

WAKEFIELD JSNA

JOINT STRATEGIC NEEDS ASSESSMENT



Published April 2024






Wakefield District Annual Report 2024: Children (0-17 years)

This is a summary of the health and wellbeing needs of the children's population (aged under 18 years) of Wakefield District.

The purpose is to point local partners to where further investigation may be needed in terms of population health needs. There is a focus on inequalities, highlighting areas with particular groups of the population whose needs are greatest. Data can be explored further at: www.wakefieldjsna.co.uk

There is a separate Annual Report for adults, which can be found on the Wakefield JSNA website. We welcome feedback, challenge or insight. Please contact: phi@wakefield.gov.uk

When you see these dots...

-  Worse than comparator
-  In line with comparator
-  Better than comparator

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Population

There are **75,000 children** under the age of 18 in Wakefield District, accounting for just over **one in five** of the population. The number of children is expected to increase by around 7,000 in the next ten years.

[MORE INFO](#)



3,900 births to Wakefield mums each year.

[MORE INFO](#)

81% of pupils in Wakefield were of **White British ethnicity**, compared to 63% nationally, according to the annual school survey 2021-22.

[MORE INFO](#)

People born in Wakefield District are not expected to live for as long as children born in other parts of the country; life expectancy is lower than the England level for both males and females.



[MORE INFO](#)

Wakefield (2020-22)
Male: 77.0 years
Female: 80.9 year

England (2020-22)
Male: 78.9 years
Female: 82.8 years

Life expectancy for people who live in the most deprived areas is lower than for those who live in the least deprived areas.



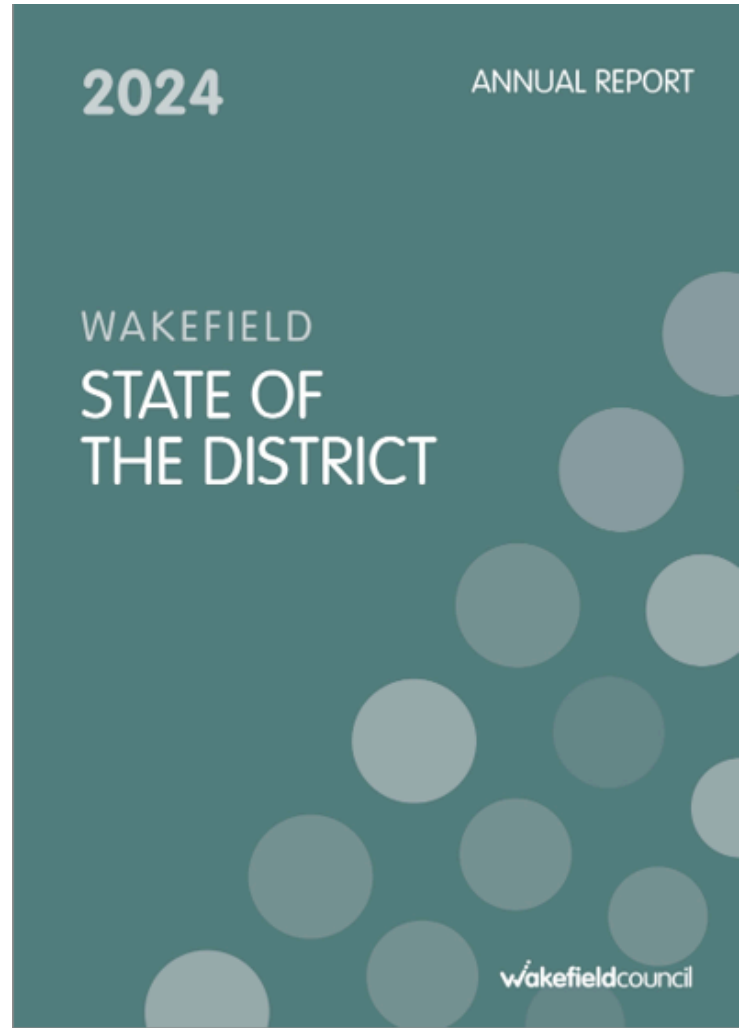
District characteristics

Wakefield District is a diverse and changing place and there are a wide range of factors impacting the lives of local people and neighbourhoods.

The health and wellbeing of the population can be greatly affected by the people and places that we interact with.

Many of these factors are covered in more detail in the Wakefield State of the District report. You can read the most recent publication here:

[State of the District 2024](#)



Living Environment



Economy and Employment



Housing and Transport



Education and Skills



All these things have an impact on people's health and wellbeing



Health

Pregnancy



The percentage of pregnant women who are living with obesity in the Wakefield District is high at 31% (2022-23) and increasing each year, potentially leading to increased risk of complications.



Although still higher than the national level, there have been big improvements in the percentage of women smoking at time of delivery in Wakefield over time. It stood at 14% for 2022-23, down from 24% in 2010-11.



MORE INFO

Breastfeeding can save lives, protecting the health of babies and mothers immediately and over time. A third (34%) of infants at the 6-8 week check are totally or partially breastfed, compared to the national level of 49% (2021-22).



Overweight & obesity

The National Child Measurement Programme (NCMP) is a Government scheme established to improve understanding of obesity prevalence and trends in children. It collects annual data on the height and weight of school children in Year Reception (aged 4-5) and Year 6 (aged 10-11).

Children living with overweight and obesity are more likely to live with overweight and obesity in adulthood. Childhood obesity may also result in serious medical problems, such as high cholesterol, high blood pressure and pre-diabetes.

Reception (aged 4-5)

Almost a quarter (23%) of children in Reception were living with overweight (including obesity) in 2022-23, which was higher than the national level of 21%.



Among children identified as living with overweight in Reception, just under half (45%) were identified as living with obesity when they were measured again in Year 6.

The most deprived areas of the district have the highest prevalence of children living with overweight (including obesity).

Year 6 (aged 10-11)

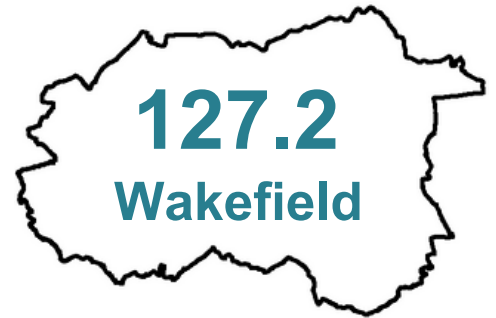
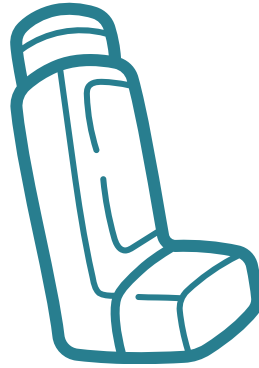
Just under four in ten (39%) children in Year 6 were living with overweight (including obesity) in 2022-23. This is higher than the national level of 37%.



Asthma

Asthma is the most common long-term medical condition in children in the UK. Outcomes are worse for children and young people living in the most deprived areas.

Hospital admissions per 100,000 for asthma (aged 0-18) were in line with regional and national levels in 2022-23.



Yorkshire & Humber region: 112.9

England national: 122.2



A quarter (26%) of pupils in Year 5, Year 7 and Year 9 reported that someone smoked in their homes in 2022. For pupils who lived in the most deprived areas of Wakefield, it stood at 40%.

Among Year 9 pupils, 13% have tried smoking and 29% have tried e-cigarettes or vaping.

Poor air quality is a significant public health issue. There is evidence that air pollution causes respiratory and other disease, exacerbates asthma, and has a contributory role in mortality.



Mental health is as important to a child's wellbeing as their physical health. It can impact on all aspects of their life, including their educational attainment, relationships and physical wellbeing. Mental health can also change over time, to varying degrees of seriousness, and for different reasons.

1 in 10

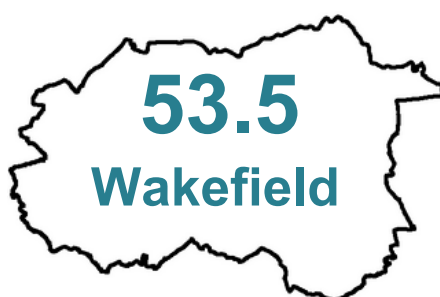


pupils (10%) in Year 7 and Year 9 in Wakefield had a low mental wellbeing score in the Wakefield School Health Survey 2022 (9% in Year 7; 11% in Year 9).

Girls (11%) were more likely to have a low mental wellbeing score than boys (8%) in 2022.



Admissions for mental health conditions and behavioural disorders per 100,000 (aged 0-17, 2022-23)



Yorkshire & Humber region: 75.2

England national: 80.8

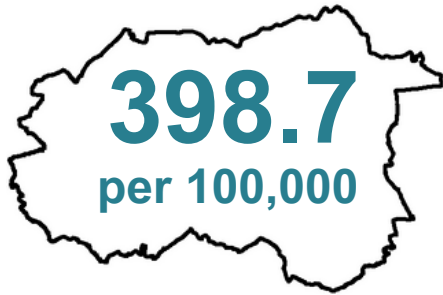


Children in Wakefield have been less likely over the last five to ten years to have a hospital admission due to a mental health condition, in comparison to national and regional rates. Child and adolescent mental health initiatives in Wakefield may have contributed to this.



Oral health

Poor oral health can significantly impact children's overall well-being. Tooth decay and infections can cause pain and discomfort. This can affect their ability to eat, sleep, and concentrate in school.



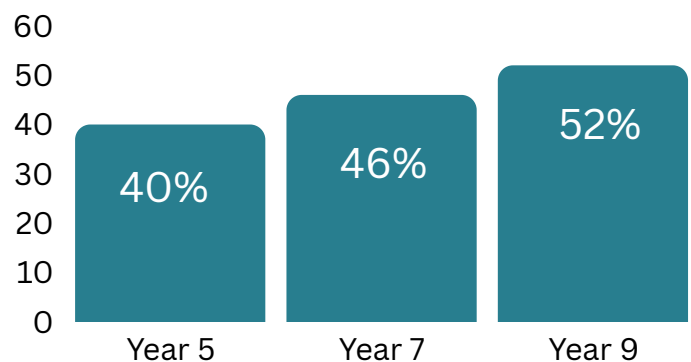
The number of hospital admission due to tooth decay in children aged 0-5 in Wakefield is falling, but is still higher than the national level of 178.8.



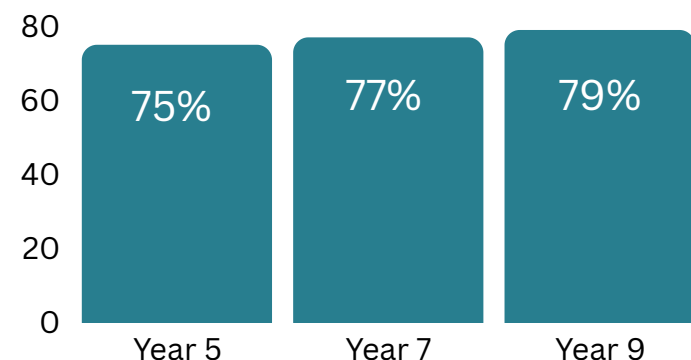
Access to a dentist has become more of an issue nationally over the last few years. In Wakefield, just under six in ten (59%) children were seen by a dentist in the previous 12 months (as at June 2023), higher than the regional level but still a relatively low percentage.



According to the Wakefield School Health Survey 2022, less than half of Year 5, 7, and 9 pupils reported visiting a dentist in the last 6 months. Younger children were less likely to have visited.



Three quarters (75%) of Year 5 pupils reported brushing their teeth at least twice a day. This increases with age to just under 8 in 10 pupils in Year 9.





Protective characteristics

Safety & wellbeing

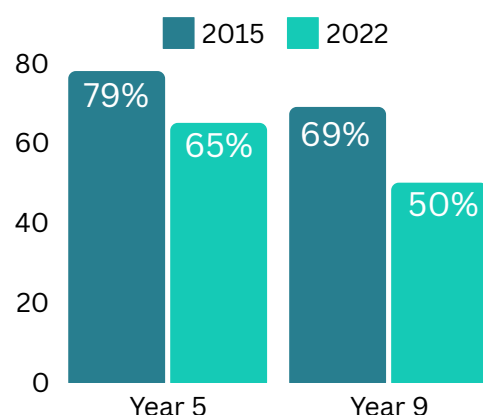
MORE INFO

Fostering a sense of security and well-being is important for children. When children feel safe, they can explore and learn with confidence, developing essential skills for their future.

The Wakefield District School Health Survey 2022 was carried out with Year 5, Year 7 and Year 9 pupils who attend schools across the district. The survey, run every two years, is a way of collecting robust information about young people's health, wellbeing and lifestyles.

The percentage of pupils **feeling happy with life is highest in Year 5**, however happiness levels have fallen since 2015.

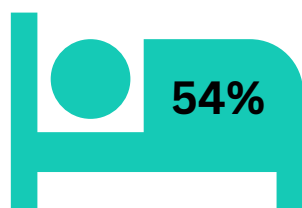
Girls are less likely to feel happy than boys and more likely to feel lonely.



Just over half (54%) of pupils in Years 5, 7, and 9 generally had 8 hours or more sleep each night.

The recommended amount for teenagers is 8-10 hours.

Generally 8+ hrs sleep



Older children have less sleep with only around a third in Year 9 getting 8 hours or more.

Year 5: 63%

Year 7: 55%

Year 9: 37%



Around 7 in 10 pupils (71%) in Years 5, 7, and 9 felt safe in the area they live.

The School Health Survey includes a wide array of topics, including...

- Diet and activity
- Wellbeing
- Safety
- Bullying
- Free time
- Social media
- Current trends
- Worries

Diet & fitness

49%

Although in line with regional and national levels, **less than half of children aged 5-16 met government recommendations for physical activity** in 2022-23.

The Wakefield District School Health Survey 2022 provided an insight into children's thoughts and perceptions of their fitness, physical activity and diet.

Less than half (48%) of pupils walked to school.

67% of pupils believe they have a healthy diet.



A quarter (27%) of Year 9 pupils think they don't do enough activity.

Running and football were the preferred sports for Year 7 and 9 pupils.

In Year 7, just over half (52%) of pupils from the most deprived areas eat fruit and veg, compared to 80% in the least deprived areas.

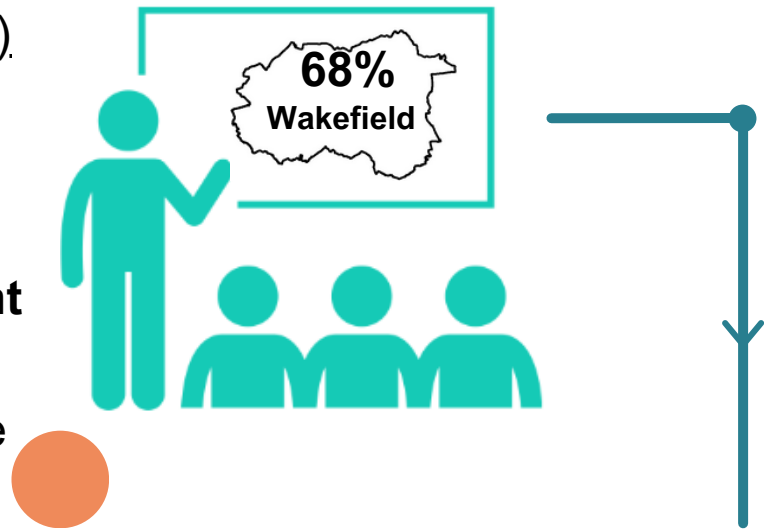
13% of Year 5 pupils missed breakfast that morning, compared to 42% of Year 9 pupils.

Pupils reported barriers to doing more activity...

- Worries about looking silly (25% of Year 5 pupils)
- Not having time (25% of Year 7 pupils)
- Not feeling motivated or bothered (35% of Year 9 pupils)



Ready for school (aged 4-5)
Over two thirds (68%) of Wakefield's reception aged pupils achieved a good level of development (GLD) in 2022-23; higher than the regional and in line with the national level.

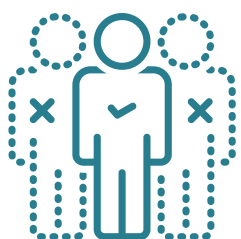


Attainment 8 at Key Stage 4 (aged 15-16)
Attainment 8 measures the achievement of a pupil across eight qualifications, including Maths, English and Science, producing an average score (higher is better).
Wakefield's average Attainment 8 score stood at 46 for 2022-23, in line with regional (45) and national levels (46).

16-17 year olds not in education
Less than 4% of Wakefield's 16 to 17 year olds were not in education, employment or training (NEET) or their activity was not known in 2022-23. This is lower than regional (6.5%) and national levels (5.2%)



In 2022-23, just over 10,000 pupils (around 1 in 5) in Wakefield missed 10% or more of their schooling during the year. Rates increased a lot during and after the COVID-19 pandemic; a pattern seen nationally.





Population groups

Special Educational Needs and Disabilities (SEND)



10,610

school age pupils in Wakefield identified as having **special educational needs (SEN)** in 2022-23 (18% of school age population).

7,895

receive **SEN Support** (extra support usually within mainstream school).



2,715

have an **Education, Health and Care Plan (EHCP)** - a formal plan of help for those with more complex needs).

Speech, language and communication

is the **most common primary reason for receiving SEN Support** in Wakefield (24%).

Autism

is the **most common primary need of children in Wakefield who have an EHCP** (34%).



There is a trend of increasing numbers of children identified with **SEN** in Wakefield, as well as nationally.



Nine in ten (92%) children in Wakefield with SEN attend mainstream schools or nursery.

Children in need of services

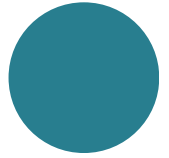
(As at March 2023)

2,384



children in need being supported by social workers and other professionals in Wakefield.

The Wakefield 'Child in need' rate (per 10,000 children) was lower than similar local authorities.



475

children across Wakefield who were the subject of a **Child Protection Plan**.

The Wakefield Child Protection Plan rate was lower than other similar local authorities.



635



children in care in Wakefield for whom the Local Authority provides care and accommodation

The Wakefield children in care rate was lower than other similar local authorities.



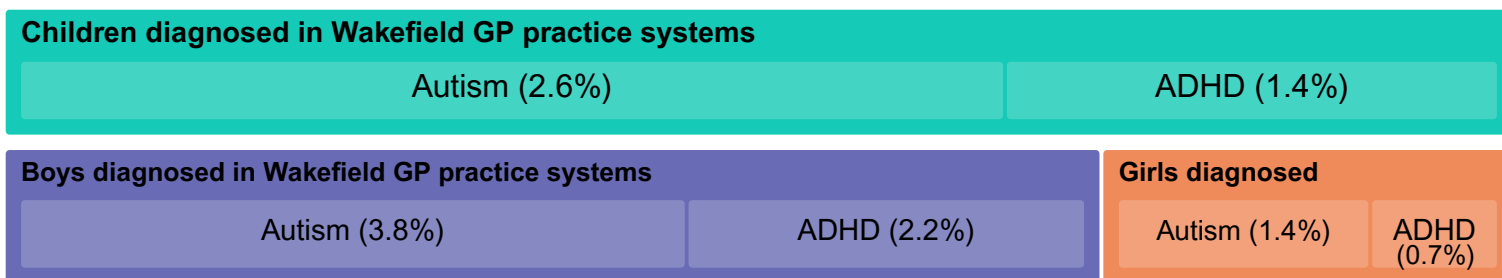
Children requiring a higher level of safeguarding intervention generally have poorer outcomes in terms of health, education and overall wellbeing.



Neurodiversity regards differences in brain function and behavioural traits as part of normal variation in the population.

Uncovering the strengths of neurodiverse people and utilising their talents can help increase innovation and productivity of society as a whole.

Neurodiversity can include autism, ADHD, dyslexia, dyspraxia, as well as neurodevelopmental conditions. Depending on the definition used, **it is estimated up to 10-20% of the population may be neurodiverse.** Some people need little or no support. Others may need help from a parent or carer every day.



Recorded diagnoses in Wakefield GP practice systems are likely to be an underestimate.

As of January 2024, less than 3% of children aged under 18 have an autism diagnosis and less than 2% have an ADHD diagnosis recorded.



The diagnosis process can be a long and difficult process, however it is more likely for children and young people to be identified and diagnosed by services than other age groups.

Boys are more likely to be diagnosed than girls. Historically, neurodiversity has been under-diagnosed in girls because of misconceptions about females and autism, and potentially differences in how it can present.

Girls may seem to have fewer social difficulties, but this could be because they are more likely to 'mask' certain elements of their character.

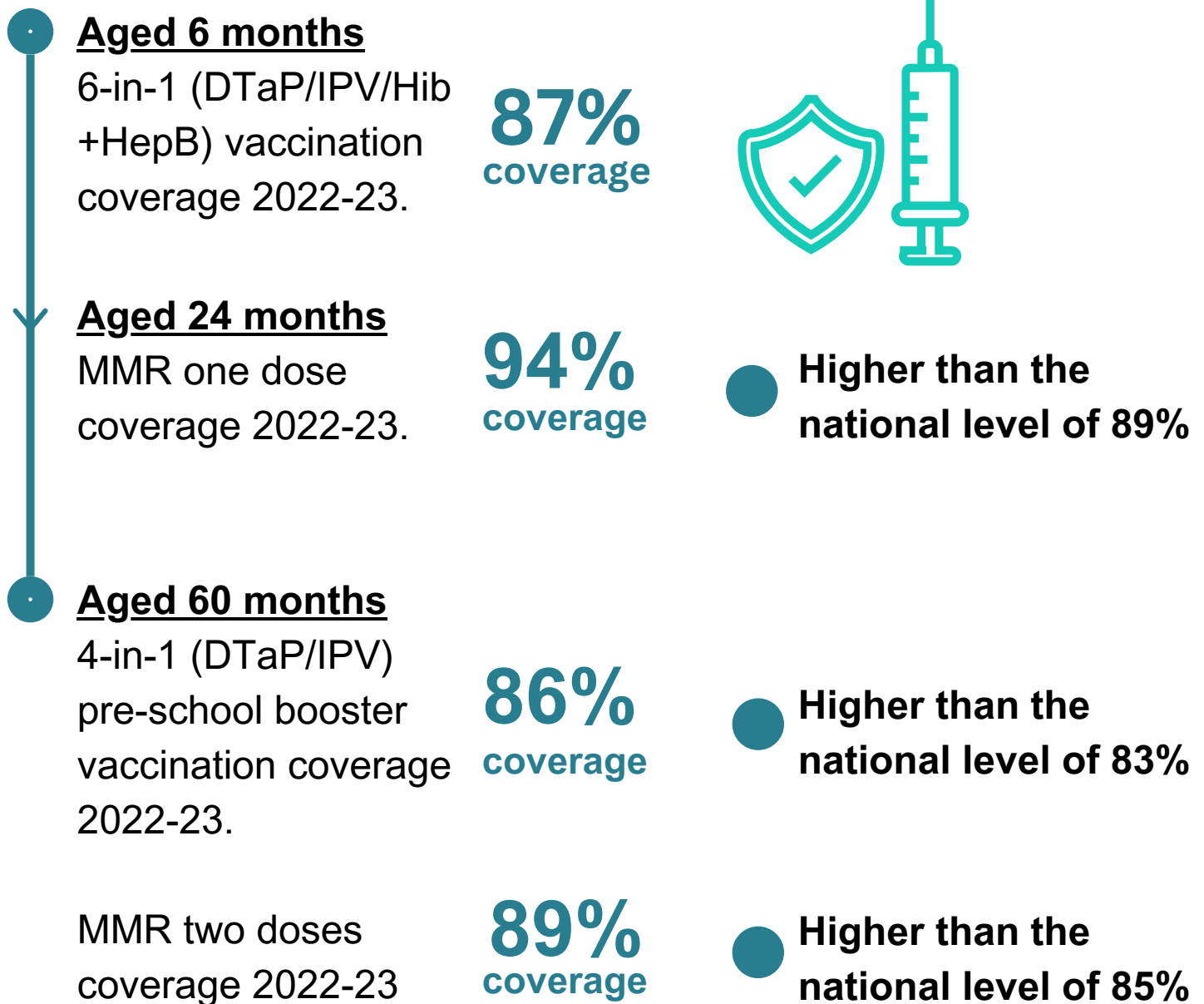


Health protection

Vaccination coverage

Vaccinations are critical to help protect against potentially life threatening diseases. Having a high percentage of the population vaccinated is essential to stop disease spreading.

Coverage across Wakefield District is generally high and above the England level for all childhood vaccinations, however some population groups have lower coverage levels than others. The overall percentage of children who are vaccinated has seen a drop in recent years.



DTaP: Diphtheria, tetanus, pertussis (whooping cough)

IPV: Polio

Hib: Haemophilus influenzae type b

HepB: Hepatitis B

MMR: Measles, mumps, rubella