Health and Wellbeing Board North Yorkshire





# In Our Words: a Child's Life in North Yorkshire

Director of Public Health Annual Report 2022-23





## 1. Forewords:

2

Louise Wallace, Director of Public Health	;
Councillor Michael Harrison, Executive Portfolio Holder4	F
Addison Coudette, North Yorkshire Youth Council representative4	F

## 

## 3. The life of the child:

	1001 days	8
	Early Years	16
	Primary	24
	Secondary	35
	Late adolescence and early adulthood	43
4.	Conclusions	.51
5.	Recommendations	53
6.	Recommendations from Director of Public Health Annual Report 2021-22: Learning from the Covid-19 Pandemic	55
7.	Acknowledgments	63
8.	References	64

<u>\_\_\_\_\_</u>.....

<u>8</u>

.....<u>&</u>\_

## Foreword

## Louise Wallace, Director of Public Health

Welcome and thank you for taking the time to read my third Director of Public Health Annual Report for North Yorkshire. This report covers the period from April 2022 to March 2023.

Last year's Annual Report examined the impact of the COVID-19 pandemic on our communities, and reflected on the lessons that we can learn for the future.

## Update on the recommendations from the previous report

Children and young people were significantly affected by the pandemic, with disruption to their education, their health, and their ability to socialise with their peers and even their own extended families. We need to work hard therefore to ensure that the effects on their development, mental health and wellbeing and school attainment are not lifelong.

I have taken this as the starting point for this year's Director of Public Health Annual Report. Whilst admittedly the saying that 'children are our future' is a cliché, it is nevertheless true.



We must, working collectively, ensure that our children and young people have the opportunity to grow up healthy, happy and able to fulfil their potential. Being in a position to lead and influence, we have a responsibility to ensure our legacy is a positive one.

So what impact has the pandemic had on the children and young people of North Yorkshire, and what matters to them now? What are the major issues for them and their families that we need to consider and act upon? What is affecting their health? What brings them happiness?

We have heard from children, young people, families and colleagues working with them in developing this report, and I am very grateful to all of those who have shared their views, experiences and creativity. This report, built around those voices, provides an opportunity to highlight key issues and opportunities, and share recommendations for action.

I invite you to join me in our collective endeavours to build a better future for North Yorkshire's children and young people.

Please do share your thoughts about the report and recommendations at: <u>HASConsultation@northyorks.gov.uk</u>



## Forewords

## Councillor Michael Harrison, Executive Member for Health and Adult Services

In my role as Executive Member for Health and Adult Services (HAS), I very much value the role of Public Health as a core function within the council.

While the focus since 2020 has necessarily been on the response to the COVID-19 pandemic and subsequently on our shared learning, it is right that we now consider how best to address its longer-term impacts. In particular, we need to understand the effects on our children and young people, respond to the negative consequences and build on the positive.

This report takes their story as its starting point, and from their voice, from data and other evidence, highlights key themes for our consideration. In doing so, the report will assist the council and its partners to better understand the issues and shape our actions.

I want to thank everyone who has contributed to

this report, but in particular the children and young people who tell their story in their own words, and by doing so, help us to better understand what matters to them.



## Addison Coudette, North Yorkshire Youth Council representative

Hi, my name is Addison and I'm 19 years old and I'm from a little town called Selby and I love being around friends and helping



others. I got involved in this report process because as a young person I feel I can relate to how we grew up and I wanted to help get a different perspective from a young person's point of view.

Living in North Yorkshire is quiet. Two things that make me happy are being around my friends and family. I think to make things even better would be having a youth centre or somewhere where young people can thrive and make more fun memories and being part of a youth council, I am able to make that dream a reality.

## **Authors:**

Louise Wallace, Director of Public Health

Dr Gill Kelly, Public Health Consultant (Children and Young People)

Addison Coudette, Selby Youth Council

Gemma Marshall, Public Health Officer

Shanna Carrell, Equalities Manager, HAS

Emma Lonsdale, Head of Public Health for Children and Families

Helen Ingle, Public Health Manager

Phillippa Sellstrom, Public Health Manager

Catherine Baker, Public Health Manager

Dora Machaira, Public Health Manager

Sarah Dinsdale, Public Health Graduate Trainee

Nicki Watkinson, Voice & Creative Engagement Strategic Manager

Leo Bancroft, Senior Public Health Intelligence Analyst

Kate Adamson, Graphic Designer

## Introduction

In North Yorkshire (NY), we are privileged to serve the 151,000 children and young people aged under 25 residing in our county. Make no mistake, this Director of Public Health Annual Report of 2023 is designed to tell **their** story. We, in the Public Health Children and Young People's (CYP) Team, are not a group concerned so much with services, programmes or projects, but on the lives and wellbeing of young people and how we maximise their potential. Therefore, we have had to consider how to tell that story and how best to represent the effects of the upheaval to which they have been subject for the last few years.

It is true to say that it is a rare moment in history that an event has a truly global impact, but COVID-19 has certainly done just that. 138 countries implemented national school closures in the first few months of the pandemic, which affected around 80% of the global student population: more than 1.5 billion children and young adults.<sup>1</sup> This does not then include those pre-school children and their families who were also affected. It is only now, after a period of relative calm that we can start to reflect and quantify how the disruptions over the last few years have affected our children, young people and their families. How then to go about telling the story of these young people who have had to contend with so much? We initially took a "kitchen sink approach," looking at every aspect of our young people's lives to determine the points that both the data and they, themselves, were telling us, with two main themes coming through loud and clear: **the rapid onset of digitisation of every aspect of their lives; and mental health and wellbeing.** 

The digital revolution has reached into every nook and cranny of the lives of children, young people and their families. Prior to the pandemic, there was a gradual move to providing groups



and interactions online, however, due to the effects of lockdowns, that meandering stroll has transformed into a cacophony of online, digital services, programmes, apps, advice and social interaction – the list is endless. But such a transformative movement has been at the expense of those who, due to geographical logistics, or financial constraints, have had difficulty accessing the advantages of online delivery. There is a definite disparity between those who find it easier to access services, support and guidance online due to not needing to travel extensively across the county, and those who prefer the social aspects of face-to-face interactions. It should also be noted that not all of the interactions are positive; negative experiences online, including bullying and exploitation, are common.

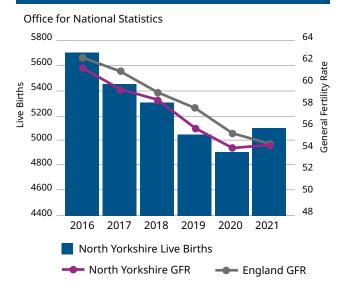
There is no doubt that the mental health and wellbeing of our children and young people has suffered through the pandemic, compounded by the relentless demands of social media, family worries and the cost of living. Published evidence notes marked increases in anxiety, depression, lethargy and distress, particularly in rural communities and households of low socioeconomic status.<sup>2</sup> However, how true is this for our county? In North Yorkshire we are fortunate to have active Youth Councils and Youth Voice, as well as the Growing Up in North Yorkshire survey, (completed every two years, most recently in 2022 by over 17,000 young people), allowing us to look at our local trends and areas of concern from a young person's point of view. We therefore have extensive local knowledge around how wellbeing has been affected at different key points in childhood, including for parents and carers.

<sup>1.</sup> United Nations Educational, Scientific and cultural Organization, (2022). Education: from disruption to recovery. Education: from school closure to recovery | UNESCO

<sup>2.</sup> Elharake JA, Akbar F, Malik AA, Gilliam W and Omer SB. (2023) Mental health impact of COVID-19 among children and college students: a systematic review. Child Psychiatry & Human Development, 54(3): 913-925.

We also wished to view the childhood life course as a child would see it; we have not split our story into convenient blocks of 5 years or 2 years each. Instead, we have looked at how children's lives are divided. Conception through to the 2nd birthday forms the allimportant 1001 days. We have seen the birth rate in North Yorkshire declining until recently, although this varies throughout the county.

### Live births and general fertility rate (GFR) 2016-2021

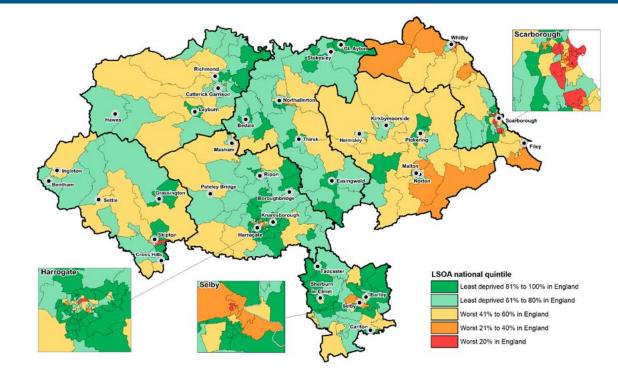


This is followed by the pre-school years from age 2 until around 4, when school-readiness is key, prioritising language development and family interaction, including the value of good parenting skills. Our children then start school around the age of 5 for their primary years, up until Year 6, when they leave, aged around 11, having gained

a measure of independence and often a mobile phone. Secondary school can then be split into the years up to and including GCSEs, from the ages of 12 to 16, when social media really takes hold. Then Sixth Form, for A levels, or other post-16 education and training, when most are now growing into responsible young adults. Some young people, who have had contact with the care system, or those with Special Educational Needs and Disabilities (SEND), are still provided for by our services until they reach around 25.

Another aspect we cover in our tale is the sheer scale of North Yorkshire, comprising Craven in the west, Hambleton, Harrogate, Richmondshire, Ryedale, Selby and Scarborough on the east coast. Much of the county is rural, with moderatelysized towns as well as an extensive coastline. There are significant pockets of deprivation. particularly in Scarborough, and it is clear that this impacts on the health outcomes for children and their families in these areas.

#### Map of deprivation across North Yorkshire - LSOA by 2019 IMD Decile



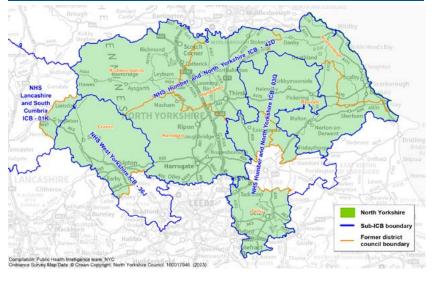
Notes 1. Source: Indices of Deprivation 2019, MHCLG

2. Ordnance Survey Map Data: © Crown Copyright. 100017946. (2019) 3. Compilation & Analysis; Strategy & Performance (HAS), NYCC

We have additional complications in North Yorkshire, in that whilst the Public Health Team covers the seven different areas, the geography of the Integrated Care Systems (ICSs) is different, with Craven falling into the West Yorkshire, but almost the entirety of the rest of North Yorkshire being part of Humber and North Yorkshire.

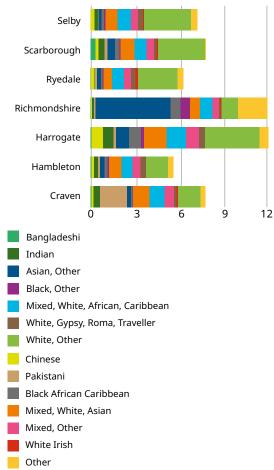
There is also a small area around Bentham that falls within Lancashire and South Cumbria ICS boundaries. This creates significant challenge in terms of data access and service planning.





Finally, no overview can be complete without looking at ethnicity. In North Yorkshire, different ethnicities are more prevalent in different parts of the county.





With such a varied population over such a large geographic area, we need to strive even harder to ensure that our services, systems and support are there and accessible for all the people in our county.

Therefore, each of our chapters covers a significant period in our children's lives, with an initial description of life, family and education, and then moves to the particular health concerns pertinent to that age group. This also notes where deprivation, population characteristics and geography may be a significant factor in emerging health inequalities. What follows is an exploration of key innovations, digital or otherwise, relevant to each age group that seek to tackle specific health issues, and finally how mental health and wellbeing has been affected in recent times, including important interventions and systems at play.

In this way, we provide a consistent approach to each group of young people. We have developed actionable recommendations, some of which affect specific age groups, or may span the whole of childhood. We ultimately aim to tell the story that best represents the remarkable journey from conception to adulthood that our young people undertake and address important factors around health and wellbeing.

# The life of the child: 1001 Days

8

· (R) ...... (R) ...... (R) ...... (R)



### The journey begins.

Whether it starts with a vague "feeling," a missed period, two blue lines on a piece of plastic (or the word "Pregnant" on the fancier tests), or even, in the most unexpected cases, a stomach ache with a surprising resolution, pregnancy and parenthood are a journey.

And no two journeys are the same.

During these first 1001 days, there is rapid brain development forming connections that serve as the basis for all future building blocks of physical and emotional health. Those connections develop in response to interactions between the baby and their parents or carers. These relationships in turn shape how the child experiences the world. Understanding that every interaction between a parent and their baby has implications for the rest of that child's life can certainly be a daunting responsibility.<sup>1</sup>

When parents experience problems in the first 1001 days it can have long term impacts on their children. One study showed that children whose mothers were stressed in pregnancy were twice as likely to have mental health problems as teenagers.<sup>2</sup>



Children's development in the early years sets them on a positive trajectory, although what happens next also matters. Children's development at just 22 months has been shown to predict their qualifications at 26 years.<sup>2</sup>

**8,300 babies under one** in England currently live in households where domestic violence, alcohol or drug dependency and severe mental illness are ALL present.<sup>2</sup>

In the first years of life, more than 1 million new connections are formed every second in a baby's growing brain. **The way babies' brains develop is shaped by their interactions with others.**<sup>2</sup>

The first 1001 days of life are formative. When we describe 1001 days, we include nine months of roughly 30 days from the point of conception, plus the first two years of a child's life up to their 2nd birthday. This serves to focus our attention on the fact that the mother's health (and we need to include other pregnant people in this), pre-conception, whilst pregnant and during the post-natal period, has a significant impact on a child's future life. Excessive stresses during pregnancy can impact on the future mental health of their child.<sup>3</sup> We must also remember that not every pregnancy ends in a happy outcome; for those suffering the loss of a child, support is even more vital at that fraught moment and during the journey ahead.



#### **Babies:**

- hear at around 24 weeks of pregnancy
- recognise familiar voices at birth
- prefer faces to other shapes
- We are hardwired for relationships!<sup>2</sup>

 کا ان

It is unlikely that anyone automatically knows how to be a parent. The sleepless nights, the crying, the uncertainty around whether feeding or changing is needed at any particular time, all contribute to the sense that parenting is hard work. Most parents settle into a routine eventually and learn, just as their baby learns, how to respond and communicate with each other.

However, for some parents, the journey is harder than others. Whilst there are certain points in every child's life where we check that both they and their parents are coping with the challenges, we are also there to identify those who need a little extra help. By investing our time and energies into ensuring that all parents are supported to respond to their baby's emotions and needs, our efforts will have an impact throughout that child's life.

## Family income and education is strongly related to children's



**development.** Babies in higher income families are more likely to have frequent caregiver-child conversations. By age 3, babies with university educated parents have been found to have vocabularies 2-3 times larger than those whose parents had not completed school.<sup>2</sup>

## Healthy Maternity

As already identified, the health of the mother has a significant impact on the health of the foetus, continuing through the child's whole life. It is important to optimise maternal health, picking up potential problems as early as possible. Therefore it is recommended that women are booked in to antenatal care prior to the 10th week of pregnancy.<sup>4</sup> This allows for early ultrasound scans, infection screening and the identification of those women in need of extra care due to medical and/or social circumstances.

We also deliver vaccinations to pregnant women, to protect both the health of the mother and the baby. Antibodies developed during pregnancy pass to the unborn child and help protect them in their first few months of life.

### Whooping cough (Pertussis)

Overall rates in NY are 83%, higher than the England rates of 61% by December 2022. However, there is geographical variation, with 61% of mothers in Craven receiving the Pertussis vaccine, lower than the rest of the region. Overall, uptake of this vaccine has dropped to its lowest level in 7 years.<sup>5</sup>

#### Influenza

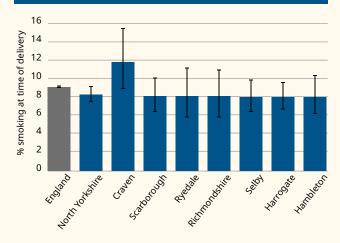
Uptake is also falling. Whilst NY levels of 46% for 2022-23 are better than the England rates of 35%, this still does not reach the target immunisation levels of 50%.6

In North Yorkshire, we have good rates of early contact, with 78% having completed their antenatal booking within the recommended 10 weeks.<sup>7</sup> This is higher than the regional rates of 72% and the England rate of 67%. We know that later bookings are associated with those living in more deprived areas, younger mothers, ethnic minority groups and those whose first language is not English.<sup>8</sup>

We ask women to book in early in order to optimise health and minimise risk. Smoking during pregnancy is the leading modifiable risk factor for poor birth outcomes, being associated with stillbirth, miscarriage and pre-term birth. It is also associated with long-term consequences for the child e.g. respiratory conditions, learning difficulties, obesity and diabetes.9

In North Yorkshire, at 8%, we have lower rates of smoking in pregnancy than Yorkshire and Humber as a whole (12%) and across England (9%).<sup>10</sup>

### Smoking status at time of delivery – 2021/22



F X

"Maternity care very good - plenty of appointments and opportunity to ring at any time"

Good support antenatally, saw the same midwife throughout pregnancy"

The life of the child: 1001 Days





over the phone leading up to the birth and just after, so it was nice to see her afterward for the postnatal check, in person"

However, this rate disguises the variation across the county, with Craven having the highest rates.

Rates also generally correlate strongly with deprivation; the two most deprived deciles are significantly higher than the England average.

Once the baby is born, most of the health checks focus on the developing child. However, it is important that the mother's health is a focus in its own right. The universal 6-8 week postnatal check is to monitor the physical and mental health of the mother.<sup>11</sup>

Coverage in North Yorkshire is patchy, with not all women offered the checks and in those who were, 45% reported a poor experience. Missed actions included no blood pressure monitoring, no physiotherapy, no scar infection follow-up and no follow-up for diabetes.<sup>12</sup>

## 1001 Days

In 2021, there were 10,266 babies under the age of 2 in North Yorkshire.<sup>13</sup> 10,266 babies bonding with parents and learning

to interact with those around them. Learning to babble, learning to crawl or bottom shuffle, learning to walk, learning to express their needs and explore their surroundings.

To give these babies the best start in life, we know that breastfeeding gives them optimal nutrition, vital immunity against infection, promotes early bonding and reduces the risk of common illnesses.<sup>14</sup>

In NY, in 2020/21, around 75% of babies had a first feed of breastmilk, but rates drop significantly thereafter, with only around 51% either totally or partially breast fed at 6-8 weeks old.<sup>15</sup> There is further geographical variation; rates are lowest in Selby, Scarborough and Whitby.

### Breastfeeding prevalance at 6-8 weeks (totally or partially breastfed) by year

Public health profiles - OHID (phe.org.uk) 60% 50% 40% 30% 2018-19 2019-20 2020-21 2021-22 North Yorkshire England Yorkshire & Humber



Health Visitors are tasked with monitoring the health and wellbeing of women and their babies by 10 days after birth and work with families up to the point that their child starts school. We now offer blended Health Visiting, combining in-person and virtual checks, which is proving an effective delivery model over such a large geographic area.

birth vis r fa and

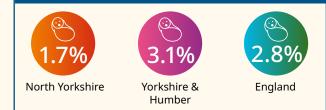
There are 5 mandated contacts between birth and 2½ but whilst the antenatal visit (for first-time mums), newborn visit and developmental check at 2-2½ are face-toface, checks at 6-8 weeks and 9-12 months are sometimes delivered online for those families with no complications and good digital connectivity.

There is an extensive immunisation programme for the under 2s and in 2021/22, all vaccination delivery rates were either around or above the levels across England, ensuring as many of our children as possible are protected against infectious diseases.<sup>16</sup>

It is important to note however, that for some families, the start to their child's life may not be plain sailing. A low birth weight, for some, increases the risk of childhood mortality and developmental problems and is associated with poorer health later in life. Risk factors for a low birth weight include maternal smoking and poor diet. There is also a correlation with deprivation.

In North Yorkshire, we have a lower percentage of low birth weight babies when compared with the rest of the region and England as a whole:<sup>17</sup>

### Percentage of low birth weight babies 2021



"It's a great service, I can text her anytime about anything and she gets back to me"



### Health Visitor data 2022/23

(% of checks completed in allotted timeframe) HDFT 0-19 performance report 2022/3



## **1001 Innovations**

There is no doubt that the experience of having a child in 2022/23 is wholly different to that of the previous generation. The meandering shift to digital support that was beginning just before the pandemic accelerated rapidly with lockdowns. Now the vast majority of support services for pregnancy and new mums are based mainly online.

There are pros and cons to this approach; women certainly lament the loss of in-person support, and being able to quickly ask peers for advice in a social setting. However, in a county as large as ours, it is now easier for those living more remotely to ask for help, without the need to travel, although this is dependent on good connectivity and its affordability.

## Health Visiting blended model

As described earlier, the Health Visiting model is delivered partly online for low-risk families. It is acknowledged that this is not suitable for all and the service is responsive to individual need.

Another key part is the Harrogate District NHS Foundation Trust (HDFT) Children's Health Services App, offering information to support families, children and young people. 20% of our 0-5 families have downloaded the app. The next phase will offer interactive features.

There is also a Facebook page, Growing Healthy 0-19 North Yorkshire with >4,200 followers.

Extensive feedback has been gathered. The main difficulty described has been the loss of the face-to-face element. "Was initially an online consultation but never received the invite and had to phone several times to chase this up! Really disappointed this service is not face to face."

## "I think my Health Visitor is a star"

"HV brilliant, positive, and reassuring. Goes above and beyond to support"

## **Evaluation of the Healthy Child Service:** Staff were "friendly" and "professional."

79% felt that the multi-agency workingmet family needs either very well or well.86% described their overall experienceof the service as very good or good.



The HDFT Children's Health Services App was developed by and for the North Yorkshire 0-19 Healthy Child Team as a useful resource for staff, parents and families. It covers multiple key topics, including infant feeding, advice on being a dad, etc.

The Facebook page is used to promote the app, drop-in clinics and campaigns. Over 28 days, the site can achieve a reach of over 8,000. In Public Health, we need to be aware of those groups of people who may fall through the cracks in the online world, who similarly are the most likely to need our help and support. We identify those individuals at an early stage, who are more at risk of poor outcomes and offer them face-to-face interactions with our Healthy Child Team to minimise the risk to children and their families.

## Ask a Midwife

The award-winning Ask a Midwife service is delivered through the social media platforms Facebook and Instagram and via email. It is staffed by experienced midwives answering frequently asked questions as well as responding to private message queries.<sup>18</sup>

It facilitates questions and cascades important public health advice. In 2022, the service answered 8,500 queries with 94% answered immediately. It made 508 referrals



### to various organisations.<sup>19</sup>

There are a number of programmes addressing the health needs in pregnancy and in the earliest years of a child's life. Whilst many involve a face-to-face component, technology still plays a part.

There is robust evidence around the harmful effects of smoking in pregnancy. Rates in North Yorkshire are 8% overall, with Craven an outlier at nearly 12%.

The UK Government recently endorsed providing incentives to help people give up smoking. In North Yorkshire, we have already had positive results from an incentives pilot, run by the Living Well Smoke Free Service in 2021 and 2022, where technological solutions were found during COVID-19 lockdowns, including virtual appointments and personal carbon monoxide monitors, linked to an app via Bluetooth. Readings were shared with the Smokefree advisor.<sup>20</sup>

Results included a 12% increase in referrals. Rates of successful 4 week quits did not increase, but there was an improvement in sustained quits longer than 4 weeks: 18% increase in 12 week quits/ 28% increase in 26 week quits.<sup>21</sup>

## Healthy Start Scheme (HSS)

The national HSS provides a nutritional safety net and improved access to a healthy diet for low-income families.<sup>22</sup> Uptake by those eligible varies across North Yorkshire with 59% in Craven and 69% in Selby.<sup>23</sup>

The move to a "sleeker" digital scheme allows payments to be uploaded onto a pre-paid card every 4 weeks. Digital exclusion is an issue, although there are other routes to apply.

## Breastfeeding

While 75% of babies in North Yorkshire have a first feed of breastmilk, the number subsequently breastfed drops markedly. Reasons include difficulty, lack of support and embarrassment.<sup>24</sup>

There are two initiatives to support breastfeeding throughout the county:

**Peer supporters:** provide families with support and infant nutrition advice through a proactive calls service and free breastfeeding support groups. All breastfeeding mothers are offered a series of support phone calls between the new birth visit at 10-14 days and the 6-8 week check. Groups offer a welcoming environment for new and expectant mums.

#### The Breastfeeding Friendly Venue Award Scheme

started in 2018; 89 venues have now signed up. Work is ongoing to highlight the scheme further with promotional videos and a training module for staff.



To improve uptake:

- Promotional material via new birth Registrars and the Children and Family Service
- Electronic 1-minute guide to frontline staff including Health Visitors
- HSS resources on the new midwifery management information system
- Inclusion within the NYC cost-of-living campaign including social media

## Early language development

Positive parent-infant interactions from birth support early language development.<sup>25</sup>

A range of research shows that the
way parents
interact with their
babies <b>predicts</b>
children's later
development.

In the first years of life, more than 1 million new connections are formed every second in a baby's growing brain. The way babies' brains develop is shaped by their interactions with others.<sup>2</sup>



"Absolutely brilliant

course. I wish we

rould continue. 9, 9

& M are brilliant at

their jobs"

The Early Help service delivers a number of programmes to support children who are less likely to meet their speech and language milestones.

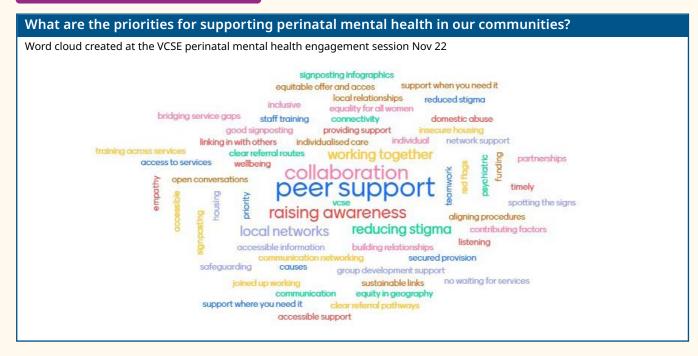
'Babbling Babies' and 'Small Talk' provide opportunities for babies to play whilst parent/carers are given information, tools and strategies to support with their child's communication.

Our local libraries have a role in promoting early language development and encouraging a love of books. Babies are automatically enrolled in North Yorkshire libraries at birth registration.

www.northyorks.gov.uk/leisure-tourism-and-culture/ libraries/libraries-children-and-young-people



## Perinatal mental health



We know that pregnancy and being a parent means many different things; it is a time of change, a time of nerves and anticipation. Women can be described as "blooming," but this may be far from how they feel in themselves. The physical and mental strains on the body can take their toll and some women need more mental health support than that provided by their families, their communities, or their midwife.

Additionally, it is not just mums who may feel the strain, but any unresolved parental mental health problems can have a negative impact on their bond with their newborn, which in turn may have long-term consequences for physical and mental health.<sup>26</sup>

However, we know that if the right help and support is provided, then this mitigates the risk of ongoing problems. The NHS therefore provides a specialist perinatal mental health service which gives highly individualised support for those most in need. Women may be referred due to an ongoing severe mental illness or from a condition identified during their pregnancy, and they are supported for up to a year after the birth of their child.<sup>27</sup>

There has been an increase in perinatal mental health referrals since pre-pandemic, with a corresponding reduction in the time spent under their care. The commonest referral reasons are general perinatal mental health concerns.<sup>28</sup>

## **Engagement tells us:**

## Local perinatal mental health midwives:<sup>29</sup>

- Increasing demand for services
- Especially true for those who have had their first babies during COVID-19 and are experiencing increased health anxieties with their subsequent pregnancies

#### Previous research with North Yorkshire new mothers:

- Increased levels of anxiety and depression when living in rural areas
- Younger mothers, those working and those in farming communities felt specific pressure to show they were coping <sup>29</sup>

#### What women want:<sup>29</sup>

- More social and peer support
- Opportunities to build friendships
- Improved awareness and information and trusted relationships with professionals
- NB We know that having supportive relationships with family or friends is a strong protective factor against mental ill health.

#### Organisations supporting women and their partners – priorities identified:<sup>30</sup>

- Collaboration between support services
- Peer support

It is not just the medical model of support for mental health in pregnancy and the postnatal period that is helpful to women and families. Groups embedded in local communities can provide crucial peer support for new parents. In Public Health we need to ask ourselves if further online support is what women want and need, or whether we should look at more inperson community gatherings to alleviate the loneliness that new mothers may experience.

Home-Start Craven is a volunteerbased family support charity providing support to families living in Craven with a child under 5.



MamaMeet was established during the COVID-19 pandemic after identifying a significant need for parents with new babies to be given the opportunity to meet up socially with other families. This was largely due to lockdown restrictions reducing home visiting services alongside the absence of openaccess baby groups in the community.

The sessions evolved as lockdown restrictions were lifted, with Home-Start volunteers facilitating small group meet-ups in local cafes.

15

the house each week after recently being diagnosed with postnatal depression. I've met lovely people who I will remain in contact with. I found out about it through a friend and wish I'd known about it sooner as I didn't leave the house in the first three months."

Over 300 parents have attended the meet-ups in Skipton and Crosshills, and further funding has been secured to deliver in Settle.

"It encouraged me to get out of

## Feedback from families:

- Mental health improved significantly
- Loneliness and isolation reduced significantly
- Parents more aware of other support networks locally
- Parents feeling part of their community
- Parents learn from their peers and enjoy sharing common experiences



## NY Perinatal and infant mental health group

A local network of services supporting perinatal and infant mental health has joined together to share knowledge and good practice. This will identify system opportunities to improve support. Early priorities:

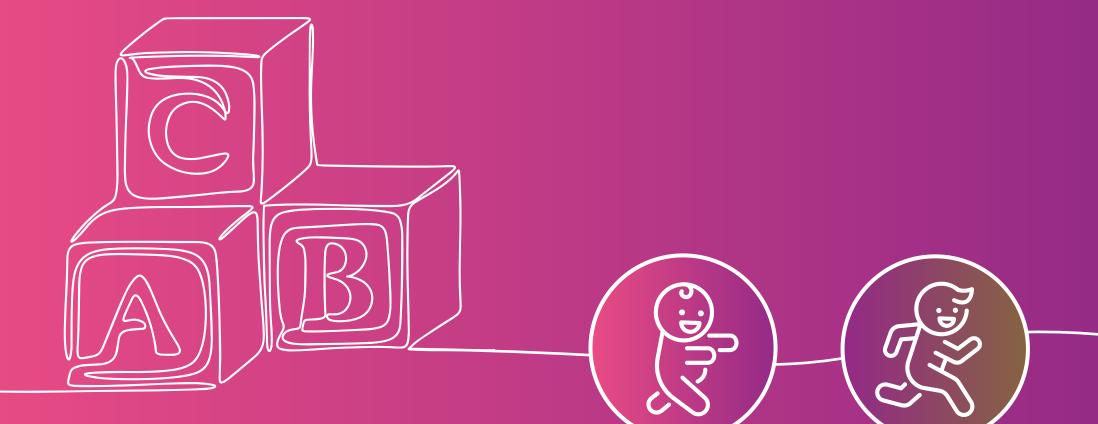
- Developing a visual tool for professionals to support the service offer
- Strengthen pathways between midwifery and health visiting services
- Working together for the development of Every Mum Matters – What is Perinatal Mental Health

## DadPad App<sup>31</sup>

The DadPad App is an easy-to-use, free, downloadable resource for new dads and dads-to-be, filled with useful information and details on local support groups and service providers. It aims to provide new fathers with guidance on how to develop the mindset, confidence and practical skills needed to meet their babies' physical and emotional needs.

The app also provides dads with guidance on how to support and seek help for their partners and themselves as they adjust to their new roles, and cope with the physical and emotional strains that this can place on individuals and relationships.

DadPad | About Us | Who We Are and What We Do (thedadpad.co.uk)



CO

# The life of the child: Early Years

(16)

## **Early Years**

Our children have now reached their 2nd birthday. All **5,677** of them, part of the **17,469** 2-4 year olds growing up in North Yorkshire.<sup>13</sup> Most are now running around, exploring their environment and getting up to all sorts of fun.

Despite being born or being toddlers during lockdowns with social disruption and fewer opportunities to connect with their peers, they still find being outside and active play with their families important to their happiness.

At this age, they are not just influenced by immediate family, but are developing more awareness of their wider environment, whilst not yet being constrained by the structure of a school day. It is important, however, to remember that this is the point at which development is measured and school readiness is considered.

Despite the limited social contacts in their COVID-influenced earliest years, our children are developing well, with 88% at or above the expected level of development when assessed at 2-2½. And when the different aspects of developmental assessment are taken individually, over 90% are achieving on each of the skills we wish to see at this age.

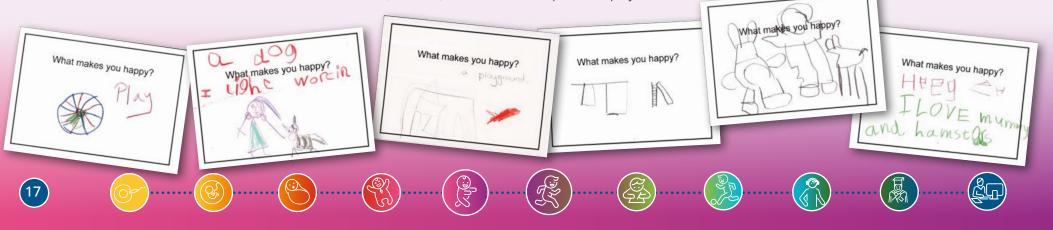
	% achieving
Communication skills	91
Gross motor skills	96
Fine motor skills	96
Problem solving	95
Personal-social skills	94

However, similar to a national picture, when we look at school readiness i.e. a Good Level of Development by the end of their Reception class at age 4-5, only 70% are achieving that good level, similar to the national proportion of 67% (2022/23). We know that deprivation plays a part in this, with children in more deprived areas of the region less likely to achieve the expected milestones at both 2 years and 4.<sup>32</sup>

Whilst North Yorkshire overall has a relatively low level of child poverty, the picture is more complicated with some areas of the region experiencing significant deprivation; 19.4% of children in Scarborough are classed as living in poverty.<sup>33</sup>

With the aim of reducing the socioeconomic attainment gap, there is government funding to support early years childcare for 2 year olds in the most disadvantaged areas and up to 30 hours of early education for 3 year olds.<sup>34</sup> In North Yorkshire more of our eligible children are taking up this offer than their peers, both regionally and nationally.

	NY	Y&H	Eng.
Take up of childcare funding at 2yrs	88%	76%	72%
Take up of early education funding at 3yrs	99%	95%	92%



For those who really need our help, we have the Early Help service, where children and their families are assessed and

18



provided with appropriate holistic support. There has been a significant increase in referrals of under 5s in the last year, as well as a smaller increase in referrals to Children's Social Care.<sup>35</sup>

Referral rates per 10,000			
	Early Help	Social Care	
2021/22	277	366	
2022/23	411	433	

The greatest area of need identified in Early Help referrals was for strengthening parenting skills.

It is clear that it is not just children who are feeling the strain in the post-lockdown years, but their whole families; we act as a safety net for the most vulnerable.

What makes you happy? friends Smelling the fresh flowers Darra

## Healthy Early Years

Here in North Yorkshire, the typical 2-4 year old enjoys outdoor spaces, and playing with family and friends. With an increased awareness of surroundings, this is a good time to embed healthy behaviours. Active children, who eat well, are less likely to have gained excess weight prior to starting primary school.

It is also a prime time to vaccinate children prior to attending school, before their increased social contacts put them at increased risk of infectious diseases. The North Yorkshire vaccination rates in this age group are around or above those nationally, although still do not quite achieve desired levels.<sup>36</sup>

Vaccination uptake 2022-23	%
Influenza	59
DTP booster	89
MMR	90

Even at such a young age, however, several areas of health concern have emerged, allowing us to plan where our efforts should be focused.



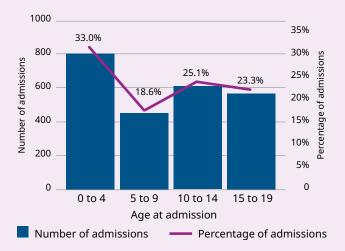
Within the pre-school years, the county's children have significantly higher levels of hospital admissions for injuries than their peers, nationally.<sup>37</sup>

## North Yorkshire: 138 per 10,000 children

### England: 104 per 10,000 children

In fact, our 0-4 year olds have more injury-related admissions than all other age groups, with Scarborough the highest in the region.<sup>38</sup>

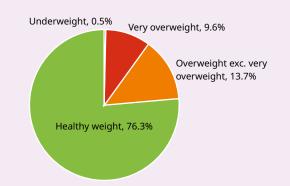
## Inpatient admissions 2021/22 – accidental and unintentional injuries in children



## Weight

At the end of Reception Year, 23% of our 4-5 year olds are carrying excess weight.

### Weight status – Reception 2021/22



Children who are a healthy weight are more likely to have good physical and mental health and wellbeing, better levels of self-esteem and sleep, better educational outcomes, lower levels of absence from school and are less likely to experience bullying. They are also less likely to grow up to be overweight adults and therefore have a lower chance of developing poor

What makes you happy?

health e.g. heart disease or

diabetes.

19



Our levels of excess weight in this age group are above the national average. There is also a strong link with deprivation.

## Proportion of Reception children by weight categories and IMD deciles, 2021/22



...... G



## **Oral Health**

The rate of hospital admissions for dental caries in North Yorkshire in the 0-5 age group is greater than the England rate over the period 2018/19-2020/21.<sup>37</sup>

### North Yorkshire: 332 per 100,000

### England: 221 per 100,000

Additionally, there has been a slow recovery of paediatric dentistry since the pandemic, which may worsen the situation further.

## Health through innovation

## Promoting physical activity, play, healthy weight

To tackle some of the health concerns identified in our 2-4 year olds, we have a number of innovative programmes.



The acceleration of digital delivery has led to the development of an early years healthy lifestyle programme, Poppy, delivered online and supporting the whole family around parenting, food and general health. There's also the new Active Start programme, which promotes physical activity and play.

Oral health is one of the healthrelated issues supported through the Healthy Early Years Award Programme.

We need to be careful, though, to ensure that all our population can access these programmes.

## The Poppy Programme

The Poppy Programme was piloted in early 2022 as part of the Healthy Child Programme. It provides a free, confidential 4 week virtual programme to support early years parents and carers with food, oral health, physical activity and parenting.

- Week 1: Let's make a healthy start
- Week 2: Confident parenting and emotional wellbeing
- Week 3: Food glorious food
- Week 4: Looking after your bodies

"I didn't realise that I could use play to support my child's eating"

"I really enjoyed the Poppy Programme as it has given me a better iderstanding of my id's development,"





The Healthy Early Years Award Programme aims to support Early Years settings to have a whole-settings approach to health and wellbeing and create healthier environments for children and staff.

Since its launch in November 2021, 100 settings have registered and so far, 16 have achieved an award.<sup>39</sup>

## North Yorkshire Libraries

Libraries are a wonderful place for children of all ages. No-one is too young; in North Yorkshire every baby is given a library card at birth registration. Libraries support early years development, giving our children a fun introduction to language and literacy skills. Each library has a dedicated, welcoming and fun space for families with a range of books for all ages, abilities and interests.

Our Libraries deliver Bookstart, a UK-wide initiative gifting books to children and their families. They also run Buzzy Bee's Honey Hunt, a free under-5's reading scheme rewarding book borrowing with prizes.

Plus there's a wide range of activities, including free storytime and rhyme, Stay and Play, Lego clubs and Code Clubs. There is even baby yoga, music and theatre. Lots of fun!



North

Sport

**Yorkshire** 

By addressing health-related issues early in life, we help prevent children from developing longerterm health concerns. Using these innovative approaches, we aim to increase physical activity, improve language development and identify safety hazards within the home, with the aim of reducing injury-related admissions.

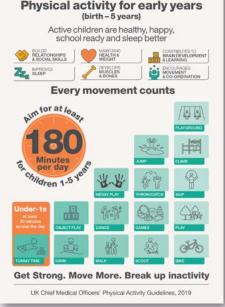
We are working with North Yorkshire Sport to implement a new Early Years physical activity

programme, called Active Start, which uses physical activity and play to support a child to be healthy, to learn and to be active for life.

It will provide training opportunities for both Early Years practitioners and Key Stage 1

teachers, aiming to increase knowledge, confidence and motivation of staff to provide an active and fun environment.

Physical activity guidelines: early years (under 5s) - GOV.UK (www. gov.uk)



Speech, language and communication is a critical area of development. There is a widely acknowledged gap in language skills between children from different social backgrounds, identifiable very early in life and well established by school entry, with long term consequences for educational attachment and outcomes in adulthood. The Early Help service delivers 'Building Blocks for language' for children who may need additional support with speech, language and communication. The sessions are delivered in a fun and interactive way to engage children with their learning.

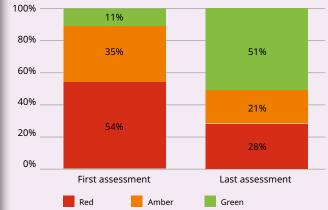
From 2020-2021, this School Readiness pilot focussed on early

language development for pre-school children in Ryedale and the eastern part of Whitby.

Results showed a significant shift in the proportion of WellComm language assessments rated as "green."

### School readiness pilot – WellComm Assessment scores

Source: https://www.yhphnetwork.co.uk/media/106351/ school-readiness.pdf



## Grow & learn



I feel my twins have started to come along a lot more than they would have done without the help. I really appreciate the support

"Thank you so much for the last 5 weeks, (son) has absolutely loved it. I think it's been really helping. Each session has been so engaging and fun! We're going to miss coming"

## Home Environment Assessment Tool (HEAT)

North Yorkshire has persistently high levels of hospital admissions for unintentional injuries.

The Healthy Child Programme has a key role in promoting the safety of children during the mandated contacts with families.

HEAT is completed by 6-8 weeks after birth and after any significant changes to family circumstances. It allows for preventative messages and identifies support families may need around safety in the home.

The Healthy Child Programme also provides a text messaging service to increase parental knowledge and awareness of hazards at key developmental stages from 0-2 years.

## Family support and parenting

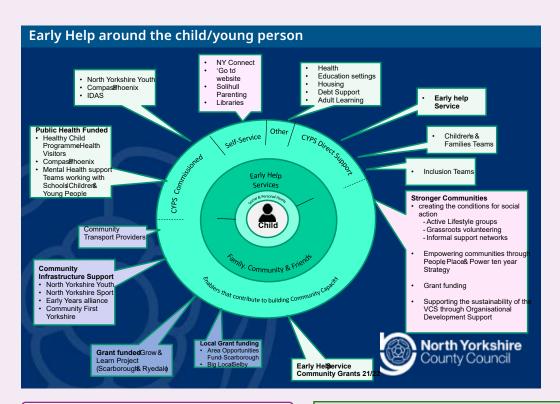
Whilst mental wellbeing is a major theme throughout childhood, in this age group, children's wellbeing and development is heavily influenced by their interactions with family and other important adults in their lives.

A child's early relationships shape their perceptions of themselves and others, and influence how they learn to regulate their emotions. Some factors such as parental mental illness, domestic abuse and/or poverty can contribute towards problems for early parent-child relationships.<sup>40</sup>

It has not been easy being a parent in the last few years in the UK. With the impact of lockdowns and the rising cost of living acting as significant stressors, it is no wonder that conflict arises within families. Frequent, intense and poorly resolved conflict increases the likelihood of anxiety, depression and aggression in children exposed to this.<sup>41</sup>

The parental conflict indicator estimates that around 12% of children living with parent-couple relationships in North Yorkshire report relationships distress, with the highest rates in Scarborough.<sup>42</sup>

Supporting parenting skills is therefore recognised as a key influence on a child's development. Embedding confidence in parenting skills can reduce future need for additional services.



This Stronger Relationships – Parental Conflict

## Stronger Balationship

Stronger Relationships

Programme works with

parents across the county to repair and strengthen their relationships. In Catterick Garrison, Army Welfare Officers are being trained to understand more about how the additional pressures of deployment, separation and isolation can impact on family relationships. Online parenting courses are accessed by over 1,500 learners in North Yorkshire, but only 20% of users are



male. Selby, Whitby and the Moors have lower uptake.<sup>35</sup>

Solihull Approach | Parenting | Training for professionals (solihullapproachparenting.com)



Bespoke parenting modules for families supported by North Yorkshire services. Virtual or face-to-face.

## Development and SEND

For children to reach their full potential, it is essential that any additional educational and support needs are identified as early as possible to ensure they and their families are supported.

Since the SEND reforms of 2014, we now support treble the number of young people on Education, Health and Care Plans, resulting in a doubling of spending, as well as a significant increase in the provision of support for this group.

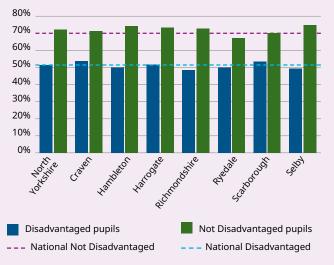
For some families with Special Educational Needs and Disabilities (SEND), difficulty

in securing a childcare place becomes a barrier for parents to remain in work, or take up employment opportunities. This may add further strain to family life.

As evidenced by levels of development at 2-2½ years and 4-5 years, the majority of children in the county are thriving. But North Yorkshire is large and very varied, with pockets of deprivation – a significant influence on development at the age of 4-5.

### 2023 EYFSP Disadvantaged and Not Disadvantaged Good Level of Development

North Yorkshire Council, Children & Young People Service, 2023



We can see a significant gap in all areas of the county linked to deprivation, with Selby showing the greatest gap between disadvantaged and non-disadvantaged children of 25% and Scarborough the least at 17%. Note Scarborough's disadvantaged children are developing relatively well.<sup>35</sup>

Our children with Special Educational Needs (SEN) have better development than their national peers, with 20% achieving the expected levels at 4-5 years in 2022/23.<sup>35</sup>

The developmental attainment gap between those with SEN and those without SEN reduced from 2018/19 to 2022/23.<sup>35</sup>

····· 97

Our Children in Care with SEN do not achieve as good a level of development as their national peers, for 2021/22.<sup>35</sup>

Conversely, those Children in Care without SEN perform considerably better than their peers nationally, by the end of Reception year.



Dingley's Promise aims to increase the early identification of children in Early Years with SEN through training Early Years Practitioners.

It is a Comic Relief Early Years Inclusion project.

All courses are online with a mixture of workbook, video and activities to be completed at the Practitioner's own pace. Individuals are certified and settings/childminders can receive the kitemark at different levels on completion.

There are currently 394 practitioners signed up, which represents 8% of North Yorkshire's early years

workforce. 95% of those who gave feedback said they would do something different following completion of the training. <sup>35</sup>

"This has been one of the best courses I have undertaken. The fact that it can be done at your own pace is great. The content is so thorough, and suggested strategies invaluable. I found all the links to YouTube, and further reading and information incredibly helpful in better understanding this area."



(ÉG)

# The life of the child: Primary

(24)

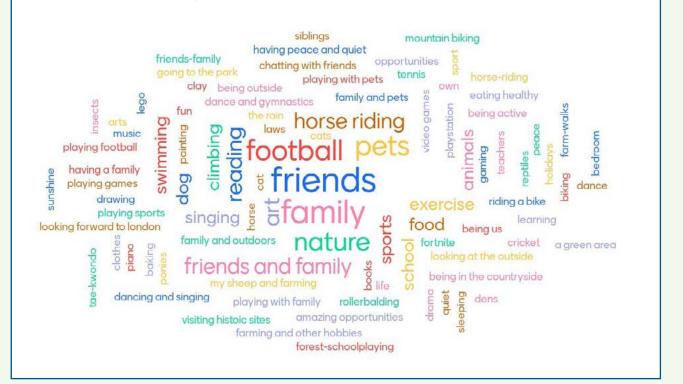
## Primary

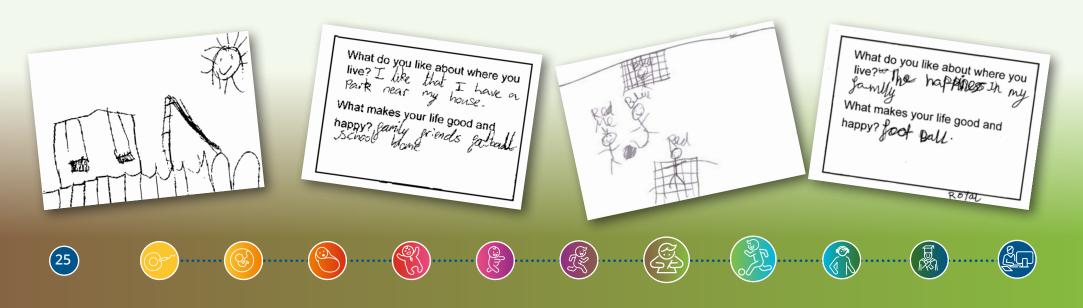
Our children are now in primary school; Year 1, from around the age of 5, all the way up to Year 6, aged 10-11. They are now expected to learn independently in classrooms. Indeed, the tables are starting to turn, with lessons learned at school feeding back into family life and influencing their care givers.

In North Yorkshire, there are 44,630 children aged 5-11,<sup>13</sup> but in such a diverse county, they can lead very varied lives with very varied standards of living. For example, while we know that 17% of 5-9 year olds live in households without central heating, this is just 9% in Ryedale, but 24% in Selby.<sup>43</sup>

### What makes your life good and happy?

Answers from over 2000 children aged 7-11 at Healthy Schools event

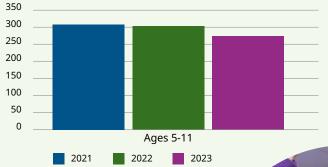




Another huge variation is where children are electively home educated, levels of which increased substantially at the height of the pandemic, and children who could have returned to school did not, with the main reason being anxiety (22%). This is now reducing, with 273 primary aged children electively home educated in 2023.

## Primary school electively home educated at end of academic year 2022/23

Education and Attainment Data, CYPS (Children & Young People's Services), North Yorkshire Council



Some children, however, find it difficult for various medical and/ or social reasons to be wholly present in the classroom. Where a pupil misses 10% or more of their school time, they are termed persistently absent. There were slightly more children persistently absent in the 2022/23 school year than pre-pandemic, but lower levels in North Yorkshire than nationally.<sup>44</sup> It is worrying that over 1 in 6 primary school pupils are struggling to attend school. Emotionally-based school avoidance is a priority for our mental health system.<sup>44</sup>

## Percentage of primary pupils persistently absent in North Yorkshire

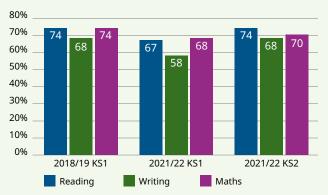
Education and Attainment Data, CYPS (Children & Young People's Services), North Yorkshire Council



We can objectively measure the learning progress of our children at this stage of development through the nationally expected standards in key subjects, examined at Year 2 (Key Stage (KS) 1) and Year 6 (KS 2). In North Yorkshire, although there has been a recent reduction in those achieving the expected levels in reading, writing and maths at both Key Stages 1 and 2, this is broadly in line with England.

## Percentage of children achieving expected levels in key areas of KS1 and 2 over time

Education and Attainment Data, CYPS (Children & Young People's Services), North Yorkshire Council



For those children in our schools receiving support for Special Educational Needs (SEN), at KS 2,

they too have seen a drop in achievement, both locally and nationally. The attainment gap of children with SEN was 51%, similar to the gap nationally.<sup>44</sup>

## Healthy children aged 6-7

We can split health-related issues by age in primary school, due to the huge difference between those just starting their school careers and those about to embark upon the transition to secondary school.

Overall, the primary years provides a real window of opportunity to help children develop healthy habits and relationships. Through the Growing Up in North Yorkshire (GUNY) survey and other forms of engagement, these children allow us to understand their social, emotional and mental health needs as well as the most important parts of their lives in an ever changing, uncertain world, of which they are becoming increasingly aware.

In our 5-7 year olds, we have identified a number of health concerns:

## **Oral health**

### 20% of 5 year olds experienced tooth decay

Good oral health can be maintained through limiting sugary snacks and drinks, regular toothbrushing with a fluoride toothpaste and regular check-ups with a dentist from when a baby's first tooth appears.<sup>45</sup>

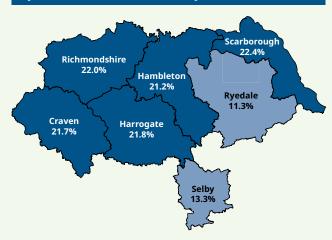
## Happiness is

27



Tooth decay varies across the region (2019):

Prevalence of experience of dental decay in 5-year-olds in North Yorkshire, by lower tier local authority



Both Selby and Ryedale have lower levels of decay.

78% of year 2 pupils cleaned their teeth at least twice on the day prior to taking the GUNY survey.

## Sleep

Sleep is important for children's mental and physical development and for growth and repair. It improves attention, memory and behaviour and reduces susceptibility to minor illnesses.<sup>46</sup>

## 70% of 6-7 year old children have a set bedtime for nights when they have school the next day; 30% do not.

48% have a TV in their bedroom and 39% of them are allowed to watch it after going to bed.

25% are allowed to use a computer, tablet or phone after going to bed.<sup>47</sup>

### How Much Sleep Does My Child Need?

Sleep image based on guidance from: The Sleep Charity (2020) *How Much Sleep Does My Child Need*? Available at: How Much Sleep Does My Child Need? - The Sleep Charity



## Safety

## 21% say they have friends online whom they do not know in real life.

60% of 6 and 7 year olds say they know how to keep themselves safe on the internet.

47% always wear a bike helmet when they use their bike or scooter.<sup>47</sup>

## Worries and mental health

**62% like being at school most of the time**, better than a decade ago.<sup>47</sup>

But **67% worry** about something most days – this hasn't changed since 2010.<sup>47</sup>

Boys	Girls
Family (44%)	Family (40%)
Friendships (33%)	Friendships (32%)
The way they look (23%)	The way they look (23%)

## Healthy children aged 10-11

Children have now progressed through primary school and are the leaders in their school community. But along with the increase in confidence and responsibility at being the eldest in their schools, comes an increased awareness of the world at large with all the worries that accompany this, as well as, most tragically, worries about death, likely in response to the impact of COVID-19 on society and families.

We have therefore identified the areas with the greatest influence on these youngsters' health and the health-related issues than go alongside.



28

## What would make your life better?

- More time with family/friends
- More places to play outside
- More sports clubs
- More time/places to be creative



- Family/friends
- · Sports
- Creative activities

## Worries and mental health

There is a **big increase** in worrying in recent years; 86% worry quite or very often. (61% in 2018, 76% in 2014)<sup>47</sup>

Already we are seeing large gender differences in children's worries. E.g. appearance is far more important to girls than boys.

Worries include:

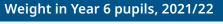
<u>م</u>

Boys	Both	Girls
Death (55%)	Around	Death (64%)
Moving to secondary school (34%)	Around a third of boys and girls worry about the planet	Moving to secondary school (50%)
The way they look (25%)		The way they look (44%)

## **Healthy weight**

## 34% of 10-11 year olds have excess weight.

The increase in weight from Reception to Year 6 is far greater in boys than in girls. This mirrors the national trend.<sup>48</sup>



North Yorkshire Council, NCMP report, 2023



Weight in 10-11 years olds:

From Reception to Year 6, girls have increased weight by 9%, but boys by 13%. Theories for this include:

- Girls being more aware of how they look and therefore what they eat
- Differences in parental feeding practices

Similar to Reception weight, deprivation is a significant factor; 39% of children in Scarborough are overweight or obese, versus 28% in Harrogate.



......

## The life of the child: Primary

## Food



94% have breakfast. but only a quarter have 5 portions of fruit and veg per day.47

25% of pupils do not have school food as they do not like it; to improve this, they suggested:49

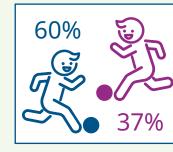
- More choice
- Involvement in food e.g. designing menus
- Cheaper and better quality
- Bigger portions



Top priorities should be to make school meals free for all and to have school trips to learn about food.



## **Physical activity**



60% of boys and 37% of girls strongly agree that they enjoy taking part in physical activity.<sup>47</sup>

Children tell us the reasons for the differences include girls not liking ball games, whereas girls may prefer imaginative games, dancing, singing and activities.<sup>49</sup> Additionally:

"All the popular sports are for boys"

"There are still more opportunities for boys"

Fewer girls find sport and physical activity easy and they are less confident.



## Sleep



12% of 10-11 year olds did not go to sleep soon after going to bed as they were distracted by a phone or tablet.47

A third went to bed at or after 10pm on the day before the survey. Whilst 82% had at least 8 hours sleep before they were surveyed, 5% had fewer than 5 hours; around half of children felt tired at school.

## Innovation and health at primary age

Primary school children are now embracing technology, living in a digital age, with no experience of the world that went before. However, this creates significant inequalities, particularly in the oldest years, between those who have the means to possess the latest kit and those who are dependent on hand-me-downs, or cannot afford any device or the connectivity.

This also creates huge dilemmas and anxieties for parents, who may struggle to manage their children's screentime, whilst also ensuring their child is getting enough exercise, outdoor time, sleep etc. This can create a major challenge and conflict within families.

The COVID-19 lockdowns also resulted in changes to children's expectations; many families abandoned their normal routines and activities, resulting in later bedtimes and more screen use. Some pupils were able to take advantage of technology and learn online, but many were disadvantaged due to inequalities in access to IT and wifi. Mental health and wellbeing suffered within families for a variety of reasons, with an even greater loss of consistency around parenting.

30

Individual schools have embraced healthier, more active initiatives. For example:

## Malton Primary Academy Sustrans' **Big Walk and Wheel event 2022**

230 pupils and 167 adults were involved, resulting in 50 pledges re active travel. Multiple initiatives since 2018/19 have seen:

- 20% reduction in pupils travelling to school by car
- 8% increase in cycling
- 8% increase in Park and Stride<sup>50</sup>



In North Yorkshire, in response to the health-related concerns identified, we have developed a number of programmes, usually a mixture of online and face-toface. The predominance of digital access is noticeable, again producing concerns around digital exclusion.

## **Healthy Schools**

In order to encourage healthy behaviours within schools, North Yorkshire developed the Healthy Schools Award Programme which started in September 2019.

To date, 294 North Yorkshire schools have signed up (81% of schools in the county). 106 have so far achieved an award.<sup>51</sup>

There are 4 key themes:

- Active lives
- Food in schools
- Emotional health and wellbeing
- Personal, social and health education

(Plus staff wellbeing)

The programme uses a mixture of tech and non-tech approaches. The website provides resources for schools and a place to upload applications for awards. Both training and celebration events are delivered face-to-face and online.

March 2023: an online pupil event focussing on Active Lives and Food with over 2,000 pupils and 100 staff members from 46 primary schools.



**Healthy Schools** North Yorkshire

> "Very fun and interesting. I learned a lot of things and enjoyed the cooking and smoothies the most"

Today was really fun we did different workshops and got to see the gardens. It was fabulous."

"We're really grateful to the team for

making the award possible - it's nice to

receive recognition for the difference we're

making for our community.

"We enjoyed engaging with the

programme – it helped us to look at

the gaps in our approach to health and

wellbeing and celebrate our achievements"

(school response to award scheme)

## Back to Basics<sup>52</sup>

2021-2023: we worked with Leeds Beckett University to develop and pilot a digital child weight management service. The project provided families with support via a website, YouTube videos, text messages, peer support via a WhatsApp group and 3 remote sessions with a dietician.

### Families liked:

- Personal and flexible approach
- Information from videos
- Peer support via WhatsApp groups with other families

### Improvements:

- More sessions with the dietician
- Access to physical activity sessions e.g. gym

Learning resulted in a new family weight management service for North Yorkshire: 'Healthy Families'.

The impact of COVID, altering routines, with increased screen use and increased anxiety has resulted in more cases of complex sleep issues at a national level, not just in the children in our county. To deal with the challenges we are increasingly seeing, HNY ICB have commissioned the Sleep Charity to provide a Sleep Service.

We know that not all primary aged children are getting a good night's sleep; a significant number of 10-11 year olds are going to bed after 10pm and many are tired during the day.<sup>47</sup>

## Sleep service in North Yorkshire

The Sleep Charity was commissioned by Humber and North Yorkshire ICB to help overcome children and young people's sleeping difficulties using:

- behavioural therapy
- sleep clinics and workshops
- information and advice for parents/carers and professionals through helplines, webinars and workshops

An e-book for families is available at <u>https://northyorkshireccg.nhs.</u> uk/your-health-and-local-ser<sup>46</sup>

## Sleep Practitioners in North Yorkshire Council

9 people across Early Help and the SEND hubs are trained Sleep Practitioners.

18 people are trained to deliver the Sleep Tight parenting programme.

This is offered on a referral basis for families working with the Children and Families Service. The

course content focuses on promoting healthy sleep habits (e.g. good routines and limiting screens).

Sleep champions have been trained, including in a number in schools.



Whilst the Growing Up in North Yorkshire survey tells us about the health and wellbeing of thousands of pupils in school, we also need to be aware of those more vulnerable children who may be less engaged in the school system, but are working with Early Help teams and social workers.

In 2021-22 we held 7 focus groups with social workers, Early Help staff and foster carers to identify health-related issues in children in contact with social care.<sup>35</sup>

## Health-related issues:

- Barriers to dentistry particularly around access
- Families need support with cooking, budgeting, meal planning and access to food
- Disordered eating
- Support for families to get children active and away from screens
- Mental health support



## As a result, we have put in place a number of programmes and services:

- Dental referral pathways to help vulnerable children gain access to local, flexibly commissioned dental practices
- Oral health training for professionals
- Healthy weight and oral health resource bank for professionals and families
- Looked at ways to help families with the cost of living, food insecurity and cooking on a budget

# Social, emotional and mental health and wellbeing

The impact of the pandemic and successive school closures is becoming increasingly recognised, with children at 4-7 years old 10% more likely to have seen their social and emotional development worsen (52%) than 12-15 year olds. This negative effect is irrespective of socioeconomic status.<sup>53</sup>

Parental economic instability is thought to have had a particular impact, even if earnings were not lost.

Other factors affecting children's development included lack of contact with friends and family and illness or death among loved ones. The latter point is a particular worry seen in local data in 10 and 11 year olds.

The primary school years are a time when our children increasingly recognise a wider world around themselves. With so many current concerns, including climate change and the cost of living, our young people are worrying more. It is therefore increasingly important that we use these years to teach the children about the importance of good mental health, how to boost their resilience and protect their wellbeing.

Therefore, a whole system approach to mental health and wellbeing is needed from a very young age.

## Worries

As mentioned earlier, despite being so young and hopefully relatively protected from the trials in the world outside, our primary-aged children are worriers:

### Year 2

67% worry about something most days; this hasn't changed since 2010.

Family is the main source of worry. However, 23% of both boys and girls worry about how they look.

## Year 6

86% worry about something most days, a large increase from the pre-pandemic years.

It is worth highlighting again the impact of the pandemic, with the death of a loved one the top worry for both boys (55%) and girls (64%). Also of significance is the onset of the gender difference in worrying about appearance; 25% of boys, but 44% of girls<sup>47</sup>

## Resilience

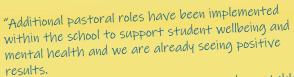
This is the ability of our children to cope with the stresses and challenges that life throws at them. Having a responsible adult to talk to in a safe environment is recognised as resilience building.

## Within Year 6:

22% scored **low** on resilience (15% in 2014)

23% scored **high** on resilience (38% in 2014)

Overall we see children emotionally less able to cope with stress and worrying more.<sup>47</sup>



"We have been planting our own fruit and vegetables, then caring for them and eating them for snacks.

"It has definitely made a positive impact on our school, allowing all children to eat healthily and live more healthy active lives"

(School quote on impact of taking part in healthy schools award)

## Bullying, year 6

Some of the ways in which stress and worries may manifest is in bullying. The experience of being bullied in turn produces huge levels of stress and can be considered to be an adverse childhood experience, affecting young people for years. We have seen an increase since the pre-pandemic years in children being bullied:

**27% of pupils** were pushed/hit for no reason in the month prior to being surveyed (19% in 2018).

27% of boys and 41% of girls 'sometimes' feel afraid to go to school because they may be bullied. This has increased over time.

67% think their school takes bullying seriously.47



It is vital when we look to support children and young people's mental health and wellbeing that we speak the same language across the entire health and care system. Therefore, across North Yorkshire, we have adopted the iThrive model of social, emotional and mental health.

Our Social, Emotional and Mental Health (SEMH) system is multi-agency, with a shared and inclusive language working on co-owned priorities towards a joint vision.<sup>54</sup>

33

## **SEMH in Primary Schools**

The SEMH Team works with primary schools to provide training, advice and support to pupils. Training for school staff includes 'Unlocking SEMH' and 'Unlocking ADHD'.

Work has focused on supporting schools, pupils and families around preventing/managing exclusion, and in helping those who struggle with attendance by co-producing support and guidance materials with parents/carers.



......



## Heads Up (Richmondshire Early Help Team)

We have a targeted programme for 4-8 years old and their parents, aimed at supporting the child's emotional wellbeing. It is run over 6 weeks, either face-to-face or virtually, with a different theme for each week:

- Self esteem
- Emotions
- Anxiety
- Anger
- Friendships and safe relationships
- Being kind

## Service Children's Champions (Richmondshire Early Help)

The service works in schools with children and young people aged 5-18 from military families. It supports emotional wellbeing especially at times of transition or when serving parents are deployed which we know are particularly difficult for children.

It comprises workshops or a 5-week programme – the 5 Ways to Wellbeing. Future plans for the group include a 6-week parental emotional wellbeing group, thus recognising the strains of military life on entire families.



## Attachment and trauma aware schools project

The Virtual School (for Children in Care) has employed an educational psychologist to train schools in attachment and trauma, recognising the importance of adverse childhood experiences on the entire life course.

They rolled out the 'Attachment Aware Schools Project: Developing Trauma Responsive Practice.'

The aim is to work with schools to embed trauma-informed best practice at an individual and system level when working with vulnerable pupils.

The project is available to primary, secondary and special schools where at least one Looked After Child is on the school roll. Currently we have 112 schools involved across North Yorkshire.





# The life of the child: Secondary

(35)

.....

## Secondary



The secondary school years are a time of huge upheaval for the 34,058 young people between 12 and 16 in North Yorkshire.<sup>13</sup>

From fresh-faced 11-12 year olds, they go through the trials of puberty and finally sit their first major

public examinations at 16, their GCSEs. For the oldest years, the foundation knowledge, on which their GCSE examinations are based, was hugely disrupted, between lockdowns, burst 'bubbles' and teacher sickness. Information was delivered solely online, but could only be as effective as their skills, connectivity and equipment; we cannot underestimate the difference this

has made to core learning and young people's ability to understand how best they learn, as well as their ability to socialise with and support their peers.

36

The changes our young people experience are many and varied, including:

- Physical development, including growth spurt and sexual maturation.
- Cognitive development, with evidence suggesting brain development continues up to age 25.
- Emotional development, including identity, self-esteem and resilience.
- Behavioural development, including risk taking and the beginning of lifelong behaviours.

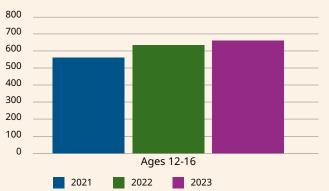
The bulk of these changes happen in just a few short years, whilst young people are grappling with so many challenges within their family, school and social lives.

> In this age group, we also see the rising impact of social media. Some interactions may be carried out almost entirely online with parents less able to influence their child's social contacts.<sup>55</sup>

The majority of our young people are in school, but, unlike in the primary years, the substantial rise during COVID-19 in the numbers being Electively Home Educated has not abated. The numbers continue to rise, with 665 young people aged 12-16 being educated at home in 2023, with the commonest reason being stress and anxiety (42%).<sup>44</sup>

## Secondary school electively home educated at end of academic year 2022/23

Education and Attainment Data, CYPS (Children & Young People's Services), North Yorkshire Council







For those young people who are persistently absent from school, with less than 90% attendance, the numbers are similar to those in the previous year, but still nearly double the pre-pandemic levels (14.3%). Currently, a quarter of young people have less than 90% attendance at school.<sup>44</sup>

## Percentage of secondary pupils persistently absent in North Yorkshire

Education and Attainment Data, CYPS (Children & Young People's Services), North Yorkshire Council



Despite all these challenges, young people tell us their lives still revolve around friends, family and fun:

"It's fun where I live as I have my best mate living next door to me."

"Nice town - a lot of green space" However, in this age group, there is growing awareness of wider societal pressures, including the cost of living:

"Our houses are getting damp and full of mould and it's really embarrassing. It's not just me it's all my friends." "One of my school friends has got holes in her school shoes but she knows her mum hasn't got any money so she's not even telling her they are broken because she doesn't want her to worry."

Our young people's learning is objectively measured at the end of these years using GCSE results. For those without any special education needs (SEN), they outperform their peers nationally, with 59% achieving grades 5-9 (9 being the highest, equivalent to A\*\*) in English and maths. This is testament to the hard work put in by young people, their families, teachers and all supporting staff.

However, those with SEN achieve slightly lower than the national levels. The attainment gap in NY between those with SEN and those without SEN is 42%, whereas the gap nationally is 38%.<sup>35</sup>

For some, however, school life is not always positive. Bullying and sexual harassment exists in the school environment. Being teased, left out and being pushed or hit are the commonest negative behaviours experienced. However, 11% of boys and 21% of girls had previously witnessed/ experienced sexual harassment, with only 15% reporting it.<sup>56</sup>

<u>8</u>



## Healthy adolescence

There is no doubting puberty is difficult. It is a time of turbulent emotions and physical changes, when young people may feel they do not recognise themselves.

Young people are now taking more responsibility for their own activity levels and eating habits, with health behaviours becoming ingrained. It is therefore important that we promote positive choices and give consistent messages.

## When asked what would make your life better young people said:



Through the Growing Up in North Yorkshire survey of Year 8 and Year 10 pupils, we know much about the health and health behaviours of our secondary age pupils:<sup>47</sup>

## Social, emotional and mental health

Mental health and wellbeing has deteriorated markedly since before the pandemic. We ask young people about their worries, wellbeing and measure their levels of resilience.

## 71% worry often or all of the time, girls more than boys.

Boys have better wellbeing and higher resilience than girls. Socioeconomic factors also play a part; young people in receipt of free school meals have lower wellbeing and resilience. However, special education needs are not a factor that hugely affects wellbeing.

## Worryingly, **22% of young people said they** rarely felt optimistic about the future.<sup>47</sup>

"Don't feel safe on my street alone" "Exams and the impact of lost education time because of COVID. it has put extra pressure on. Initially I used to school refuse which also meant that I lost time in education because my support needs were not being met"

## Healthy eating and physical activity

Whilst health advice regularly recommends having breakfast, 1 in 5 of our young people had nothing to eat on the morning when they were surveyed.

12% were often on a diet, or were careful not to eat too much (girls more than boys), but worryingly over 40% described having a disordered relationship with food at some point e.g. regularly making themselves sick, an extreme diet or extreme exercise.

Whilst 44% were physically active for at least 2 hours per week at school, nearly three quarters of Year 8 and 10 pupils would like to be more active.<sup>47</sup>

## Sexual relationships and sexual health

Older secondary age pupils (Y10+) are starting to explore their sexuality; 17% were either in, or had been in a sexual relationship in the past. However only half said they had always used a method of contraception and 11% were unsure if they had.

61% of Y10 pupils had knowledge of sexual health services, knew how to use them or had used them in the past. However 39% had never heard of it. 24% know where to go to access free condoms.<sup>47</sup>

## Alcohol, drugs, smoking and vaping

A third of Year 10 pupils had drunk alcohol in the week prior to being asked, as well as a far smaller proportion of Year 8s.

Fewer than 10% of secondary school pupils had ever tried drugs.

Whilst 18% of Year 8 and 10 pupils had tried, or were currently smoking, **over a third had tried vaping**. Just under 1 in 10 pupils regularly vaped. More worryingly, there was a gender difference, with 17% of Year 10 girls vaping regularly, versus only 9% of Year 10 boys.<sup>47</sup>



~····· 🚱



<u>چ</u> ...... برج ...... برج ......

### The life of the child: Secondary

"My workers listening to me

and making sure that I am

part of conversations about

decisions that will impact on

me is important to me"

## Innovative adolescence

Adolescence is a period where peers are increasingly influential, but this may not involve socialising in person. Technology is an overwhelming presence in all young people's lives and if services wish to connect and interact with adolescents, we too need to embrace modern ways of communicating.

Making the most of the opportunities offered by the digital age, however, requires both the financial means and wifi connection. Therefore for those young people not able to easily access the online world, this can lead to increasing isolation and loss of learning.

Young people are aware that the digital world may not offer the best of experiences; they tell us that whilst an online presence is not always positive, they feel an obligation to remain on social media; it has become an essential part of both learning and socialising.

## Online communication and experiences

84% of young people communicate via messaging apps. Perhaps the most surprising thing about this fact is that it is not higher. Although when asking girls, this increases to 89%. The gender differences continue, with 43% overall communicating through online games, but this is >60% in boys.

### More worrying, **nearly a third communicate online with those they have never met**.

When we asked Year 10 pupils about their online presence, girls generally had a more negative experience than boys. For example, nearly half of girls and nearly a third of boys had received nudes or semi-nudes. Over 1 in 10 girls had sent personal information they then regretted.<sup>47</sup>

#### We need

to ensure that we are providing young people with the tools to

consider their online activity and act with greater caution, whilst still gaining the benefits the internet provides.

spread around."

"A friend of mine sent pictures

and they got passed around the

it's actually illegal to send naked pictures and they always get

school, People don't know that

In North Yorkshire, we have taken advantage of the drive towards digital groups to offer support to groups of young people who may otherwise feel increasingly isolated and disconnected:

### Children and young people in care

North Yorkshire Care Champions are a group of care-experienced young people, up to the age of 25, who come together to improve care services.

There are monthly social activities and events as well as regular meetings between Care Champions and senior council leaders. In 2022, they created a video around the language of the care system to tackle stigma.

There are 198 young people of secondary school age in care in North Yorkshire.

### North Yorkshire Youth Pride

Established in May 2022 to offer an online and regular meeting for young LGBTQ+ people who feel isolated and disconnected.

The meetings are to provide a supportive and safe space, design workshops linked to LGBTQ+ campaigns and raise awareness of issues.

The main concerns of the group are:

- Underskilled workers with no formal training on LGBTQ+ issues or specific safeguarding training that will be required
- Addressing risky behaviour
- Ensuring that mental health is a key priority with the group, who are statistically more likely to experience issues that others of the same age.





#### The life of the child: Secondary

**Flying High** is a weekly online group for young people with SEND.

They conduct their own campaigns including on bullying and unconscious bias. They produced their own posters for the campaigns.

They have even met face-to-face in the council chambers.

Whilst innovation is often synonymous with digital in this age group, there are also other innovative groups and programmes which do not involve technology:

## School Zone project: Selby High School

Trading Standards have been working with Selby High School to improve the food and drink offer.

In response to insight work with the school:

- Increased salad and vegetables in wraps and sandwiches; 75% now have salad and/or veg
- All bread is now either 50/50 or wholemeal bread
- Wraps are either wholemeal or beetroot
- Reduced single use plastic (plates, cutlery)
- Eliminated single use plastic bottles with water filling stations and pupils are encouraged to bring reusable containers.

Learning has been shared with other schools via a webinar in June 2023. A 'Good Practice' resource is being developed.



## **Skipton Pride and Progress**

The Craven Communities Together partnership group has been focussing on improving the lives of LGBTQ+ children and young people.

Skipton Pride started in 2022, with organisers including SELFA Children's Charity, Craven Youth Council and North Yorkshire Youth. The subsequent, very successful event took place in July 2023.



### Immunisations

**Tackling vaccine hesitancy in Scarborough** A whole-system approach has been developed to tackle screening and immunisations health inequalities in Scarborough.

A multi-agency group, including public health, NHS, social care and local organisations work together to tackle vaccine hesitancy at a local level and develop appropriate communications.

As a result, there has been an increase in vaccine uptake. Further work is ongoing.

#### Gillick competence and vaccine consent

Webinars have been delivered to schools in preparation for the use of Gillick competence in vaccine consent. This is in the event that all other efforts to obtain parental/carer consent in a young person under 16 deemed competent have not been successful. That young person will be able to consent to their own vaccinations as long as they fully understand the intervention.

## **Pupil voice at Bedale High School**

In 2023 NYC Healthy Schools and Public Health worked with Bedale High School to help improve their food and drink offer. Feedback from pupils about school food and the dining experience was gathered via an online survey, and a focus group with pupils receiving free school meals (FSMs).

Following pupil feedback:

- New healthy food options are being trialled including a cold meal deal
- There will be more communication around school food, and clearer pricing
- Free drinking water is promoted and funding sought to give FSM pupils reusable bottles
- The school is exploring if pupils' unspent daily FSM money can be rolled over to the next day
- Extra dining space, more seating, and anti-bac for the payment touchpad will be provided
- The pupil survey template is available for other schools to use

### The life of the child: Secondary

## Social, emotional and mental health in adolescence

We know that the transition from primary to secondary school is exciting for some young people, but for others is filled with anxiety and can be intimidating. There are new people, a new school, new surroundings; it can be overwhelming. Add to this the upheaval of puberty – the combination may exacerbate existing mental health difficulties, or manifest new ones.

We also know that anxiety and stress is the main reason for our secondary age pupils to be Electively Home Educated. It is therefore vital that we support our young people and better understand their needs.

#### There are many risk factors for poor mental health and wellbeing in adolescence including:

<ul><li>School-based:</li><li>Bullying</li><li>Peer relationships</li><li>School exclusion</li></ul>	<ul> <li>Family circumstances:</li> <li>Young carer</li> <li>Looked after children</li> <li>Military family</li> <li>Mental ill health in family</li> </ul>
Personal: • LGBTQ+	<ul> <li>Broader factors:</li> <li>Poverty and financial insecurity</li> <li>Housing/ homelessness</li> </ul>

Mental health isn't taken seriously enough; advice is poor e.g. "go for a walk." So they're less likely to reach out again.

> Mental health crises are often mistaken for criminal behaviour. Support is needed not the police.

## The police.

## Worrying/negative emotions

When we asked our young people about their worries and negative emotions, it was clear that we need to support resilience and wellbeing to a far greater extent. Our adolescents told us:<sup>47</sup>

71% of Years 8 and 10 pupils worry about something often or all of the time.

## 53% have felt lonely at least sometimes in the 2 weeks prior to the survey.

Girls tend to worry more about everything:

	Girls	Boys
Personal appearance	62%	24%
Exams and tests	56%	30%
School work	47%	20%
Friends	37%	17%

In reaction to these worries, 36% would talk to someone, 49% would listen to music and 44% would think about it on their own.<sup>47</sup>

A third do not have an adult they feel they can talk to.

## The big conversation

Money worries are impacting on young people's mental health. Police need training on how to recognise and sensitively deal with mental ill health.

Mental health services have significant barriers; long waiting lists and expensive private care.

## Self harm

In 2022, 28% of Year 8 and Year 10 pupils had deliberately harmed themselves in the previous year, girls (37%) more than boys (17%).

Even more extreme, 38% have harmed themselves, thought of taking their own life, or attempted to take their own life in the previous year. Again, girls (47%) more than boys (27%).

### Nearly half of those experiencing issues around self-harm did not tell anyone.

Minority groups were significantly more likely to have thoughts or actions arounds self-harm, in particular, LGBTQ+ young people, young carers, children in the care system and those receiving free school meals.<sup>47</sup>



Therefore in a digital world, where social media has increasing influence, and our young people are struggling with the effects of how they are perceived by others, school work and exams, peer relationships and loneliness, how do we take a whole system approach to improve the mental wellbeing of such a large group?

As seen with our primary school children, we have adopted the iThrive model, embedding a shared and inclusive language throughout the county. This includes education, Early Help and the voluntary and community sector. We are promoting mental health as everyone's business, but at the same time showing that we do not have to be experts; a listening ear and providing a consistent voice as a trusted adult, may be all that is required, whilst signposting if necessary.<sup>57</sup>

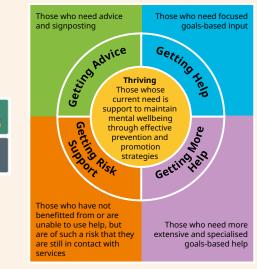
#### **Getting Advice**

**The Go-To website** The Go-To - Emotional wellbeing and mental health (<u>thegoto.org.uk</u>)

Fitting within the 'Getting advice' quadrant of iThrive, the

Go-To website is a single point of information for the whole range of mental health support offered by different agencies across North Yorkshire.

The website signposts young people to the most appropriate agencies and has tips and information to help young people cope with stress and anxiety. The website was developed by a collaboration of the NHS and North Yorkshire Council.



### **Risk Support**

For those who need Risk Support, the CAMHS service provides crisis support for those who need it most, as well as the eating disorder service. We aim to ensure that the whole system is aware of all the different parts of itself so young people are directed to the most appropriate level and type of support as early as possible.



## health support teams in schools

These teams are part of our 'Getting Help' service, with 3 main functions:

- 1. Support educational settings to develop a whole school approach to wellbeing.
- 2.Provide timely advice, consultation and signposting to teaching staff.
- 3.Provide evidence-based psychosocial interventions, based on CBT, either 1-2-1 or in groups.

The service is available in primary, secondary and further education settings. It is also available for electively home educated young people and those excluded. We know that schools in Scarborough are seeing higher numbers of young people needing support, so an extra schools team is now in place.

### Getting Help | Getting More Help

#### Youth in Mind, Craven

A partnership of mental health and wellbeing organisations that deliver school, community



and hospital-based support to children and young people aged 5-25 in Bradford and Craven. Support is also available for families and professionals.

Craven Buddies provide virtual, community and school-based support to young people living or attending school in Craven who need help with their emotional and mental wellbeing.

Outside education settings, **Compass Phoenix** is our mainstay



service providing Help and More Help. They are supporting increasing numbers of young people. There are four main aspects to the service:

- 1-2-1 or group work to support young people who have mild to moderate mental health difficulties
- Support to schools to develop a whole school approach re emotional wellbeing
- Professional consultation to school and college staff, providing advice and guidance on emotional wellbeing and mental health
- The BUZZ US text messaging service



(43)



# The life of the child: Late adolescence and early adulthood

)......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>......(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>.....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>.....(<u>)</u>....(<u>)</u>...(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>...(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>...(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>...(<u>)</u>....(<u>)</u>....(<u>)</u>....(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>....(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>....(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>...(<u>)</u>..(<u>)</u>...(<u>)</u>..(<u>)</u>..(<u>)</u>...(<u>)</u>..(<u>)</u>...(<u>)</u>...(<u>)</u>..(<u>)</u>..(<u>)</u>..

## Late adolescence and early adulthood



In Children and Young People's Public Health, we are responsible for those young adults aged 17 and 18, but we also provide for those with Special Educational Needs and Disabilities (SEND), or those who have experience of the care system, until they are 25.

In some ways, the needs of young adults are just the same as those of younger children, in that

they still need age-appropriate facilities in safe surroundings and we wish to help them grow into confident, resilient, healthy adults. However, requirements may differ substantially; some young people wish to stay in education or training, accessing a variety of further qualifications, whilst others wish to enter the workforce. Safe, convenient transport options are also required.

This is the point when young people make significant life decisions around their careers and education and start planning for the future, moving towards independence from their parents, although economic autonomy usually takes longer now than in previous generations.

However, national research has found that happiness and confidence of 16-25 year olds is at an all-time low, with the main worry being the cost of living.

In NY, we have 13,293 young adults aged 17 and 18 with a further 31,113 aged 19-25.13 Between 16 and 24, the majority of young people are either in employment, or they are students:<sup>58</sup> "I am in education and I have

"I really do believe that in having greater community or our specific needs met in that way, that we are happier and maybe more able to make decisions that positively impact on our health in other ways too."

"...the cost of living crisis to rent is very expensive and to buy is incredibly expensive and with what I want to do with travel it's kind of out of the question to afford a mortgage really"

**Economic activity status** 

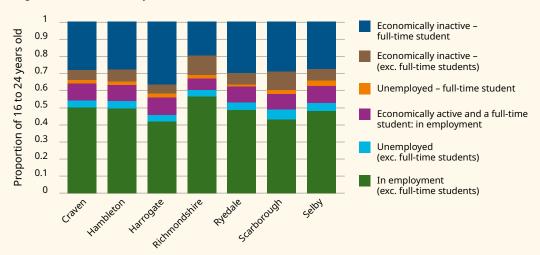
got a lot of support here and

things on my mind"

I have the staff to talk to if I

am worried or if I have a lot of

Age and economic activity status - Office for National Statistics



In 2022/23, there were 3,979 young people aged 17-26 on Education, Health and Care Plans (EHCP).<sup>35</sup> The commonest reasons for these plans were autism, social, emotional and mental health, moderate learning difficulties, personality disorders and speech, language and communication needs.

> We have 4 Youth Councils influencing local decisions across the region in their local communities. Meetings may be online, in council chambers, or even above the local burger place!

Local Youth Councils North Yorkshire Council







has a Core Offer where all NYC departments are regarded as 'corporate parents' with a shared responsibility to be good parents to those leaving the care of the Local Authority. Of those leaving care in 2022/23, nearly two thirds were in education, training or employment. 485 young adults were supported by Leaving Care. 97% were in suitable accommodation and 99% had an Authorised Pathway Plan which sets out how a care leaver will continue to be supported as an independent adult. Each young

person leaving care has a care worker to support the transition.<sup>59</sup>

45

"Even though it's not a young person's issue, if your parents are worried about money it affects you and you feel their stress and maybe they can't afford things for you."

## Late adolescence health

Most young adults in our county are healthy and physically fit. However, there are certain lifestyle issues that can have a long-lasting, negative impact and it is our responsibility to inform young people and work to reduce these risks as much as possible.

To optimise mental health and wellbeing, we have asked young people to describe where they live and identify opportunities with which we can help:

#### Where I live:

• Fun, quiet, with nice communities and it feels safe

#### Issues:

• Nothing to do, too far from shops, lack of transport

#### Opportunities:

- · More opportunities, especially in the arts
- Better transport
- Bus pre-09:30 to help people get to work

"As someone used to the accessibility of a city now stuck in a small village with unreliable and infrequent transport, I found it very difficult to reintegrate post the lifting of lockdown restrictions" It is clear that our young adults value family, friends and leisure, just like our younger children. However, their independence now requires easier transport options for both work and leisure.

In the lockdown years, when many young adults avoided the stresses of public examinations, other disruption and challenges took their place, like financial worries. The pandemic has had significant negative impacts on young people's mental health and wellbeing, with those young people with Special Educational Needs affected disproportionately. Nationally, the rates of probable mental health disorder in 17-19 year olds increased from 10.1% in 2017 to 17.4% in 2021.<sup>60</sup>

The mitigating effects of technology, keeping young adults socially connected during lockdowns, have also had a negative impact on their wellbeing. The online world is now well and truly established in this age group, with 94% of 17 and 18 year olds in NY communicating with their peers via social media.

However, online safety is a concern:47

## 43% received nude or semi-nude images, of whom 10% then sent one back.

Other concerning behaviours include a fifth experiencing someone texting or showing them pictures which upset them, and 1 in 10 sending personal information to someone which they then regretted.

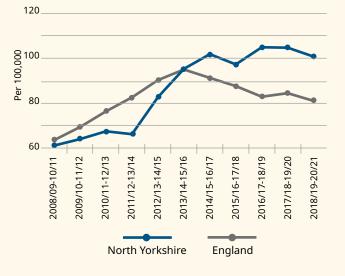
#### 8% have been bullied online.

"You can't win because you can experience something awful online, but there's still a pressure to feel like you have to be on social media. You can't just come off."

We also know that North Yorkshire has persistently high rates of admissions for substance use for young people aged 15-24, significantly above their peers nationally. There has also been a genderrelated shift, with admissions in females aged 15-24 overtaking those in males for the last few years.

#### Hospital admissions due to substance misuse (15 to 24 years)

https://fingertips.phe.org.uk/profile/child-health-profiles/ data#page/4/gid/1938133228/pat/6/par/E12000003/ati/402/ are/E10000023/iid/90808/age/156/sex/4/cat/-1/ctp/-1/yrr/3/ cid/4/tbm/1



The final health concern we identified in this age group concerns teenage pregnancy. The under-18 conception rate has fallen by over 70% in both North Yorkshire and across England over the last 20 years. However, 2021 rates show that Scarborough has consistently higher levels than elsewhere in North Yorkshire.<sup>61</sup>

46

## Late adolescence and innovation

The aspects of our lives in North Yorkshire today that have greatest impact on young adults are not directly connected with health, but the environment in which we live. Those wider determinants of health and wellbeing have a huge influence on lifestyle, as well as social, financial and health inequalities. Housing, employment, education and transport have a direct impact on health and wellbeing. They are therefore vital aspects in our support for those entering adult life.

## **Employment: Personalised Learning College**

This caters for learners aged 16-25 with an EHCP, up to 5 days per week, term time. It provides them with a Personalised Learning Pathway:

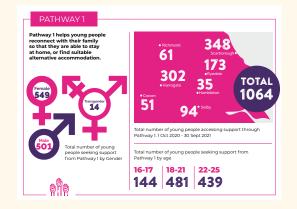
- Personal progress focussing on life skills
- Independence focussing on independent living skills
- Employment, focussing on transitions into the world of work

There has been a steady increase in the number of young people enrolled and continuing their education from just 38 in 2015/16 to 169 currently.62

## **Housing: Young People's Pathway**

The pathway offers young people the necessary support, advice and mediation to enable them to stay in their present accommodation. Where it is not possible for someone to stay at home, there are a variety of options:<sup>63</sup>

**Pathway 1**: helping young people reconnect with family. 1,064 supported across North Yorkshire.



#### Personalised Learning College North Yorkshire

"I want to get paid

employment and be

supported to do the job

I would like to

"In the future I want

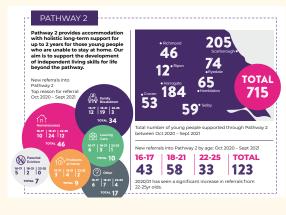
to live independently or in

upported living. I enjoy

working in the community,

and work at a charity shop"

Pathway 2 provides accommodation with holistic long-term support for up to 2 years for those young people unable to stay at home.



### The life of the child: Late adolescence and early adulthood

## NYC Graduate Programme

Graduates have the opportunity to develop a wide range of skills in roles supporting the operational delivery of frontline services. They

"Overall, the reason I moved to North Yorkshire was due to the opportunities available for careers as well as recreationally and socially." (NYC Graduate Trainee)

are then able to apply for internal and external vacancies which arise.<sup>64</sup>

### **NYC Apprenticeships**

Apprenticeships are increasingly recognised as an excellent alternative to traditional education routes and the range of apprenticeship qualifications goes to degree level and beyond.



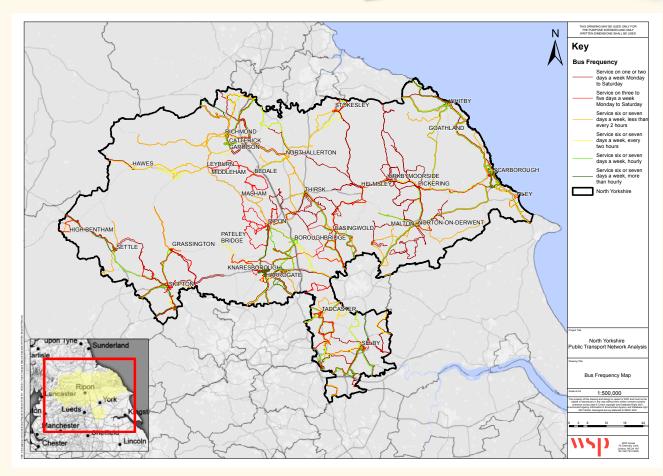
#### **Transport**

Transport has been a long-standing challenge in North Yorkshire mainly due to the rurality of the county. A North Yorkshire Rural Commission enquiry was conducted in 2019 finding that young people can take hours with multiple changes to get to Further Education colleges. Lack of transport reduces the education and employment opportunities available to our young adults.<sup>65</sup>

E N

.....

"Bus passes that worked before 9:30am to give me more opportunities for work" "Must travel everywhere which is hard for someone in a wheelchair getting on public transport"



## Late adolescence, innovation and SEND

There are some excellent opportunities and programmes for those young people with SEN to enable them to enter the workforce and transition to independent adulthood. There are internships, apprenticeships and traineeships, all of which help young people with additional needs into employment, with the resulting health and wellbeing benefits. SEN should not be a barrier to employment. In 2022-23 we have seen a large increase in 19-25 year olds engaging in adult learning programmes.

## **Preparing for adulthood**

This programme enables and empowers children, young people and adults with SEND as well as their families to prepare for a smooth transition to adulthood.

There are 4 principles:

- Opportunities for further education and employment.
- Independent living including access to supported living.
- Having friends, relationships and being part of the community.
- Being healthy.

want to live

independently in

the future

#### "...another big issue I found living rurally with the transport was the way it massively limited job opportunities. As a young, recently physically disabled individual who was looking for work with no real experience, firstly it was nearly impossible anyway but with the limitations on getting there, I really felt like I had no hope. I am thankful to have family who can and have supported me."

## Preparing for adulthood

The programme promotes community participation and independence.

There is an Outcomes Guide focussed on the 4 principles, used to set personalised goals for children and young people which are not limited to the school curriculum.<sup>66</sup>

There are also guides for parents:

https://www.northyorks.gov. uk/children-and-families/sendlocal-offer/send-information-

parents-and-carers/ preparing-adulthoodparents-guide

> "I want to get paid employment and be supported to do the job I would like to"

Young peopleSchowith SENDtheywished forwitha world thattheydoes notprovdiscriminateinfoagainst SEND.new

School students have said they like other young people with disabilities visiting them at school. The visits provide an opportunity to inform young people about new service developments. "I want... to get employment as a front of house member of staff in a café or school. I know what I want to do and just need the support to do it"

## Flying High

Flying High is a group that gives young people with SEND a voice. It is for young people aged 11-25, although most young people attending are 17-25. The group meet regularly to make decisions on the services that affect them and everyone is accepted, supported and highly valued.

Members are involved in a vast and varied range of activities:

- Consultations and initiatives to improve children and young people's services.
- Attend and present at meetings and events, including awareness-raising sessions for professionals.
- Schools to canvas other young people.

 Recruitment processes for staff.
 Flying High then offer a number of opportunities after secondary school:

- Supported internships: workbased study programme for 16-24 year olds with SEND who have an EHCP. Unpaid and for 12 months. Young people spend most of their time in the workplace.
- Apprenticeships: work-based training for 16-25 year olds where they have a paid job and training, gaining industry knowledge and skills, whilst working towards a nationally recognised qualification.
- Traineeships: work-based study for 16-24 year olds, lasting from 6 weeks to a year. The aim is to develop work skills to gain paid employment. This is a stepping stone to work or an apprenticeship.

These opportunities are advertised on social media, door-drop flyers, as well as rely on word of mouth within community groups to reach as wide a group as possible.<sup>67</sup>



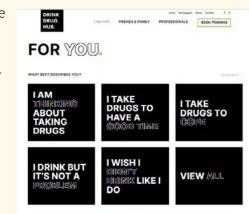
## Late adolescence and healthy behaviours

As mentioned above, the majority of young adults in North Yorkshire are physically healthy, but there are a number of negative health behaviours which can cause longlasting damage. We therefore need to look at how best to address these and reduce the risk to both young people themselves and the whole community in which they live.

## Alcohol and substance use: A harm reduction approach

The persistent, relatively high level of drug and alcohol hospital admissions for children and young people in North Yorkshire necessitates greater understanding around alcohol and substance use across the county.

The Drink Drug Hub, the local harm reduction website, provides the most up-to-date advice. It hosts free training for professionals and the general public on a range of drug and alcohol-related topics. The website was developed with the help of Selby College students who even chose the name of the site.



#### TRAINING INFORMATION SUPPORT



### Providing Information & Support for Drink & Drugs - Drink Drug Hub<sup>68</sup>

From a 2023 Drugs Needs Assessment and youth engagement, a variety of measures are being enacted:

- Utilise digital Police Community Support Officers to tackle the availability of drugs online
- Raise awareness of the support that can be offered to young people who are living with someone with addiction.
- Promote Operation Choice, NY Police's prosecution diversion scheme.



• NYSCP (safeguardingchildren.co.uk)

## Sexual health and young people

YorSexualHealth (YSH) provides an open access, integrated sexual health service but knowledge of the service is a little patchy.

Services include:

·····

- Sexually transmitted infection testing and treatment
- Full range of contraception, including emergency as well as condom distribution
- Outreach team working with those most at risk of poorer sexual health outcomes
- Counselling services for young people to self-refer or via professionals

Organisations are working specifically with young people and carers in Scarborough where we know rates of unplanned pregnancies are higher.<sup>69</sup>

## Experiences of teenage pregnancy and parenthood in Scarborough

Whilst teenage pregnancy is associated with some negative health outcomes for mum and baby, it is also true that it is a very positive experience for some. We therefore wanted to know about the challenges our young parents encountered, the positives and how we can help. Arts-based workshops and interviews were held with young parents (aged 17-23) plus discussions with professionals.

Challenges identified:

- Cost-of-living
- Cuts to support services
- Age-related stigma and discrimination in both the local community and with health and social care staff.

Of particular note, the fear of social services becoming involved in the lives of their children led to high levels of stress and anxiety.

Positives described were how our young parents' lives had been enriched by becoming parents. They are determined to prove themselves.<sup>70</sup>

Journeys into Parenthood Becoming and Being a Young Parent - YouTube

## Late Adolescence and mental health

By now, hopefully, our young people are growing into healthy, resilient, well-rounded adults. However, we recognise that no matter how outwardly well they may appear, there are always stresses and strains of independent living that can challenge the most hardy of individuals.

It is important therefore that we provide a safety net for those in need. Growing independence, particularly in the context of the pandemic has taken its toll on some more than others.

Those with SEND or those under the care of child mental health services are particularly vulnerable.

But first we need to consider the positives; what makes young adults happy?

## What makes your life good and happy?



50

## Special Educational Needs and Disabilities

In the first year of the pandemic, those with SEND had increased behavioural and emotional difficulties, as well as mental ill-health.

Up to June 2021, parents/carers of young people with SEND reported that their children experienced higher rates of mental health issues and greater anxiety than those without SEND.

### **Transitions**

The difficulty with the transition from child to adult mental health services is well documented and longstanding, often being described as a 'cliff edge.'

Whilst some young people are transferred to adult services, others are not, but whatever happens at 18 must be communicated fully and the young person supported throughout.

Improvements have been called for by Government; the NHS Long Term Plan recognises the gap created by the current model of mental health services and is committed to extending current models to cover 0-25. However, this is

not fully developed nationally or locally in North Yorkshire.

"Many times I have gone for walks to "clear my head" and certainly looking back to when the pandemic was more prevalent, having the opportunity to leave my house and be in a place that felt very separate from that was a much needed escape, and sadly one that not everyone was afforded."

.....



## **Effects of gender**

In the younger years, boys almost universally fare better with their mental health and wellbeing than girls. The same is true for young adults. Boys generally have greater symptoms of behavioural and attentional difficulties. However, in all other measures, girls fare worse than boys. This includes:

- Higher levels of emotional difficulties
- Greater psychological distress (aged 16-24)
- Poorer wellbeing
- Greater anxiety

In April and May 2021 girls were twice as likely to report being unhappy with their mental health. Teenage girls (16 and 17) were more worried about their mental wellbeing than other groups of children and young people.<sup>71</sup>

## Conclusions

Children's classic literature is usually classic for a good reason; there are pearls of wisdom that are as applicable now as they ever were. Therefore, when Alice, near the beginning of her adventures in Wonderland observes,

#### "And what is the use of a book," thought Alice, "without pictures or conversations?"

she has indeed hit the nail on the head. When telling the story of children themselves, without the use of pictures, or children's own words and conversations, there would, quite simply, be no use to it whatsoever.

We have now composed our tale from the visuals, the numbers and, most importantly, the voices of our young people. And what a tale they tell! We have a remarkable 151,000 young people in our county. They have experienced financial upheaval. They have experienced social upheaval. It is no wonder that they are feeling this disruption and responding accordingly. We have described their lives, their worries and their health concerns. Some health issues are more pertinent to certain age groups than others. Some issues, like weight gain, start early in life and impact increasingly over the years, with lifelong consequences. The pattern of what worries young people is partly reflective of recent events, where the top concern of 10 and 11 year olds is death of a loved one, likely due to what they have experienced through the COVID pandemic. Other worries are socially driven, when from the age of 10, worrying about appearance develops a marked gender difference, sustained throughout the teenage years. Girls generally are affected to a greater extent in terms of poorer resilience and wellbeing and greater mental ill health including anxiety and stress. This is also the main reason for young people being electively home educated. Mental ill health can affect all aspects of young people's lives.

So how to support this generation? Young people, in today's world, are growing up in a very different world to previous. The iPhone was invented in 2007. Therefore no young person under the age of 16 has experienced a world without the potential for instant access to all the information, both positive and negative, on the internet in their coat pocket. All aspects of life can be conducted online - friendships, education, advice and guidance, health services, as well as the darker side, including bullying and graphic images. This never ceases. It is relentless. Despite wanting to take a break from social media, many young people simply feel they cannot, as they would miss out. For those younger children too young to appreciate the full range, their parents instead are the ones introducing them, at an ever younger age, to all the possibilities the internet can offer. However, at the tender age of just 5 or 6, can the fifth who know people online with whom they are not in contact in real life, truly appreciate the potential dangers? Unlikely.

In response, we, in the health and care system, must work as a partnership with all organisations to find ever more inventive ways of reaching and influencing the health and wellbeing of those young people. We need to push ourselves outside our comfort zones, embrace social media and find both technological and non-technological ways of promoting healthy behaviours. We need to be innovative in all aspects of life that support those young people who need us the most. Make no mistake - the children, young people and families who live and work in North Yorkshire are incredible. Whilst some need our input and support, many do not. We have active Youth Councils, influencing the direction of our County services. We have strong, supportive communities and generally, our health and wellbeing data is similar to or better than national figures.

Most importantly, our young people of all ages tell us they value their friends and families, green spaces and the communities in which they live. But where we are needed, we should be stepping up and helping all our young people achieve their potential. An ideal world would be where our role in public health, to reduce health inequalities and support those who need it most, would be obsolete. Until that time, however, we will endeavour to do our best for our children, young people, their families and their communities. That way, our young people can grow to be healthy, resilient, confident, and achieving young adults with the world at their feet.

And always remember another pearl of wisdom, the words of A. A. Milne's Christopher Robin,

You're braver than you believe, stronger than you seem and smarter than you think.



## Recommendations

The Recommendations below are the inevitable consequence of a wide-ranging, all-encompassing children and young people's system. They have evolved from what young people have told us and the issues identified in the local data. Additionally, a full Public Health Team Awayday describing the findings of the report, then asked attendees how their work in the rest of public health impacts on children and young people, as well as their own personal experiences of living and/or working in North Yorkshire. As many of the suggestions followed identifiable themes, these have been incorporated into the Recommendations.

## All ages

Some recommendations apply to all ages:

- Ensure all young people's needs are seen as an integral part of relevant strategies, policies and needs assessments.
- Look at ways of "poverty-proofing" the lives of children, young people and their families, whatever their ages, including supporting childcare to give parents more employment options and increased access to healthy, affordable food.
- Monitor the uptake of all digital programmes to ensure that the most vulnerable are not excluded from modern forms of intervention e.g. Healthy Families (which is delivered exclusively online)
- Our services should consider not just the needs of the children and young people, but also those of their parents and carers, including support networks in more isolated rural or coastal areas.

### Mental health and wellbeing

Work closely with our NHS partners, and all organisations, to prioritise children and young people's mental health and wellbeing with a focus on:

- Perinatal mental health
- Whole family wellbeing
- Embed the iThrive model in all organisations throughout our county to help children to identify and manage their emotions and worries, and build resilience and wellbeing.
- Increase the focus on mental health, wellbeing and resilience to support young people to stay in school, particularly through stressful periods and ensure all young people have someone they can talk to and trust.

## Maternity; 1001 days

- Encourage commissioning organisations to think-family.
- Explore smoking in pregnancy and pregnancy vaccination take-up in Craven.

### **Early Years**

- Prioritise school readiness and ensure all partner agencies, including the NHS, are working to this aim.
- Ensure we investigate the disparity between those achieving expected developmental milestones before 3 years and then at 4-5 years.
- Continue to promote healthy lifestyles in the youngest children, including early toothbrushing, active play, healthy eating and sleep.
- We need to initiate a deep dive into the causes of hospital admissions and examine whether the measures we have in place adequately address the risk factors.
- Further promote parenting courses particularly in those areas and those population groups with lower uptake.

### Primary

- Promote further uptake of the Healthy Schools Award Scheme and support families with healthy lifestyle choices.
- Explore how changes to dental commissioning can be used to support access to NHS dentistry, particularly for migrant children and other vulnerable groups.
- Increase the focus within primary schools around online safety from the earliest years, enabling parents to manage screen use.

### Secondary and late adolescence

Whilst the chapters are separate, it was clear, when deciding upon Recommendations, that many of the aspects important to young adults, apply from secondary school onwards. Therefore, it was sensible to combine the two.

- Continue to promote physical activity and healthy eating habits.
- Ensure a multi-agency approach to tackling the use of substances, including nicotine products, alcohol and drugs.
- Work with safeguarding partners around maximising online safety.
- Ensure services which span young people and adults have robust processes around the transitions period.
- Ensure a co-ordinated, multi-agency approach to sexual health services including young people's age-appropriate awareness of contraceptive services.

## Recommendations from Director of Public Health Annual Report 2021-22: Learning from the Covid-19 Pandemic

In our report for 2021-22, we made a number of recommendations. In this section, we share some examples of our work that contribute to meeting those recommendations.

## **Health Protection**

Review system resilience and pandemic preparedness measures, including COVID-19 step up measures

During 2022-23, the local authority worked with the NHS on winter planning, including flu and COVID-19 vaccinations. The focus on prevention and management of COVID-19 in care settings continued, and support was broadened to other outbreaks such as flu and norovirus, alongside the ongoing COVID-19 data monitoring and reporting.

A new emergency planning, resilience and response (EPRR) team has been formed as part of Humber North Yorkshire ICB, who support local arrangements through the Local Resilience Forum (LRF) and Local Health Resilience Partnership (LHRP). Improve local health protection assurance processes, including monitoring and reporting

We have reviewed our Health Protection Assurance Group processes, and produced an end of year report with partners that has been presented to North Yorkshire Health and Wellbeing Board. Our review has resulted in improved assurance processes and closer working with partners across the system on wider health protection issues. The report sets out our priorities for 2023-24, including a review of infection prevention and control and inclusion of management of sexually transmitted infections in outbreak management plans.

## Promote uptake of COVID-19 vaccination and all routine immunisations

To complement the NHS-led roll-out of seasonal COVID-19 and flu vaccinations, supported by partners, we undertook dedicated multi-agency work on routine vaccination uptake in Scarborough and among key inclusion health groups e.g. asylum seekers. This included research into vaccine hesitancy among key groups, which has been shared regionally. Our multi-agency approach resulted in North Yorkshire having the best COVID-19 autumn booster uptake across Yorkshire & Humber, and increased vaccine uptake in asylum seekers. In 2023-24, we plan to continue targeted work in Scarborough and with inclusion health groups, expanding this to other populations including Gypsy Roma Traveller communities and children in care.

All organisations to ensure effective support mechanisms are in place for staff responding to significant incidents, workload pressures or traumatic events to reduce the risk of work-related stress and burnout

Humber & North Yorkshire Integrated Care Board (HNY ICB) have created a dedicated strategic control centre to manage out of hours escalations and co-ordinate responses to incidents. HNY ICB have also established a People directorate across the ICB and developed a transformation programme to support staff.



### **Improving Population Health**

Continue to focus on prevention, both for infectious diseases and wider preventable causes of ill health

We have delivered a programme of support to schools on infection prevention, including guidance and webinars, and worked on a range of interventions to improve indoor air quality to prevent airborne infection. The work with care settings on infection prevention continues, as does the ongoing work on vaccination, particularly focused on reducing health inequalities.

We also continue a wide range of public health interventions aimed at preventing or reducing causes of ill health and promoting healthy lifestyles, such as the family and adult weight management programmes (including focused work to tailor interventions for specific groups, such as people with learning disability); smoking cessation programmes with our aim of a Smoke-Free North Yorkshire by 2030; active lifestyle promotion; substance use support and sexual health programmes.

#### Raise awareness of Long COVID and the need for appropriate support to the public and to employers

NYC has included Long COVID information as part of COVID-19 data updates, including highlighting social care as a key workforce group affected by this condition. The council also has a staff support group specifically for Long COVID, and a suite of resources as part of occupational health support (including for managers on how to support staff with Long COVID).

Long COVID services have been commissioned by Humber & North Yorkshire ICB and set up in South Tees, Harrogate and York & Scarborough hospitals. These services bring together multidisciplinary teams to diagnose and treat where appropriate a range of different symptoms. In addition, an ICS-wide Long-COVID service for children is provided from Hull hospital.

### Highlight the impact of the pandemic on wider aspects of health, including mental health

Mental health community transformation work has been underway throughout 2022-23, with partnership working involving the ICBs, mental health providers, the council and communities. The council has re-established the Mental Health Development Board for adults and is making the most of opportunities afforded by Local Government Reorganisation to strengthen understanding of people's housing needs, and develop a strategy to address this. In addition, the NYC Health and Adult Services service development team is reviewing crisis care provision in the community to support independence, help people stay in their own homes for longer and prevent hospital admission.

The Public Health team have formed a multiagency Perinatal & Infant Mental Health Partnership. Early priorities of the group have focused on developing a visual tool for professionals to support the understanding of the perinatal mental health offer across North Yorkshire and strengthening pathways between Midwifery and Health Visiting Services.

The Chief Officer of SELFA children's charity in Craven, Emma Pears, completed a Health Equity Fellowship with West Yorkshire Health Inequalities Academy. Her research report highlighted the need for a new approach, focusing on the strengths and abilities of the people in rural Craven and strengthening community support through building peer networks. As a result of this piece of work SELFA has been successful in their application to a charitable trust to set up peer support groups for children & young people who are experiencing mental health issues and their parents/carers. For full report Funding boost for children's mental health support – SELFA Children's Charity Skipton

Craven Mental Health and Wellbeing Hubs Network: established in 2023, this is a network of independent community organisations across Craven offering consistent, accessible, and local adult mental health and wellbeing support, managed by local arts and wellbeing charity Pioneer Projects, with support from specialist mental health providers in the Voluntary, Community, and Social Enterprise sector, North Yorkshire Council, Bradford District Care Trust, and the Modality and WACA Primary Care Trusts. The aim is to increase locally-available support to reduce barriers to access, particularly those experienced by people living in rural areas.



## Work with partners to tackle physical and social deconditioning

A review of falls prevention activity and response to falls has been carried out, and informed a very well-received falls summit in April 2023. Health professionals have received training on frailty and the Rockwood frailty scale, and information on community support available to people living with frailty collated and shared. Work on falls, frailty and deconditioning is now more coordinated and, we anticipate, will lead to better outcomes for people.

A programme of work has been underway to promote and support healthy living and healthy weight among children, young people and families. The Healthy Schools and Early Years Award Programme continued to support schools (primary, secondary and special) and early years settings (nurseries, childminders) to create healthy environments for pupils and staff and to achieve awards around healthy food, active lifestyles, mental health etc. Of the schools that took part in the evaluation and had achieved a healthy schools award, 83% felt that being part of the programme had led to a more wholeschool approach to health and wellbeing, 67% reported perceived improvements in staff health and wellbeing, and 58% reported perceived improvements in student health and wellbeing.

In addition, a number of initiatives to improve school food and help families with food insecurity and the cost of living have been ongoing. Work has also been underway to develop healthy weight services and support for families in North Yorkshire  funding was secured in Autumn 2022 to create a new remote tier 2 family weight management service called Healthy Families which is aligned to the existing Adult Weight Management service.
 The service started in March 2023 and is free for all eligible families in North Yorkshire.

To help early years children (up to 4 years old) to develop active lifestyles, motor skills and physical development, North Yorkshire Sport and North Yorkshire Council are working together to implement the Active Start programme in early years settings from Summer 2023. Active Start has been created to train up early years practitioners to inspire and increase activity levels in the early years through activity and active play to help children to be healthy, to learn and be active for life.

North Yorkshire Sport have developed the 'Get Moving' home exercise programme, aimed at tackling deconditioning in older people to enable them to maintain and develop greater independence in their own home. Bespoke exercise programmes are developed for each client to support them to achieve their goals around ability, motivation and confidence. NYS found that maintaining independence and re-starting activities enjoyed pre-Covid were great motivators. The programme was funded by the National Lottery and piloted during the 2021 calendar year. North Yorkshire County Council Living Well Team colleagues referred clients who were 65+ and because of lockdowns had experienced a level of deconditioning (people vulnerable to mildly frail

as per the Rockwood frailty scale). Therapeutic Exercise Instructors were deployed to deliver two exercise sessions per week for four weeks at the home of the clients. On reviewing the results of the pilot, the National Lottery invited NYS to submit an application to continue this work, which was funded in May 2022 for 3 years. This longterm commitment has enabled NYS to expand the referral routes into the programme and include a wider range of health professionals.

To support the national Enhanced Health In Care Homes programme, all care homes are now linked to a named GP Practice with a lead GP. The lead GP provides face-to-face visits to care homes on a weekly basis.

### Health and the environment

#### Highlight the benefits of clean air, both indoors and outdoors, and share knowledge on how to improve air quality

We have been working with schools and care settings to increase awareness of the importance of clean air and the impact of indoor air quality on health – not just for infection prevention but for many other benefits too. We have delivered webinars and conference sessions, shared guidance and links to research studies (and Nynet pilot scheme for schools providing virtual CO2 monitoring and advice), and publicised World Ventil8 Day. In 2023-24, we aim to develop closer working between public health and environmental health teams on air quality.

Work with partners to develop healthy indoor spaces that are accessible, climate resilient and minimise the risk of disease transmission

In addition to the work to improve indoor air quality, we have developed Health and Adult Services climate action plans, and the North Yorkshire Council draft climate strategy, which include information on climate and housing. Housing is a key theme in the NYC healthy ageing work.

58

#### Support equitable access to green space

Public Health shaped and influenced the successful bid for the Catterick Garrison Levelling Up Fund, helping to develop a bid that had a broader and longer-term health and wellbeing focus. This included: more green spaces; a community centre for people to connect, creating a place for wellbeing – mental and physical – to support community resilience; inclusive labour markets – highlighted broader demographic profile than MOD e.g. including spaces for small local start-ups; walking and cycling routes; promoted development of the Park and active travel links to NY Healthy Weight Healthy Lives Strategy; increasing health equity from built environment.

#### Inequalities

Continue to keep health inequalities central to public health work, including championing inclusion health for key groups such as vulnerable migrants and Gypsy, Roma, Traveller communities

Humber & North Yorkshire ICB and North Yorkshire Council have worked together to create and appoint to a joint role of Strategic Lead for Health Inequalities and Prevention. Over 2023-25, Public Health will develop, with partners, an Inclusion Health Framework, focusing on understanding and improving the health and wider needs/ outcomes for groups that experience multiple overlapping risk factors for poor health. The team are also carrying out a 'deep dive' Joint Strategic Needs Assessment on health needs for Gypsy, Roma, Traveller and Showpeople communities.

Public health, NHS and wider partners to consider the specific rural and coastal health inequalities affecting North Yorkshire when planning services

In response to rates of cardiovascular disease impacting coastal communities Public Health has obtained funding from Humber & North Yorkshire ICB for a "know your numbers" blood pressure awareness campaign being piloted at the coast.

The REACH (Reducing Exclusion for Adults with Complex Housing Needs) project in Scarborough has secured additional housing within the scheme to increase support capacity, recruited a specific domestic abuse worker to offer dedicated help for both perpetrators and victims of domestic abuse, and made strong links with the national Housing First England team. The project team have presented at national conference on the project.

Rural and coastal areas will also benefit from Health Inequalities funding for a number of projects to support the priorities of good start in life, smoking, and cardiovascular disease with an emphasis on communities with high levels of deprivation. North Yorkshire will also benefit from investment across the Humber & North Yorkshire ICB area to develop the Centre for Excellence in Tobacco Control. Further work is being planned to focus on <u>Core20PLUS5</u>, with the establishment of a joint NHS/NYC post dedicated to tackling health inequalities and population health.

#### Work with partners to develop inclusive and sustainable approaches to the economy as part of 'building back fairer'

When developing the new North Yorkshire Council Plans we are using the "PHE Inclusive Sustainable Economies Framework" 2020 as an approach to adopt to reduce health inequalities and create resilient Inclusive and sustainable economies (<u>Inclusive and</u> <u>sustainable economies: leaving no one behind</u> (<u>executive summary</u>) - GOV.UK (www.gov.uk).

## **Community Support**

#### Continue to develop Community Support Organisations as key community partners

During 2022-23, we continued to invest in the Community Support Organisation (CSO) model, with investment of £902k in 27 VCSE organisations. The focus has been on supporting people to regain independence, to build relationships and collaborative working in their places and to build local networks. Two co-design engagement events have been undertaken to evolve the CSO model to that of Community Anchors acting as system partners to support prevention, community resilience and social regeneration. CSOs secured Stay Healthy & Connected grants to deliver prevention services, and grants from NHS to support frailty training for volunteers.

During 2023-24, we will be re-positioning the Community Support function to that of Community Anchors, and implementing a new investment opportunity for 30 placebased system partners to work alongside the Council to develop collaborative local partnerships that help to build local resilience, preventative services and social regeneration. Continue to promote North Yorkshire Local Assistance Fund (NYLAF) and other assistance funds to support individuals facing key challenges such as COVID-19 isolation and the cost of living crisis

The service has performed well in 2022-23 and has been able to provide support to people when they needed it the most. We have enhanced our offer based on our understanding of community need: a new household support fund (HSF) exceptions scheme was implemented during January and February 2023 for people who are not eligible for the Household Support Fund; the Sainsbury's restricted shopping card which can only be spent on food and certain toiletry items is now being used on NYLAF; a new 'flooring scheme' is being finalised and looking to add additional supermarkets to our offering in the next 12 months. We are also exploring other opportunities to expand our range e.g. charity shop card. We have supported Homes for Ukraine, with around 50 awards going to host families to support or individuals that have fled Ukraine directly. We have also reviewed and strengthened our audit and safeguarding processes.

In 2022-23, £1.4m was invested in the Scheme, an increase on previous years; 11,947 application forms approved over the financial year directly supporting those deemed most vulnerable across the County; 20,032 individual awards approved including essential furniture, white goods, food

1 Build Back Fairer: The COVID-19 Marmot Review – The Health Foundation

and energy vouchers for those fleeing domestic abuse, those with complex mental health needs, those homeless, families under exceptional pressure etc; a further 903 food parcels specifically delivered across the Scarborough town area. An extension to the Household Support Fund was announced in the Spring Budget so the food and energy award levels are staying at the increased limit of four awards in a rolling twelvemonth period until the end of March 2024.

The FEAST programme (also known as the Holiday Activity and Food Programme (HAF)) for North Yorkshire has continued to provide a range of activities for children who qualify for free school meals during the Easter, Summer and Christmas holidays. Children and young people who are not on benefits-related Free School Meals who face disadvantage can also be made

> eligible by exception by their school. This might include, for example, young carers, refugees and asylum seekers and those with SEND. The summer 2023 programme saw 350 schools issuing vouchers, with North Yorkshire Together issuing hundreds more. 6730 vouchers were redeemed by parents/

carers, and 77 providers offered 27,394 places for free activities and food, with 79% being booked.

Lots of work has been done during 2022-23 to strengthen the 'food' aspect of the programme. This has involved providing training, resources and support for FEAST providers, making changes to both the application and monitoring process to strengthen the food offer from FEAST activity providers, and undertaking a survey with providers to gather their ideas and input.

#### Health, care and community services to maintain the recognised benefits of both face to face and digital aspects of service delivery and support

NYC Health and Adult Services are developing online self- assessment tools for both Care Act assessments and Financial assessments, to complement the face to face offer from assessors and provide a choice of channels to people contacting Adult Social Care. Previously, North Yorkshire residents were only able to book a face to face appointment or a 'virtual' telephone or Microsoft Teams assessment. The introduction of online assessments opens up new channels for people who prefer to do things online, while maintaining non-online options for people who prefer face to face discussions. The online Care Act assessments has been designed to mirror the existing conversation record as closely as possible, capturing the voice of the person and giving them control of their assessment. Similarly, the online financial assessment questions do

not differ significantly from those which would be asked by an assessor in person or over the phone. Both assessment offers have been developed in consultation with customers, with User Experience (UX) testing run prior to launching both tools so that improvements based on customer feedback can be implemented.

NYC Health and Adult Services have been working with our commissioned Technology Enabled Care (TEC) providers to explore opportunities to support more people to live independently longer with a wider range of more complex and sophisticated technology enabled care products and services. During 2022 we introduced the 'ownfone' and provided all of our main hospitals with these products, to help to facilitate quicker hospital discharges where the person required TEC to return home safely.

Throughout 2022-2023, we have invested in several pilot projects to facilitate the use of Brain in Hand, Canary system and Technicare in North Yorkshire, as well as exploring the concept of data driven proactive and preventative TEC solutions that can potentially:

- Help people to wait well
- Reduce NYC risks associated with waiting times for both assessment and provision
- Provide evidence-based analytics to support assessment and reviews
- Identify changes and respond in a timely manner
- Replace or contribute to a 'light touch' home-based support

In May 2023, we opened our Living Independently Training Hub in one of our extra care schemes. The hub acts as a training facility to demonstrate the possibilities of both standard TEC equipment and how Connected Care dashboards can support health and social care practice.

Virtual Wards are being created to support more patients at home using digital tools – 42 new Virtual Ward beds in place through partnerships between acute and community services, and work continues in building clinical expertise, strengthening consultant and GP medical oversight, extending bed numbers and promoting utilisation; Telemedicine service provided by Airedale hub for 62 care homes across North Yorkshire; new Humber & North Yorkshire ICB Digital Inclusion Strategy; all North Yorkshire GP Practices offer Online Consultations and practices are continuing to move older telephony technology to 'Cloud Based Telephony' to help improve access to services; all GP Practice sites either have or have commissioned full fibre (Gigabit capable) connectivity to support with growing use and provision of digitallybased services; Immedicare telemedicine service in place in 79 care homes across North Yorkshire providing urgent care advice.

61

## Communication

Maintain improved relationships with partners through continued good quality communication, including 'acting as one' on key shared messaging

North Yorkshire Council has continued to work well and maintain good relationships with key partners such as the UK Health Security Agency, Office for Health Improvement and Health Disparities, Healthwatch North Yorkshire, community and voluntary sector, Humber and North Yorkshire and West Yorkshire Integrated Care Systems and a range of NHS organisations. Where appropriate, we have 'acted as one' and have used shared key messages on a range of public health issues such as helping people to quit smoking, drug and alcohol use, physical activity, avian flu, COVID-19, sexual health and vaccinations to name but a few.

### Use an appropriate mix of communications channels and formats to target messages to the right audience(s)

The new Behavioural Science Unit sited in Public Health has been taking a person-centred approach to designing comms for target groups, by using behavioural science techniques and frameworks. With these techniques, the team can identify barriers and facilitators to behaviour change and help to inform key messages. For example, the team worked on comms to encourage parents of Early Years settings to get their child vaccinated according to the NHS schedule by encouraging social norms and simplifying steps to catching up on missed vaccinations.

In 2023-24, the Behavioural Science Unit will continue collaborating and supporting NYC colleagues to design behaviourally informed communications for target population groups. Examples (a) include reducing food access inequalities by simplifying the FEAST application to encourage more eligible Holiday Activity Providers to apply for funding and successfully provide free nutritious food to children eligible for free school meals and (b) co-producing comms campaigns for Overdose Awareness Day 2024 to address not carrying naloxone and using opiates alone, two leading causes of opiate overdose deaths.

Within Health and Adult Services, we have been reviewing our comms planning to improve our campaign scheduling and ensure we consider the most effective formats and platforms to target messages to the right audience. We identify opportunities with ICB colleagues to work collaboratively, for example the Let's Get Better campaign and Care Connected work for care providers. We also work with ICB and Voluntary & Community Sector colleagues to look at innovative approaches / methods for targeting messages to audiences. A practical example is the work to improve the language and key actionable messages in the NCMP letter for parents with children who are classified overweight/obese, on where and how to access support e.g. signposting to new family weight management service. This work resulted in fewer complaints about the letter.

In 2023-24, we will work with the Behaviour Science Unit to develop targeted approaches to our campaign to ensure we can identify whether communications have created behaviour change; develop a process to measure the impact of our communications and use the learning to inform improvements / new innovative approaches; work with partners and colleagues, particularly the NHS, to share and collaborate on joint messaging and campaigns; work with those with lived experience to develop and create communications and to understand which channels and platforms work for them.

## Ensure accessibility is a core feature of essential communications

In North Yorkshire Council, we have carried out a review of the public-facing website to ensure all webpages, including Public Health and Adult Social Care content, meet accessibility standards. A communications framework is being developed, and accessibility is a key principle. As a practical example of this, a cohort of colleagues across Health and Adult Services have undertaken in-depth easy read training delivered by Photosymbols and are now developing into a champions network to build the directorate's capacity to produce information in easy read. In 2023-24, we will continue to embed an understanding of and practical tools for accessibility via our communications framework and equalities work, including the re-procurement of our commissioned language services.

62

## Further develop behavioural science work to support health and wider communications

In line with the Behavioural Science Unit's offer which comprises behavioural diagnostics, intervention design and implementation, evaluation planning support, as well as strategy and capacity building, the team continues to support Public Health staff to develop effective communications. This has included a training session on 'How to develop behaviourally informed communications' and sharing evidencebased practical tools to design and develop behaviourally informed communications.

Additionally, the BSU is developing a tiered behavioural science training package for staff (expected rollout in early 2024). In 2023-24, the unit is inputting into the commissioning process to ensure that services are optimised, and behavioural science principles are considered throughout the redesign of a service.

## Acknowledgements

Our grateful thanks and appreciation to all the people, community groups, organisations and colleagues who so generously contributed their time, experiences and expertise to this report.

- Harrogate and District Foundation Trust breastfeeding peer support groups
- York & District Maternity Voice Partnership
- Harrogate Maternity Voice Partnership Feedback
- Humber & North Yorkshire maternity voices group
- North Yorkshire Libraries
- North Yorkshire Sport
- Roecliffe Primary School
- Coppice Valley Primary School
- North Yorkshire Council Apprentices
- North Yorkshire Youth Commission
- North Yorkshire Adult Learning and adult learners
- North Yorkshire Flying High youth voice group
- Learner Council Group
- North Yorkshire Council Youth Voice and Participation Team
- North Yorkshire's Youth Councils
- SELFA Children's Charity

63

· All the parents, children and young people who contributed their views, ideas and creativity

Я<sup>З</sup>у,...., С.,

• And any other contributors who we have inadvertently missed from this list.

## References

- 1 HM Government, The Best Start For Life; The Early Years healthy development review Report, 2021 <u>https://assets.</u> <u>publishing.service.gov.uk/government/</u> <u>uploads/system/uploads/attachment\_data/</u> <u>file/973112/The best start for life a vision</u> <u>for the 1 001 critical days.pdf</u>
- 2 Yellow and Pink Stats and Images; <u>Building</u> <u>Babies' Brains - Parent-Infant Foundation</u> (parentinfantfoundation.org.uk)
- 3 HM Government, The Best Start For Life; The Early Years healthy development review Report, 2021 <u>https://assets.</u> <u>publishing.service.gov.uk/government/</u> <u>uploads/system/uploads/attachment\_data/</u> <u>file/973112/The\_best\_start\_for\_life\_a\_vision</u> <u>for\_the\_1\_001\_critical\_days.pdf</u>
- 4 Antenatal Care Guidance <u>https://www.nice.org.</u> <u>uk/guidance/ng201</u> (NICE, 2021)
- 5 <u>Pertussis immunisation in pregnancy: vaccine</u> coverage (England) - GOV.UK (www.gov.uk)
- 6 <u>Seasonal influenza vaccine uptake in</u> <u>GP patients: monthly data, 2022 to</u> <u>2023 - GOV.UK (www.gov.uk)</u>
- 7 NHS Maternity Statistics, England 2021-22 https://digital.nhs.uk/data-and-information/ publications/statistical/nhs-maternitystatistics/2021-22 (NHS Digital, 2022)

- 8 Health of women before and during pregnancy: health behaviours, risk factors and inequalities <u>https://assets.publishing.</u> <u>service.gov.uk/government/uploads/system/</u> <u>uploads/attachment\_data/file/844210/</u> <u>Health\_of\_women\_before\_and\_during\_</u> <u>pregnancy\_2019.pdf</u> (PHE, 2019)
- 9 <u>Smoking, Pregnancy and Fertility -</u> <u>ASH (ASH, 2021)</u>
- 10 Smoking graph source <a href="https://fingertips.phe">https://fingertips.phe</a>. org.uk/profile/tobacco-control/data#page/3/ gid/1938132885/pat/402/par/E10000023/ ati/401/iid/93085/age/1/sex/2/cat/-1/ctp/-1/ yrr/1/cid/4/tbm/1/page-options/car-do-0
- 11 GP Contract documentation 2020/21 <u>NHS England » GP Contract</u> <u>documentation 2020/21</u>
- 12 Humber & North Yorkshire Maternity Voice group, GP Maternal postnatal Check Survey Report, 2021
- 13 Age by population <u>Age Office for</u> <u>National Statistics (ons.gov.uk)</u>

- 14 <u>Maternal and Child Nutrition 2 Public health</u> <u>need and practice | Maternal and child</u> <u>nutrition | Guidance | NICE (NICE, 2014)</u>
- 15 OHID Breastfeeding Stats <u>Child and Maternal</u> <u>Health - Data - OHID (phe.org.uk)</u>

- 16 <u>Seasonal influenza vaccine uptake in</u> <u>children of school age: monthly data,</u> 2022 to 2023 – GOV.UK (www.gov.uk)
- 17 <u>Child and Maternal Health –</u> <u>Data – OHID (phe.org.uk)</u>
- 18 <u>Local Maternity System Ask a Midwife</u> (humberandnorthyorkshirematernity.org.uk)
- 19 <u>https://www.england.nhs.uk/wp-</u> content/uploads/2023/03/B1915-threeyear-delivery-plan-for-maternity-andneonatal-services-march-2023.pdf
- 20 Incentive schemes ASH
- 21 Living Well Smoke Free Service
- 22 <u>Healthy-Start-Full-Report.</u> pdf (feedingliverpool.org)
- 23 <u>Healthcare professionals Get help to</u> <u>buy food and milk (Healthy Start)</u>
- 24 <u>https://assets.publishing.service.gov.</u> <u>uk/government/uploads/system/</u> <u>uploads/attachment\_data/file/538344/</u> <u>Commissioning\_infant\_feeding\_services\_a\_</u> <u>toolkit\_for\_local\_authorities\_Part\_2\_.pdf</u>
- 25 <u>Building Babies' Brains Parent-Infant</u> <u>Foundation (parentinfantfoundation.org.uk)</u>
- 26 <u>Parental mental health problems</u> <u>| NSPCC Learning</u>

- 27 Institute of Health Visiting. State of Health Visiting, UK survey report. A vital safety net under pressure. 2023 Available from: <u>https://bit.ly/413ZEwf</u>
- 28 TEWV NHS Trust
- 29 Perinatal Mental Health in Rural North Yorkshire Research Study (2017), University of Newcastle upon Tyne
- 30 Box 4 engagement Ref: Feedback from VCSE perinatal mental health engagement session in Nov2022.
- 31 DadPad app link: <u>DadPad | DadPad Neonatal |</u> <u>Neonatal Guide for New Dads (thedadpad.co.uk)</u>
- 32 <u>https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/1/gid/1000042/pat/6/par/E12000003/ati/302/are/E10000023/yrr/3/cid/4/tbm/1</u>
- 33 <u>Children in low income families: local area</u> statistics 2014 to 2022 - GOV.UK (www.gov.uk)
- 34 Early Years Education Data Source: Department for Education 2022
- 35 North Yorkshire Council, Children & Young People Service, 2023

- 36 <u>Health Protection Data OHID (phe.</u> org.uk)
- 37 Public health profiles OHID (phe.org.uk)
- 38 North Yorkshire Analysis. Data supplied by NHS Humber and North Yorkshire Integrated Care Board (ICB) NB Excludes Craven Data

- 39 North Yorkshire Council, Healthy Schools-Early Years Award Data, 2023
- 40 <u>Building Babies' Brains Parent-Infant</u> <u>Foundation (parentinfantfoundation.org.uk)</u>
- 41 Early Intervention Foundation <u>Why</u> reducing parental conflict matters for the <u>NHS | Early Intervention Foundation (eif.</u> <u>org.uk)</u> Why reducing parental conflict matters for the NHS EIF Briefing 2018
- 42 North Yorkshire Council, Stronger Relationships Strategy, 2023
- 43 <u>Age and type of central heating in household</u> <u>– Office for National Statistics (ons.gov.uk)</u>
- 44 Education stats (EHE, attainment, persistent absence, SEN) – Education and Attainment Data, CYPS (Children & Young People's Services), North Yorkshire Council
- 45 North Yorkshire Oral Health Profile of 5-yearold children, Public Health England (2020)
- 46 NHS Humber and North Yorkshire ICB Healthier Together (2023) Sleep. Available at <u>Sleep (hnyhealthiertogether.nhs.uk)</u>
- 47 Growing up in North Yorkshire survey 2022, North Yorkshire Council <u>NYork2022summary</u> (healthyschoolsnorthyorks.org)
- 48 North Yorkshire Council, NCMP report, 2023
- 49 North Yorkshire Council; and Healthy Schools Pupils Voice events, NYC, 2023.
- 50 North Yorkshire Council, Active Travel data 2022.
- 51 North Yorkshire Council, Healthy Schools Programme data, 2023.

- 52 North Yorkshire Council, Back2Basics evaluation data, 2023.
- 53 Cattan S, Farquharson C, Krutikova S, McKendrick A and Sevilla A. How did parents' experiences in the labour market shape children's social and emotional development during the pandemic? Institute for Fiscal Studies. Published online on 1st August 2023.
- 54 iThrive model of social, emotional and mental health – THRIVE Framework for system change | i-THRIVE (implementingthrive.org)
- 55 <u>https://www.gov.uk/government/publications/</u> <u>early-adolescence-applying-all-our-health/</u> <u>early-adolescence-applying-all-our-health</u>
- 56 https://www.northyorkshire-pfcc.gov. uk/content/uploads/2023/03/North-Yorkshire-Youth-Commission-Finalreport-to-Commissioner-Zoe-2022-2023NYCC-Report-2023-final.pdf
- 57 <u>https://www.northyorks.gov.uk/</u> <u>healthy-living/mental-health/children-</u> <u>and-young-peoples-mental-health</u>
- 58 Age and economic activity status Office for National Statistics (ons.gov.uk)
- 59 <u>https://www.northyorks.gov.uk/</u> <u>children-and-families/social-care-</u> <u>children/core-offer-care-leavers</u>
- 60 <u>https://www.gov.uk/government/</u> publications/covid-19-mental-healthand-wellbeing-surveillance-report/7children-and-young-people

- 61 <u>Sexual and Reproductive Health</u> <u>Profiles – Data – OHID (phe.org.uk)</u>
- 62 https://www.northyorks.gov.uk/ children-and-families/send-local-offer/ send-information-parents-and-carers/ preparing-adulthood-parents-guide/ preparation-adulthood-educationand-employment
- 63 <u>https://www.foundationuk.org/wp-</u> <u>content/uploads/2022/03/Foundation</u> YPP-End-or-Year-Report-2021.pdf
- 64 <u>https://www.northyorks.gov.uk/jobs-and-</u> <u>careers/our-apprenticeships-graduate-</u> <u>scheme-and-work-experience</u>
- 65 <u>https://edemocracy.northyorks.gov.uk/</u> <u>documents/s7774/Rural%20Commission%20</u> <u>Report%20FINAL-compressed.pdf</u>
- 66 <u>https://www.northyorks.gov.uk/children-</u> and-families/send-local-offer/sendinformation-professionals/preparingadulthood-pfa-professional-guidance-send
- 67 <u>https://www.northyorks.gov.uk/</u> <u>children-and-families/ny-voice-be-</u> <u>change/flying-high-and-send-voice</u>
- 68 https://drinkdrughub.co.uk

66

- 69 https://www.yorsexualhealth.org.uk
- 70 <u>https://www.york.ac.uk/media/business-</u> society/research/56745\_TeenParents\_ BriefingPaper v2%20(2).pdf
- 71 <u>https://www.northyorks.gov.uk/</u> <u>healthy-living/mental-health/children-</u> <u>and-young-peoples-mental-health</u>