



# A Profile of the Health of Children and Young People in Wales

A summary report by the National Public Health Service for Wales

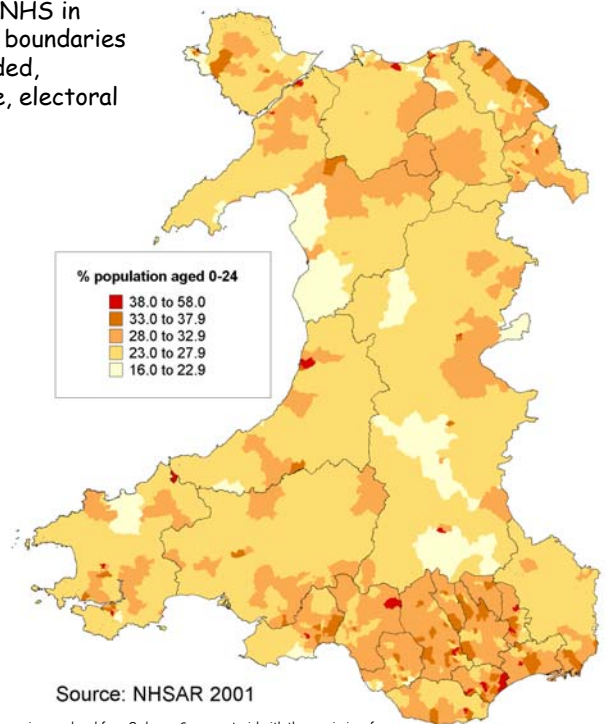
*This summary highlights the content of each chapter and includes examples of analyses presented in the profile. The profile aims to provide a 'state of the art' analysis of children's health in Wales using routine data. A full copy of the Profile can be found at [www.nphs.wales.nhs.uk](http://www.nphs.wales.nhs.uk)*

## Background

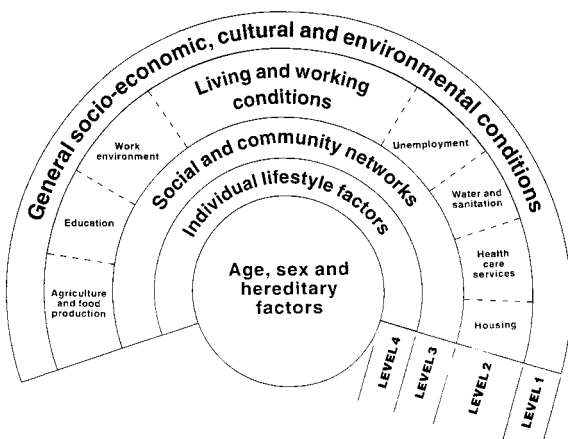
The profile has been produced by the Health Information Analysis Team of the National Public Health Service for Wales. Data from a wide range of sources are included reflecting the reality that many of the factors affecting the health of children and young people lie beyond the NHS. Improving the health of children and young people cannot be achieved by the NHS alone and requires partnership working with other agencies. This has been made easier following the reorganisation of the NHS in Wales with health and local government sharing the same boundaries at the local level. Analysis at various geographies is provided, including all-Wales, local authority and, where appropriate, electoral division (ward) levels.

## Chapter two - Demography

This chapter shows how demographic patterns vary throughout Wales amongst children and young people. The two main sources of population data are the 2001 Census and GP registrations (NHSAR), both of which have their respective limitations. The proportion of 0-24 year olds is lower in the more rural areas of Wales particularly in electoral divisions within Powys, Conwy, and Monmouthshire. Urbanised areas such as the major towns and cities and the South Wales Valleys have higher proportions in this age group. In addition, towns with large higher education institutions such as Aberystwyth and Bangor have high proportions of 0-24 year olds, accounted for by large numbers of students in the 18-24 age group.



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Source: adapted from Dahlgren and Whitehead, 1991<sup>1</sup>

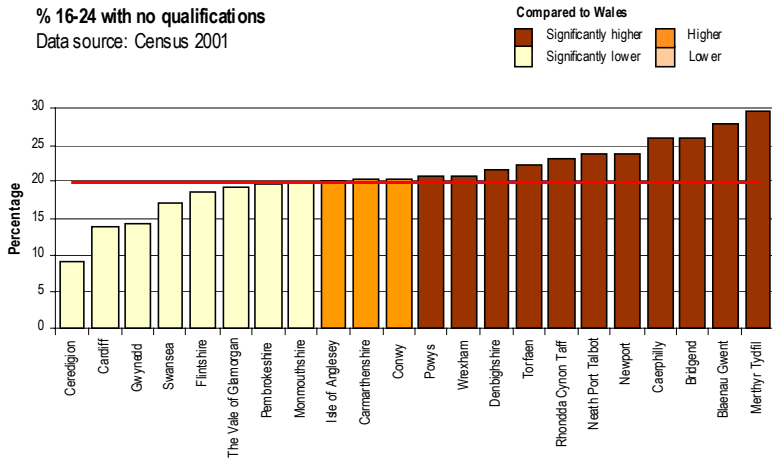
## Chapter three - Determinants of Health

This chapter aims to capture available data on the key determinants of health as they apply to children and young people. The model by Dahlgren & Whitehead demonstrates the breadth of the challenge faced in terms of improving the health of children and young people. Information on the following is included:

- Income / socio-economic deprivation
- Children in families
- Teenage conceptions and births
- Lifestyle
- Education
- Housing
- Social care

### % 16-24 with no qualifications

Data source: Census 2001



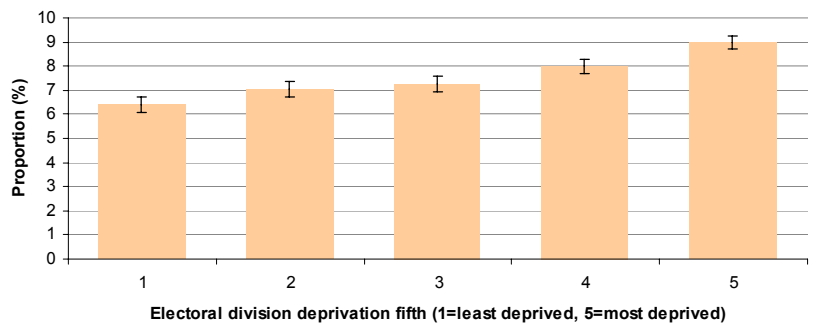
The graph opposite shows information on the percentage of persons aged 16-24 with no educational qualifications. Education is one of the key determinants of health.<sup>1</sup> People who are well educated are more likely to be able to obtain higher paid employment, leading to a better lifestyle.<sup>2</sup>

## Chapter four - Health Status

This chapter focuses on health indicators and outcomes in children and young people. Indicators include low birth weight, congenital anomalies, disability, oral health, selected general practice morbidity data, accidents and injuries, hospital admissions, childhood cancer, communicable disease and immunisation. The figure displayed opposite shows the association between the percentage of low birth weight babies and socio-economic deprivation. The most deprived 5th of electoral divisions in Wales have a statistically significantly higher percentage of low birth weight babies.

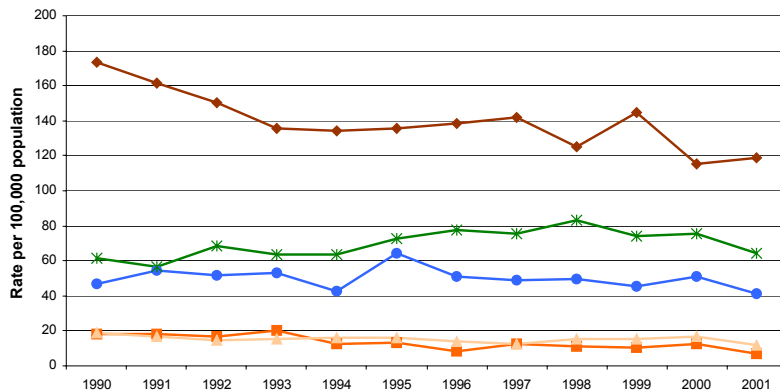
### Low Birth Weight (<2500g) 1998-2002

Data source: NPHS



### Deaths in under 24 year olds in Wales 1990-2001 (Rate per 100,000)

Source: Healthshow 2003.1



## Chapter five - Deaths

This chapter reports on the deaths occurring in Wales amongst children and younger people, of which there are between 400 and 500 annually. Information on age specific death rates (see left), main causes of death and stillbirths and deaths in infants aged under one year is provided. Where appropriate, analyses provide information on change over time and on differences between areas.

## Chapter six - Conclusions

The conclusions draw together the findings of the profile and highlight the fact that there are a number of gaps in our knowledge due to the lack of available data which is of acceptable quality in terms of accuracy, reliability and completeness. This is particularly the case in respect of the primary and community care sectors. It is anticipated that improvements in the Child Health System, the All Wales Injury Surveillance System, and a new system for analysing data from the General Practice Morbidity Database will help to fill these information gaps across the whole of Wales in the future. The NPHS plans to produce further work with the aim of supporting the Children's NSF in Wales.

## References

1. Dahlgren G. Whitehead, M. *Policies and strategies to promote social equity in health*. Stockholm: Institute for Further Studies; 1991.
2. Acheson, D. *Independent inquiry into inequalities in health report*. London: The Stationery Office; 1998