Use of children and young people’s profiles in Glasgow

Bruce Whyte (bruce.whyte@glasgow.ac.uk)

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Previous work

- Let Glasgow Flourish
- Community health profiles (2008)
- Miniature Glasgow
- Understanding Glasgow
- New health profiles (2014)
Children and young people’s profiles of Glasgow – from inception to dissemination

- The profiles were the result of several years of planning

- The planning and production was led by the Glasgow Centre for Population Health with guidance from a multi-agency advisory group

- The advisory group included representatives from: GCPH, NHS GGC, ISD Scotland, Glasgow City Health & Social Care Partnership, Glasgow Community Safety Partnership, SCRA, Urban Big Data Centre, University of Glasgow, Health Scotland and Glasgow City Council

- The work to create them was then completed over a seven month period by a team of analysts from ISD, under the supervision of a GCPH programme manager

- In addition to the profiles, a sub-group of the advisory group created nine Evidence for Action briefings to complement the profiles data.

- 60 children and young people’s profiles of Glasgow and its neighbourhoods and 9 Evidence for Action Briefings were published by GCPH in December 2017

- Since publication members of the advisory group have given 41+ presentations about the profiles to raise awareness of them and to encourage their use.
Aims

Created to inform children's services planning and delivery in Glasgow, including planning and evaluation of new models of family support and early learning and child care in the city

But also to:

• To provide accessible and up to date population health and wellbeing information for planners and local communities

• To illustrate children’s life circumstances and outcomes across Glasgow neighbourhoods.

• To highlight health and socioeconomic inequalities

• To provide a better understanding of local circumstances in order to plan services, to monitor progress, for targeting resources and priority setting
Content and coverage

• Indicators from a range of administrative sources and surveys

• Themes covered include: demography; infant health; culture and environment; crime and safety; socio-economic factors; learning and education; health and wellbeing

• **Coverage:** 56 Glasgow neighbourhoods, 3 localities (North West, North East and South Glasgow) and Glasgow as a whole

• **Format:** web pages (graphs, descriptive text), pdfs, excel workbook, interactive pages, Evidence for Action briefings
Understanding Glasgow sets out to describe life circumstances and health in the city. Here you will find key indicators, showing trends and comparisons within the city and with other cities.

We hope what you find will be of interest and will encourage you to discuss and think about the future of our city.

New to the site? Watch our introductory video!

Comments or suggestions?

Latest news and updates
Keep up with new data and resources on the site.
News

Films
Access our selection of video content.
Watch films

New to the site?
Watch our short film 'Exploring Understanding Glasgow'.
View now

Take our survey!
How well are we describing your neighbourhood?
Find out more
Glasgow

The profiles on these pages provide a comprehensive overview of health and wellbeing in Glasgow. There are 60 profiles in total, covering Glasgow as a whole, the three sub-sectors of the city (North East, North West and South Glasgow) and 56 neighbourhoods across the city. They highlight differences in health and life circumstances across the city for a range of indicators organised under broad themes: population; cultural factors; environment and transport; socioeconomic factors; education; poverty; and health. The profiles are intended to be a resource for local communities and to inform action at neighbourhood level.

Search by postcode [ ] SEARCH OR Select location [ Select... ]

View by [ SECTOR ] or [ NEIGHBOURHOOD ]

[Map of Glasgow]
Children and Young People’s Profile for Pollok

Pollok has a population of 3,510 children and young people (aged 0-24 years).

**Neighbourhood Trends**

- **Young Population by Age Group**
  - 0-4 years
  - 5-11 years
  - 12-17 years
  - 18-24 years

- **Healthy Life Expectancy (2011)**
  - Male
  - Female

- The number of 18-24 year olds in Pollok has decreased by 11% since 2011, while the number of 0-4 year olds has increased by 2%. Healthy life expectancy for males is approximately 3 years higher than Glasgow as a whole and 2 years higher for females.

**Neighbourhood Comparisons with Glasgow**

- The proportion of school age children in Pollok is markedly higher than Glasgow as a whole. 12% of under 25s are from a minority ethnic group. 56% of children live within 400m of green space. The neighbourhood has fewer referrals to the Scottish Children’s Reporter Administration (-34%), fewer offenders (-40%) and victims of crime (-26%) and less overcrowding (-37%) than in Glasgow overall. S4 pupil attainment is higher (+14%) than the Glasgow average and fewer 16-19 year olds are not in employment, education or training (-38%). Likely development difficulties in pre-school children are lower than the Glasgow average (-3%) and communication delay in young children is also lower than average (-26%).

**Domain Indicators**

<table>
<thead>
<tr>
<th>Domain</th>
<th>Indicator</th>
<th>Count</th>
<th>Rate</th>
<th>Difference from Glasgow</th>
<th>Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demography</td>
<td>Population aged 0 to 1</td>
<td>609</td>
<td>6%</td>
<td>-</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Population aged 5 to 11</td>
<td>950</td>
<td>8%</td>
<td>+10%</td>
<td>2016</td>
</tr>
<tr>
<td></td>
<td>Population aged 12 to 17</td>
<td>885</td>
<td>7%</td>
<td>+35%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Population aged 18 to 24</td>
<td>1,208</td>
<td>8%</td>
<td>-15%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Birth rate (per 1,000 pop/n)</td>
<td>145</td>
<td>12%</td>
<td>-3%</td>
<td>2016</td>
</tr>
<tr>
<td></td>
<td>Under 25a from a minority ethnic group</td>
<td>449</td>
<td>12%</td>
<td>-20%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Infants who sleep in the supine position</td>
<td>104</td>
<td>95%</td>
<td>+10%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Babies exposed to passive smoking</td>
<td>N/A</td>
<td>18%</td>
<td>+10%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Babies with birth weight below 2500g</td>
<td>13</td>
<td>4%</td>
<td>+46%</td>
<td>2013</td>
</tr>
<tr>
<td></td>
<td>Children who walk to primary school</td>
<td>216</td>
<td>56%</td>
<td>-5%</td>
<td>2008/2015</td>
</tr>
<tr>
<td></td>
<td>Under 16a living within 400m of green space</td>
<td>447</td>
<td>56%</td>
<td>-30%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>P1 children who are obese or severely obese</td>
<td>N/A</td>
<td>4%</td>
<td>-54%</td>
<td>2013</td>
</tr>
<tr>
<td></td>
<td>Hospitalisations for dental treatment (per 1,000 pop/n under 16)</td>
<td>37</td>
<td>16.8</td>
<td>+12%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Referrals to Scottish Children’s Reporter Administration</td>
<td>25</td>
<td>4%</td>
<td>+26%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Offenders (per 1,000 pop aged 8 to 18)</td>
<td>22</td>
<td>18%</td>
<td>-40%</td>
<td>2015/2016</td>
</tr>
<tr>
<td></td>
<td>Victims of crime (per 1,000 pop aged 8 to 18)</td>
<td>25</td>
<td>15%</td>
<td>-1%</td>
<td>2015/2016</td>
</tr>
<tr>
<td></td>
<td>Emergency hospitalisations due to assault (per 1,000 pop aged 8 to 18)</td>
<td>N/A</td>
<td>1%</td>
<td>-5%</td>
<td>2013</td>
</tr>
<tr>
<td></td>
<td>Emergency hospitalisations for unintentional injuries (per 1,000 pop aged 8 to 18)</td>
<td>N/A</td>
<td>10%</td>
<td>+46%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Children who are in poverty</td>
<td>600</td>
<td>23%</td>
<td>-21%</td>
<td>2013</td>
</tr>
<tr>
<td></td>
<td>Lone parent households</td>
<td>463</td>
<td>29%</td>
<td>-21%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Overcrowded households with children</td>
<td>253</td>
<td>11%</td>
<td>-57%</td>
<td>2015/2016</td>
</tr>
<tr>
<td></td>
<td>Children with communication delay at 27 to 30 months</td>
<td>45</td>
<td>18%</td>
<td>-26%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>S4 pupils achieving 5 or more qualifications at SCQF Level 5</td>
<td>68</td>
<td>39%</td>
<td>+14%</td>
<td>2012/2013</td>
</tr>
<tr>
<td></td>
<td>Secondary school attendance</td>
<td>N/A</td>
<td>93%</td>
<td>-3%</td>
<td>2015/2016</td>
</tr>
<tr>
<td></td>
<td>School leavers with a positive destination</td>
<td>140</td>
<td>91%</td>
<td>+13%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>16 to 19 year olds not in employment, education or training</td>
<td>120</td>
<td>17%</td>
<td>+3%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Referrals to Children and Adolescent Mental Health Services</td>
<td>N/A</td>
<td>7%</td>
<td>-2%</td>
<td>2015/2016</td>
</tr>
<tr>
<td></td>
<td>Male healthy life expectancy (years)</td>
<td>N/A</td>
<td>59.4</td>
<td>-5%</td>
<td>2014</td>
</tr>
<tr>
<td></td>
<td>Female healthy life expectancy (years)</td>
<td>N/A</td>
<td>60.8</td>
<td>-5%</td>
<td>2015</td>
</tr>
<tr>
<td></td>
<td>Under 25a whose day-to-day activities are limited by disability</td>
<td>218</td>
<td>6%</td>
<td>-2%</td>
<td>2015</td>
</tr>
</tbody>
</table>

**Notes**

2. Indicators are aggregated using latest available data (2001 or 2011); neighbourhood boundaries based on 2001 datazones.
3. All count figures of less than 5 (denoted as ‘<5’) have been suppressed to avoid any potential identification.
4. Populations presented in the population trend chart, also used to calculate healthy life expectancy estimates, use NRS small area population estimates for the years 2011 - 2015.
5. ‘Healthy life expectancy’ is an estimate of the average number of years people are likely to spend in good health. It is shorter than ‘life expectancy’ because it excludes years likely to be spent in fair or poor health. It is calculated using population estimates, death registrations and self-assessed health from the 2011 Census.
6. Denotes children referred to the Scottish Children’s Reporter Administration for an offence or non-offence related reason.
7. A notes and definitions document providing further information on the indicators presented in the profile can be found in the Profiles section of www.understandingglasgow.com/profiles.
Interactive Children and Young People’s Data

This interactive tool allows you to view an extended set of children’s indicators for Glasgow’s neighbourhoods and sectors. You can use the menu tabs above to flip between map and spine chart views and between neighbourhood data and sector data.

Please note this interactive tool does not currently work with Internet Explorer and we are working to resolve this issue.

Select a neighbourhood

Anniesland, Jordanhill and Whiteinch

Select a comparator

Glasgow

Anniesland, Jordanhill and Whiteinch: Spine chart

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Count</th>
<th>Rate</th>
<th>Difference from Glasgow</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population aged 0 to 4</td>
<td>619</td>
<td>6.0</td>
<td></td>
</tr>
<tr>
<td>Population aged 5 to 11</td>
<td>903</td>
<td>8.7</td>
<td></td>
</tr>
<tr>
<td>Population aged 12 to 17</td>
<td>682</td>
<td>6.6</td>
<td></td>
</tr>
<tr>
<td>Population aged 18 to 24</td>
<td>735</td>
<td>7.1</td>
<td></td>
</tr>
<tr>
<td>Under 25s from a minority ethnic group</td>
<td>308</td>
<td>10.0</td>
<td></td>
</tr>
<tr>
<td>Children (under 16) living within 500m of vacant or derelict land</td>
<td>787</td>
<td>26.2</td>
<td></td>
</tr>
<tr>
<td>Off-licensed premises (per 1,000 pop’n under 18)</td>
<td>6</td>
<td>2.7</td>
<td></td>
</tr>
<tr>
<td>Pre-school children with likely development difficulties</td>
<td>N/A</td>
<td>2.7</td>
<td></td>
</tr>
<tr>
<td>Children with communication delay at 27 to 30 months</td>
<td>37</td>
<td>15.5</td>
<td></td>
</tr>
<tr>
<td>Infants who sleep in the supine position</td>
<td>81</td>
<td>93.1</td>
<td></td>
</tr>
<tr>
<td>Babies who are exclusively breast-fed at 6 to 8 weeks</td>
<td>37</td>
<td>42.9</td>
<td>+66.9%</td>
</tr>
<tr>
<td>Babies exposed to passive smoking</td>
<td>N/A</td>
<td>5.5</td>
<td>-63.0%</td>
</tr>
<tr>
<td>Lone parent households</td>
<td>348</td>
<td>26.5</td>
<td>-34.3%</td>
</tr>
<tr>
<td>Children in poverty</td>
<td>340</td>
<td>15.6</td>
<td>-46.8%</td>
</tr>
<tr>
<td>16 to 19 year olds not in employment, education or training</td>
<td>87</td>
<td>48.2</td>
<td>-34.1%</td>
</tr>
<tr>
<td>Overcrowded households with children</td>
<td>209</td>
<td>11.9</td>
<td>-34.3%</td>
</tr>
<tr>
<td>Under 25s living in households with no central heating</td>
<td>52</td>
<td>1.7</td>
<td>-35.9%</td>
</tr>
<tr>
<td>Under 25s whose day-to-day activities are limited by disability</td>
<td>144</td>
<td>4.7</td>
<td>-21.2%</td>
</tr>
<tr>
<td>Mothers smoking at health visitor’s first visit</td>
<td>N/A</td>
<td>6.7</td>
<td>-55.2%</td>
</tr>
</tbody>
</table>
Evidence for action briefings

- The briefings aim to link the data in the profiles with the evidence base for action.
- Relevant across a range of settings for those who are planning or providing services e.g. health, social services, education, housing, planning, culture, leisure and the third sector.
- Nine topics – as this was a pilot and we wanted feedback.
Presentations

• Profiles published in early December 2016
• Over 40 separate presentations on the profiles were made post-publication to a range of strategic groups and individuals
• Including:
  – the Children’s Services Executive Group
  – Glasgow HSCP’s Specialist Children’s Services
  – local health improvement teams and senior officers’ groups
  – local (Council) area forums,
  – NHS GGC Public Health Directorate,
  – Primary and Secondary Head Teachers forums
  – community and third sector groups.
Evaluation

- Survey Monkey questionnaire sent to targeted groups and organisations, including who had received a presentation
- Web statistics reviewed via Google analytics
- Some anecdotal responses but not reported in formal evaluation
Comments from HSCP and other staff

“The profiles gather the relevant information into one point which makes it easier to gain an overall perspective of the types of issues having an impact on the young people.”

“Helpful in city wide planning but also when planning new services at a local level. Provides a context and justification for change.”

“Supports Health Improvement staff to plan and allocate their resources accordingly. Using this data combined with local intelligence has been very powerful and encourages partnership working e.g. applying for joint funding bids to support areas of work in specific neighbourhoods/localities.”

“Mainly highlighting value to Clinical colleagues.”

“The profiles are very clear, easy to read and helpful in understanding the issues some C&YP face in different demographics of the north east. The profiles also support and evidence applications for funding programmes for young people in the area”

“We have been able to use these when applying for funding and developing programmes for local communities.”
Comments from teachers

“They help head teachers to reflect on the needs of the community they serve, the problems faced by the families they work with and the potential impacts on learning and teaching.”

“Using the profile for my local area helped me argue my case of specific interventions and supports to be implemented through out PEF money. It allowed me to see trends and data which informed my responses to the 'Closing the Gap' agenda. It was information that otherwise I would have been completely unaware of.”

“The data is as up to date as a lecturer can obtain. Excellent data, explained and packaged very easily…resulting in very engaging material for my National 6 and HNC students”

“I used the data to back up developments under the Cost of the School Day, for evidence that work in this area was required”
Web Stats

In the first 6 months after publication (7 Dec 2016 – 31 May 2017) there were:

• 7913 unique page views of profiles ~ 10% of views on whole Understanding Glasgow site
  – 66% on the static profiles pages
  – 26% on the EfA briefings pages
  – 8% on the interactive profiles page
Conclusions (1)

• Well-received by their main target audience, staff and managers working in health and social care settings, but have also been widely used in schools in Glasgow and by community and third sector groups

• Influential in planning and policy across Glasgow, used to: provide a base of evidence; inform debate; decide in which areas to target resources; encourage working in partnerships; apply for funding; plan services

• The neighbourhood profiles were particularly influential in schools, giving staff a deeper understanding of the make-up of school catchment areas and have informed schools’ Pupil Equity Funding applications

• Users liked compilation of evidence on health and social inequalities into one resource, liked information at a range of geographies and wanted to see the resource updated
Conclusions (2)

- **Support for a variety of formats**: maps (to navigate to profiles), graphs, interpretation text, profiles on web pages, downloadable pdfs (most popular format) and the interactive profile page (least used format).

- **Presentations** helped raise awareness of the profiles and encouraged their use.

- Stronger evidence on the utility of the Evidence for Action briefings is required to inform their future development.

- **Demand for new indicators** e.g. a happiness indicator, literacy levels in primary schools, and measuring screen time.

- **Evaluation is really important** but is difficult to do comprehensively.
Thank you

Email: Bruce.whyte@glasgow.ac.uk
Understanding Glasgow - www.understandingglasgow.com
• GCPH – www.gcph.co.uk
Local Profiling Approaches

Questions

What are the *opportunities* for increasing the use of public health intelligence?

*Should we be linking the production and timing of these resources to planning processes?*

What are the *challenges* in the use of public health intelligence?

What do we need to *know/understand* to produce more useable resources?

*How do we get the balance right between production, dissemination and promoting use of public health intelligence?*

What *creative* things can we do?