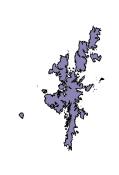
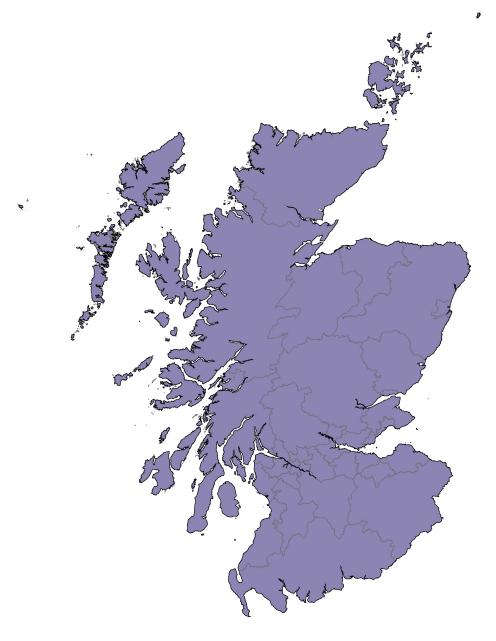
Scotland overview











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Scottish Public Health Observatory (ScotPHO) collaboration

The Public Health Observatory Division at NHS Health Scotland jointly leads the ScotPHO collaboration with ISD Scotland. The collaboration brings together key national organisations in public health intelligence in Scotland. We are working closely together to ensure that the public health community has easy access to clear and relevant information and statistics to support decision making. For further information, please see the ScotPHO website at www.scotpho.org.uk

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Abbreviations

BMI body mass index

CHP Community Health Partnership

CHSP-PS Child Health Systems Programme – Pre-school Children

GROS General Register Office for Scotland

HMRC HM Revenue and Customs

ISD Scotland Information Services Division (of NHS National Services Scotland)

MMR measles, mumps and rubella (vaccine)

NEET not in education, employment or training

NDIP National Dental Inspection Programme

SALSUS 2006 Scottish Schools Adolescent Lifestyle & Substance Use Survey 2006

SCRA Scottish Children's Reporter Administration

SDS Skills Development Scotland

SG Scottish Government

SHS Scottish Household Survey

SIMD09 Scottish Index of Multiple Deprivation 2009

SIRS Scottish Immunisation Recall System

SMR01/02/99 Scottish Morbidity Records 01, 02 and 99

SNS Scottish Neighbourhood Statistics

Key points

- The 2010 Children and young people health and wellbeing profiles are the first of their kind. This
 Scotland overview, together with local Community Health Partnership profiles and other outputs, aims
 to support local action to tackle inequalities and improve health and wellbeing by informing decision
 making, service planning and priority setting.
- At the core of the profiles are 38 indicators that present a comprehensive picture of the health and wellbeing of children and young people at local level throughout Scotland. The indicator set draws together a broad range of information and emphasises the importance of wider determinants.
- A key determinant of health and wellbeing is exposure to poverty and deprivation. This remains a
 hugely important problem in Scotland in 2010 and the patterning of poverty in Scotland explains much
 of the inequality in health and wellbeing outcomes.
- This Scotland overview focuses on 8 key indicators: a measure of child poverty, smoking during pregnancy, breastfeeding, dental decay, obesity, school leavers achieving positive and sustained destinations, admissions to hospital following assault, and admissions to hospital for alcohol-related and attributable causes. It provides comparisons between areas and with the Scottish average, and presents some information on change over time.
- All indicators show marked variation across areas, illustrating the scale of disparity in the challenges faced by different communities.
- Breastfeeding, smoking during pregnancy and dental health in primary 1 children are early indicators of health and wellbeing, and their patterning across Scotland is closely associated with poverty. Similar associations may exist for other indicators. The measure of child poverty used in this report precludes measurement of trends over time and may not be sensitive enough to reflect the full extent of the association between poverty and other health and wellbeing outcomes.
- Taking this selection of indicators and using the available data there is some evidence of improvement over time in dental health in primary 1 children and in admissions to hospital following assault. The proportion of young people not in education, employment or training has also decreased, but there is concern that youth unemployment has since risen as a result of the recession. For other indicators, including obesity, breastfeeding and admissions to hospital related to alcohol, there is little or no evidence of change over time.
- Improving the health of the next generation of Scots requires further action if a step change is to be realised. During this time of economic recession, a particular focus on poverty will be important if the small improvements that have been witnessed are to be maintained and if inequalities are to be narrowed.

1 Introduction

Overview

The Scottish Public Health Observatory (ScotPHO) 2010 Children and young people health and wellbeing profiles complement ScotPHO's 2010 Community Profiles by providing a focus on this important population group. At the core of the profiles are 38 indicators of health, wellbeing and wider determinants. A population summary, comprising nine indicators, is also provided for context. The age range covered is from conception to 24 years, encompassing maternal health, early years, school years, teenage transitions and young adulthood. Such a broad age range means that the profiles reflect a variety of health and wellbeing issues that affect children and young people at different stages throughout their life course.

Profile outputs

This Scotland overview report is one of a number of outputs from the 2010 Children and young people health and wellbeing profiles. It describes the indicator set and provides an in-depth look at 8 key indicators featuring time series charts and comparisons between areas.

Alongside the Scotland overview, individual reports have been produced for each Community Health Partnership (CHP) in Scotland. Each CHP profile contains a map of the area, a population summary, a spine chart displaying data for the health and wellbeing indicators and a commentary on key findings.

Additional data, figures and information are available through the ScotPHO website: www.scotpho.org/profiles. This includes a technical report and an interactive tool that presents the following (subject to disclosure rules and data availability):

- Data for CHPs, health boards and, where possible, intermediate zones
- Spine charts and rank charts
- Time series data and charts

Purpose

The Children and young people health and wellbeing profiles are designed to support local action to tackle inequalities and improve health and wellbeing by informing decision making, service planning and priority setting.

These profiles provide local information about health and wellbeing using robust and meaningful indicators. By drawing together a wide range of information, including data on physical health, health behaviours, education, crime, maternal health and poverty, the profiles emphasise the importance of wider determinants. They illustrate the fact that health and wellbeing are made up of many interrelated constituents, and that tackling inequalities and improving outcomes for children and young people requires collaborative effort involving a wide range of partners.

The profiles are intended to highlight inequalities, allow comparisons between areas and enhance understanding of health, wellbeing and wider determinants at a local level. The target audience includes professionals in public health intelligence and health improvement, planners, service providers and policy makers. In addition to providing an at-a-glance view of health and wellbeing across a broad range of domains, the profiles highlight useful indicators that are currently available and provide data to enable users to study the local picture in more detail.

The Children and young people profiles indicator set

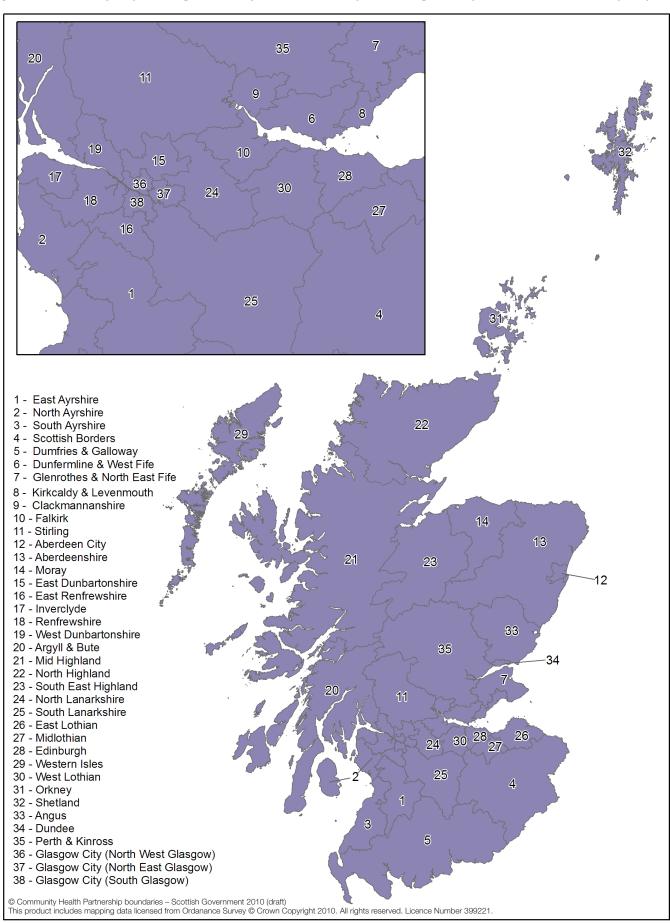
Indicators are based on data that are readily available from routine sources in Scotland at CHP (or at least local authority) level. The requirement for local data that are available and comparable across Scotland imposes a major challenge in creating a suitable indicator set. Most national surveys do not provide local data, with the exception of the Scottish Adolescent Lifestyle & Substance Use Survey (SALSUS), which provides local authority level data every four years, and the Scottish Household Survey, which provides robust local authority level data for some questions every two years. This means that many indicators used at national level are not available for local use and so the profiles are highly reliant on routine administrative data. Furthermore, the indicator set for the Children and young people health and wellbeing profiles excludes most measures of service provision, striving instead to use indicators that relate to the health and wellbeing of the population.

The process of creating an appropriate indicator set involved three stages. Firstly, a scoping exercise was carried out to identify existing indicators, available data, and data gaps highlighted through previous work and policy documents. A consultation was then carried out in autumn 2009, seeking the views of a range of potential users of the profiles. Respondents provided valuable information to help plan the presentation of the profiles and inform decisions about which indicators to include. Finally, a draft set of indicators was taken forward to undergo a rigorous assessment of data quality. The process was guided by a strategic project advisory group with representation from NHS Health Scotland, Scottish Government, Information Services Division Scotland (ISD Scotland) and the Glasgow Centre for Population Health.

Geographies

Scotland's geographies comprise 14 area health boards and 32 local authorities, with CHPs (in some cases known as Community Health and Care Partnerships or Community Health and Social Care Partnerships, but collectively referred to as CHPs throughout this report) nested within these. In many cases CHPs and local authorities are coterminous, but some local authorities contain more than one CHP. Instead of presenting information for five CHPs in Glasgow City, as in previous years, ScotPHO's 2010 profiles present information for three areas within Glasgow City (Glasgow North East, Glasgow North West and Glasgow South). This gives a total of 38 comparator areas in Scotland. For convenience, figures presented in this report refer to these comparator areas collectively as 'CHPs', although this is not applicable to areas within Glasgow City. Intermediate zones are used to present data below CHP level on the ScotPHO website, although this is possible for only a subset of indicators. Figure 1.1 provides a map of CHP boundaries and Glasgow comparator areas in Scotland.

Figure 1.1 Boundary map showing Community Health Partnerships and Glasgow comparator areas in Scotland (2010)



Data gaps and limitations of profiles

These profiles present the most comprehensive set of indicators identified at the time of analysis. Conversely, limitations and gaps in local health and wellbeing indicators are also evident where there is limited availability of robust local data. Data were unavailable for many potentially valuable indicators that had received strong support at the consultation stage. As a result, important aspects of health and wellbeing are underrepresented in the profiles. These include diet, physical activity, early development, mental health and sexual health. This reinforces the need to strengthen existing data systems to provide robust local data and to develop new indicators of children and young people's health and wellbeing where necessary.

Alignment with menu of local indicators

The menu of local outcome indicators provided by the Improvement Service (available at www. improvementservice.org.uk/local-outcome-indicators) lists indicators suitable for use in Single Outcome Agreements. A number of profile indicators (numbers 4, 16, 24, 26, 28, 35 and 38) are also included in version 4 of the menu. Other profile indicators are similar to indicators included in the menu but are not identical (numbers 12 and 36). These differences may be crucial to interpretation. For further information, please see the technical report. The menu of local outcome indicators is continually updated, and so the degree of alignment described here may change in future.

Interpretation of profiles

ScotPHO's 2010 profiles provide comparisons between local areas in Scotland and the Scottish average value. However, Scotland faces considerable challenges in terms of health and wellbeing, and it is important to note that local values that are not significantly different from the Scottish average, or that are significantly better, may still indicate an important public health problem.

These profiles are intended to enhance local understanding of health and wellbeing. They are not intended for performance management (though some indicators may be suitable for this purpose), and data should be interpreted with the aid of local knowledge. Local factors, including rurality and deprivation, may exert a major influence on expected outcomes. The influence of child poverty is particularly relevant and is explored further throughout this report.

Most health and wellbeing indicators presented in these profiles afford clear categorisation of data as 'better' or 'worse' than the Scottish average. However, for some this is not appropriate, either because the outcome itself may not be considered clearly negative or because the indicator measures the provision of services rather than directly measuring the level of need. For such indicators, local interpretation is crucial.

Data are presented for the most recent time period available at the time of analysis. Users are advised to check the original data source (noted in Appendix A) to ascertain whether or not more recent data have become available. To provide more robust data some indicators are based on data from more than one year.

Although CHPs are the focus of these profiles, some indicators are available only at local authority level. Where CHPs and local authorities are coterminous this has no bearing, but where this is not the case the relevant local authority data are presented for CHPs. Health board spine charts are provided for reference in Appendix B.

Further information about all indicators is provided in the Children and young people health and wellbeing profiles 2010 technical report. This report provides details of definitions, data quality, potential bias and caveats that may have considerable bearing on how an indicator is interpreted. It also provides more general guidance on the interpretation of spine charts.

2 Population summary

The following indicators are not part of the Children and young people health and wellbeing profiles but provide contextual information to assist with interpretation of the 38 health and wellbeing indicators. Table 2.1 provides a population summary for Scotland.

Table 2.1 **Population summary indicators, Scotland**

	Indicator	Number	Measure
1	Population aged <1	59,673	1.2
2	Population aged 1–4	229,316	4.4
3	Population aged 5-15	623,351	12.0
4	Population aged 16–24	623,084	12.0
5	Primary school pupils	367,851	7.1
6	Secondary school pupils	302,152	5.9
7	Minority ethnic groups	30,902	4.6
8	Live births	59,252	11.4
9	Children living in rural areas	264,929	17.3

Notes, by indicator number 1–4 Data from General Register Office for Scotland (GROS) 2009 small area population estimates, measure presented as % of total population. 5–7 Data from school census (Scottish Government) 2008, measure presented as % of total population (5 and 6) and % of total number of pupils (7). 8 Data from GROS 2009, measure presented as crude rate per 1,000 population. 9 Data from Scottish Government six-fold urban/rural classification 2008, measure presented as % of population aged 0–24.

3 Health and wellbeing indicators

Table 3.1 **Health and wellbeing indicators**

Domain	No.	Indicator name	Туре
Mortality	1	Infant mortality rate, <1 year ^a	cr
	2	Mortality rate, aged 1–15 years ^a	cr
	3	Mortality rate, aged 16–24 years ^a	cr
Behaviours	4	Active travel to school ^b	%
	5	Alcohol-related and attributable hospital patients ^a	sr
	6	Drug-related hospital patients ^a	sr
	7	Smoking prevalence, age 15ª	%
	8	Alcohol use, age 15ª	%
	9	Drug use, age 15 ^b	%
Physical health	10	Road traffic accidents ^a	sr
	11	Emergency admission hospital patients ^a	sr
	12	Child dental health in primary 1	%
	13	Unintentional injuries in the home, <15 years ^b	sr
	14	Extraction of multiple teeth, aged 0–15 ^a	sr
	15	Asthma hospital patients, aged 0–15 ^a	sr
	16	Child obesity in primary 1	%
Mental health	17	Deaths from suicide ^c	sr
	18	Strengths and difficulties score ^b	mean
Social care	19	Children looked after by local authorityb,d	cr
	20	Child protection referrals ^{b,d}	cr
Education	21	Education outcomes for looked after children ^b	mean
	22	Secondary school attendance	%
	23	Primary school attendance	%
	24	Attainment of national qualifications for S4	mean
Access	25	Residence in 'access deprived' areas	%
Employment & prosperity	26	Reliance on out of work benefits/child tax credit	%
	27	Not in education, employment or training ^b	%
	28	School leavers – positive and sustained destinations	%
	29	Residence in 'income deprived' areas	%
Crime	30	Assault hospital patients ^a	sr
	31	Referrals to SCRA for violence-related offencesd	cr
	32	Residence in 'crime deprived' areas	%
Pregnancy & infancy	33	Immunisation uptake at 24 months – all excl MMR ^a	%
	34	Immunisation uptake at 24 months – MMR ^a	%
	35	Babies exclusively breastfed at 6–8 weeks ^a	%
	36	Teenage pregnancies, <18 years ^{a,d}	cr
	37	Mothers smoking during pregnancy ^a	%
	38	Low weight live births ^a	%

Notes, by indicator number [year of data shown] 1–3 Crude rate per 10,000 population [2007–09]. 4 % children walking or cycling to school [2007/08]. 5 Aged 15–24 [2007–09]. 6 Aged 0–24 [2007–09]. 7 % smoking at least one cigarette a week [2006]. 8 % who usually drink alcohol at least once a week [2006]. 9 % who usually take illicit drugs at least once a month [2006]. 10 Patients aged 0–24 discharged from hospital after a road traffic accident emergency admission [2007–09]. 11 Aged 0–15 [2007–09]. 12 % with no obvious dental decay experience from basic inspection [2008/09]. 13 Emergency hospital admissions for unintentional injury in the home [2007–09]. 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007–09]. 15 [2007–09]. 16 % children with BMI in the top 5% of the UK reference range [2008/09]. 17 Aged 0–24 [2000–09]. 18 Total difficulties score, aged 13 and 15 [2006]. 19 Children looked after by local authority, aged 0–18, crude rate per 1,000 population [2009]. 20 Child protection referrals, aged 0–15, crude rate per 1,000 population [2008/09]. 21 Average tariff score, S4 pupils [2008/09]. 22 Attendance rate, publicly funded secondary schools [2008/09]. 23 Attendance rate, publicly funded primary schools [2008/09]. 24 Average tariff score [2008/09]. 25 % aged 0–24 living in datazones that are in the 15% most 'access deprived' in Scotland [2008]. 26 % of children aged 0–19 in households dependent on out of work benefits or child tax credit more than the family element [2008]. 27 % of young people aged 16–19 years not in education, employment or training [2008]. 28 % school leavers in positive and sustained destinations [2008/09]. 29 % aged 0–24 living in datazones that are in the 15% most 'income deprived' in Scotland [2008]. 30 Aged 0–24 [2007–09]. 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8–15, crude rate per 1,000 population [2009/10]. 32 % aged 0–24 living in datazones that are in the 15% most 'crime deprived'

Footnotes: a Three-year combined number and three-year annual average measure. b Data not available below local authority level. c Ten-year combined number and ten-year annual average measure. d Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation.

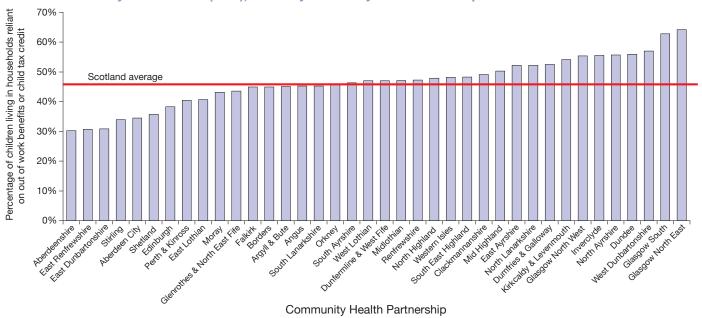
Key to type of measure n/a, data not available or cannot be calculated; cr, crude rate (see technical report); sr, age—sex standardised rate per 100,000 population; %, percentage; mean, average.

4 Focus on key indicators

Reliance on out of work benefits or child tax credit

This indicator provides a proxy measure of child poverty. It is defined as the proportion of children living in households dependent on 'out of work' benefits or child tax credit more than the family element alone. It is an absolute measure of poverty as it utilises eligibility for benefits as its definition. It does not account for relative (or comparative) poverty, the time spent in poverty or the depth of poverty experienced. This provides a very broad definition of child poverty that includes 47% of Scottish children and does not equate to the Scottish Government's definition of children living in poverty. Figure 4.1 shows data for CHP areas in Scotland arranged in rank order along with the Scottish average.

Figure 4.1 The proportion of children living in households in receipt of 'out of work' benefits or child tax credit more than the family element alone (2008), ranked by Community Health Partnership



There is a greater than two-fold difference between the CHPs in Scotland for this measure of child poverty. Aberdeenshire, East Renfrewshire and East Dunbartonshire all have around 30% of children in their area living in families dependent on out of work benefits or child tax credit, whereas Glasgow South and Glasgow North East have in excess of 60%.

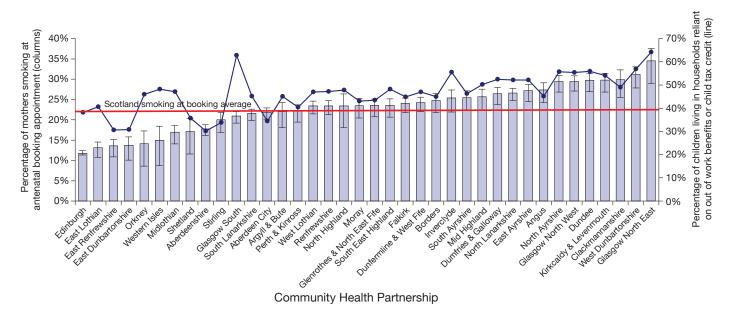
Eligibility for out of work benefits and child tax credit more than the family element has been subject to change over the last decade. Accordingly, a time series based on this indicator is not considered to be a robust measure of change in child poverty over time and is not presented here.

The ScotPHO 2010 Children and young people health and wellbeing profiles primarily illustrate geographical variation in health and wellbeing, yet inequalities and child poverty are crucial considerations when interpreting this information. To reflect the importance of poverty, values for this indicator have been superimposed on the rank charts for other key indicators. This has the added advantage of facilitating comparisons between CHPs with a similar child poverty level and potentially highlighting areas where health and wellbeing is better or worse than might be expected. Where there is no obvious association this may mean that the indicator of child poverty used is too insensitive to reflect the full extent of the relationship between poverty and the health and wellbeing indicator in question.

Mothers smoking during pregnancy

Health and wellbeing is influenced by factors from conception onwards throughout the whole life course. One influence before birth is exposure to smoking during pregnancy. One-fifth (22.6%) of women in Scotland report that they smoke when seen by a midwife in early pregnancy. Although the accuracy of how these data are reported and recorded has changed over time, precluding presentation of a time series, recent data are more robust and show marked variation between CHPs (Figure 4.2).

Figure 4.2 The proportion of mothers reporting smoking during pregnancy (excluding those for whom no information was recorded, 2007), ranked by Community Health Partnership (whiskers are 95% confidence intervals), compared with Scottish average and child poverty (2008)

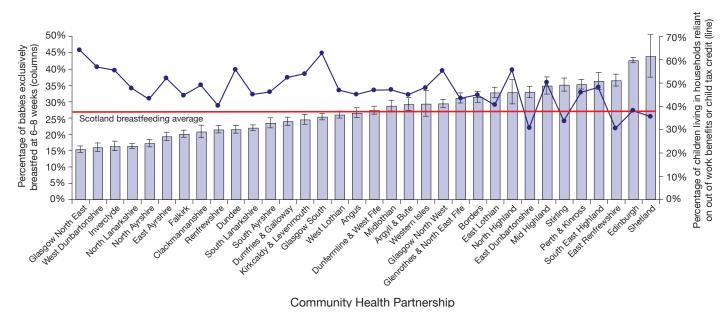


There is almost a three-fold difference in the average proportion of women reporting smoking in early pregnancy. In Edinburgh, around 12% of women report smoking, whereas in Glasgow North East over 34% report smoking. The 95% confidence intervals show some uncertainty around the precision of the estimates, particularly for the smaller CHPs. The data shown in Figure 4.2 are consistent with an association between one measure of child poverty and smoking during pregnancy, suggesting that poverty and deprivation may be important to understanding the overall pattern.

Babies exclusively breastfed at 6-8 weeks

Breastfeeding is associated with a range of positive health outcomes. Figure 4.3 shows the rank order of CHPs for breastfeeding exclusively at 6–8 weeks. The data show a stark variation between CHPs, with some recording just over 15% of babies being exclusively breastfed and several others more than 30%. There is a clear inverse association with poverty, with the CHPs with higher levels of child poverty recording lower breastfeeding rates.

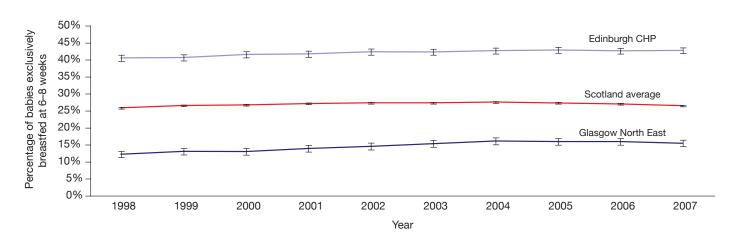
Figure 4.3 The proportion of babies exclusively breastfed at 6–8 weeks (2007), ranked by Community Health Partnership^a (whiskers are 95% confidence intervals), compared with Scottish average (2007) and child poverty (2008)



^aData are not available for Aberdeen, Aberdeenshire, Moray and Orkney.

Over time there has been little variation in breastfeeding rates at 6–8 weeks for Scotland as a whole. Similarly there has been little change over time in the CHPs recording the highest and lowest rates in 2007 (Figure 4.4).

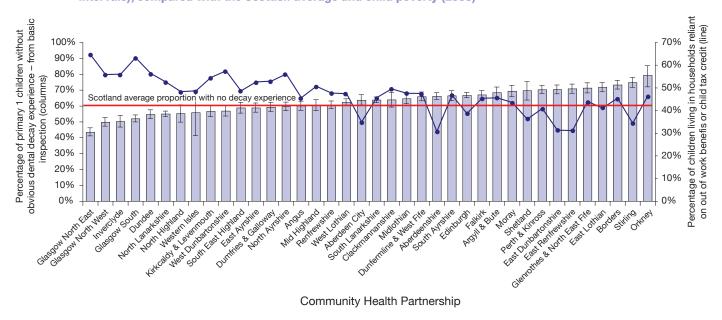
Figure 4.4 Time series for the proportion of babies exclusively breastfed at 6–8 weeks in Scotland and in the Community Health Partnerships with the highest and lowest rates for 2007



Dental health in primary 1

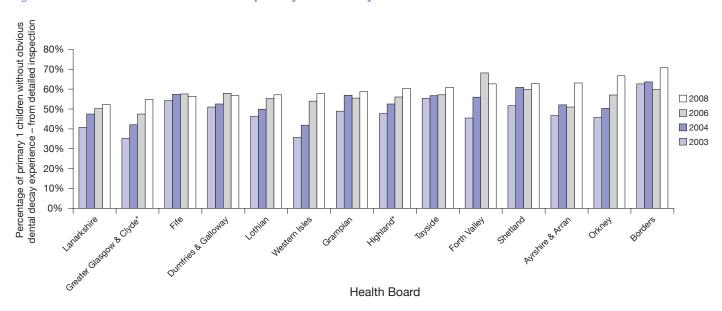
The proportion of children in primary 1 with no obvious dental decay experience provides a good indicator of dental health and is a useful proxy for general health and nurture. Data are provided by the National Dental Inspection Programme (NDIP). Data from the basic inspection can be presented at CHP level although there is considerable uncertainty around the estimates for smaller CHPs. Figure 4.5 shows marked variation among CHPs in the proportion of children without decay (from 43% to 79%). There is a clear association between child poverty and greater dental decay.

Figure 4.5 Dental health in primary 1 (2008), ranked by Community Health Partnership (whiskers are 95% confidence intervals), compared with the Scottish average and child poverty (2008)



Time series data are not available by CHP from the basic NDIP inspection but can be obtained by health board area from the detailed inspection. This shows that dental health, as measured by this indicator, has improved in almost all areas over time (Figure 4.6).

Figure 4.6 Time series for dental health in primary 1 children by health board^a

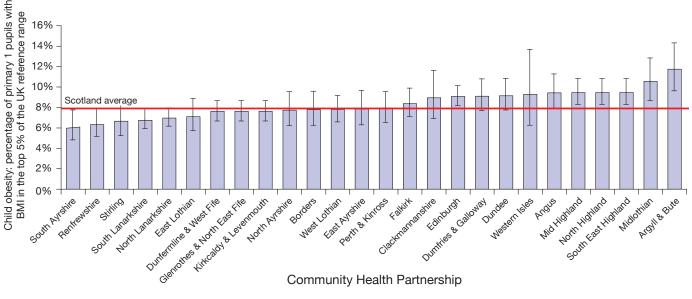


^aData for Greater Glasgow and Clyde and Highland before 2008 exclude the population of the former Argyll and Clyde area.

Obesity in primary 1

Obesity is one of the major public health challenges facing Scotland today. Figure 4.7 shows the proportion of primary 1 children who are obese in rank order by CHP (2008/09) compared with the Scottish average. These data are not collected in all areas and so the patterning by child poverty is not clear and is not presented here. South Ayrshire and Renfrewshire are significantly better than the Scottish average, whereas Argyll and Bute and Midlothian are significantly worse.

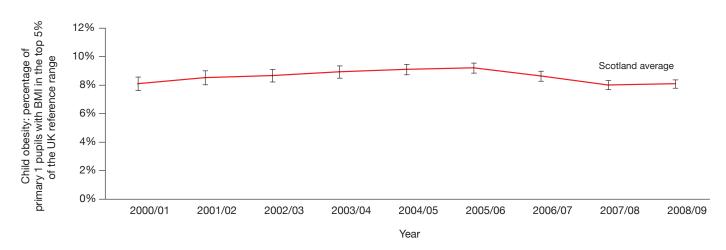
Figure 4.7 Obesity in primary 1 (2008/09), ranked by Community Health Partnership^a (whiskers are 95% confidence intervals), compared with Scottish average and child poverty (2008) **≦**



^aNo data are available for Aberdeen, Aberdeenshire, East Dunbartonshire, East Renfrewshire, Glasgow North East, Glasgow North West, Glasgow South, Inverclyde, Moray, Orkney, Shetland or West Dunbartonshire.

Figure 4.8 shows the time series for obesity in primary 1 children for Scotland overall (from the available CHP data). There has been little variation over time, with around 8% of primary 1 children being defined as obese each year since 2001.

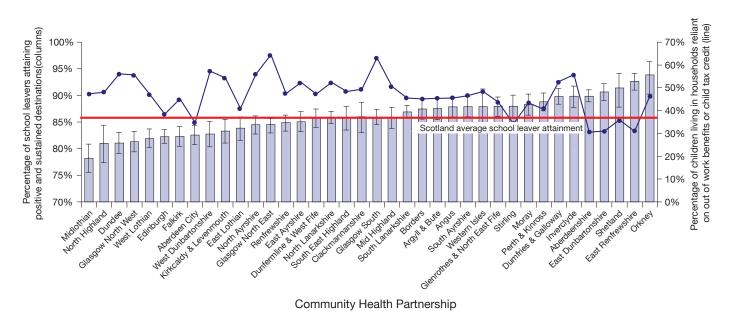
Figure 4.8 Time series for obesity in primary 1 schoolchildren (2000/01 to 2008/09), showing the Scottish average for the available data (whiskers are 95% confidence intervals)



School leavers in positive and sustained destinations

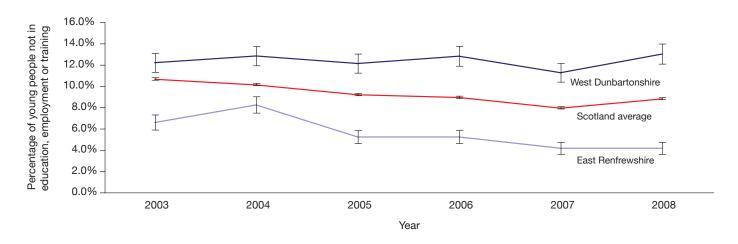
This indicator shows the proportion of school leavers who move into a positive and sustained destination, and provides some insight into the available opportunities for young people. Eighty-seven per cent of Scottish school leavers achieve a 'positive and sustained destination' on leaving school, but there is considerable variation between CHPs, which may be associated with our measure of child poverty (Figure 4.9).

Figure 4.9 School leavers in positive and sustained destinations (2008/09), ranked by Community Health Partnership (whiskers are 95% confidence intervals), compared with Scottish average and child poverty (2008)



No data are available over time for CHPs for the proportion of school leavers achieving a positive and sustained destination. Instead, Figure 4.10 shows trend data for local authorities for the proportion of young people not in education, employment or training. There has been a small decrease in the number of young people in this category over time. However, these data relate to the period before the impact of the recession was seen and it may be that there has been a rise in this measure subsequently.

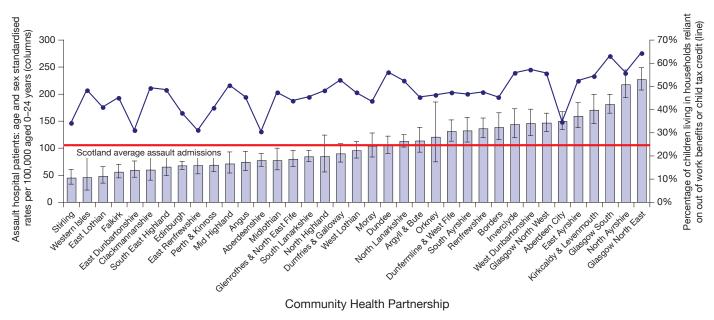
Figure 4.10 Time series for the proportion of young people not in education, employment or training; Scottish average and local authorities with best and worst values for 2008 (whiskers are 95% confidence intervals)



Assault hospital patients

The number of young people per 100,000 population admitted to hospital following an assault provides an indicator of violence, which is relevant to physical health, crime, and mental health and wellbeing. Figure 4.11 shows age and sex standardised rates for CHPs alongside the Scottish average and our measure of child poverty. There is a more than four-fold difference between CHPs with Glasgow North East and North Ayrshire having the highest rates. There may be an association between our measure of child poverty and admission to hospital following assault, although the pattern is not consistent.

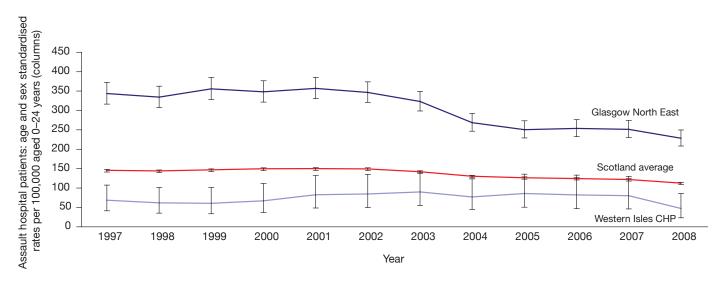
Figure 4.11 Assault hospital patients (2008), ranked by Community Health Partnership^a (whiskers are 95% confidence intervals), compared with Scottish average and child poverty (2008)



Data not available for Shetland owing to suppression of small numbers for disclosure reasons.

Figure 4.12 shows time series data for Scotland and the CHPs with the highest and lowest rates in 2008. The Scotlish rate has decreased over time since 2002, and there has been a parallel decease in the area that had the highest rate in 2008 (Glasgow North East).

Figure 4.12 Time series for assault-related hospital patients in Scotland and the Community Health Partnerships with the highest and lowest rates in 2008 (whiskers are 95% confidence intervals)



Alcohol-related and attributable hospital admissions

The number of admissions to hospital for alcohol-related causes is one measure of the harm caused by misuse of alcohol amongst young people. Figure 4.13 shows that there is almost a three-fold difference in rates between the highest and lowest CHPs. The association between our measure of child poverty and alcohol-related admissions is not clear, but this may reflect the limitations of the child poverty measure or differences in the extent of alcohol misuse between areas that are not explained by differences in child poverty.

Figure 4.13 Alcohol-related and attributable hospital admissions (2008), ranked by Community Health Partnership (whiskers are 95% confidence intervals), compared with Scottish average and child poverty (2008)

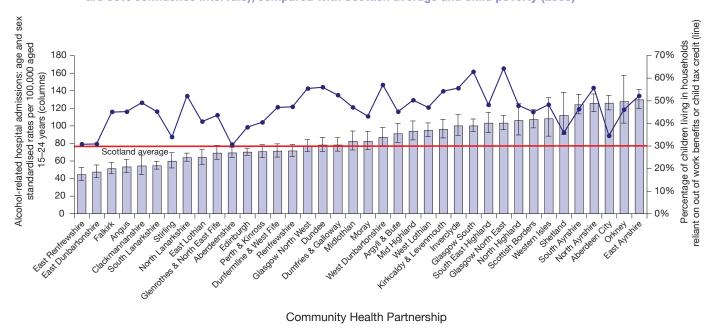
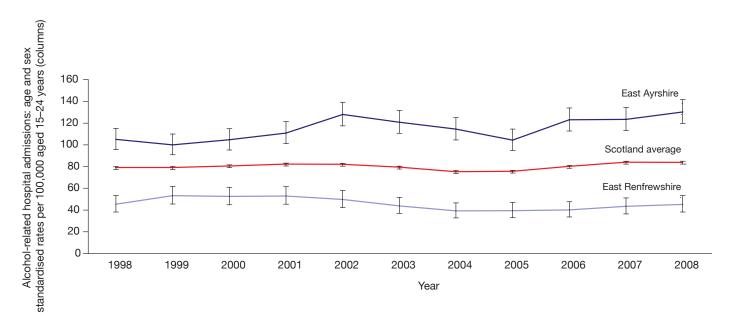


Figure 4.14 presents a time series for Scotland and the CHPs with the highest and lowest rates in 2008 and shows little change in the rate of alcohol-related and attributable admissions between 1998 and 2008.

Figure 4.14 Time series for alcohol-related and attributable hospital admissions in Scotland and the Community Health Partnerships with the highest and lowest rates in 2008 (whiskers are 95% confidence intervals)



Conclusions

Increasingly, there has been a policy focus in Scotland on children and young people. It is believed that by focusing on the next generation of Scots the vicious cycle of poverty, deprivation and poor health can be broken. This Scotland overview provides some indication of health, wellbeing and wider determinants for children and young people. In producing these profiles it is hoped that more can be learnt about where health and its influences are improving and what further work is required if Scotland is to make a step change in its health outcomes as the current generation grows into adulthood.

This Scotland overview and other outputs from the 2010 Children and young people health and wellbeing profiles are intended to support local action to tackle inequalities and improve health and wellbeing by informing decision making, service planning and priority setting.

Eight indicators are highlighted in this Scottish overview: a measure of child poverty, smoking during pregnancy, breastfeeding, dental decay, obesity, school leavers entering positive and sustained destinations, admissions to hospital following assault, and admissions to hospital for alcohol-related and attributable causes. These indicators are not comprehensive nor do they all directly measure health or its determinants. However, they provide an overview of selected key indicators through the early life course from before birth to age 24 years.

The full set of 38 indicators listed in this overview and presented in the accompanying set of local CHP profiles provides a more comprehensive picture of health and wellbeing, though this too is limited by the availability of robust local data.

A key determinant of health is exposure to poverty and deprivation. This remains a hugely important problem in Scotland in 2010 and the patterning of poverty in Scotland explains much of the variation in health outcomes. The measure used in this report precludes measurement of trends over time and may not be sensitive enough to reflect the full extent of the relationship between poverty and other health and wellbeing outcomes.

Breastfeeding and smoking during pregnancy are early influences on development and health, and their patterning across Scotland is closely associated with poverty. Similarly, although dental decay in primary 1 children declined between 2003 and 2008, there remains a stark difference between the areas with the greatest and least child poverty. Associations with poverty may exist for other indicators, although the patterns are not always clear or consistent.

Taking this selection of indicators and using the available data, there is some evidence of improvement in dental decay and in admissions to hospital following assault. The proportion of young people not in education, employment or training declined from 10.6% to 8.8% between 2003 and 2008 in Scotland, but there is concern that youth unemployment has risen since then following the economic recession. For other indicators, including obesity, breastfeeding and admissions to hospital related to alcohol, there has been little or no change over time.

Efforts to improve the health and wellbeing of the next generation of Scots requires further actions if a step change is to be realised. During this time of economic recession, a particular focus on poverty will be important if the small improvements that have been witnessed are to be maintained and if inequalities are to be narrowed.

Appendix A: Definitions and sources of data

More details on methodology and definitions are available in the technical report, available on the ScotPHO website at www.scotpho.org.uk/profiles.

Table A1 **Population summary data**

Indicator no.	Description	Definition	Time period	Source
1–4	Population	Number and percentage of total population in each age band (<1 year, 1–4 years, 5–15 years, 16–24 years)	1998–2009	GROS
5–6	School pupils	Number of pupils in publicly funded schools (primary, secondary)	2003–2008	School Census/SG
7	Minority ethnic groups	Percentage of pupils in publicly funded schools (primary and secondary combined) from black and minority ethnic groups	2004–2008	School Census/SG
8	Live births	Annual live births expressed as a number and rate per 1,000 population	2001–2009	GROS/SNS
9	Children living in rural areas	Children and young people (aged 0–24 years) living in datazones classified as 'rural'	2004–2008	GROS and SNS

Table A2 Health and wellbeing data

Indicator no.	Description	Definition	Time period*	Source
1–3	Mortality	Deaths from all causes (age <1 year, age 1–15, age 16–24); 3-year total number and 3-year average crude rate per 10,000 population per year	1996–98 to 2007–09	GROS
4	Active travel to school	Percentage of school children who normally travel to school by walking or cycling	1999/2000 to 2007/08	SHS
5	Alcohol-related and attributable hospital patients	Number of patients (15–24 years) discharged from hospital (annually) with alcohol-related and attributable conditions: 3-year total number and 3-year average directly age—sex standardised rate per 100,000 population per year	1997–99 to 2007–09	ISD Scotland (SMR1/01, linked database)
6	Drug-related hospital patients	Total number of patients (0–24 years) discharged from hospital with drug-related conditions over 3 years and 3-year average directly age—sex standardised rate per 100,000 population per year	1998–2000 to 2007–09	ISD Scotland (SMR1/01, linked database)
7	Smoking prevalence	Percentage of 15 year old school pupils smoking at least one cigarette a week (regular smokers)	2006	SALSUS 2006
8	Alcohol use	Percentage of 15 year old pupils who usually drink alcohol at least once a week	2006	SALSUS 2006
9	Drug use	Percentage of 15 year old pupils who usually take illicit drugs at least once a month	2006	SALSUS 2006
10	Road traffic accidents	Patients (aged 0–24 years) discharged from/died in hospital after a road traffic accident emergency admission: 3-year total number and 3-year average directly age—sex standardised rate per 100,000 population per year	2000–02 to 2007–09	ISD Scotland (SMR1/01 and SMR99/099, linked database)
11	Emergency medical admission patients	Emergency medical patients (aged 0–15 years) discharged from hospital (annually): 3-year total number and 3-year average directly age—sex standardised rate per 100,000 population per year	1996–98 to 2007–09	ISD Scotland (SMR1/01, linked database)
12	Child dental health in primary 1	Primary 1 children receiving a 'category C' letter from basic inspection ('No obvious decay experience, but child should continue to see the family dentist on a regular basis'): number and percentage of all primary 1 children	2008/09	NDIP basic inspection

Indicator no.	Description	Definition	Time period*	Source
13	Unintentional injuries in the home	Number of patients, aged <15 years, discharged from hospital (annually) after an emergency admission due to an accident in the home: 3-year total number and 3-year average crude rate per 100,000 population per year	1998–2000 to 2007–09	ISD Scotland (SMR01)
14	Extraction of multiple teeth	Hospital admissions (inpatients and day cases, age 0–15 years) for extraction of multiple teeth: 3-year total number and 3-year average directly age–sex standardised rate per 100,000 population per year	1998–2000 to 2007–09	ISD Scotland (SMR01)
15	Asthma hospital patients	Patients (aged 0–15 years) discharged from hospital (annually) in particular circumstances (asthma): 3-year total number and 3-year average directly age—sex standardised rate per 100,000 population per year	1997–99 to 2007–09	ISD Scotland (SMR01)
16	Child obesity in primary 1	Children whose BMI is within the top 5% of the 1990 UK reference range for their age and sex – percentage of the total cohort	2000/01 to 2008/09	CHSP-S
17	Deaths from suicide	Deaths from suicide (including undetermined intent; age <25 years): 10-year total number and 10-year average directly age—sex standardised rate per 100,000 population per year	2000–09	GROS (SMR99)
18	Strengths and difficulties score	Total difficulties score, expressed as a mean (13 and 15 year olds combined)	2006	SALSUS 2006
19	Children looked after	Number of children looked after by local authority (aged 0–18) expressed as a number and crude rate per 1,000	1999–2009	SG
20	Child protection referrals	The definition of what constitutes a child protection referral varies between local authorities. Therefore comparisons between local authorities in particular, but also over time, are not advised. At the time of publication, the Scottish Government is reviewing this and planning to issue guidance to help ensure that better consistency in reporting by all local authorities is obtained in future years. Data are currently expressed as number (aged 0–18) and crude rate per 1,000	2000–09	SG
21	Education outcomes for looked after children	Average tariff score (pupil attainment) of all pupils looked after by the local authority enrolled in stage S4 of publicly funded secondary schools	2002/03 to 2008/09	SG
22–23	School attendance	School attendance rate (secondary, primary): number attending and percentage of all pupils (based on pupil residence)	2003/04 to 2008/09	SG/SNS
24	Average tariff score of all pupils on the S4 roll	Average tariff score (pupil attainment) of all pupils enrolled in stage S4 of publicly funded secondary schools	2002–08	SG
25	Residence in 'access deprived' areas	Children (aged 0–24 years) living in the 15% most 'access deprived' datazones in Scotland	2008	SIMD09 and GROS
26	Reliance on out of work benefits/child tax credit	The number of children living in households that are dependent on out of work benefits or where child tax credit is more than the family element	2008	HMRC
27	NEET	Number of 16–19 year olds not in education, employment or training (NEET)	2003–08	SG
28	School leavers – positive and sustained destinations	Proportion of school leavers (from Scottish publicly funded schools) in positive and sustained destinations (further education, higher education, employment or training)	2007/08 to 2008/09	SG/SDS
29	Residence in 'income-deprived' areas	Children (aged 0–24 years) living in the 15% most 'income deprived' datazones in Scotland, expressed as a number and percentage of the population in the CHP	2008	SIMD09
30	Assault-related hospital patients	Assault patients (aged 0–24 years) discharged from hospital (annually): 3-year total number and 3-year average directly age–sex standardised rate per 100,000 population per year	1996–98 to 2007–09	ISD Scotland (SMR1/01)
31	Referrals to SCRA for violence-related offences	Children referred to the Scottish Children's Reporter Administration (SCRA) for violence-related offences (aged 8–15 years)	2003/04 to 2009/10	SCRA
32	Residence in 'crime deprived' areas	Children and young people (aged 0–24 years) living in the 15% most 'crime deprived' datazones in Scotland, expressed as a number and percentage of the population in the CHP	2008	SIMD09 and GROS

Indicator no.	Description	Definition	Time period*	Source
33–34	Immunisation uptake at 24 months	Immunisation uptake at 24 months for all excluding MMR (indicator 33) and MMR (indicator 34): 3-year total number and percentage of children this age	2003–05 to 2006–08	SIRS
35	Babies exclusively breastfed at 6–8 weeks	Babies being exclusively breastfed at 6- to 8-week review: 3-year total and percentage of children of this age	1997–99 to 2006–08	CHSP-PS
36	Teenage pregnancies, <18 years	Teenage (<18 years) pregnancies expressed as a number (3-year total) and 3-year average crude rate per 1,000 females aged 15–17 per year	2001–03 to 2006–08	GROS
37	Mothers smoking during pregnancy	Women recorded as a 'current smoker' at antenatal booking appointment: 3-year total and percentage of all live singleton births	2001–03 to 2006–08	ISD Scotland (SMR02)
38	Low weight live births	Low weight live full-term singleton births (<2,500g): 3-year total and percentage of all live singleton births	2001–03 to 2006–08	ISD Scotland (SMR02)

^{*}The time period column indicates the total years available from each data source. Please note that spine charts display the most recent time period only (see spine chart footnotes for further details). Data covering the full time period for some indicators can be accessed through the ScotPHO website (www.scotpho.org/profiles) using the interactive Sub CHP chart tool.

Appendix B: Health board spine charts

Ayrshire and Arran

Note that values that are not significantly different from the Scottish average, or that are significantly better, may still indicate an important public health problem. For figures based on small numbers, data may be suppressed. For further information see the technical report.

● Statistically significantly 'worse' than Scottish average

○ Statistically not significantly different from Scottish average

○ Statistically significantly 'better' than Scottish average

○ Statistically significantly 'better' than Scottish average

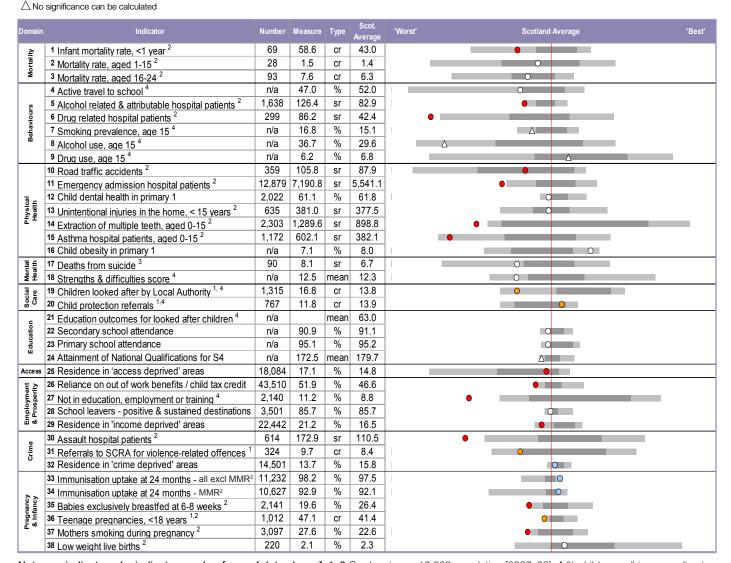
○ Statistically significant difference compared with Scottish average

5 th Percentile

25 th Percentile

75 th Percentile

95 th Percentile



Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007-09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

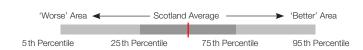
Footnotes: 1 Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation; 2 Three-year combined number, and three-year annual average measure; 3 Ten-year combined number, and ten-year annual average measure; 4 Data not available below local authority level

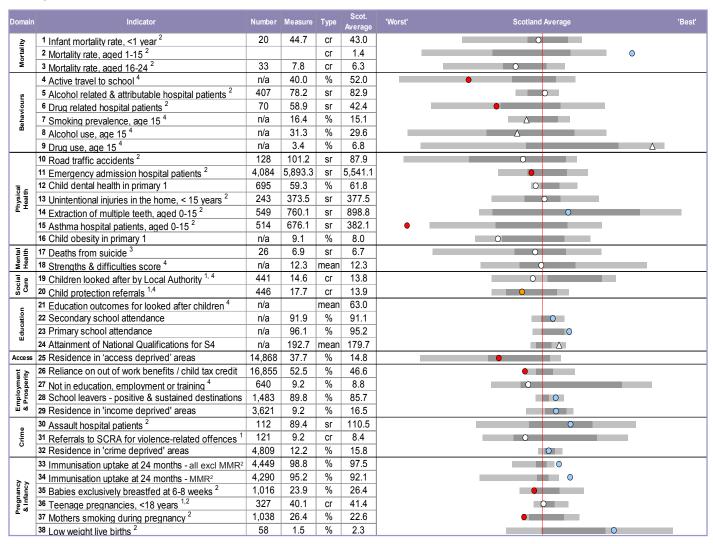
Key to type of measure: n/a = data not available, or cannot be calculated; cr = crude rate (see technical report); sr = age—sex standardised rate per 100,000 population; % = per cent; mean = average

Dumfries and Galloway

Note that values that are not significantly different from the Scottish average, or that are significantly better, may still indicate an important public health problem. For figures based on small numbers, data may be suppressed. For further information see the technical report.

- Statistically significantly 'worse' than Scottish average
- O Statistically not significantly different from Scottish average
- O Statistically significantly 'better' than Scottish average
- Statistically significant difference compared with Scottish average
- \triangle No significance can be calculated





Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

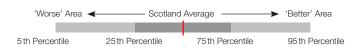
Footnotes: 1 Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation; 2 Three-year combined number, and three-year annual average measure; 3 Ten-year combined number, and ten-year annual average measure; 4 Data not available below local authority level

Key to type of measure: n/a = data not available, or cannot be calculated; cr = crude rate (see technical report); sr = age-sex standardised rate per 100,000 population; % = per cent; mean = average

Fife

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- Statistically significantly 'better' than Scottish average
- Statistically significant difference compared with Scottish average
- \triangle No significance can be calculated



Domain	Indicator	Number	Measure	Туре	Scot. Average	'Worst' Scotland Average 'Be	st'
_₹	1 Infant mortality rate, <1 year ²	76	60.7	cr	43.0		
Mortality	² Mortality rate, aged 1-15 ²	20	1.1	cr	1.4	0	
ž	³ Mortality rate, aged 16-24 ²	79	6.0	cr	6.3	0	
	⁴ Active travel to school ⁴	n/a	50.0	%	52.0	0	
φ	⁵ Alcohol related & attributable hospital patients ²	988	77.1	sr	82.9	O	
Behaviours	6 Drug related hospital patients ²	198	52.7	sr	42.4		
aha	⁷ Smoking prevalence, age 15 ⁴	n/a	16.3	%	15.1	Δ	
ă	⁸ Alcohol use, age 15 ⁴	n/a	30.9	%	29.6	Δ	
	9 Drug use, age 15 4	n/a	10.4	%	6.8	Δ	
	10 Road traffic accidents ²	246	70.2	sr	87.9	0	
	11 Emergency admission hospital patients ²	8,995	4,909.0	sr	5,541.1	0	
	12 Child dental health in primary 1	1,760	64.7	%	61.8	O	
Physical Health	13 Unintentional injuries in the home, < 15 years ²	618	355.5	sr	377.5	0	
₹ =	14 Extraction of multiple teeth, aged 0-15 ²	231	112.4	sr	898.8		0
	15 Asthma hospital patients, aged 0-15 ²	705	369.1	sr	382.1	O	
	16 Child obesity in primary 1	n/a	7.5	%	8.0		
Mental Health	17 Deaths from suicide ³	92	7.8	sr	6.7	0	
	18 Strengths & difficulties score 4	n/a	12.9	mean	12.3		
Social	19 Children looked after by Local Authority 1, 4	799	10.1	cr	13.8	0	
တ္တိ ဗီ	²⁰ Child protection referrals ^{1,4}	1,467	22.6	cr	13.9	0	
	²¹ Education outcomes for looked after children ⁴	n/a		mean	63.0		
Education	22 Secondary school attendance	n/a	90.4	%	91.1	•	
on B.	23 Primary school attendance	n/a	95.2	%	95.2		
	24 Attainment of National Qualifications for S4	n/a	170.9	mean	179.7	Δ	
Access	25 Residence in 'access deprived' areas	11,488	10.5	%	14.8	0	
ĭ, ĭ	26 Reliance on out of work benefits / child tax credit	40,140	47.8	%	46.6		
Employment & Prosperity	²⁷ Not in education, employment or training ⁴	5,490	9.6	%	8.8		
P of P	28 School leavers - positive & sustained destinations	3,346	85.8	%	85.7		
ய்≪	29 Residence in 'income deprived' areas	13,054	12.0	%	16.5	0	
	30 Assault hospital patients ²	449	120.2	sr	110.5	O	
Crime	31 Referrals to SCRA for violence-related offences 1	158	4.8	cr	8.4	•	
L	32 Residence in 'crime deprived' areas	16,094	14.7	%	15.8	0	
	33 Immunisation uptake at 24 months - all excl MMR ²	11,582	97.7	%	97.5	0	- 1
> -	34 Immunisation uptake at 24 months - MMR ²	10,908	92.0	%	92.1		
anc	35 Babies exclusively breastfed at 6-8 weeks ²	3,198	27.6	%	26.4	0	
Pregnancy & Infancy	36 Teenage pregnancies, <18 years ^{1,2}	956	47.3	cr	41.4	0	
<u>~</u> ~	37 Mothers smoking during pregnancy ²	3,018	25.6	%	22.6	•	
	38 Low weight live births ²	257	2.3	%	2.3	O	

Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007–09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

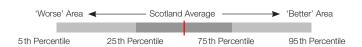
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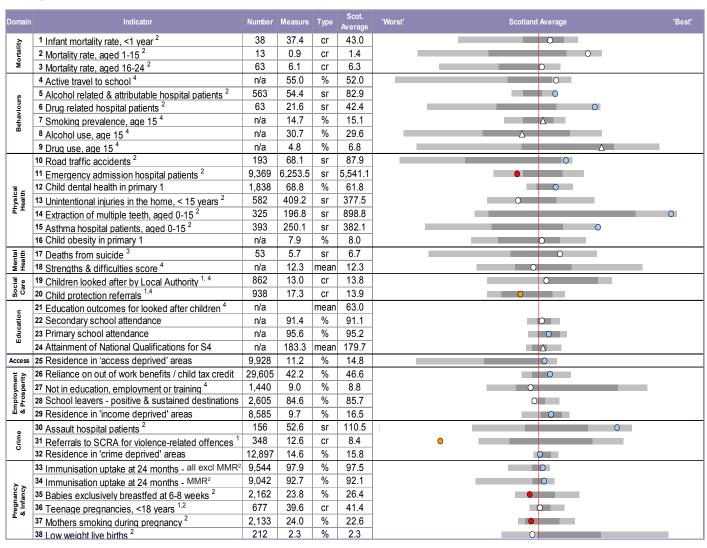
Key to type of measure: n/a = data not available, or cannot be calculated; cr = crude rate (see technical report); sr = age—sex standardised rate per 100,000 population; % = per cent; mean = average

Forth Valley

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Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

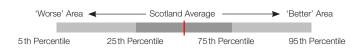
Footnotes: 1 Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation; 2 Three-year combined number, and three-year annual average measure; 3 Ten-year combined number, and ten-year annual average measure; 4 Data not available below local authority level

Key to type of measure: n/a = data not available, or cannot be calculated; cr = crude rate (see technical report); sr = age-sex standardised rate per 100,000 population; % = per cent; mean = average

Grampian

Note that values that are not significantly different from the Scottish average, or that are significantly better, may still indicate an important public health problem. For figures based on small numbers, data may be suppressed. For further information see the technical report.

- Statistically significantly 'worse' than Scottish average
- O Statistically not significantly different from Scottish average
- O Statistically significantly 'better' than Scottish average
- Statistically significant difference compared with Scottish average
- \triangle No significance can be calculated



Domain		Number	Measure	Туре	Scot. Average	'Worst' Scotland Average 'Best'
₽	1 Infant mortality rate, <1 year 2	58	31.0	cr	43.0	
Mortality	² Mortality rate, aged 1-15 ²	29	1.1	cr	1.4	0
Š	³ Mortality rate, aged 16-24 ²	119	6.3	cr	6.3	O O
	4 Active travel to school 4	n/a	55.0	%	52.0	0
ē	⁵ Alcohol related & attributable hospital patients ²	1,775	93.3	sr	82.9	
Behaviours	⁶ Drug related hospital patients ²	237	43.7	sr	42.4	O
eha	⁷ Smoking prevalence, age 15 ⁴	n/a	14.1	%	15.1	Δ
<u> </u>	8 Alcohol use, age 15 4	n/a	29.8	%	29.6	Δ
	⁹ Drug use, age 15 ⁴	n/a	4.1	%	6.8	Δ
	10 Road traffic accidents ²	751	145.9	sr	87.9	
	11 Emergency admission hospital patients ²	16,177	6,052.4	sr	5,541.1	•
<u> </u>	12 Child dental health in primary 1	2,366	66.1	%	61.8	0
Physical Health	13 Unintentional injuries in the home, < 15 years ²	1,177	472.8	sr	377.5	
£ =	14 Extraction of multiple teeth, aged 0-15 ²	738	258.2	sr	898.8	0
	15 Asthma hospital patients, aged 0-15 ²	1,132	387.9	sr	382.1	O
	16 Child obesity in primary 1	n/a		%	8.0	
Mental	17 Deaths from suicide ³	79	4.5	sr	6.7	0
	18 Strengths & difficulties score 4	n/a	12.3	mean	12.3	
Social	19 Children looked after by Local Authority 1, 4	1,370	11.8	cr	13.8	0
တ္တိ ပိ	²⁰ Child protection referrals ^{1,4}	1,028	10.8	cr	13.9	
_	²¹ Education outcomes for looked after children ⁴	n/a		mean	63.0	
Education	22 Secondary school attendance	n/a	92.1	%	91.1	0
one	23 Primary school attendance	n/a	95.7	%	95.2	0
	24 Attainment of National Qualifications for S4	n/a	185.9	mean	179.7	Δ
Access	25 Residence in 'access deprived' areas	42,746	27.1	%	14.8	
ţ≥	26 Reliance on out of work benefits / child tax credit	41,375	33.9	%	46.6	0
Employment & Prosperity	²⁷ Not in education, employment or training ⁴	1,560	5.8	%	8.8	0
9 g g	28 School leavers - positive & sustained destinations	4,793	87.4	%	85.7	O
ய்≪	29 Residence in 'income deprived' areas	5,651	3.6	%	16.5	0
	30 Assault hospital patients ²	599	111.2	sr	110.5	
Crime	31 Referrals to SCRA for violence-related offences 1	367	7.6	cr	8.4	0
	32 Residence in 'crime deprived' areas	20,718	13.1	%	15.8	0
	33 Immunisation uptake at 24 months - all excl MMR ²	16,258	97.5	%	97.5	•
> -	34 Immunisation uptake at 24 months - MMR ²	15,534	93.2	%	92.1	
anc	35 Babies exclusively breastfed at 6-8 weeks ²	n/a		%	26.4	
Pregnancy & Infancy	36 Teenage pregnancies, <18 years ^{1,2}	1,029	34.7	cr	41.4	0
- w	37 Mothers smoking during pregnancy ²	3,516	20.3	%	22.6	
	38 Low weight live births ²	315	1.9	%	2.3	0

Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007–09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007-09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

Footnotes: 1 Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation; 2 Three-year combined number, and three-year annual average measure; 3 Ten-year combined number, and ten-year annual average measure; 4 Data not available below local authority level

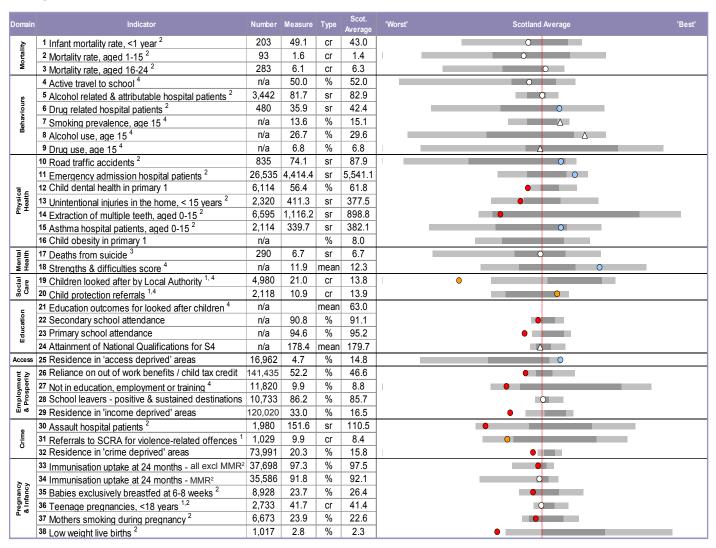
Key to type of measure: n/a = data not available, or cannot be calculated; cr = crude rate (see technical report); sr = age—sex standardised rate per 100,000 population; % = per cent; mean = average

Greater Glasgow and Clyde

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Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

Footnotes: 1 Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation; 2 Three-year combined number, and three-year annual average measure; 3 Ten-year combined number, and ten-year annual average measure; 4 Data not available below local authority level

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Highland

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Domain	Indicator	Number	Measure	Туре	Scot. Average	'Worst' Scotland Average	'Best'
≛	1 Infant mortality rate, <1 year 2	26	27.2	cr	43.0	0	
Mortality	² Mortality rate, aged 1-15 ²	29	1.9	cr	1.4	0	
ž	³ Mortality rate, aged 16-24 ²	79	8.8	cr	6.3		
	⁴ Active travel to school ⁴	n/a	52.0	%	52.0		
စ	⁵ Alcohol related & attributable hospital patients ²	1,058	97.3	sr	82.9		
je je	⁶ Drug related hospital patients ²	139	53.5	sr	42.4		
Behaviours	⁷ Smoking prevalence, age 15 ⁴	n/a	11.6	%	15.1	Δ	
	8 Alcohol use, age 15 4	n/a	25.5	%	29.6	Δ	
	⁹ Drug use, age 15 ⁴	n/a	4.3	%	6.8	Δ	
	10 Road traffic accidents ²	353	130.9	sr	87.9		
	11 Emergency admission hospital patients ²	8,159	5,441.4	sr	5,541.1	1	
<u> </u>	12 Child dental health in primary 1	1,623	61.3	%	61.8		
Physical Health	13 Unintentional injuries in the home, < 15 years ²	475	345.9	sr	377.5	0	
± =	14 Extraction of multiple teeth, aged 0-15 ²	1,855	1,178.0	sr	898.8		
	15 Asthma hospital patients, aged 0-15 ²	761	459.8	sr	382.1		
	16 Child obesity in primary 1	n/a	10.1	%	8.0		
Mental Health	17 Deaths from suicide 3	67	7.8	sr	6.7	0	
He A	¹⁸ Strengths & difficulties score ⁴	n/a	12.2	mean	12.3	0	
Social	19 Children looked after by Local Authority 1, 4	660	10.1	cr	13.8	0	
တို့ ဗီ	²⁰ Child protection referrals ^{1,4}	785	14.5	cr	13.9	O	
_	²¹ Education outcomes for looked after children ⁴	n/a		mean	63.0		
Education	22 Secondary school attendance	n/a	91.3	%	91.1	0	
on Di	23 Primary school attendance	n/a	95.5	%	95.2	0	
	24 Attainment of National Qualifications for S4	n/a	186.3	mean	179.7	Δ	
Access	25 Residence in 'access deprived' areas	38,579	45.8	%	14.8		
Ę≥	26 Reliance on out of work benefits / child tax credit	32,955	47.9	%	46.6		
Employment & Prosperity	²⁷ Not in education, employment or training ⁴	2,780	7.9	%	8.8	0	
P S	28 School leavers - positive & sustained destinations	3,050	85.8	%	85.7		
ம்⊲	29 Residence in 'income deprived' areas	6,256	7.4	%	16.5		
	30 Assault hospital patients 2	232	83.9	sr	110.5	0	
Crime	31 Referrals to SCRA for violence-related offences 1	269	9.4	cr	8.4	0	
L	32 Residence in 'crime deprived' areas	10,610	12.6	%	15.8	0	
	33 Immunisation uptake at 24 months - all excl MMR ²	8,837	96.6	%	97.5	•	
> >	34 Immunisation uptake at 24 months - MMR ²	8,109	88.6	%	92.1		
anc	35 Babies exclusively breastfed at 6-8 weeks ²	1,767	32.6	%	26.4	0	
Pregnancy & Infancy	36 Teenage pregnancies, <18 years ^{1,2}	575	33.3	cr	41.4	0	
~ ~	37 Mothers smoking during pregnancy ²	1,932	23.9	%	22.6		
	38 Low weight live births ²	147	1.9	%	2.3	0	

Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007–09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007-09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

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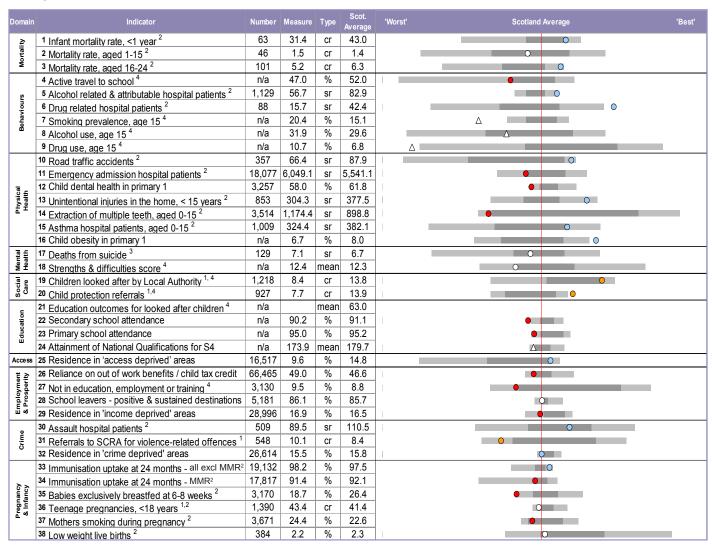
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Lanarkshire

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Lothian

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Domain	Indicator	Number	Measure	Туре	Scot. Average	'Worst' Scotland Average 'Best
₹	1 Infant mortality rate, <1 year 2	111	38.3	cr	43.0	0
Mortality	² Mortality rate, aged 1-15 ²	42	1.1	cr	1.4	0
ĕ	³ Mortality rate, aged 16-24 ²	152	4.8	cr	6.3	
	4 Active travel to school 4	n/a	62.0	%	52.0	0
و	⁵ Alcohol related & attributable hospital patients ²	2,177	75.8	sr	82.9	O
Behaviours	⁶ Drug related hospital patients ²	405	44.6	sr	42.4	O
e ha	⁷ Smoking prevalence, age 15 ⁴	n/a	15.8	%	15.1	
<u> </u>	⁸ Alcohol use, age 15 ⁴	n/a	29.7	%	29.6	<u> </u>
	⁹ Drug use, age 15 ⁴	n/a	7.4	%	6.8	Δ
	10 Road traffic accidents ²	462	57.8	sr	87.9	0
	11 Emergency admission hospital patients ²	20,867	5,246.6	sr	5,541.1	
<u>,,</u>	12 Child dental health in primary 1	4,663	65.8	%	61.8	0
Physical Health	13 Unintentional injuries in the home, < 15 years ²	1,195	314.0	sr	377.5	0
E =	14 Extraction of multiple teeth, aged 0-15 ²	4,116	1,030.0	sr	898.8	
	15 Asthma hospital patients, aged 0-15 ²	1,516	364.7	sr	382.1	0
	16 Child obesity in primary 1	n/a	8.6	%	8.0	
It a	17 Deaths from suicide 3	162	5.7	sr	6.7	0
Mental Health	18 Strengths & difficulties score 4	n/a	12.4	mean	12.3	0
Social	19 Children looked after by Local Authority 1, 4	2,289	13.4	cr	13.8	0
Soc	20 Child protection referrals 1,4	3,090	22.2	cr	13.9	0
_	²¹ Education outcomes for looked after children ⁴	n/a		mean	63.0	
Education	22 Secondary school attendance	n/a	91.3	%	91.1	O
on g	23 Primary school attendance	n/a	95.3	%	95.2	0
	24 Attainment of National Qualifications for S4	n/a	186.8	mean	179.7	
Access	25 Residence in 'access deprived' areas	10,663	4.3	%	14.8	
# ¥	26 Reliance on out of work benefits / child tax credit	75,200	41.7	%	46.6	
Employment & Prosperity	²⁷ Not in education, employment or training ⁴	3,570	8.7	%	8.8	0
Pros	28 School leavers - positive & sustained destinations	5,880	81.9	%	85.7	•
ந்≪	29 Residence in 'income deprived' areas	24,328	9.9	%	16.5	0
	30 Assault hospital patients ²	612	70.6	sr	110.5	0
Crime	31 Referrals to SCRA for violence-related offences 1	394	5.7	cr	8.4	0
	32 Residence in 'crime deprived' areas	41,725	17.0	%	15.8	
	33 Immunisation uptake at 24 months - all excl MMR ²	25,269	97.5	%	97.5	•
> <	34 Immunisation uptake at 24 months - MMR ²	24,023	92.7	%	92.1	0
ancy	35 Babies exclusively breastfed at 6-8 weeks ²	9,733	35.8	%	26.4	0
Pregnancy & Infancy	³⁶ Teenage pregnancies, <18 years ^{1,2}	1,709	40.7	cr	41.4	
• "	37 Mothers smoking during pregnancy ²	3,945	15.3	%	22.6	0
	38 Low weight live births ²	557	2.2	%	2.3	0

Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007–09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

Footnotes: 1 Denotes indicator where categorisation as better or worse than Scottish average is not appropriate and data are subject to local interpretation; 2 Three-year combined number, and three-year annual average measure; 3 Ten-year combined number, and ten-year annual average measure; 4 Data not available below local authority level

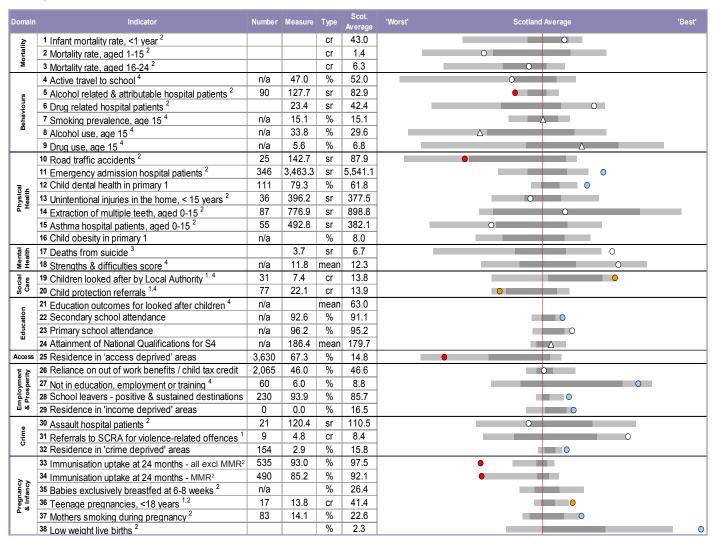
Key to type of measure: n/a = data not available, or cannot be calculated; cr = crude rate (see technical report); sr = age—sex standardised rate per 100,000 population; % = per cent; mean = average

Orkney

Note that values that are not significantly different from the Scottish average, or that are significantly better, may still indicate an important public health problem. For figures based on small numbers, data may be suppressed. For further information see the technical report.

- Statistically significantly 'worse' than Scottish average
- O Statistically not significantly different from Scottish average
- Statistically significantly 'better' than Scottish average
- Statistically significant difference compared with Scottish average
- \triangle No significance can be calculated





Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

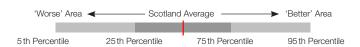
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Scottish Borders

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- \triangle No significance can be calculated



Domain		Number	Measure	Туре	Scot. Average	"Worst" Scotland Average 'Best'
₹	1 Infant mortality rate, <1 year ²	8	22.9	cr	43.0	0
Mortality	² Mortality rate, aged 1-15 ²	11	1.9	cr	1.4	0
Š	³ Mortality rate, aged 16-24 ²	28	8.9	cr	6.3	0
Behaviours	⁴ Active travel to school ⁴	n/a	55.0	%	52.0	O
	⁵ Alcohol related & attributable hospital patients ²	423	107.2	sr	82.9	•
	⁶ Drug related hospital patients ²	60	67.8	sr	42.4	
aha v	⁷ Smoking prevalence, age 15 ⁴	n/a	14.2	%	15.1	Δ
ă	⁸ Alcohol use, age 15 ⁴	n/a	39.5	%	29.6	Δ
	⁹ Drug use, age 15 ⁴	n/a	9.1	%	6.8	Δ
	10 Road traffic accidents ²	102	108.0	sr	87.9	
	11 Emergency admission hospital patients ²	2,863	5,034.3	sr	5,541.1	
- -	12 Child dental health in primary 1	741	73.4	%	61.8	0
Physical Health	13 Unintentional injuries in the home, < 15 years ²	185	356.9	sr	377.5	
Ę, Ŧ	14 Extraction of multiple teeth, aged 0-15 ²	614	1,008.9	sr	898.8	
	15 Asthma hospital patients, aged 0-15 ²	148	254.5	sr	382.1	0
	16 Child obesity in primary 1	n/a	7.6	%	8.0	0
≣ ⊊	17 Deaths from suicide ³	26	10.1	sr	6.7	0
Mental Health	18 Strengths & difficulties score 4	n/a	12.4	mean	12.3	0
	19 Children looked after by Local Authority 1, 4	193	8.0	cr	13.8	0
Social	20 Child protection referrals ^{1,4}	266	13.2	cr	13.9	
	²¹ Education outcomes for looked after children ⁴	n/a		mean	63.0	
Education	22 Secondary school attendance	n/a	92.5	%	91.1	0
g	23 Primary school attendance	n/a	96.2	%	95.2	0
ш	24 Attainment of National Qualifications for S4	n/a	183.1	mean	179.7	
Access	25 Residence in 'access deprived' areas	9,697	31.6	%	14.8	
ξÞ	26 Reliance on out of work benefits / child tax credit	11,440	45.0	%	46.6	0
Employment & Prosperity	²⁷ Not in education, employment or training ⁴	450	8.5	%	8.8	
of Sor	28 School leavers - positive & sustained destinations	1,059	87.4	%	85.7	0
ᄪᆇ	29 Residence in 'income deprived' areas	1,440	4.7	%	16.5	0
	30 Assault hospital patients 2	127	138.2	sr	110.5	
Crime	31 Referrals to SCRA for violence-related offences 1	63	6.1	cr	8.4	0
l °	32 Residence in 'crime deprived' areas	2,388	7.8	%	15.8	
	33 Immunisation uptake at 24 months - all excl MMR ²	3,253	97.4	%	97.5	O
2.2	34 Immunisation uptake at 24 months - MMR ²	3,087	92.4	%	92.1	
	35 Babies exclusively breastfed at 6-8 weeks ²	955	31.3	%	26.4	0
egn Infa	36 Teenage pregnancies, <18 years ^{1,2}	182	29.3	cr	41.4	
F .00	37 Mothers smoking during pregnancy ²	751	24.8	%	22.6	•
	38 Low weight live births ²	77	2.6	%	2.3	0

Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007–09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007-09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

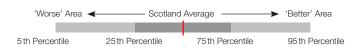
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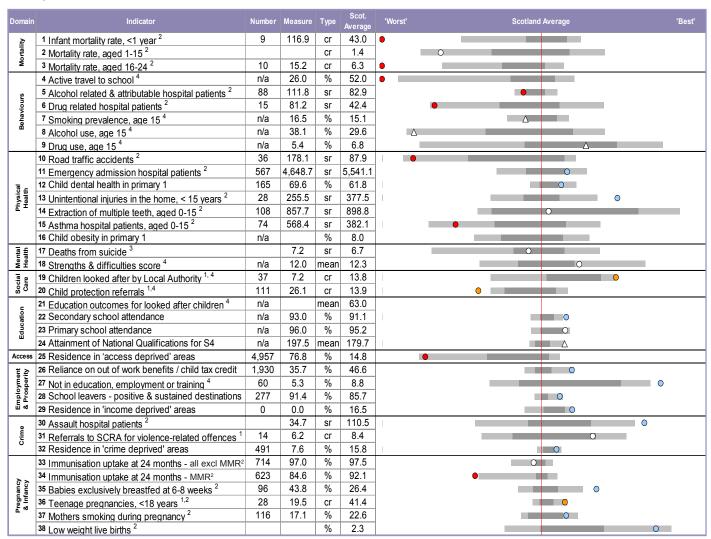
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Shetland

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- O Statistically not significantly different from Scottish average
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- Statistically significant difference compared with Scottish average
- \triangle No significance can be calculated





Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007–09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

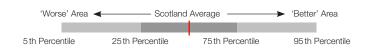
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Tayside

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Domain		Number	Measure	Туре	Scot. Average	'Worst' Scotland Average '	Best'
Mortality	1 Infant mortality rate, <1 year ²	65	50.3	cr	43.0	0	
	² Mortality rate, aged 1-15 ²	32	1.7	cr	1.4	•	
Š	³ Mortality rate, aged 16-24 ²	93	6.4	cr	6.3	O	
Behaviours	4 Active travel to school 4	n/a	52.0	%	52.0		
	⁵ Alcohol related & attributable hospital patients ²	956	68.5	sr	82.9	0	
	⁶ Drug related hospital patients ²	148	35.5	sr	42.4	0	
	⁷ Smoking prevalence, age 15 ⁴	n/a	13.5	%	15.1	Δ	
	⁸ Alcohol use, age 15 ⁴	n/a	24.9	%	29.6	Δ	
	9 Drug use, age 15 4	n/a	6.4	%	6.8	Δ	
	10 Road traffic accidents ²	311	82.1	sr	87.9	0	
	11 Emergency admission hospital patients ²		6,976.9		5,541.1		
<u></u>	12 Child dental health in primary 1	2,256	61.7	%	61.8		
Physical Health	13 Unintentional injuries in the home, < 15 years ²	662	367.6	sr	377.5	0	
T T	14 Extraction of multiple teeth, aged 0-15 ²	2,364	1,200.7	sr	898.8	•	
	15 Asthma hospital patients, aged 0-15 ²	777	394.0	sr	382.1	O	
	16 Child obesity in primary 1	n/a	8.8	%	8.0	O	
Mental Health	17 Deaths from suicide ³	72	5.5	sr	6.7	O	
	18 Strengths & difficulties score 4	n/a	12.1	mean	12.3	0	
Social	19 Children looked after by Local Authority 1, 4	1,045	12.5	cr	13.8	0	
တ္တိလိ	²⁰ Child protection referrals ^{1,4}	636	9.3	cr	13.9	0	
_	21 Education outcomes for looked after children 4	n/a		mean	63.0		
Education	22 Secondary school attendance	n/a	91.3	%	91.1	O	
gno	23 Primary school attendance	n/a	95.2	%	95.2		
	24 Attainment of National Qualifications for S4	n/a	170.3	mean	179.7	Δ	
Access	25 Residence in 'access deprived' areas	22,129	19.0	%	14.8		
Ę₽	26 Reliance on out of work benefits / child tax credit	41,930	47.3	%	46.6		
Employment & Prosperity	²⁷ Not in education, employment or training ⁴	1,680	8.3	%	8.8	O	
Pros	28 School leavers - positive & sustained destinations	3,465	85.6	%	85.7		
Ēα	29 Residence in 'income deprived' areas	19,085	16.4	%	16.5	•	
	30 Assault hospital patients ²	344	83.6	sr	110.5	0	
	31 Referrals to SCRA for violence-related offences 1	244	7.0	cr	8.4	0	
	32 Residence in 'crime deprived' areas	16,249	13.9	%	15.8	0	
2.2	33 Immunisation uptake at 24 months - all excl MMR ²	11,802	97.4	%	97.5		
	34 Immunisation uptake at 24 months - MMR ²	11,180	92.3	%	92.1		
	35 Babies exclusively breastfed at 6-8 weeks ²	3,343	27.5	%	26.4	<u> </u>	
regn .	³⁶ Teenage pregnancies, <18 years ^{1,2}	1,132	52.7	cr	41.4	•	
<u>~</u> ~	37 Mothers smoking during pregnancy ²	2,658	26.5	%	22.6	•	
	38 I ow weight live births ²	231	2.1	%	2.3	0	

Notes on indicators, by indicator number [year of data shown]: 1-3 Crude rate per 10,000 population [2007-09]; 4 % children walking or cycling to school [2007/08]; 5 Aged 15-24 [2007-09]; 6 Aged 0-24 [2007-09]; 7 % smoking at least one cigarette a week [2006]; 8 % who usually drink alcohol at least once a week [2006]; 9 % who usually take illicit drugs at least once a month [2006]; 10 Patients aged 0-24 discharged from hospital after a road traffic accident emergency admission [2007-09]; 11 Aged 0-15 [2007-09]; 12 % with no obvious decay experience from basic inspection [2008/09]; 13 Emergency hospital admissions for unintentional injury in the home [2007-09]; 14 Hospital admissions (inpatients and day cases) for extraction of multiple teeth [2007-09]; 15 [2007-09]; 16 % children with BMI in the top 5% of the UK reference range [2008/09]; 17 Aged 0-24 [2000-09]; 18 Total difficulties score, aged 13 & 15 [2006]; 19 Children looked after by local authority, aged 0-18, crude rate per 1,000 population [2009]; 20 Child protection referrals, aged 0-15, crude rate per 1,000 population [2009]; 21 Average tariff score, S4 pupils [2008/09]; 22 Attendance rate, publicly funded secondary schools [2008/09]; 23 Attendance rate, publicly funded primary schools [2008/09]; 24 Average tariff score [2008/09]; 25 % aged 0-24 living in datazones which are in the 15% most 'access deprived' in Scotland [2008]; 26 % of children aged 0-19 in households dependent on out of work benefits or child tax credit more than the family element [2008]; 27 % of young people aged 16-19 not in education, employment or training [2008]; 28 % school leavers in positive and sustained destinations [2008/09]; 29 % aged 0-24 living in datazones which are in the 15% most 'income deprived' in Scotland [2008]; 30 Aged 0-24 [2007-09]; 31 Referrals to SCRA (Scottish Children's Reporter Administration) for violence-related offences, aged 8-15, crude rate per 1,000 population [2009/10]; 32 % aged 0-24 living in datazones which are in the 15% most 'crime deprived' in Scotland [2008]; 33 [2006-08]; 34 [2006-08]; 35 [2006-08]; 36 Crude rate per 1,000 population [2006-08]; 37 Women smoking at antenatal booking appointment [2006-08] 08]; 38 % of all full-term singleton births weighing <2,500 g [2006–08]

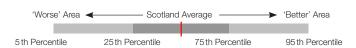
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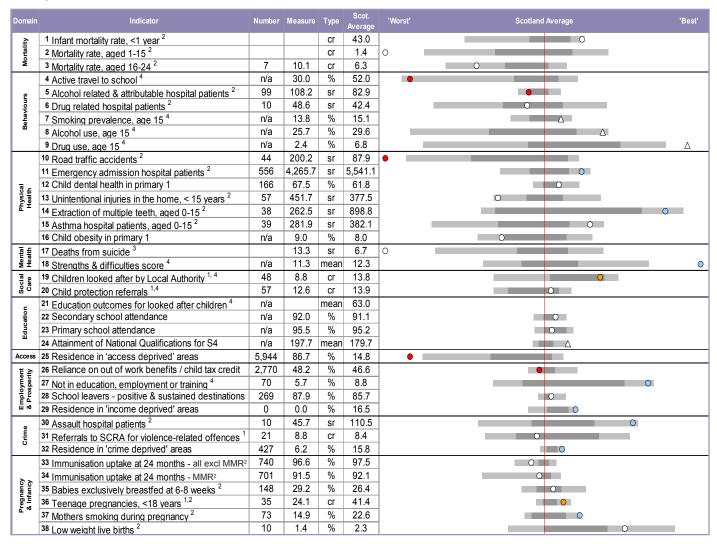
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Western Isles

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