

SOUTHERN POLICY CENTRE

**Starting Well:
giving young people the best chance in life**

Briefing Paper

Supported by the University of Winchester and Capsticks LLP

January 2022

Starting Well: giving young people the best chance in life

Briefing Paper

Introduction

This is the third in a series of seminars hosted jointly by the University of Winchester and Southern Policy Centre. We have been exploring the health and well-being of communities in the central South: what will allow everyone to enjoy full and active lives. The aim of this series is to encourage a wider discussion and debate about our society and how we can secure a better life for all.

The first seminar in 2018 discussed how our society's demographic make-up is changing, with a growing proportion of people over 65 years of age. Our speakers considered how we can make a better life for older people. The second seminar in the spring of 2019 looked at healthy lifestyles: experts in diet, physical activity and mental well-being explored how we can 'live well'.

This third seminar looks at the first part of the journey through life, and how we can give children the best start. Our speakers will look at the impacts of physical and mental health, and of education and learning on children's life chance, and how the circumstances they experience in their early years affect their future.

We are fortunate in the UK, our children do not experience the magnitude and scale of poverty and ill-health that their counterparts in too many countries face daily. However, as this briefing paper will discuss, we do see inequality across our communities, and that can have a very direct impact on the life chances of children. England's Children's Commissioner, Dame Rachel de Souza, recently launched her Childhood Commission, aiming to help build a post-

pandemic consensus around the vision and ambition needed to ensure children in England have a good childhood and reach their full potential.ⁱ Our seminar shares those aims, asking what we in the central South can do to ensure our policies and plans help shape a society that works for children.

This Briefing Paper

This short Briefing Paper is intended to give some background to support the seminar being held on 26 January. It is not intended as a comprehensive analysis of what affects the lives of children in our region. Rather, it provides some background to the expert presentations at that seminar and the discussion we hope they stimulate. The data presented serve to illustrate some of the positives and negatives affecting health, learning and development, and economic outcomes for children, but not to discuss them in full: our seminar provides an opportunity to debate matters in more detail.

We are focusing on what can help children get a good start to their lives, and so will help them in securing a safe, healthy future. For the purposes of this paper and our seminar we have chosen to look primarily at children aged 0-14, which reflects demographic analyses by ONS. It is, however, an arbitrary classification, and some data sets used in this paper will cover different age groups. We'll use the word 'children' as a generic term to cover those within this age bracket, acknowledging where data are based on a different cohort.

We use the term 'central South' to

describe the area this Briefing Paper examines. That encompasses the administrative areas of Bournemouth, Christchurch & Poole Council (BCP Council), Hampshire County Council, Isle of Wight Council, Portsmouth City Council and Southampton City Council. Data we present is based on this geography unless otherwise explained. In each table we compare data for these areas with the England-wide figure for the same indicator (save when we look at deprivation and social mobility, where no such comparison can be made).

Demography and life expectancy

Table 1 shows the number of children who live in the central South today (based on 2020 forecasts).ⁱⁱ Children make up 16.9% of our population, slightly fewer than the 18.1% of England's population who are under 14. The data in the table also looks forward to 2040, forecasts suggest there will be fewer children in our region and England, and they will represent a smaller percentage of the overall population: 15.0% in the central South and 16.0% in England as a whole. Notwithstanding the

Cohort Area	2020		2040		% Change 2020-2040	
	Children 0-14 (%Tot.Pop)	Total Pop.	Children 0-14 (%Tot.Pop)	Total Pop.	Children 0-14 (%)	Total Pop. (%)
BCP	64,369 (16.2)	397,716	54,942 (13.5)	407,582	-15.0	2.5
Isle of Wight	20,562 (14.4)	143,140	18,027 (11.6)	155,155	-12.3	8.4
Portsmouth	37,778 (17.4)	216,910	35,611 (15.9)	224,034	-5.7	3.3
Southampton	44,877 (17.6)	255,383	43,274 (16.0)	269,735	-3.6	5.6
Hampshire	239,440 (17.2)	1,389,256	226,421 (15.4)	1,468,324	-5.4	5.7
Central South	407,026 (16.9%)	2402405	378,275 (15.0)	2524830	-7.1	5.1
England	10240325 (18.1)	56,678,470	9806698 (16.0)	61,157,868	-4.2	7.9

Table 1: Total population (all age groups) and population of 0-14 year old children in England and central South (by area) for 2020 and forecast for 2040 (Source: ONS)

reducing number of under 14s, the population as a whole will grow, and the absolute number and proportion of people over 65 in our communities increases.ⁱⁱⁱ

Male children born in England during 2017-19 can expect a to live for an average of 79.76 years, whilst females can expect to live for 83.37.^{iv} In our region

males born in the BCP Council and Hampshire areas can expect to live slightly longer, whilst in other parts of the central South they have an average life expectancy of only slightly less than the England average.

However, those children cannot expect to remain healthy all of those years, males

will on average have between 15.7 and 18.8 years (depending on area they live in) when they will live with some sort of illness of disability which significantly affects their everyday life, whilst females face between 18.6 and 24.3 years where their health is adversely affected.

Learning and development

The skills and knowledge that children develop in their early years are a vital foundation for future success: the pathway to gainful, rewarding (both personally and economically) employment, which in turn helps secure better health and well-being (see reference i).

By the time they reach 5 years of age children will be assessed for progress in what is termed the Early Years Foundation Stage. This looks at progress against several areas of learning: communication and language, physical development, personal, social and emotional development, literacy, mathematics, understanding the world and expressive

arts and design. In 2017 the percentage of children across England achieving a 'good level of development' (ie. performing at or above the expected level) was 69.3%. In all parts of the central South children scored better than the UK average, save that those in Havant did slightly less well.^v That suggests that most children in the region get off to a good start in developing basic skills.

Attainment at primary school is recorded by achievement at Key Stages 1 and 2 - which examine proficiency in English (reading, grammar, punctuation and spelling) and mathematics by the age of 7 (KS1) and 11 (KS2). Table 2 shows the percentage of pupils achieving the expected level at each stage across the central South.

The table shows that our schools continue to perform well at KS1 and 2, with achievement in several parts of the region being above the England average, although it is slightly lower in other parts.

	% children achieving expected level in KS1	% children achieving expected level in KS2
Bournemouth*	72.5	54.2
Christchurch	73.8	48.5
Poole	77.3	53.8
Isle of Wight	75.3	48.8
Portsmouth	72.6	48.1
Southampton	75.4	54.7
Hampshire	80.2	58.9
England	74.0	53.8

*data for individual local authorities prior to their merger into BCP Council in April 2019

Table 2: % children in state schools achieving expected standard at KS1 and 2 (2017)(Source: DfE)

Health and wellbeing

A healthy start to life is important for children, freedom from illness helps socialisation, development and access to school and learning. Table 3 shows, for four common conditions, hospital admissions for children aged 0-9 across the central South by comparison with the England average.^{vi}

These data suggest child health is good in most parts of the region across a range of conditions, although there are areas of concern, for example the high incidence of asthma admissions in BCP and Southampton or diabetes admissions in Portsmouth.

	Hospital admissions (per 100,000) for various conditions Children aged 0-9			
	Dental Caries	Asthma	Diabetes	Epilepsy
BCP	19.7	233	35.0	209.9
Isle of Wight	n/a	112	n/a	112
Portsmouth	32.6	159	39.7	99.2
Southampton	17.6	194	n/a	80.7
Hampshire	38.6	169	31.8	92.3
England	286.2	192	27.6	94.6

Table 3: Hospital admissions per 100,000 of population for various conditions (2019/20) (Source: Public Health England)

However, other data paints a more worrying picture, with high levels of childhood obesity or hospital admissions

for mental health conditions (nb. data on the latter are for all under 18s) in many parts of the region - see table 4.

		BCP	Isle of Wight	P'mouth	S'hampton	Hampshire	England
Hospital admissions for mental health conditions (under 18, per 100,000) (2019/20)		119.1	202.1	57.1	175.5	114.3	89.5
Prevalence of childhood obesity - % (2019/20)	4-5 year olds	7.7	10.8	11.0	9.9	8.3	9.9
	10-11 year olds	18.1	17.5	22.1	23.8	16.6	21.0

Table 4: Rates of mental health admissions and obesity diagnoses for the central South (Source: PHE)

Looking more widely at the circumstances our children experience in their daily lives, it becomes apparent that a number face some real challenges. Table 5 shows, for

example, that in several parts of the region there are significant numbers in low income households or in housing need.

	BCP	Isle of Wight	P'mouth	S'hampton	Hampshire	England
% Children in absolute low income families* (under 16s - 2019/20)	10.5	15.4	16.5	18.2	9.4	15.6
% Children in relative low income families* (under 16s - 2019/20)	12.7	19.4	20.2	22.0	11.4	19.1
Households with dependent children in housing need** (2019/20 - no. per 1,000)	21.1	15.4	22.8	19.8	11.6	14.9

* - Relative low income: comparison to median income for 2019/20. Absolute low income: comparison to median of a base year (2010/11) which allows comparisons over time^{vii}

** - as defined in the Homelessness Reduction Act 2017

Table 5: measures of socio-economic needs in children in the central South (Source: PHE)

Child Safety

Table 6 shows two measures of how safe our children area: hospital admissions and those subject to a Child Protection Plan -

an action plan drawn up by Children's Services Departments when it is feared a child is at risk of significant harm.

	BCP	Isle of Wight	P'mouth	S'hampton	Hampshire	England
Hospital admissions caused by unintentional and deliberate injuries in children (0-14) (2019/20 - per 10,000)	115.4	123.8	72.3	92.5	89.7	91.2
Children subject to a child protection plan (2019/20 - per 10,000)	29.9	50.9	46.4	77.2	33.0	42.8
Children in care (2020 - per 10,000)	70	107	106	95	56	67

Table 6: measures of child safety in the central South (Source: PHE)

The Table also shows the number of children in care, which offers one indication of the difficulties in ensuring some children have a stable start in life.

In some parts of the central South the data suggest that children face challenges, for example the risks that underlie the high

levels of hospital admissions in BCP or the Isle of Wight. The table also suggests that local authorities feel the need to take preventative action in some areas, with numbers in care or with a child protection plan above the England average. The underlying concerns for child safety may be the result of a number of factors which

space prevents us exploring in more detail.

Deprivation and outcomes for children

Many children across England live in households which lack income or other resources, where that lack is significant they are termed *deprived*. The English Index of Multiple Deprivation (IMD) measures deprivation across seven domains with indicators that record levels of income, employment, health & disability, education & skills, crime, housing and local environment. The IMD ranks local authority areas according to relative deprivation (it makes no judgement about what is an adequate or appropriate level of resource) with 1 being the most deprived - that is lacking resources and so facing greatest challenges under the domains measured - and 317 the least deprived.^{viii}

The IMD provides a place-based insight into deprivation. However, this description does not apply to every person living in these areas. Many non-deprived people live in so-called deprived areas, and many deprived people live in non-deprived areas. But it does help indicate which parts of our region faced the greatest challenges. The IMD rankings for the local authority areas of the central South are shown below:

- B'mouth, C'church & Poole 166
- Isle of Wight 80
- Portsmouth City 57
- Southampton City 55
- Hampshire County 130-317

Hampshire County rankings are recorded by district, with Gosport having the lowest ranking at 130 (ie. relatively most deprived of the 11 districts), with Havant just behind at 133, whilst Hart is the relatively least deprived at 317. The remaining 8 districts are all ranked in the 200s.^{ix}

Deprivation matters. It affects early years attainment, for example, with the most deprived areas seeing fewer children achieve expected development scores.^x Research by the Joseph Rowntree Foundation has shown that children growing up in poverty and disadvantage are less likely to do well at school,^{xi} whilst other data show they are likely to experience poor health.^{xii}

Overall, the central South does not experience high levels of deprivation, and so the negative consequences that may have for children. However, it is the pockets of deprivation in our communities, and notably in the urban areas, which merit our attention. This is where we may find the children who are doing less well and need help and support.

Social Mobility

Our seminar is about how our children can get the best possible start in life. One measure of that is the social mobility index (SMI), an indicator of the chances available to young people from poorer backgrounds. The index compares the chances that a child from a disadvantaged background will do well at school and get a good job across each of the local authority district areas of England. It examines a range of measures from early years and school attainment to local salaries and house prices to assess the best and worst places in England in terms of the opportunities for young people.^{xiii}

Importantly, better-off areas do not necessarily offer good opportunities for disadvantaged young people, so affluence is no guarantee of good outcomes for all: indeed Poole is in the bottom 20% of UK places for social mobility, whilst Portsmouth is the 27th best area in England for early years social mobility.^{xiv}

The Social Mobility Indices for the central South are shown below, the index is a

relative measure where 1 equals best level of social mobility in England and 324 the worst:

- B'mouth, C'church & Poole 165, 211, 286 (score based on pre-2019 areas)
- Isle of Wight 220
- Portsmouth City 166
- Southampton City 145
- Hampshire County 29-251^{xv}

As with measures of deprivation, the ranking varies across our region, notably with a broad range across the County of Hampshire. The data suggest that we cannot be complacent about the mobility we offer our children, particularly in some parts of the central South.

Conclusions

This briefing paper has only sought to give a brief overview of the education, health and economic outlook for children growing up in the central South. It inevitably raises more questions than it offers answers, indeed the point of the paper is to encourage participants in our seminar to think about the future our children face.

It is clear that today the picture is patchy: in some areas and by some measures our children are doing well, enjoying good health and learning successfully. However, not all the measures of performance are as we would want them to be in all local authority areas. If we were to dig below that geographic level to look at individual communities or localities we would see even more of a mixed picture.

The variations we see put pressure on local councils, our health services and other institutions to invest to create a better future for children. Finding the resources - cash, people and time - to do that is never easy. It will be made doubly difficult by the competing demands for resources as the adult population grows whilst the number of children in the central

South declines. The challenges adult social care faces are well documented, and those providing services to children and adults will face difficult choices.

Our seminar will not provide all the answers to these challenging questions. But we hope that the participants - our speakers and our audience - will be able to explore just what can be done to ensure children in the central South enjoy the best start in life we can give them.

Simon Eden
Southern Policy Centre
January 2022

Acknowledgements

This briefing paper was made possible by support from the University of Winchester and sponsorship from Capsticks LLP.



References

ⁱ The Childhood Commission (Children's Commissioner for England - March 2021) - [cco-the-childhood-commission.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/94441/cco-the-childhood-commission.pdf) ([childrenscommissioner.gov.uk](https://www.childrenscommissioner.gov.uk))

ⁱⁱ Population data are drawn from 'Population Projections for Local Authorities' (ONS - March 2020) - [Population projections for local authorities: Table 2 - Office for National Statistics](https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/populationprojectionsforlocalauthorities/2020-03-02)

ⁱⁱⁱ See 'Health and Social Care: the challenge facing the central South' (SPC, March 2018) - [Health and Social Care - Southern Policy Centre](https://www.southernpolicycentre.org.uk/wp-content/uploads/2018/03/Health-and-Social-Care-the-challenge-facing-the-central-South.pdf)

^{iv} 'Life and healthy life expectancies' (ONS - January 2021) - [Health state life expectancy, all ages, UK - Office for National Statistics](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandlife/bulletins/healthstatelifeexpectancyallages/2021-01-07) ([ons.gov.uk](https://www.ons.gov.uk))

^v Data on EYDF and KS 1 & 2 are drawn from tables contained 'Education Statistics by LA District' (DfE - October 2017) - <https://www.gov.uk/government/publications/education-statistics-by-la-district-and-pupil-disadvantage>

^{vi} All health data are drawn from tables contained in 'Child & maternal health statistics' (DfHSC/PHE - November 2021) - <https://www.gov.uk/government/collections/child-and-maternal-health-statistics>

^{vii} See 'How low income is measured' (DWP - September 2016) - [How low income is measured in households below average income - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/54441/How_low_income_is_measured_in_households_below_average_income.pdf) (www.gov.uk)

^{viii} See 'English Indices of Deprivation' - statistical release: main findings (MHCLG - September 2019) -

<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>

^{ix} English Indices of deprivation, File 10, local authorities district summaries - see ref viii

^x Inequalities in child development (PHE - June 2021) -

<https://www.gov.uk/government/publications/in-equalities-in-child-development>

^{xi} Experiences of poverty and educational disadvantage (Joseph Rowntree Foundation - September 2007) - [Experiences of poverty and educational disadvantage \(summary\)](https://www.jrf.org.uk/publications/2007/experiences-of-poverty-and-educational-disadvantage) ([jrf.org.uk](https://www.jrf.org.uk))

^{xii} Impact of poverty on child health (Royal College of Paediatrics and Child Health - April 2018) - [The impact of poverty on child health | RCPCH](https://www.rcpch.ac.uk/resources/publications/impact-of-poverty-on-child-health)

^{xiii} Social Mobility Index (Social Mobility Commission - June 2016) - [Social mobility index - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/54441/Social_Mobility_Index.pdf) (www.gov.uk) (see 'Social Mobility Index' PDF)

^{xiv} Social Mobility Index - see ref.xiii, Data for the Social Mobility Index file

^{xv} In Hampshire the best score for social mobility is in Hart district, followed in order by East Hampshire, Winchester, Test Valley, Basingstoke & Deane, Fareham, New Forest, Havant, Rushmoor, Eastleigh and finally Gosport.




About Southern Policy Centre

Southern Policy Centre was established in 2014 as the independent think-tank for the region of central southern England. We focus broadly on the area from Dorset to West Sussex and the Isle of Wight to Oxfordshire.

The region is often not recognised by central government and SPC exists to try and redress this by providing a politically neutral, constructively critical space for discussion on issues that affect the region.

SPC specialises in improving public policy making by conducting research into the social challenges facing society and we have established a strong reputation for leading public debate and setting the agenda across a wide range of regional issues.

 @policysouth and @ODIHampshire

Email: info@southernpolicycentre.co.uk | Telephone: 07879 637381
Winchester Business Centre | 10 Parchment Street | Winchester | SO23 8AT