Child Health Profile
March 2017

Barking and Dagenham

This profile provides a snapshot of child health in this area. It is designed to help local government and health services improve the health and wellbeing of children and tackle health inequalities.

The child population in this area

<table>
<thead>
<tr>
<th></th>
<th>Local</th>
<th>Region</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Live births (2015)</td>
<td>3,850</td>
<td>129,615</td>
<td>664,399</td>
</tr>
<tr>
<td>Children aged 0 to 4 years (2015)</td>
<td>19,600</td>
<td>633,300</td>
<td>3,434,700</td>
</tr>
<tr>
<td>Children aged 0 to 19 years (2015)</td>
<td>65,300</td>
<td>2,140,000</td>
<td>13,005,700</td>
</tr>
<tr>
<td>Children aged 0 to 19 years in 2025 (projected)</td>
<td>79,600</td>
<td>2,438,300</td>
<td>14,002,600</td>
</tr>
<tr>
<td>School children from minority ethnic groups (2016)</td>
<td>25,328</td>
<td>756,627</td>
<td>2,032,064</td>
</tr>
<tr>
<td>Children living in poverty aged under 16 years (2014)</td>
<td>28.8%</td>
<td>23.4%</td>
<td>20.1%</td>
</tr>
</tbody>
</table>

Key findings

Children and young people under the age of 20 years make up 32.3% of the population of Barking and Dagenham. 73.2% of school children are from a minority ethnic group.

The health and wellbeing of children in Barking and Dagenham is mixed compared with the England average. Infant and child mortality rates are similar to the England average.

The level of child poverty is worse than the England average with 28.8% of children aged under 16 years living in poverty. The rate of family homelessness is worse than the England average.

Children in Barking and Dagenham have worse than average levels of obesity: 13.7% of children aged 4-5 years and 28.5% of children aged 10-11 years are classified as obese.

In 2015/16, children were admitted for mental health conditions at a lower rate to that in England as a whole. The rate of inpatient admissions during the same period because of self-harm was lower than the England average.

In 2015, 116 children entered the youth justice system for the first time. This gives a higher rate than the England average for young people receiving their first reprimand, warning or conviction. The percentage of young people aged 16 to 18 not in education, employment or training is higher than the England average.

Children living in poverty

Map of London, with Barking and Dagenham outlined, showing the relative levels of children living in poverty.

Contains Ordnance Survey data
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Barming and Dagenham - March 2017

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Childhood obesity

These charts show the percentage of children who have excess weight (obese or overweight) in Reception (aged 4-5 years) and Year 6 (aged 10-11 years). They compare Barking and Dagenham with its statistical neighbours, and the England and regional averages. Compared with the England average, this area has a worse percentage of children in Reception (25.4%) and a worse percentage in Year 6 (43.4%) who have excess weight.

<table>
<thead>
<tr>
<th>Children aged 4-5 years who have excess weight, 2015/16 (percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
</tr>
<tr>
<td>Barking and Dagenham</td>
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<tr>
<td>Greenwich</td>
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<td>Enfield</td>
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<td>Birmingham</td>
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<table>
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<th>Children aged 10-11 years who have excess weight, 2015/16 (percentage)</th>
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Note: This analysis uses the 85th and 95th centiles of the British 1990 growth reference (UK90) for BMI to classify children as overweight and obese.

Young people and alcohol

Nationally, the rate of young people aged under 18 being admitted to hospital because they have a condition wholly related to alcohol is decreasing, and this is also the case in Barking and Dagenham. The admission rate in the latest period is lower than the England average.

Young people's mental health

Nationally, the rate of young people aged under 18 being admitted to hospital as a result of self-harm is increasing. This is not the case in Barking and Dagenham where the trend is decreasing. The admission rate in 2013/14-2015/16 is also lower than the England average. Information about admissions in 2015/16 is on page 4. Nationally, levels of self-harm are higher among young women than young men.

Young people aged under 18 admitted to hospital with alcohol specific conditions (rate per 100,000 population aged 0-17 years)

Young people aged 10 to 24 years admitted to hospital as a result of self-harm (rate per 100,000 population aged 10-24 years)
Breastfeeding at 6 to 8 weeks, 2015/16 (percentage of infants due 6 to 8 week checks)

In this area 51.3% of babies received a six to eight week review by a health visitor before they turned eight weeks. No breastfeeding at six to eight weeks data is available.

Measles, mumps and rubella (MMR) vaccination coverage by age 2 years, 2015/16 (percentage of eligible children)

Less than 95% (the minimum recommended coverage level) of children have received their first dose of immunisation by the age of two in this area (90.8%). By the age of five, only 82.4% of children have received their second dose of MMR immunisation. In London, there were 47 laboratory confirmed cases of measles in young people aged 19 and under in 2015.

Chlamydia detection, 2015 (rate per 100,000 young people aged 15-24 years)

Chlamydia screening is recommended for all sexually active 15-24 year olds. Increasing detection rates indicates better targeting of screening activity; it is not a measure of prevalence. Areas should work towards a detection rate of at least 2,300 per 100,000 population. In 2015, the detection rate in this area was 1,919 which is approaching the minimum recommended rate.

Teenage conceptions in girls aged under 18 years, 2014 (rate per 1,000 female population aged 15-17 years)

In 2014, approximately 32 girls aged under 18 conceived for every 1,000 women aged 15-17 years in this area. This is higher than the regional average (approximately 22 per 1,000). The area has a higher teenage conception rate compared with the England average (approximately 23 per 1,000).
### Barking and Dagenham Child Health Profile

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The chart below shows how children’s health and wellbeing in this area compares with the rest of England. The local result for each indicator is shown as a circle, against the range of results for England shown as a grey bar. The line at the centre of the chart shows the England average.

- **No significant change**
- **Increasing / decreasing and getting better**
- **Increasing / decreasing and getting worse**
- **Trend cannot be calculated**

**Notes and definitions**

1. Mortality rate per 1,000 live births (aged under 1 year), 2013-2015
2. Directly standardised rate per 100,000 children aged 1-17 years, 2013-2015
3. % children immunised against measles, mumps and rubella (first dose by age 2 years), 2015/16
4. % children completing a course of immunisation against diphtheria, tetanus, polio, pertussis and Hib by age 2 years, 2015/16
5. % children in care with up-to-date immunisations, 2016
6. % children achieving a good level of development at the end of reception
7. Dtap / IPV / Hib vaccination (2 years)
8. GCSEs achieved (5 A*-C inc. English and maths)
9. 16-18 year olds not in education, employment or training
10. First time entrants to the youth justice system
11. Children in low income families (under 16 years)
12. Family homelessness
13. Children in care
14. Children killed and seriously injured (KSI) on England’s roads
15. Low birth weight of term babies
16. Obese children (4-5 years)
17. Obese children (10-11 years)
18. Children with one or more decayed, missing or filled teeth
19. Hospital admissions for dental caries (0-4 years)
20. Under 18 conceptions
21. Teenage mothers
22. Persons under 18 admitted to hospital for alcohol-specific conditions
23. Hospital admissions due to substance misuse (15-24 years)
24. Smoking status at time of delivery
25. Breastfeeding initiation
26. Breastfeeding prevalence at 6-8 weeks after birth
27. A&E attendances (0-4 years)
28. Hospital admissions caused by injuries in children (0-14 years)
29. Hospital admissions caused by injuries in young people (15-24 years)
30. Hospital admissions for asthma (under 19 years)
31. Hospital admissions for mental health conditions
32. Hospital admissions as a result of self-harm (10-24 years)

*Numbers in italics are calculated by dividing the total number for the three year period by three to give an average figure.*

Where data is not available or figures have been suppressed, this is indicated by a dash in the appropriate box.