




Lancaster's Children and Young People Profile

This profile provides an overview for Lancaster. It includes demographics and key indicators which are directly related to health, or have an impact on children's health. The **statistical significance** comparisons are with England (see key on right). These are a snapshot, the [district](#) and [ward](#) profiles have a fuller range of indicators around these themes.

Comparison with England
 Better
 Worse
 Similar

About the population

Age	Area %	Area count	E&W %
0-4	4.7%	6417	5.3%
5-9	5.4%	7383	6.0%
10-14	5.5%	7521	6.1%
15-19	7.2%	9977	5.6%

Source: [ONS, Census 2021](#)

- Almost a quarter of the population (31,298) are aged between 0-19.
- Lancaster has a higher proportion of children aged 15-19 (7.2%) compared to England and Wales (5.6%).
- There is a slightly lower proportion aged 0-14 (15.5%) (E&W 17.4%).

Deprivation

17.5%

of children are living in child poverty (IDACI, 2019)

14.7%

of children are in low income families (all dependent children under-20) (2016)

14.9%

of children are in low income families (under-16) (2016)

Child poverty (IDACI)	%
Heysham North	30.2
Poulton	29.5
Westgate	29.1
Skerton West	27.5
Skerton East	27.0

Source: [Fingertips, Local Health Profile](#) (ward)

Childhood poverty can lead to poor health outcomes in later life. Reducing it is key to improving health in adulthood, and increasing healthy life expectancy. Lancaster is similar to England for children living in poverty (income deprivation affecting children index - IDACI). It is significantly better for children in low income families.

The table shows the five of the seven wards with the highest proportion of children in poverty, all are significantly higher than England. Seventeen wards are significantly better than England, with Upper Lune Valley (4.8%) and Kellet (4.5%) having the lowest proportions (see [ward profile](#) for all ward values). Additional indicators around deprivation, with England values and comparisons, are in the [district profile](#).

Maternity and infancy

41

under-18 conceptions (**19.3** per 1,000 <18) (2020)

0.9%

of deliveries are to teenage mothers (12-17 years) (2016/17-20/21)

8.6%

of mothers are smoking at the time of delivery (all ages) (2021/22)

2.8%

of term babies were low birth weight (LBW) (2020)

15

babies (**3.7** per 1,000) died before the age of one (2018-20)

Source: [Fingertips, Local Health Profiles](#) (district)

Becoming pregnant at a young age and/or being a teenage parent is linked to poorer outcomes, such as living in poverty, for both mother and baby. For both indicators, Lancaster is significantly worse than England.

Smoking when pregnant has negative effects for the mother and baby, and in Lancaster an estimated 8.6% of mothers are smoking at the time of delivery, similar to England.

The proportion of LBW term babies is similar to England, as is the rate of infant mortality. For variation across wards please see the [ward profile](#).

Children's health and wellbeing

A healthy childhood lays the foundations for a healthy adulthood and these indicators provide a useful overview of children's health in Lancaster. While some are 'health' indicators, others are focused on the wider determinants of health (education, schooling). Where available, ward rankings have been provided, showing the five areas with the highest proportion or rates.

24.8% of reception children are overweight or obese (2019/20-21/22)

35.1% of year 6 children are overweight or obese (2019/20-21/22)

45.2% of children (5-16-years) are physically active (2020/21)

Comparison with England

● Better ● Worse ● Similar

Source: [Fingertips, Local Health Profiles](#) (district)

Reception: overweight or obese	%
Skerton East	32.3
Harbour	31.4
Poulton	29.2
Carnforth & Millhead	28.6
Heysham North	28.6

Year 6: overweight or obese	%
Overton	46.2
Heysham Central	44.0
Heysham North	43.8
John O'Gaunt	43.8
Skerton East	43.5

Source: [Fingertips, Local Health Profile](#) (ward)

4.5% of half days missed due to pupil absence (5-15-years) (2020/21)

50.3 is the average attainment 8 score (15-16-years) (2020/21)

Improving attendance at school can increase a child's opportunities and future life chances. A child who has consistent attendance will be more likely to achieve academically. Lancaster is similar to England for both indicators.

192.4 emergency hospital admissions (per 1,000 children) for under-fives (2016/17-20/21)

131.2 emergency hospital admissions (per 10,000) for injuries (<15) (2016/17-20/21)

24.3 admission episodes (per 100,000) for alcohol-specific conditions in children <18

Emergency hospital admissions are an important indication of wider determinants of poor health. These can include respiratory conditions caused by cold, damp homes, or smoking around children for example.

Emergency admissions for injuries are a major cause of premature mortality for children and young people, and can be a source of long-term issues, including mental health related to the experience.

Looking at the available ward data, emergency admissions for under-fives is significantly worse than England in 17 wards, with the table showing the rates for the top five. The other 10 wards are similar.

For admissions for injuries (<15 years), 15 wards are significantly worse, with the top five having rates over 150 (per 10,000). The lowest three, Upper Lune Valley (83.9), Halton with Aughton (84.0) and Lower Lune Valley (84.2) are similar to England.

Emergency admissions under-5	Per 1,000
Overton	287.9
Skerton East	263.9
Skerton West	235.2
Torrisholme	224.7
Kellet	221.4

Emergency admissions injuries <15	Per 10,000
Silverdale	189.0
Heysham North	165.5
Westgate	162.8
Heysham Central	151.3
Poulton	150.4

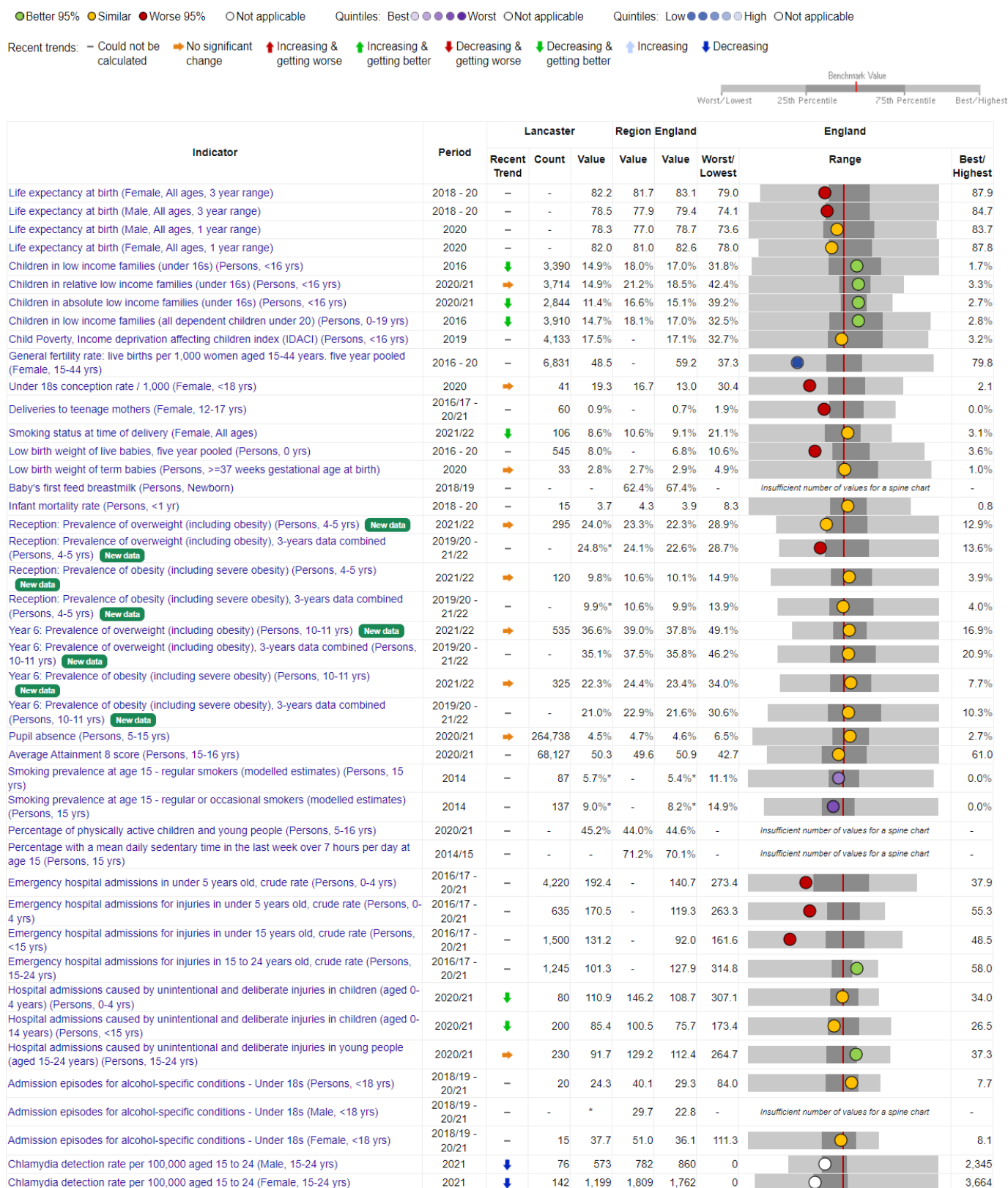
Comparison with England

● Better ● Worse ● Similar

Source: [Fingertips, Local Health Profile](#) (ward)

District profile

Please see the district profile below which highlights key indicators for Lancaster. While some may not be specific to children and young people, they provide an oversight to health and wellbeing for people in the area.



— the recent trend cannot be calculated for this value.

Please note, data collection for the National Child measurement Programme paused in March 2020, so data for 2019/20 is underrepresented.

Source: [Fingertips, Local Health Profiles](#) (district)

Ward profile

Please see the ward profile below for Lancaster. Please note, not all indicators in the district profile are available at ward level. Not all available indicators will have a value.

Better 95% Similar Worse 95% Not compared Quintiles: Low High

Indicator	Period	England	Lancaster	Bare	Belton & Slynne	Bulk	Carlforth & Millhead	Castle	Ellid	Hallon-with-Aughton	Harbour	Heysham Central	Heysham North	Heysham South	John O'Gaunt	Kellett	Lower Lune Valley	Marsh	Overton	Poulton	Scotforth East	Scotforth West	Silverdale	Skerton East	Skerton West	Torrisholme	University & Scotforth Rural	Upper Lune Valley	Werton	Westgate
Reception: Prevalence of obesity (including severe obesity), 3-years data combined	2019/20 - 21/22	9.9	9.9*	8.7*	*	6.1*	9.5*	*	*	*	11.4*	*	14.3*	10.0*	8.7*	*	11.1*	11.5*	*	12.5*	12.5*	*	*	16.1*	10.3*	*	*	*	*	11.4*
Reception: Prevalence of overweight (including obesity), 3-years data combined	2019/20 - 21/22	22.6	24.8*	21.7*	19.0*	21.2*	28.6*	16.7*	10.0*	27.3*	31.4*	22.2*	28.6*	27.5*	17.4*	*	27.8*	26.9*	27.3*	29.2*	25.0*	17.4*	*	32.3*	25.6*	21.4*	*	*	*	25.7*
Year 6: Prevalence of obesity (including severe obesity), 3-years data combined	2019/20 - 21/22	21.6	21.0	19.4	13.2	19.6	21.7	15.8	16.0	10.0	22.0	20.0	28.1	20.0	21.9	30.0	16.7	15.4	30.8	27.8	13.8	20.6	*	28.3	21.6	11.8*	*	*	*	26.4
Year 6: Prevalence of overweight (including obesity), 3-years data combined	2019/20 - 21/22	35.8	35.1	33.3	28.9	31.4	39.1	31.6	24.0	30.0	34.0	44.0	43.8	34.0	43.8	40.0	29.2	30.8	46.2	35.1	27.6	35.3	*	43.5	33.3	35.3*	*	*	*	43.4
Child and Maternal Health																														
Deliveries to teenage mothers	2016/17 - 20/21	0.7	0.9	*	0.0	*	0.0	*	0.0	0.0	2.2	0.0	*	2.6	0.0	0.0	*	0.0	*	2.8	0.0	0.0	0.0	*	2.1	0.0	0.0	*	0.0	2.5
General fertility rate: live births per 1,000 women aged 15-44 years, five year pooled	2016 - 20	59.2	48.5	56.1	50.7	42.5	56.3	20.5	52.8	56.2	67.5	69.7	69.6	64.0	32.0	62.7	52.7	59.8	73.7	70.2	44.6	36.4	42.5	72.7	69.6	65.4	4.7	51.7	44.0	70.6
Low birth weight of live babies, five year pooled	2016 - 20	6.8	8.0	7.8	5.8	6.4	8.4	10.0	6.0	2.8	10.0	9.5	9.3	8.1	8.0	*	6.2	5.3	7.6	10.2	9.5	6.3	11.6	9.2	10.0	9.2	*	*	7.8	7.1
Children and Young people: Health care use																														
Emergency hospital admissions in under 5 years old, crude rate	2016/17 - 20/21	140.7	192.4	153.7	160.0	185.2	188.9	172.4	164.8	145.6	196.6	164.9	180.7	199.9	199.2	221.4	170.9	175.4	287.9	176.7	162.1	171.2	204.9	263.9	235.2	224.7	220.1	123.5	118.5	220.4
Emergency hospital admissions for injuries in under 5 years old, crude rate	2016/17 - 20/21	119.3	170.5	160.8	116.5	167.3	265.4	128.6	111.6	*	173.5	140.3	170.9	154.0	221.4	*	150.2	67.4	186.9	182.2	231.9	147.5	473.9	251.7	173.0	133.5	*	*	*	208.4
Emergency hospital admissions for injuries in under 15 years old, crude rate	2016/17 - 20/21	92.0	131.2	135.3	131.4	134.2	143.2	100.6	102.5	84.0	126.2	151.3	165.5	127.1	114.1	126.7	84.2	102.2	134.7	150.4	146.7	104.5	189.0	142.8	142.5	108.4	139.9	83.9	130.8	162.8
Emergency hospital admissions for injuries in 15 to 24 years old, crude rate	2016/17 - 20/21	127.9	101.3	116.0	170.5	100.0	134.7	49.9	69.4	97.2	241.2	186.1	224.3	191.3	56.5	378.8	79.5	130.9	222.4	197.0	97.5	63.7	125.9	136.1	176.8	78.2	31.3	136.7	*	185.9
Child poverty																														
Child Poverty, Income deprivation affecting children index (IDACI) (Persons, <16 yrs)	2019	17.1	17.5	9.6	7.7	20.7	13.2	7.6	9.5	6.2	25.8	14.3	30.2	18.4	8.7	4.5	6.8	18.9	18.5	29.5	12.5	9.5	7.6	27.0	27.5	6.9	5.1	4.8	8.4	29.1

No data

* Value suppressed for disclosure control reasons

Please note, data collection for the National Child measurement Programme paused in March 2020, so data for 2019/20 is underrepresented.

Source: [Fingertips, Local Health Profile](#) (ward)