

# **Healthy Lives**

## **Risk factors for children**

October 2024

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## Introduction

Our behaviours, personal circumstances and illnesses hugely affect our life expectancy and health. Influences on our health are particularly important before birth and during early childhood. These influences and risk factors continue to accumulate, and their effects build as we move into adulthood. Preventing exposure to these risk factors and reducing inequalities in how these risk factors are distributed among our population, can have a positive impact on our health.

Local public health teams work to both prevent and reduce people's exposures to risk factors across all stages of life. We commission services which help people reduce their risk factors (for example, smoking), as well as work alongside other organisations to provide people with the support they need to make healthy decisions and prevent exposure to negative risk factors in the first place.

This chapter focuses on the risk factors, causes and protective factors which influence our health, the health inequalities which are evident and the potential impact COVID-19 has had.

Data in this written summary are correct as of August 2024. The data in this report can be explored further by smaller geographies in the [JSNA Healthy Lives data report](#). The data report will be updated continuously, as new data are available.

Further information on the impact of COVID on our local population has been discussed in the [Hampshire COVID-19 Health Impact Assessment](#).

The health outcomes of our population and how these impact different population groups are discussed in more detail in the accompanying [JSNA reports](#).

## Risk factors for children

Protective factors that promote the health and well-being of children and families such as; good early years development, good educational outcomes and having an economically stable and supportive home and family are vital. They are hugely influential to the development of children and young people and the life opportunities and health that they will have later in life.

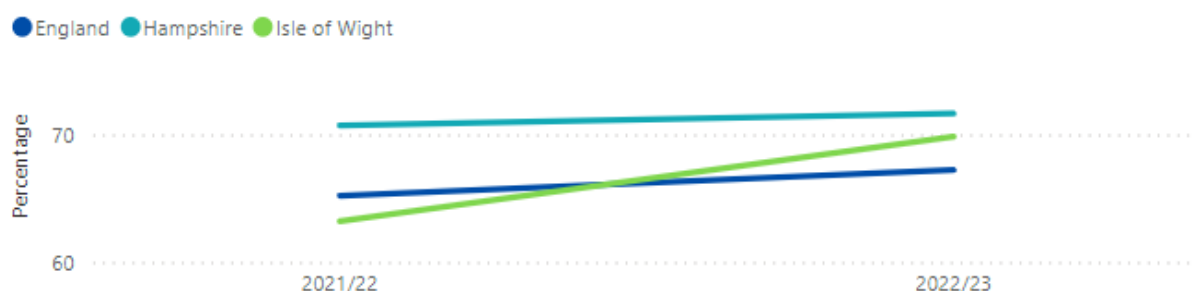
### Early years development

Achievement in Early Years is a good predictor of achievement later in childhood. In Hampshire, the proportion of children achieving a good level of attainment at the end of Reception is significantly higher than the England average, at 71.7% compared to 67.2%.<sup>1</sup> The Isle of Wight also has a higher proportion than the England average, although it is not statistically significant, at 69.8%.

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<sup>1</sup> [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk)

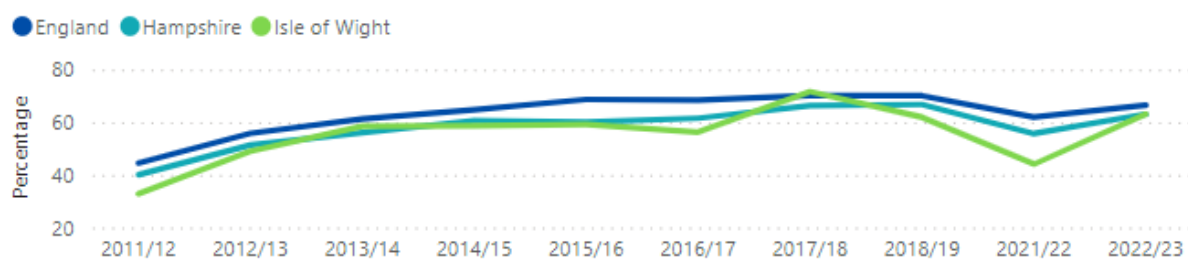
Figure 1: Children achieving a good level of development at the end of reception, 2021/22 – 2022/23



Source: Fingertips, Office for Health Improvement and Disparities<sup>2</sup>

However, this proportion is lower in children eligible for free school meals (a marker of low family income) both locally in Hampshire (49.4%) and the Isle of Wight (56%) and nationally (51.6%), and the gap in achievement is larger in Hampshire than the average gap nationally, at 22.2% compared to 15.7% in England.<sup>3</sup> The percentage of year one pupils with free school meals achieving the expected level in phonics in Hampshire and the Isle of Wight are lower than the England average, although this difference has reduced in recent years.<sup>4</sup>

Figure 2: Children with free school meal status achieving the expected level in the phonics screening check in Year 1, 2011/12 to 2022/23



Source: Fingertips, Office for Health Improvement and Disparities

## School attendance and educational attainment

There are clear links between school engagement, educational attainment and both current and future health outcomes for children and young people. Good educational attainment and skills are key to breaking the intergenerational cycle of inequalities in income and employment opportunities which impact on health.

Authorised and unauthorised absences from school can negatively impact student achievement, and this impact is larger for children from low-income households. Overall absence combines both authorised and unauthorised absence. The

<sup>2</sup> [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

<sup>3</sup> [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

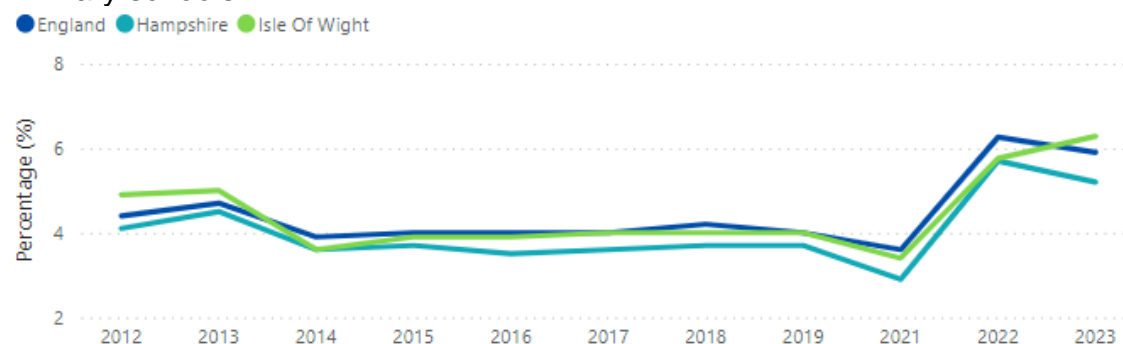
<sup>4</sup> [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

## Healthy Lives: Risk factors for children

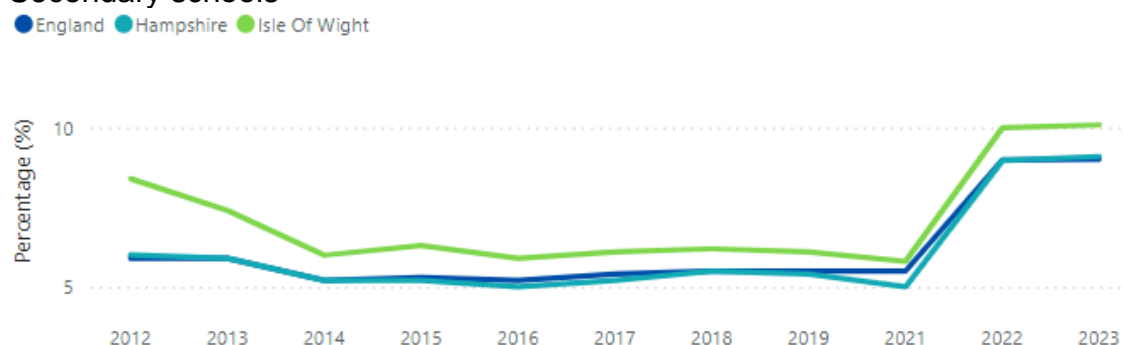
percentage of overall absence increased sharply following COVID-19, with the year 2020 excluded from the data due to schoolwork going online during the pandemic. Nationally and locally a sharp increase was seen in overall absence between 2021 and 2022, from 4% to 7.2% in Hampshire, 4.7% to 7.7% on the Isle of Wight and 4.6% to 7.6% in England. Hampshire and England have since begun to decline; however, the Isle of Wight's overall absence has continued to increase in 2023.

Figure 3: Overall pupil absence, 2012 to 2023

### Primary schools



### Secondary schools



Source: Local Authority Interactive Toolkit

Hampshire has similar rates of authorised absences (5.2%) and lower rates of unauthorised absences (1.7%) compared to the England average (5% and 2.4%) in 2023. Both authorised absences (5.6%) and unauthorised absences (2.5%) are higher on the Isle of Wight than both Hampshire and England. Suspension and permanent exclusion rates in Hampshire and the Isle of Wight are lower than England (0.07% and 0.08% compared to 0.11% for permanent exclusions). However, there has been an increase in permanent exclusions and suspensions since COVID-19 in 2020 and 2021, both nationally and locally. This trend has not been seen in primary school exclusions on the Isle of Wight, which has stayed at 0.0% for the last 3 years.

Within Hampshire in 2023, Gosport has the highest rate of suspensions in both primary and secondary schools. Hart has the highest rate of permanent exclusions in primary schools, but the lowest in secondary schools. Basingstoke and Deane is the

district with the highest rate of permanent exclusions in secondary schools in Hampshire.

The pandemic and home-learning environment substantially affected student opportunities to learn. Nationally, the time that secondary school students spent learning declined from 6.6 hours per day before the pandemic to 4.5 hours during lockdown.<sup>5</sup> This varied by area, with schools with high levels of disadvantage (schools with high rates of free school meal eligibility) losing an average of 2.2 months of learning. This compares to schools from areas of lower levels of disadvantage (schools with low rates of free school meal eligibility) losing 1.5 months.<sup>6</sup> The reasons why students from disadvantaged areas lost more learning opportunities include a reduced access to digital resources, an increased risk of household overcrowding which may prevent adequate study space, and parents not being able to provide study support because of lower educational attainment or speaking different languages.

Educational qualifications are a key determinant of future employment and income, and there are clear links between attainment and both current and future health outcomes for children and young people. Attainment at Key Stage 4 is summarised through two indicators:

- Average 'Attainment 8' (A8) score: measures the average achievement of pupils in up to 5 qualifications including Maths and English (which are counted twice) plus three further qualifications from either GCSEs, the English Baccalaureate or other qualifications approved by the Department for Education.
- Average Progress 8 score: measures the average progress of pupils from the end of Key Stage 2 (primary school) to the end of Key Stage 4, comparing pupils' A8 scores with the average A8 score all pupils nationally who had similar starting points. A negative score means pupils in these schools on average do worse at KS4 than those with similar prior attainment nationally and suggest that pupils have made less progress than other pupils nationally with a similar starting point.

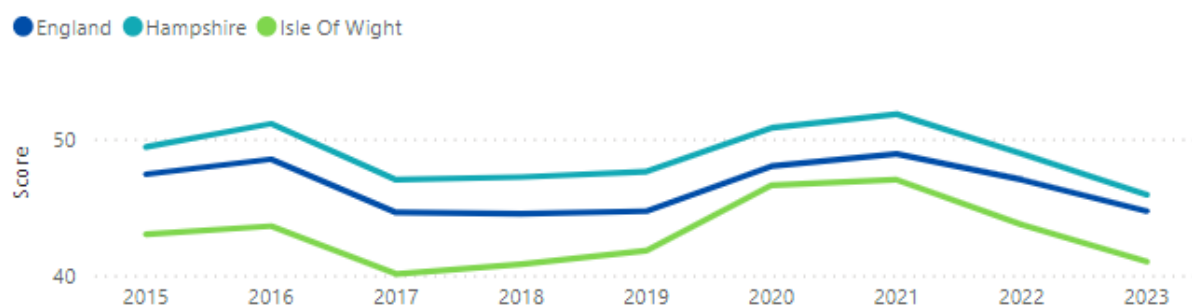
Average Attainment 8 score had increased each year from 2017 to 2021, before declining until 2023. Hampshire's average attainment 8 score per pupil (45.9) is higher than England (44.7), and the Isle of Wight's is lower (41). National data shows that Attainment 8 tends to be lower in those living in areas of higher deprivation and for children in care. These trends exist within Hampshire, with the highest average attainment 8 scores being in Winchester (52) and Hart (51.5) and the lowest being in Gosport (37.2) and Havant (39.4). The average attainment 8 score for children in care in Hampshire is 20.2.

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<sup>5</sup> [Family time use and home learning during the COVID-19 lockdown | Institute for Fiscal Studies \(ifs.org.uk\)](#)

<sup>6</sup> [Research report template \(publishing.service.gov.uk\)](#)

Figure 4: Average attainment 8 score, 2015 to 2021



Source: Fingertips, Office for Health Improvement and Disparities

Another factor which can influence school attainment is the first language of the pupil. If English is limited at home this may mean that children need to learn English when first attending school and subsequently may not be able to access help at home with homework and projects. Across Hampshire there are approximately 130 languages spoken by children attending schools in the area, the most common of these are Polish, Nepali, Romanian and Chinese.<sup>7</sup>

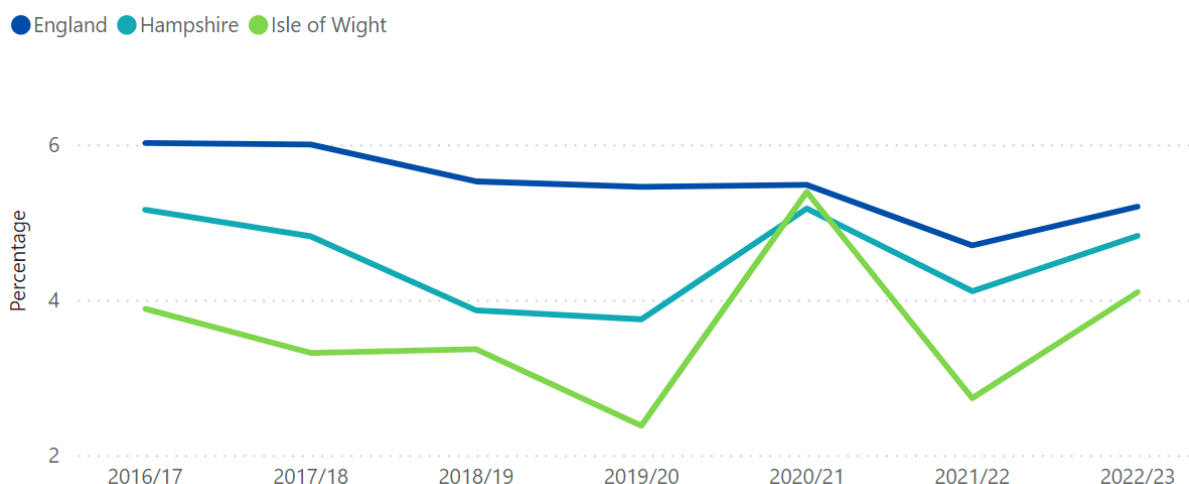
### **Not in education, employment or training (NEETs)**

Young people are legally required to remain in education, employment or training until the end of the academic year in which they turn 18. A lack of further education and training can lead to poor basic skills and limited academic and vocational qualifications. Those who are not in education, employment or training (NEET) have poorer health outcomes, and people who are unemployed for more than 12 months find it increasingly difficult to find permanent employment. Nationally and locally, males and certain ethnic groups are less likely to be in education, employment or training. Within Hampshire and the Isle of Wight, there is a significantly higher proportion of young people in education, employment and training than nationally.<sup>8</sup>

<sup>7</sup> School Survey 2022, unpublished

<sup>8</sup> [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk)

Figure 5: Proportion of 16 and 17 year olds classified as NEET, 2016/17 to 2022/23

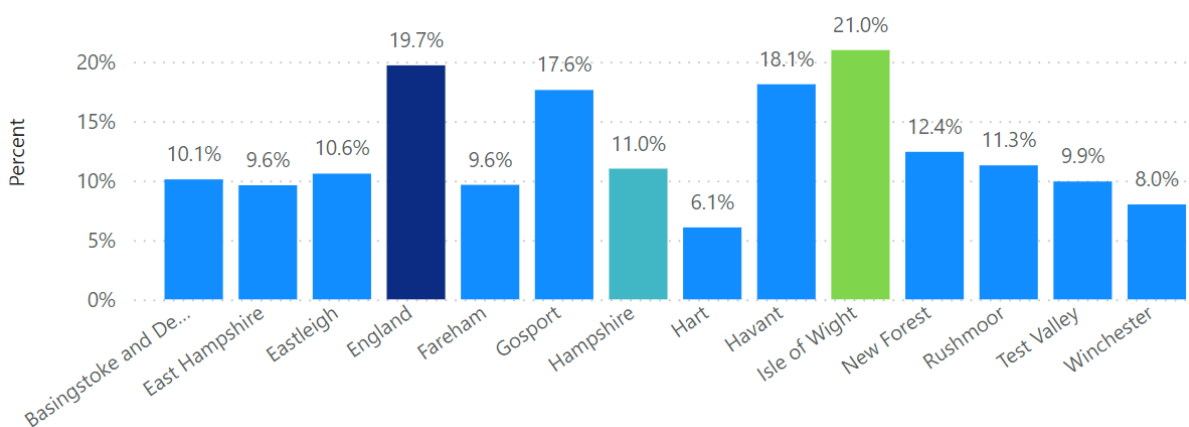


Source: Fingertips, Office for Health Improvement and Disparities

### Child poverty

Childhood poverty leads to poorer mental health, lower educational attainment and poor health outcomes and premature mortality in adulthood. Overall, Hampshire is an affluent county where a lower proportion of children are living in low-income households than the England average (11% compared with 19.7% in 2022/23). However, there is variation across the area, as both Gosport and Havant both have a higher proportion of children living in low-income households (17.6% and 18.1%) compared to areas with a very low proportion of children living in low-income households, such as Hart (6.1%) and Winchester (8%). The Isle of Wight has a larger proportion of children living in low income households than the England average, at 21%.

Figure 6: Children living in relative low-income households, 2022/23



Source: DWP and population estimates from HCC and ONS



## Free School Meals

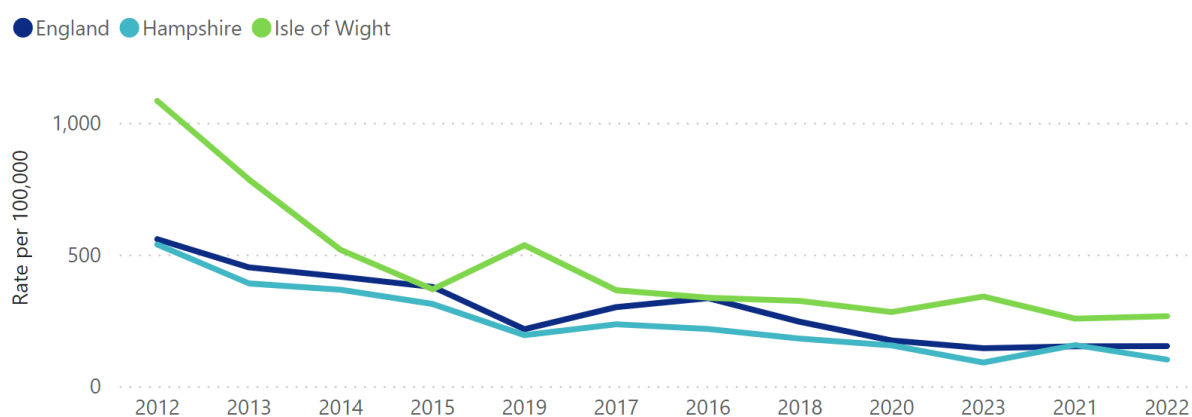
The Education Act 1996 requires maintained schools and academies (including free schools) to provide free school meals to disadvantaged pupils who are aged between 5 and 16 years old.

In Hampshire 19.4% of pupils are eligible for free school meals in 2023/24, significantly lower than England (24.6%) and the Isle of Wight (24.7%). However, the percentage of pupils eligible has been increasing at the same rate since 2017/18 for all three. Within Hampshire there is inequality between districts, with 32.5% of pupils being eligible in Havant and 29% in Gosport, compared to 11.2% in Hart.

## Children involved in the criminal justice system

A wide range of factors influence whether a child is involved with the criminal justice system including their family, their local community and neighbourhood and their engagement in school. Children in contact with the criminal justice system have high levels of mental health needs and a higher risk of suicide than other young people. The rate of children and young people receiving a first reprimand, warning or conviction in Hampshire has continued to decrease in recent years and is statistically better than the England average, at 89.1 per 100,000.<sup>9</sup> However, the Isle of Wight has statistically significantly higher rates of first-time entrants to the youth justice system than England, at 340 per 100,000 compared to 143.4 per 100,000 in England in 2023. National data shows that areas of greater deprivation have significantly higher rates of first-time entrants to the youth justice system.

**Figure 7: First time entrants to youth justice system (aged 10 to 17) per 100,000, 2010 to 2022**



Source: Fingertips, Office for Health Improvement and Disparities

## Vulnerable children

The Department of Education define Children in Need (CiN) as a legally defined group of children (under the Children Act 1989), assessed as needing help and protection as a result of risks to their development or health. This group includes

<sup>9</sup> [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

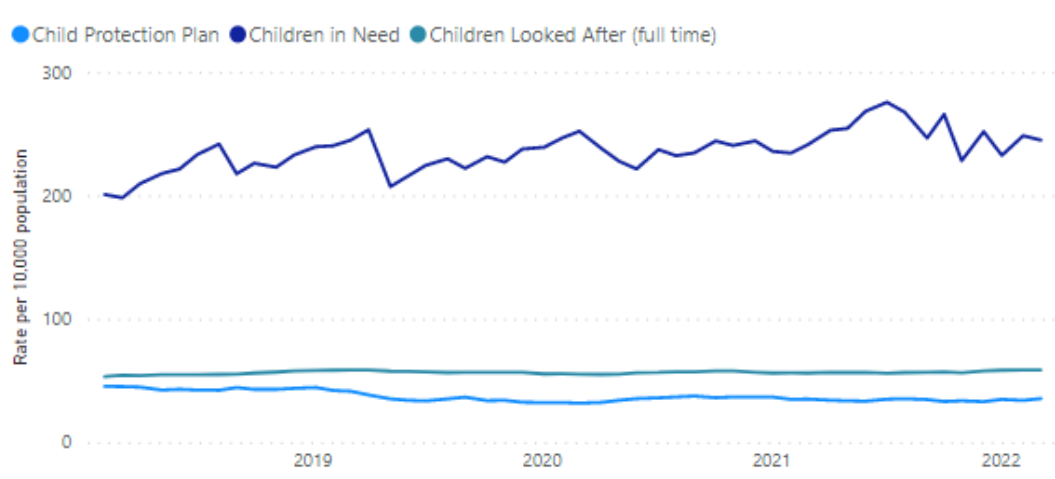
## Healthy Lives: Risk factors for children

children subject to Child in Need Plans, Child Protection plans, Looked After Children, young carers, and disabled children. Children in need also include young people aged 18 or over who continue to receive care, accommodation or support from children's services and unborn children.

As at March 2022, there were 7,174 Children in Need, 1,034 were on a Child Protection Plan, and 1,713 Children Looked After (full time) identified by Hampshire Children's services.

Figure 8 shows the trends from February 2018 to March 2022. Over this time period the rate of Children in Need has steadily increased from 201 to 245 per 10,000 population. Children Looked After (full time) rate has increased slightly from 53 to 59 per 10,000 whereas the Child Protection Plan rate has decreased from 45 to 35 per 10,000 population.

Figure 8: Children in Need, Child Protection Plans and Children Looked After (full time). Rate per 10,000 under 18 years population. February 2018 to March 2022



Data source: Hampshire County Council Children's Services

### Characteristics of Children in Need

The Children in Need census is an annual statutory census for all local authorities. The census covers the financial year (1 April to 31 March) and collects data on children referred to local authority social care services because their health or development is at risk.

National trend data<sup>10</sup> report that there is;

- A consistently higher proportion of boys identified as children in need. In 2023, 54.3% of Children in Need were boys
- The majority of children in need were from a white ethnic group. In 2023, 61.5% were White British. In 2023, the highest proportion of Children in Need from an ethnic minority group were mixed ethnicity (includes White and either Black Caribbean, Black African or Asian, or any other mixed background) at

<sup>10</sup> <https://explore-education-statistics.service.gov.uk/find-statistics/characteristics-of-children-in-need>

## Healthy Lives: Risk factors for children

9%, followed by Black or Black British at 8.8% and Asian or Asian British at 7.8%.

- The majority of children in need were aged 10-15 years (32.5%), followed by those 16+ (25.7%) and those aged 5-9 years (21.3%). Only 4.2% of children were aged under 1 year old.

Hampshire and the Isle of Wight's children's social care services, assessment data, derived from the national annual census (2023)<sup>11</sup> reports the characteristics for each referral and found that;

- Schools, police and health services are the most common source of referral (30%, 21% and 18% respectively) in 2023. On the Isle of Wight this is also the case, with schools being the referral source for 35% of cases, police 20% and health services 15%.
- In Hampshire, family dysfunction is the most commonly recorded primary need at 67%, followed by abuse or neglect at 22%. Similar trends appear in the Isle of Wight, 66% of cases have family dysfunction as the primary need, and 25% have abuse.
- Factors identified at the end of assessment are additional factors that social workers record as being relevant in a case. The majority of children have more than one factor recorded for each episode of need. The most commonly recorded additional factors were 'other' (57%), neglect (12%) and a parent being a victim of domestic abuse (8%).
- 18.9% of Children in Need had a disability recorded in Hampshire in 2023, compared to 11.2% on the Isle of Wight. In Hampshire the most common forms were learning difficulties (39.7%) and behaviour (23.7%). On the Isle of Wight, the most common forms were autism (33.3%), 'other' (32.7%) and learning difficulties (25.5%).
- Neglect was the most common initial category of abuse recorded for children on protection plans in 2023, accounting for over half of children at 60%. The next most common category was emotional abuse, accounting for 30% of children.

### Educational outcomes for Children in Need

Educational outcome inequalities for Children in Need are evident. National data<sup>12</sup> suggest that children who had been continuously looked after for at least 12 months had better outcomes when compared to Children in Need. Nationally;

- Over a third of all children in need in Key Stage 2 achieved the expected level in reading, writing and maths (35%). Pupils who had been continuously looked after for at least 12 months achieved higher than this average (37%), but lower than the average for all pupils (65%).
- The average Attainment 8 score for all children in need in Key Stage 4 was 18.5, compared to 46.7 for all pupils. Pupils who had been continuously

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<sup>11</sup>[Children in need, Reporting year 2023 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](https://www.gov.uk/government/statistics/children-in-need-reporting-year-2023)

<sup>12</sup> [Outcomes of children in need, including looked after children, Academic Year 2018/19 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](https://www.gov.uk/government/statistics/outcomes-of-children-in-need-including-looked-after-children)

## Healthy Lives: Risk factors for children

looked after for at least 12 months had a similar average Attainment 8 score of 18.7, but have better Progress 8 scores than the average child in need (-1.27 compared to -1.49).

- Over a quarter of all children in need were persistently absent (29%). A smaller proportion of those who had been continuously looked after for at least 12 months were persistently absent (11%), the same as the rate for all pupils (11%).
- Children who had been continuously looked after for at least 12 months had a lower rate of permanent exclusions (0.05%) than the average for all children in need (0.58%), and the average for all pupils (0.10%).
- One in ten of all pupils in 2019 have been in need in the previous 6 years. Compared to all pupils, these children are less likely to do well at each stage of education, more likely to have SEN or FSM, and more likely to be persistently absent.