

Lancaster Children and Young People Profile

This profile provides an overview for Lancaster. 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 [district](#) and [ward](#) profiles have a fuller range of indicators around these themes.

Comparison with England
● Better
● Worse
● Similar

About the population

Age	Area %	Area count	England %
0-4	4.6%	6,644	5.3%
5-9	5%	7,216	5.8%
10-14	5.4%	7,809	6.1%
15-19	7.4%	10,786	5.9%

- 22.3% of the population in Lancaster (32,455) are aged between 0-19.
- Lancaster has a higher proportion of 15-19 year olds in it's population than England, likely due to the presence of Lancaster University.

Source: NOMIS, Mid-year Estimates 2023

Deprivation

17.5% of children are living in child poverty (IDACI, 2019)

21.4% of children are in relative low income families (under-16) (2022/23)

15.5% of children are in absolute low income families (under-16) (2022/23)

Children in Relative Low Income	%
Poulton	45.9
Heysham North	38.3
Westgate	32.9
Scale Hall	32.7
Skerton	28.2

Source: LG inform

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. Lancaster has a higher proportion of children in relative low income families but a similar proportion in absolute low income.

The table shows the five wards with the highest proportion of children in relative low income families. 9 of the 27 wards have a higher proportion of children living in relative low income than England (the 5 listed and West End, Marsh, Heysham, and Bulk) Four wards are similar to England, 14 are significantly better.

Additional indicators around deprivation, with England values and comparisons, are in the [district profile](#).

Maternity and infancy

31 under-18 conceptions (**14.2** per 1,000 <18) (2021)

0.9% of deliveries are to teenage mothers (12-17 years) (2016/17-20/21)

10.5% of mothers are smoking at the time of delivery (all ages) (2022/23)

3.3% of term babies were low birth weight (LBW) (2022)

11 babies (**2.9** per 1,000) died before the age of one (2020-22)

Source: [Fingertips, Local Health Profile](#) (district)

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 baby. Lancaster had a similar under 18 conception rate but the proportion of births to teenage mothers over the 5 year period was higher.

Smoking when pregnant has negative effects for the mother and baby, and in Lancaster an estimated 10.5% of women were smoking at time of delivery, significantly higher 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 [ward profile](#).

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 Lancaster. 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.

22.8% of reception children are overweight or obese (2020/21-2022/23)

37% of year 6 children are overweight or obese (2020/21-2022/23)

52.7% of children (5-16-years) are physically active (2022/23)

Comparison with England

● Better ● Worse ● Similar

Source: [Fingertips, Local Health Profiles](#) (district)

Reception: overweight or obese	%
Skerton East	30.0
Kellet	30.0
Skerton West	28.6
Heysham Central	26.3
Heysham North	26.1
Year 6: overweight or obese	%
Westgate	47.1
Heysham Central	46.4
Overton	46.2
John O'Gaunt	43.8
Heysham North	42.9

Source: [Fingertips, Local Health Profile](#) (ward)

7.6% of half days missed due to pupil absence (5-15-years) (2022/23)

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

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

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

31.9 admission episodes (per 100,000) for alcohol-specific conditions in children <18

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. Lancaster has a similar rate of pupil absence to England, the average attainment 8 score is in the second worst quintile nationally.

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 long-term 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 17 wards, with the table showing the rates for the top five. The other 10 wards are similar.

For admissions for injuries (<15 years), 15 wards are significantly worse, with the top five having rates over 150 (per 10,000). The lowest three, Upper Lune Valley (83.9), Halton with Aughton (84.0) and Lower Lune Valley (84.2) are similar to England.

Emergency admissions under-5	Per 1,000
Overton	287.9
Skerton East	263.9
Skerton West	235.2
Torrisholme	224.7
Kellet	221.4

Emergency admissions injuries <15	Per 10,000
Silverdale	189.0
Heysham North	165.5
Westgate	162.8
Heysham Central	151.3
Poulton	150.4

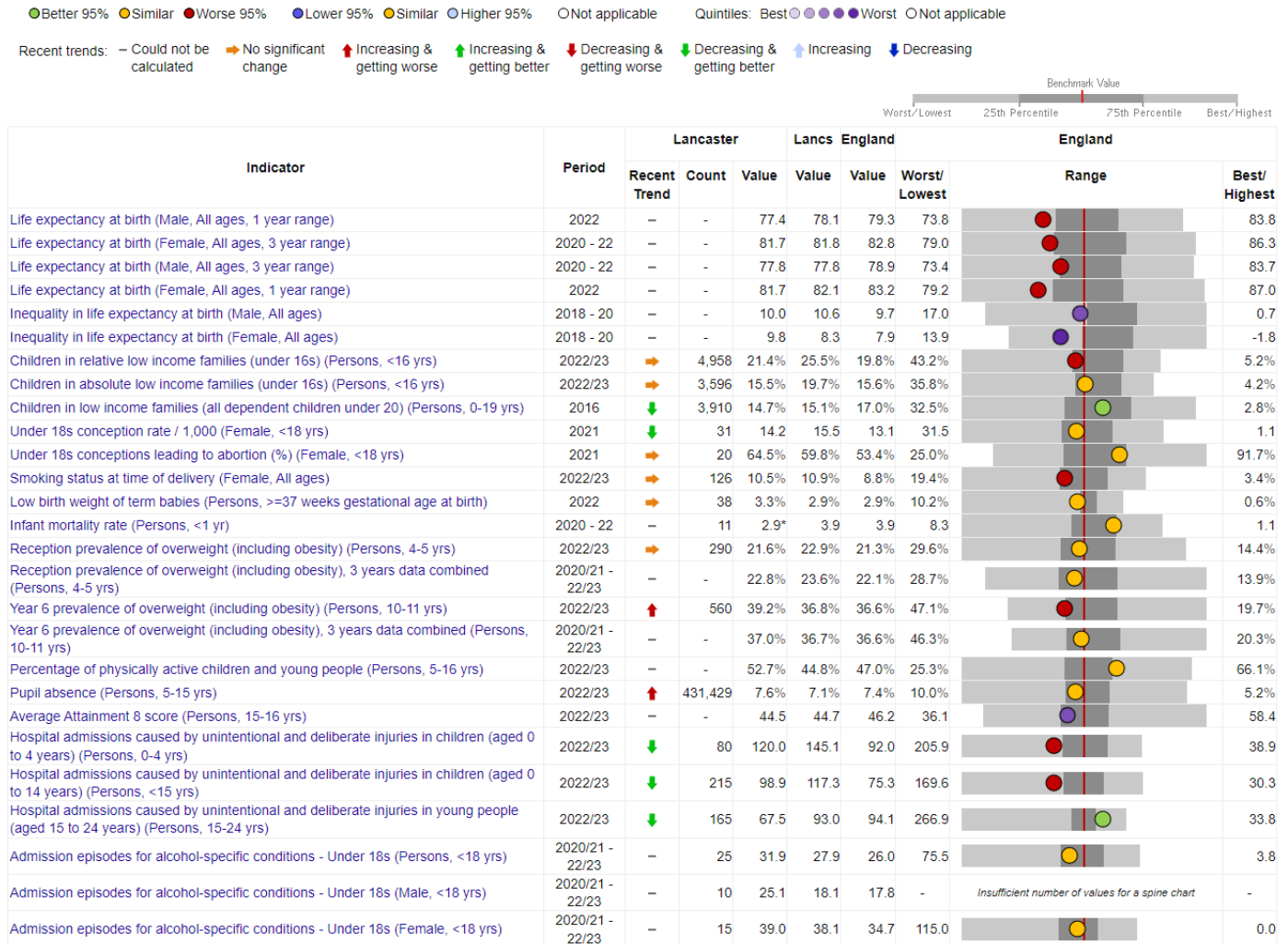
Comparison with England

● Better ● Worse ● Similar

Source: [Fingertips, Local Health Profile](#) (ward)

District profile

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



— the recent trend cannot be calculated for this value.

Source: [Fingertips, Local Health Profile](#) (district)

Ward profile

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



Indicator	Period	England	Lancaster	Bare	Bolton & Blyne	Bulk	Carnforth & Millhead	Castle	Ellid	Halton-with-Aughton	Harbour	Heysham Central	Heysham North	Heysham South	John O'Gaunt	Kellett	Lower Lune Valley	Marsh	Overton	Poullon	Scotforth East	Scotforth West	Silverdale	Skerton East	Skerton West	Torrisholme	University & Scotforth Rural	Upper Lune Valley	Warton	Westgate	
Behavioural risk factors																															
Smoking prevalence at age 15. Regular smokers (modelled estimates)	2014	5.4*	5.7*	6.3*	8.7*	3.7*	6.5*	4.2*	7.1*	8.7*	3.6*	4.6*	3.4*	5.9*	7.5*	8.2*	7.6*	5.6*	3.5*	3.6*	6.8*	5.7*	8.6*	3.7*	5.9*	8.9*	7.5*	8.6*	7.0*	3.7*	
Smoking prevalence at age 15. Regular or occasional smokers (modelled estimates)	2014	8.2*	9.0*	9.9*	12.2*	6.8*	9.9*	7.3*	10.5*	12.2*	6.8*	7.8*	6.3*	9.4*	11.0*	11.0*	11.1*	8.7*	6.6*	6.7*	10.0*	8.7*	11.9*	7.0*	9.4*	12.0*	11.0*	11.8*	10.3*	7.1*	
Reception prevalence of obesity (including severe obesity), 3 years data combined	2020/21 - 22/23	9.7	9.0	9.1*	*	10.3*	10.0*	*	*	*	11.4*	10.5*	13.0*	12.1*	7.7*	*	11.8*	12.0*	*	9.5*	*	*	*	13.3*	8.6*	*	*	*	*	12.1*	
Reception prevalence of overweight (including obesity), 3 years data combined	2020/21 - 22/23	22.1	22.8	18.2*	18.2*	24.1*	25.0*	20.0*	15.8*	*	25.7*	26.3*	26.1*	24.2*	19.2*	30.0	23.5*	24.0*	18.2*	23.8*	20.0*	17.4*	*	30.0*	28.6*	18.8*	*	*	*	21.2*	
Year 6 prevalence of obesity (including severe obesity), 3 years data combined	2020/21 - 22/23	22.5	21.7	16.7	11.1	20.0	21.4	16.7	19.0	9.5	25.5	25.0	25.7	25.5	21.9	18.2	16.7	19.5	30.8	28.9	20.0	20.0	*	29.8	25.0	17.6*	*	18.2*	*	29.4	
Year 6 prevalence of overweight (including obesity), 3 years data combined	2020/21 - 22/23	36.6	37.0	33.3	27.8	32.0	38.1	27.8	28.6	28.6	39.2	46.4	42.9	38.3	43.8	27.3	33.3	31.7	46.2	39.5	28.0	34.3	*	42.6	38.5	41.2*	*	27.3*	30.0	47.1	
Child and Maternal Health																															
Deliveries (births) to teenage mothers, 5 year pooled data	2016/17 - 20/21	0.7	0.9	*	0.0	*	0.0	*	0.0	0.0	2.2	0.0	*	2.6	0.0	0.0	*	0.0	*	2.8	0.0	0.0	0.0	*	2.1	0.0	0.0	*	0.0	2.5	
General fertility rate, live births per 1,000 women aged 15 to 44 years, five year pooled	2016 - 20	59.2	48.5	56.1	50.7	42.5	56.3	20.5	52.8	56.2	67.5	69.7	69.6	64.0	32.0	62.7	52.7	59.8	73.7	70.2	44.6	36.4	42.5	72.7	69.6	65.4	4.7	51.7	44.0	70.6	
Low birth weight (LBW) of live babies, five year pooled	2016 - 20	6.8	8.0	7.8	5.8	6.4	8.4	10.0	6.0	2.8	10.0	9.5	9.3	8.1	8.0	*	6.2	5.3	7.6	10.2	9.5	8.3	11.6	9.2	10.0	9.2	*	*	7.8	7.1	
Children and Young people: Health care use																															
Emergency hospital admissions in under 5 years old, crude rate	2016/17 - 20/21	140.7	192.4	153.7	160.0	185.2	188.9	172.4	164.8	145.6	196.6	164.9	180.7	199.9	199.2	221.4	170.9	175.4	287.9	176.7	162.1	171.2	204.9	263.9	235.2	224.7	220.1	123.5	118.6	220.4	
Emergency hospital admissions for injuries in under 5 years old, crude rate	2016/17 - 20/21	119.3	170.5	160.8	116.5	167.3	266.4	128.6	111.6	*	173.5	140.3	170.9	154.0	221.4	*	150.2	67.4	186.9	182.2	231.9	147.5	473.9	251.7	173.0	133.5	*	*	*	206.4	
Emergency hospital admissions for injuries in under 15 years old, crude rate	2016/17 - 20/21	92.0	131.2	135.3	131.4	134.2	143.2	100.6	102.5	84.0	126.2	151.3	165.5	127.1	114.1	126.7	84.2	102.2	134.7	150.4	146.7	104.5	189.0	142.8	142.5	108.4	139.9	83.9	130.8	162.8	
Emergency hospital admissions for injuries in 15 to 24 years old, crude rate	2016/17 - 20/21	127.9	101.3	116.0	170.5	100.0	134.7	49.9	69.4	97.2	241.2	186.1	224.3	191.3	56.5	378.8	79.5	130.9	222.4	197.0	97.5	63.7	125.9	136.1	176.8	78.2	31.3	136.7	*	185.9	

No data

* Value suppressed for disclosure control reasons

Source: [Fingertips, Local Health Profile](#) (ward)