

Leeds 0-5s - datapack

2024

There are lifelong impacts of inequalities in the early years. Interventions in the early years are highly effective and yield significant returns in the long-term. Positive early experiences are linked to better school performance, social and emotional development, work outcomes, income, and overall lifelong health, including longer life expectancy.

Sources:

<https://www.instituteofhealthequity.org/taking-action/marmot-places/england-marmot-reports>

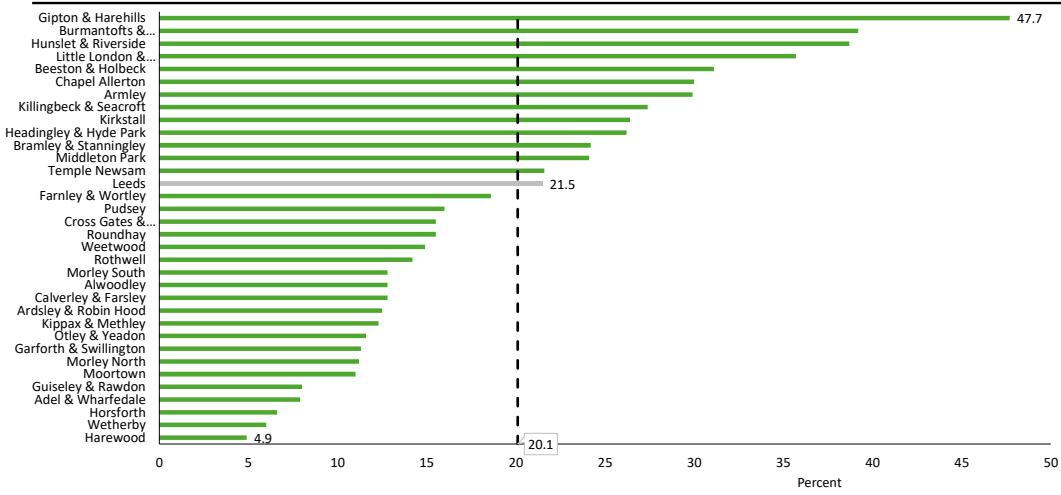
<https://www.instituteofhealthequity.org/taking-action/evidence-to-action-reports/give-every-child-the-best-start-in-life>



Poverty

- Poverty damages health in many ways, from reducing access to healthy and nutritious food and good quality, sufficiently warm housing, to restricting opportunities to engage fully with society, to directly causing physiological stress and harming physical health.
- Reducing child poverty is an essential health and equity strategy, as well as important for influencing other outcomes throughout life
- Children who grow up living in poverty have worse levels of mental, social, physical and behavioural development, as well as worse educational outcomes, employment prospects and earning power into adulthood.
- Parenting approaches are key to children's development in the early years but parenting is also related to families' social and material circumstances.
- It is easier to parent more effectively when social and economic circumstances are favourable and when stress and anxiety are lower (of course, positive and negative approaches to parenting apply across incomes).

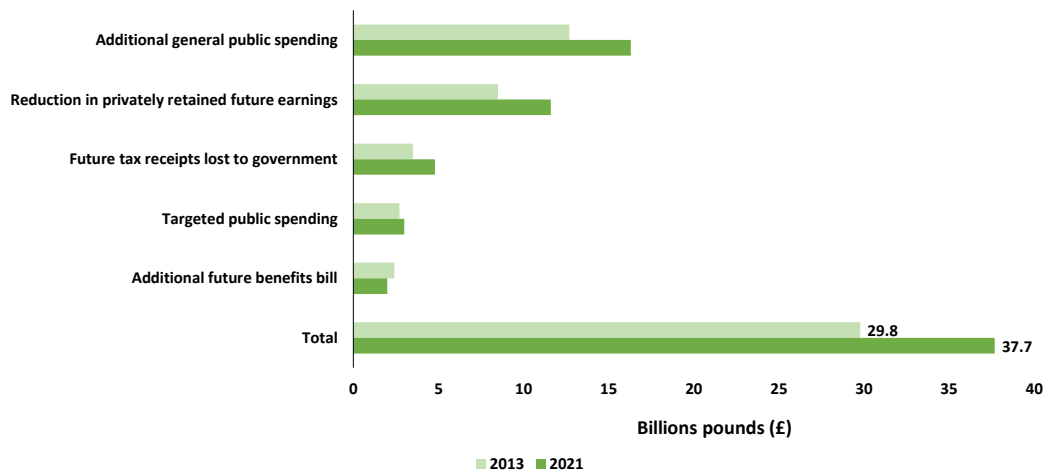
Children in relative low-income families, percent, Leeds wards, Leeds, and UK, 2021/22



Source: Department for Work and Pensions

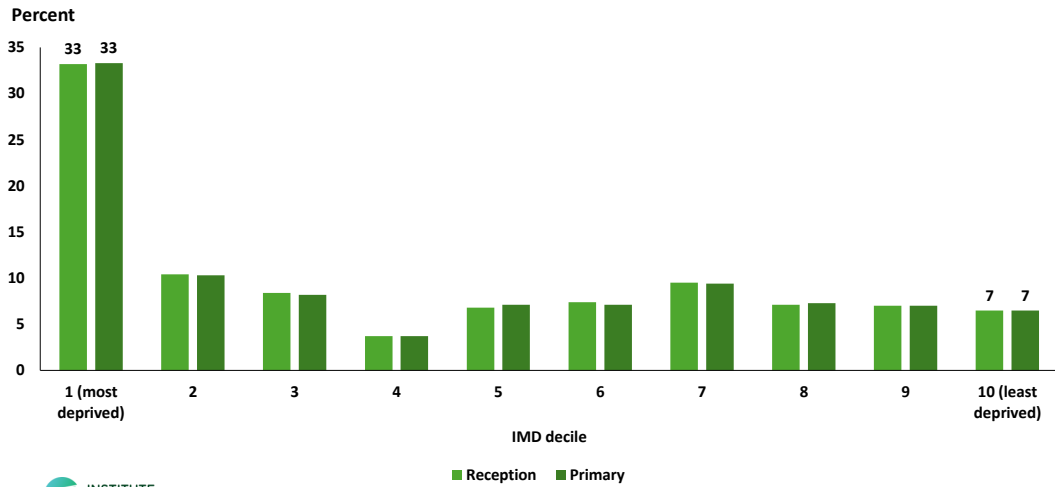
- This shows a clear social gradient by levels of deprivation, as deprivation worsens, outcomes also worsen.

Estimated cost of child poverty, £ billion, United Kingdom, 2013 and 2021



- **Source:** <https://www.lboro.ac.uk/media/media/research/crsp/downloads/the-cost-of-child-poverty-in-2021--crsp-paper.pdf>.

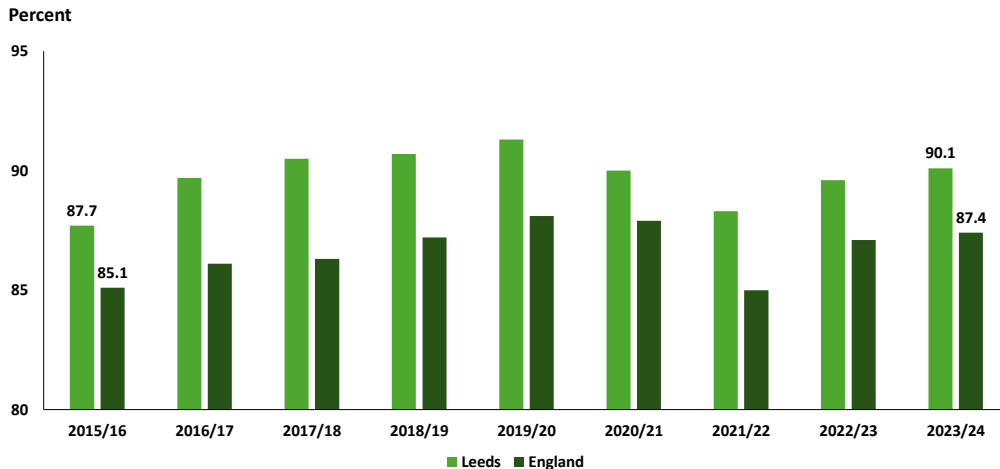
Distribution of children by deprivation decile reception and primary schools, percent, Leeds, 2023



Source: Leeds City Council

- Based on IMD 2019

Universal infant (receptions, year 1, and year 2) Free School Meal take-up, percent, Leeds and England, 2015/16 to 2023/24



- Take up of free school meals has increased and Leeds is performing well against national averages.
- Reasons not to take-up the free offer include issues related to stigma and unawareness.

Ethnicity and poverty in Leeds 0-5s

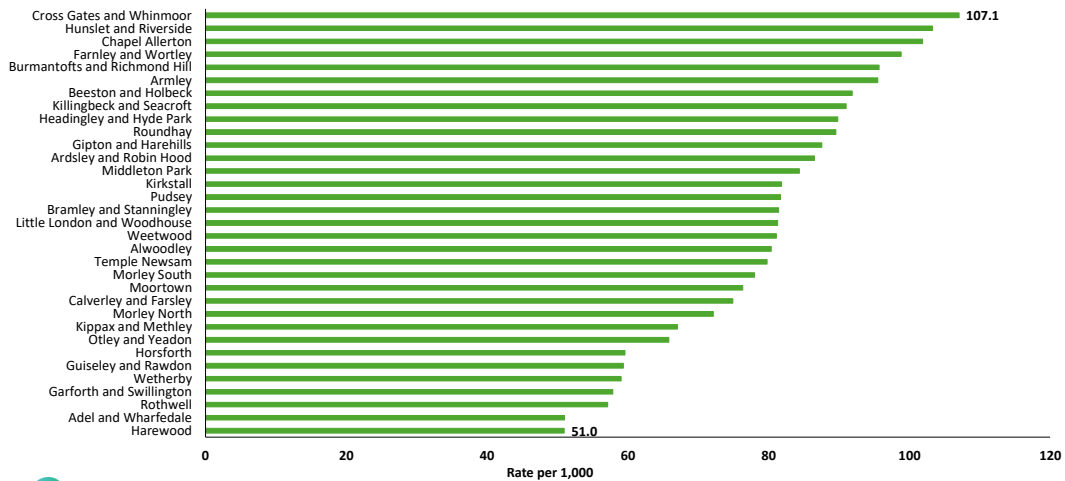
- **Ethnicity**
 - 2022 37.4% children from ethnic minority
 - 2005- 2018 proportion of the Leeds school population from Black and Minority Ethnic backgrounds has nearly doubled - from 17.4% to 33.8%
- **Child poverty** in Leeds is increasing.
 - 2014/15, 16.7% of children lived in relative low incomes families
 - 2021/22 rising to 24.6%
 - Local data have shown that 34% of primary school pupils in Leeds live in areas in the 10% most deprived nationally.



Maternal health

- Maternal health is a critical factor, for the health and future development of both mother and baby.

Indicator 2. Low birthweight babies, rate per 1,000 full-term live birth, Leeds wards, 2020-22



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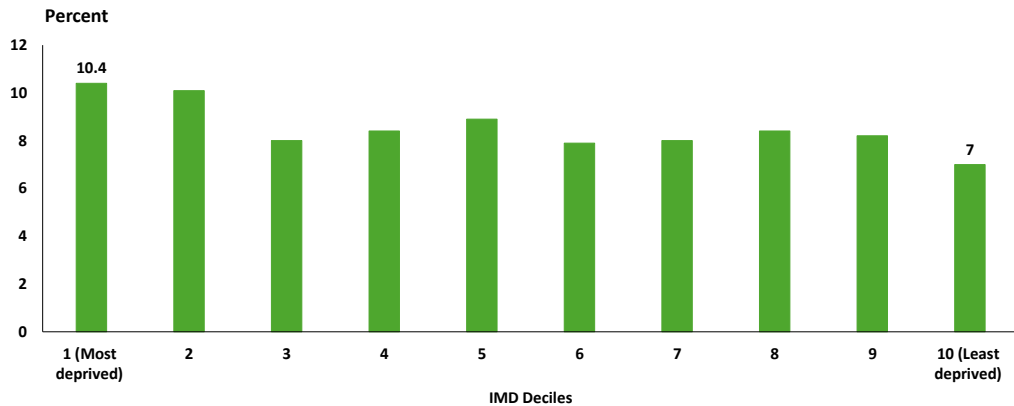
Note: *Babies weighing less than 2,500 grams.

Source: Leeds data team, NHS Digital

- This shows a clear social gradient by levels of deprivation, as deprivation worsens, outcomes also worsen.
- In the UK despite the guidelines about the assessment of women’s risk and prescription of thromboprophylaxis at different stages of pregnancy and the postpartum period, there is often confusion around their application and the guidelines are interpreted differently in hospitals and by different clinicians. As a result, some women are not getting the support they need, or for too short a time (too little) or after a delay (too late).

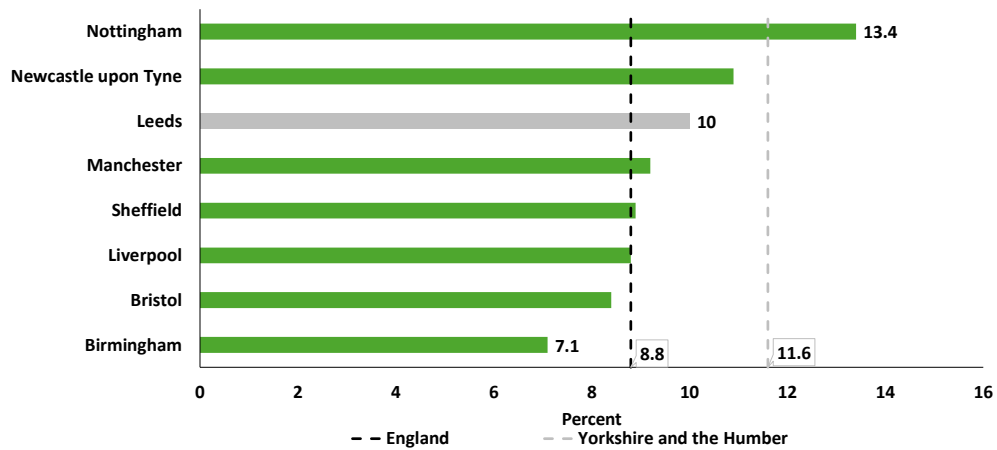
Source: <https://www.thelancet.com/series/maternal-perinatal-health>

Smoking status at time of delivery, by deprivation decile, percent, England, 2022/23



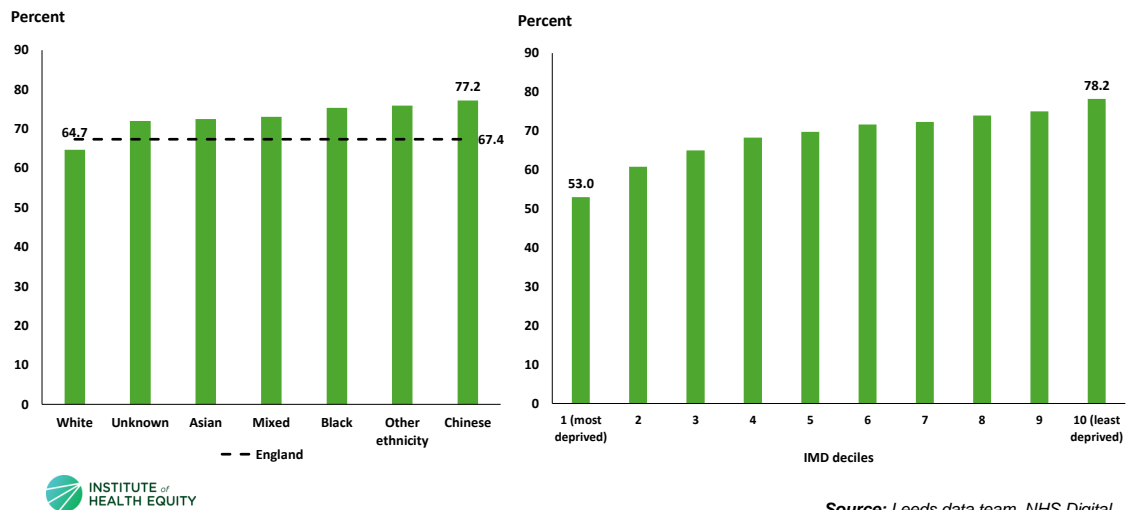
- Smoking during pregnancy affects the health of mothers and their babies. It has been associated with: miscarriage, stillbirth, preterm birth, neonatal complications, and low birth weight.
- *Does not include vaping.

Smoking status at time of delivery, percent, CORE cities and England, 2022/23



- Disaggregated data for Leeds is not publicly available / published.

Babies whose first feed is breastmilk, ethnicity, deprivation deciles, percent, England, 2018/19

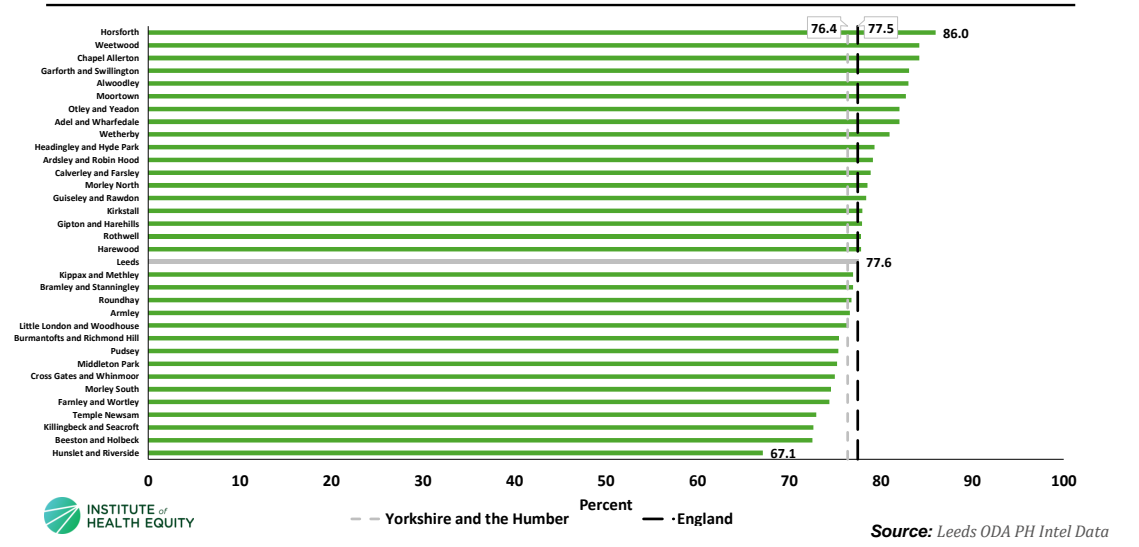


- Breastfeeding has short- and long-term health benefits for both mother and child.
- The UK has one of the lowest breastfeeding rates in the world.
- In the UK, there are significantly lower breastfeeding continuation rates among mothers who are younger, unmarried, or living on low incomes, and have fewer years of education.
- **Source:**
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9835572/>



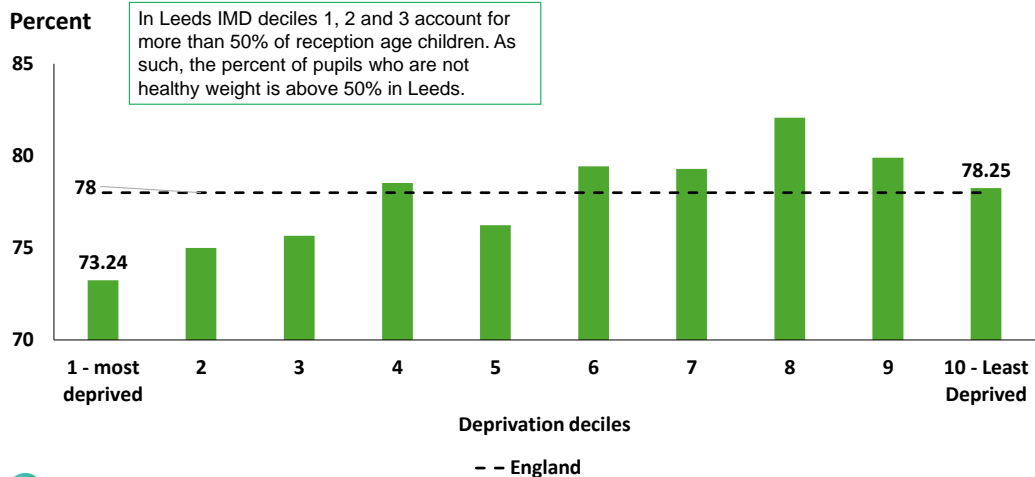
Child Health

Indicator 3. Pupils in reception who are a healthy weight, percent, Leeds wards, Leeds and England, 2022/23



- This shows a clear social gradient by levels of deprivation, as deprivation worsens, outcomes also worsen.
- Pupils in reception who are healthy weight are more likely to live in areas of lower deprivation in Leeds.

Pupils in reception who are a healthy weight, by deprivation decile, percent, Leeds and England, 2021/22

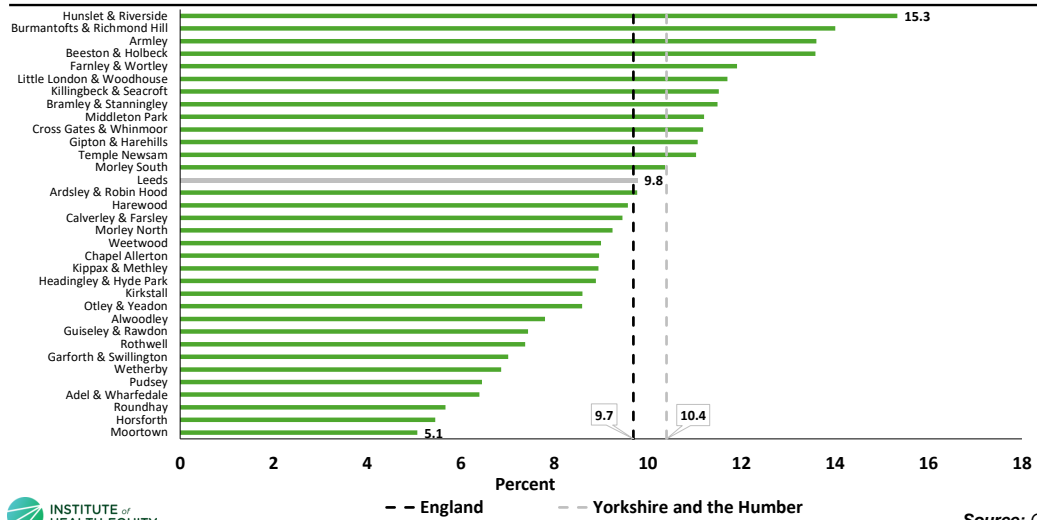


A Nuffield Trust 2022 report* found no single individual or household behaviour associated with high levels of obesity and overweight amongst children.

- Local authorities with higher percentages of overweight or obese children in reception children had:
 - higher rates of under-fives living in areas with poor access to passive green spaces;
 - lower rates of adults walking for leisure;
 - lower rates of physically active adults
 - lower breastfeeding rates.
 - Children and young people cannot influence these factors.

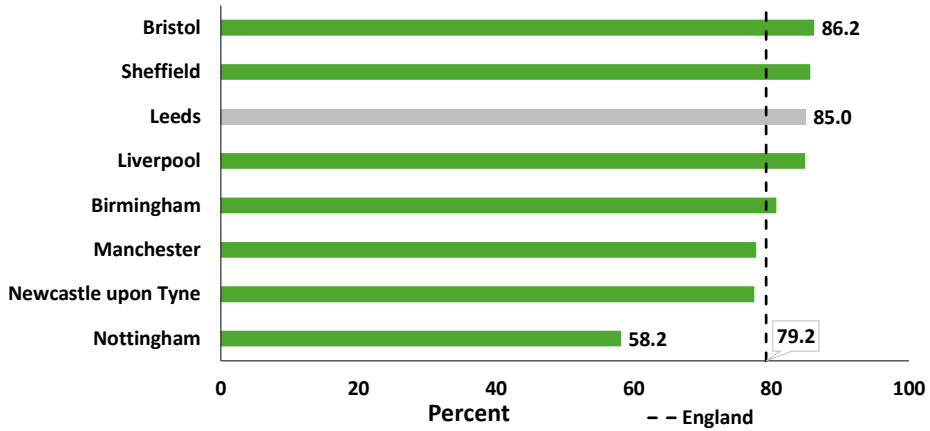
Source: <https://www.nuffieldtrust.org.uk/research/childhood-obesity-is-where-you-live-important#:~:text=Key%20findings&text=Local%20authorities%20with%20the%20highest,those%20with%20the%20lowest%20percentage.>

Children in reception who are living with obesity and severe obesity, percent, Leeds wards, Leeds, Yorkshire and the Humber, and England, 2020/21-2022-23



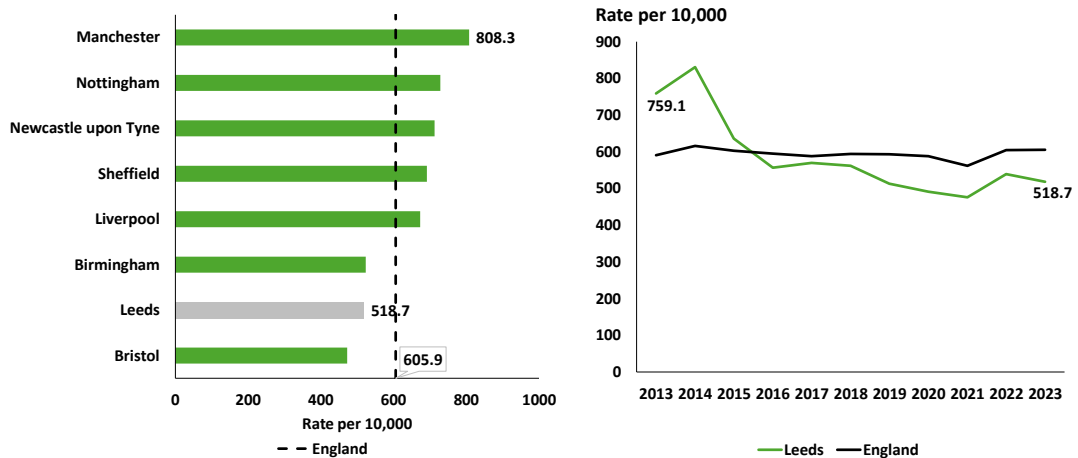
- This shows a clear social gradient by levels of deprivation, as deprivation worsens, outcomes also worsen.

Children who received a 2 to 2½ year review who were at or above the expected level in all five areas of development**, CORE cities and England, 2022/23



*Data not available
**Communication, gross motor, fine motor, problem solving, and personal to social skills
Source: OHID

Children in need* at any point during the year, rate per 10,000, CORE cities, Leeds and England, 2013-23



*A legally defined group of children assessed as needing help and protection as a result of risks to their development or health. Includes children on child in need plans, children on child protection plans, children looked after by local authorities, care leavers and disabled children. (Includes young people aged 18 or over who continue to receive care, accommodation or support from children's services, and unborn children.)

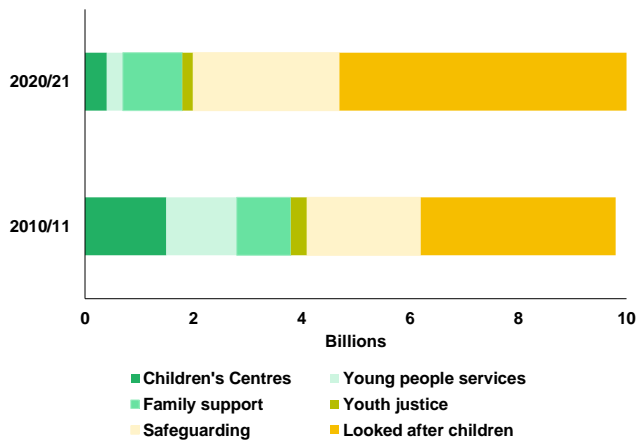


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Source: Gov.uk

- Leeds is performing well compared to national averages and CORE cities.

Children's services spending by category, England 2010/11-2020/21 (real terms 2020/21 prices)

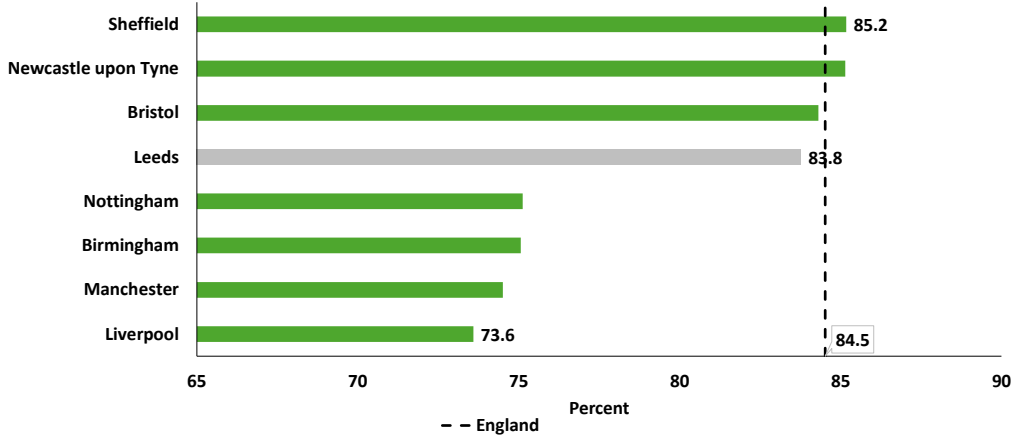


In England between 2010-11 and 2020-21 total spending on children and young people's services:

- **Fell by 10%** in the most deprived local authorities;
 - In these local authorities, the number of children in need increased by 17%
- **Rose by 13%** in the least deprived local authorities
 - In these local authorities the number of children in need only increased by 3%

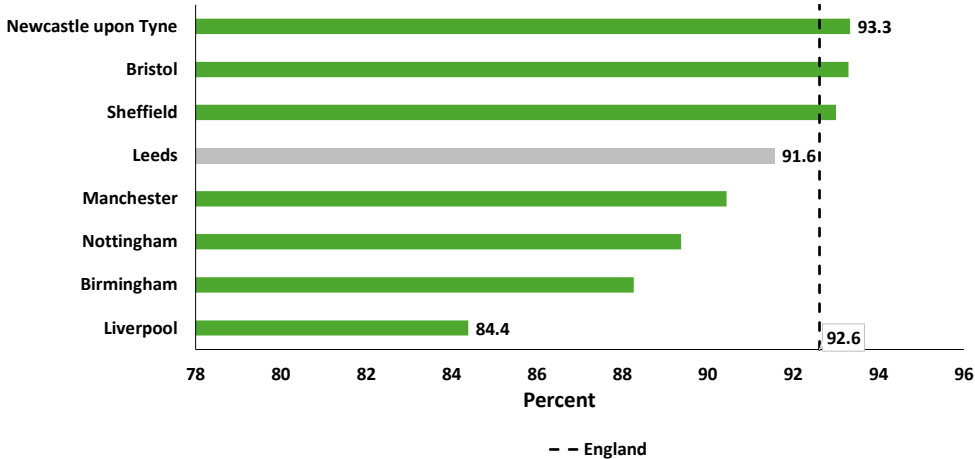
- Central government funding cuts to local authorities has led to less funding for prevention and less funding in deprived areas.
- These central government cuts have led to local staff shortages in: early years settings; teaching assistants in schools; difficulties sustaining midwives; health visitors.

Children (5 years old) who have had two doses of the MMR vaccination, percent, English CORE cities and England, 2022/23



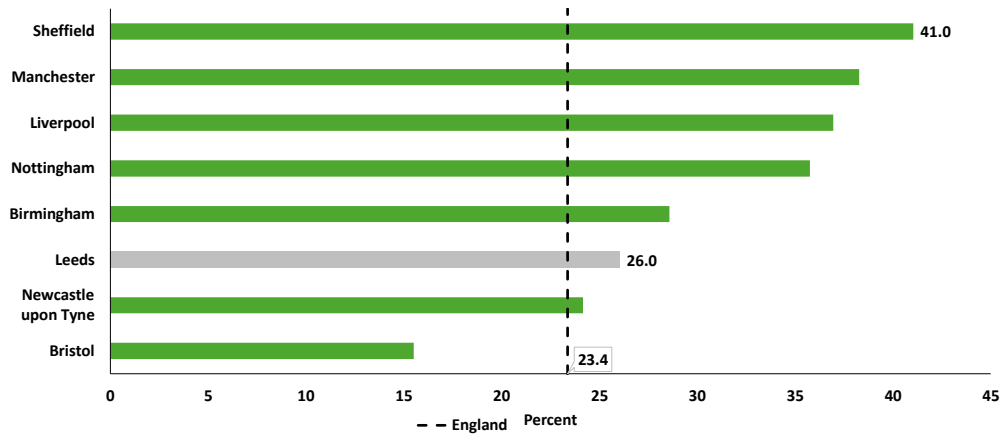
Source: OHID

Children (2 years old) who have had the Dtap IPV Hib HepB vaccination, percent, English CORE cities and England, 2022/23



Source: OHID

5-year-olds with experience of visually obvious dental decay, percent, English CORE cities and England, 2018/19



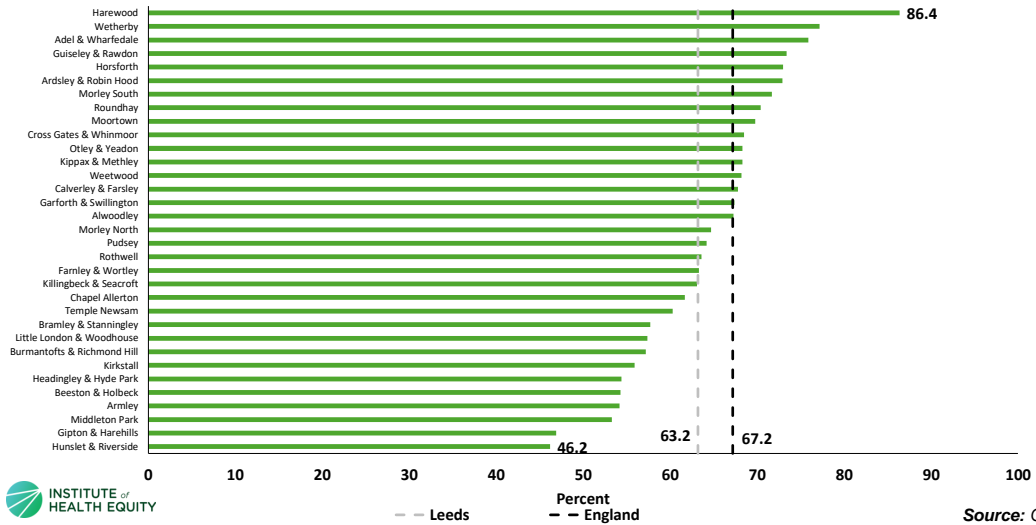
- The CORE cities in this chart includes both those with fluoridated water and non-fluoridated water.



Early years education

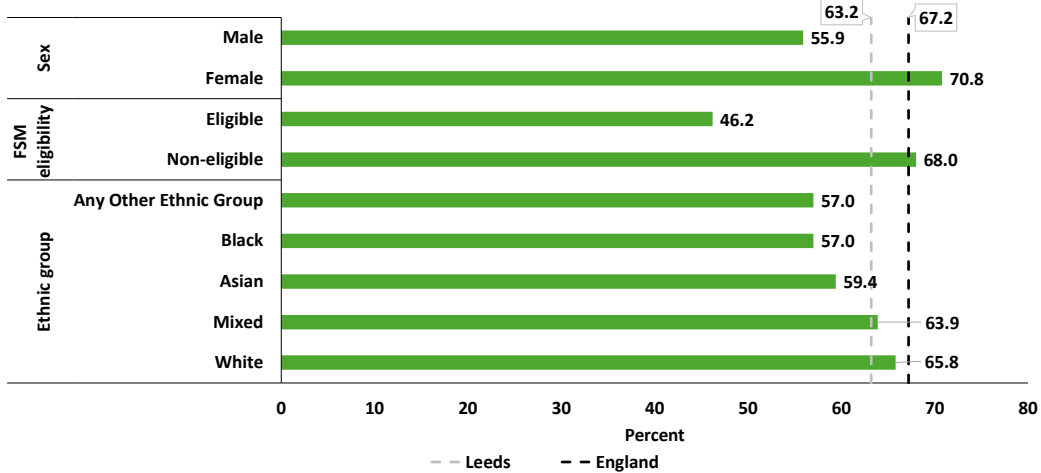
- These statistics report on teacher assessments of children's development at the end of the early years foundation stage (EYFS), specifically the end of the academic year in which a child turns 5.
- This is typically the summer term of reception year.
- In the UK, for both girls and boys, those eligible for free school meals had considerably lower levels of reaching a good level of development than their peers of the same gender

Indicator 4. Pupils achieving a good level of development at the end of reception, percent, Leeds wards, Leeds and England, 2022/23



- This shows a clear social gradient by levels of deprivation, as deprivation worsens, outcomes also worsen.
- In 2024 37% of children in Reception were living in the most deprived neighbourhoods in Leeds, compared with 34% in 2021.
- The uptake of early years places is low in a number of areas of high deprivation in Leeds.
- In 2022 75% of two-year old children in Leeds were attending early years education but this fell in Holbeck to 69%, 50% in Harehills, 65% in Burmantofts and 58% in Woodhouse.

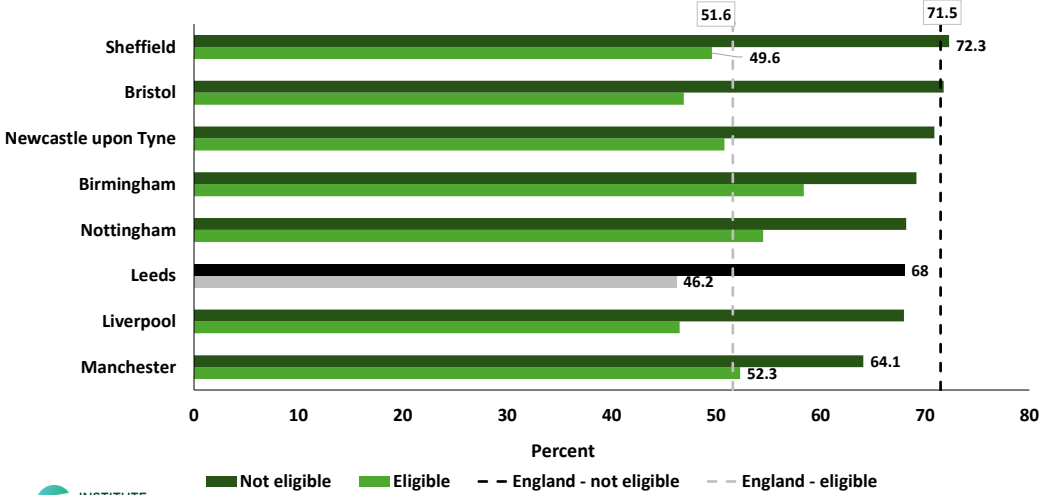
Pupils achieving a good level of development at the end of reception, by ethnic group, sex and Free School Meal eligibility, percent, Leeds and England, 2022/23



Source: Leeds ODA PH Intel Data

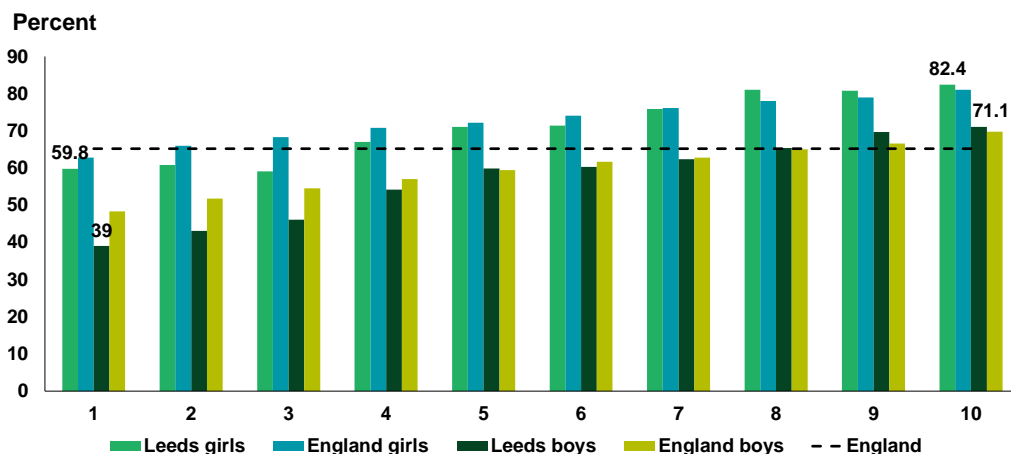
- There are wide differences in reaching good level of development between:
 - Boys and Girls
 - Free School Meal eligibility
- There are smaller differences in outcomes by ethnicity.

Pupils achieving a good level of development at the end of reception, by Free School Meal eligibility, percent, CORE cities and England, 2022/23



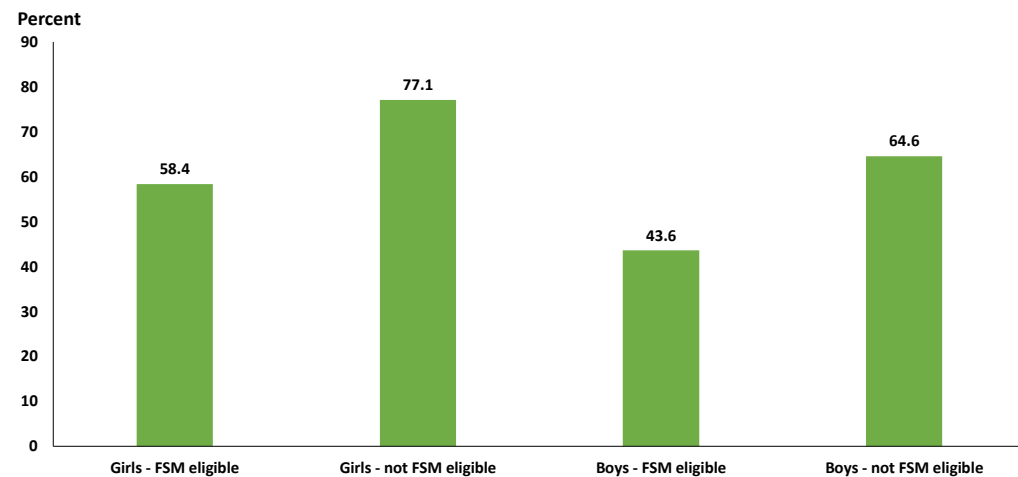
Source: OHID

Pupils with a good level of development, IMD decile (2019), percent Leeds and England 2021-22



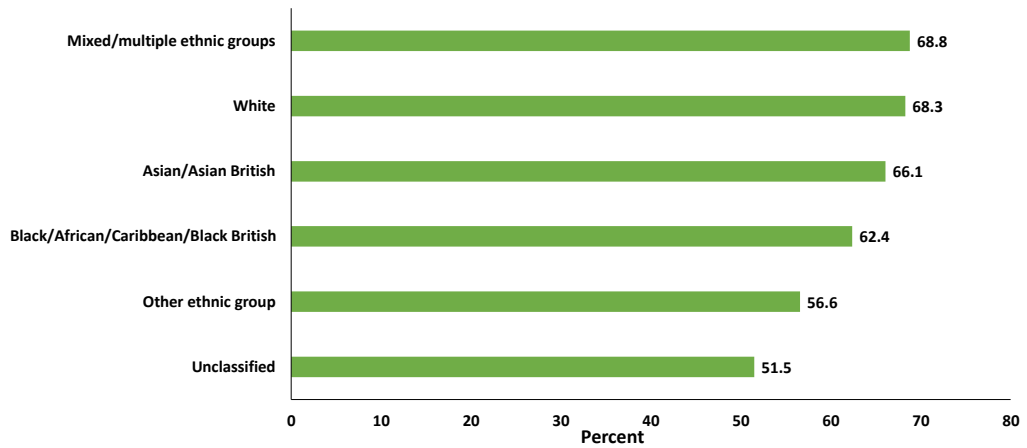
- Experiences and the ability to thrive and develop well during the early stages of childhood relate closely to outcomes in a wide range of areas, including health, throughout the rest of life.
- Socioeconomic inequalities in child development are already recognisable in the second year of life and have an impact by the time children enter school and persist and deepen during their schools years.
- In England, since 2010, inequalities in development during the early years have persisted.

Pupils reaching the expected level in communication and language, and literacy areas of learning at the end of reception, by sex and FSM eligibility, Leeds, 2021-22

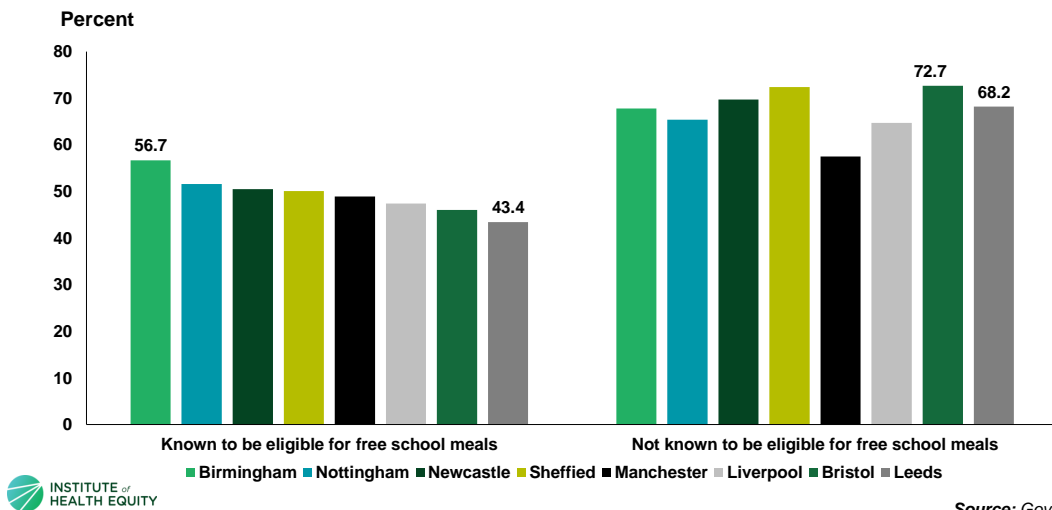


- Strong communication and language skills in the early years are linked with success in education, higher levels of qualifications, higher wages and better health.

Pupils reaching the expected level in communication and language, and literacy areas of learning at the end of reception, by ethnicity, Leeds, 2021-22



Expected level of communication, language and literacy at the end of reception, CORE cities and Leeds, 2021-22

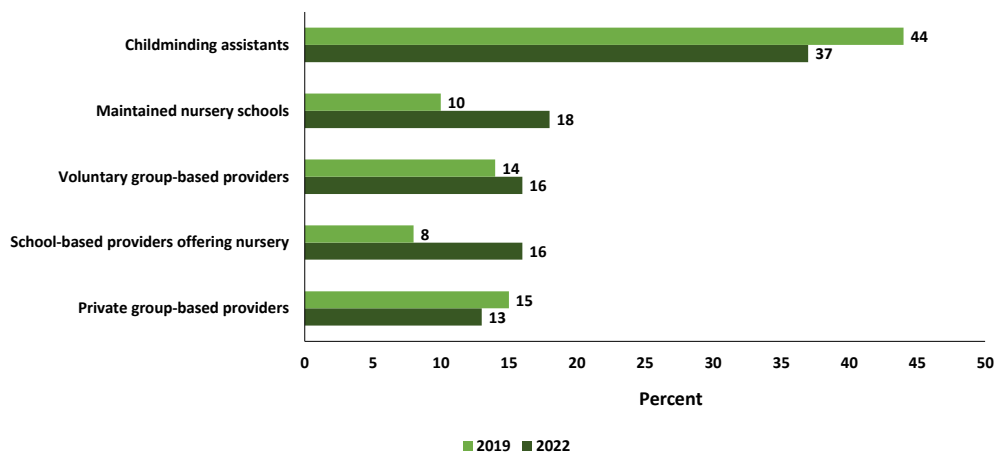


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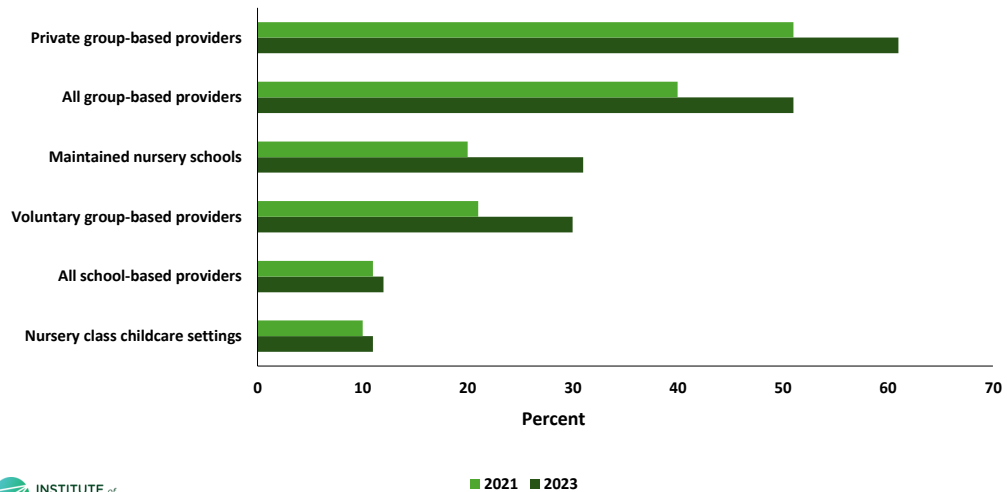
Early years workforce

Childcare workers earning below the national living wage, by provider type, England, 2019 and 2022



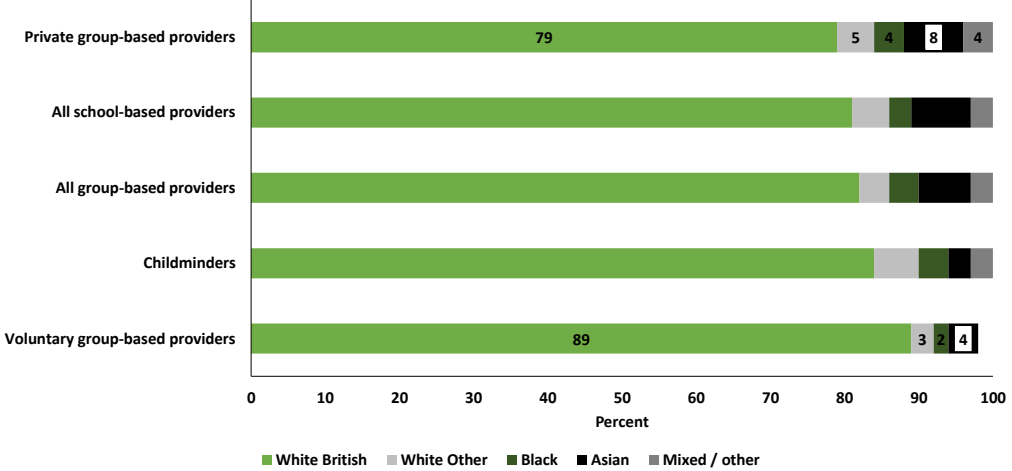
- The national living wage (minimum wage for those aged 21 and over). In April 2024 is it £11.44.
- Many childcare workers earn below the minimum wage.

Early years childcare providers which employ apprentices, by provider type, England, 2021 and 2023

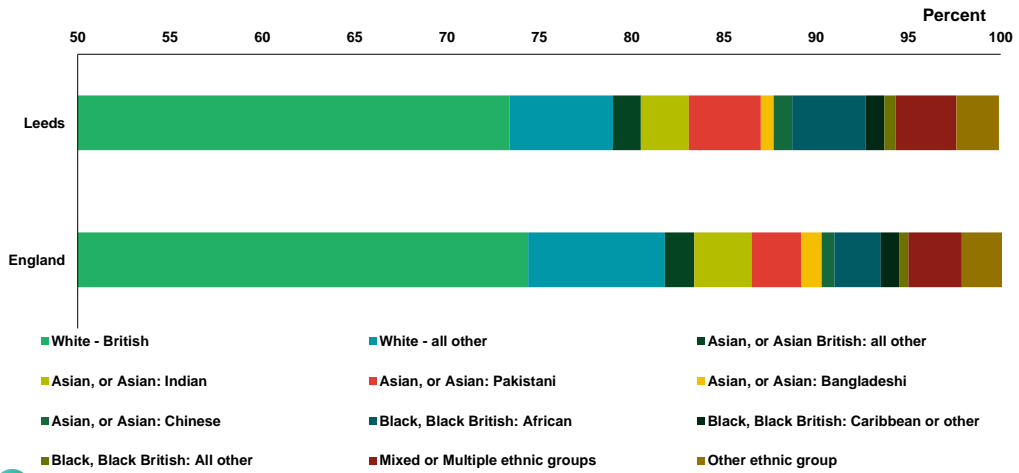


- The number of providers employing apprentices is growing, but there is opportunity to have more in all childcare settings.

Childcare staff by ethnicity, England, 2022



Leeds' future - more ethnically diverse: Ethnic group, percent of population, Leeds and England, 2021



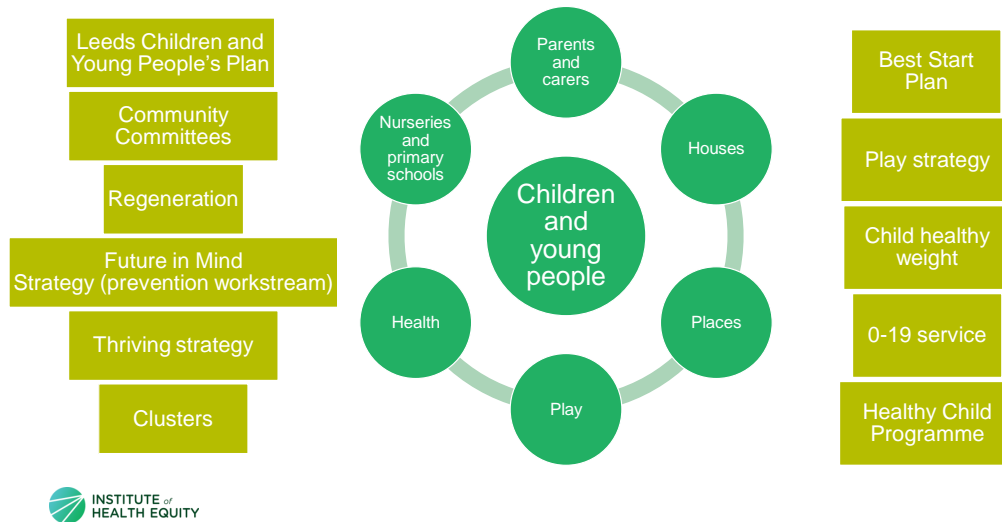
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Source: Office for National Statistics



Current strategies and funding

Some of the existing strategies and approaches providing statutory services to 0-5s in Leeds



- There are a number of strategies aimed at the 0-5s in Leeds, led by different organisations.

Financial pressures – local authorities, schools and the NHS

- For the foreseeable future there will be significant financial pressures and loss of jobs and assets – in Leeds and across the UK
- Leeds has Children's Centres and family hub models are delivered in community hubs
- Family Hubs, like Sure Start, aim to:
 - Bring organisations together to offer a 'one stop shop' to make it easier for families to access the help and support they need.
- However, unlike Sure Start:
 - Family Hubs in Leeds are not accompanied by significant additional funding.
- As such, it will be difficult for Leeds to achieve similar impacts to those made in areas with funded Family Hubs.



**0-5s: Fairer, Healthier
Leads recommendations**

LEADERSHIP for 0-5s health equity

1. The Leeds Children and Young People's Partnership to be accountable for delivering these recommendations and ensuring that the voices of children aged 0-5 and their families/carers are at the centre of implementation.
2. Leaders to convene partners across Leeds to develop and deliver an integrated *Best Start and Beyond* strategy focussed on prevention and the reduction of health inequalities of children aged 0-5.

PARTNERSHIPS for 0-5s health equity

3. Stakeholders responsible for delivering strategies and services for 0-5 year olds and their families/carers to maximise partnership working to reduce health inequalities.
4. The Leeds *Best Start and Beyond* partnership to mobilise a clear Start for Life offer with a focus on reducing health inequalities.
5. All partners to improve understanding of and take actions to reduce persistent inequalities experienced by children aged 0-5 and families/carers from culturally diverse communities.
6. All partners to improve understanding of and take actions to reduce persistent inequalities experienced by children aged 0-5 and families/carers living in Leeds most deprived neighbourhoods.
7. Partners to embed health equity assessments of strategies and services for 0-5 year olds and their families/carers, to ensure inequalities are addressed.

COMMUNICATION for 0-5s health equity

8. All partners delivering the *Best Start and Beyond* strategy to connect and clearly communicate universal and proportionate offers to children aged 0-5 and their families/caregivers through a central communication platform.