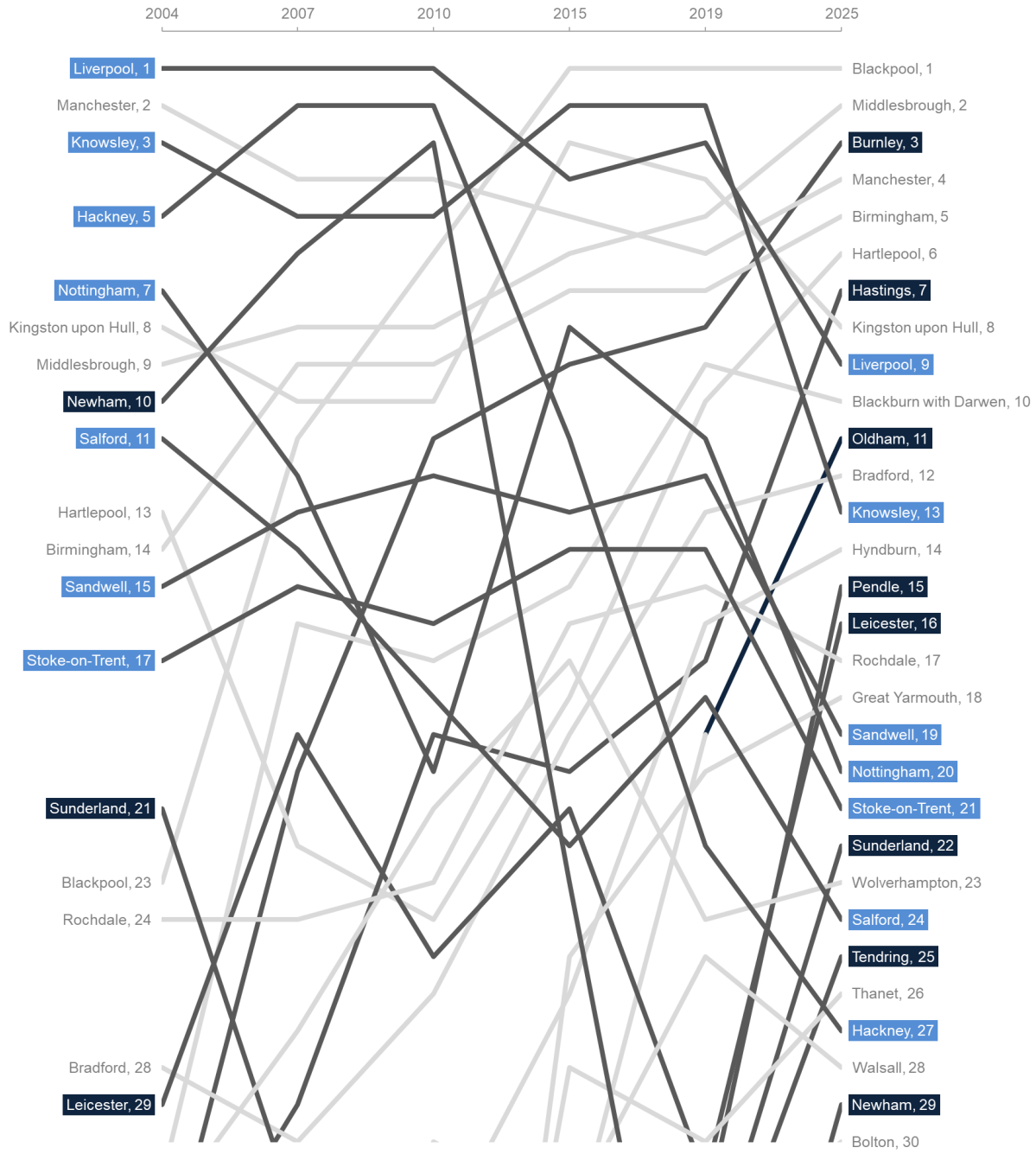
Note that any change in rank position represents *relative* change only. It is possible that a LAD may have become *less* deprived in real terms since the previous Index, but *more* deprived relative to all other LADs, or vice versa. Furthermore, a change in rank – even of five places – may not represent a large increase or decrease of deprivation.

Average score

5.3.16 Chart 5.3 shows the change in rank of LADs on the average score measure over the six updates of the IMD. Of the most deprived 10 per cent of LADs based on this measure on the IMD 2025, eight (highlighted in dark blue) have experienced an increase in relative deprivation of at least five rank places since the 2019 Index. Of these, Pendle, Leicester, Newham and Sunderland have had the greatest rank changes.

5.3.17 There are seven LADs in the most deprived 10 per cent of LADs on this measure on the 2025 Index which have experienced a decrease in relative deprivation of at least five rank places since the 2019 Index (highlighted in light blue). Of these, Knowsley and Nottingham had the greatest decreases in relative deprivation.

Chart 5.3. The most deprived LADs according to the average score summary measure of the Index of Multiple Deprivation 2025, showing changes in rank since earlier versions of the Index



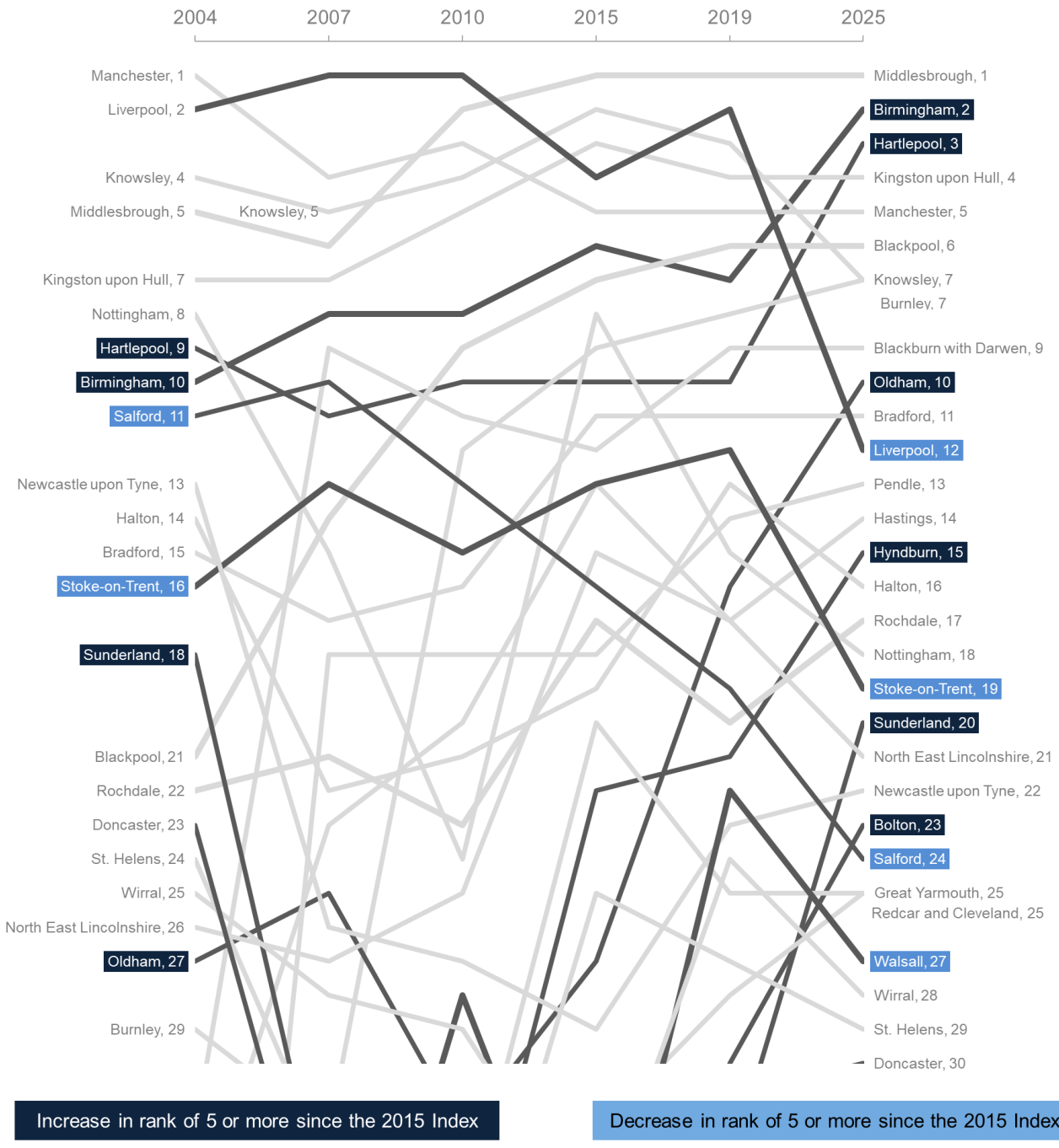
Note that any change in rank position represents *relative* change only. It is possible that a LAD may have become *less* deprived in real terms since the previous Index, but *more* deprived relative to all other LADs, or vice versa. Furthermore, a change in rank – even of five places – may not represent a large increase or decrease in absolute levels of deprivation.

Proportion of LSOAs in most deprived 10 per cent nationally

5.3.18 Chart 5.4 shows the change in LAD rank on the proportion of LSOAs in the most deprived 10 per cent nationally measure over the six updates of the IMD. Of the most deprived 10 per cent of LADs based on this measure on the 2025 Index, six (highlighted in dark blue) have experienced an increase in relative deprivation of at least five rank places since the 2019 Index. Sunderland saw the greatest movement, with an increase in relative deprivation on this measure of 13 rank places.

5.3.19 There are four LADs in the most deprived 10 per cent of LADs on the 2025 Index which have experienced a decrease in relative deprivation on this measure of at least five rank places since the 2019 Index (highlighted in light blue). Liverpool and Stoke-on-Trent have seen the greatest decrease amongst the most deprived 10 percent in 2025, with a decrease of ten and seven places respectively.

Chart 5.4. The most deprived LADs according to the proportion of LSOAs in the most deprived 10 per cent nationally measure of the Index of Multiple Deprivation 2025, showing changes in rank since earlier versions of the Index



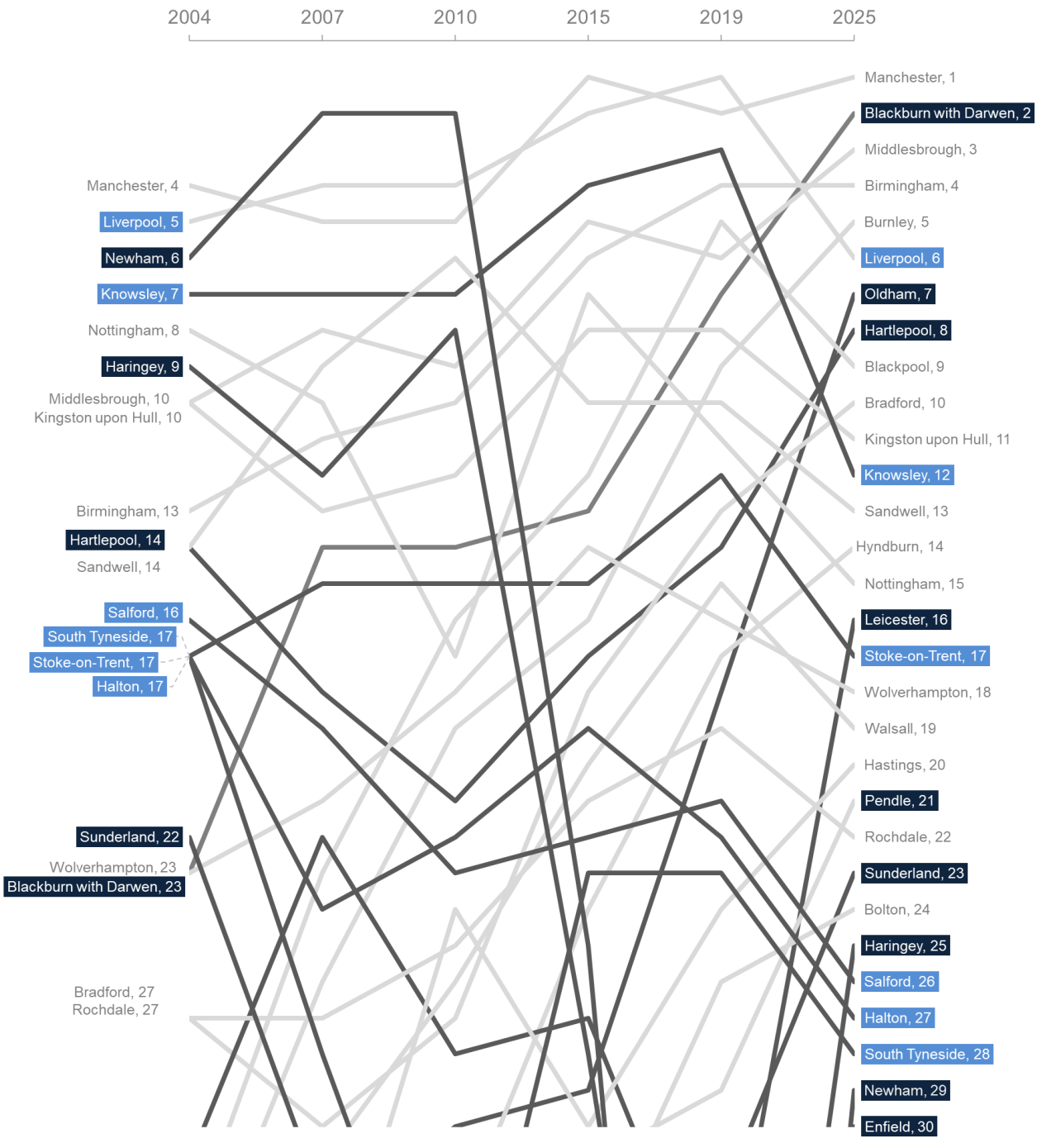
Note that any change in rank position represents *relative* change only. It is possible that a LAD may have become *less* deprived in real terms since the previous Index, but *more* deprived relative to all other LADs, or vice versa. Furthermore, a change in rank – even of five places – may not represent a large increase or decrease in absolute levels of deprivation.

Extent of deprivation

5.3.20 Chart 5.5 shows the change in LAD rank on the extent of deprivation measure over the six updates of the IMD. Of the most deprived 10 per cent of LADs based on this measure on the 2025 Index, nine LADs (highlighted in dark blue) have experienced an increase in relative deprivation on this measure of at least five rank places since the 2019 Index. Newham, Enfield, Haringey and Leicester have had the greatest rank changes. Blackburn with Darwen, Birmingham, Burnley, Oldham and Hyndburn have all shown an increase in relative deprivation (or the same rank) on this measure in each successive Index since the 2004 Index.

5.3.21 There are six LADs in the most deprived 10 per cent of LADs on the 2025 Index which have experienced a decrease in relative deprivation on this measure of at least five rank places since the 2019 Index (highlighted in light blue). These are: Liverpool, Knowsley, Stoke-on-Trent, Salford, Halton and South Tyneside.

Chart 5.5. The most deprived LADs according to the extent of deprivation summary measure of the Index of Multiple Deprivation 2025, showing changes in rank since earlier versions of the Index



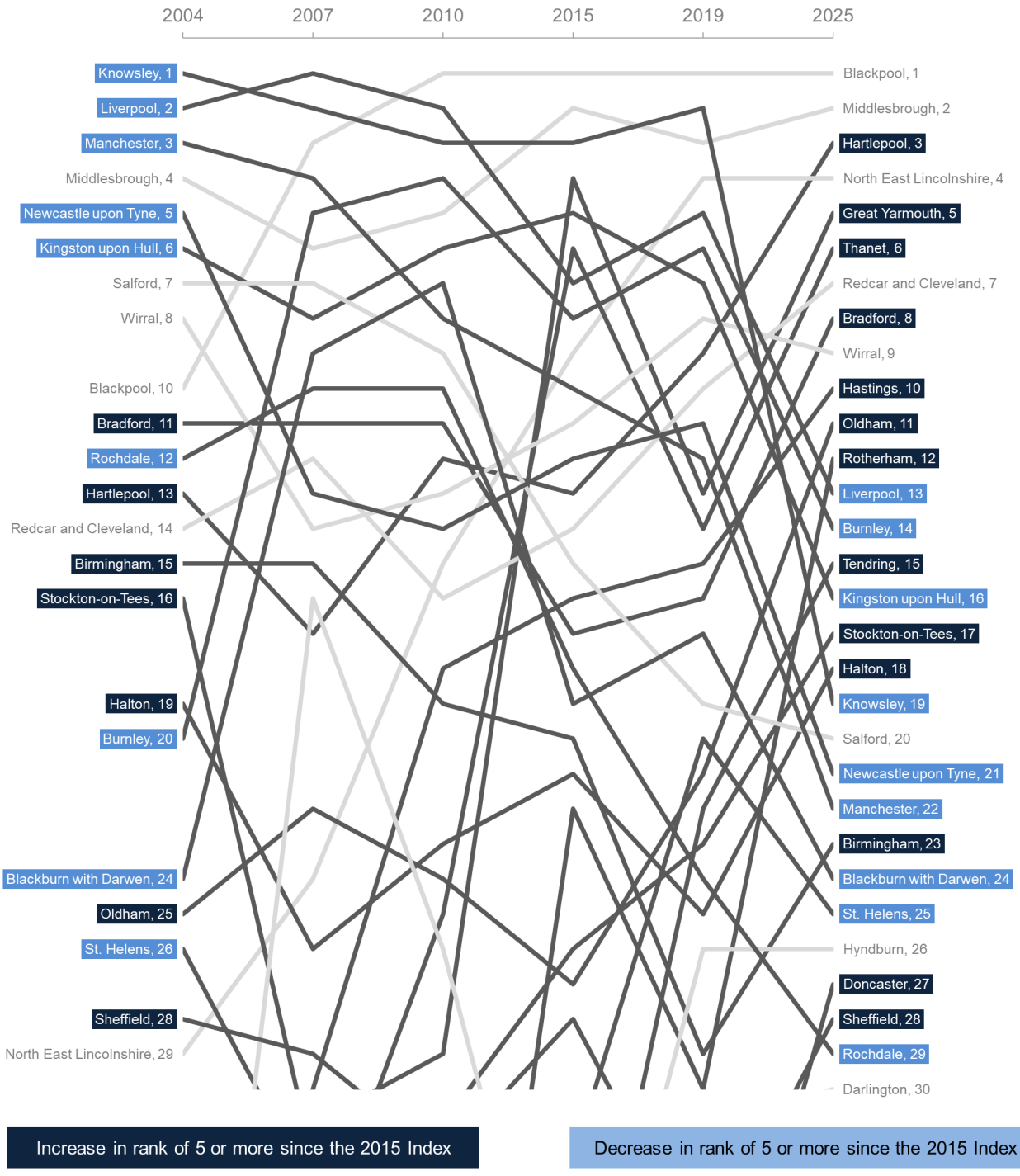
Note that any change in rank position represents *relative* change only. It is possible that a LAD may have become *less* deprived in real terms since the previous Index, but *more* deprived relative to all other LADs, or vice versa. Furthermore, a change in rank – even of five places – may not represent a large increase or decrease in absolute levels of deprivation.

Local concentration of deprivation

5.3.22 Chart 5.6 shows the change in LAD rank on the local concentration measure over the six updates of the IMD. Of the most deprived 10 per cent of LADs based on this measure on the 2025 Index, thirteen LADs (highlighted in dark blue) have experienced an increase in relative deprivation on this measure of at least five rank places since the 2019 Index. Of these, three LADs have moved 10 or more rank places since the 2019 Index: Oldham, Rotherham and Doncaster.

5.3.23 There are nine LADs in the most deprived 10 per cent of LADs on the 2025 Index which have experienced a decrease in relative deprivation on this measure of at least five rank places since the 2019 Index (highlighted in light blue). Of these, Knowsley experienced the greatest decrease in relative deprivation, moving 17 rank places from the 2019 Index.

Chart 5.6. The most deprived LADs according to the local concentration summary measure of the Index of Multiple Deprivation 2025, showing changes in rank since earlier versions of the Index



Note that any change in rank position represents *relative* change only. It is possible that a LAD may have become *less* deprived in real terms since the previous Index, but *more* deprived relative to all other LADs, or vice versa. Furthermore, a change in rank – even of five places – may not represent a large increase or decrease in absolute levels of deprivation.

5.4 Persistent deprivation

5.4.1 The charts above showed that, while there is some variation in the ranking of LADs between updates of the Indices, some Districts have been ranked consistently among the most deprived according to the five updates of the IoD (2025, 2019, 2015, 2010, 2007 and 2004).

5.4.2 This section explores the extent to which the most deprived LSOAs according to the IMD 2025 have been persistently ranked as deprived. Table 5.3 shows the LSOAs ranked among the most deprived 1 per cent of areas in England based on the IMD in each of the six updates of the IoD. [34]

Table 5.3. LSOAs that are consistently in the most deprived 1 per cent of areas nationally based on the Index of Multiple Deprivation 2025, 2019, 2015, 2010, 2007 and 2004, by LAD

LAD	Number of LSOAs in most deprived 1 per cent of areas
Liverpool	8
Blackpool	6
Wirral	5
St. Helens	4
Bradford	3
Manchester	3
Rochdale	2
Redcar and Cleveland	2
Mansfield	2
Middlesbrough	2
Doncaster	2
Blackburn with Darwen	1
Sunderland	1
Tendring	1
Kingston upon Hull, City of	1
Burnley	1
Salford	1
Hartlepool	1
Birmingham	1
Plymouth	1
Knowsley	1
Stockton-on-Tees	1
County Durham	1
Great Yarmouth	1
North East Lincolnshire	1

[34] The analysis is based on the 30,832 Lower-layer Super Output Areas that have not changed boundaries between 2001 and 2021 versions of the LSOA geography.

Newcastle upon Tyne	1
Leeds	1
Nottingham	1
Wakefield	1
Bolton	1
Sefton	1
Oldham	1
Thanet	1

5.4.3 At an even ever more extreme level, there are three LSOAs that have been ranked among the most deprived 100 LSOAs on each of the IoD updates (2025, 2019, 2015, 2010, 2007 and 2004): One in Wirral (in Bidston Hill), one in Middlesbrough (in Ayresome) and one in Rochdale (Central Rochdale & Mandale Park).

Table 5.4. LSOAs that rank within the most deprived 100 areas on all six of the Indices of Multiple Deprivation from 2004 to 2025

LAD	LSOA code	Area name (MSOA)
Rochdale	E01005482	Central Rochdale & Mandale Park
Middlesbrough	E01012041	Ayresome
Wirral	E01007122	Bidston Hill

Note that the 'area name' in the above table refers to the Middle layer Super Output Area (MSOA) within which the LSOA is located.

Appendix A. How to aggregate to different geographies

A.1.1. The Indices of Deprivation (IoD) 2025 have been produced at Lower-layer Super Output Area (LSOA) level, using the current (2021) LSOAs. As was with previous Indices, ranks and scores have been provided at LSOA level.

A.1.2. Summary measures for the Index of Multiple Deprivation (IMD), domains and supplementary Indices have been produced for the following higher-level geographies: Local Authority Districts (LADs), upper tier Local Authorities, Built up Areas, Local Enterprise Partnerships, Local Resilience Forums, and Integrated Care Boards.

A.1.3. Guidance is provided in this Appendix on how to aggregate the Indices to other geographies such as wards or bespoke local areas, using the 'average score' summary measure[35] for the IMD[36]. Users should follow a three-step process:

1. Identify the lookup table from LSOAs (for which data is published) to the areas of interest (for which data is required);
2. Sum the population-weighted scores from LSOAs to the areas of interest (using the published population denominators);
3. Rank the resulting scores across the areas of interest.

A.1.4. These steps are outlined below.

1. Identify the lookup table from LSOAs (for which data is published) to the areas of interest (for which data is required)

A.1.5. This lookup can be obtained in a number of ways:

- In some cases, the lookup table may be published. For example, the Office for National Statistics produces a number of lookup tables for different geographies, published on their open geography portal or available on request.
- In other cases, the lookup table may be available to the user. For example, LADs often define local service delivery areas, or priority neighbourhoods, based on clustering together LSOAs.
- Otherwise, users may need to develop their own lookup tables. This can be done in a number of ways, for example: using a Geographical Information Systems application to identify what proportion of each LSOA geographical area 'sits' within each of the areas of interest; or comparison of residential addresses to identify what proportion of each LSOA's residential population (as

[35] 'Average score' is one of a range of possible summary measures described in Chapter 3. It is recommended for use here because it gives a measure of the whole area, covering both deprived and non-deprived areas whilst being designed so that highly deprived areas do not tend to average out. It is also one of the more straightforward summary measures to calculate and interpret.

[36] This summary measure could be produced for any of the other neighbourhood-level Indices e.g. the Income Deprivation Domain, following the same principles. The Index of Multiple Deprivation is used here since it is anticipated that it will be the most frequently aggregated.

approximated by the residential addresses) ‘sits’ within each of the areas of interest. Once identified, each LSOA can be assigned to an area of interest based on where the majority of the LSOA sits: the end result should be a lookup table that assigns each LSOA to one of the areas of interest.

A.1.6. In cases where LSOA boundaries do not exactly fit the boundaries of the area of interest, this will involve approximation. In other words, the lookup table will not be exact. This approximation will tend to have a larger effect when aggregating to small geographies that have boundaries that do not match LSOA boundaries.

2. Sum the population-weighted scores from LSOA to the areas of interest

A.1.7. Where the areas of interest are larger than LSOAs, the approach is to sum together the LSOA scores. In order to give each LSOA the appropriate weight into the sum, the LSOA scores should be weighted by the LSOA population size. This means that each of the LSOA scores should be multiplied by the relevant LSOA population before summing, and the final scores for the areas of interest should be divided by the sum of the relevant LSOA populations in that area.

A.1.8. Population denominators can be found in File 6. To calculate the average IMD score, the ‘total population’ should be used.

A.1.9. Where the areas of interest are smaller than LSOA, users will need to decide whether to use the LSOA scores directly for the smaller areas or use small area estimation techniques to model the scores down to the smaller areas.

Worked example

A.1.10. A user wishes to calculate the IMD average score for an area A in her LAD. Having compared the boundaries for A against the LSOA boundaries, she has identified that A can be approximated as five LSOAs. These five LSOAs have populations of 1,200, 1,800, 1,400, 1,500 and 1,700, giving a total population of 7,600, and have IMD scores of 44.81, 26.75, 64.58, 59.43 and 14.34 respectively.

A.1.11. To calculate the average score for A, each LSOA score is multiplied by the LSOA population. These values are then summed, before dividing by the population for A to create the average score for A. Thus, the average score for area A would be calculated as:

Average score for A =	(44.81 x 1,200 + 26.75 x 1,800 + 64.58 x 1,400 + 59.43 x 1,500 + 14.34 x 1,700) / 7,600
Average score for A =	40.24

3. Rank the resulting scores across the areas of interest

A.1.12. In order to interpret the resulting scores, it is recommended that they are ranked across the areas of interest, where a rank of 1 (most deprived) is assigned to the area with the highest score.

A.1.13. In addition, users may want to identify where the resulting scores would lie in the distribution of all LSOA scores. This would enable the user to say for example “when

compared to deprivation levels across England, the deprivation level for the X area shows that it would lie in the most deprived 10 per cent of all LSOAs nationally”.

Appendix B. Combining the domains together using different weights

B.1.1. The overall Index of Multiple Deprivation (IMD) 2025 is produced by combining the seven standardised domain scores, using the weights in the following table.

Table B.1. Domain weights used to construct the Index of Multiple Deprivation 2019

Domain	Domain weight (%)
Income Deprivation Domain	22.5
Employment Deprivation Domain	22.5
Health Deprivation and Disability Domain	13.5
Education, Skills and Training Deprivation Domain	13.5
Barriers to Housing and Services Domain	9.3
Crime Domain	9.3
Living Environment Deprivation Domain	9.3

B.1.2. It is possible to use the component domains to produce alternative measures of deprivation at LSOA, based on different domain weights than are used in the IMD.

B.1.3. Users would typically do this for analytical purposes where they want to exclude the effect of one or more domains. For example, health researchers may want to use the IMD as a factor to help explain the variation in health outcomes across a sample of areas or individuals. To exclude the effect of the Health Deprivation and Disability Domain, they may want to use a modified measure of deprivation in their statistical analysis, with the Health Deprivation and Disability Domain weight set to zero.

B.1.4. To combine the domains using different weights to create a modified deprivation ranking, users should follow a three-step process:

1. Use the standardised domain scores[37], which are provided in the file 9 (see Appendix F for details of published data and spreadsheets);
2. Combine the seven standardised domain scores together with the desired weights to create the modified measure of deprivation. As noted above, to exclude one or more domains from the reconstituted composite measure, the weights for the excluded domains would be set to zero. This can be achieved in the Excel spreadsheet containing the standardised scores, or any standard statistical application, using the following equation:
   Income Deprivation Domain x domain-weight
   + Employment Deprivation Domain x domain-weight
   + Health Deprivation and Disability Domain x domain-weight
   + Education, Skills and Training Deprivation Domain x domain-weight
   + Barriers to Housing and Services Domain x domain-weight

[37] The standardised domain scores have been standardised by ranking and then transformed to an exponential distribution. These standardised domain scores have been published to be used as the basis for users to combine the domains together using different weights.

+ *Crime Domain x domain-weight*
+ *Living Environment Deprivation Domain x domain-weight.*

3. Rank the output, to produce the ranked scores to be used in analysis by users.

Appendix C. Summary measures for Local Enterprise Partnerships and Integrated Care Boards

C.1.1. The tables below show the 20 higher-level areas ranked as most deprived according to each of the summary measures (a rank of 1 corresponds with the most deprived area). Table C.1 shows the Integrated Care Boards and C.2 shows Local Enterprise Partnerships.

Table C.1: The most deprived Integrated Care Boards on each of the summary measures of the Index of Multiple Deprivation 2025 and on the income and employment scale measures

	Average Rank	Average Score	Proportion of LSOAs in most deprived 10 per cent nationally	Extent	Local Concentration	Income Scale	Employment Scale
1	NHS Birmingham and Solihull Integrated Care Board	NHS Birmingham and Solihull Integrated Care Board	NHS Birmingham and Solihull Integrated Care Board	NHS Birmingham and Solihull Integrated Care Board	NHS Birmingham and Solihull Integrated Care Board	NHS Greater Manchester Integrated Care Board	NHS North East and North Cumbria Integrated Care Board
2	NHS Black Country Integrated Care Board	NHS Black Country Integrated Care Board	NHS Greater Manchester Integrated Care Board	NHS Black Country Integrated Care Board	NHS South Yorkshire Integrated Care Board	NHS North East and North Cumbria Integrated Care Board	NHS Greater Manchester Integrated Care Board
3	NHS North East London Integrated Care Board	NHS Greater Manchester Integrated Care Board	NHS South Yorkshire Integrated Care Board	NHS Greater Manchester Integrated Care Board	NHS Cheshire and Merseyside Integrated Care Board	NHS North East London Integrated Care Board	NHS Cheshire and Merseyside Integrated Care Board
4	NHS Greater Manchester Integrated Care Board	NHS South Yorkshire Integrated Care Board	NHS West Yorkshire Integrated Care Board	NHS South Yorkshire Integrated Care Board	NHS North East and North Cumbria Integrated Care Board	NHS West Yorkshire Integrated Care Board	NHS West Yorkshire Integrated Care Board
5	NHS South Yorkshire Integrated Care Board	NHS North East and North Cumbria Integrated Care Board	NHS Cheshire and Merseyside Integrated Care Board	NHS West Yorkshire Integrated Care Board	NHS West Yorkshire Integrated Care Board	NHS Cheshire and Merseyside Integrated Care Board	NHS North East London Integrated Care Board
6	NHS North Central London Integrated Care Board	NHS West Yorkshire Integrated Care Board	NHS North East and North Cumbria Integrated Care Board	NHS North East and North Cumbria Integrated Care Board	NHS Greater Manchester Integrated Care Board	NHS North West London Integrated Care Board	NHS North West London Integrated Care Board
7	NHS North East and North Cumbria Integrated Care Board	NHS North East London Integrated Care Board	NHS Lancashire and South Cumbria Integrated Care Board	NHS Cheshire and Merseyside Integrated Care Board	NHS Lancashire and South Cumbria Integrated Care Board	NHS Birmingham and Solihull Integrated Care Board	NHS Birmingham and Solihull Integrated Care Board
8	NHS North West London Integrated Care Board	NHS Lancashire and South Cumbria Integrated Care Board	NHS Black Country Integrated Care Board	NHS Lancashire and South Cumbria Integrated Care Board	NHS Humber and North Yorkshire Integrated Care Board	NHS North Central London Integrated Care Board	NHS Lancashire and South Cumbria Integrated Care Board
9	NHS West Yorkshire Integrated Care Board	NHS North Central London Integrated Care Board	NHS Humber and North Yorkshire Integrated Care Board	NHS North Central London Integrated Care Board	NHS Black Country Integrated Care Board	NHS South East London Integrated Care Board	NHS South East London Integrated Care Board
10	NHS Cornwall and the Isles of Scilly Integrated Care Board	NHS Cheshire and Merseyside Integrated Care Board	NHS Nottingham and Nottinghamshire Integrated Care Board	NHS North East London Integrated Care Board	NHS Nottingham and Nottinghamshire Integrated Care Board	NHS Lancashire and South Cumbria Integrated Care Board	NHS South Yorkshire Integrated Care Board

11	NHS Lancashire and South Cumbria Integrated Care Board	NHS North West London Integrated Care Board	NHS Lincolnshire Integrated Care Board	NHS Nottingham and Nottinghamshire Integrated Care Board	NHS Derby and Derbyshire Integrated Care Board	NHS Black Country Integrated Care Board	NHS Kent and Medway Integrated Care Board
12	NHS Cheshire and Merseyside Integrated Care Board	NHS Nottingham and Nottinghamshire Integrated Care Board	NHS Staffordshire and Stoke-on-Trent Integrated Care Board	NHS Derby and Derbyshire Integrated Care Board	NHS Lincolnshire Integrated Care Board	NHS South Yorkshire Integrated Care Board	NHS Black Country Integrated Care Board
13	NHS Lincolnshire Integrated Care Board	NHS Cornwall and the Isles of Scilly Integrated Care Board	NHS North Central London Integrated Care Board	NHS North West London Integrated Care Board	NHS Staffordshire and Stoke-on-Trent Integrated Care Board	NHS Kent and Medway Integrated Care Board	NHS North Central London Integrated Care Board
14	NHS Norfolk and Waveney Integrated Care Board	NHS Lincolnshire Integrated Care Board	NHS Derby and Derbyshire Integrated Care Board	NHS Humber and North Yorkshire Integrated Care Board	NHS Coventry and Warwickshire Integrated Care Board	NHS Humber and North Yorkshire Integrated Care Board	NHS Humber and North Yorkshire Integrated Care Board
15	NHS South East London Integrated Care Board	NHS Norfolk and Waveney Integrated Care Board	NHS Coventry and Warwickshire Integrated Care Board	NHS Staffordshire and Stoke-on-Trent Integrated Care Board	NHS Leicester, Leicestershire and Rutland Integrated Care Board	NHS Hampshire and Isle of Wight Integrated Care Board	NHS Hampshire and Isle of Wight Integrated Care Board
16	NHS Nottingham and Nottinghamshire Integrated Care Board	NHS Derby and Derbyshire Integrated Care Board	NHS Leicester, Leicestershire and Rutland Integrated Care Board	NHS Leicester, Leicestershire and Rutland Integrated Care Board	NHS Norfolk and Waveney Integrated Care Board	NHS Sussex Integrated Care Board	NHS Sussex Integrated Care Board
17	NHS Kent and Medway Integrated Care Board	NHS Kent and Medway Integrated Care Board	NHS Kent and Medway Integrated Care Board	NHS Lincolnshire Integrated Care Board	NHS Kent and Medway Integrated Care Board	NHS South West London Integrated Care Board	NHS Nottingham and Nottinghamshire Integrated Care Board
18	NHS Devon Integrated Care Board	NHS Humber and North Yorkshire Integrated Care Board	NHS Norfolk and Waveney Integrated Care Board	NHS Kent and Medway Integrated Care Board	NHS North Central London Integrated Care Board	NHS Nottingham and Nottinghamshire Integrated Care Board	NHS South West London Integrated Care Board
19	NHS Shropshire, Telford and Wrekin Integrated Care Board	NHS South East London Integrated Care Board	NHS Bristol, North Somerset and South Gloucestershire Integrated Care Board	NHS Coventry and Warwickshire Integrated Care Board	NHS Bristol, North Somerset and South Gloucestershire Integrated Care Board	NHS Hertfordshire and West Essex Integrated Care Board	NHS Devon Integrated Care Board
20	NHS Derby and Derbyshire Integrated Care Board	NHS Staffordshire and Stoke-on-Trent Integrated Care Board	NHS North East London Integrated Care Board	NHS Bedfordshire, Luton and Milton Keynes Integrated Care Board	NHS Suffolk and North East Essex Integrated Care Board	NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board	NHS Staffordshire and Stoke-on-Trent Integrated Care Board

Table C.2: The most deprived Local Enterprise Partnerships on each of the summary measures of the Index of Multiple Deprivation 2025 and on the income and employment scale measures

	Average Rank	Average Score	Proportion of LSOAs in most deprived 10 per cent nationally	Extent	Local Concentration	Income Scale	Employment Scale
1	Black Country	Liverpool City Region	Tees Valley	Black Country	Tees Valley	The London Economic Action Partnership	The London Economic Action Partnership
2	Liverpool City Region	Tees Valley	Liverpool City Region	Liverpool City Region	Liverpool City Region	South East	South East
3	Greater Manchester	Black Country	Greater Birmingham and Solihull	Tees Valley	South Yorkshire	Greater Manchester	Greater Manchester
4	South Yorkshire	Greater Manchester	Greater Manchester	Greater Manchester	Hull and East Yorkshire	Leeds City Region	Leeds City Region
5	Tees Valley	South Yorkshire	South Yorkshire	Greater Birmingham and Solihull	Lancashire	Greater Birmingham and Solihull	Greater Birmingham and Solihull
6	Greater Birmingham and Solihull	Greater Birmingham and Solihull	Hull and East Yorkshire	South Yorkshire	Leeds City Region	North East	North East
7	North East	Leeds City Region	Leeds City Region	Leeds City Region	Greater Birmingham and Solihull	D2N2	D2N2
8	Leeds City Region	North East	Lancashire	North East	Greater Manchester	Liverpool City Region	Liverpool City Region
9	Cornwall and Isles of Scilly	Lancashire	North East	Lancashire	North East	Black Country	Lancashire
10	Lancashire	Hull and East Yorkshire	Black Country	Hull and East Yorkshire	Greater Lincolnshire	Lancashire	South Yorkshire
11	The London Economic Action Partnership	Greater Lincolnshire	Greater Lincolnshire	D2N2	Black Country	South Yorkshire	Black Country
12	Greater Lincolnshire	The London Economic Action Partnership	D2N2	Greater Lincolnshire	D2N2	South East Midlands	Heart of the South West
13	Hull and East Yorkshire	Cornwall and Isles of Scilly	Stoke-on-Trent and Staffordshire	The London Economic Action Partnership	Cumbria	Heart of the South West	South East Midlands
14	D2N2	D2N2	Cumbria	Leicester and Leicestershire	Stoke-on-Trent and Staffordshire	New Anglia	New Anglia
15	Cumbria	Cumbria	Coventry and Warwickshire	Stoke-on-Trent and Staffordshire	Coventry and Warwickshire	Coast to Capital	Greater Lincolnshire
16	Heart of the South West	Stoke-on-Trent and Staffordshire	Leicester and Leicestershire	Cumbria	Leicester and Leicestershire	Solent	Coast to Capital
17	The Marches	Leicester and Leicestershire	Solent	Solent	Solent	Greater Lincolnshire	Solent
18	New Anglia	New Anglia	West of England	Coventry and Warwickshire	South East	Stoke-on-Trent and Staffordshire	Stoke-on-Trent and Staffordshire

19	South East	South East	South East	South East	New Anglia	Leicester and Leicestershire	Tees Valley
20	Stoke-on-Trent and Staffordshire	Solent	Cheshire and Warrington	South East Midlands	West of England	West of England	West of England

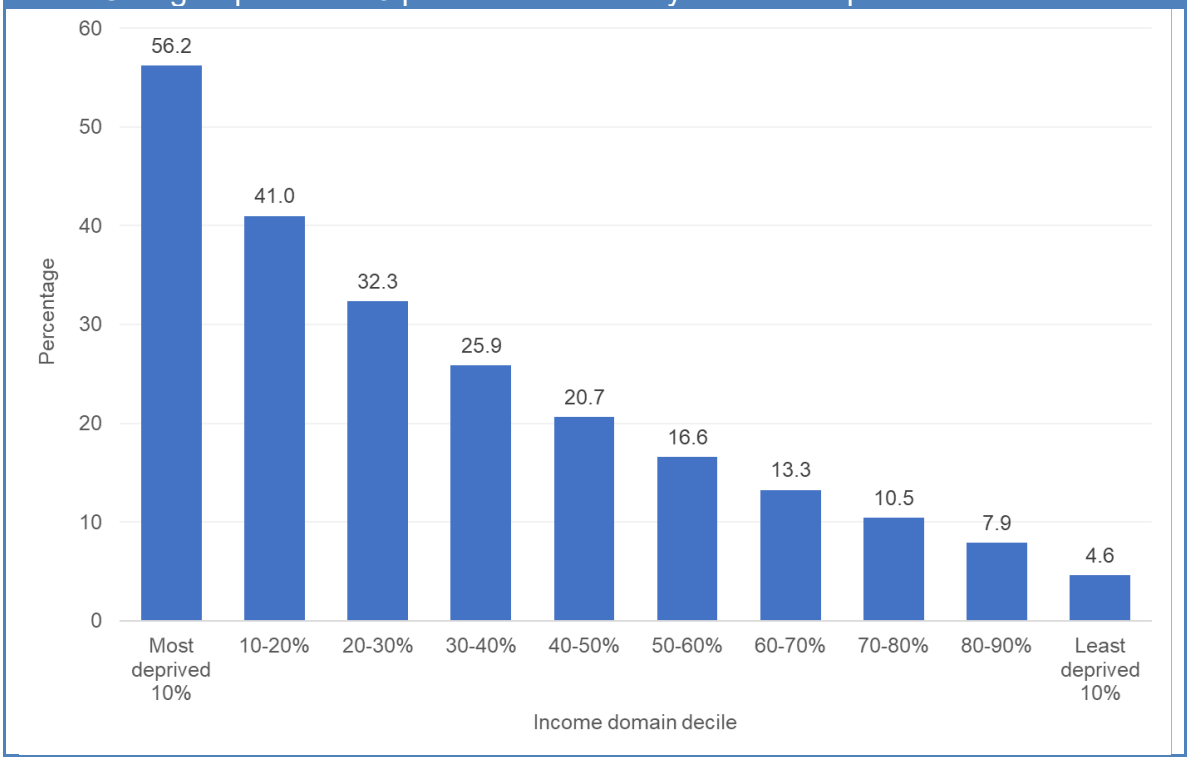
Appendix D. Domain summaries

D.1.1. This Appendix presents analysis of the Indices of Deprivation (IoD) 2025 domains and sub-domains.

D.2. Income Deprivation Domain

D.2.1. The chart below shows the range of income deprivation for Lower-layer Super Output Areas (LSOAs) grouped into 10 per cent bands, or 'deciles', based on their Income Deprivation Domain rank.

Chart D.1. Proportion of the population living in income deprived households, for all LSOAs grouped into 10 per cent 'deciles' by Income Deprivation Domain rank



D.2.2. In the most income deprived decile of LSOAs in England, an average of 56.2 per cent of the population are income deprived[38]. Within this decile, the range for LSOAs is from 99.8 per cent to 46.4 per cent, showing the high rates of deprivation that exist in the most deprived LSOAs. The least income deprived decile of LSOAs has on average only 4.6 per cent of people living in income deprived households.

D.2.3. There are 2,525 LSOAs in England where more than half of all people are income deprived (7.5 per cent of all LSOAs in England). The Local Authority Districts (LADs)

[38] The decile averages shown for the Income Deprivation Domain, the Income Deprivation Affecting Children Index, the Income Deprivation Affecting Older People Index and the Employment Deprivation Domain are calculated by (a) generating the decile level numerator by summing the numerators of the Lower-layer Super Output Areas contained in that decile (b) generating the decile level denominator by summing the denominators of the areas contained in that decile and (c) dividing the numerator by the denominator and multiplying by 100 to obtain a percentage.

with the highest numbers of these LSOAs are Birmingham (268 LSOAs), Bradford (91 LSOAs), Manchester (91 LSOAs), Liverpool (77 LSOAs) and Sheffield (67 LSOAs). There are 7,953 LSOAs (23.6 per cent of the total) where more than one-third of people live in income deprivation.

D.2.4. The table below shows the five Local Authority Districts (LADs) with the highest average score on the Income Deprivation Domain[39]. In all five LADs, more than one third of people are income deprived.

Table D.1. LADs with the highest average score on the Income Deprivation Domain

LAD	Percentage of people income deprived
Birmingham	41.7
Tower Hamlets	40.1
Hackney	40.0
Newham	39.0
Barking and Dagenham	38.4

D.2.5. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived 10 per cent of LSOAs nationally on the Income Deprivation Domain. Close to half of all LSOAs in Middlesbrough and Birmingham are ranked among the most deprived 10 per cent on the Income Deprivation Domain, while more than one third of LSOAs in Hartlepool, Blackburn with Darwen and Enfield are in the most deprived decile

Table D.2. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Income Deprivation Domain

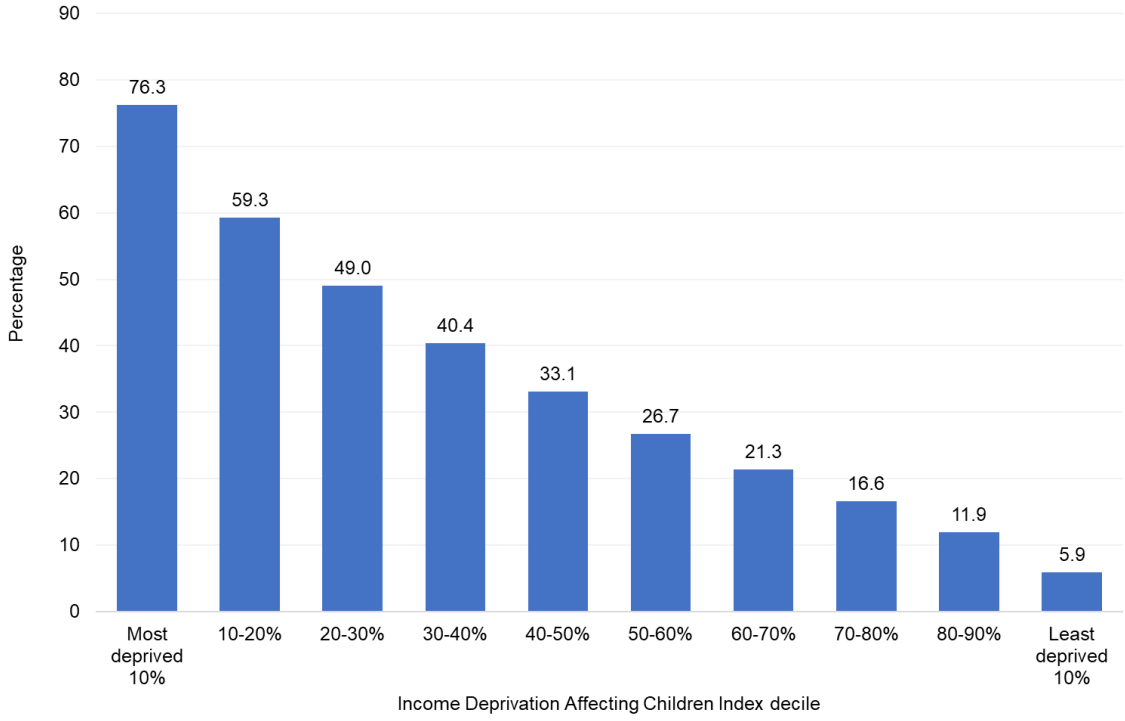
LAD	Percentage of LSOAs
Middlesbrough	45.6
Birmingham	44.8
Hartlepool	40.4
Blackburn with Darwen	38.5
Enfield	38.3

Income Deprivation Affecting Children Index (IDACI)

D.2.6. The chart below shows that in the most deprived decile of LSOAs on the IDACI, on average 76.5 per cent of children aged less than 16 are living in income deprived families[40]. Within this decile, the range is from almost 100 per cent to 65.1 per cent, showing the considerable levels of deprivation that exists in the most deprived LSOAs. In contrast, in the least deprived decile of LSOAs in terms of the IDACI, on average 5.9 per cent of children aged less than 16 live in income deprived families.

[39] This can be interpreted as the proportion of people in the LAD experiencing income deprivation.
[40] The word 'family' is used to designate a 'benefit unit', that is the claimant, any partner and any dependent children (those for whom Child Benefit is received).

Chart D.2. Proportion of children living in income deprived families, for all LSOAs grouped into 10 per cent 'deciles' by Income Deprivation Affecting Children Index rank



D.2.7. In England there are 1,471 LSOAs where more than three quarters of children live in income deprived families. Thirteen percent (194) of these LSOAs are in Birmingham, five percent (75) in Tower Hamlets and four percent in Liverpool (59). The following LADs also contain thirty or more LSOAs where more than three quarters of children live in income deprived families: Sheffield, Leeds, Brent, Enfield, Bradford and Manchester.

D.2.8. There are 8,021 LSOAs, nearly one quarter of the total (24%), where more than half of all children live in income deprived households.

D.2.9. The table below shows the five LADs with the highest average score on the IDACI[41]. In all five LADs, more than half the children are income deprived.

[41] This can be interpreted as the proportion of children in the LAD living in families experiencing income deprivation

Table D.3. LADs with the highest average score on the Income Deprivation Affecting Children Index	
LAD	Percentage of children income deprived
Tower Hamlets	71.5
Hackney	65.0
Birmingham	61.8
Newham	59.9
Brent	58.7

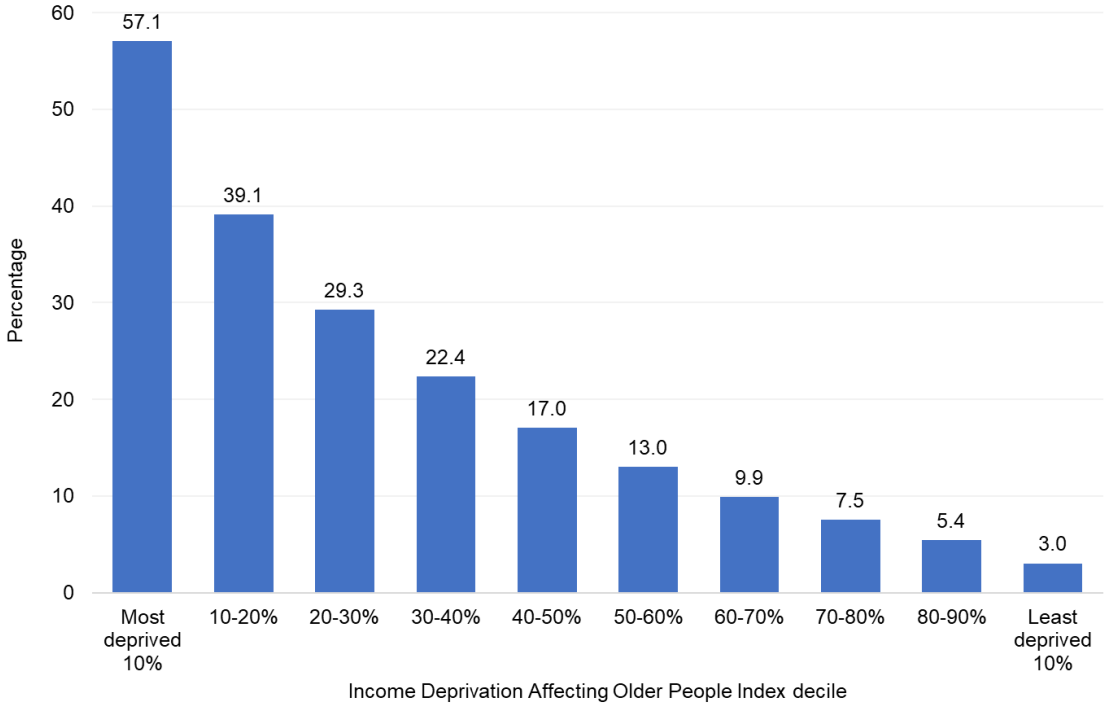
D.2.10. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived 10 per cent of LSOAs nationally on the IDACI

Table D.4. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Income Deprivation Affecting Children Index	
LAD	Percentage of LSOAs
Tower Hamlets	64.5
Birmingham	45.8
Middlesbrough	38.9
Enfield	38.3
Nottingham	36.9

Income Deprivation Affecting Older People Index (IDAOPI)

D.2.11. The chart below shows that the most deprived decile of LSOAs on the IDAOPI has on average 57.1 per cent of older people affected by income deprivation. Within this decile, the range is from 99.8 per cent to 45.3 per cent, again showing the high levels of deprivation that exist in the most deprived LSOAs. In contrast, the least deprived decile of LSOAs in terms of this Index has on average only 3 per cent of older people affected by income deprivation.

Chart D.3. Proportion of older people living in income deprived households, for all LSOAs grouped into 10 per cent 'deciles' by Income Deprivation Affecting Older People Index rank



D.2.12. In England there are 300 LSOAs where more than three quarters of older people are affected by income deprivation. Sixty-one of these LSOAs are located in Tower Hamlets, 36 are in Birmingham and 12 each in Leeds, Manchester and Hackney.

D.2.13. There are 2,471 LSOAs (just over 7 per cent of the total) where more than 50 per cent of older people are income deprived.

D.2.14. The table below shows the five LADs with the highest average score on the IDAOPI[42]. In all five LADs, more than one in three older people are income deprived, and in Hackney and Tower Hamlets more than half of older people are income deprived.

Table D.5. LADs with the highest average score on the Income Deprivation Affecting Older People Index

LAD	Percentage of older people who are income deprived
Tower Hamlets	61.5
Hackney	54.8
Newham	46.8
Islington	44.4
Southwark	40.9

D.2.15. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived 10 per cent of LSOAs nationally on the IDAOPI. In all five LADs presented in the table, around half or more of the LSOAs are in the 10 per cent most

[42] This can be interpreted as the proportion of older people in the LAD experiencing income deprivation

deprived LSOAs nationally on this measure. In Tower Hamlets and Hackney, more than three-quarters of LSOAs are in the most deprived 10 per cent nationally.

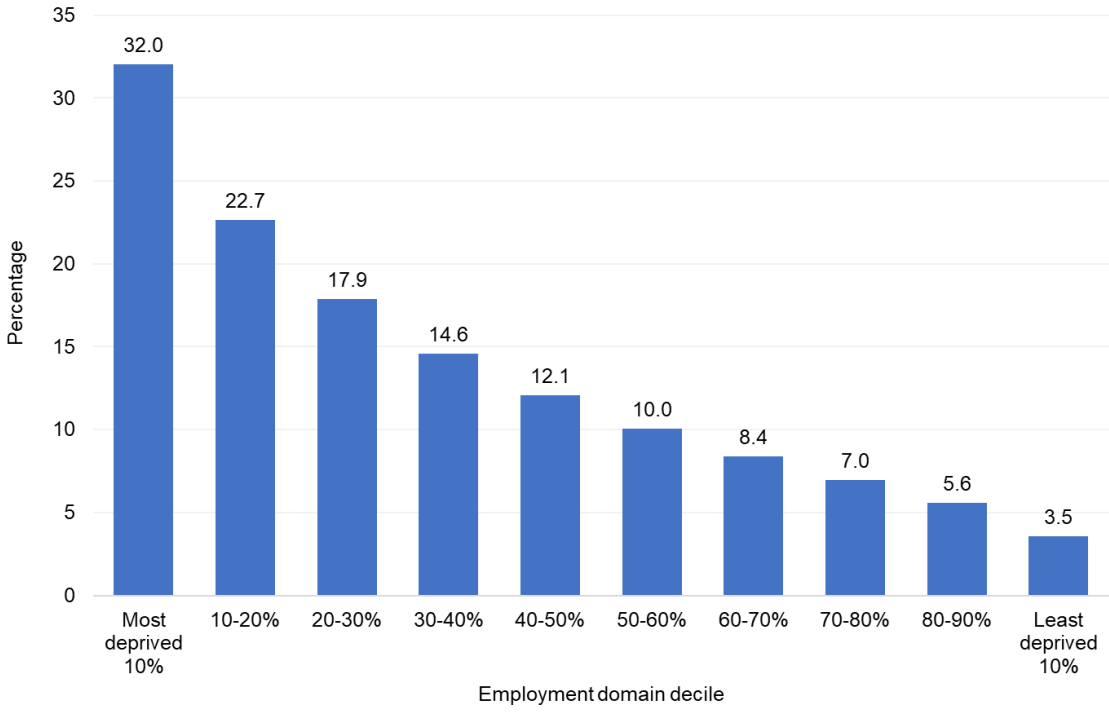
Table D.6. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Income Deprivation Affecting Older People Index

LAD	Percentage of LSOAs
Tower Hamlets	79.3
Hackney	78.5
Newham	54.6
Southwark	49.7
Islington	49.2

D.3. Employment Deprivation Domain

D.3.1. The chart below shows employment deprivation in England by decile. In the most employment deprived decile of LSOAs, an average of 32 per cent of working-age adults (aged 18 to 66) are employment deprived. Within this decile, the range is from 97.8 per cent to 25.7 per cent, showing the high rates of deprivation that exist in the most deprived LSOAs. This compares with 3.5 per cent in the least employment deprived decile of LSOAs in England.

Chart D.4. Proportion of working-age adults in employment deprivation, for all LSOAs grouped into 10 per cent 'deciles' by Employment Deprivation Domain rank



D.3.2. There are 1,062 LSOAs in England (3.1 per cent of the total) where more than one third of working-age adults experience employment deprivation.

D.3.3. The table below shows the five LADs with the highest average score on the Employment Deprivation Domain[43]. In each of these LADs close to one quarter of working-age adults are employment deprived.

Table D.7. LADs with the highest average score on the Employment Deprivation Domain

LAD	Percentage of people employment deprived
Blackpool	26.0
Hartlepool	24.7
Middlesbrough	23.3
Knowsley	23.0
Hastings	21.5

D.3.4. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived decile of LSOAs nationally on the Employment Deprivation Domain. Close to half of the LSOAs in Hartlepool, Middlesbrough and Knowsley are in the 10 per cent most deprived nationally on this measure.

Table D.8. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Employment Deprivation Domain

LAD	Percentage of LSOAs
Hartlepool	49.1
Middlesbrough	46.7
Knowsley	46.0
Liverpool	43.4
Blackpool	41.5

D.4. Health Deprivation and Disability Domain

D.4.1. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived decile of LSOAs nationally on the Health Deprivation and Disability Domain. In all five LADs presented, over half the LSOAs are in the 10 per cent most deprived LSOAs nationally on this measure. In Liverpool just over 60 per cent of LSOAs are in the 10 per cent most deprived nationally on the Health Deprivation and Disability Domain.

[43] This can be interpreted as the proportion of working age people in the LAD experiencing employment deprivation

Table D.9. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Health Deprivation and Disability Domain	
LAD	Percentage of LSOAs
Liverpool	60.6
Blackpool	58.5
Middlesbrough	57.8
Knowsley	57.0
Hartlepool	54.4

D.4.2. The table below shows the five LADs with the highest average score on the Health Deprivation and Disability Domain.

Table D.10. LADs with the with the highest average score on the Health Deprivation and Disability Domain	
LAD	Average LSOA score
Blackpool	1.53
Liverpool	1.27
Knowsley	1.22
Hartlepool	1.20
Manchester	1.09

D.4.3. Blackpool is the most deprived LAD on this measure. Four of the five most deprived LADs are located in North West England.

D.5. Education, Skills and Training Deprivation Domain

D.5.1. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived decile of LSOAs nationally on the Education, Skills and Training Deprivation Domain. In all five LADs presented, 35% of LSOAs are in the 10 per cent most deprived LSOAs nationally on this measure.

Table D.11. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Education, Skills and Training Deprivation Domain	
LAD	Percentage of LSOAs
Middlesbrough	44.4
Kingston upon Hull, City of	42.3
Knowsley	39.0
Bradford	38.1
Boston	35.9

D.5.2. The table below shows the five LADs with the highest average score on the Education, Skills and Training Deprivation Domain.

Table D.12 LADs with the with the highest average score on the Education, Skills and Training Deprivation Domain	
LAD	Average LSOA score
Boston	43.89
Great Yarmouth	42.80
Tendring	41.65
Fenland	41.53
Bradford	40.30

D.5.3. Boston is the most deprived LAD on this measure. Three of the five most deprived LADs are located in the East of England.

D.6. Barriers to Housing and Services Domain

D.6.1. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived decile of LSOAs nationally on the Barriers to Housing and Services Domain. In all five areas over half of LSOAs are in the 10 per cent most deprived nationally.

Table D.13. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Barriers to Housing and Services Domain	
LAD	Percentage of LSOAs
Brent	73.5
Newham	72.4
Hastings	69.8
Ealing	55.3
Haringey	52.4

D.6.2. The table below shows the five LADs with the highest average score on the Barriers to Housing and Services Domain.

Table D.14 LADs with the with the highest average score on the Barriers to Housing and Services Domain	
LAD	Average LSOA score
Brent	41.64
Hastings	40.67
Newham	39.27
Torridge	38.61
Ealing	37.61

D.6.3. Brent is the most deprived LAD on this measure. Three of the five most deprived LADs are located in London.

D.7. Crime Domain

D.7.1. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived decile of LSOAs nationally on the Crime Domain. In all five areas over one third of LSOAs are in the 10 per cent most deprived nationally on the Crime Domain. In Middlesbrough, more than half (54.4 per cent) of LSOAs are in the 10 per cent most deprived nationally.

Table D.15. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Crime Domain	
LAD	Percentage of LSOAs
Middlesbrough	54.4
Kingston upon Hull, City of	41.7
Manchester	39.0
Blackpool	37.2
Hartlepool	35.1

D.7.2. The table below shows the five LADs with the highest average score on the Crime Domain.

Table D.16 LADs with the with the highest average score on the Crime Domain	
LAD	Average LSOA score
Blackpool	0.99
Middlesbrough	0.95
Manchester	0.90
Kingston upon Hull, City of	0.84
Southampton	0.73

5.4.4 Blackpool is the most deprived LAD on this measure.

D.8. Living Environment Deprivation Domain

D.8.1. The table below shows the five LADs with the highest proportion of LSOAs in the most deprived decile of LSOAs nationally on the Living Environment Deprivation Domain. All of the LSOAs in Isles of Scilly are ranked as deprived on this measure.

Table D.13. LADs with the highest proportion of LSOAs in the most deprived 10 per cent of areas nationally on the Living Environment Deprivation Domain	
LAD	Percentage of LSOAs
*Isles of Scilly**	*100.0*
Kensington and Chelsea	73.3
Westminster	58.5
Pendle	54.4
City of London	50.0
Hyndburn	43.4

Note: * The Isles of Scilly LAD consists of a single LSOA. This Isles of Scilly LSOA ranks amongst the most deprived 10% of LSOAs nationally on the Living Environment Domain. As can be seen from Table D.13, this results in 10% of the LSOAs in the Isles of Scilly LAD being ranked in the most deprived nationally.

D.8.2. The table below shows the five LADs with the highest average score on the Living Environment Domain.

Table D.14 LADs with the with the highest average score on the Living Environment Domain	
LAD	Average LSOA score
Isles of Scilly	68.62
Kensington and Chelsea	51.56
City of London	49.46
Pendle	48.94
Westminster	46.97

D.8.3. Isles of Scilly is the most deprived LAD on this measure (however, the Isles of Scilly consists of a single LSOA). Three of the five most deprived LADs are located in London.

Appendix E. What data has been published?

E.1.1. The Indices of Deprivation (IoD) 2025 data sets are available to download at www.gov.uk/government/statistics/english-indices-of-deprivation-2025.

Lower-layer Super Output Area (LSOA) data

E.1.2. Nine sets of data have been published for LSOAs:

1. File 1 - Index of Multiple Deprivation (IMD): The rank and decile for each area, on the overall IMD.
2. File 2 - Domains of deprivation: The rank and decile for each area, for each of the seven domains, as well as the IMD
3. File 3 - Supplementary Indices - Income Deprivation Affecting Children Index (IDACI) and Income Deprivation Affecting Older People Index (IDAOPI): The rank and decile for each area, for the Income Deprivation Affecting Children Index and the Income Deprivation Affecting Older People Index, as well as the IMD.
4. File 4 - Sub-domains of deprivation: The rank and decile for each area, for each of the six sub-domains, as well as their respective domains.
5. File 5 - Scores for the IoD: The scores for each area, for the overall IMD, the seven domains, the supplementary Indices, and the six sub-domains.
6. File 6 - Population denominators: The primary population denominators (all people, children, working age, and older people) used in the IoD 2019. These can be used for aggregating the data sets, weighted by population, to other geographies such as wards (see Appendix A).
7. File 7 - All ranks, deciles and scores for the IoD, and population denominators (CSV file): A single text file containing all of the data sets listed above.
8. File 8 - Underlying indicators. The indicators used to construct the seven domains, for those that are able to be published.
9. File 9 - Transformed domain scores: The seven domain scores in this file have been standardised by ranking and then transformed to an exponential distribution. These transformed domain scores can be used as the basis for users to combine the domains together using different weights (see Appendix B).

Higher-level geography files

E.1.3. Six sets of data have been published for higher-level geographies:

10. Local Authority District Summaries.
11. Upper-tier Local Authority Summaries.
12. Local Enterprise Partnership Summaries.
13. Integrated Care Board Summaries.
14. Local Resilience Forums
15. Built Up Area Summaries

E.1.4. To summarise the level of deprivation in larger areas, a range of summary measures of the IMD 2025, the domains and the two supplementary Indices (Income Deprivation Affecting Children Index and Income Deprivation Affecting Older People Index) have been created [44]. For each of the larger areas the following measures have been published:

Table E.1. The summary measures published for the Index of Multiple Deprivation, the domains and supplementary indices

	Average rank	Average score	Proportion of LSOAs in most deprived 10 per cent nationally	Extent	Local concentration	Scale
IMD	x	x	x	x	x	
Income	x	x	x			x
Employment	x	x	x			x
Education	x	x	x			
Health	x	x	x			
Crime	x	x	x			
Living	x	x	x			
Barriers	x	x	x			
IDACI	x	x	x			
IDAOPI	x	x	x			

E.1.5. These measures are described in section 3.8 of the Technical Report and advice on their interpretation is provided in section 3.3 of the Research Report.

[44] For the Indices of Deprivation 2010 and previous versions, the majority of summary measures published were for the Index of Multiple Deprivation only. In response to demand from users, additional summary measures for the domains and supplementary Indices were published for the Indices of Deprivation 2015 and 2019, and this expanded set has also been published here for the Indices of Deprivation 2025.