

Cheshire West and Chester Council Focus on our Communities

Cheshire West and Chester's

# CHILDREN & YOUNG PEOPLE



### Focus on our Communities

Cheshire West and Chester is made up of many different types of people - with different cultures, beliefs, attitudes and needs. As a service provider, it is essential we understand our communities so that we can improve quality of life, offer excellent customer services and cater for everyone in the best way possible.

'Focus on our Communities' is a series of short reports, each looking at groups that are often hidden or not well known, and who form part of the equality streams covered by the Single Equality Scheme. These reports aim to provide a snapshot of the issues as a spring board to learning more about the residents of Cheshire West and Chester.

The communities considered in the series are:

- The black and minority ethnic community (BME)
- The lesbian, gay and bisexual community (LGB)
- The transgender community
- The disabled community
- Children and young people
- Older people
- The religious community

This particular report focuses on

Cheshire West and Chester's

### CHILDREN & YOUNG PEOPLE



# Further Information

#### 'Communities'

Although we have used the term 'communities', we acknowledge that these communities are made up of very different individuals, with different needs and outlooks. We have grouped them together to help develop our understanding, as they often experience a level of overlap on the key issues they face.

#### Equality and Diversity

Further information on the 'Single Equality Scheme' and 'Equality and Diversity' can be found on the Cheshire West and Chester website at www.cheshirewestandchester.gov.uk/equality

Any comments or questions about equality and diversity should be directed to the Equality and Diversity Managers:

Petra Dexter-Duskova and Angela Doe email: equalities@cheshirewestandchester.gov.uk

#### The Reports

The reports were prepared by the Research, Intelligence and Consultation Team. Information has been gathered from a wide range of local, regional and national data. For further information relating to the reports please contact:

Research, Intelligence & Consultation Manager – Beverley Wilson beverley.wilson@cheshirewestandchester.gov.uk

Research Officer – Helen Pickin helen.pickin@cheshirewestandchester.gov.uk

#### Background

'Focus on our Communities' is a series of short reports looking at communities of interest in Cheshire West and Chester. These communities are linked to the equality streams covered by the Single Equality Scheme. Whilst the reports highlight many difficulties faced by our communities, they do not present the good work done by many Council service areas, partners and the Third Sector in supporting vulnerable groups. Instead, they serve as an introduction to the key issues affecting particular communities. This report looks at children and young people.

#### Summary

- There are 98,100 children and young people aged 24 and under in Cheshire West and Chester. This figure has decreased over the last few years.
- A number of children and young people are classed as 'vulnerable' including young carers, those living in care, young offenders, Gypsy and Traveller children and those living in poverty. These young people are at increased risk of poor health and mental health, criminal activity, drug and alcohol abuse, low educational attainment, future unemployment and deprivation.
- Children and young people's top concern is safety and staying safe. This concern may be even greater for those of diverse backgrounds such as those from black and ethnic minority communities, Gypsy and Travellers, or lesbian, gay and bisexual individuals. Concerns about safety or having negative experiences (such as hate crime) can affect physical and mental health.

# Introduction

In Cheshire West and Chester there is an estimated 98,100 children and young people aged 24 and under (2008 estimate).

#### Definitions

There are many definitions of when a child becomes a young person and this changes with different laws and procedures. Most often, a child is considered to be aged 16 and under and a young person aged 17 to 21 (though in some instances 24). Many relate children and young people to school age, with a child being in primary school under the age of 11 and a young person attending secondary school aged 11 or over.

# Key issues Safety

Safety is one of the biggest issues affecting young people. A recent survey of young people in Cheshire West and Chester revealed:

- 11% were concerned about knife crime
- 10% were concerned about danger on the streets
- 8% were concerned about gangs.

A survey of young people living in Chester revealed that **39% felt very safe in their local area during the day with those living in deprived areas feeling the most unsafe**. Young people who feel unsafe take part in fewer activities, go to public places such as parks and sports facilities less often and spend more time at home. This results in poorer physical and mental health due to less exercise, a lack of social interaction and feeling isolated.

A number of young people choose to spend time in gangs as a means of feeling safe.

Road accidents are a leading cause of death for children and young people.

For those aged 15–19, **three in ten deaths are caused by road traffic accidents**. In three-quarters of accidents the child or young person was the driver or passenger in the vehicle.

#### **Child Protection**

In Cheshire West and Chester, there are 130 children and young people on the child protection register as of 2009. According to the NSPCC:

- there are on average 80 child homicides each year with babies under 1 years old four times as likely to be killed than the average person.
- 6% of children experience serious absence of care at home during childhood.
- 7% of children experience serious physical abuse at the hands of their parents or carers during childhood.
- 1% of children experience sexual abuse by a parent or carer, 3% by another relative, 11% by people known but unrelated to them and 5% by a stranger.

Child abuse is under-reported due to the child's fear of the abuser, of being taken away from their home or feelings of shame. Child abuse can have devastating effects on the child including withdrawal, aggression, anxiety, under-achieving at school, misusing drugs and alcohol, turning to crime, running away from home, self-harming and attempting suicide. In 3 out of 5 incidents of child abuse and neglect, the mother has been subject to domestic violence.

According to the Cheshire Domestic Abuse Partnership, in Cheshire 22% of school pupils have seen adults hurt one another at home and its outreach service supports the mothers of more than 900 children a year. Young people affected by domestic violence may face social exclusion, under achievement at school and youth crime. They are twice as likely to have a mental health disorder and nationally a quarter of homeless 16-25 year olds leave home because of domestic violence.

# Health and Wellbeing

In Cheshire the infant morality rate has risen, most at risk are those from deprived areas. Young people from deprived areas are at higher risk of general poor health due to lack of participation in sport and exercise. A survey in Cheshire West and Chester revealed that almost 19% of 10 and 11 year olds were obese and a further 15% were overweight. Obesity can lead to ill health and affects individuals socially and emotionally through bullying and low self-esteem.

#### Mental health

Western Cheshire PCT (2005) has estimated that in West Cheshire:

- around 3,125 young people between the ages of 5 and 15 have a diagnosable mental disorder (clinical set of symptoms or behaviours)
- a further 3,348 have a mental health problem
- 1,730 have a behaviour disorder
- 1,535 have an emotional disorder, such as anxiety and depression
- 391 have a hyperkinetic disorder such as attention deficit or hyperactivity
- 167 have some other common disorder such as an eating disorder or psychosis.

Those from deprived households are 3 times more likely to have a mental health problem and 73% of young people in residential care have a clinical mental health disorder.

Bullying can be a cause of poor mental health with links to depression, anxiety, self harm and thoughts of suicide.

#### Sexual activity and pregnancy

According to the NSPCC, more than half of young people in the UK will have had their first experience of sex before the age of 16. Those who start having sex at a young age are at greater risk of early pregnancy, health problems and sexual transmitted diseases. In Cheshire:

- Chlamydia screening of 16-24 year olds found 10-11% tested positive (2008/09)
- there are over eight conceptions to women under the age of 18 every week and of these 48% will be terminated (2007)
- the under 18 conception rate is rising in contrast to the rest of England

Pregnancy rates are higher in deprived areas and most teenage parents live in poor quality housing in disadvantaged communities. This is associated with poor general health for both mother and baby, which is further compromised by a delay in uptake of antenatal care due to a fear of telling others of their pregnancy and continued smoking and drinking. Teen mothers can face increased mental problems due to emotional and financial burdens and are more at risk of post-natal depression.

#### Drugs, alcohol and smoking

In a 2008 survey of 11-17 year olds in Chester, 20% revealed they use or have used drugs (rising to 38% for 16 year olds) and an estimated 30% drink alcohol each week. Cannabis and sniffing solvents are the most popular drugs used by young people and there is a notable increase of drug use between the ages of 12 and 13. Young people told Barnando's they use drugs and alcohol to escape from an unhappy life, because others do it, because they are bored and there is a lack of other things to do.

Studies have found drug use and high levels of alcohol consumption to be related to a lack of parental disciple, educational difficulties, running away from home, poor local amenities, problems in the local area such as burglary and poor school attendance. The affects of drugs and alcohol include:

- accidents
- unprotected sex
- school truancy
- · low academic achievement
- · physical illness and mental health disorders
- · anti-social and criminal behaviour
- problems in adulthood including addiction

A survey of those aged 11-17 living in Chester revealed 7% smoke regularly or occasionally and 20% used to smoke or have tried smoking. Those who smoke are more likely to be unhappy with their local area and participate the least in sports and activities due to a lack of things to do, the cost of activities, issues with transport and bullying. They are also less school oriented and worry about family problems, money, self-image and pressure to do well.

### Diversity

#### Lesbian, Gay and Bisexual Youth (LGB)

Key issues for young LGB people include coming out, telling family members, leading a 'double-life' and school. The school report by Stonewall (2006) revealed that:

- 65% of young LGB people have experienced homophobic bullying in school
- 17% have received death threats
- 97% hear derogatory phrases and homophobic language
- Over 60% of young LGB people feel that there are no adults to talk to about gay issues.

Seven out of ten LGB pupils who have experienced bullying say that it has impacted upon their school work and half have skipped school because of it. The NHS has found bullying to be related to self harm and attempted suicide in young LGB people. Many who find themselves rejected by their family are unable to support themselves financially, become homeless, are unable to continue studying and are at increased risk of harm.

#### Disability

According to Barnardos (2004), an estimated 27% of pupils with special needs are in mainstream schools in the UK. Ofsted inspections in 2003 found that **over half of schools had no disability access plans** and of those that did, there was a focus on accommodation. Western Cheshire PCT (2005) estimates that at present in West Cheshire around 159 young people aged 5-19 have a severe learning disability, and of these, it is estimated that around 64 will have significant mental health needs and challenging behaviour.



# Black & Minority Ethnic Groups (BME)

The size of Cheshire West and Chester's Black and Ethnic Minority population is relatively small at 6%. BME groups face disadvantage in accessing public services such as healthcare, education, benefits and social services due to parents being unable to speak English, services being culturally insensitive, parents lacking knowledge of their rights and experiences of prejudice and discrimination. This can lead to BME young people experiencing poorer health and mental health, having higher levels of unemployment, having a poorer education, receiving a lack of support and living in poorer conditions. A key issue for BME young people is experiencing or fearing hate crime and racism within school and education as well as in everyday life. BME young people are from many different backgrounds and each group will have specific issues. Research has revealed that Black and Pakistani school children have the lowest educational attainment; Muslim girls participate in sport and exercise less due to cultural norms and migrant families may depend on their children for translation purposes.

## Employment and Financial Issues

#### Income

In Britain, a three tiered system of minimum wage operates that gives young people a lower rate of pay in employment regardless of their skills or experience. **Over 60% of 16-21 year olds work in low paying jobs** compared to 30% of all other age groups. Many young people leave home at a young age and have the same responsibilities as adults. Age-related pay does not take costs and responsibilities into account, leaving young people struggling to support themselves or their families.

#### Unemployment

National figures show that young people as a group are at high risk of unemployment, particularly those who live in deprived areas and are male. As of October 2009, 2,140 people under the age of 25 in Cheshire West and Chester were without work and claiming benefit. Youth unemployment represented 31% of the total unemployed. Poor health is both a cause and a result of unemployment. Unemployed young people experience more health problems than those who are employed, including lower levels of general health, more anxiety and depression, higher rates of smoking and higher suicide rates. Existing health problems are also exacerbated. Young people with poor health have less success in finding jobs and are more likely to lose or leave their jobs.

#### NEET

NEET is a term used to describe 16 to 19 year olds not in education, employment or training. In West Cheshire and Chester there are 1,250 young people classified as NEET (2009). Those from white backgrounds are 20% more likely to be out of work or training than those from Black and Asian backgrounds. Those most at risk are young people who have experienced family breakdown and those with parents who have a history of unemployment. Those not in employment or training are more likely to misuse drugs and alcohol, to engage in criminal activity and have an unplanned pregnancy.

#### **Higher education**

Currently in England, young people who want to continue studying have to pay tuition fees or top up fees and may take out a loan to cover these costs and costs of living. Upon leaving university, many have a debt of around £25,000-£37,000. Worries about costs prevent many young people, particularly those from low income families, from going to university, which restricts future employment choices. This system means that those from high income families are more likely to achieve high paid jobs that require qualifications whilst those from low income families find it harder to complete and obtain high earnings.

### Adolescence

When children reach puberty they face physical and emotional changes. A 2009 survey by the Department of Health found that teenagers are most concerned about fitting in with their peers. Weight was perceived as an important issue along with wearing the right clothes. Worries about being perceived as different prevented young people from talking to their friends about their problems. High levels of anxiety can lead to mental health disorders such as panic attacks and depression. According to the NSPCC, during adolescence more than one in five teenagers think so little of themselves that life does not seem worth living. It is during adolescence that young people are most at risk of self-harm, suicidal thoughts and eating disorders.

#### Exam pressures

According to Childline, between 2000 and 2001, 800 young people called about exams with some contemplating or having attempted suicide. Exams produce panic and pressure and those as young as seven worry about tests. In a recent survey in Chester, exams were the issue of most concern for young people. Some young people struggle to cope with school work; at particular risk are young carers, BME groups and those from deprived areas. Struggling with school work can lead to truancy and low academic achievement, which affects future life choices.

# Social Factors

#### Age discrimination

A survey carried out by the Department of Children, Schools and Families(2007) revealed that **46% of children and young people had been discriminated against because of their age**. Despite the Equality Bill extending protections to age discrimination, protection will only be available to those over the age of 18.

According to the British Youth Council, young people:

• find it difficult to get help from social, health and mental health services

- are not taken seriously when they report a crime or medical emergency
- are treated unfairly when using public services such as shops and public transport.

#### Bullying

Bullying is common amongst young people and can be physical, verbal or emotional. Bullying also takes place by text message, e-mail and on social networking sites.

The Department of Health found that double the number of teenagers from low income families (41%) worried about bullying than those from high income families (21%). Bullying can have devastating effects including depression, low self-esteem, suicidal thoughts, apathy, skipping school and performing badly in school work.

#### Participation

In a recent survey of young people in Chester, young people were most unhappy with things to do when it rains and for those aged 11 to 17, safe places to play or hang out and the cost of activities and groups. A survey carried out by the UK Youth Parliament in 2009 revealed that in Cheshire West and Chester the cost of transport was the issue of most concern for young people aged 11 to 18. A lack of transport can leave young people isolated in their area and bored if there are no local facilities or activities. Young people become dependent on parents for lifts or spend pocket money on public transport rather than on facilities. They may also put themselves at risk by choosing to walk after dark or on country roads. Lack of things to do has been linked with consuming alcohol, using drugs, smoking and engaging in criminal activity. Those from deprived areas take part less due to concerns of safety when travelling to and from activities or during activities.

#### Stereotyping

The negative portrayal of young people by the media increases discrimination by sustaining fears that they are trouble makers. A 2009 survey revealed that nine in ten young people are bothered by the way they are represented by the media and the majority of young people feel as strongly about anti-social behaviour as older people.

### Vulnerable Children

The key issues described can have a big impact on the lives of young people. For children who are already vulnerable, the risks of these are even more pertinent. Vulnerable children are at greater risk of:

- experiencing bullying
- · being perceived as 'different' or 'troublemakers'
- developing mental health disorders such as depression
- using drugs and alcohol, often as a coping mechanism
- lower educational attainment
- criminal behaviour
- teenage pregnancy
- poorer physical health
- future unemployment or homelessness
- In Cheshire West and Chester there are:
- 335 young people living in care (as of June 2009).
- 150 young carers receiving a service with a further 30 to 40 on a waiting list (please note: figures only refer to the young carers who have been referred to St Johns Ambulance Young Carers Project and there will be a number of hidden young carers who have not been identified).
- an estimated 442 Gypsy and Traveller families on sites, encampments or in houses.
- 5,320 pupils (12%) eligible for free school meals
- 47 offences committed by children and young people per 1000 children and young people aged 0-17 years in Cheshire (for the period 2008 to 2009).

#### Young people living in care

Young people living in care can face issues in relation to leaving their home and family, adjusting to a new environment and dealing with feelings of loss and rejection. For many, difficulties arise from having to change schools, bullying and struggling with school work.

#### Young carers

The definition of young carer used by Cheshire West and Chester Council is:

"Children and young persons under 18 who provide or intend to provide care, assistance or support to another family member. They carry out, often on a regular basis, significant and substantial caring tasks and assume a level of responsibility which would usually be associated with an adult. The person receiving care is often a parent, but can be a sibling, grandparent or other relative who is disabled, has some other chronic illness, mental health problem or other condition connected with a need for care, support or supervision" (as cited in Dearden and Becker 2002).

Young carers may feel isolated, lonely and stressed and can face difficulties with school work and future decisions such as leaving home.

#### Young offenders

If a young person commits a serious offence or is a persistent offender, they may receive a custodial sentence in a young offender's institution or secure children's homes. The Home Office have identified the following factors as contributing to criminal activity in young people:

- Family parental criminality, poor discipline, low family income, family conflict
- School truancy and exclusions, disruptive behaviour, low achievement
- Personal alienation, early problem behaviour, peer involvement in problem behaviour, spending a lot of time with peers unsupervised
- Community availability of drugs, opportunity for crime

#### Young Gypsy and Travellers

By key Stage 3, it is estimated that only **15-20% of Gypsy and Traveller pupils are registered or regularly attend school** due to bullying and a preference for learning art, music, dance and practical skills such as cookery at home. 80% of Gypsy and Traveller's are thought to leave school illiterate. Gypsy and Travellers experience discrimination and hate crime and often live in poorer conditions with no fresh water, electricity or toilet facilities. They have the highest child mortality rates of any ethnic minority group.

#### Young people living in poverty

Relative poverty is the inability to participate fully, in economic terms, in society compared to other members of society. Absolute poverty is lacking the necessary food, clothing or shelter to survive. According to the Department of Work and Pensions (2004), one in four children in the UK live in relative poverty and 17% in absolute poverty (lack basic requirements). A 2008 survey of young people living in Chester revealed that **those from deprived areas participated the least in sport and exercise, visiting parks, attending youth clubs or youth groups and reading**. Reasons given included the cost of transport, bullying and lack of safe places to play.

# **Key Facts Population**

Table 1. 2008 Population Estimates by Area Partnership Board and Age Group for Cheshire West and Chester

Age Group	Chester		Ellesmere Port		Northwich and Rural North		Rural West		Winsford and Rural East		Cheshire West and Chester	
	Number	% total APB population	Number	% total APB population	Number	% total APB population	Number	% total APB population	Number	% total APB population	Number	% total APB population
0-4	4,210	5.4	3,620	5.9	3,970	5.8	3,170	5.1	3,380	5.8	18,300	5.6
5-9	3,660	4.7	3,520	5.7	3,850	5.6	3,380	5.4	3,290	5.6	17,700	5.4
10-15	3,970	5.1	4,040	6.6	4,290	6.3	3,680	5.9	3,830	6.6	19,800	6.0
16-19	5,110	6.6	4,420	7.2	4,280	6.2	3,770	6.1	4,000	6.9	21,600	6.6
20-24	7,060	9.1	3,940	6.4	3,410	5.0	3,240	5.2	3,020	5.2	20,700	6.3

In 2008 there were a greater number of 16-19 year olds than other young age groups (up to the age of 24). Chester had the highest percentage of 20-24 year olds and the lowest percentage of 5-9 year olds in Cheshire West and Chester.

Whilst the numbers of children and young people has fallen in recent years, this decline is expected to reverse in the years ahead.

## Deprivation

Cheshire West and Chester : Index of Deprivation 2007: Income Deprivation affecting children by Lower Super Output Area.



### What does this mean for Cheshire West and Chester

#### For the Area

- Almost a third of Cheshire West and Chester's population is under the age of 25.
- As the area becomes increasingly multicultural, there is likely to be greater diversity of young people with associated needs.

#### For the Council

- The Single Equality Scheme places a legal duty upon councils to ensure services and staff do not act discriminatory. For Council services, the first step will be to recognise the impact public services have on children and young people and to take forward equality impact assessments to ensure positive progress is made.
- Awareness training to ensure all staff have an understanding of not only their duty but of the issues that affect different groups of people. This can help identify potential issues in service areas. It is important to create a supportive organisational culture.
- The issues around health and mental health, school (besides others) emphasise the **importance of youth support groups**. Forging links with local and national youth organisations will build bridges between the young community and the Council. These groups can give information about support, health promotion and learning resources and also act as a social network.
- It is important the Council works with partners including Western Cheshire PCT, Cheshire Police and Connexions to support health promotion, act against hate crime, look at issues regarding education, bullying, vulnerable young people and social care. This is key for transforming services. This ensures that all services, not just those directly related to the Council, are explored in their impact on all groups of residents.
- Young people should be asked about their needs, requirements and ways of tackling issues that they face. This ensures the Council is inclusive and tackling the issues that are important to young people.

Cheshire West and Chester Council HQ Nicholas Street, Chester CH1 2PP

www.cheshirewestandchester.gov.uk