Child Health Profile March 2020

Wirral

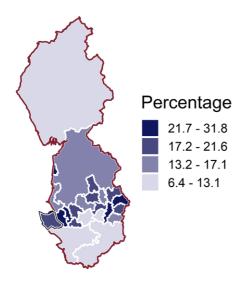
This profile provides a snapshot of child health in this area. It is designed to help local government and health services improve the health and wellbeing of children and tackle health inequalities.

The child population in this area

		Local	Region	England
Live births (2018)		3,242	81,195	625,651
Children aged 0 to 4 years (2018)		18,100	434,800	3,346,700
		5.6%	6.0%	6.0%
Children aged 0 to 19 years		74,100	1,723,700	13,241,300
(2018)		22.9%	23.6%	23.7%
Children aged 0 to 19 years in		75,000	1,776,400	13,889,400
2028 (projected)		22.9%	23.7%	23.5%
School children from minority		4,346	261,232	2,625,194
ethnic groups (2019)		9.0%	24.3%	33.0%
School pupils with social, emotional and mental health needs (2018)		1,764	25,638	193,657
		3.5%	2.3%	2.4%
Children living in poverty aged under 16 years (2016)		19.2%	18.0%	17.0%
Life expectancy at birth	Boys	78.2	78.3	79.6
(2016-2018)	Girls	82.0	81.9	83.2

Children living in poverty

Map of the North West with Wirral outlined, showing the relative levels of children living in poverty.



Map contains Ordnance Survey data.

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Key findings

Overall, comparing local indicators with England averages, the health and wellbeing of children in Wirral is worse than England.

The infant mortality rate is similar to England with an average of 17 infants dying before age 1 each year. Recently there have been 11 child deaths (1-17 year olds) each year on average.

Public health interventions can improve child health at a local level. In this area:

- The teenage pregnancy rate is similar to England, with 111 girls becoming pregnant in a year.
- 13.9% of women smoke while pregnant which is worse than England.
- Breastfeeding rates in this area are worse than England. 58.7% of newborns received breast milk as their first feed. By 6 to 8 weeks after birth, 35.9% of mothers are still breastfeeding.
- The MMR immunisation level does not meet recommended coverage (95%). By age 2, 94.5% of children have had one dose.
- The number of 5 year olds with one or more decayed, missing or filled teeth is not available.
- 10.2% of children in Reception and 18.9% of children in Year 6 are obese.
- The rate of child inpatient admissions for mental health conditions at 155.4 per 100,000 is worse than England. The rate of self-harm at 604.1 per 100,000 is worse than England.

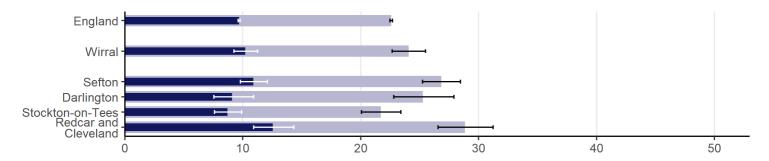
The percentage of young people aged 16 to 18 not in education, employment or training is better than England at 4.9%. 75 children per year received their first reprimand, warning, or conviction. This gives a similar rate to England.

2.1% of babies were born with a low birth weight (less than 2,500g). This is better than England. The recent trend shows no significant change.

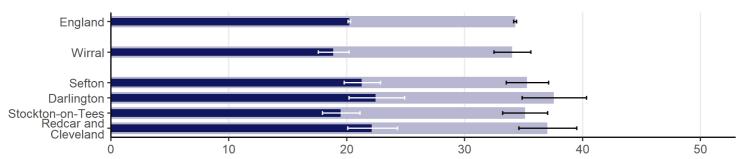
Childhood obesity

These charts show the percentage of children who have excess weight (obese or overweight) in Reception (aged 4-5 years) and Year 6 (aged 10-11 years). They compare Wirral with its statistical neighbours, and the England average. Compared with the England average, this area has a worse percentage of children in Reception (24.1%) and a similar percentage in Year 6 (34.0%) who have excess weight.

Obese All children with excess weight, some of whom are obese Children aged 4-5 years who have excess weight, 2018/19 (percentage)



Children aged 10-11 years who have excess weight, 2018/19 (percentage)

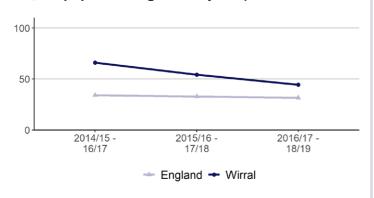


Note: This analysis uses the 85th and 95th centiles of the British 1990 growth reference (UK90) for BMI to classify children as overweight and obese. I indicates 95% confidence interval.

Young people and alcohol

Nationally, the rate of hospital admissions of children and young people for conditions wholly related to alcohol is decreasing, and this is also the case in Wirral. The admission rate in the latest period is worse than the England average.

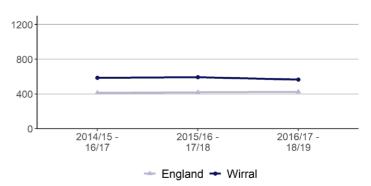
Hospital admissions of children and young people for conditions wholly related to alcohol (rate per 100,000 population aged 0-17 years)



Young people's mental health

Nationally, the rate of young people being admitted to hospital as a result of self-harm is not significantly changing, and this is also the case in Wirral. The admission rate in the latest pooled period is higher than the England average*. Nationally, levels of self-harm are higher among young women than young men.

Young people aged 10 to 24 years admitted to hospital as a result of self-harm (rate per 100,000 population aged 10-24 years)

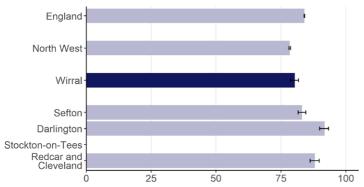


*Information about admissions in the single year 2018/19 can be found on page 4

These charts compare Wirral with its statistical neighbours, and the England and regional averages.

Child development at 2-21/2 years

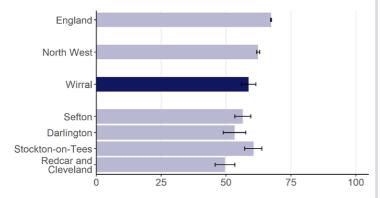
Children at or above expected level of development in all five areas at 2-2 $\frac{1}{2}$ years, 2018/19 (percentage of children reviewed)



80.3% of children aged 2-2½ years were at or above the expected level of development in all five areas of development (communication, gross motor, fine motor, problem-solving and personal-social skills) in 2018/19. This is worse than the England average. A similar proportion of children were at or above the expected level of development for communication skills (90.5%) and a better proportion for personal-social skills (94.4%) when compared with England (90.0% for communication and 92.9% for personal-social skills).

Breastfeeding

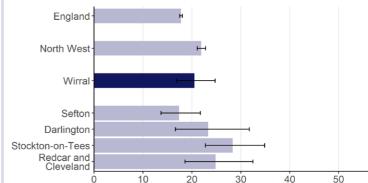
First feed breast milk, 2018/19 (percentage of newborns)



Breastfeeding rates in this area are worse than England. 58.7% of newborns received breast milk as their first feed. By 6 to 8 weeks after birth, 35.9% of mothers are still breastfeeding.

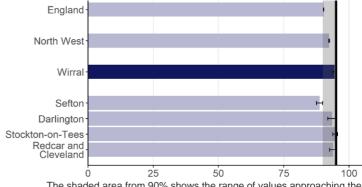
Young people's sexual and reproductive health

Teenage conceptions in girls aged under 18 years, 2017 (rate per 1,000 female population aged 15-17 years)



In 2017, approximately 21 girls aged under 18 conceived, for every 1,000 girls aged 15-17 years living in this area. This is similar to the regional average and similar to the England average. Chlamydia screening is recommended for all sexually active 15-24 year olds. Increasing detection rates indicate improved screening activity; it is not a measure of prevalence. In 2018, the detection rate in this area was 3,430 per 100,000 which is better than the minimum recommended rate of at least 2,300.

Measles, mumps and rubella (MMR) vaccination MMR vaccination coverage by age 2 years, 2018/19 (percentage of eligible children)

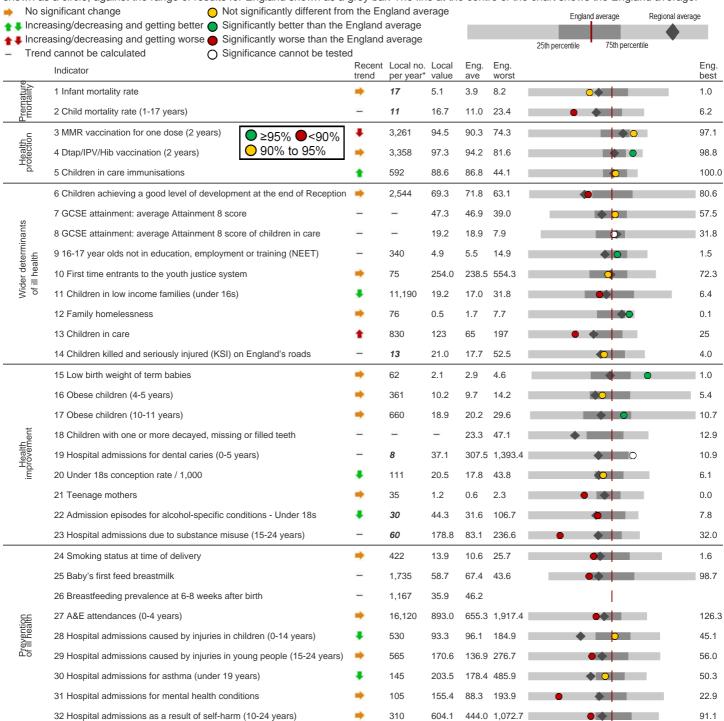


The shaded area from 90% shows the range of values approaching the minimum recommended coverage of 95% (the black line).

Slightly less than 95% (the minimum recommended coverage level) of children have received their first dose of MMR immunisation by the age of two in this area (94.5%). By the age of five, only 92.8% of children have received their second dose of MMR immunisation.

Note: Where data is not available or figures have been suppressed, no bar will appear in the chart for that area.

The chart below shows how children's health and wellbeing in this area compares with the rest of England. The local result for each indicator is shown as a circle, against the range of results for England shown as a grey bar. The line at the centre of the chart shows the England average.



*Numbers in italics are calculated by dividing the total number for the three year period by three to give an average figure Where data is not available or figures have been suppressed, this is indicated by a dash in the appropriate box

Notes and definitions

- standardised rate per 100,000 children aged 1-17, Directly 2016-2018
- % children immunised against measles, mumps and rubella (first dose by age 2), 2018/19
- % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by age 2,
- % children in care with up-to-date immunisations, 2019 % children achieving a good level of development within Early Years Foundation Stage Profile, 2018/19 GCŚE attainment: average attainment 8 score, 2018/19
- GCSE attainment: average attainment 8 score of children looked after, 2018
- % of 16-17 year olds not in education, employment or training (NEET) or whose activity is not known, 2018
 Rate per 100,000 of 10-17 year olds receiving their first
- reprimand, warning or conviction, 2018
- % of children aged under 16 living in families in receipt of out 21 of work benefits or tax credits where their reported income is less than 60% median income, 2016

- 1. Mortality rate per 1,000 live births (aged under 1), 2016-2018 12. Statutory homeless households with dependent children or pregnant women per 1,000 households, 2017/18
 - Rate of children looked after at 31 March per 10,000 population aged under 18, 2019
 - Crude rate of children aged 0-15 who were killed or seriously injured in road traffic accidents per 100,000 population, 2016-2018
 - Percentage of live-born babies, born at term, weighing less than 2,500 grams, 2018
 - % school children in Reception year classified as obese.
 - % school children in Year 6 classified as obese, 2018/19 % children aged 5 with one or more decayed, missing or
 - Crude rate per 100,000 (aged 0-5) for hospital admissions for 31 dental caries, 2016/17-2018/19
 - Under 18 conception rate per 1,000 females aged 15-17, 2017
 - % of delivery episodes where the mother is aged less than 18. 2018/19

- 22. Hospital admissions for alcohol-specific conditions under 18. crude rate per 100,000 population, 2016/17-2018/19
- 23. Directly standardised rate per 100,000 (aged 15-24) for hospital admissions for substance misuse, 2016/17-2018/19 % of mothers smoking at time of delivery, 2018/19
- 25. % of newborns who receive breast milk as first feed, 2018/19 26. % of mothers breastfeeding at 6-8 weeks, 2018/19
- Crude rate per 1,000 (aged 0-4) of A&E attendances, 2018/19 28. Crude rate per 10,000 (aged 0-14) for emergency hospital admissions following injury, 2018/19
- 29. Crude rate per 10,000 (aged 15-24) for emergency hospital admissions following injury, 2018/19
 Crude rate per 100,000 (aged 0-18) for emergency hospital
- admissions for asthma, 2018/19
- Crude rate per 100,000 (aged 0-17) for hospital admissions for mental health, 2018/19
- 32. Directly standardised rate per 100,000 (aged 10-24) for hospital admissions for self-harm, 2018/19