

## Child Health Profile March 2020

## Solihull

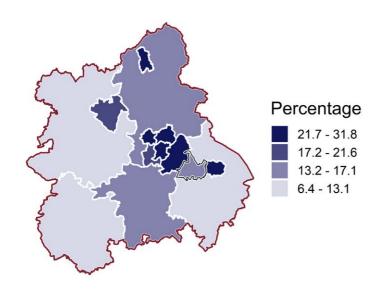
This profile provides a snapshot of child health in this area. It is designed to help local government and health services improve the health and wellbeing of children and tackle health inequalities.

### The child population in this area

		Local	Region	England
Live births (2018)		2,189	67,282	625,651
Children aged 0 to 4 years (2018)		12,400	359,400	3,346,700
		5.8%	6.1%	6.0%
Children aged 0 to 19 years		51,400	1,435,600	13,241,300
(2018)		23.9%	24.3%	23.7%
Children aged 0 to 19 years in		55,100	1,502,200	13,889,400
2028 (projected)		24.4%	24.3%	23.5%
School children from minority		10,526	333,764	2,625,194
ethnic groups (2019)		27.6%	37.5%	33.0%
School pupils with social, emotional and mental health needs (2018)		1,027	19,822	193,657
		2.6%	2.2%	2.4%
Children living in poverty aged under 16 years (2016)		15.9%	20.3%	17.0%
Life expectancy at birth	Boys	80.3	78.9	79.6
(2016-2018)	Girls	84.1	82.7	83.2

### Children living in poverty

Map of the West Midlands with Solihull 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 Solihull is similar to England.

The infant mortality rate is similar to England with an average of 12 infants dying before age 1 each year. Recently there have been 5 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 55 girls becoming pregnant in a year.
- 8.3% of women smoke while pregnant which is better than England.
- 63.0% of newborns received breast milk as their first feed. By 6 to 8 weeks after birth, 45.5% of mothers are still breastfeeding.
- The MMR immunisation level does not meet recommended coverage (95%). By age 2, 93.3% of children have had one dose.
- Dental health is better than England. 16.3% of 5 year olds have one or more decayed, missing or filled teeth.
- Levels of child obesity are better than England.
  8.1% of children in Reception and 18.3% of children in Year 6 are obese.
- The rate of child inpatient admissions for mental health conditions at 85.2 per 100,000 is similar to England. The rate of self-harm at 493.0 per 100,000 is similar to England.

72.6% of children have achieved a good level of development at the end of Reception (similar to England). GCSE attainment is better than England, with an average Attainment 8 score of 50.9.

The level of child poverty is better than England with 15.9% of children living in poverty. The rate of family homelessness is worse than England.

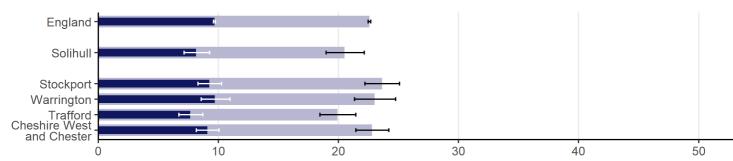
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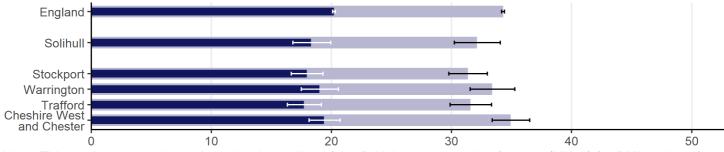
### **Childhood obesity**

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 Solihull with its statistical neighbours, and the England average. Compared with the England average, this area has a better percentage of children in Reception (20.5%) and a better percentage in Year 6 (32.1%) who have excess weight.

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.

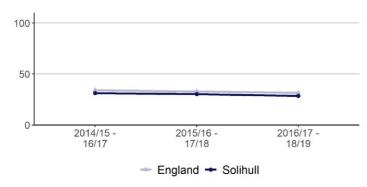
#### Young people and alcohol

Nationally, the rate of hospital admissions of children and young people for conditions wholly related to alcohol is decreasing. This is not the case in Solihull, where there is no significant trend. The admission rate in the latest period is also similar to the England average.

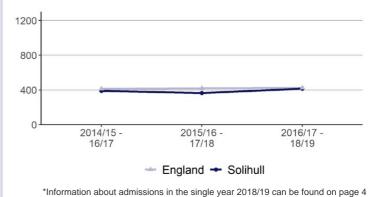
### Young people's mental health Nationally, the rate of young people being admitted to

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

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



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)



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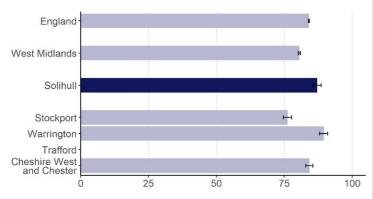
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These charts compare Solihull with its statistical neighbours, and the England and regional averages.

### Child development at 2-21/2 years

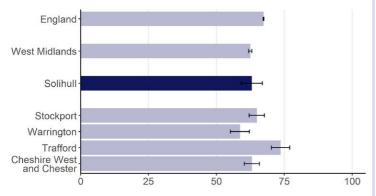
Children at or above expected level of development in all five areas at  $2-2\frac{1}{2}$  years, 2018/19 (percentage of children reviewed)



87.1% 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 better than the England average. A better proportion of children were at or above the expected level of development for communication skills (92.3%) and a better proportion for personal-social skills (94.8%) when compared with England (90.0% for communication and 92.9% for personal-social skills).

#### Breastfeeding

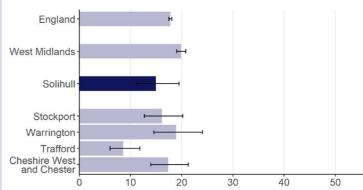
# First feed breast milk, 2018/19 (percentage of newborns)



63.0% of newborns received breast milk as their first feed. By 6 to 8 weeks after birth, 45.5% of mothers are still breastfeeding.

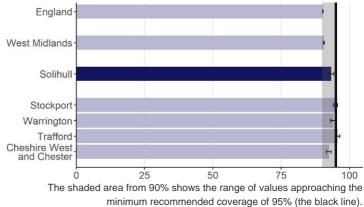
#### Young people's sexual and reproductive health

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



In 2017, approximately 15 girls aged under 18 conceived, for every 1,000 girls aged 15-17 years living in this area. This is lower than 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 1,776 per 100,000 which is worse 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)



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 (93.3%). By the age of five, only 88.5% of children have received their second dose of MMR immunisation.

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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.

- No significant change
- 🛉 🎩 Increasing/decreasing and getting better 🔵 Significantly better than the England average

- O Not significantly different from the England average
- Regional average England average
- ▲↓ Increasing/decreasing and getting worse Significantly worse than the England average 25th percentile 75th percentile Trend cannot be calculated O Significance cannot be tested Recent Local no. Local Eng. Eng Eng. Indicator trend per year\* value best wors ave atur 1 Infant mortality rate 12 3.9 8.2 1.0 5.4 2 Child mortality rate (1-17 years) 5 10.6 11.0 23.4 6.2 97.1 2,245 3 MMR vaccination for one dose (2 years) 93.3 90.3 74.3 Health ≥95% <90% 90% to 95% 4 Dtap/IPV/Hib vaccination (2 years) 2.307 95.9 94.2 81.6 98.8 284 100.0 5 Children in care immunisations 90.7 86.8 44.1 6 Children achieving a good level of development at the end of Reception 4 1.956 72.6 71.8 63.1 80.6 50.9 46.9 7 GCSE attainment: average Attainment 8 score 39.0 57.5 Wider determinants 18.9 19.3 8 GCSE attainment: average Attainment 8 score of children in care 7.9 31.8 9 16-17 year olds not in education, employment or training (NEET) 240 5.1 5.5 14.9 1.5 of ill health 10 First time entrants to the youth justice system . 25 120.3 238.5 554.3 72.3 11 Children in low income families (under 16s) 5.945 15.9 17.0 31.8 6.4 12 Family homelessness 275 31 1.7 77 0.1 13 Children in care 425 90 65 197 25 14 Children killed and seriously injured (KSI) on England's roads 8 18.5 17.7 52.5 4.0 15 Low birth weight of term babies 66 3.3 2.9 4.6 1.0 203 16 Obese children (4-5 vears) 9.7 8.1 14.2 5.4 17 Obese children (10-11 years) 419 18.3 20.2 29.6 10.7 18 Children with one or more decayed, missing or filled teeth 16.3 23.3 47.1 12.9 19 Hospital admissions for dental caries (0-5 years) 307.5 1.393.4 10.9 20 Under 18s conception rate / 1,000 55 14.9 178 43.8 6.1 21 Teenage mothers 10 0.5 0.6 2.3 0.0 13 28.6 106.7 22 Admission episodes for alcohol-specific conditions - Under 18s 31.6 7.8 23 Hospital admissions due to substance misuse (15-24 years) 22 92.9 83 1 236.6 32.0 25.7 24 Smoking status at time of delivery 150 8.3 10.6 1.6 25 Baby's first feed breastmilk 1.005 63.0 67.4 43.6 98.7 26 Breastfeeding prevalence at 6-8 weeks after birth 961 45.5 46.2 27 A&E attendances (0-4 years) 6.655 537.0 655.3 1.917.4 126.3 Prevention of ill health 28 Hospital admissions caused by injuries in children (0-14 years) 410 103.8 96.1 184.9 45 1 29 Hospital admissions caused by injuries in young people (15-24 years) 355 155.5 136.9 276.7 56.0 30 Hospital admissions for asthma (under 19 years) 151.5 178.4 485.9 50.3 75 31 Hospital admissions for mental health conditions 40 85.2 88.3 193.9 22.9 32 Hospital admissions as a result of self-harm (10-24 years) 170 493.0 444.0 1.072.7 91.1 \*Numbers in italics are calculated by dividing the total number for the three year period by three to give an average figure

#### Notes and definitions

- standardised rate per 100,000 children aged 1-17, 2 Directly 2016-2018
- % children immunised against measles, mumps and rubella 3 (first dose by age 2), 2018/19
- 4. % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by age 2, 2018/19
- % children in care with up-to-date immunisations, 2019 % children achieving a good level of development within Early Years Foundation Stage Profile, 2018/19 6
- GCSE attainment: average attainment 8 score, 2018/19
- GCSE attainment: average attainment 8 score of children 8. 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 11 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 13
  - Crude rate of children aged 0-15 who were killed or seriously 14. injured in road traffic accidents per 100,000 population, 2016-2018
  - Percentage of live-born babies, born at term, weighing less 15. than 2,500 grams, 2018
  - % school children in Reception year classified as obese, 16. 2018/19
  - % school children in Year 6 classified as obese, 2018/19 % children aged 5 with one or more decayed, missing or 17 18.
  - filled teeth. 2016/17 Crude rate per 100,000 (aged 0-5) for hospital admissions for 31 dental caries, 2016/17-2018/19 19
  - 20. 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
- Directly standardised rate per 100,000 (aged 15-24) for hospital admissions for substance misuse, 2016/17-2018/19
- 24 % 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 27
- 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 30.
- 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

Where data is not available or figures have been suppressed, this is indicated by a dash in the appropriate box