

Chapter 10

The Health of Infants, Children and Young People

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10 The health of infants, children and young people

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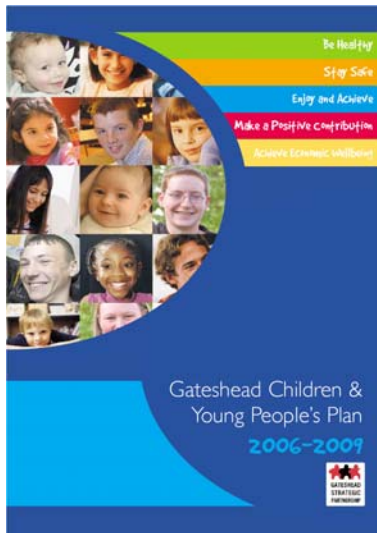
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10 The health of infants, children and young people

Introduction



This chapter of the Compendium of Health Statistics monitors child health in Gateshead. It should be read alongside the “Be Healthy” and “Stay Safe” sections of the *Gateshead Children and Young People’s Plan*¹. This sets out the vision of a partnership of local public and voluntary agencies to ensure that children are physically, mentally and emotionally healthy and follow healthy lifestyles. Where indicators in this chapter are linked to actions in the report, these are highlighted in blue text at the foot of each section.

The health of the Gateshead population is poorer than average health status across England as a whole. Life expectancy is lower and premature mortality rates due to chronic conditions such as heart disease are higher. In order to reduce health inequalities between areas such as Gateshead with poor overall health and the nation as a whole, the government has set two targets in its report “Tackling Health Inequalities”². The first is to reduce the gap in life expectancy between areas with the poorest health and England as a whole. The other is to reduce the gap in infant mortality rates between the population in routine or manual employment and the population as a whole.

The infant mortality rate for Gateshead is compared with the rate for the North East and England in the first section of this chapter. Thankfully only a small number of infants die before their first birthday. There are around ten such deaths in Gateshead each year. However, this small number of deaths means that the infant mortality rate for Gateshead fluctuates widely from year to year due to random variations in the number of deaths. This is reflected in the wide confidence interval associated with the Gateshead rate illustrated in section 10.1. It is positive that the local infant mortality rate has been lower than or equal to the England rate over the last three years, but it has never been significantly lower than the national rate. The annual number of infant deaths in Gateshead by occupational group would be even smaller and the corresponding rate more variable, so it would be pointless to measure the difference between the rate for manual occupation groups and the population as a whole. This must be monitored at national level where a larger number of infant deaths will make the statistics meaningful.

For Gateshead, any improvement in infant and child health and reduction in health inequalities must be measured using lower level indicators of health and well being

¹ Gateshead Children & Young People’s Partnership, 2006, Gateshead Children and Young People’s Plan, Gateshead Council, Gateshead

² Department of Health, 2003, Tackling Health Inequalities: a programme for action, Dept. of Health, London

such as the percentage of mothers who smoke during pregnancy, the proportion of mothers breastfeeding or the percentage of children immunised against infectious disease. Because the number of observations for these measures is much higher (there are around 2,000 births each year in Gateshead compared with only 10 infant deaths), they can be monitored every three months, so it is possible to act more quickly when it becomes apparent that health status is falling, or not improving as quickly as expected. For a complete year of data, a rate can also be calculated for each of the 22 Gateshead electoral wards. For the first time this chapter includes data on these lower level indicators including some maps describing variations at ward level. It is hoped that health professionals working in hospitals and local communities can use this data to target work aimed at improving health towards population groups where child health is poorer, and so contribute to reducing health inequalities.

Reviewing the statistics in this chapter, there are many positives, but equally there are areas for concern. Breastfeeding rates at one hour, 48 hours and 6 weeks after birth are all following a rising trend (10.8). The proportion of women initiating breastfeeding by discharge from hospital had reached 50% for the first time at the end of 2005. However rates are particularly low among young women (10.9) and women from disadvantaged communities (10.10). Meanwhile, immunisation rates fall well below the level needed to minimise the risk of spreading infectious disease (10.15, 10.16). This point was emphasised in Gateshead Director of Public Health's 2005 Annual Report³. Similarly the level of smoking during pregnancy in Gateshead is falling, but only slowly and there is a large gap between local and national rates (10.12). It is hoped that national legislation banning smoking in public places, which comes into force across England on July 1st 2007, will help to encourage pregnant women to give up smoking. Gateshead now has a Smoking Cessation specialist specifically to help women expecting a baby who want to quit but are finding it difficult. Smoking during pregnancy increases the risk of babies having low birthweight, and in 2005 the low birthweight rate in Gateshead increased to its highest level within the past 10 years.

Among young people, consumption of alcohol is a particular concern, with the proportion of children of school age self-reporting that they consume alcohol being much higher than the average for England as a whole (10.18). An annual health promotion campaign in Gateshead highlights the dangers of excessive drinking. As part of this initiative, work is undertaken with pupils from Gateshead schools to develop campaign materials relevant to young people. In this way positive health messages can be incorporated into the regular curriculum.

For details of local health promotion campaigns targeted towards young people please contact the Gateshead Health Promotion Resource Team on 0191 433 5684. The Gateshead and South Tyneside Stop Smoking Service is able to provide help and support for pregnant women who want to give up smoking. The service can be contacted on 0191 283 1145.

(cont.)


³ Gateshead Primary Care Trust, Director of Public Health Annual Report 2005, 2006, Gateshead PCT, Gateshead

For further information on any of issues addressed in this chapter, please contact: Public Health Analyst, Gateshead PCT, Team View, 5th Avenue Business Park, Gateshead, NE11 0NB. E-mail publichealthanalyst@ghpct.nhs.uk. Tel: 0191 497 1515

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This chapter of the Gateshead Compendium of Health Related Statistics contains data from a range of partner agencies. Sources of data are detailed at the foot of each individual item. Thanks are extended to the following organisations for providing and allowing use of their information:

British Association for the Study of Community Dentistry
Centre for Social Care Inspection
Gateshead Health NHS Foundation Trust
National Centre for Health Outcomes and Development
Office for National Statistics
School Health Education Unit, University of Exeter
Teenage Pregnancy Unit



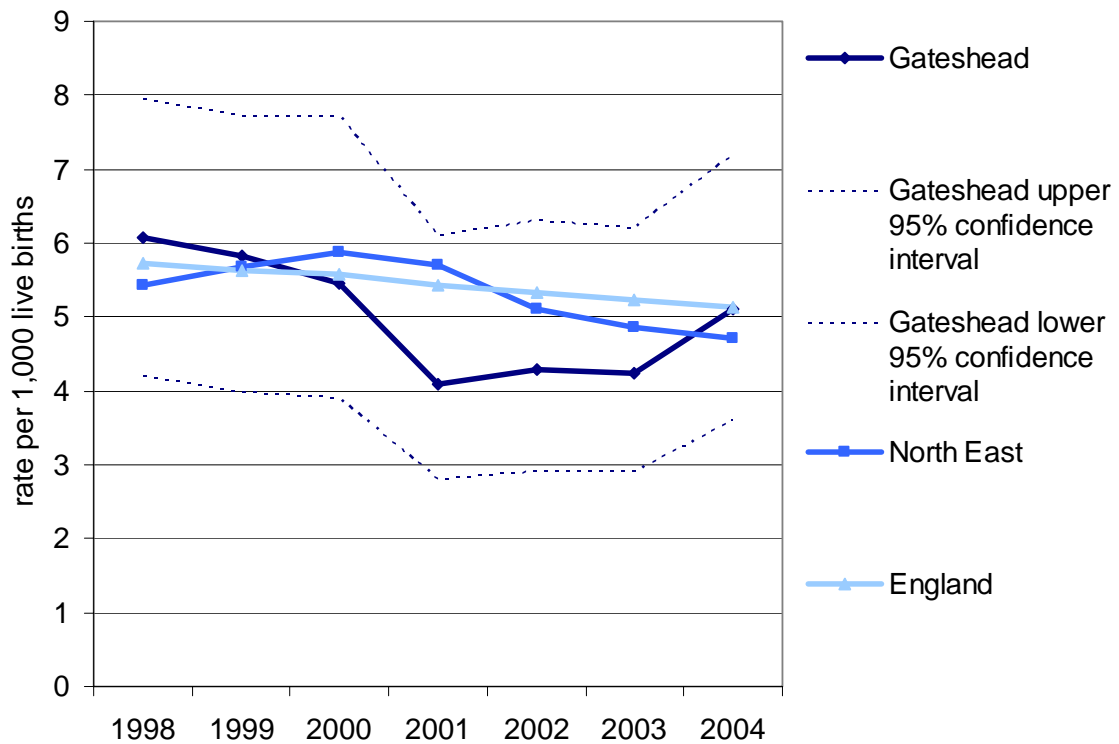
Infant Health

10.1 Infant mortality rate



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

The infant mortality rate is calculated as the number of deaths under 1 year of age per 1,000 live births. There are around 10 infant deaths each year in Gateshead. As the number is small, a three year pooled rate is used which smooths out year on year fluctuations. Although the rate has increased in the most recent period (2003-2005) it is not significantly different from the North East and England rates.



Year	Gateshead rate	Gateshead infant deaths	North East rate	England rate
1997-1999	6.1	40	5.4	5.7
1998-2000	5.8	37	5.7	5.6
1999-2001	5.5	34	5.9	5.6
2000-2002	4.1	25	5.7	5.4
2001-2003	4.3	26	5.1	5.3
2002-2004	4.2	26	4.9	5.2
2003-2005	5.1	32	4.7	5.1

Data source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

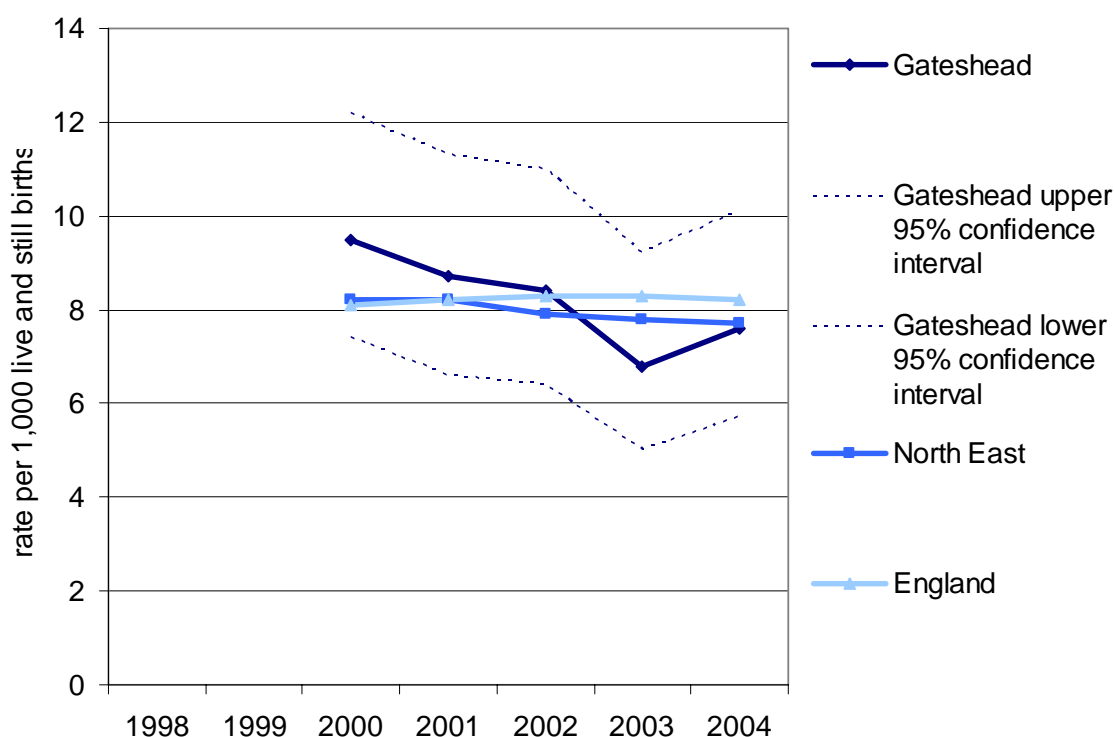
Local neighbours at a glance	PCT	Rate
Mortality rate per 1,000 live births, 2003-2005	Sunderland TPCT	5.2
	Newcastle PCT	5.1
	Gateshead PCT	5.1
	South Tyneside PCT	3.7
	North Tyneside PCT	3.5
	Northumberland CT	2.8

10.2 Perinatal mortality rate



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

The perinatal mortality rate is calculated as the number of still births plus the number of deaths among babies under 7 days of age per 1,000 live and still births. There are between 10 and 20 perinatal deaths each year in Gateshead. As the number is small, a three year pooled rate is used which smooths out year on year fluctuations in the mortality rate. The Gateshead rate is not significantly different to the rate for the North East or England and is following a downward trend.



Year	Gateshead		North East rate	England rate
	Gateshead rate	infant deaths		
1999-2001	9.5	59	8.2	8.1
2000-2002	8.7	53	8.2	8.2
2001-2003	8.4	51	7.9	8.3
2002-2004	6.8	42	7.8	8.3
2003-2005	7.6	48	7.7	8.2

Data source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Local neighbours at a glance

Still births and deaths under 7 days per 1,000 live and still births, 2003-2005

PCT

Newcastle PCT

Rate

8.7

Sunderland TPCT

8.7

Gateshead PCT

7.6

North Tyneside PCT

7.3

Northumberland CT

6.0

South Tyneside PCT

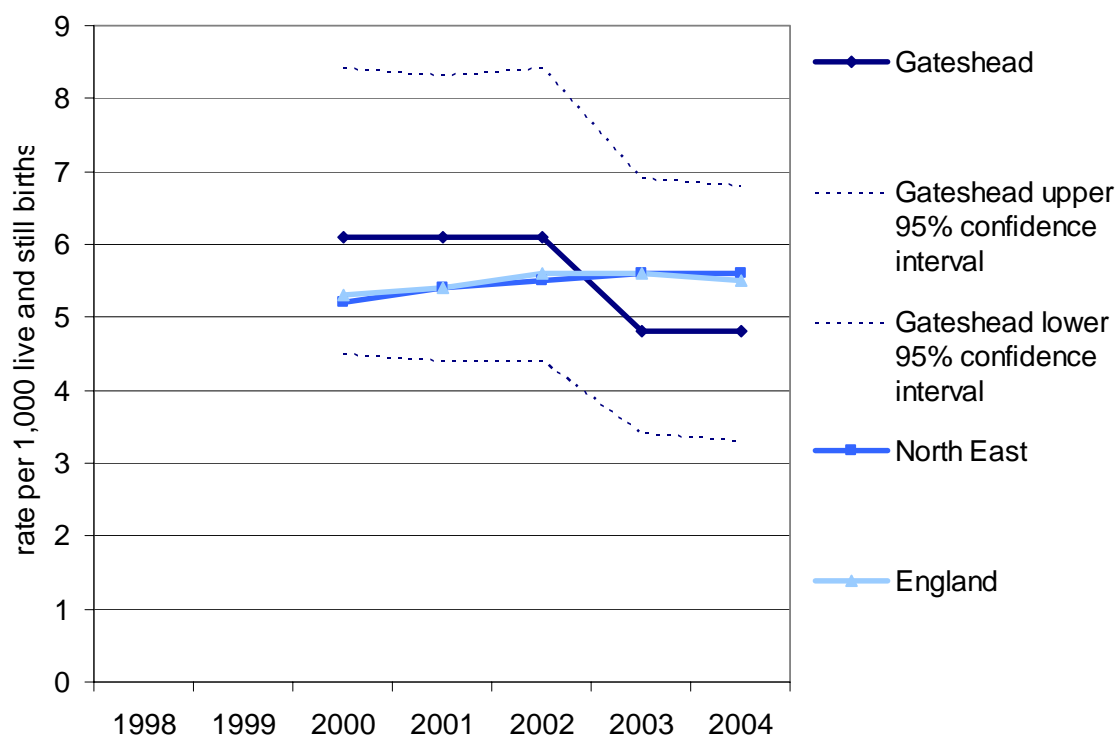
5.9

10.3 Stillbirth rate



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

The stillbirth rate is calculated as the number of stillbirths per 1,000 live and still births. There are around 10 stillbirths each year in Gateshead. As the number is small, a three year pooled rate is used which smooths out year on year fluctuations in the rate. The Gateshead rate is not significantly different to the rate for the North East or England and is following a downward trend.



Year	Gateshead rate	Gateshead infant deaths	North East rate	England rate
1999-2001	6.1	38	5.2	5.3
2000-2002	6.1	37	5.4	5.4
2001-2003	6.1	37	5.5	5.6
2002-2004	4.8	30	5.6	5.6
2003-2005	4.8	30	5.6	5.5

Data source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Local neighbours at a glance

Still births per 1,000 live and still births, 2003-2005

PCT

Newcastle PCT
 Sunderland TPCT
 North Tyneside PCT
Gateshead PCT
 Northumberland CT
 South Tyneside PCT

Rate

7.0
 6.1
 5.9
4.8
 4.6
 3.5

10.4 Trends in infant and perinatal mortality

Gateshead Children &
Young People's Plan
2006-2009

Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

		Stillbirths		Perinatal Deaths (Stillbirths + deaths under 1 week)		Infant deaths (under 1 year)	
		No.	Rate	No.	Rate	No.	Rate
Gateshead	1993	13	5.3	33	13.3	34	13.8
	1994	20	8.2	31	12.7	17	7.0
	1995	21	8.8	29	12.2	13	5.5
	1996	14	6.1	23	9.9	13	5.7
	1997	10	4.3	19	8.1	14	6.0
	1998	10	4.6	14	6.4	10	4.6
	1999	12	5.7	20	9.4	16	7.6
	2000	11	5.3	20	9.6	11	5.3
	2001	15	7.5	19	9.5	7	3.5
	2002	11	5.4	14	6.9	7	3.5
	2003	11	5.4	18	8.9	12	5.9
	2004	8	3.7	10	4.7	7	3.3
2005	11	5.2	20	9.4	13	6.1	
Northern	1993	229	5.9	357	9.2	259	6.7
	1994	217	6.2	318	9.0	220	6.3
	1995	230	6.7	350	10.2	228	6.7
	1996	202	5.7	319	8.9	216	6.1
North East	1997	162	5.5	236	8.0	170	5.8
	1998	170	5.9	238	8.2	145	5.0
	1999	144	5.2	231	8.3	152	5.5
	2000	140	5.3	225	8.4	172	6.5
	2001	136	5.2	206	7.9	145	5.6
	2002	153	5.8	216	8.2	131	5.0
	2003	150	5.5	209	7.7	126	4.7
	2004	157	5.6	214	7.7	136	4.9
	2005	162	5.7	222	7.8	126	4.5
England, Wales & Elsewhere *	1993	3855	5.7	6033	8.9	4242	6.3
	1994	3813	5.7	5945	8.9	4120	6.2
	1995	3600	5.5	5669	8.7	3968	6.1
	1996	3539	5.4	5589	8.6	3989	6.1
England	1997	3250	5.3	5106	8.4	3591	5.9
	1998	3219	5.3	4962	8.2	3371	5.6
	1999	3128	5.3	4861	8.2	3379	5.7
	2000	3029	5.3	4699	8.2	3203	5.6
	2001	2991	5.3	4512	8.0	3063	5.4
	2002	3201	5.6	4758	8.4	3002	5.3
	2003	3405	5.7	5055	8.5	3145	5.3
	2004	3338	5.5	4973	8.1	3069	5.1
	2005	3298	5.4	4913	8.0	3078	5.0

Source: 1993 to 1996, VS1 (ONS); 1997 onwards Clinical Health Outcomes Knowledge Base at www.nchod.nhs.uk

* Elsewhere includes births and deaths to persons normally resident outside England & Wales

Stillbirth rate: Stillbirths per 1,000 total live and still births

Perinatal Mortality rate: Stillbirths and deaths under 1 week per 1,000 live and still births

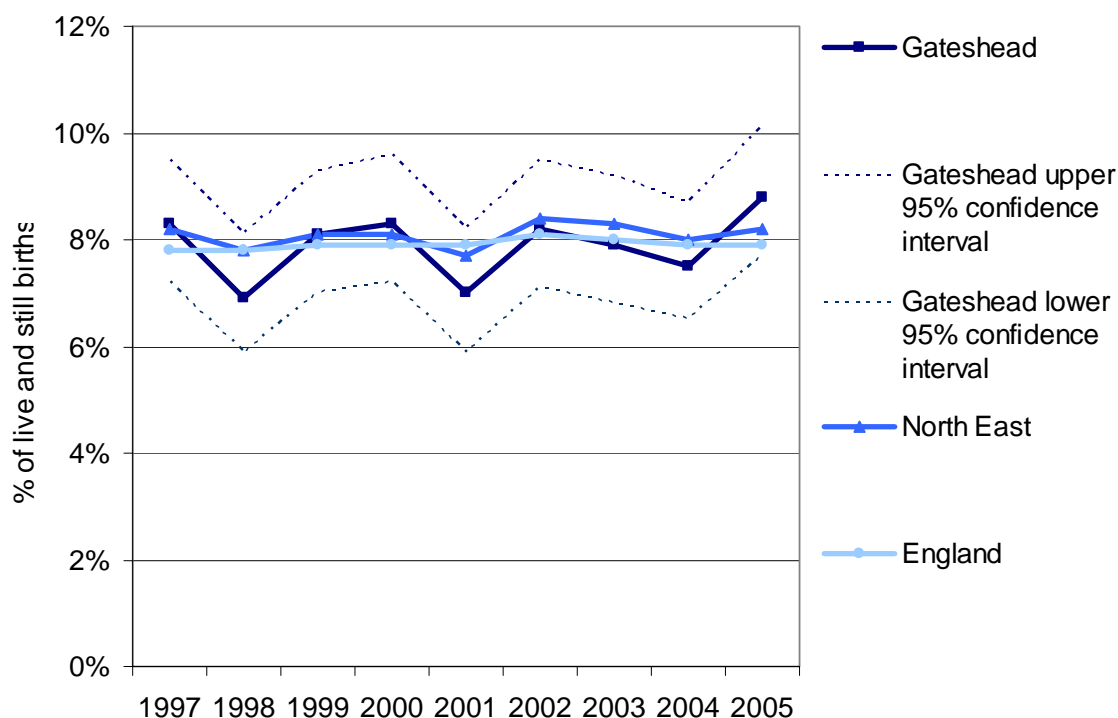
Infant Mortality rate: Deaths under 1 year per 1,000 live births

10.5 Low birthweight rate (<2500g)



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

The low birthweight rate is calculated as the number of births under 2500g per expressed as a percentage of all live and still births where a birthweight is recorded. In 2005 the rate has increased in Gateshead to the highest level since 1997 and Gateshead now has the highest rate in the Northumberland, Tyne & Wear area. However, the rate is not significantly different to the rate for the North East or England. Also the trend over time in Gateshead is static, as it is for both the North East and England.



Gateshead live and still births				
Year	Gateshead rate	<2500g	North East rate	England rate
1997	8.3%		8.2%	7.8%
1998	6.9%		7.8%	7.8%
1999	8.1%		8.1%	7.9%
2000	8.3%		8.1%	7.9%
2001	7.0%	141	7.7%	7.9%
2002	8.2%	166	8.4%	8.1%
2003	7.9%	161	8.3%	8.0%
2004	7.5%	161	8.0%	7.9%
2005	8.8%	187	8.2%	7.9%

Data source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Local neighbours at a glance

Low birthweight births as a percentage of all live births where birthweight is recorded, 2005

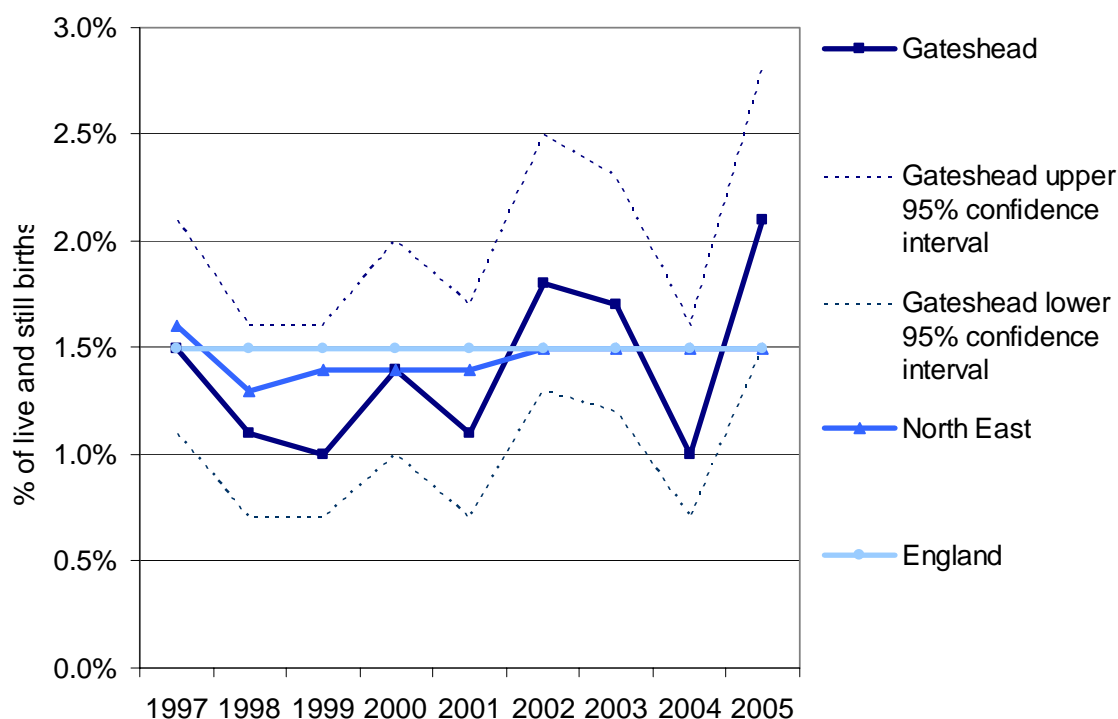
PCT	Rate
Gateshead PCT	8.8%
Sunderland TPCT	8.4%
North Tyneside PCT	7.9%
South Tyneside PCT	7.8%
Newcastle PCT	7.7%
Northumberland CT	7.1%

10.6 Low birthweight rate (<1500g)



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

The low birthweight rate (<1500g) is calculated as the number of births under 1500g expressed as a percentage of all live and still births where a birthweight is recorded. In 2005 the rate has increased in Gateshead to the highest level since 1997 and Gateshead now has the highest rate in the Northumberland, Tyne & Wear area. However, the rate is not significantly different to the rate for the North East or England. However, there is a rising trend over time in Gateshead.



Year	Gateshead rate	Gateshead live and still births <1500g	North East rate	England rate
1997	1.5%		1.6%	1.5%
1998	1.1%		1.3%	1.5%
1999	1.0%		1.4%	1.5%
2000	1.4%		1.4%	1.5%
2001	1.1%	23	1.4%	1.5%
2002	1.8%	36	1.5%	1.5%
2003	1.7%	34	1.5%	1.5%
2004	1.0%	22	1.5%	1.5%
2005	2.1%	44	1.5%	1.5%

Data source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Local neighbours at a glance

Low birthweight births (<1500g) as a percentage of all live births where birthweight is recorded, 2005

PCT

Gateshead PCT

North Tyneside PCT

Newcastle PCT

South Tyneside PCT

Sunderland TPCT

Northumberland CT

Rate

2.1%

1.7%

1.5%

1.5%

1.4%

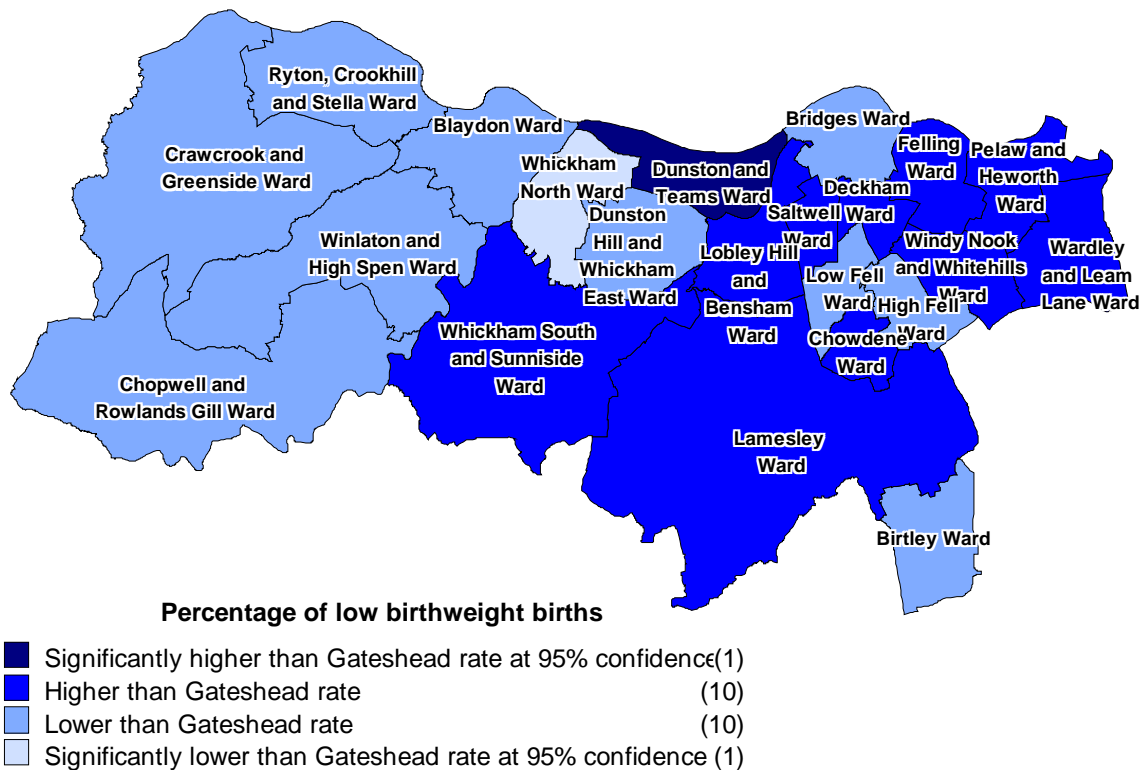
1.3%

10.7 Low birthweight rate (<2500g) by electoral ward



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start

The low birthweight rate (<2500g) is calculated as the number of births under 2500g expressed as a percentage of all live and still births where a birthweight is recorded. As the number of low birthweight births each year within each ward is small, the rate has been calculated by pooling figures over five years, between 2001 and 2005, which reduces the confidence intervals on the ward rates.



Source of data: Annual births extract, Office for National Statistics

10.7 Low birthweight births (<2500g) by electoral ward (cont.)

Figures are percentage of live and still births <2500g pooled over 5 years, 2001 to 2005, by Gateshead electoral ward.

Ward	Live and still births	Low birthweight births (<2500g)	Percentage of low birthweight births	H/L*
Dunston & Teams	533	62	11.6%	H
Deckham	629	61	9.7%	
Windy Nook & Whitehills	488	45	9.2%	
Lobley Hill & Bensham	572	51	8.9%	
Saltwell	840	69	8.2%	
Wardley & Leam Lane	449	38	8.5%	
Felling	552	45	8.2%	
Lamesley	454	38	8.4%	
Pelaw & Heworth	393	33	8.4%	
Blaydon	551	43	7.8%	
Bridges	460	36	7.8%	
High Fell	594	44	7.4%	
Whickham South & Sunnyside	348	28	8.0%	
Chowdene	333	27	8.1%	
Crawcrook & Greenside	441	33	7.5%	
Winlaton & High Spen	324	23	7.1%	
Birtley	369	25	6.8%	
Chopwell & Rowlands Gill	413	27	6.5%	
Dunston Hill & Whickham East	379	25	6.6%	
Ryton, Crookhill & Stella	390	25	6.4%	
Low Fell	454	24	5.3%	L
Whickham North	355	14	3.9%	L
Gateshead	10,321	816	7.9%	

Source: births data from Annual Births Extract for Gateshead, Office for National Statistics

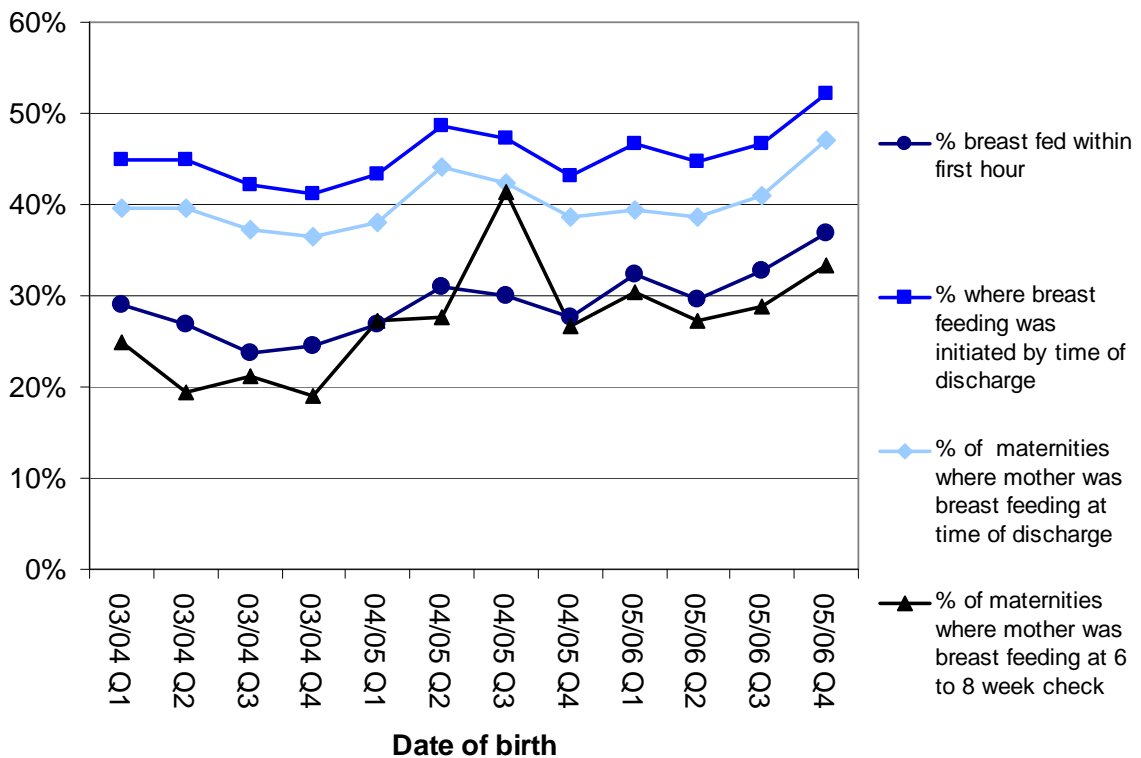
*H/L = significantly higher (H) or lower (L) than the Gateshead rate at 95% confidence

10.8 Incidence of breastfeeding



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start - continue to promote breastfeeding as the preferred and healthiest infant feeding method, with the aim of increasing breastfeeding rates

The proportion of mothers who initiate breastfeeding is recorded by the maternity unit at the Queen Elizabeth Hospital in Gateshead, part of the Gateshead Health NHS Foundation Trust. It is also recorded by GPs at the eight week health check. Breastfeeding is beneficial to the health of both mother and baby, and it is hoped that the proportion of mothers who breastfeed will increase over time.



10.8 Incidence of breastfeeding (cont.)

	2003/04				2004/05			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Total number of maternities	386	381	410	441	425	440	440	428
Breastfeeding initiated within first hour	112	102	97	108	114	136	132	118
% breastfed within first hour	29.0%	26.8%	23.7%	24.5%	26.8%	30.9%	30.0%	27.6%
Breastfeeding initiated by discharge	173	171	173	182	184	214	208	185
% breastfeeding initiated by discharge	44.8%	44.9%	42.2%	41.3%	43.3%	48.6%	47.3%	43.2%
Breastfeeding at discharge	153	151	153	161	162	194	186	165
% breastfeeding at discharge	39.6%	39.6%	37.3%	36.5%	38.1%	44.1%	42.3%	38.6%
Breastfeeding at eight week check	89	73	81	84	121	119	174	97
% breastfeeding at eight week check	24.9%	19.5%	21.3%	19.0%	27.2%	27.7%	41.4%	26.6%

	2005/06			
	Q1	Q2	Q3	Q4
Total number of maternities	381	441	409	414
Breastfeeding initiated within first hour	123	131	134	153
% breastfed within first hour	32.3%	29.7%	32.8%	37.0%
Breastfeeding initiated by discharge	178	197	191	216
% breastfeeding initiated by discharge	46.7%	44.7%	46.7%	52.2%
Breastfeeding at discharge	150	170	168	195
% breastfeeding at discharge	39.4%	38.5%	41.1%	47.1%
Breastfeeding at eight week check	121	121	124	137
% breastfeeding at eight week check	30.5%	27.3%	28.8%	33.3%

Data sources: 1 hour and discharge - Gateshead Health NHS Foundation Trust, 8 week health check - Gateshead PCT. Data for 1 hour and discharge are based on maternities within Gateshead Health NHS Foundation Trust. Data for the 8 week health check is based on maternities where the mother is registered with a Gateshead GP.

Local neighbours at a glance

Percentage of mothers who have initiated breastfeeding by time of discharge, Apr 2005 to March 2006

National benchmark**

PCT

Gateshead PCT*

South Tyneside PCT

Newcastle PCT

North Tyneside PCT

Sunderland TPCT

Northumberland CT

England 2005**

Percent

47.5%

46.6%

42.7%

n/a

n/a

n/a

78%

n/a – not available – Department of Health will not publish data for Trusts where feeding method is unknown for more than 5% of maternities

* Published data for Gateshead PCT indicates that breastfeeding was initiated by time of discharge for only 38.9% of maternities. Subsequent analysis showed this figure to be incorrect.

** Information Centre, "Infant Feeding Survey 2005: Early Results", Information Centre, Leeds

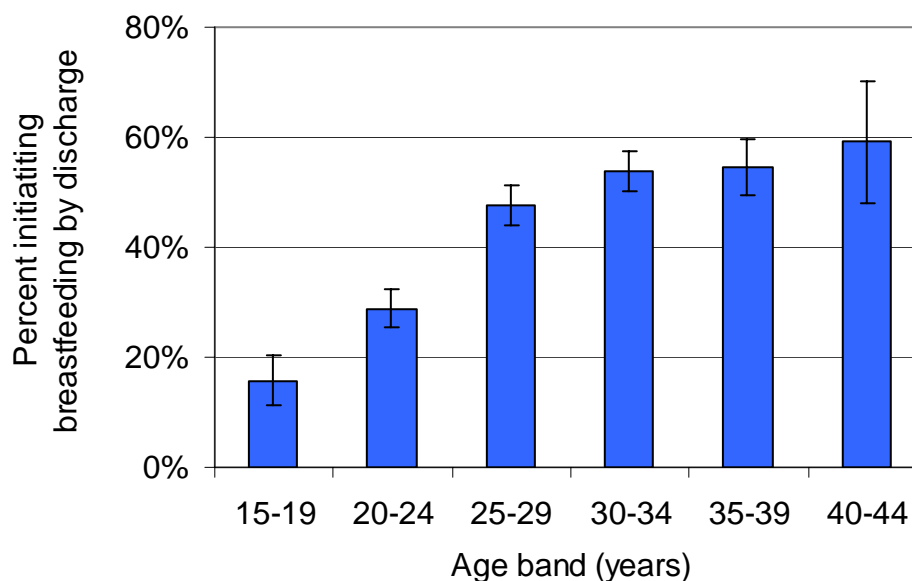
Data source : Department of Health, "[Local Delivery Plan Healthcare Commission Indicator – Mothers Initiating Breastfeeding](#)"

10.9 Incidence of breastfeeding by maternal age



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start - continue to promote breastfeeding as the preferred and healthiest infant feeding method, with the aim of increasing breastfeeding rates

**Incidence of breastfeeding in Gateshead
2003/04-2005/06 by maternal age with 95%
confidence limits**



Age Band (years)	15-19	20-24	25-29	30-34	35-39	40-44	All ages
No. of maternities	247	654	696	692	379	77	2745
Breastfeeding initiated by discharge	39	189	331	372	207	46	1184
Percent initiated breastfeeding	15.8%	28.9%	47.6%	53.8%	54.6%	59.7%	43.1%
Significantly higher (H) or lower (L) than Gateshead rate	L	L		H	H	H	

Source of data: Gateshead Health NHS Foundation Trust

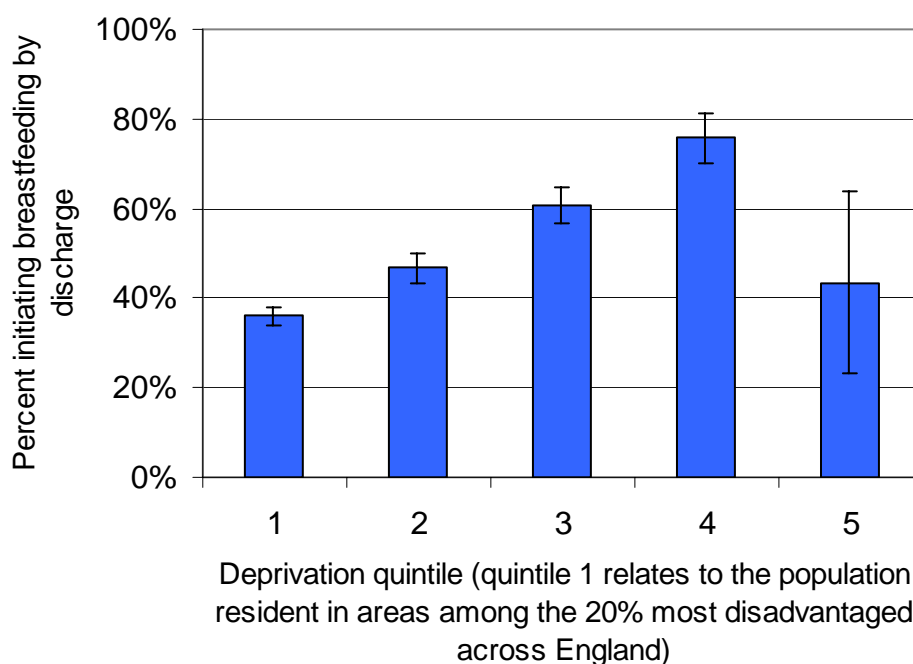
10.10 Incidence of breastfeeding by socio-economic group



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start - continue to promote breastfeeding as the preferred and healthiest infant feeding method, with the aim of increasing breastfeeding rates

Socio-economic disadvantage is measured by the Index of Multiple Deprivation. This index was last calculated in 2004 by the Department for Communities and Local Government for geographical areas across England with approximately 1,500 residents. The analysis below splits the population of mothers giving birth in Gateshead, depending on which 20% or quintile of areas they are resident in. Quintile 1 relates to the population living in the 20% most disadvantaged areas across England and quintile 5 relates to those in living in the 20% most advantaged areas. There are striking differences in the proportion of mothers who breastfeed between populations resident within the different quintiles.

**Incidence of breastfeeding in Gateshead
2003/04-2005/06 by Deprivation Quintile with 95%
confidence limits**



Deprivation quintile	1	2	3	4	5
No. of maternities	2245	782	517	231	23
Breastfeeding initiated by discharge	808	365	314	175	10
Percent initiating breastfeeding	36.0%	46.7%	60.7%	75.8%	43.5%

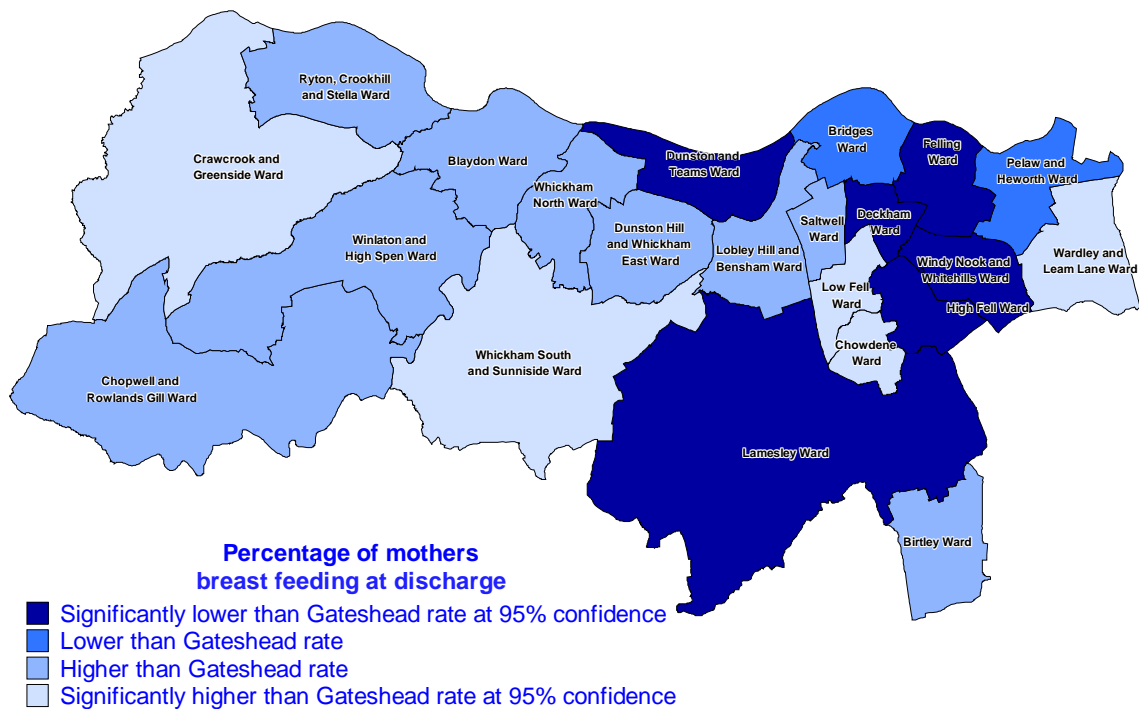
Source of data: Gateshead Health NHS Foundation Trust

10.11 Incidence of breastfeeding by electoral ward



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start - continue to promote breastfeeding as the preferred and healthiest infant feeding method, with the aim of increasing breastfeeding rates

The rates below are calculated from data relating to women giving birth in the Maternity Unit at Queen Elizabeth Hospital between April 2003 and March 2006. Pooling figures over three years increases the number of observations at ward level which gives more reliable statistics.



Source of data: Gateshead Health NHS Foundation Trust

10.11 Incidence of breastfeeding by electoral ward (cont.)

Ward	Maternities	no. initiating breastfeeding	% initiating breastfeeding	H/L*
High Fell	296	82	27.7%	L
Felling	277	88	31.8%	L
Deckham	312	100	32.1%	L
Lamesley	205	74	36.1%	L
Dunston & Teams	201	73	36.3%	
Windy Nook & Whitehills	254	93	36.6%	L
Pelaw & Heworth	200	79	39.5%	
Bridges	187	82	43.9%	
Lobley Hill & Bensham	236	110	46.6%	
Whickham North	102	48	47.1%	
Birtley	164	78	47.6%	
Ryton, Crookhill & Stella	36	18	50.0%	
Saltwell	251	126	50.2%	
Dunston Hill & Whickham East	119	60	50.4%	
Chopwell & Rowlands Gill	115	59	51.3%	
Winlaton & High Spen	76	39	51.3%	
Blaydon	104	57	54.8%	
Chowdene	150	83	55.3%	H
Wardley & Leam Lane	211	118	55.9%	H
Whickham South & Sunniside	96	57	59.4%	H
Low Fell	213	156	73.2%	H
Crawcrook & Greenside	45	33	73.3%	H
Gateshead	3850	1,713	44.5%	

Source: Gateshead Health NHS Foundation Trust

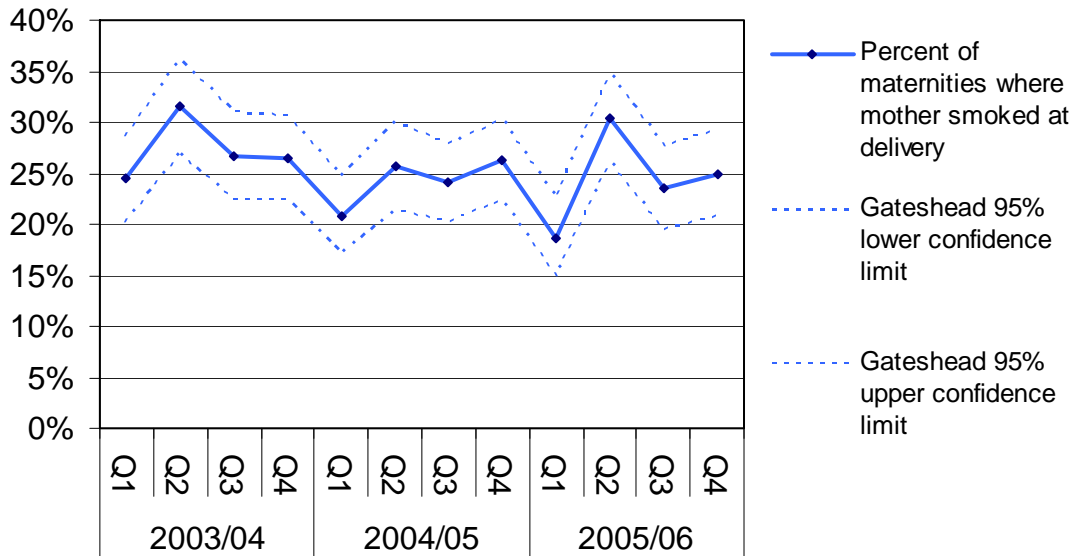
*H/L = significantly higher (H) or lower (L) than the Gateshead rate at 95% confidence

There were a total of 5074 maternities from 2003/04 to 2005/06. Of these, 1224 related to mothers resident outside Gateshead or the postcode was not recognised.

10.12 Proportion of women smoking during pregnancy



Be Healthy Action Plan – Ensure that children are given the best chance for health from the start



	2003/04				2004/05			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Total number of maternities	401	397	420	449	422	386	462	479
Mother smoked during pregnancy	98	125	112	119	88	99	111	126
Percent smoking during pregnancy	24.4%	31.5%	26.7%	26.5%	20.9%	25.6%	24.0%	26.3%

	2005/06			
	Q1	Q2	Q3	Q4
Total number of maternities	397	447	412	420
Mother smoked during pregnancy	74	136	97	105
Percent smoking during pregnancy	18.6%	30.4%	23.5%	25.0%

Source: Gateshead Health NHS Foundation Trust. Data are based on maternities within Gateshead Health NHS Foundation Trust.

Local neighbours at a glance

	PCT	Percent
Percentage of mothers who are known to smoke at time of delivery, Apr 2005 to March 2006	South Tyneside PCT	31.3%
	Gateshead PCT	24.6%
	North Tyneside PCT	22.6%
	Newcastle PCT	22.4%
	Sunderland TPCT	n/a
National benchmark*	Northumberland CT	n/a
	England 2005	17%
	England 2000	19%

n/a – not available – Department of Health will not publish data for Trusts where smoking status is unknown for more than 5% of maternities

* Information Centre, "Infant Feeding Survey 2005: Early Results", Information Centre, Leeds. The NHS have not yet published a national benchmark figure for England due to the high number of PCTs not meeting data quality requirements.

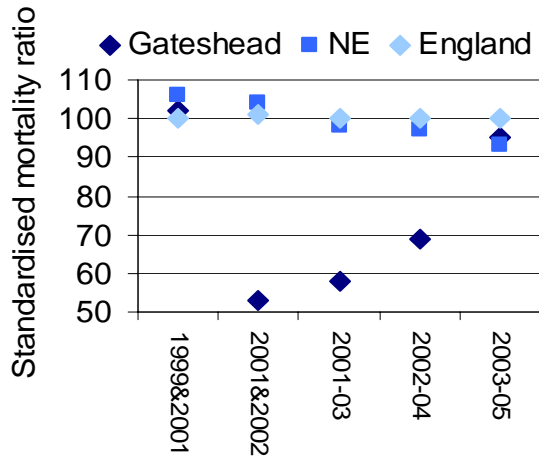
Data source : Department of Health, "[Smoking at time of delivery LDPR Q4 2005/06 NHS Feedback](#)"

Child Health

10.13 Standardised mortality ratio due to all causes among children under 15 years

Indirectly standardised mortality ratio due to all causes (ICD10 A00-Y99) among children under 15 years of age, three year pooled.

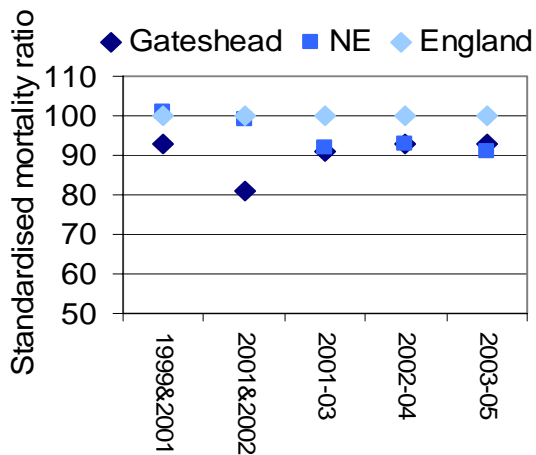
Males



Year	G'head Deaths	G'head	NE	Engl'd
1999&2001	20	102	106	100
2001&2002	10	53	104	101
2001-03	19	58	98	100
2002-04	18	69	97	100
2003-05	24	95	93	100

Source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

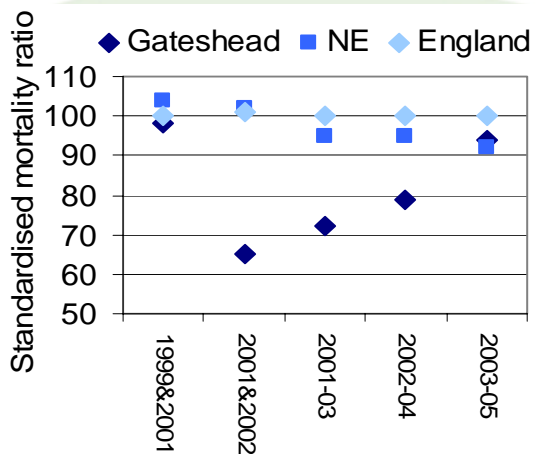
Females



Year	G'head Deaths	G'head	NE	Engl'd
1999&2001	14	93	101	100
2001&2002	11	81	99	100
2001-03	19	91	92	100
2002-04	19	93	93	100
2003-05	19	93	91	100

Source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Persons



Year	G'head Deaths	G'head	NE	Engl'd
1999&2001	34	98	104	100
2001&2002	21	65	102	101
2001-03	35	72	95	100
2002-04	37	79	95	100
2003-05	43	94	92	100

Source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

10.14 Mortality due to land transport accidents by age band



Stay Safe Action Plan – Reduce the number of children and young people involved in road traffic accidents

Road traffic accidents (RTAs) are a significant cause of hospital admissions among children. However, the figures below, for 2005, show that the number of deaths in Gateshead among children due to RTAs is very small. Where the number is less than 5, the figure has been suppressed to avoid disclosure. Although the number is small, these deaths still represent a significant proportion of all deaths, as mortality rates among children are very low. This is demonstrated for England as a whole, where deaths due to land transport accidents are represented as a proportion of all deaths within each age band. RTAs are grouped with other land transport accidents such as those related to railways.

Males

Age band (years)	Gateshead Deaths	NE Deaths	England Deaths	England Deaths All Causes	Percent of All Deaths due to Land Transport Accidents
1-4	*	*	11	275	4%
5-14	*	*	66	412	16%
15-34	*	49	958	4830	20%
35-64	*	25	701	42746	2%
65-74	*	8	110	47491	0%
75+	*	10	210	130428	0%
1+	*	95	2056	226182	1%

Source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Females

Age band (years)	Gateshead Deaths	NE Deaths	England Deaths	England Deaths All Causes	Percent of All Deaths due to Land Transport Accidents
1-4	*	*	7	208	3%
5-14	*	*	22	296	7%
15-34	*	9	192	2188	9%
35-64	*	9	195	27712	1%
65-74	*	5	73	33440	0%
75+	*	10	147	186574	0%
1+	*	34	636	250418	0%

Source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

Persons

Age band (years)	Gateshead Deaths	NE Deaths	England Deaths	England Deaths All Causes	Percent of All Deaths due to Land Transport Accidents
1-4	*	*	18	483	4%
5-14	*	*	88	708	12%
15-34	*	58	1150	7018	16%
35-64	*	34	896	70458	1%
65-74	*	13	183	80931	0%
75+	*	20	357	317002	0%
1+	8	129	2692	476600	1%

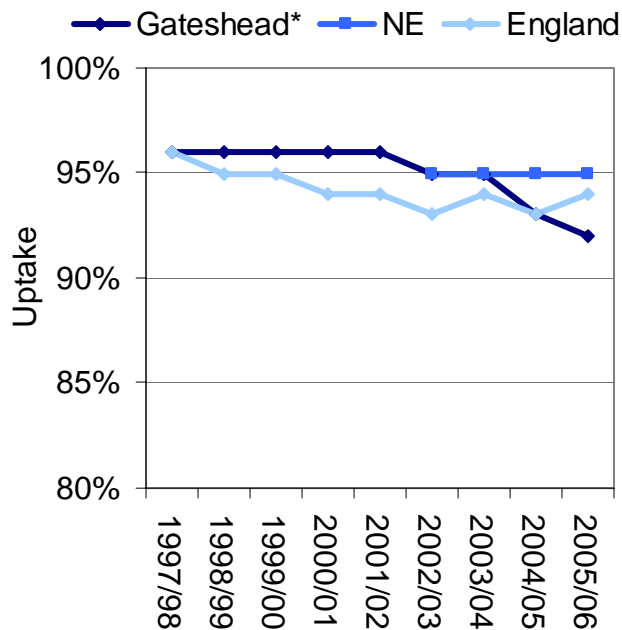
Source: Clinical and Health Outcomes Knowledge Base at www.nchod.nhs.uk

10.15 Uptake of childhood immunisation at 24 months

Gateshead Children & Young People's Plan
2006-2009

Be Healthy Action Plan – Ensure that children are given the best chance for health from the start – promote the uptake of immunisations to maintain high compliance rates

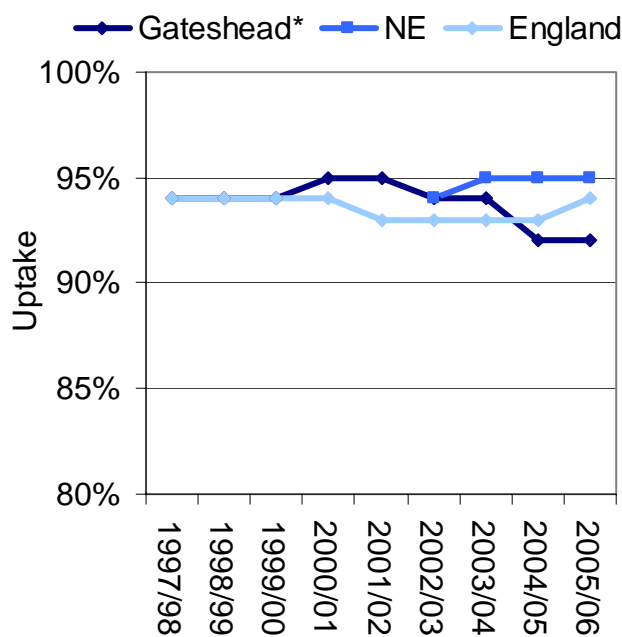
Diphtheria, Tetanus and Polio (DTP)



Year	Gateshead*	NE	England
1997/98	96%		96%
1998/99	96%		95%
1999/00	96%		95%
2000/01	96%		94%
2001/02	96%		94%
2002/03	95%	95%	93%
2003/04	95%	95%	94%
2004/05	93%	95%	93%
2005/06	92%	95%	94%

*Figures up to 2001/02 are for Gateshead and South Tyneside

Pertussis

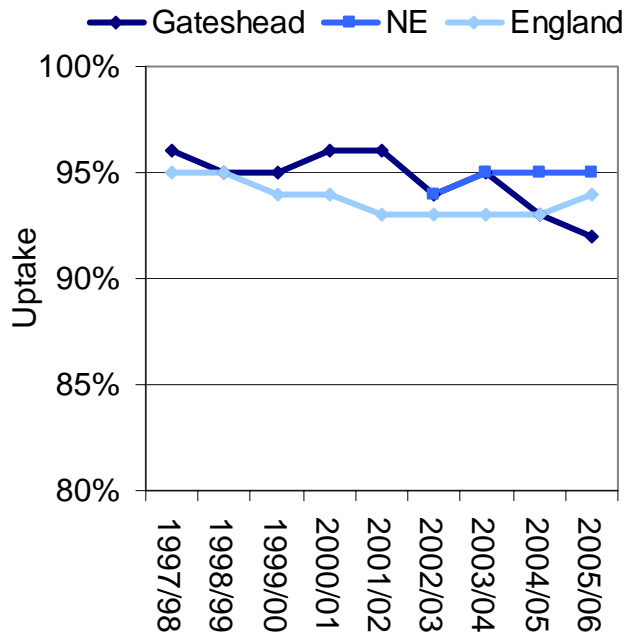


Year	Gateshead*	NE	England
1997/98	94%		94%
1998/99	94%		94%
1999/00	94%		94%
2000/01	95%		94%
2001/02	95%		93%
2002/03	94%	94%	93%
2003/04	94%	95%	93%
2004/05	92%	95%	93%
2005/06	92%	95%	94%

*Figures up to 2001/02 are for Gateshead and South Tyneside

10.15 Uptake of immunisation at 24 months (cont.)

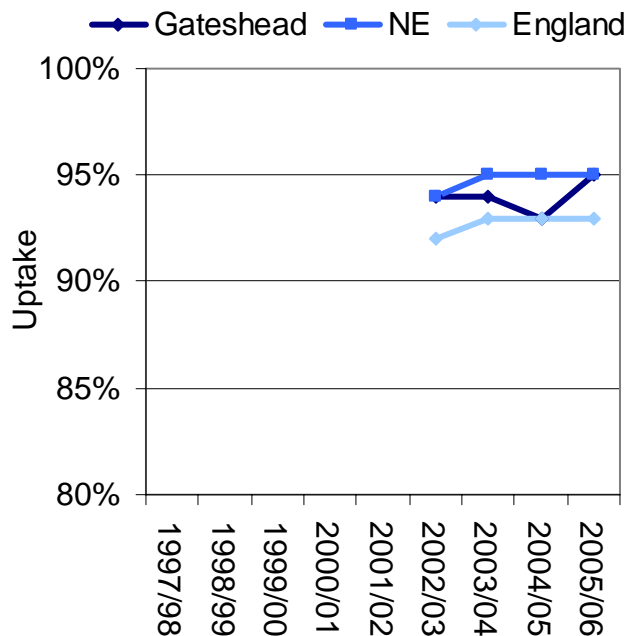
Haemophilus influenzae B (Hib)



Year	Gateshead*	NE	England
1997/98	96%		95%
1998/99	95%		95%
1999/00	95%		94%
2000/01	96%		94%
2001/02	96%		93%
2002/03	94%	94%	93%
2003/04	95%	95%	93%
2004/05	93%	95%	93%
2005/06	92%	95%	94%

*Figures up to 2001/02 are for Gateshead and South Tyneside

Meningitis C (MenC)

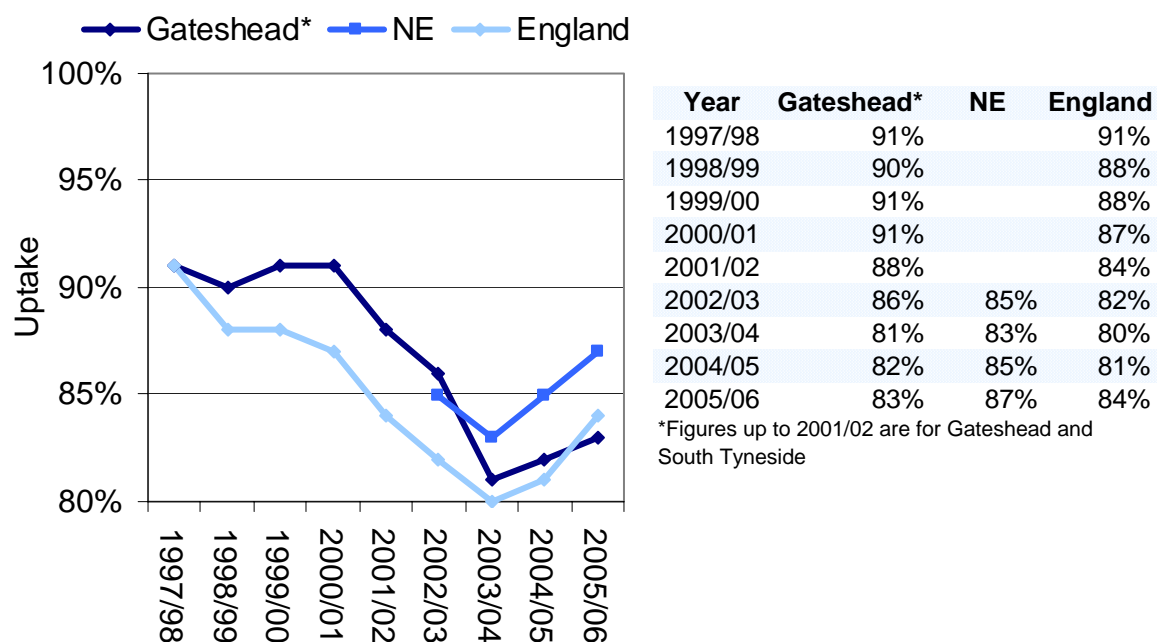


Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00			
2000/01			
2001/02			
2002/03	94%	94%	92%
2003/04	94%	95%	93%
2004/05	93%	95%	93%
2005/06	95%	95%	93%

*Figures up to 2001/02 are for Gateshead and South Tyneside

10.15 Uptake of immunisation at 24 months (cont.)

Mumps, measles and rubella (MMR)



Local neighbours at a glance

Uptake of MMR at 24 months

PCT

Northumberland CT	92%
South Tyneside PCT	89%
North Tyneside PCT	87%
Newcastle PCT	87%
Sunderland TPCT	86%
Gateshead PCT	83%

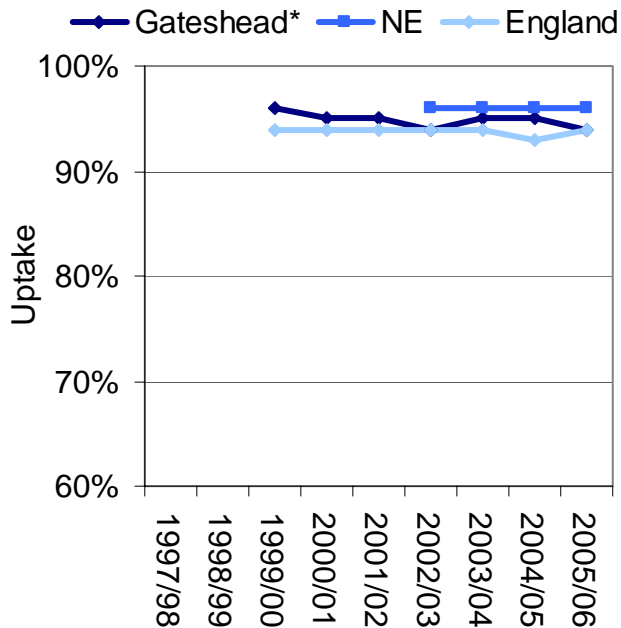
Uptake

10.16 Uptake of childhood immunisation at 5 years

Gateshead Children & Young People's Plan
2006-2009

Be Healthy Action Plan – Ensure that children are given the best chance for health from the start – promote the uptake of immunisations to maintain high compliance rates

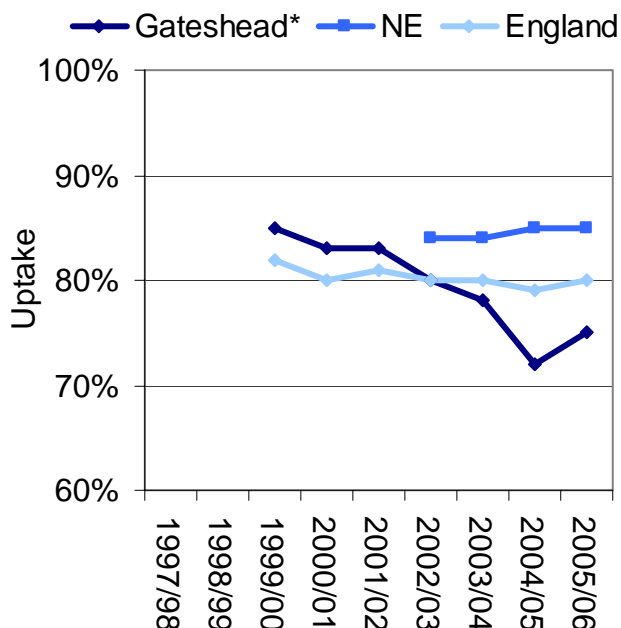
Diphtheria, Tetanus and Polio (DTP) - primary



Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00	96%		94%
2000/01	95%		94%
2001/02	95%		94%
2002/03	94%	96%	94%
2003/04	95%	96%	94%
2004/05	95%	96%	93%
2005/06	94%	96%	94%

*Figures up to 2001/02 are for Gateshead and South Tyneside

Diphtheria, Tetanus and Polio (DTP) – primary and booster

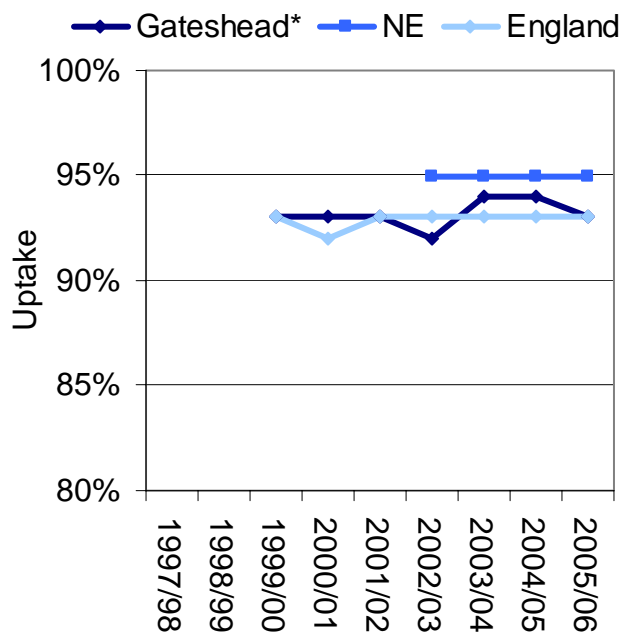


Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00	85%		82%
2000/01	83%		80%
2001/02	83%		81%
2002/03	80%	84%	80%
2003/04	78%	84%	80%
2004/05	72%	85%	79%
2005/06	75%	85%	80%

*Figures up to 2001/02 are for Gateshead and South Tyneside

10.16 Uptake of immunisation at 5 years (cont.)

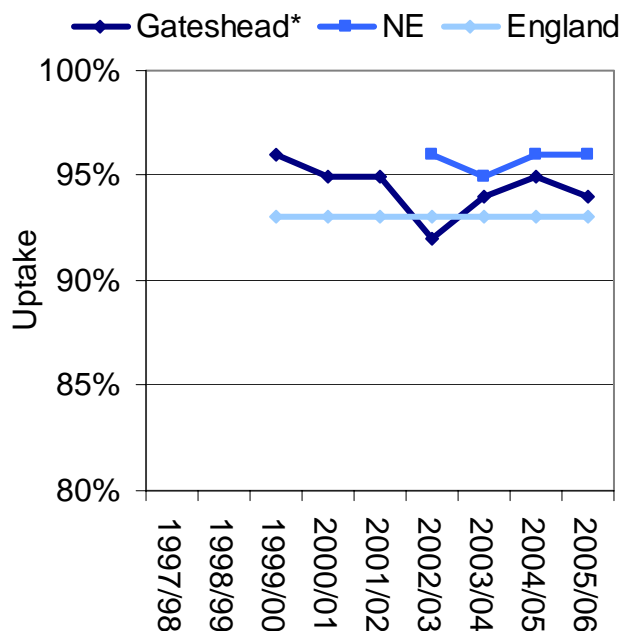
Pertussis – primary



Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00	93%		93%
2000/01	93%		92%
2001/02	93%		93%
2002/03	92%	95%	93%
2003/04	94%	95%	93%
2004/05	94%	95%	93%
2005/06	93%	95%	93%

*Figures up to 2001/02 are for Gateshead and South Tyneside

Haemophilus influenzae B (HiB) – primary

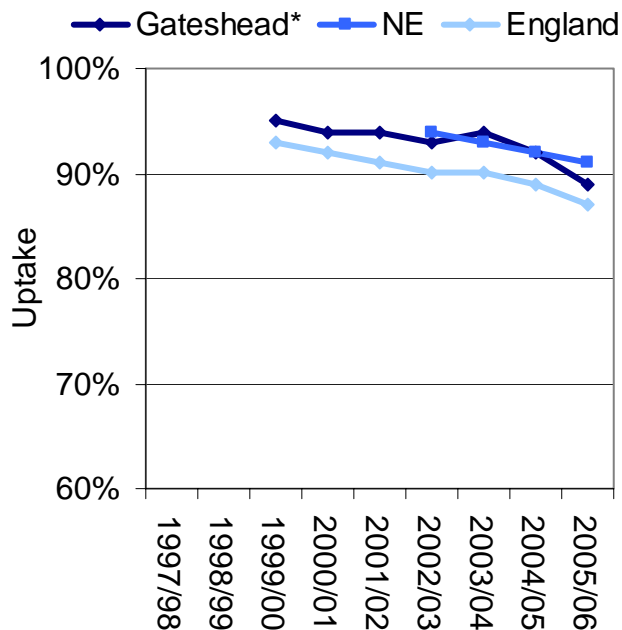


Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00	96%		93%
2000/01	95%		93%
2001/02	95%		93%
2002/03	92%	96%	93%
2003/04	94%	95%	93%
2004/05	95%	96%	93%
2005/06	94%	96%	93%

*Figures up to 2001/02 are for Gateshead and South Tyneside

10.16 Uptake of immunisation at 5 years (cont.)

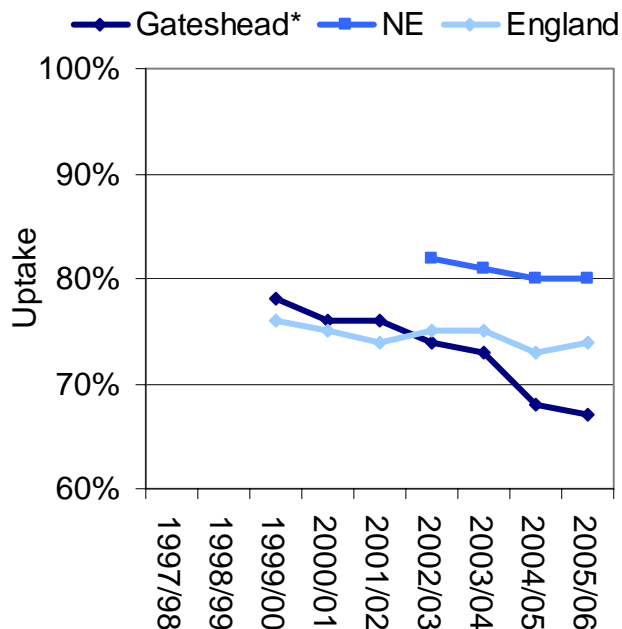
Mumps, measles and rubella (MMR) – first dose



Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00	95%		93%
2000/01	94%		92%
2001/02	94%		91%
2002/03	93%	94%	90%
2003/04	94%	93%	90%
2004/05	92%	92%	89%
2005/06	89%	91%	87%

*Figures up to 2001/02 are for Gateshead and South Tyneside

Mumps, measles and rubella (MMR) – first and second dose



Year	Gateshead*	NE	England
1997/98			
1998/99			
1999/00	78%		76%
2000/01	76%		75%
2001/02	76%		74%
2002/03	74%	82%	75%
2003/04	73%	81%	75%
2004/05	68%	80%	73%
2005/06	67%	80%	74%

*Figures up to 2001/02 are for Gateshead and South Tyneside

Local neighbours at a glance

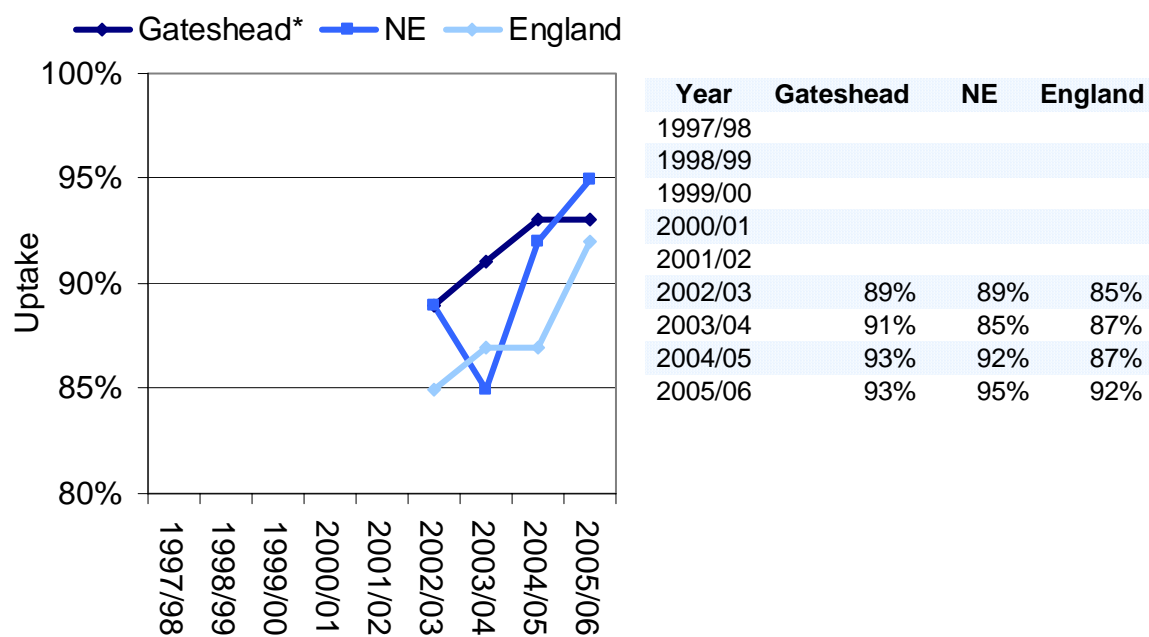
Uptake of MMR (first and second dose) at 5th birthday

PCT

Northumberland CT	86%
South Tyneside PCT	86%
North Tyneside PCT	81%
Sunderland PCT	80%
Newcastle TPCT	79%
Gateshead PCT	67%

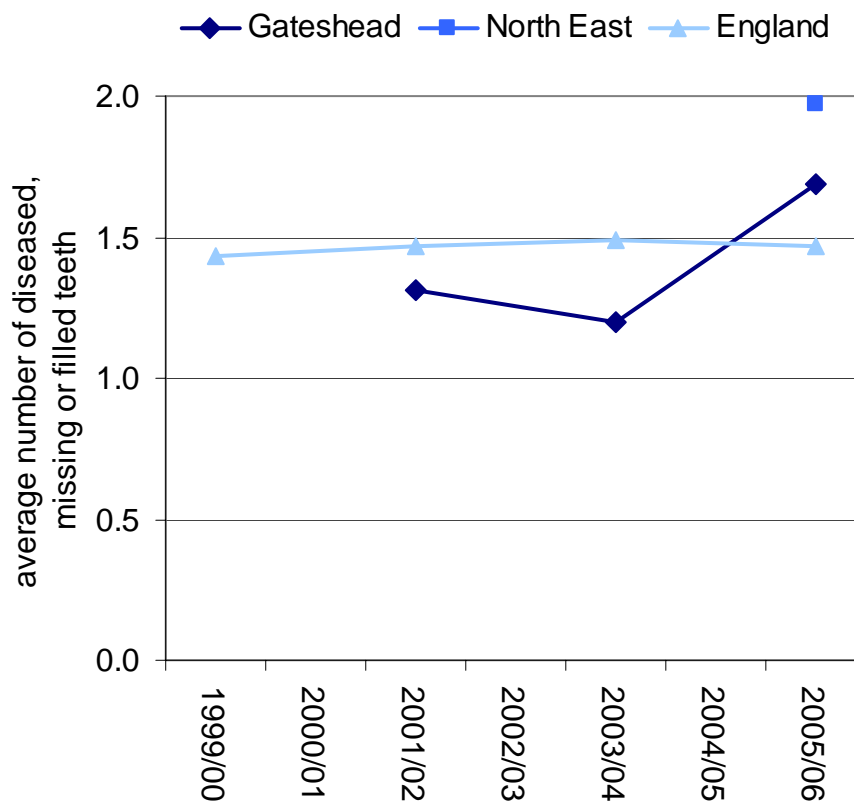
10.16 Uptake of immunisation at 5 years (cont.)

Meningitis C



10.17 Average number of diseased, missing or filled teeth at 5 years of age

The British Association for the Study of Community Dentistry carries out a survey of dental health among 5 year olds across Great Britain every two years. Figures are reported for England, regions and individual PCTs.



Year	Gateshead	North East	England
1999/00	n/a	n/a	1.43
2000/01			
2001/02	1.31	n/a	1.47
2002/03			
2003/04	1.20	n/a	1.49
2004/05			
2005/06	1.69	1.97	1.47

Source: British Association for the Study of Community Dentistry at www.bascd.org
n/a - not available

Local neighbours at a glance

Average number of diseased, missing or filled teeth among five year olds, 2005/06

Source: British Association for the Study of Community Dentistry at www.bascd.org

PCT

PCT	Rate
Sunderland	2.39
Newcastle	2.28
South Tyneside	2.15
Gateshead	1.69
North Tyneside	1.43
Northumberland	1.14

Young Persons' Health

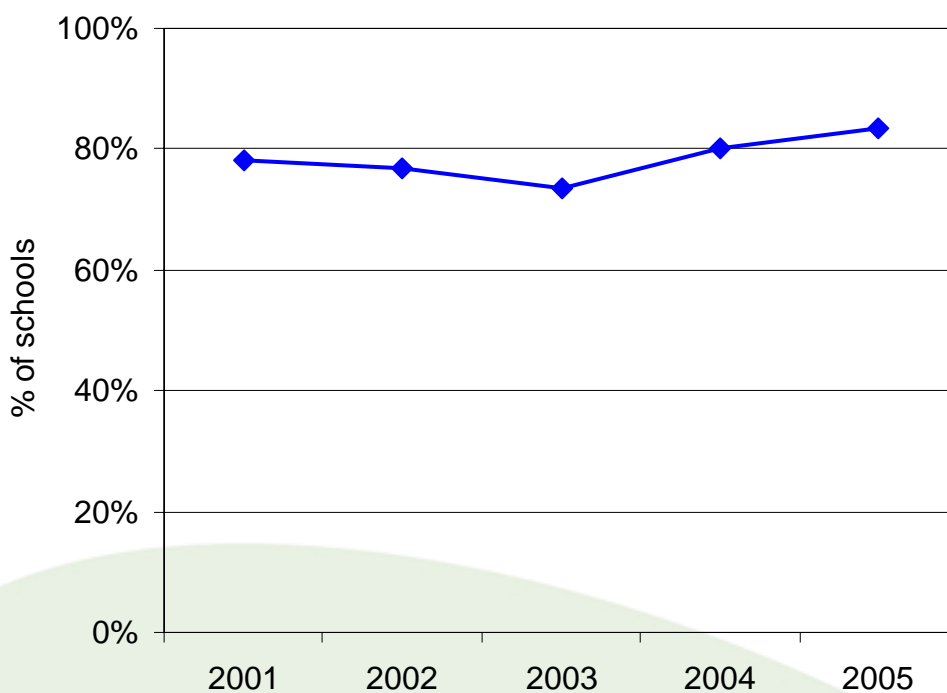
10.18 Proportion of schools achieving the Gateshead Healthy School Award



Be Healthy Action Plan – Support children and young people to lead healthier lifestyles

The Gateshead Healthy School Award was introduced in 1992 to encourage local schools to promote healthy lifestyles through curriculum, policies and their school environment. Issues covered within the scheme include the promotion of physical activity, Smoke Free policy and healthy school meals. There is a requirement for schools to demonstrate that they meet the criteria for the Award each year.

In 1999 the National Healthy School Standard was launched by the Department for Education and Skills and the Department of Health and has been continually amended and updated. Local healthy school programmes have to be accredited to this Standard. From 2005 onwards a revised National Healthy School Standard has been introduced by the Department of Health and this will replace the local Healthy School Award scheme in Gateshead.



Year	Schools Achieving Healthy School Award	Number of eligible schools	Percentage achieving Healthy School Award
2001	71	91	78%
2002	70	91	77%
2003	67	91	74%
2004	73	91	80%
2005	76	91	84%

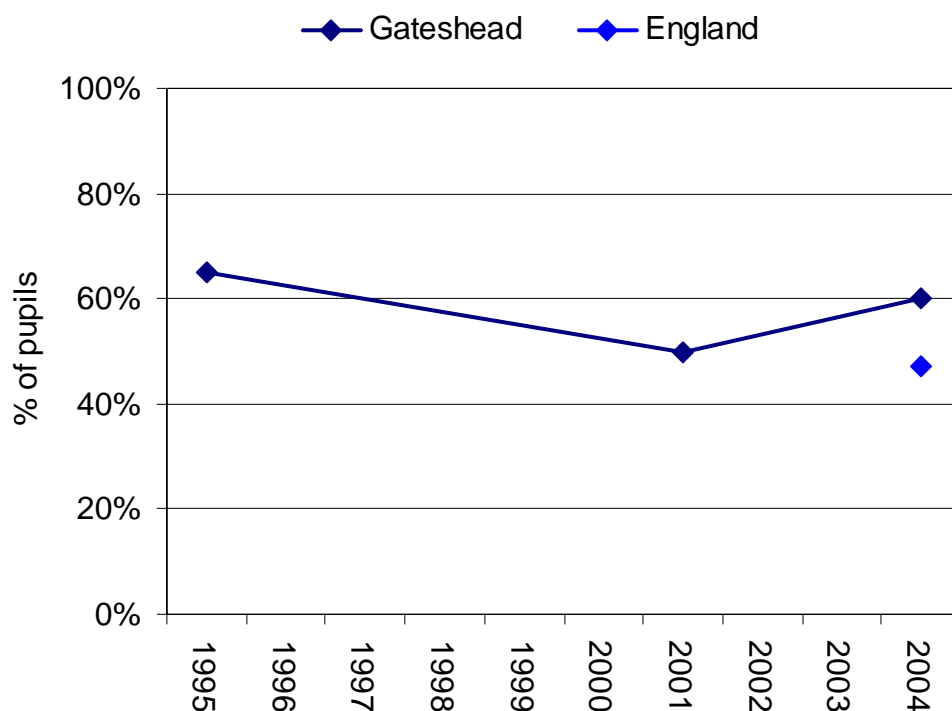
Source: Gateshead Primary Care Trust

10.19 Proportion of Year 10 pupils drinking alcohol on one or more occasions in the past week



Be Healthy Action Plan – Support children and young people to lead healthier lifestyles

A survey of health-related behaviour in a sample of Gateshead secondary schools was carried out by the University of Exeter in 1995, 2001 and 2004. The School Health Education Unit within the University of Exeter implements the survey each year in a sample of secondary schools across England, which allows a comparison to be made between the average behaviour in Gateshead and across England.



% of year 10 pupils consuming alcohol on one or more occasions in the previous week		
Year	Gateshead	England
1995	65%	
1996		
1997		
1998		
1999		
2000		
2001	50%	
2002		
2003		
2004	60%	47%

10.20 Teenage conception rate

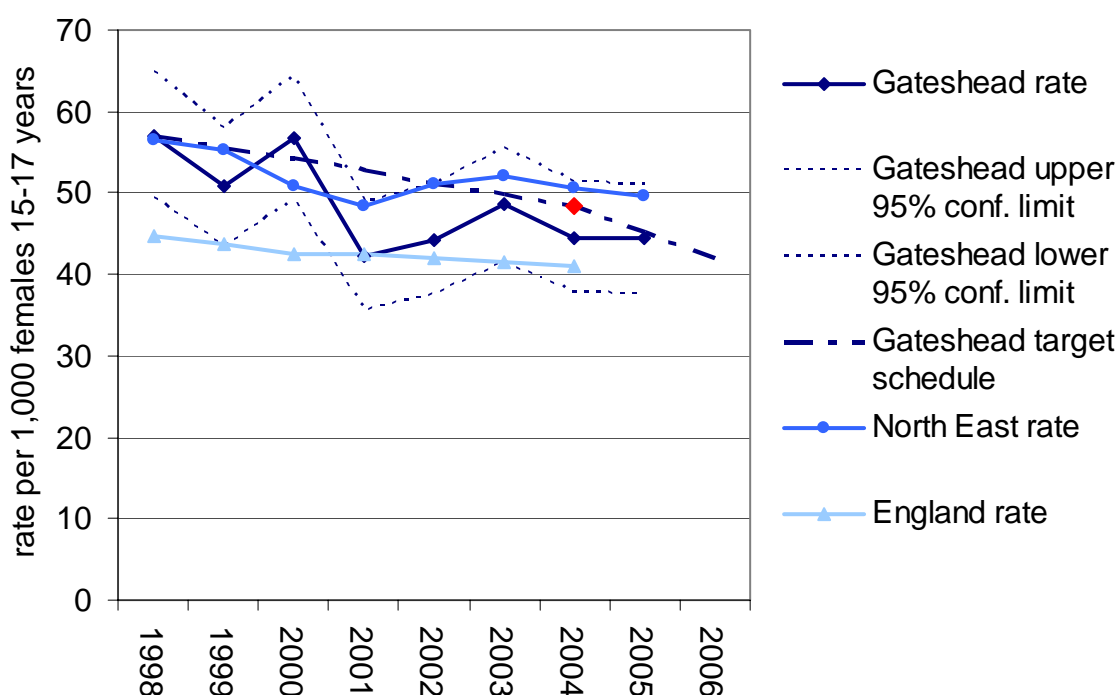


Be Healthy Action Plan – Make sure that all young people and parents have better access to good quality sexual health information

Milestone: to reduce the teenage conception rate in Gateshead by 15% between 1998 and 2004. Gateshead achieved a 22% reduction over this period.

Target: to reduce the teenage conception rate in Gateshead by 50% between 1998 and 2010

The teenage conception rate is measured as the number of conceptions (births plus terminations) per 1,000 females ages 15 to 17 years.



Year	Gateshead rate	Gateshead conceptions	Gateshead target schedule	NE rate	England rate
1998	57.1	199	57.1	56.5	46.6
1999	50.7	182	55.6	55.3	44.8
2000	56.8	202	54.2	50.8	43.6
2001	42.3	152	52.7	48.3	42.5
2002	44.3	158	51.2	51.0	42.6
2003	48.6	175	49.9	52.1	42.1
2004	44.5	159	48.5	50.6	41.5
2005	44.3	161	45.2	49.6	41.0
2006			41.9		
2007			38.5		
2008			35.2		
2009			31.9		
2010			28.6		

Source: Teenage Pregnancy Unit

10.20 Teenage conception rate (cont.)

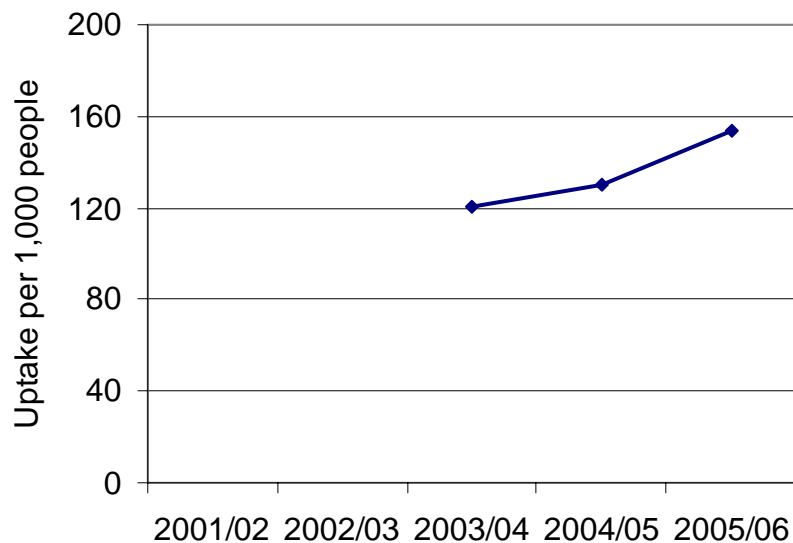
<i>Local neighbours at a glance</i>	Local authority	Rate
Conceptions per 1,000 females 15-17, by local authority area in 2005	Sunderland	55.4
	Newcastle	51.7
	South Tyneside	48.2
	North Tyneside	46.9
	Gateshead	44.3

10.21 Number of young people accessing sexual health services



Be Healthy Action Plan – Make sure that all young people and parents have better access to good quality sexual health information – number of young people accessing services

The number of people aged 15 to 19 years accessing services delivered by the Contraception and Sexual Health service in Gateshead. In 2005/06 one in seven young people in Gateshead accessed these services.



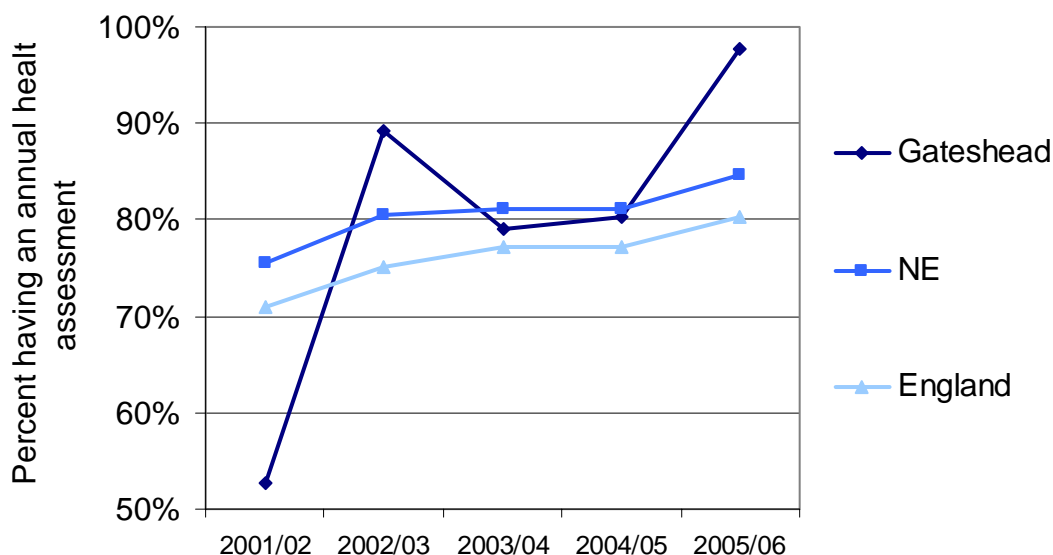
Year	Number of young people 15-19 years accessing services	Population 15-19 years	Uptake per 1,000 people
2001/02	n/a	n/a	n/a
2002/03	n/a	n/a	n/a
2003/04	1490	12337	121
2004/05	1616	12458	130
2005/06	1929	12545	154

Source: Gateshead PCT
n/a - not available

10.22 Proportion of looked after children having an annual health assessment

Gateshead Children & Young People's Plan
2006-2009

Be Healthy Action Plan – Support children and young people to lead healthier lifestyles – develop personal health records for looked after children



Year	Gateshead no. of looked after children	Gateshead no. of looked after children having an annual health assessment	Gateshead % of looked after children having an annual health assessment	Average of Metropolitan District Council Areas	NE	England
2001/02	190	100	53%	n/a	81%	81%
2002/03	185	165	89%	n/a	81%	81%
2003/04	190	150	79%	n/a	81%	81%
2004/05	188	151	80%	76%	81%	77%
2005/06	176	172	98%	78%	85%	80%

Source: 2001/02 to 2003/04 - Department for Education and Skills at www.dfes.gov.uk, 2004/05 to 2005/06 - Commission for Social Care Inspection at www.csci.org.uk
n/a = not available

<i>Local neighbours at a glance</i>	Local authority	Percent
Proportion of looked after children having an annual health assessment, by local authority area in year ending 30 September 2006	Gateshead	98%
	North Tyneside	91%
	Sunderland	88%
	South Tyneside	82%
	Newcastle	81%

10.23 Proportion of looked after children having a dental check

Gateshead Children & Young People's Plan
2006-2009

Be Healthy Action Plan – Support children and young people to lead healthier lifestyles – develop personal health records for looked after children



Year	Gateshead no. of looked after children	Gateshead no. of looked after children having a dental check	Gateshead % of looked after children having a dental check	Average of Metropolitan District Council Areas	NE	England
2001/02	190	135	71%	n/a	76%	72%
2002/03	185	155	84%	n/a	82%	75%
2003/04	190	140	74%	n/a	84%	79%
2004/05	188	142	76%	79%	84%	79%
2005/06	176	162	92%	79%	88%	82%

Source: 2001/02 to 2003/04 - Department for Education and Skills at www.dfes.gov.uk, 2004/05 to 2005/06 - Commission for Social Care Inspection at www.csci.org.uk

n/a = not available

Local neighbours at a glance

Proportion of looked after children having a dental check, by local authority area in year ending 30 September 2006

Local authority

Sunderland	94%
Gateshead	92%
South Tyneside	88%
North Tyneside	81%
Newcastle	81%

