Hyndburn Children and Young People Profile

This profile provides an overview for Hyndburn. It includes demographics and key indicators which are directly related to health, or have an impact on children's health. The **statistical significance** comparisons are with England (see key on right). These are a snapshot, the <u>district</u> and <u>ward</u> profiles have a fuller range of indicators around these themes.



About the population

Age	Area %	Area count	England %
0-4	5.9%	4,938	5.3%
5-9	6.2%	5,245	5.8%
10-14	6.7%	5,652	6.1%
15-19	6.1%	5,176	5.9%

- 24.9% of the population (21,011) are aged between 0-19., greater than observed for England (23.1%)
- Hyndburn's 0-19 population makes up 7.3% of Lancashire's child population,.

Source: NOMIS, Mid-year Estimates 2023

Deprivation

- of children are living in child poverty (IDACI, 2019)
- of children are in relative low income families (under-16) (2022/23)
- of children are in absolute low income families (under-16) (2022/23)

Children in Relative Low income	%
Central	66.2
Spring Hill	63.3
Barnfield	49.7
Church	48.1
Netherton	47.9

Source: LG inform

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Childhood poverty can lead to poor health outcomes in later life. Reducing it is key to improving health in adulthood, and increasing healthy life expectancy. Hyndburn is significantly worse than England for all 3 measures used to identify childhood poverty.

At ward level, the table shows the five wards with the highest proportion of children in relative low income families. Fourteen out of sixteen wards are significantly worse than England. Huncoat is statistically similar whilst Baxenden has a significantly lower proportion.

Additional indicators around deprivation, with England values and comparisons, are in the <u>district profile</u>.

Becoming pregnant at a young age and/or being

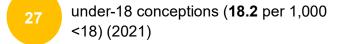
a teenage parent is linked to poorer outcomes,

such as living in poverty, for both mother and ba-

by. Hyndburn had a lower under 18s conception rate but the proportion of deliveries to teenage

mothers was higher than England.

Maternity and infancy



of deliveries are to teenage mothers (12-17 years) (2016/17-20/21)

of mothers are smoking at the time of delivery (all ages) (2022/23)

of term babies were low birth weight (LBW) (2022)

babies (3.5 per 1,000) died before the age of one (2020-22)

Smoking when pregnant has negative effects for the mother and baby, and in Hyndburn an estimated 12.6% of mothers are smoking at the time of delivery, significantly worse than England.

The proportion of LBW term babies is similar to England, as is the rate of infant mortality. For variation across wards please see the <u>ward profile</u>.

Source: Fingertips, Local Health Profile (district)

Children's health and wellbeing

A healthy childhood lays the foundations for a healthy adulthood and these indicators provide a useful overview of children's health in Hyndburn. While some are 'health' indicators, others are focused on the wider determinants of health (education, schooling). Where available, ward rankings have been provided, showing the five areas with the highest proportion or rates.

of reception children are overweight or 25.8% obese (2020/21-2022/23)

> of year 6 children are overweight or obese (2020/21-2022/23)

25.3% active (2022/23)

Comparison with England 📗 Better 🏻 🛑 Worse 🛑 Similar

40.1%

Source: Fingertips, Local Health Profiles (district)

% Year 6: overweight or obese of children (5-16-years) are physically 46.3 Central Rishton 43.9 42.9 Netherton Barnfield Spring Hill 41.9 Source: Fingertips, Local Health Profile (ward) of half days missed due to pupil absence (5

Baxenden

St Oswalds

Immanuel

Clayton-le-Moors

Peel

7.3% -15-years) (2022/23)

is the average attainment 8 score (15-16-40.8 years) (2022/23)

emergency hospital admissions (per 1,000 240.7 children) for under-fives (2016/17-20/21)

emergency hospital admissions (per 150.5 10,000) for injuries (<15) (2016/17-20/21)

admission episodes (per 100,000) for alcohol-specific conditions in children (2020/21-2022/23)

Emergency admissions under-5	Per 1,000
Church	289.2
Clayton-le-Moors	258.1
Overton	256.6
Spring Hill	254.7
Rishton	254.5

Emergency admissions injuries <15	Per 10,000
Church	208.7
Clayton-le-Moors	171.3
Netherton	169.2
Immanuel	164.8
Spring Hill	163.3

Comparison with England Better Worse Similar

Source: Fingertips, Local Health Profile (ward)

Improving attendance at school can increase a child's opportunities and future life chances. A child who has consistent attendance will be more likely to achieve academically.

Reception: overweight or obese

%

33.3

32.4

31.8

31.4

30.8

Hyndburn has a similar rate of pupil absence as observed for England however the attainment 8 score is in the worst quintile.

Emergency hospital admissions are an important indication of wider determinants of poor health. These can include respiratory conditions caused by cold, damp homes, or smoking around children for example.

Emergency admissions for injuries are a major cause of premature mortality for children and young people, and can be a source of longterm issues, including mental health related to the experience.

Looking at the available ward data, emergency admissions for under-fives is significantly worse than England in all wards, except for Baxenden, which is similar.

For admissions for injuries (<15 years), all wards in Hyndburn are significantly worse than England, except for Barnfield which is similar.

District profile

Please see the district profile below which highlights key indicators for Hyndburn. While some may not be specific to children and young people, they provide an oversight to health and wellbeing for people in the area.

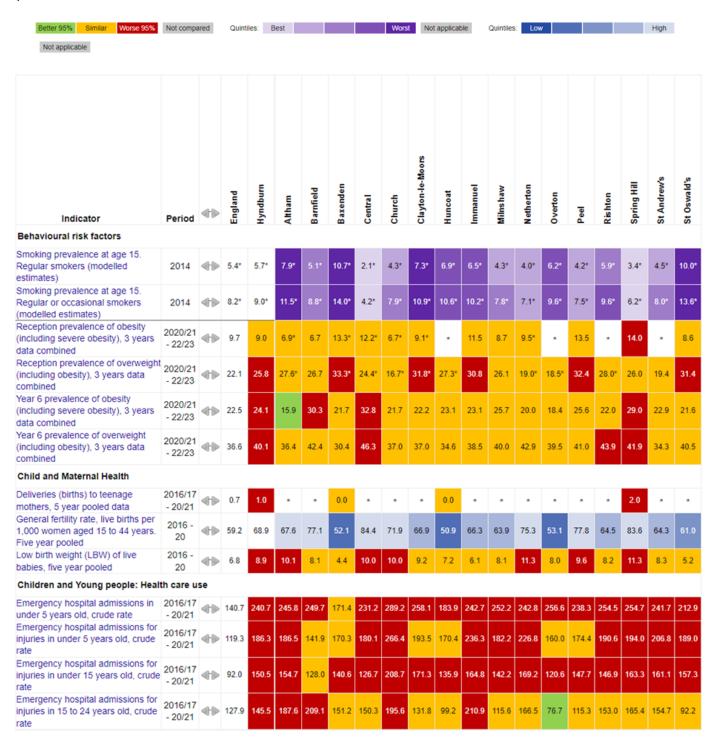
Recent trends: — Could not be → No significant ↑ Increasing & ↑ Increasing & getting worse getting bette	• •				0		♣ Decreasing Benchmark Value		
				V		orst/Lowest	25th Percentile 75th Percentile	Best/Highes	
Indicator Life expectancy at birth (Male, All ages, 1 year range)		Hyndburn			Lancs Englar			England	
		Recent Trend	Count	Value 76.5			Worst/ Lowest	Range	Best/ Highest 83.8
							3 73.8	•	
ife expectancy at birth (Female, All ages, 3 year range)		-	-	80.2	81.8	82.8	79.0		86.
Life expectancy at birth (Male, All ages, 3 year range)		-	-	76.3	77.8	78.9	73.4		83.
Life expectancy at birth (Female, All ages, 1 year range)		-	-	80.0	82.1	83.2	79.2		87.
Inequality in life expectancy at birth (Male, All ages)		-	-	11.8	10.6	9.7	17.0		0.
Inequality in life expectancy at birth (Female, All ages)		-	-	10.3	8.3	7.9	13.9		-1.5
Children in relative low income families (under 16s) (Persons, <16 yrs)		•	6,538	39.2%	25.5%	19.8%	43.2%		5.29
Children in absolute low income families (under 16s) (Persons, <16 yrs)		-	5,282	31.6%	19.7%	15.6%	35.8%		4.29
Children in low income families (all dependent children under 20) (Persons, 0-19 yrs)		-	3,995	20.2%	15.1%	17.0%	32.5%		2.89
Under 18s conception rate / 1,000 (Female, <18 yrs)		-	27	18.2	15.5	13.1	31.5		1.
Under 18s conceptions leading to abortion (%) (Female, <18 yrs)		-	15	55.6%	59.8%	53.4%	25.0%		91.79
Smoking status at time of delivery (Female, All ages)		-	111	12.6%	10.9%	8.8%	19.4%		3.49
ow birth weight of term babies (Persons, >=37 weeks gestational age at birth)		-	30	3.5%	2.9%	2.9%	10.2%		0.69
nfant mortality rate (Persons, <1 yr)		_	10	3.5*	3.9	3.9	8.3		1.
Reception prevalence of overweight (including obesity) (Persons, 4-5 yrs)		-	250	27.3%	22.9%	21.3%	29.6%		14.49
Reception prevalence of overweight (including obesity), 3 years data combined (Persons, 4-5 yrs)		_	-	25.8%	23.6%	22.1%	28.7%		13.9%
'ear 6 prevalence of overweight (including obesity) (Persons, 10-11 yrs)	2022/23	-	400	39.2%	36.8%	36.6%	47.1%		19.79
/ear 6 prevalence of overweight (including obesity), 3 years data combined (Persons, I0-11 yrs)		-	-	40.1%	36.7%	36.6%	46.3%		20.3%
Percentage of physically active children and young people (Persons, 5-16 yrs)	2022/23	-	-	25.3%	44.8%	47.0%	25.3%		66.19
Pupil absence (Persons, 5-15 yrs)	2022/23	1	292,755	7.3%	7.1%	7.4%	10.0%	P	5.29
werage Attainment 8 score (Persons, 15-16 yrs)	2022/23	-	-	40.8	44.7	46.2	36.1		58.
lospital admissions caused by unintentional and deliberate injuries in children (aged 0 o 4 years) (Persons, 0-4 yrs)		→	95	193.6	145.1	92.0	205.9		38.
dospital admissions caused by unintentional and deliberate injuries in children (aged 0 o 14 years) (Persons, <15 yrs)	2022/23	→	260	166.1	117.3	75.3	169.6		30.
lospital admissions caused by unintentional and deliberate injuries in young people aged 15 to 24 years) (Persons, 15-24 yrs)		→	145	148.8	93.0	94.1	266.9		33.
Admission episodes for alcohol-specific conditions - Under 18s (Persons, <18 yrs)	2020/21 - 22/23	-	20	35.5	27.9	26.0	75.5	O I	3.
Admission episodes for alcohol-specific conditions - Under 18s (Male, <18 yrs)	2020/21 - 22/23	-	-	*	18.1	17.8	-	Insufficient number of values for a spine chart	-
Admission episodes for alcohol-specific conditions - Under 18s (Female, <18 yrs)	2020/21 -	_	15	54.3	38.1	34.7	115.0		0.

Source: Fingertips, Local Health Profile (district)

[—] the recent trend cannot be calculated for this value.

Ward profile

Please see the ward profile below for Hyndburn. Please note, not all indicators in the district profile are available at ward level. Not all available indicators will have a value.



No data

* Value suppressed for disclosure control reasons

Source: Fingertips, Local Health Profile (ward)

Business Intelligence, Lancashire County Council, October 2024