



THE LONDON BOROUGH
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BROMLEY CHILDREN AND YOUNG PERSON JOINT STRATEGIC NEEDS ASSESSMENT 2022

Section 2: Risk Factors

Dr Jenny Selway

For more information visit www.bromley.gov.uk/JSNA or contact JSNA@bromley.gov.uk

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Key risk factors associated with poorer developmental outcomes in children

A number of key risk factors have been strongly associated with hindering successful child development. The higher the number of risk factors affecting the child, the more subsequent short- and long-term problems that child encounters. The risk factors include:

1. [Health and lifestyle issues of parents](#)
 - a) [parental illness or disability](#)
 - b) [issues in the period leading up to and around birth](#)
 - c) [parents who misuse drugs](#)
 - d) [parents who misuse alcohol](#)

2. [Mental health of parents](#)

3. [Social issues of parents](#)
 - a) [domestic violence](#)
 - b) [financial stress](#)
 - c) [housing issues](#)

There are significant correlations between many of these factors. For example teenage motherhood, smoking in pregnancy and parental depression commonly occur together.

Adverse child outcomes at age five years have been most strongly correlated with parental depression, smoking in pregnancy and financial stress.

Other health indicators correlated with poorer outcomes later in life include pregnant women who book for antenatal care late in pregnancy and low birthweight babies.

Some factors are protective. These include:

4. [Protective factors](#)
 - a) [Breastfeeding](#)
 - b) [Immunisation](#)
 - c) [Early education](#)

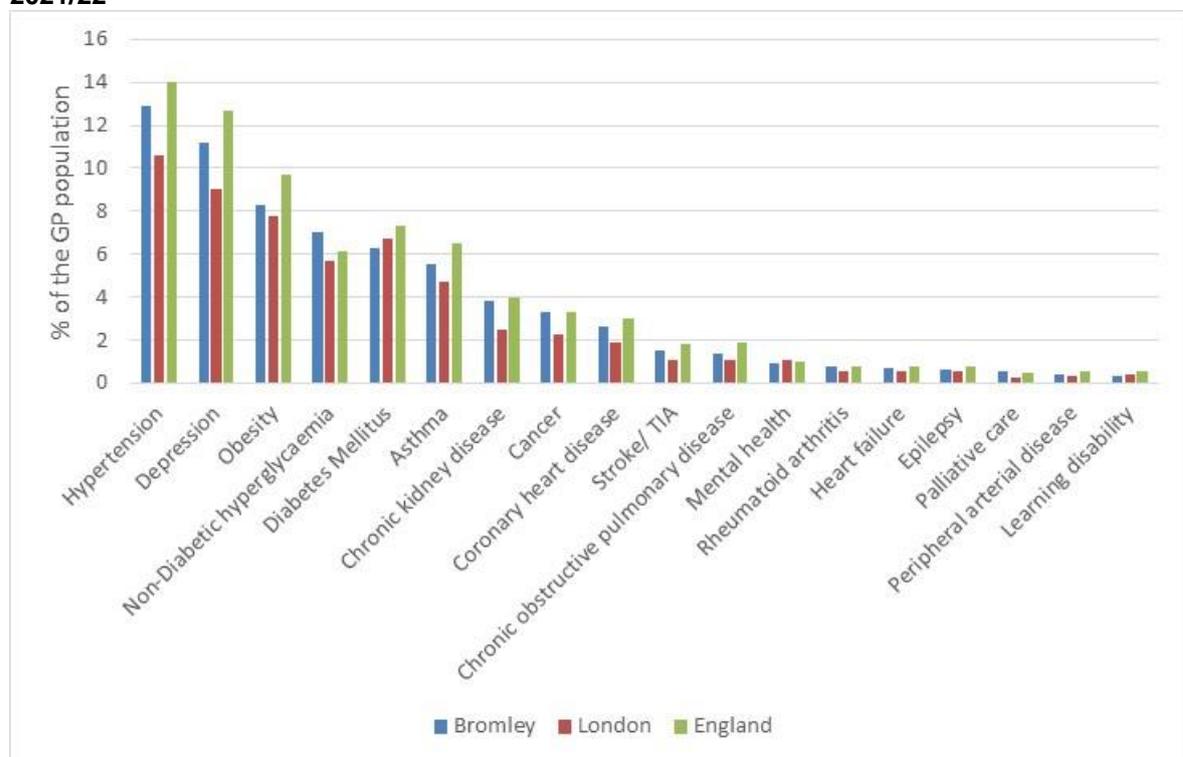
1. Health and lifestyle issues of parents

a) Parental illness

Life expectancy in Bromley is 81.3 years for men and 84.8 years for women (2018-20). Life expectancy is higher in Bromley than for London or England.

47% of the adult population registered with a Bromley GP have a long term health condition. This is higher than the rate for South East London (44%) but lower than the national rate (51%). As this data is for all adult patients in Bromley this is likely to reflect health conditions in the older population and not just parents of children under 18.

Figure 2. 1: Percentage of adults registered with a Bromley GP with a long term condition, 2021/22



Source: QOF data 2021/22

What does this mean for families in Bromley?

Adults registered with a Bromley GP have higher rates of long-term health conditions than the average for South East London

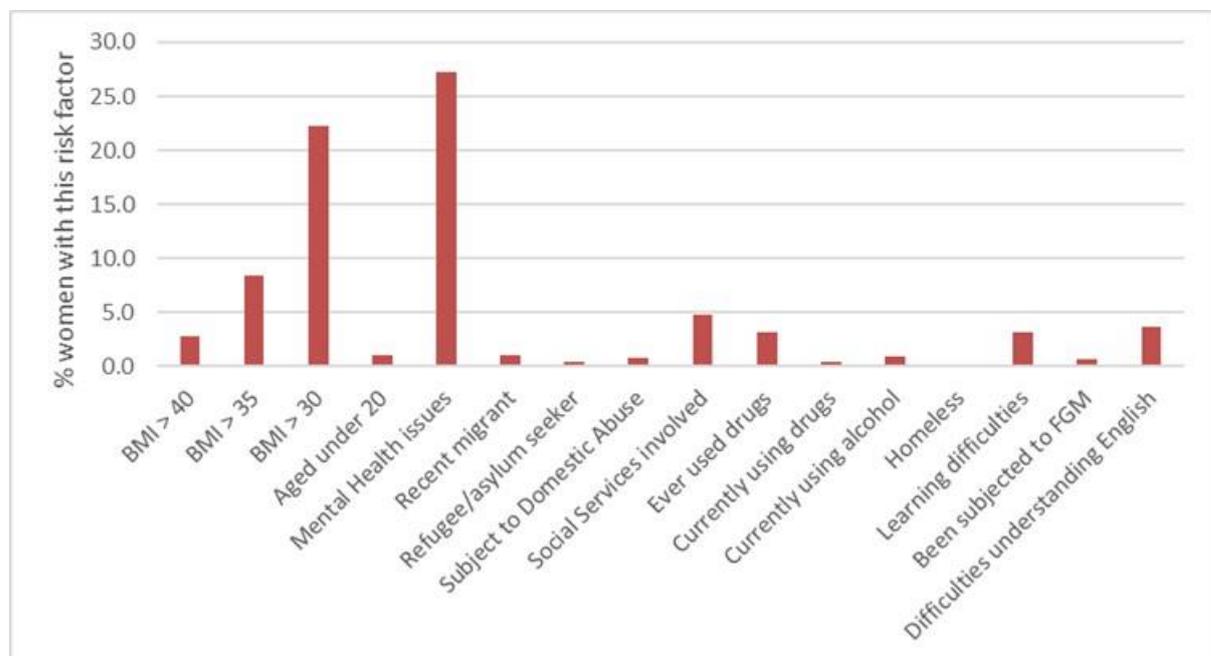
b) Issues up to and around the time of birth

i. Booking for maternity care

Giving birth entails some risks for both the mother and the child. Maternity services identify those risks throughout pregnancy, but the first comprehensive analysis of risk is at the booking appointment.

Figure 2.2 gives some indication of the identified risks found at booking in 4081 women who booked for maternity care at the PRUH between September 2021 and August 2022. A woman may have more than one risk.

Figure 2.2: Proportion of women identifying key risks at booking for maternity care at PRUH, September 2021 to August 2022.

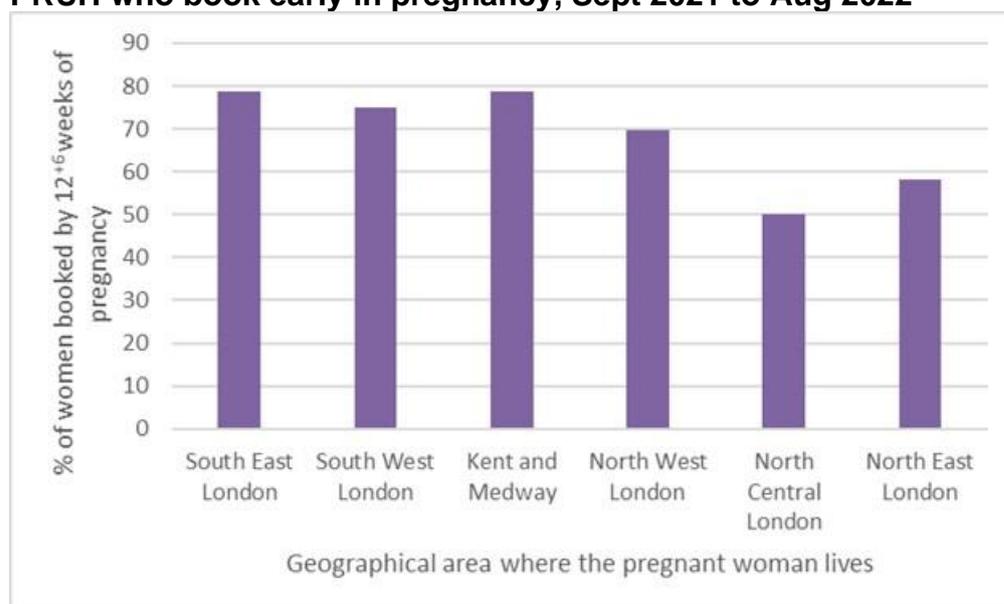


Source: PRUH Badgernet data system

NICE Guidance¹ recommends that, women should have access to maternity services for a full assessment of health and social care needs, risks and choices before they reach 12 completed weeks of pregnancy (commonly called “12⁺⁶”). Figure 2.3 shows that women booking for pregnancy care at the PRUH who live in South East London or Kent are more likely to book early than those living further away.

¹¹ National Institute for Health and Care Excellence (NICE) Guidance on Antenatal Care (2008)

Figure 2. 3: Proportion of all Bromley women booking for maternity care at the PRUH who book early in pregnancy, Sept 2021 to Aug 2022



Source: Princess Royal University Hospital Badgernet data system

A large study in Newham in 2013² showed that the women most likely to book after 12⁺⁶ weeks are from Black, Asian, and other minority ethnic groups. These groups were significantly more likely to book late compared to women who identified as British white, particularly women who identified as Somali ethnicity, where only 45% booked by 12⁺⁶ weeks of pregnancy and 20% booked later than 20 weeks' gestation.

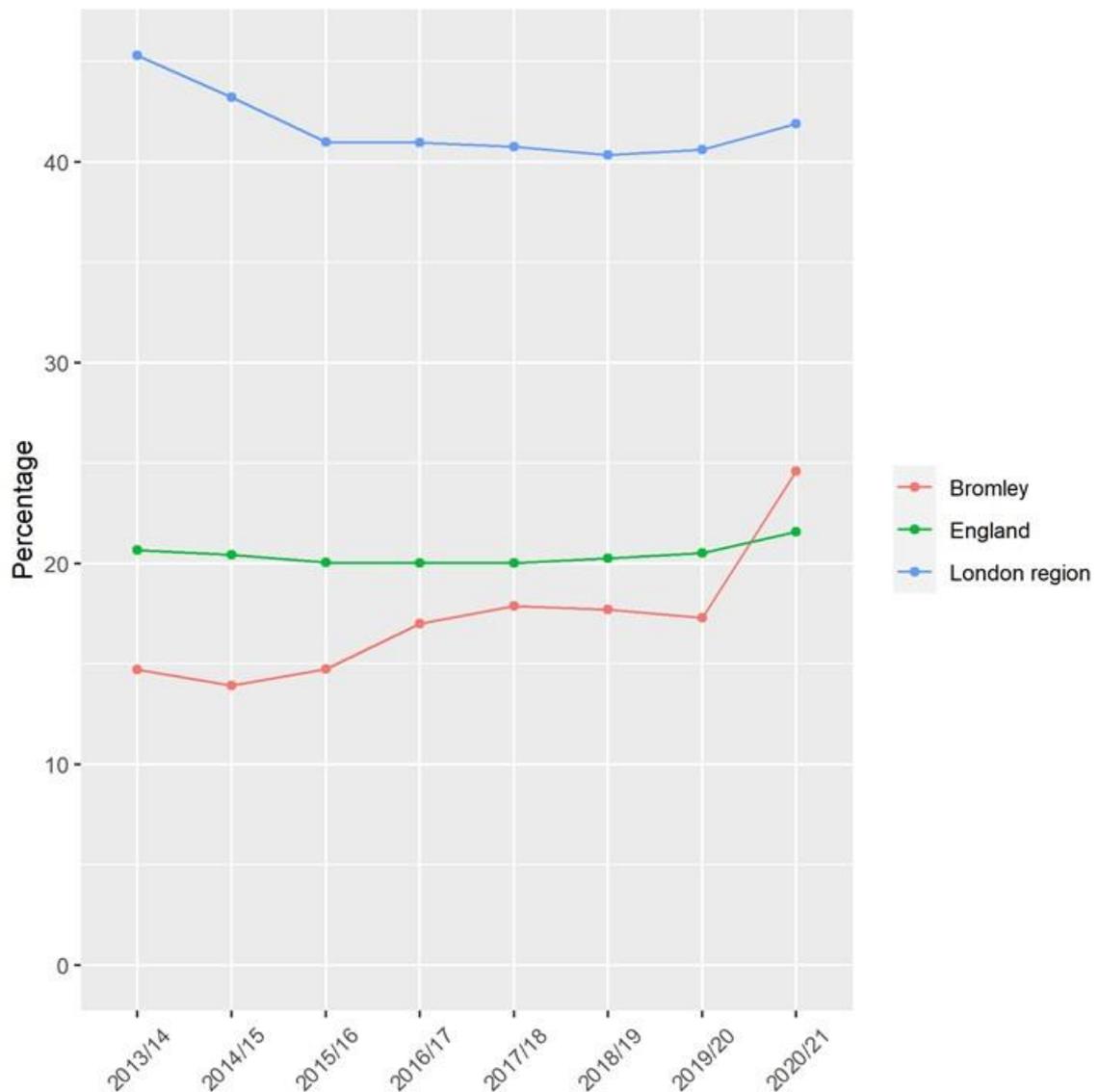
Other risk factors for late booking were:

- four or more previous births (more than twice as likely to book later compared to those with one previous birth),
- living in temporary accommodation, and
- age less than 20 years.

The proportion of births in Bromley to women who are from Black, Asian, and other minority ethnic groups has increased, although it is still lower than the rate for London and England (Figure 2.4).

² Cresswell, J.A., Yu, G., Hatherall, B., Morris, J., Jamal, F., Harden, A. and Renton, A. (2013). *Predictors of the timing of initiation of antenatal care in an ethnically diverse urban cohort in the UK*. BMC Pregnancy and Childbirth, 103, 1-8.

Figure 2. 4: Proportion of deliveries to Bromley women who are Black, Asian, and other minority ethnic groups



Source: PHE fingertips, 2022

Smoking in pregnancy

Smoking in pregnancy has been shown to be linked to poorer developmental outcomes for the child at the age of five years³. Further evidence has shown that early exposure to household tobacco smoke can be associated with increased propensity toward physical aggression and antisocial behaviour when the child is older⁴.

Data about smoking in pregnancy is collected at booking and at the time of the birth.

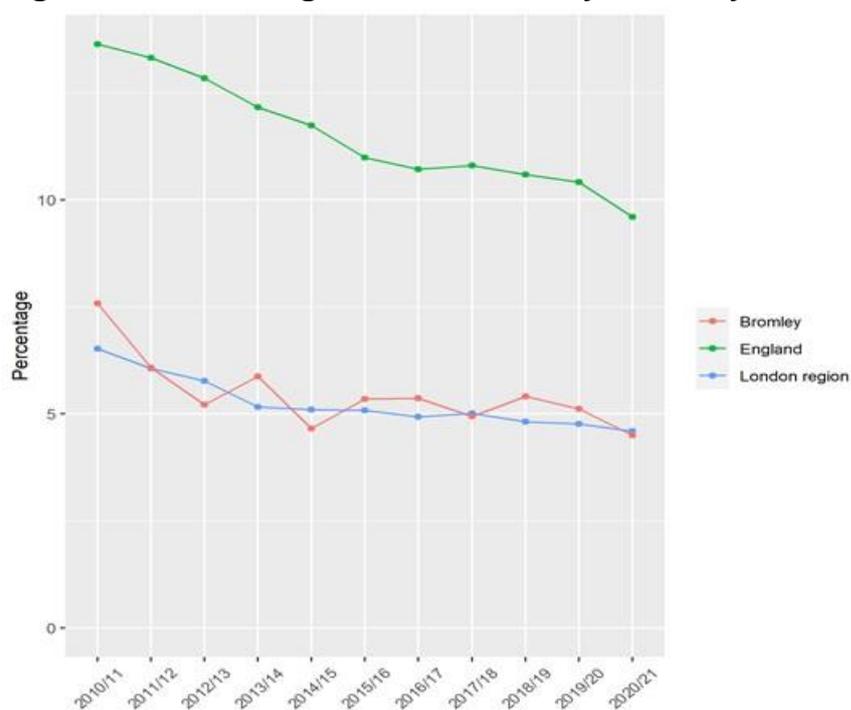
³ Sabates, R. and Dex, S. (2013). *The impact of multiple risk factors on young children's cognitive and behavioural development*. *Children and Society*, 29, 95-108.

⁴ Pagani, L.S. and Fitzpatrick, C. (2014). *Children's school readiness: implications for eliminating future disparities in health and education*. *Health, Education and Behavior*, 41, 25-33.

Smoking rates at booking for maternity care at the PRUH tend to be below the national average. In the year September 2021 to August 2022, of the 4081 women who booked for maternity care at the PRUH, 203 women (4.8%) were smokers and 116 of these women were referred to smoking cessation services.

Assessment of smoking status at delivery September 2021 to August 2022 was of 3442 women (PRUH data). 144 women (3.3%) were smokers at the time of delivery. This is slightly lower than the rate at time of delivery in published data for 2020/21 which was 4.5% for Bromley, 4.6% for London and 9.6% for England.

Figure 2. 5: Smoking at time of delivery, Bromley and comparators, 2010-2017



Source: PHE fingertips, 2022

Smoking in pregnancy is linked to an increased risk of negative pregnancy outcomes including miscarriage, preterm birth, low birth weight and stillbirth. After birth, it is linked to sudden infant death syndrome, childhood respiratory illness and behavioural problems.

Research shows that mothers aged 20 or under are five times more likely than those aged 35 and over to have smoked throughout pregnancy (45% and 9% respectively), and mothers in routine and manual occupations are more than four times as likely to smoke throughout pregnancy – compared to those in managerial and professional occupations (29% and 7% respectively)⁵.

⁵ NICE. (2010). *Quitting smoking in pregnancy and following childbirth*: Available at: <https://www.nice.org.uk/guidance/ph26/documents/quitting-smoking-in-pregnancy-and-following-childbirth-final-scope>

Pregnancy in children looked after and care leavers

Children Looked After (CLA) and care leavers are estimated to be six times more likely than others to have children in their teenage years, with around half of young women becoming parents within 18-24 months of leaving care^{6,7,8}. There are some identifiable trends in national research:

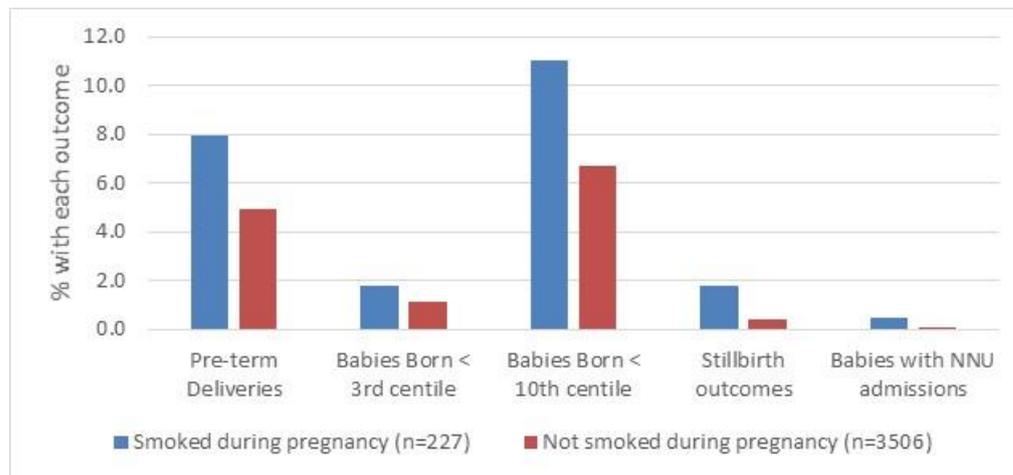
- That young care leavers who have children, do so within 12-18 months of leaving care.
- Children’s Social Care involvement is a consistent feature but for most young people as they continue to parent their children.
- The relationship of fathers and the part they play in abusive relationships leads to early separation and a lack of involvement in their child’s life

Bromley has a Family Nurse Partnership programme for young parents which includes care leavers up to the age of 24 years who are pregnant. In the last 2 years in Bromley, 23 CLA/care leavers have been enrolled on this programme, 4 were referred but did not enrol, and a further 3 are awaiting enrolment.

Outcomes of pregnancy

The effect of smoking on several key outcomes of pregnancy is shown in the next graph which uses data collected by midwives at the PRUH September 2021 to August 2022.

Figure 2.6: Key outcomes of pregnancy for smokers and non-smokers, PRUH, Sept 2021 to August 2022.



Source: Princess Royal University Hospital Badgernet data system

⁶ Biehal, N. and Wade, J. (1999). *“I thought it would be easier”: the early housing careers of young people leaving care*. Young People, Housing and Social Policy (pp.79-92). London: Routledge.

⁷ Dixon, J. & Stein, M. (2002). *Still a Bairn? through care and after care services in Scotland, the final report to the Scottish Executive*. University of York: Social Work Research and Development Unit.

⁸ Rodgers, H. & Carson, P. (2013). *Northern Ireland Care Leavers Aged 19 Statistical Bulletin 2011/12*.

Department of Health, Social Services and Public Safety. [online] Available at:

<https://data.gov.uk/dataset/172088ec-8f1d-48d5-8026-b272f03167d5/northern-ireland-care-leavers-aged-19>

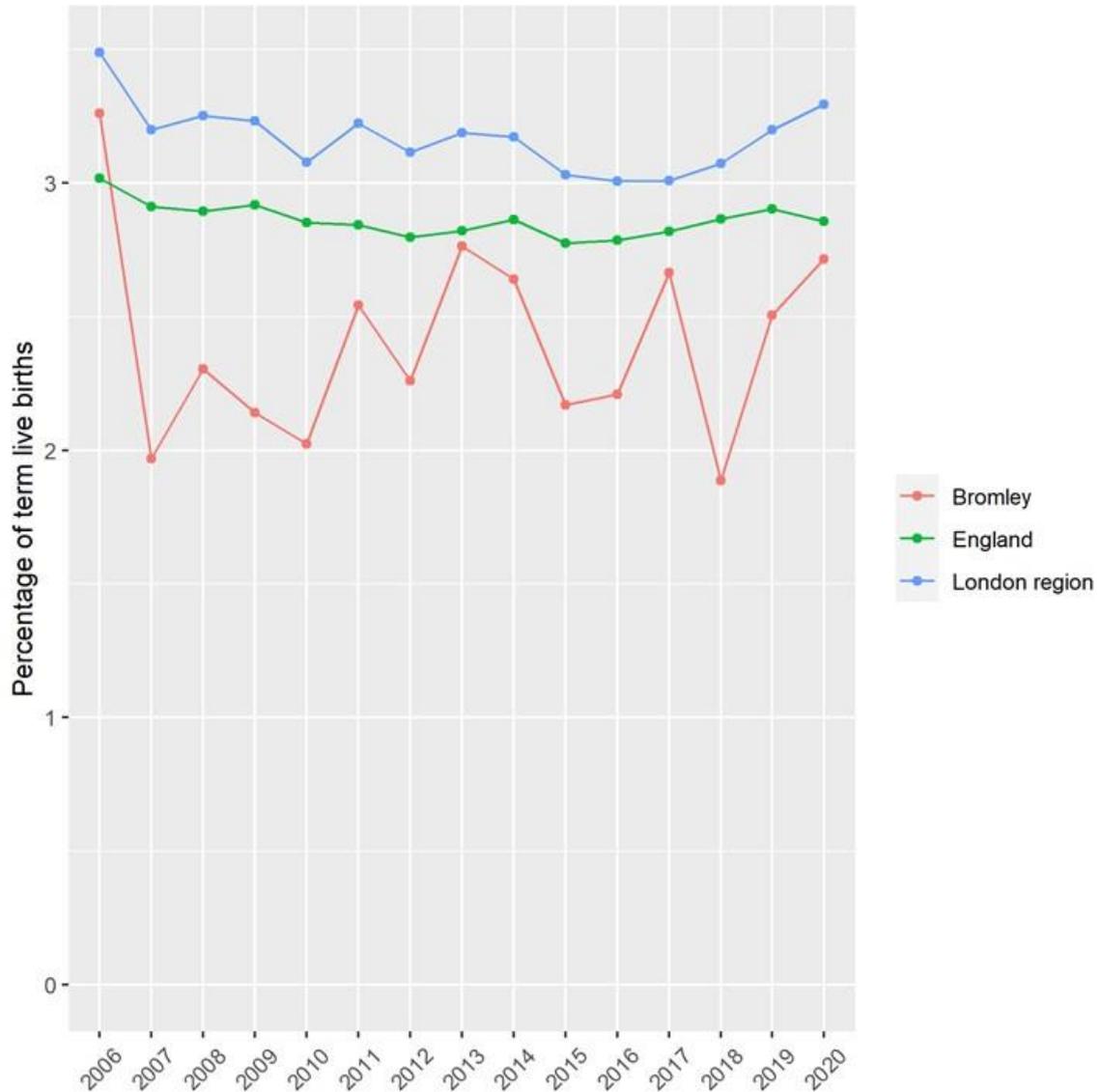
[Accessed 23/10/2017].

Low birth weight

Children born with reduced birth weights (below 2.5kg), both premature and full-term, tend to have more health problems than those with normal birth weight.

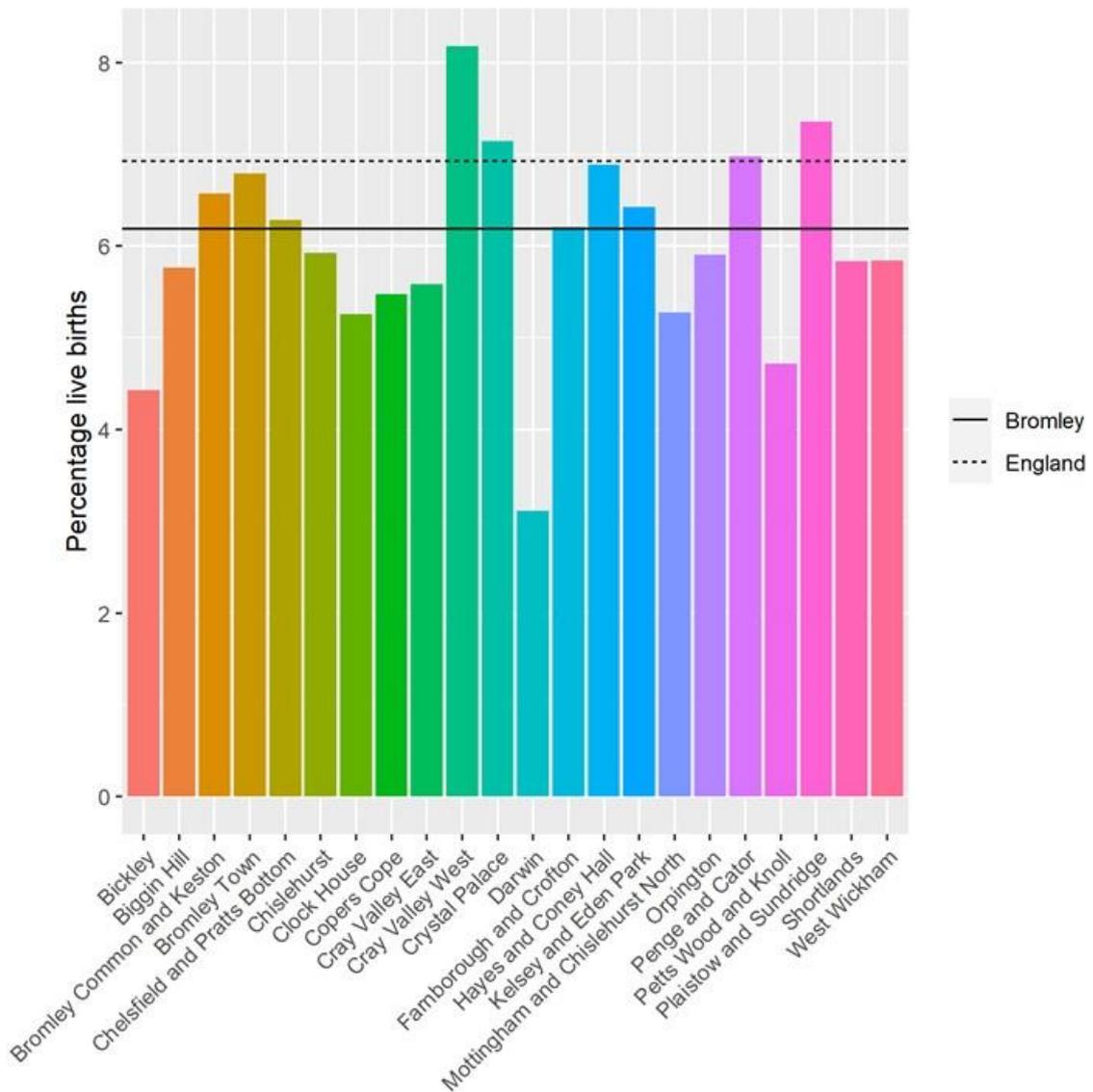
93 full term babies were born weighing less than 2,500 grams in Bromley in 2020. The rate (2.7%), although affected by random variation due to small numbers, is lower than for London (3.3%) and England (2.9%) (Figure 2.7).

Figure 2.7: Proportion of all term births that are low birth weight (<2,500g)



Source: Office for National Statistics, 2018

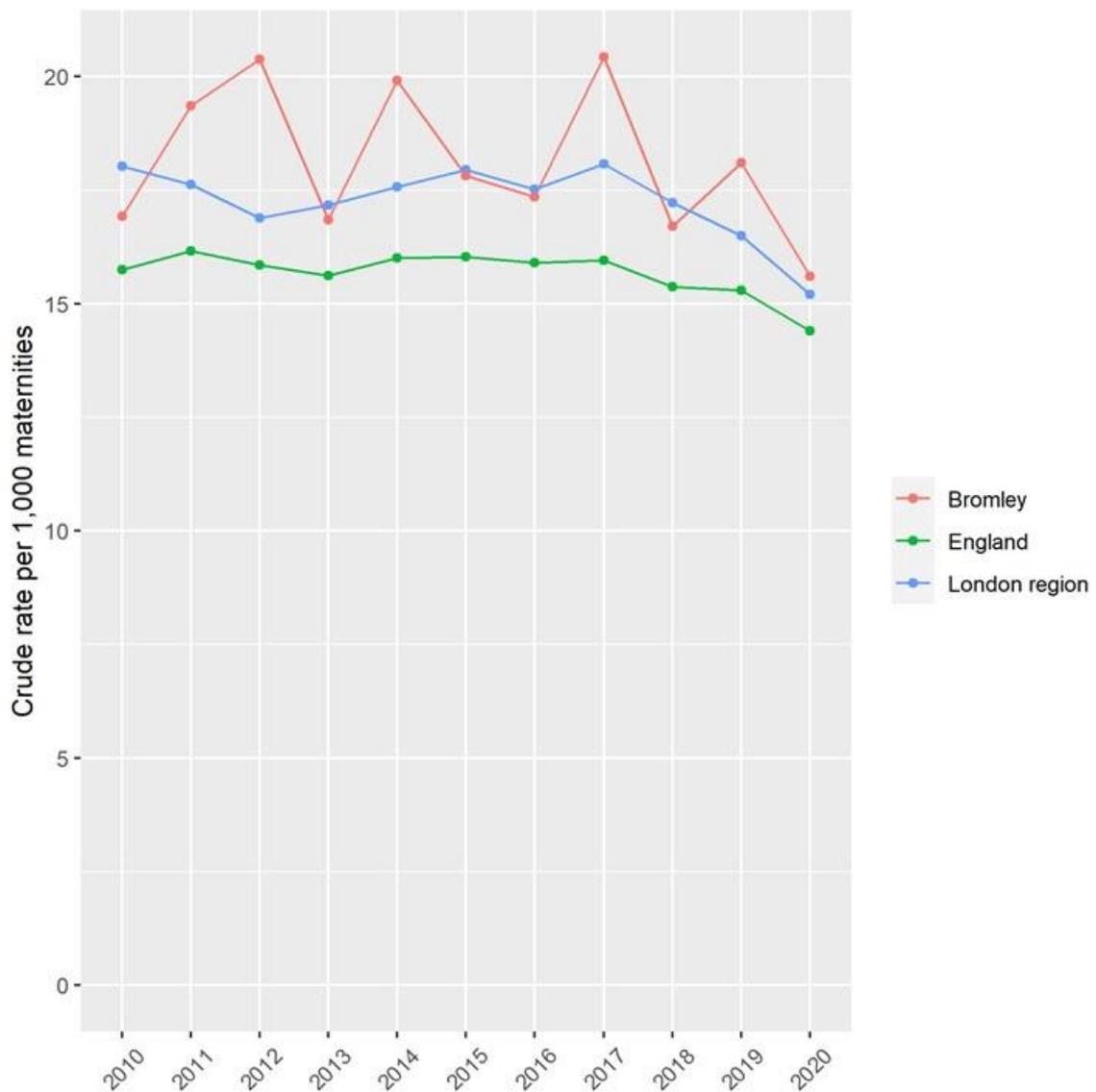
Figure 2.8: Low birth weight by Ward



Babies born with very low birthweight (below 1.5kg) are even more likely to have adverse outcomes. The rate of very low birthweight in Bromley (0.9%) in 2020 is slightly lower than the rate in London (1.1%) and England (1.0%), and rates are falling.

Multiple birth is also a risk factor. The rate in Bromley in 2020 was 15.6 per 1,000 (57 births) and was similar to that in London (15.2 per 1,000). Rates in England were slightly lower at 14.4 per 1,000 births.

Figure 2.9: Rates of multiple births in Bromley, 2010-2015



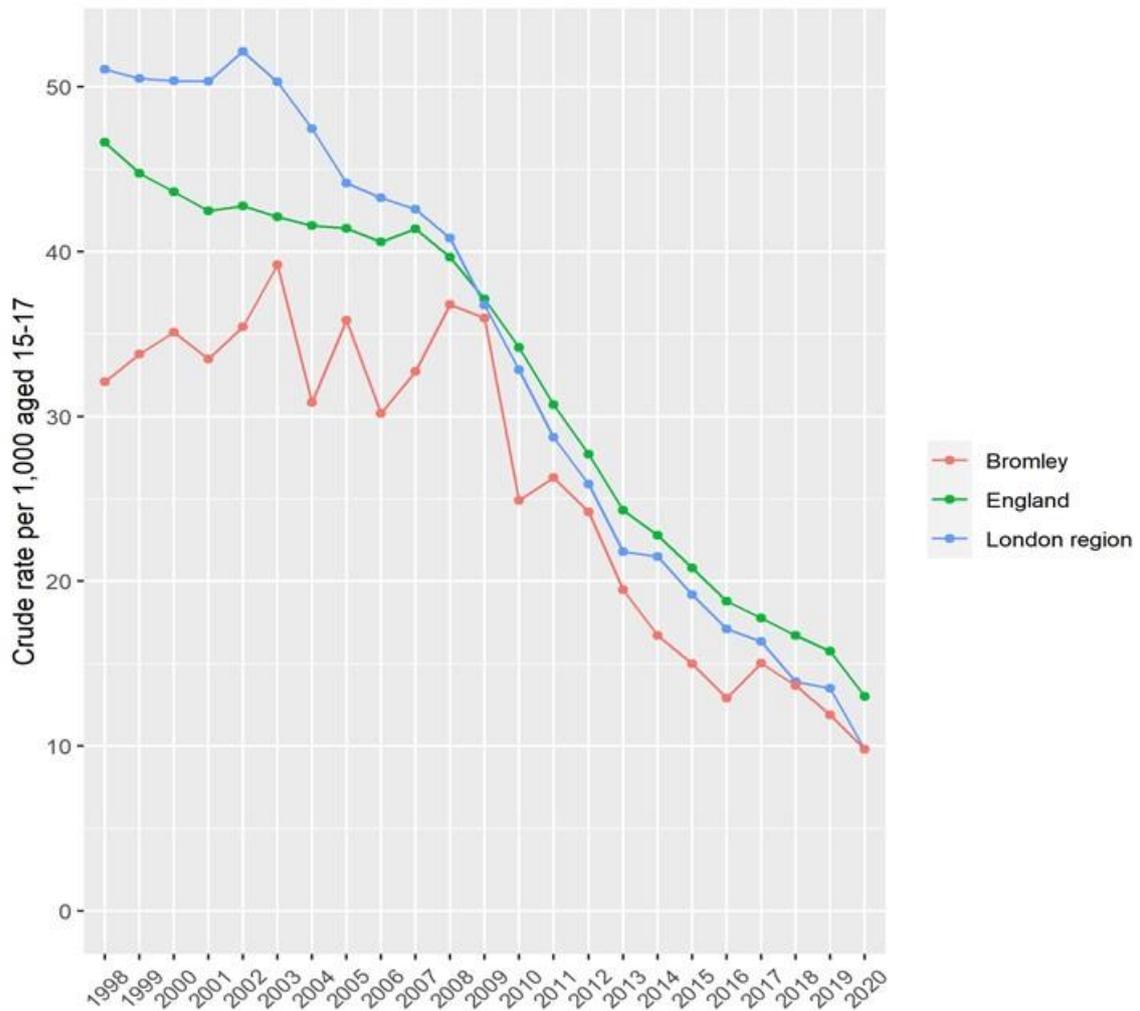
Source: PHE Fingertips, 2018

ii. Teenage conceptions

Teenage Pregnancy is associated with adverse health and social outcomes for children, young parents and families, including poor educational attainment and poor physical and emotional health.

In Bromley 9.8 young women per 1,000 population aged under 18 years (55 young women) conceived in 2020 which is the same as the London average and below the England average of 13.0 per 1,000 population. Of these conceptions in Bromley, 71% led to termination of pregnancy in 2017, compared with an average of 64% in London and 52% in England.

Figure 2.10: Rate of under 18 conceptions per 1,000 females aged 15-17, 1998 to 2016



Source: Office for National Statistics, 2022

Under 16s Conceptions

This rate in 2017 fell to 1.8 per 1000 girls aged 13-15 in Bromley (10 girls), which was below the national rate (2.7 per 1,000) and the London rate (2.2 per 1,000).

What does this mean for families in Bromley?

The risks most frequently identified early in pregnancy in Bromley are mental health issues and obesity

Smoking rates in pregnancy are falling. Babies of women who smoke have poorer outcomes

Babies born with a low birthweight are more likely to be born to mothers living in Cray Valley West, Crystal Palace, or Plaistow and Sundridge

The teenage pregnancy rate continues to fall in Bromley.

c) Parents who misuse drugs

Substance misuse can reduce a parent's ability to provide care. The effects on the child can include neglect, educational problems, emotional difficulties and abuse. Parental substance misuse is rarely the sole cause of family difficulties, and often occurs alongside poverty, social exclusion, unemployment and poor mental health.

While use of opioids does not necessarily impact on parenting capacity, the number of children subject to child protection plans for neglect has been correlated strongly with parental heroin use, and parental problem drug use has been shown to be one of the commonest reasons for children being received into the care system.

Conversely, parents who live with their own children tend to have fewer drug-related problems than others in treatment, are less likely to use the most addictive drugs, and are less likely to inject drugs when compared to non-parents in treatment.

The British Crime Survey and the National Psychiatric Morbidity Survey indicated that 8% of children lived with an adult who had recently used illicit drugs⁹.

The impact of Covid-19 on drug use and substance misuse services cannot be ignored. Evidence suggests Covid-19 and the associated social isolation from lockdowns has resulted in more addiction, relapse, overdoses, and riskier drug use. There was also evidence of a disrupted drug supply chain, and therefore a shift to using new drug types and ways of acquiring drugs, including the use of the “darkweb.”

Table 2.1: Proportion of adults who reported taking a drug in the year to March 2020, England

Age Group	Proportion of adults (%)	Proportion of men (%)	Proportion of women (%)
16-19	21.1	25.1	16.8
20-24	20.0		
25-29	14.6	8.9	4.8
30-34	8.4		
35-44	6.6		
45-54	4.1		
55-59	2.8		

Source: Crime Survey for England and Wales

Drug use is increasing nationally, particularly in men in the 16-24 age group. Prevalence decreases with each age group.

In 2016/17, it was estimated that there were 750 crack cocaine users in Bromley.

⁹ Manning, V., Best D, Faulkner, N. and Titherington, E. (2009). *New estimates of the number of children living with substance misusing parents: results from the UK National Household Surveys*. BMC Public Health, 9, 377.

It is estimated that 80% of adult drug users with children who use opiates in Bromley are not in formal services (58% nationally)

Of those in contact with treatment services in Bromley, many of the clients are aged over 40 although presentations to the service at all ages is increasing.

The population in treatment for drug misuse is predominantly male (65%) and of White British ethnicity (83%). The substances most commonly misused by those in treatment in Bromley are opiates (44%) and alcohol (41%).

17% of all drug treatment clients in Bromley successfully completed treatment compared to 15% in England. Men are more likely to drop-out early across all substance groups both locally and nationally.

Substance misuse in pregnancy

Of the 4,000 women booking for maternity care at the PRUH between September 2021 and August 2022, 130 admitted to taking drugs in the past. 17 women were still using drugs at the time of booking and 36 were taking alcohol. 11 women were referred for help with their substance misuse.

What does this mean for families in Bromley?

12% of Children in Need in Bromley have a parent who uses drugs

Hospital admission rates due to drug-related issues are highest in the 18-24 age group in Bromley

Presentation to local drug services at all ages is increasing

Rates of successful completion of drug treatment in Bromley is higher than the national rate.

d) Parents who misuse alcohol

Children and young people can do little to protect themselves from the effects of parental drinking and can suffer emotional distress, neglect or physical injury. Alcohol is also a common feature of domestic and sexual violence.

Parental alcohol problems are associated with negative outcomes in children, e.g. poorer physical and psychological health (and therefore higher hospital admission

rates), poor educational achievement, eating disorders and addiction problems^{10,11} many of which persist into adulthood¹².

A Danish study involving a cohort of nearly 85,000 children, followed from age 13 to 27, looked at the long-term consequences of parental alcohol abuse, identified through alcohol abuse related hospital admissions¹³. Parental alcohol abuse was found to be a risk factor for other disadvantages including premature death, suicide attempts, drug addiction, mental illness and teenage motherhood, and for certain life experiences including parental violence and family separation.

The Health Survey for England and the General Household Survey both estimated that 30% of children aged under 16 years in the UK lived with one binge drinking parent¹⁴. The National Treatment Agency for Substance Misuse found that during 2011/12, one third of adults in treatment lived in a household containing children.

Bromley has approximately 1% of adults who are alcohol dependent. This is one of the lowest rates in London.

The Children Social Care assessment process in Bromley, April to August 2022, identified 177 families where at least one parent had alcohol problems.

¹⁰ West, M.O. and Prinz, R.J. (1987). *Parental alcoholism and childhood psychopathology*. Psychological Bulletin, 102, 204-218.

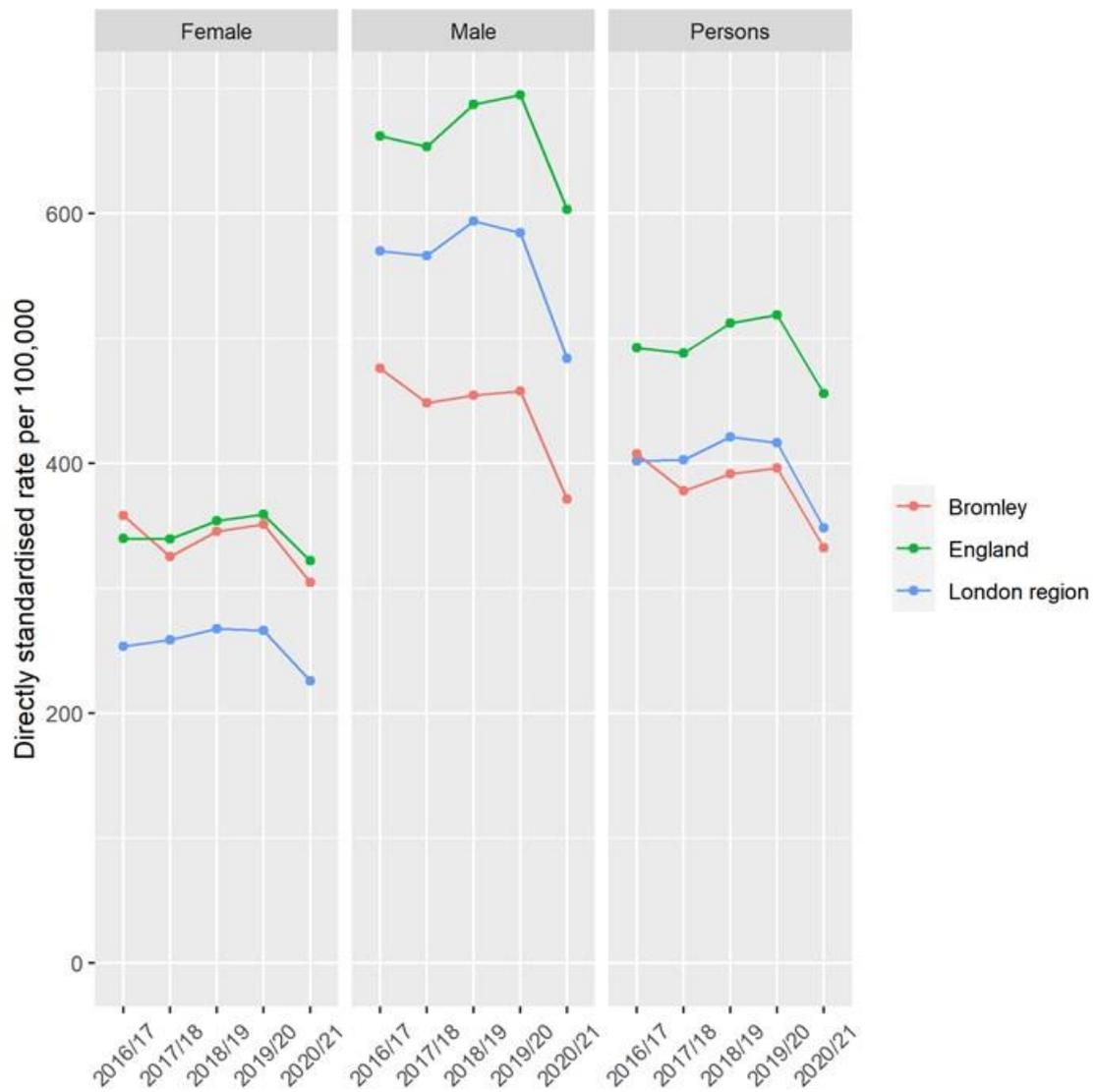
¹¹ Girling, M., Huakau, J., Casswell, S. and Conway, K. (2006). *Families and heavy drinking: impacts on children's wellbeing*. [online] Available at: <http://www.superu.govt.nz/sites/default/files/BS-families-and-heavy-drinking.pdf> [Accessed 23/10/2017].

¹² Balsa, A.I., Homer, J.F. and French, M.T. (2009). *The health effects of parental problem drinking on adult children*. The Journal of Mental Health Policy and Economics, 12, 55-66.

¹³ Christoffersen, M.N. and Sothill, K. (2003). *The long-term consequences of parental alcohol abuse: a cohort study of children in Denmark*. Journal of Substance Abuse Treatment, 25, 107-116.

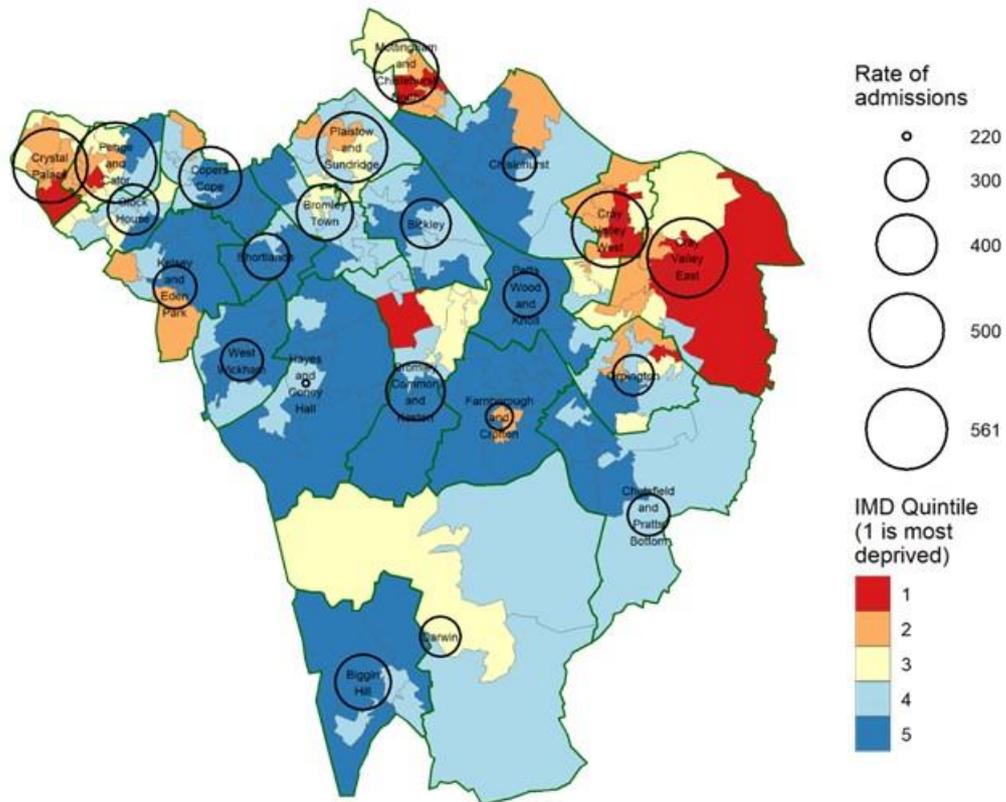
¹⁴ Manning, V., Best D, Faulkner, N. and Titherington, E. (2009). *New estimates of the number of children living with substance misusing parents: results from the UK National Household Surveys*. BMC Public Health, 9, 377.

Figure 2.12: Admission episodes for alcohol related conditions



The rate of alcohol-related hospital admissions has been lower in Bromley than for England. The admission rate in females in Bromley is now at the national rate, although the rate in males remains low as shown in Figure 2.12.

Figure 2.13: Rate of admission episodes for alcohol specific conditions by Bromley ward against LSOA national deprivation quintile: 2019/20 - 2021/22



Source: NHS Digital; IMD 2019

What does this mean for families in Bromley?

- 1% of adults in Bromley are alcohol dependent. This is one of the lowest rates in London.
- Between April and August 2022, Children Social Care assessments identified 177 families where parent/carer was misusing alcohol.

2. Mental health of parents

Mental health problems in adults can have a significant impact on the wellbeing of their children. A recent study found that 25% of children were exposed to maternal mental illness and this rate is increasing¹⁵. Younger mothers were more likely to have a mental health problem than older mothers.

a) Perinatal mental health

Perinatal mental illnesses (most commonly depression, but also anxiety, and postnatal psychotic disorders) affect at least 10% of women.

These illnesses suffered by the mother increase the likelihood that:

- the baby will be premature or have a low birthweight;
- the baby may not develop a secure attachment relationship with the mother;
- the child will experience behavioural, social or learning difficulties and
- the child faces higher risk of depression in adolescence.

In extreme cases, parental mental illnesses increase the risk that the child will be abused or neglected.

The prevalence in the UK:

- Postpartum psychosis affects around 2 in 1,000 new mothers.
- Post-traumatic stress disorder affects approximately 3% of women after birth.
- Rates of perinatal depression are higher amongst women experiencing poverty or social exclusion, and the risk of depression is twice as high amongst teenage mothers.
- Stress caused by poor housing, domestic violence and poverty can exacerbate symptoms of anxiety and depression.

Some pre-existing mental health problems are at increased risk of relapse during pregnancy and the post-natal period. This is particularly true of women with a history of bipolar disorder.

Women booking for maternity care at the PRUH, September 2021 to August 2022, were asked about their mental health at their first appointment. 27% of women reported mental health issues.

The Children Social Care assessment process in Bromley, April to August 2022, identified 550 families where at least one parent had mental health problems.

¹⁵ Abelt, M et al. Prevalence of maternal mental illness among children and adolescents in the UK between 2005 and 2017: a national retrospective cohort analysis. *Lancet Public Health*, Vol 4. June 2019.

Data from GP registers (Figure 2.1 on page 5) shows that the prevalence of adults over 18 with depression in Bromley (11.2%) is higher than the average for London (9%) but lower than the average for England (12.7%). The rate is increasing. In 2017, the prevalence of GP-recorded depression in adults in Bromley was 6.4% and in England was 6.5%. Comparing Bromley with the rest of London, Bromley is the sixth highest London borough for recorded depression (in 2017 it was third highest).

A more detailed needs assessment of adults and children in Bromley is due later in 2022.

What does this mean for families in Bromley?

- More than 25% of pregnant women in Bromley reported a history of mental ill health at booking for pregnancy care
- GP data shows that recorded depression in adults is increasing.

3. Social issues of parents

a) Domestic violence

Lord Laming¹⁶ identified that 1.8% of children in England live in households where there is a known high risk case of domestic abuse and violence. Her Majesty's Inspectorate of Constabulary¹⁷ found that in the UK, 1 in 4 young people aged 10-24 reported experience of domestic violence and or abuse in childhood.

In addition to the obvious increased risk of injury from any physical attack, the child is potentially at further risk due to the impact domestic violence has on parenting. The victim (most commonly the mother) may prioritise their partner's needs, suffer from mental health issues and have his or her authority undermined, all of which will have an effect on his or her capacity to provide the child with a safe and secure environment. It is estimated that 62% of children and young people exposed to domestic violence are directly harmed.

Domestic violence often begins in pregnancy¹⁸ and evidence suggests having experienced partner violence during pregnancy results in a three-fold increase in the odds of high levels of depressive symptoms in the postnatal period¹⁹.

Nationally, of the total number of domestic abuse-related incidents and crimes, 42% were incidents not subsequently recorded as a crime, 58% were recorded as domestic abuse-related crimes²⁰. Each London borough deals, on average, with over 2,000 domestic abuse offences and 4,000 domestic abuse incidents on an annual basis. The recorded number of domestic abuse incidents in Bromley was 4,383 in March 2018 peaking in September 2020 at 4,821 and has since returned to pre-COVID levels at 4,315 in May 2022. Domestic abuse offences is set out in Table 2.1.

This shows that overall domestic violence offences in Bromley and statistical neighbour boroughs of Sutton and Havering have fallen since the last JSNA in 2018 although risen again in the last year. The number of cases of domestic abuse with injury is lower in Bromley in 2022 compared to 2018, but not in Sutton or Havering.

¹⁶ Laming, W.H. (2009). *The protection of children in England: a progress report*. [online] Available at: http://dera.ioe.ac.uk/8646/1/12_03_09_children.pdf [Accessed 23/10/2017].

¹⁷ HMIC. (2014). *Everyone's business: Improving the police response to domestic abuse*. [online] Available at: <https://www.justiceinspectors.gov.uk/hmicfrs/wp-content/uploads/2014/04/improving-the-police-response-to-domestic-abuse.pdf> [Accessed 23/10/2017].

¹⁸ Lewis, G. and Drife, J. *Why mothers die 2000 to 2002: the sixth report of the Confidential Enquiries into Maternal Deaths in the UK*. (2004). [online] Available at: https://stratog.rcog.org.uk/sites/default/files/Gynaecological%20emergencies/CEMACH_Why_Mothers_Die_00-02_2004.pdf [Accessed 23/10/2017].

¹⁹ Howard, L.M., Oram, S., Galley, H., Trevillion, K. and Feder, G. (2013). *Domestic Violence and Perinatal Mental Disorders: a systematic review and meta-analysis*. PLOS Medicine, 10, e1001452.

²⁰ ONS November 2021

Table 2. 1: Domestic violence offences in Bromley and comparators, September 2021 to August 2022

	Bromley	Sutton	Havering	London
All domestic abuse offences	2729	1975	2969	
DA offences rate per 1,000 population	8.2	9.5	11.5	10.8
Rate change August '21 to July '22	↑3.6%	↑11.7%	↑4.9%	↓1.9%
Domestic Abuse violence with injury	628	464	718	

Source: MOPAC, 2022

While Covid-19 has not in itself caused domestic abuse, public health measures to manage the pandemic have created a conducive context for it to happen. For many, this period has led to an escalation of violence and abuse, closed routes for people to escape safely and made it more challenging to bring perpetrators to justice²¹. Ninety per cent of specialist services reported increased demand since the Covid-19 pandemic.

In Bromley our data shows an increase in the use of the DA services. In the year 2021/22 we have seen:

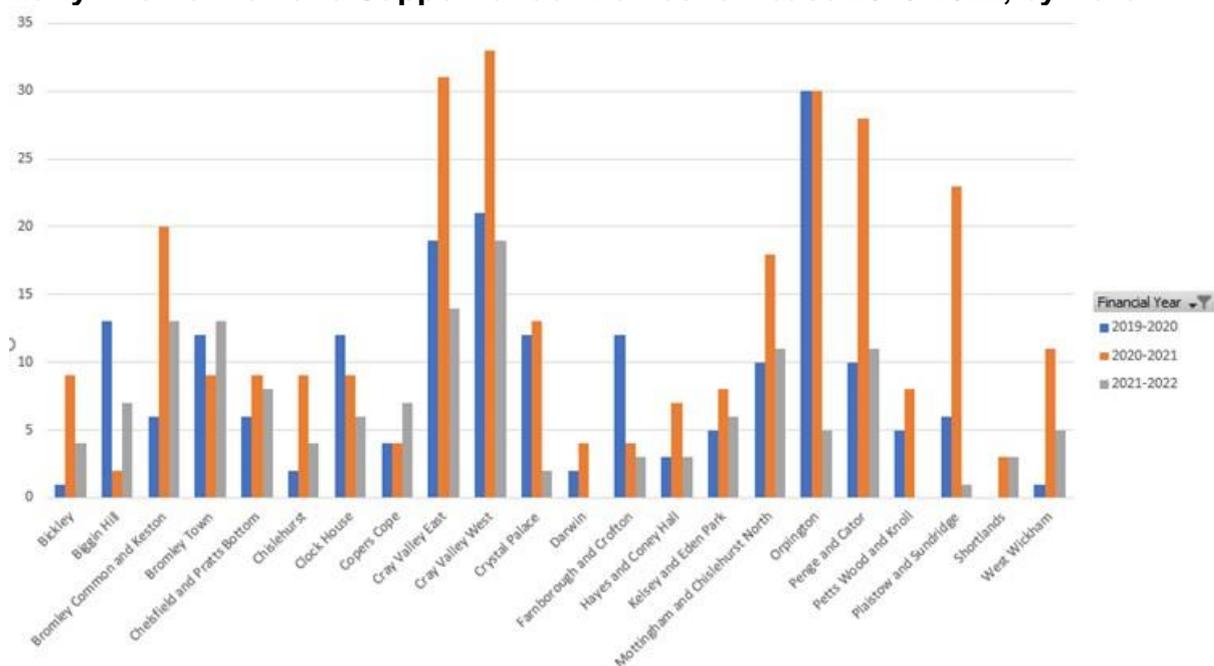
- Use of the One-Stop-Shop services increased from 358 in both 2019/20 and 358 in 2020/21 to 500 people in 2021/22.
- The number of victim survivors referred into the IDVA Service slightly decreased from 943 in 2020/21 to 922 in 2021/22. This was an increase from 466 in 2019/20.

The Children Social Care assessment process in Bromley, April to August 2022, identified 506 parents where domestic abuse was a significant factor and 210 children.

The Bromley Children Project Early Intervention and Family Support data shows which families are being supported because of domestic violence and abuse. The distribution of these families across the borough in 2019-2022 is shown in Figure 2.14.

²¹ Safe Lives report: Practitioner Survey (2021)

Figure 2.14: Number of Children in Bromley living in families “attached” by Early Intervention and Support under Domestic Abuse 2019-2022, by ward



Source: EIFS, LBB, 2018

What does this mean for families in Bromley?

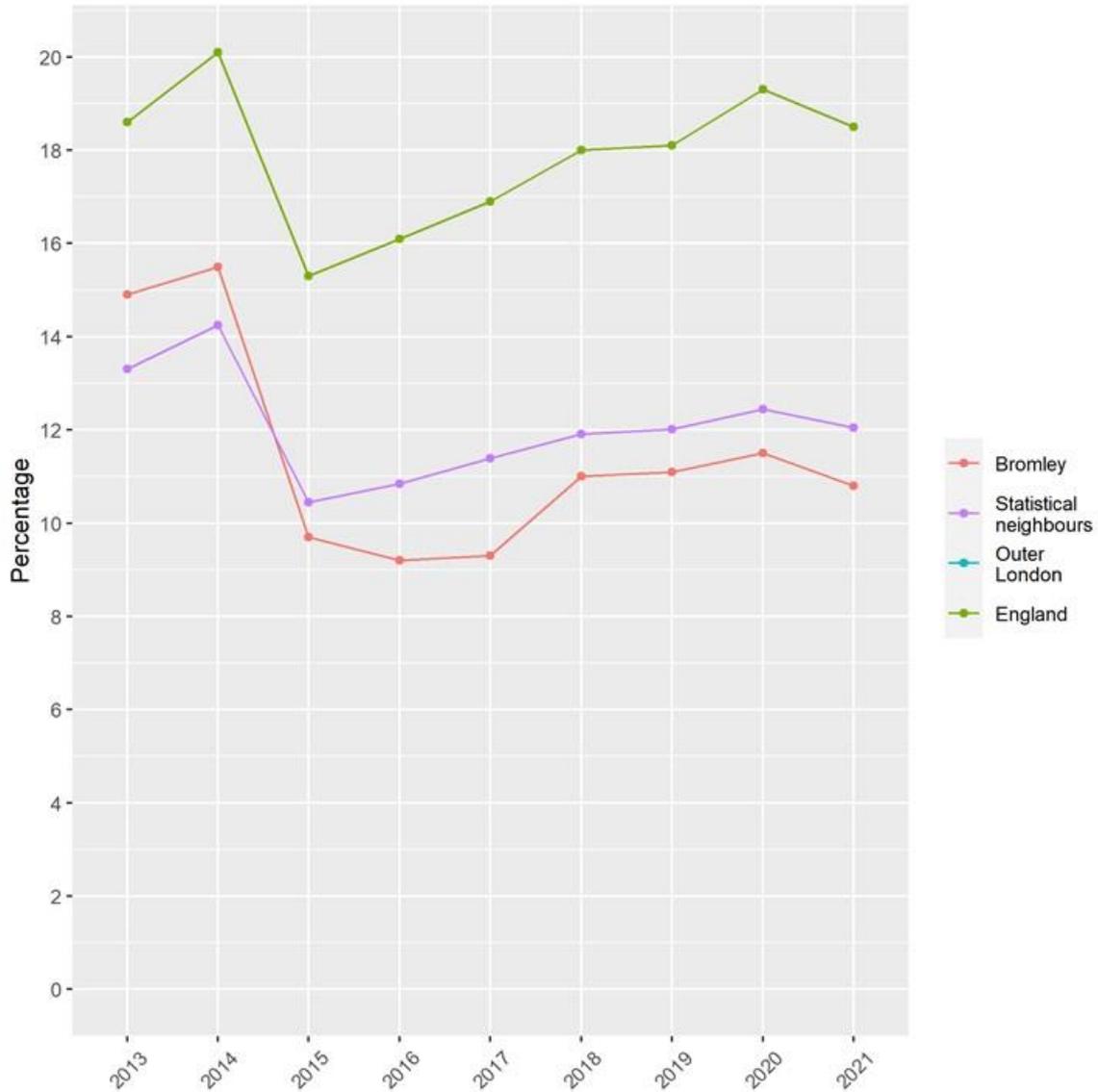
Domestic abuse is one of the commonest reasons why families are assessed by Children’s Social Care.

Rates of Domestic Abuse appear to have peaked in 2020/21 and have since fallen.

b) Financial stress

Bromley is the 4th least deprived borough in London overall. The IDACI (income deprivation affecting children index) was 13.9% in 2019 compared to 17.1 for England. This makes Bromley the 8th least deprived borough in London for children. The rate of children in Bromley living in poverty is low compared to statistical neighbours and England. The rate of under 16s living in low income families in Bromley and comparators is shown in Figure 2.15).

Figure 2.15: Percentage of children under the age of 16 in low income families in Bromley

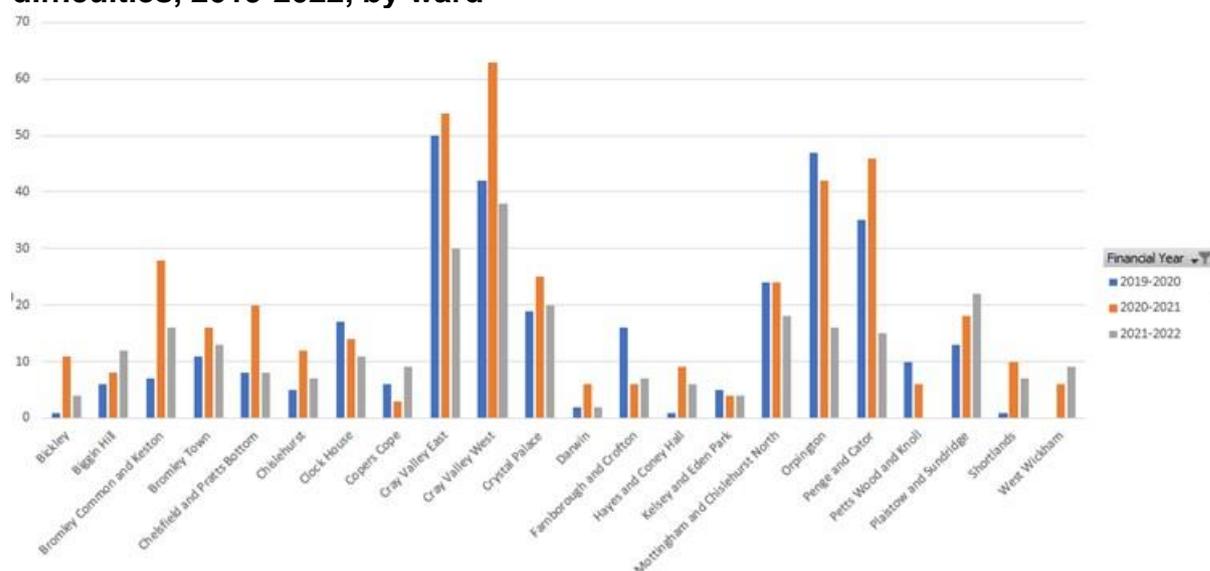


Source: LAIT, 2018

Overall, in 2021, 10.8% of children aged under 16 in Bromley were living in low income families compared to 16.6% in London and 18.5% in England.

The Early Intervention and Family Support team provide support to families with unemployment, housing or financial difficulties. Figure 2.16 indicates that there was a peak in support needs in many parts of the borough in 2020/21 but needs have since fallen again in most areas. Support needs continue to be high in the Crays, Plaistow and Sundridge, and Crystal Palace.

Figure 2.16: Number of Children in Bromley living in families “attached” by Early Intervention and Support under unemployment, housing or financial difficulties, 2019-2022, by ward



Source: EIFS

Parental worklessness

Worklessness not only reduces family income, it can also damage families’ resilience, health and stability, and thus undermine child development. Children in workless families are almost twice as likely to fail at all stages of their education, and workless parents are more likely to experience relationship distress. Overall employment rates in Bromley are high as shown in Table 2.3.

Table 2. 2: Employment in Bromley, April 2021 to March 2022

	Bromley		London	Great Britain
	number	%	%	%
Economically active	192,000	87.4	79.5	78.5
In employment	182,000	82.7	75.2	75.2
Employees	157,600	72.7	63.9	65.6
Self employed	23,500	9.9	11.0	9.3
Unemployed (model based)	8,500	4.4	5.4	4.1
Total claimants of out-of-work benefits	5,895	2.9	4.7	3.7

Source: NOMIS Official labour market statistics

What does this mean for families in Bromley?

Poverty and unemployment is low in Bromley.

There was a peak in need for support with employment, housing or financial issues in 2020/21 which has since fallen again.

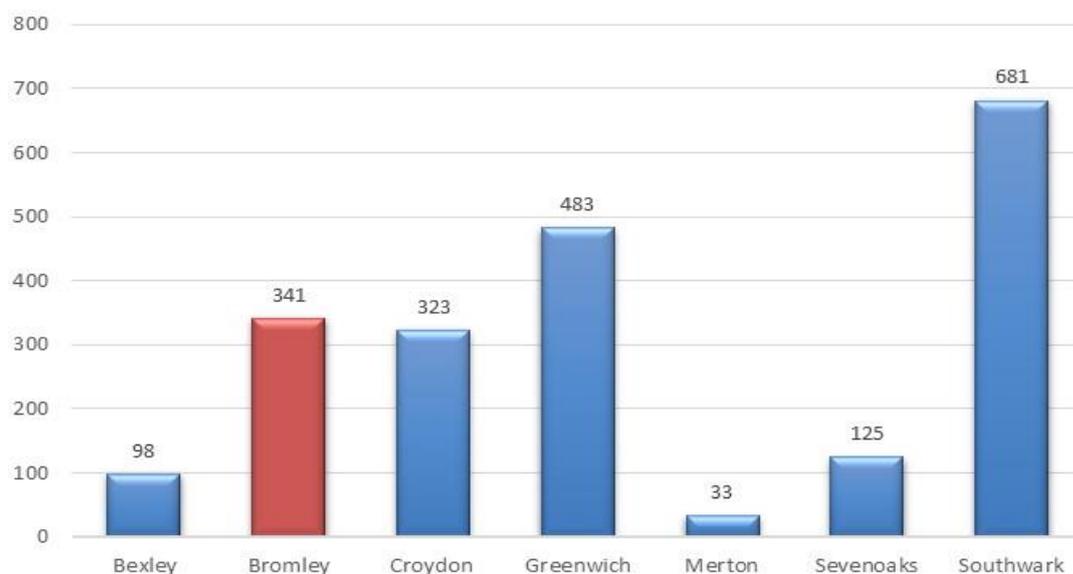
c) Housing issues

There is an observed impact on families as a result of unstable accommodation, for example behavioural issues among children. There is also clear evidence that links poor health with poor housing. Those most susceptible include children and those with chronic health problems. The impact of temporary housing goes beyond the uncertainty and unsettledness that results from feeling displaced and can impact, both, physically and mentally on homeless households. Co-ordination of services to these groups is critical to enable them to exercise decisions or choice over their situation and access health and support services. This can be particularly challenging for households based outside of the borough.

Statutory homelessness refers to homeless people for whom the local authority has a duty to find accommodation. These are described as households deemed to be homeless, eligible and in 'priority need'. Most often 'priority need' refers to adults with dependent children and/ or households with a vulnerable member, such as someone with a disability or someone who has recently left prison.

'Non statutory homelessness' is often referred to as the single homeless i.e. people who find themselves with no stable accommodation but also have no dependents. They are legally entitled to advice rather than accommodation support. This definition also includes non-UK nationals whose immigration status renders them ineligible for acceptance as statutorily homeless²².

Figure 2.17. Number of homelessness acceptances, Bromley and neighbouring Boroughs, April 2021 to March 2022

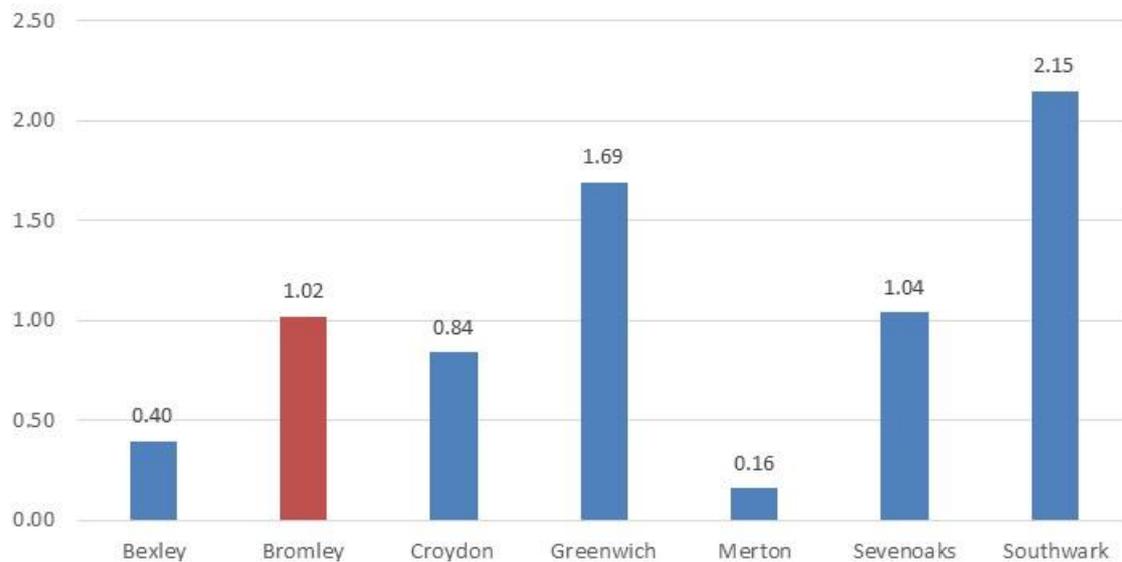


Data source: DLUHC. Statutory homelessness: April 2021 to March 2022.

²² Greater London Authority. (2015). Mayor of London Health Inequality Strategy Delivery Plan 2015-2018 Indicator Report [online] Available at: https://www.london.gov.uk/sites/default/files/mayors_his_delivery_plan_indicator_report_final.pdf [Accessed 23/10/2017].

These figures can also be presented as rates per 1,000 population.

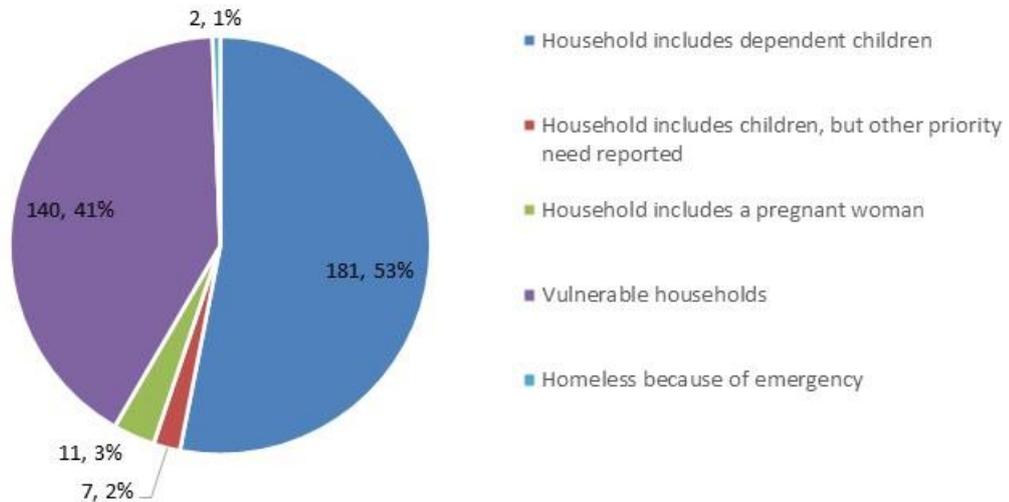
Figure 2.18: Rate of homelessness acceptances per 1,000 population, Bromley and neighbouring Boroughs, April 2021 to March 2022



Data source: DLUHC. Statutory homelessness: April 2021 to March 2022

Families account for the majority of accepted homeless households. 45% of accepted homeless households in Bromley are lone parents (Figure 2.24).

Figure 2.19 Number of homelessness acceptances by priority need, Bromley, April 2021 to March 2022

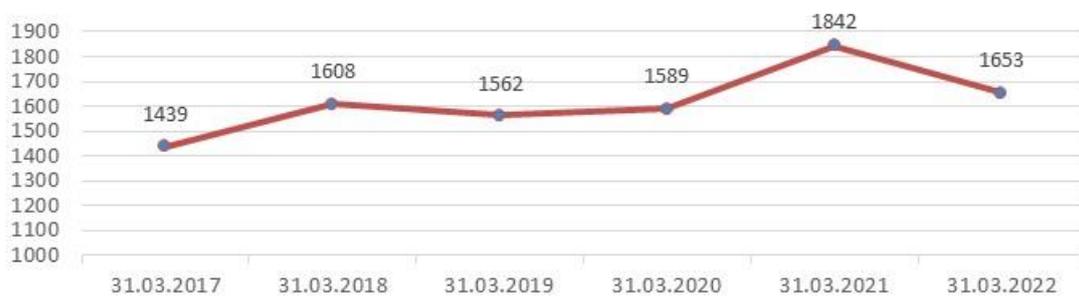


Data source: DLUHC. Statutory homelessness: April 2021 to March 2022

Temporary Accommodation

The number of households in temporary accommodation in Bromley fell in the year 2021/22.

Figure 2.20: Total number of households in temporary accommodation in Bromley at end March, 2017 to 2022

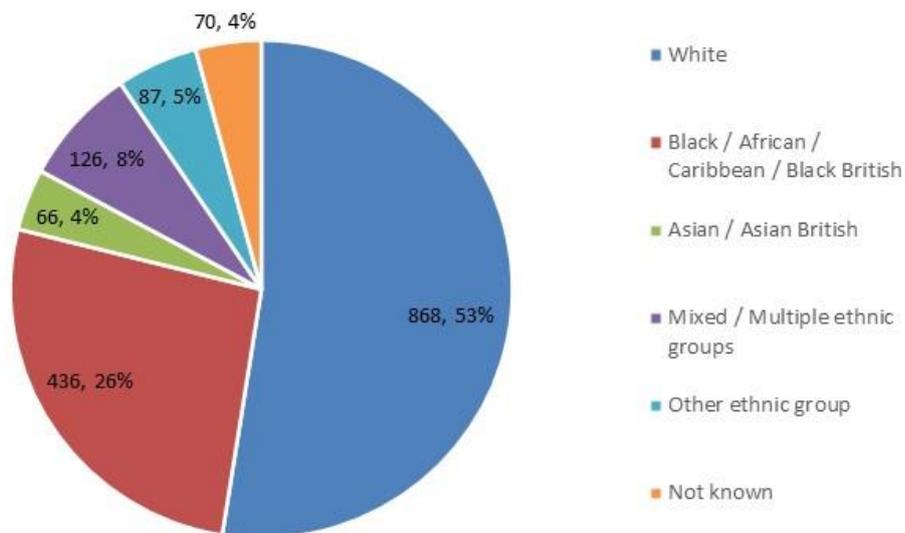


Data source: DLUHC.

Of these 1653 households, 1052 had children. A few had the main applicant aged 16-17 years.

The ethnicity of applicants is shown in Figure 2.21. The proportion of people in temporary accommodation who are black is higher than the proportion in the general population, meaning that black people are over-represented in this vulnerable group.

Figure 2.21: Ethnicity of main applicants in temporary accommodation, Bromley, April 2021 to March 2022



Data source: DLUHC. Ethnicity of main applicants in temporary accommodation, 31 March 2022

39% of applicants have been in temporary accommodation for between 2 – 5 years; of these, 396 households have been in nightly paid accommodation.

What does this mean for families in Bromley?

There are 1052 families with children living in temporary accommodation in Bromley as at end March 2022. Some of them are in nightly paid accommodation. The number of families in temporary accommodation is falling. Black families are over-represented in this group.

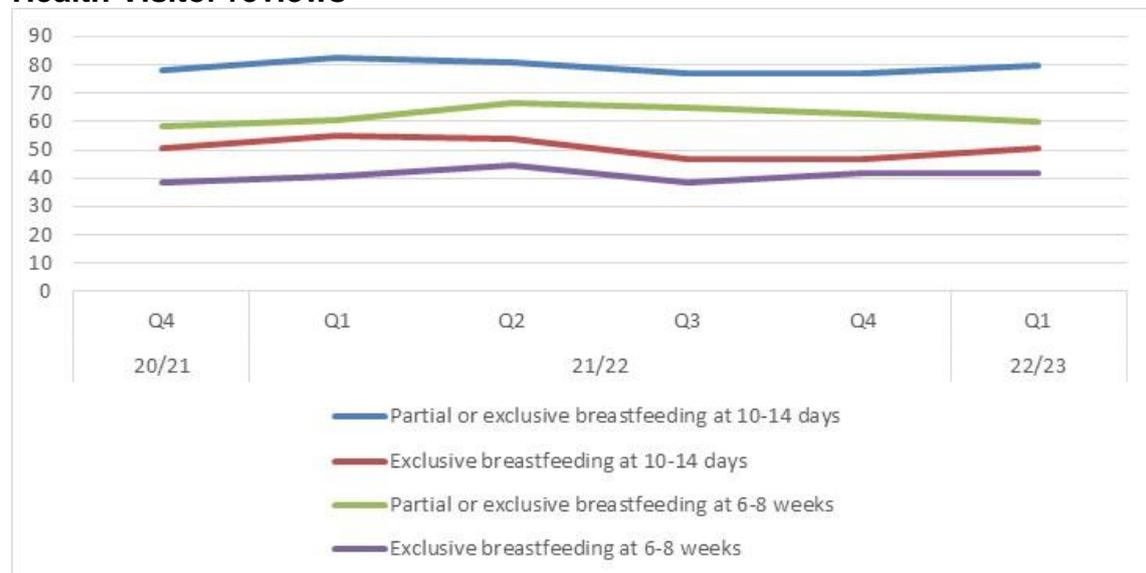
4. Protective factors

a) Breastfeeding

Breastfeeding not only provides the ideal nutrition for a baby and additional immunity, it is also important in promoting bonding between mother and baby.

Women are encouraged to initiate breastfeeding soon after delivery. The proportion of women still breastfeeding when they attend a review with a Health Visitor at 10-14 days and at 6-8 weeks is shown in Figure 2.22 below. This shows that those women who are exclusively breastfeeding at 10-14 days are highly likely to still be breastfeeding exclusively at 6-8 weeks. Those who are partially breastfeeding at 10-14 days (combining breastfeeding with bottle feeding) are slightly less likely to still be breastfeeding at 6-8 weeks.

Figure 2.22: Proportion of infants breastfed at 10-14 days and at 6-8 week Health Visitor reviews



Source: Bromley Healthcare, 2022

b) Immunisation

The combined DTaP/IPV/Hib/HepB is the first in a course of vaccines offered to babies to protect them against diphtheria (D), pertussis (P - whooping cough), tetanus (T), Haemophilus influenzae type b (HiB - an important cause of childhood meningitis and pneumonia), polio (IPV is inactivated polio vaccine) and Hepatitis B (HepB). Given at the same time are Men B (against Meningococcal group B bacteria), PCV (against pneumococcal disease) and oral rotavirus vaccine. These vaccines are offered when babies are two, three and four months old.

From one year of age babies are offered the meningococcal C (MenC) vaccine (meningococcal group B and C bacteria can cause meningitis and septicaemia). They are also offered PCV and MenB boosters and the first dose of MMR (Measles, Mumps and Rubella) vaccine. MMR is the combined vaccine that protects against

measles, mumps and rubella. Measles, mumps and rubella are highly infectious, common conditions that can have serious complications, including meningitis, swelling of the brain (encephalitis) and deafness. They can also lead to complications in pregnancy that affect the unborn baby and can lead to miscarriage.

At around the age of 3, children are offered boosters against diphtheria, tetanus, pertussis and polio and a second dose of MMR before starting school.

The national human papillomavirus (HPV) immunisation programme was introduced in 2008 for secondary school year 8 females (12 to 13 years of age) to protect them against the main causes of cervical cancer. It is now offered to year 8 boys as well as girls. In year 9 young people are offered boosters against diphtheria, tetanus and polio and also offered vaccination against further types of meningitis (Men ACWY).

Vaccination coverage is the best indicator of the level of protection a population will have against vaccine preventable communicable diseases. Coverage is closely correlated with levels of disease. Monitoring coverage identifies possible drops in immunity before levels of disease rise.

Table 2.3: Vaccination coverage of some key immunisations, Bromley and comparators, 2021/22

Vaccine	Age*	Coverage by specified age, 2021/22		
		Bromley	London	England
DTaP/IPV/Hib– 3 doses	1	92.8	86.7	92.0
PCV – 1 dose	1	93.4	89.1	93.2
Hib/MenC	2	90.0	82.2	89.8
PCV booster	2	87.7	81.1	90.1
MMR – 1 dose	5	92.9	88.8	94.3
MMR – 2 doses	5	89.1	75.1	86.6

*This is the age by which the vaccine should have been given
Source: OHID Fingertips, 2022

This data shows that coverage in Bromley of routine vaccinations is generally good. The lower vaccination rates during the pandemic mean that there is now a chance of outbreaks of highly infectious diseases like measles. Catch up vaccinations are being offered where they have been missed.

What does this mean for families in Bromley?

Breastfeeding rates have been gradually improving in Bromley.

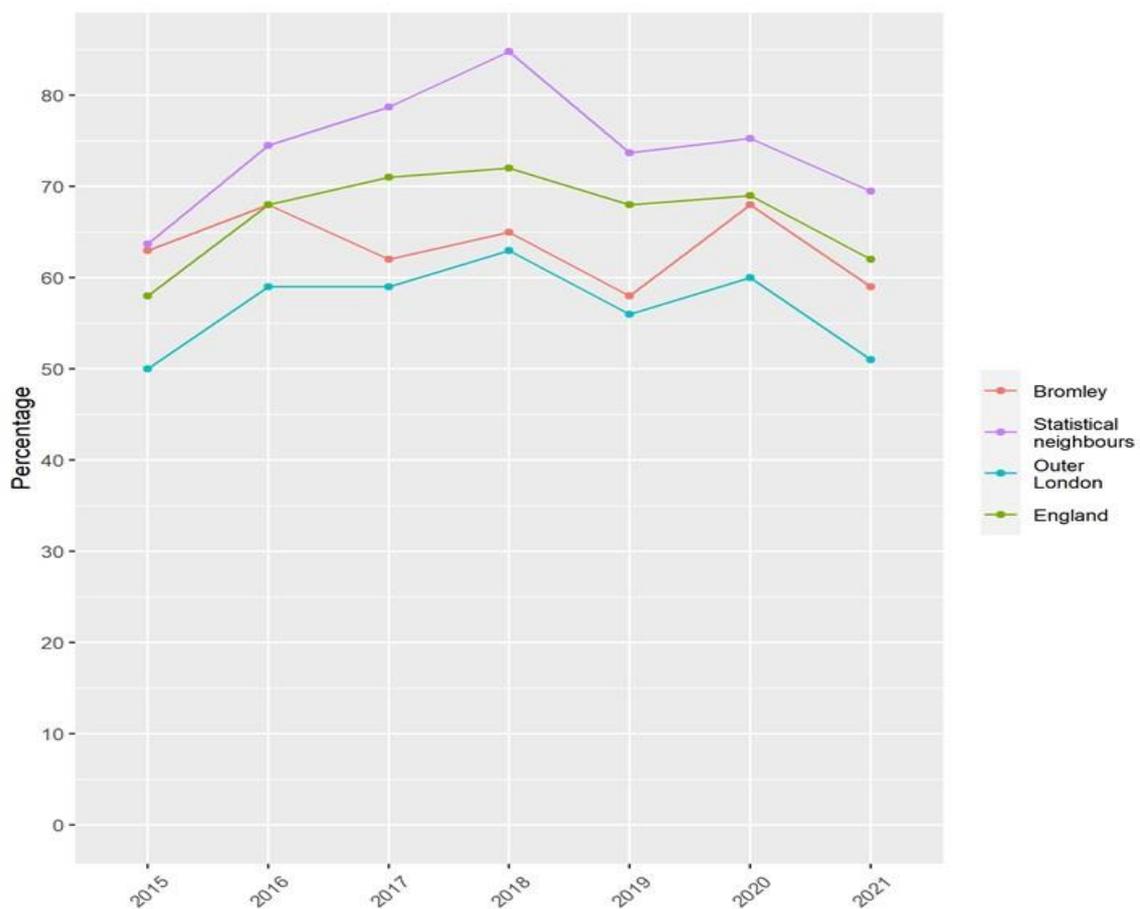
Immunisation rates in Bromley only reduced slightly through the pandemic period, but for highly infectious diseases such as measles this could be enough to make the population susceptible to an outbreak of disease.

c) Early Education

A child's brain undergoes its most rapid growth in the years before they start school. Research has shown that children living in poverty often start school developmentally disadvantaged with a gap in achievement seen from as early as 22 months. Education is a key protective factor against poverty in later life due to its impacts on attainment, employment and health.

All 3 and 4 year olds in England and some 2 year olds (where the parents are on benefits) are entitled to free Early Educational Entitlement but not all take up the offer.

Figure 2.23: Percentage of 2 year old children benefitting from funded early education

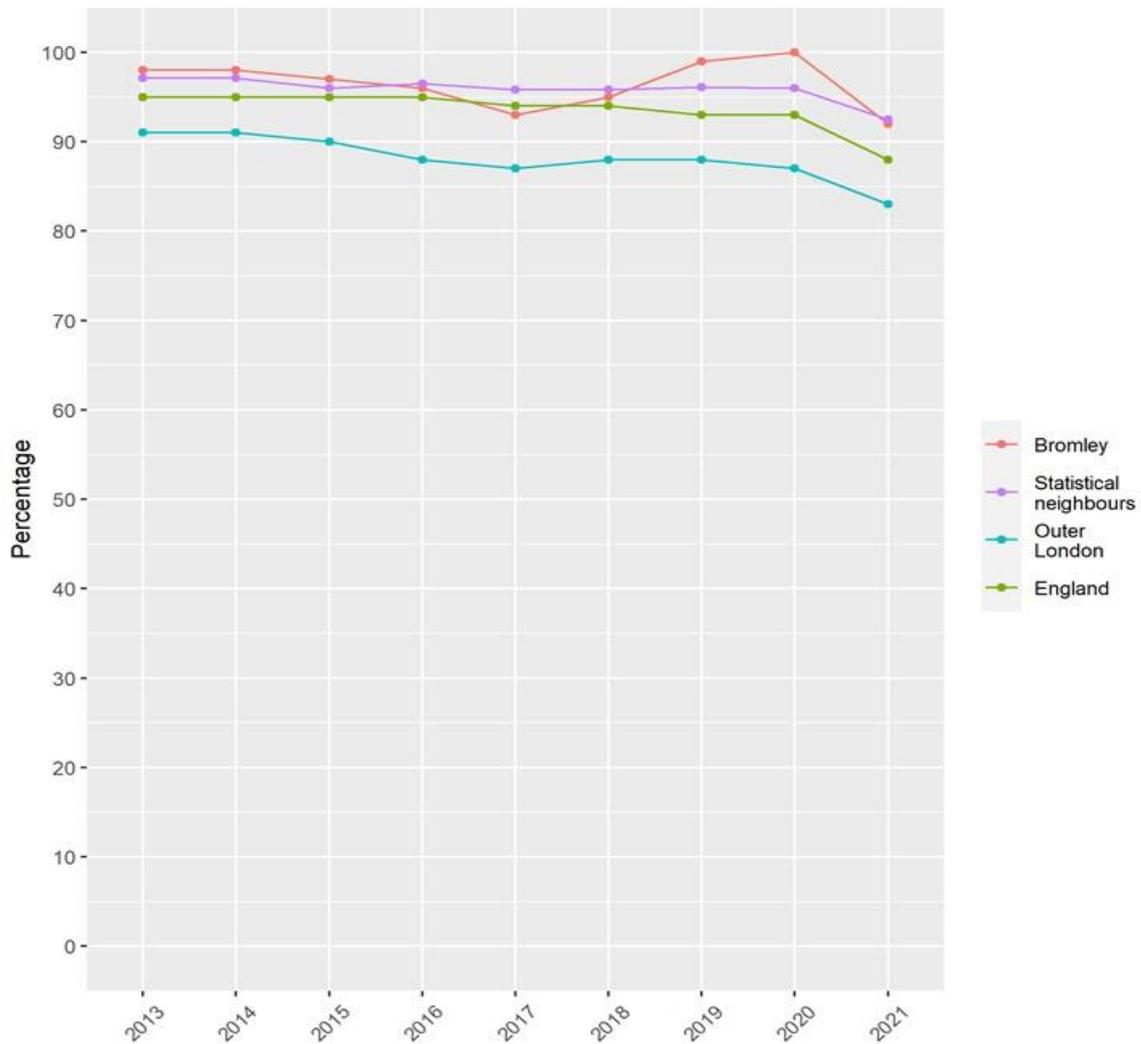


Source: LAIT, 2018

Figure 2.23 shows that the rate of take up for 2 year olds appears to have stalled in Bromley as elsewhere. This may be an effect of the pandemic.

Take up of the free early education for 3 and 4 year olds as shown in Figure 2.24 is much higher and in Bromley reached nearly 100% just before the pandemic.

Figure 2.24: Percentage of 3 & 4 year old children benefitting from funded early education



Source: LAIT

What does this mean for families in Bromley?

The number of children who needed intensive support increased in 2020/21 and has since reduced again in most wards except the Cray Valley, Mottingham and Chislehurst North.

The proportion of children in early education is very good for 3 & 4 year olds but could still improve for eligible 2 year olds.

Key findings from Section 2

Health and lifestyle issues of parents

Adults registered with a Bromley GP have higher rates of long-term health conditions than the average for South East London

The risks most frequently identified early in pregnancy in Bromley are mental health issues and obesity. Smoking rates in pregnancy are falling. Babies of women who smoke have poorer outcomes

Babies born with a low birthweight are more likely to be born to mothers living in Cray Valley West, Crystal Palace, or Plaistow and Sundridge

The teenage pregnancy rate continues to fall in Bromley.

12% of Children in Need in Bromley have a parent who uses drugs

Hospital admission rates due to drug-related issues are highest in the 18-24 age group in Bromley. Presentation to local drug services at all ages is increasing. Rates of successful completion of drug treatment in Bromley is higher than the national rate.

1% of adults in Bromley are alcohol dependent. This is one of the lowest rates in London.

Mental health issues of parents

More than 25% of pregnant women in Bromley reported a history of mental ill health at booking for pregnancy care

GP data shows that recorded depression in adults is increasing.

Social issues of parents

Between April and August 2022, Children Social Care assessments identified 177 families where parent/carer was misusing alcohol.

Domestic abuse is one of the commonest reasons why families are assessed by Children's Social Care.

Rates of Domestic Abuse peaked in 2020 and have since fallen.

Poverty and unemployment is low in Bromley.

There was a peak in need for support with employment, housing or financial issues in 2020/21 which has since fallen again.

.There are 1052 families with children living in temporary accommodation in Bromley as at end March 2022. Some of them are in nightly paid accommodation.

The number of families in temporary accommodation is falling. Black families are over-represented in this group.

Protective factors for children

Breastfeeding rates have been gradually improving in Bromley.

Immunisation rates in Bromley only reduced slightly through the pandemic period, but for highly infectious diseases such as measles this could be enough to make the population susceptible to an outbreak of disease.

The proportion of children in early education is very good for 3 & 4 year olds but could still improve for eligible 2 year olds.

Glossary and abbreviations

CiN	Children in Need
CLA	Child Looked After
DTaP	Diphtheria, Tetanus and Polio (vaccination)
DLUHC	Department of Levelling Up, Housing and Communities
ECHS	Education, Care and Health Services
EIFS	Early Intervention and Family Support (LB Bromley)
GP	General Practitioner
Hep B	Hepatitis B (vaccine)
Hib	Haemophilus influenzae type B (vaccine)
HPV	Human Papilloma Virus (vaccine)
IMD	Index of Multiple Deprivation
IPV	Inactivated Polio Vaccine
LAIT	Local Authority Interactive Tool
LSOA	Lower-layer Super Output Area
MenB	Meningitis B vaccine (also Meningitis A, C, W, Y vaccines)
MOPAC	Mayor's Office for Policing and Crime
NCMP	National Child Measurement Programme (height & weight year R & 6)
NCSP	National Chlamydia Screening Programme
NDTMS	National Drug Treatment Monitoring System
NEET	Not in Employment, Education or Training
OHID	Office for Health Improvement and Disparities (formerly part of PHE)
PCV	Pneumococcal Conjugate Vaccine
PHE	Public Health England
PRUH	Princess Royal University Hospital (Bromley)
QOF	Quality Outcomes Framework (GP data)
RTA	Road Traffic Accident