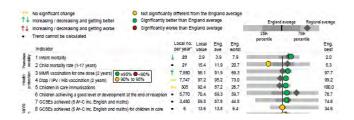
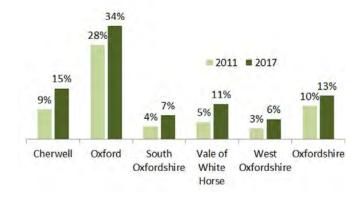
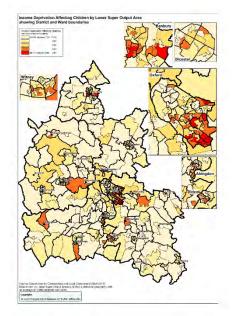
Oxfordshire Children and Young People

Needs Assessment 2018

May 2018







Introduction and contents

 This pack provides data on children and young people in Oxfordshire in support of the Oxfordshire Children and Young People's Strategy

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- POPULATION The number of children and young people living in Oxfordshire is predicted to increase
 - There has been an increase in ethnic diversity of young people

WIDER DETERMINANTS OF HEALTH AND WELLBEING

- Despite higher earnings, income deprivation is an issue in urban and rural areas
- Minority and disadvantaged children in Oxfordshire have been doing less well than similar groups elsewhere
- Buying a family home now significantly more expensive and more children are living in rented accommodation
- Persistent absence rates in secondary schools in Oxfordshire have remained above (worse than) the national average

WELLBEING

- HEALTH AND Majority of indicators of child health show Oxfordshire statistically better than the national average
 - Increase in referrals for mental health services in Oxfordshire especially in younger age groups
 - Obesity has increased slightly for year 6 children
 - National data shows a decline in 11-15 year olds smoking and drinking alcohol. Apparent increase in drug taking (but caution needed with data)
 - Admissions for alcohol-specific conditions in females under 18s in Oxfordshire above the national average
 - Apparent increase in self harm amongst young people in Oxfordshire
 - Increase in children on child protection plan as a result of neglect
 - Increase in looked after children.
 - Health inequalities indicators for Oxfordshire's children and young people tend to highlight areas of deprivation

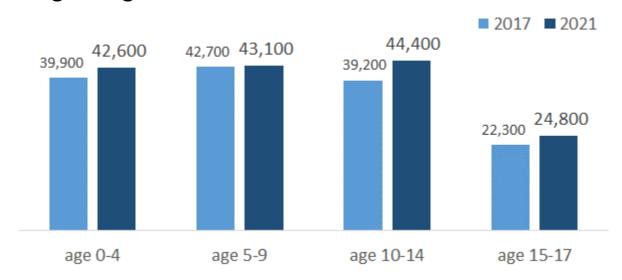
Summary

POPULATION

Number of children and young people living in Oxfordshire predicted to increase

- An estimated 144,100 children and young people aged 0-17 were living in Oxfordshire as of mid 2017
- Predicted to increase to 154,900 by mid 2021 (+7%)

Estimated number of children and young people by age living in Oxfordshire 2017 and 2021



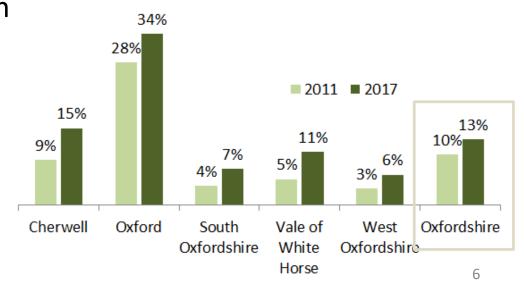
Source: Oxfordshire County Council population projections published April 2018

There has been an increase in ethnic diversity of young people

 13% of children in Oxfordshire's primary schools in 2017 have a first language other than English (up from 10% in 2011)

 Of the total of 5,600 pupils with first language other than English, the majority were in Oxford (3,000) and Cherwell (1,600)

% pupils in years 1-6 (primary) with first language other than English, 2011 and 2017



Source: Pupil Census, Oxfordshire County Council

INCOME AND DEPRIVATION

Despite higher earnings, income deprivation is an issue in urban and rural areas

Children in poverty

- **14,000** children in Oxfordshire were affected by income deprivation (IMD 2015), 81% living in urban areas and 19% in rural Oxfordshire
- Recent End Child Poverty data (Jul-Sep17) shows that, after housing costs, around a quarter (26%) children in Oxford were living in poverty

Greater income inequality is associated with higher prevalence of mental illness and drug misuse in rich societies.

Source: Inequality: an underacknowledged source of mental illness and distress; Picket and Wilkinson, 2010

Income deprivation affecting children

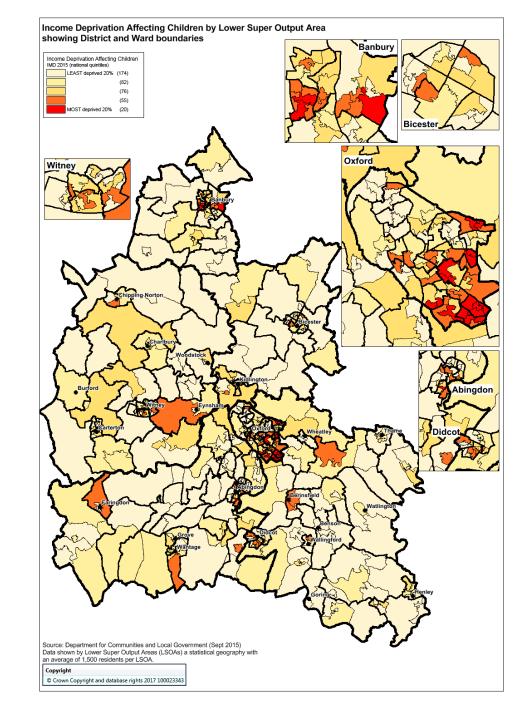
- 7 lower super output areas of Oxfordshire (of 407) are within the top 10% most deprived nationally on Income Deprivation Affecting Children
- Additional 13 areas within 10%-20% most deprived

Income deprivation affecting children is a supplementary index to the IMD 2015 and is the proportion of all children aged 0 to 15 living in income deprived families.

Income deprived families are defined as families that either receive Income Support or income-based Jobseekers

Allowance or income-based Employment and Support

Allowance or Pension Credit (Guarantee) or families not in receipt of these benefits but in receipt of Working Tax Credit or Child Tax Credit with an equivalised income (excluding housing benefit) below 60 per cent of the national median before housing costs. Indicators are DWP from 2012.



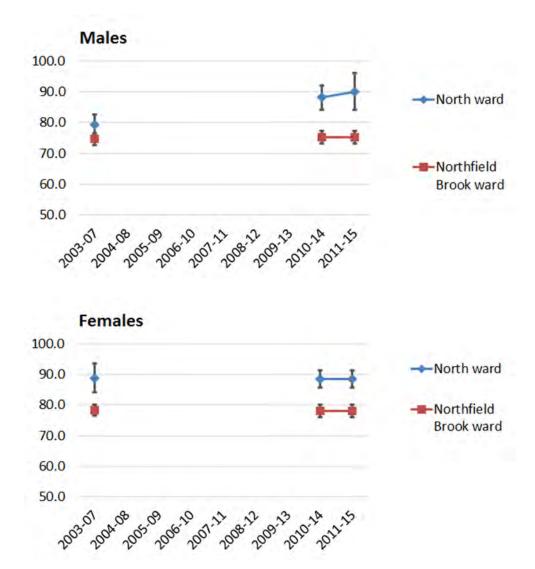
INEQUALITIES

Indication that inequalities in Life Expectancy has increased

in Oxfordshire

Gap in male life
 expectancy between
 North and Northfield
 Brook has increased
 from 4 years in 2003-07
 to 15 years in 2011-15

 Female life expectancy in these wards has remained at similar levels with a gap of just over 10 years



Source: 2011-15 life expectancy by ward data available from Local Health; LE data for previous years from Oxfordshire County Council archive. Note that trend data is not available for wards outside Oxford City as a result of changes in ward boundaries in 2015 and 2016. Note scale does not start at 0

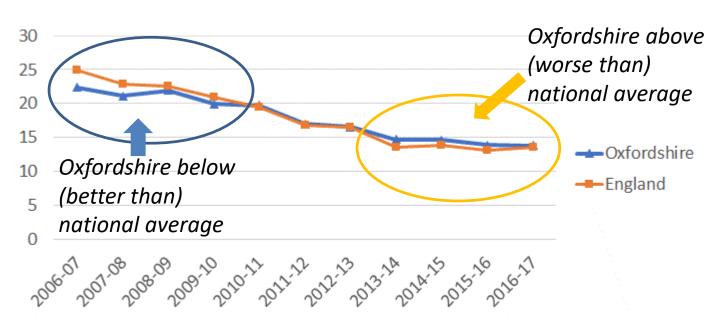
Minority and disadvantaged children in Oxfordshire doing less well than average

- Early Years attainment for Black and for Asian 5 year olds in Oxfordshire below the regional average
- Children aged 10-11 meeting expected standard at Key Stage 2..
 - With SEN support ⇒ 17% Oxfordshire vs 21% England
 - First language other than English ⇒ 55% Oxfordshire vs
 61% England
 - Free School Meals ⇒ 38% Oxfordshire vs 43% England

Persistent absence rates in secondary schools in Oxfordshire have remained above (worse than) the national average

- In academic year 2016-17, 4,448 secondary pupils in Oxfordshire were classed as persistent absentees, up from 4,360 in 2015-16
- The rate has remained above the national average (13.8% in Oxfordshire compared with 13.5% in England)

Percentage of enrolments classed as persistent absentees (missing 10 per cent or more of their own possible sessions) in State Funded Secondary schools



Source: Department for Education Pupil absence in schools in England (released March 2018)

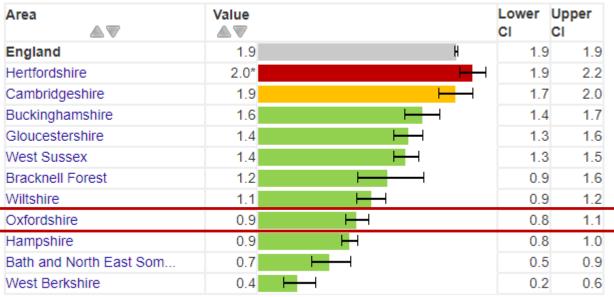
HOUSING

Family homelessness in Oxfordshire below (better than) average

- The number of homeless families in Oxfordshire in 2016-17 was 258, down from 278 in 2015-16
- homelessness in Oxfordshire was below the national average and statistically below 5 of the county's 11 statistical neighbours

Family homelessness (2016-17)

Applicant households eligible for assistance (1996 Housing Act) unintentionally homeless and in priority need - categories of household includes dependent children or pregnant woman



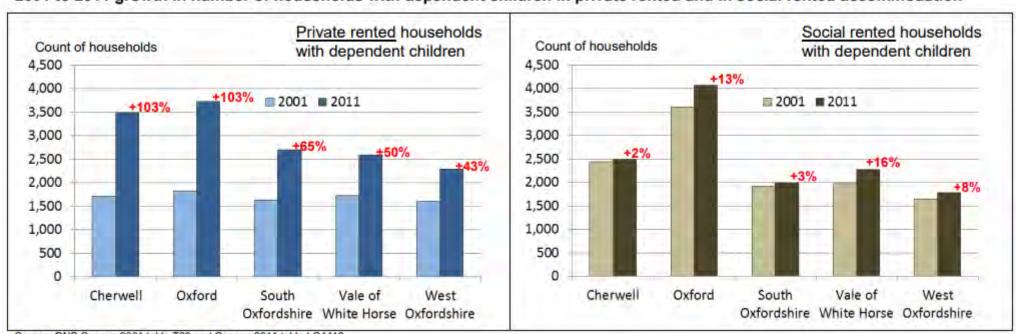
Source: P1E quarterly returns, Department for Communities and Local Government.

Source: PHE Fingertips

Increase in number of households with dependent children in private rented accommodation

- Significant increase in the number of private rented households occupied by families with dependent children in Oxfordshire, from 8,500 in 2001 to 14,800 in 2011 (+74%). Double the growth in all private rented households (with and without children) of 37%.
- The number of social rented households with children has also increased but at a much lower rate.

2001 to 2011 growth in number of households with dependent children in private rented and in social rented accommodation

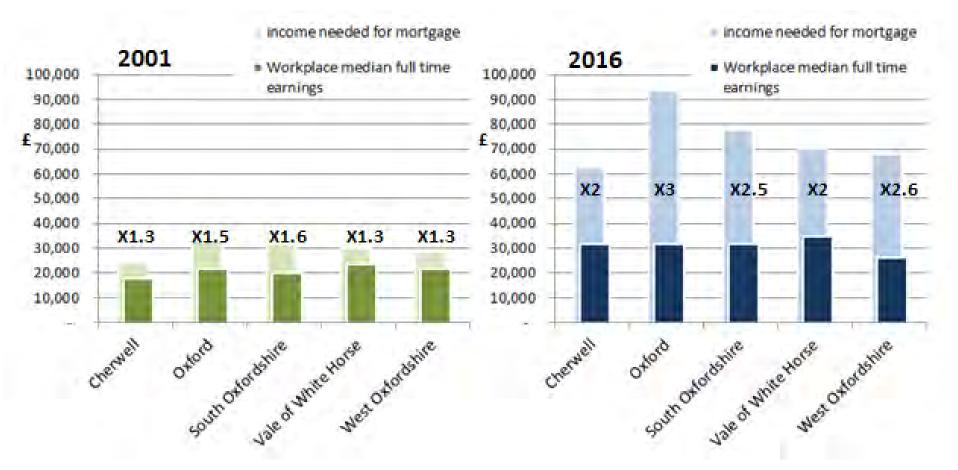


Source: ONS Census 2001 table T08 and Census 2011 table LC4412

Source: ONS Census surveys, analysis by District Data Service

Buying a family home now requires 2-3 times median income

Income required for a mortgage (at 4.5X loan-to-income ratio and 95% loan-to-value for median-priced semi-detached), compared with median full-time annual earnings for workers in the district



Source: ONS Annual Survey of Hours and Earnings; ONS House Price Statistics for Small Areas (rolling year to end Q1 2011 and to end Q1 2016)

HEALTH AND WELLBEING

Majority of indicators of child health show Oxfordshire statistically better than the national average

Child health profile Oxfordshire March 2018

Compared With benchmark

Benchmark Value

Benchmark Value

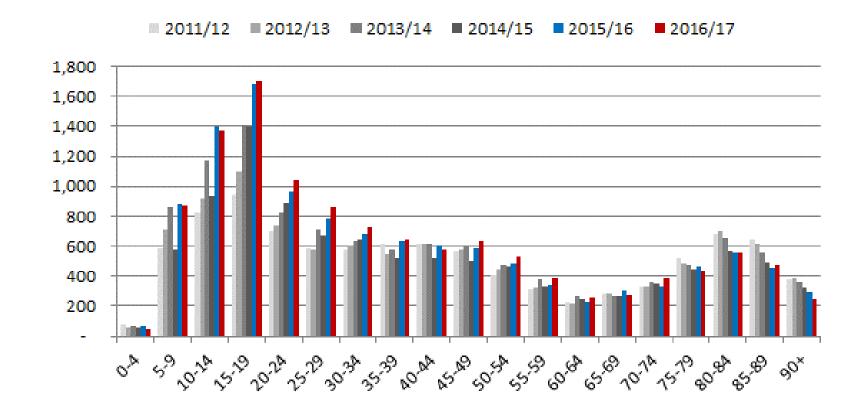
Worst 25th Percentile 75th Percentile Best

						, A	Vorst	25th Percentile	75th Percentile	Best
			Oxon		Region	England		E	England	
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst F	Range		Best
Infant mortality	2014 - 16	-	62	2.6	3.2	3.9	7.9			1.6
Child mortality rate (1-17 years)	2014 - 16	-	56	13.7	9.6	11.6	22.4	C		6.2
MMR vaccination for one dose (2 years) <90% 90% to 95% ≥95%	2016/17		7,391	95.0%	90.8%	91.6%	69.8%			97.5%
Dtap / IPV / Hib vaccination (2 years) <90% 90% to 95% ≥95%	2016/17	•	7,574	97.3%	93.8%	95.1%	74.7%		10	98.6%
Children in care immunisations	2017		360	91.4%	80.9%	84.6%	5.0%			100%
Children achieving a good level of development at the end of reception	2016/17		5,715	72.5%	74.0%	70.7%	60.9%		0	78.9%
GCSEs achieved (5A*-C including English & Maths)	2015/16	+	3,480	59.5%	60.3%	57.8%	44.8%		0	74.6%
GCSEs achieved (5 A*-C inc. English and maths) for children in care	2015	3	6	13.6%	13.7%	13.8%	6.4%		Q	34.6%
16-17 year olds not in education, employment or training (NEET) or whose activity is not known - current method	2016	8	730	5.8%	6.4%	6.0%	44.8%		Q	2.1%
16-18 year olds not in education, employment or training - previous method	2015		780	4.1%*	3.9%	4.2%	7.9%		Ö	1.5%
First time entrants to the youth justice system	2016		164	274.0	232.2	327.1	739.6		0	97.5
Children in low income families (under 16s)	2015		11,825	10.0%	12.5%	16.8%	30.5%			6.1%
Family homelessness	2016/17	-	258	0.9	1.6	1.9	8.4			0.1
Children in care	2017		665	47	51	62	184			20
Children killed and seriously injured (KSI) on England's roads	2014 - 16	-	56	14.8	17.2	17.1	46.8	9		1.3
Low birth weight of term babies	2016	-	155	2.17%	2.28%	2.79%	5.22%			1.28%
Obese children (4-5 years)	2016/17		522	7.0%	8.5%	9.6%	13.5%			4.8%
Obese children (10-11 years)	2016/17		1,085	16.9%	16.9%	20.0%	29.2%		0	11.3%
Children with one or more decayed, missing or filled teeth	2014/15	-	-	22.7%	20.0%	24.8%	56.1%		O	14.1%
Hospital admissions for dental caries (0-4 years)	2014/15 - 16/17	-	-		14.	-	×		u v	1.5
Under 18 conceptions	2016		131	11.6	15.0	18.8	36.5			4.6
Teenage mothers	2016/17		29	0.4%	0.7%	0.8%	2.1%			0.0%
Admission episodes for alcohol-specific conditions - Under 18s	2014/15 - 16/17	~	174	40.9	33.9	34.2	100.0			6.5
Hospital admissions due to substance misuse (15-24 years)	2014/15 - 16/17	~	196	71.3	81.7	89.8	339.0			32.1
Smoking status at time of delivery (current method)	2016/17		559	7.7%	9.7%	10.7%	28.1%		0	2.3%
Breastfeeding initiation	2016/17	-	6,253	*	79.1%	74.5%	37.9%			96.7%
Breastfeeding prevalence at 6-8 weeks after birth - current method	2016/17	-	4,724	62.0%	*	44.4%*	19.3%	100	0	75.6%
A&E attendances (0-4 years)	2016/17		16,232	401.8	514.4	601.8	1,926.8			333.5
Hospital admissions caused by injuries in children (0-14 years)	2016/17		1,201	100.1	96.6	101.5	190.5		O I	43.3
Hospital admissions caused by injuries in young people (15-24 years)	2016/17		1,198	131.1	137.4	129.2	254.8		O	64.0
Hospital admissions for asthma (under 19 years)	2016/17		258	170.8	166.8	202.8	497.5		O	63.6
Hospital admissions for mental health conditions	2016/17		129	90.3	82.0	81.5	188,8			14,3
Hospital admissions as a result of self-harm (10-24 years)	2016/17	-	619	473.2	449.3	404.6	1,156.8			98.2

Increase in referrals for mental health services in Oxfordshire especially in younger age groups

- 22% increase in referrals to mental health services over the past 5 years
- 80% increase in referrals aged 15-19

Number of Oxfordshire residents referred to Oxford Health mental health services by age (2011-12 to 2016-17)



Source: Oxford Health

Obesity has increased slightly for year 6 children

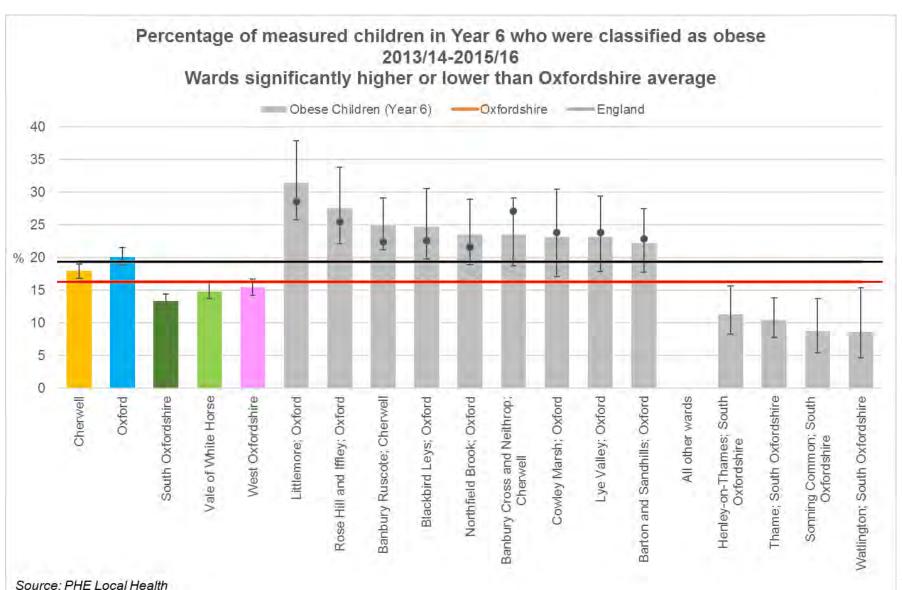
The number of children <u>obese or overweight</u> in Oxfordshire in 2016-17 was

- 1,460 (20%) reception children, aged 4 or 5
- 1,910 (30%) children in year 6, aged 10 or 11

Between 2015-16 and 2016-17 the proportion of children measured as <u>obese</u> in Oxfordshire..

- Remained at 7% for reception children aged 4-5
- Increased from 16% to 16.9% for year 6 children aged 10 to 11

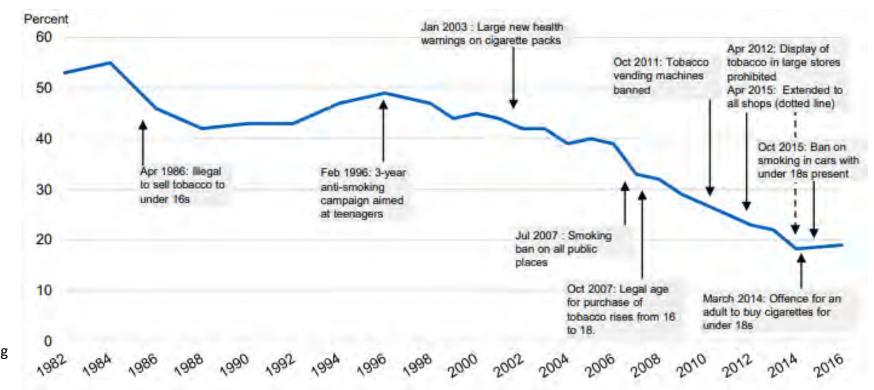
9 wards in Oxfordshire significantly higher than the county average on % year 6 children measured as obese



Decline in smoking nationally

- Steady decline from 1996 to 2016 (20 years) from 49% to 19% of 11-15 year olds in England having "ever smoked"
- 3% were classified as regular smokers (at least one cigarette per week)

Ever smoked by year, percentage of 11 to 15 year old pupils in England (2016)



Source: NHS Digital Smoking, drinking and drug use among young people, England 2016

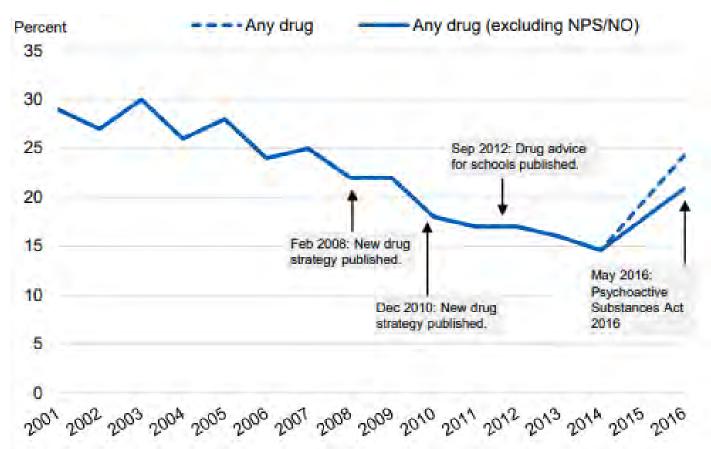
Apparent increase in drug use (nationally)

In 2016, 24% of pupils reported they had ever taken drugs.
 This compares to 15% in 2014.

NOTE from NHS Digital

Part of the increase since 2014 may be explained by the addition of questions on nitrous oxide (NO) and new psychoactive substances (NPS). After allowing for this however (solid line on chart showing 21% in 2016), it still represents a large increase which has not been observed in other data sources.

Therefore an estimate from the next survey in 2018 is required before we can be confident that these survey results reflect a genuine trend in the wider population. In the meantime the results for drug taking from this survey should be treated with caution.

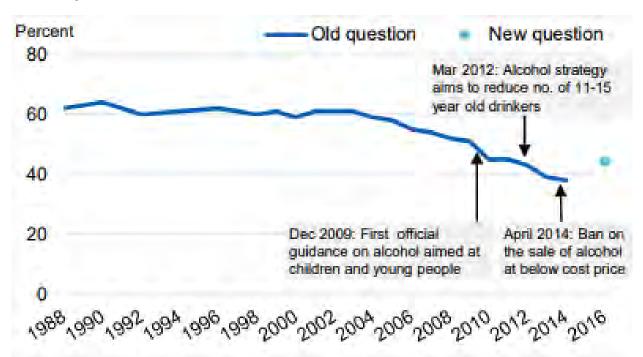


Source: NHS Digital Smoking, drinking and drug use among young people, England 2016

Decline in drinking alcohol (nationally)

- Between 2003 and 2014 there was a decline in the proportion of pupils aged 11 to 15 who had ever drunk an alcoholic drink
- In 2016, 44% of pupils said they had ever drunk an alcoholic drink
- No significant difference between boys and girls overall. Girls more likely than boys to drink spirits and wine

Ever had an alcoholic drink by year, percentage of 11 to 15 year old pupils in England (2016)



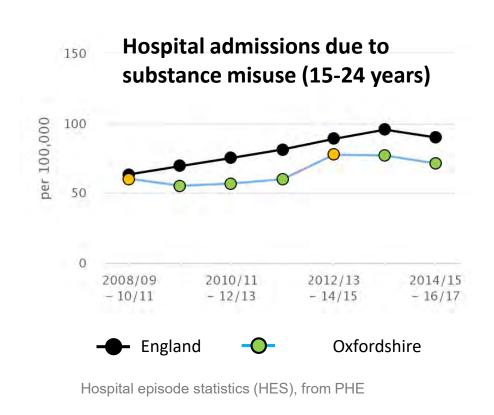
Estimated numbers of young people in Oxfordshire smoking, drinking or taking drugs

- Applying the smoking, drinking and drug use national survey findings to Oxfordshire's population of young people suggests..
 - 900 young people aged 11-15 smoking regularly (at least one cigarette per week)
 - 3,300 young people aged 11-15 took drugs in the last month (including nitrous oxide and new psychoactive substances)
 - 3,900 young people aged 11-15 who drank alcohol in the last week

Hospital admissions for substance misuse in young people are significantly lower in Oxfordshire than in England

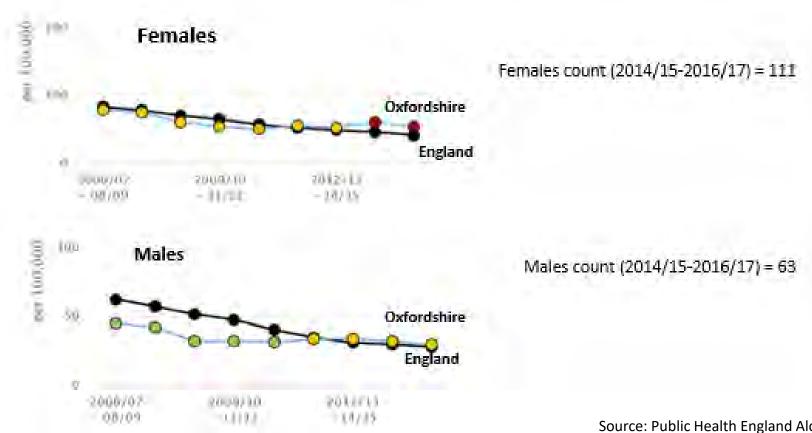
 In the 3 year period 2014/15-2016/17, there were approximately 200 hospital admissions for substance misuse for people aged 15 to 24 in Oxfordshire

There is evidence to suggest that young people who use recreational drugs run the risk of damage to mental health including suicide, depression and disruptive behaviour disorders.



Admissions for alcohol-specific conditions in females under 18s in Oxfordshire above the national average

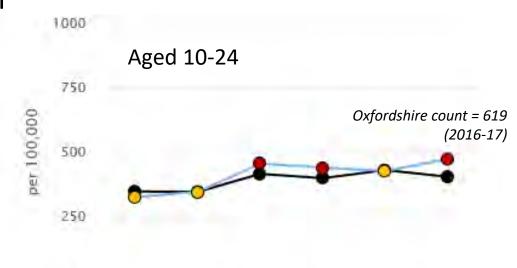
Hospital admissions for alcohol-specific conditions, under 18s, crude rate per 100,000 population, Oxfordshire, 3 year rolling average



Source: Public Health England Alcohol Profiles from Hospital Episode statistics and ONS population estimates

Apparent increase in self harm amongst young people in Oxfordshire

 Hospital admissions for self harm in young people aged 10-24 has increased to above the England average (2016-17)



2011/12 2012/13 2013/14 2014/15 2015/16 2016/1

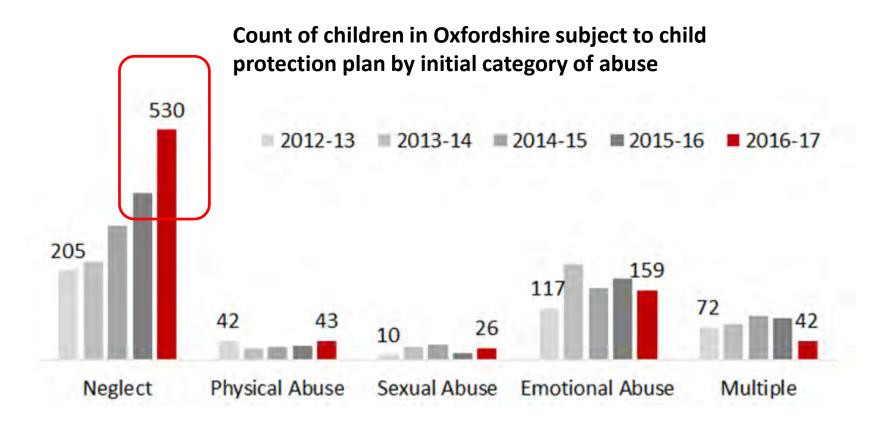
Hospital admissions for self-harm in children have increased in recent years, with admissions for young women being much higher than admissions for young men. With links to other mental health conditions such as depression, the emotional causes of self-harm may require psychological assessment and treatment.

Young carers

- By the end of March 2017, the Oxfordshire Young Carers Service had identified and supported a total of 2,684 children and young adults (aged up to 25 years) who provide unpaid care to a family member. This is an increase from the number as of March 2016 (2,281).
- This included 456 new young carers identified in the year 2016-17 (480 in 2015-16).

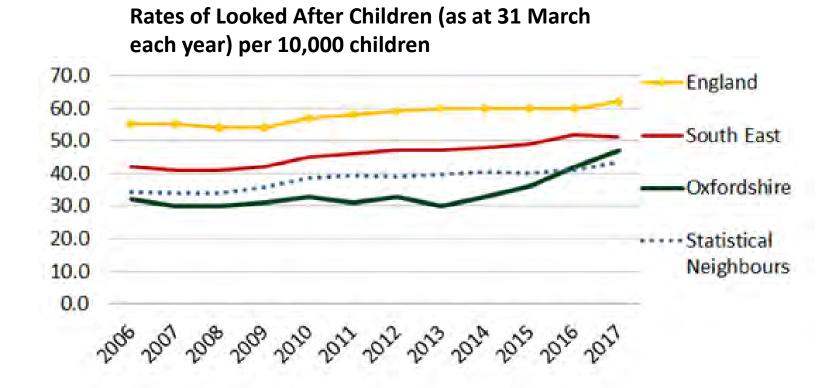
STAYING SAFE

Increase in children on child protection plan as a result of neglect



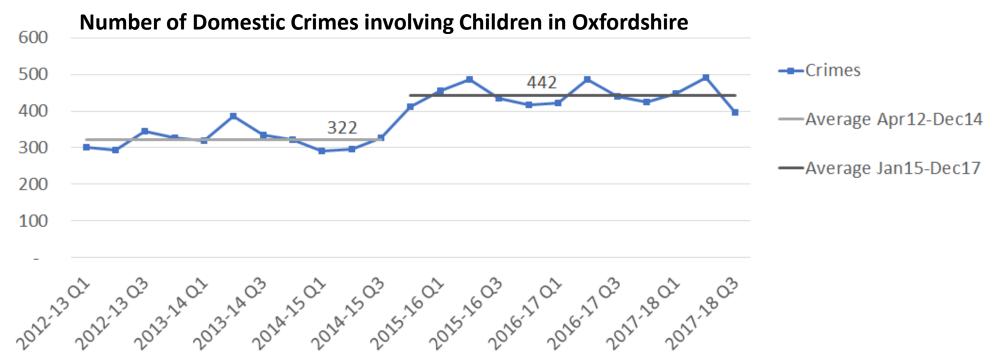
Increase in looked after children

 The number of cases of Looked After Children in Oxfordshire has increased each year since 2013 and is now above the rate of similar authorities



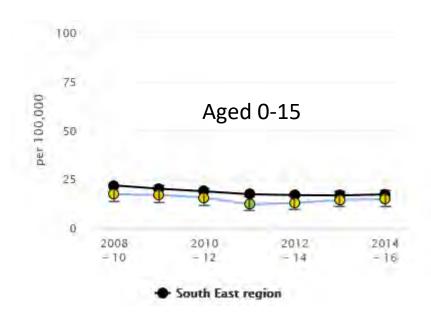
Apparent increase in domestic abuse involving children

- The number of domestic crimes in Oxfordshire involving children appears to have increased, from an average of 322 between Apr12 and Dec14 to an average of 422 between Jan15 and Dec17
- This increase may have been influenced by changes in police crime recording



Rate of children & young people killed or seriously injured on roads similar to national average

- In the 3 years 2014 to 2016, there were 56 children and young people killed or seriously injured on roads in Oxfordshire
- The rate of young people killed or seriously injured was similar to the national and South East averages



Source: Public Health England, original source: Department for Transport

HEALTH INEQUALITIES INDICATORS FOR OXFORDSHIRE'S CHILDREN AND YOUNG PEOPLE



Health inequalities indicators for Oxfordshire's children and young people tend to highlight areas of deprivation

- Oxfordshire is tracking a basket of 25 ward-level health inequalities indicators¹ of which 10 are directly relevant to children and young people
- Oxfordshire's wards with higher rates on health inequalities indictors for children & young people are:
 - Cherwell: Banbury Grimsbury & Hightown, Banbury Hardwick,
 Banbury Ruscote, Banbury Cross & Neithrop
 - Oxford: Barton & Sandhills, Blackbird Leys, Churchill, Littlemore,
 Northfield Brook, Rose Hill & Iffley
 - Vale of White Horse: Abingdon Caldecott
 - West Oxfordshire: Witney South Witney South is not highlighted in the top most deprived areas. The area has higher rates of injuries in young people and self harm

¹see Annex to 2018 Oxfordshire JSNA https://insight.oxfordshire.gov.uk/cms/annex-inequalities-indicators-jsna-2018

Wards th	at are significantly worse th	an C	Oxfor	dshii	re OR	thar	Eng	land	avera	age				
Ch	Indicators for Children & Young People		Children Under 16 yrs living in poverty (%)	Fuel poverty households (%)	Good development at 5 years (%)	Injuries 0-4 yrs hosp admission (crude rate)	Emergency admissions 0-4 yrs (crude rate)	Reception year children who are obese (%)	Year 6 children who are obese (%)	Admission for injuries 0-14 yrs (crude rate)	Admission for injuries 15-24 yrs (crude rate)	Hospital stays for self-harm (SAR) ALL AGES	GP practices serving high wards (i.e. those with most patients resident in those wards)	Practice IMD
Oxfordsl	nire average		11.8	9.1		132.0					143.9			
	Banbury Grimsbury & Hightown	(12)											West Bar, Horsefair and Woodlands	16.4, 15.2, 17.0
CHERWELL	Banbury Hardwick	(5)											West Bar, Horsefair and Hightown	16.4, 15.2, 12.3
	Banbury Ruscote	(20)											West Bar, Horsefair	16.4, 15.2
	Banbury Cross & Neithrop	(11)											West Bar, Horsefair	16.4, 15.2
	Bicester East	(4)											Alchester, Montgomery, Bicester HC	9.0, 11.8, 11.8
뿡	Bicester North and Caversfield	(6)											Alchester, Montgomery, Bicester HC	9.0, 11.8, 11.8
	Bicester South and Ambrosden	(4)											Alchester, Montgomery, Bicester HC	9.0, 11.8, 11.8
	Bicester West	(3)											Alchester, Montgomery, Bicester HC	9.0, 11.8, 11.8
	Launton & Otmoor	(4)											Islip Surgery	11.1
	Barton and Sandhills	(15)											Bury Knowle, Manor Surgery	16.2, 14.7
	Blackbird Leys	(16)											Leys HC	33.2
	Carfax	(6)											19 Beaumont St., Jericho HC	15.0, 15.0
OXFORD	Churchill	(11)											St Bartholomew's, Manor Surgery	16.4, 14.7
	Cowley	(8)											Donnington MC, Temple Cowley	22.4, 21.5
	Cowley Marsh	(8)											St Barts, Bartlemas, Temple Cowley, Cowley Rd MC	16.4, 21.0, 21.5, 20.9
	Headington	(3)											Manor Surgery, Bury Knowle	14.7, 16.2
	Hinksey Park	(4)											South Oxfordshire HC	16.8
	Iffley Fields	(7)											Donnington MC, St Bartholomew's	16.4
	Littlemore	(15)											Donnington MC, Temple Cowley	21.5
	Lye Valley	(8)											Hollow Way, Bury Knowle, St Bartholomew's	19.8, 16.2, 16.4
	Northfield Brook	(18)											Leys HC	33.2
	Rose Hill and Iffley	(12)											Donnington MC	22.4
	St Clements	(5)											St Bartholomew, Bartlemas, Cowley Rd MC	16.4, 21.0, 20.9
	St Mary's	(6)											St Bartholomew's	16.4
	Quarry & Risinghurst	(3)											Bury Knowle, Manor Surgery	16.2, 14.7
٠	Berinsfield	(3)											Berinsfield HC	16.8
UTH ORE IRE	Didcot South	(4)											Didcot HC, Woodlands MC, Oak Tree HC	12.0, 11.2, 9.1
SOUTH OXFORD- SHIRE	Didcot West	(6)											Didcot HC, Woodlands MC	12.0, 11.2
	Sandford & The Whittenhams	(8)											Clifton Hampden	10.4
VALE OF WHITE HORSE	Abingdon Caldecott	(7)											Malthouse, Abingdon Surgery	10.1, 9.9
ALE VHI IOR	Abingdon Fitzharris	(2)											Malthouse, Marcham Rd, Abingdon Surgery	10.1, 8.9, 9.9
H W V/	Faringdon	(6)											White Horse Practice	9.5
WEST OXFORDSHIRE	Alvescot & Filkins	(2)											Burford Surgery and one outside Oxfordshire CCG	9.2
	Ascott & Shipton	(2)											Wychwood Surgery	7.1
	Burford	(2)											Burford Surgery	9.2
	Brize Norton & Shilton	(2)											Burford, Broadshires HC, Bampton	9.2, 7.9, 7.4
	Carterton North East	(4)											Broadshires HC	7.9
	Carterton North West	(2)											Burford, Broadshires HC, Bampton	9.2, 7.9, 7.4
	Chadlington & Churchill	(2)											Chipping Norton	10.5
WES	Chipping Norton	(6)											Chipping Norton	10.5
_	Kingham, Rollright and Enstone	(2)											Chipping Norton	10.5
	Witney Central	(5)											Windrush HC, Nuffield HC	9.9, 10.0
	Witney South	(2)											Windrush and Nuffield HC	9.9, 10.0



Wards included in the tartan rug are worse than average on two or more indicators in the full basket of inequalities indicators.

Data shown at ward level are for ward boundaries in place in 2016. Data shown for wards in the worst quintile (i.e. the highest) in Oxfordshire for each indicator separately.

Indicators not updated in 2018 are for ward boundaries in place 2015, and may be different from 2016 boundaries. These indicators are shown in pink.

Where possible Oxfordshire figure is based on the same data used at ward level.