

Cafodd yr ymateb hwn ei gyflwyno i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Flaenoriaethau'r Chweched Senedd](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Sixth Senedd Priorities](#)

HSC PSS 86

Ymateb gan: | Response from: Plant yng Nghymru | Children in Wales



I am aged 18 or over and I would prefer that you did not publish my name alongside my evidence	<input type="checkbox"/>
I am under the age of 18	<input type="checkbox"/>
7. Please choose one of the following options to confirm whether you have agreement from any third parties referred to in your evidence that you can share information that may be used to identify them and that they understand that it may be published.	
I confirm that any third party I have referred to in my evidence has agreed that I can share information that may be used to identify them, and that they understand that it may be published.	<input type="checkbox"/>
I do not have the agreement of one or more of the third parties I have referred to in my evidence.	<input type="checkbox"/>
I have not referred to any third parties in my evidence.	<input checked="" type="checkbox"/>

Question 1: Initial priorities identified by the Committee

Question 2: Key priorities for the Sixth Senedd

Children in Wales would request that the Committee undertake an **inquiry into health inequalities**. This inquiry should be undertaken with the involvement of other Senedd Committees, in particular, the Children, Young People and Education Committee. We have made a similar request in our response to that Committee's call for priorities this Senedd term.

Rationale

In December 2020, Children in Wales undertook a programme of work with our members and partners to capture the progress being made by the Welsh Government to deliver on its commitments to implement the United Nations Convention of the Rights of the Child (UNCRC). This work was undertaken through our professional network, the Wales UNCRC Monitoring Group

We published the 'State of Children's Rights in Wales'¹ and engaged widely with stakeholders, Senedd members and the Welsh Government to promote the findings. This report, compiled during the pandemic, was submitted to the UN to help inform their future considerations as part of the current UN reporting cycle.

The State of Children's Rights report, with contributions from 90 organisations and key stakeholders in Wales, sets out 30 priority areas and 70 recommendations for Welsh Government across the whole UNCRC to fulfil their obligations for children.

A key priority which emerged was the urgent need to tackle **health inequalities in Wales** as they impact on children and their families. It was clear from the evidence we received that the pandemic has served to exacerbate existing inequalities in relation to both physical and mental health amongst children, with many of the challenges being prevalent over many proceeding years.

Socio-economic disadvantaged was a particular determinant of health inequalities amongst children.

Our report requested that the Welsh Government address the inequalities gap and improve access to primary care and specialist healthcare services for all children.

Below is the extract from our Report with hyperlinks to more detailed evidence.

"The health of children is shaped by the conditions and circumstances in which they live. Despite a lack of disaggregated data to help identify particular groups of children who face poorer health outcomes, research shows a strong correlation between health inequalities and socio-economic disadvantage across a range of indicators, and the gap with peers is widening.²

Infant mortality rates for children under 1 years have risen,³ with higher rates recorded in the most deprived areas.⁴ Child mortality rates are 70% higher amongst most than least deprived groups⁵ and life expectancy rates are now declining.⁶

Socio-economic deprivation is a predictor of childhood obesity, with the prevalence gap between most and least deprived areas increasing from 4.7% to 6.2%,⁷ as obesity rates at local levels reach 17.5%.⁸ 27.1% of children aged 4-5 in Wales are overweight or obese

¹ <https://www.childreninwales.org.uk/professionals/our-work/state-childrens-rights/>

² RCPCH Wales (2020) [State of Child Health](#)

³ [ONS](#) – in 2018, Infant mortality rates were 3.8 deaths per 1,000 live births in England and Wales compared with 3.9 the previous year but significantly above the lowest rate of 3.6 recorded in 2014.

⁴ [ONS](#) – in 2018, infant mortality rates were 5.7 deaths per 1,000 live births in the 10% most deprived areas in Wales

⁵ RCPCH Wales – [State of Child Health](#) Children aged 1-9 years

⁶ Chief Medical Officer for Wales (2019) [Valuing our health: Annual Report 2018/19](#)

⁷ Public Health Wales (2018) [Child Measurement Programme for Wales 2017/18](#) (amongst children aged 4-5)

⁸ *ibid*

compared to 22.6% in England.⁹ There is a strong correlation between socio-economic deprivation and higher dental decay,¹⁰ smoking rates,¹¹ lower fruit and vegetable consumption,¹² sport participation¹³ and increased exposure to air pollution.¹⁴

Encouragingly, teenage conceptions have fallen sharply,¹⁵ relationship education is being reformed,¹⁶ innovative laws have extended smoking bans in cars, hospitals, school grounds and playgrounds,¹⁷ and further commitments to deliver safer environments for children have been published.¹⁸

Early intervention, promoting healthy lifestyles and prevention of poor health amongst all children and parents, including within the first 1,000 days, require adequate levels of investment to support local partners to meet growing need. Individuals require better information to enhance understanding and help prevent and manage health conditions.¹⁹ COVID-19 has brought this into sharp focus, exacerbating prevailing barriers to accessing primary care and specialist healthcare services, including palliative care²⁰ and bereavement services”

We hope that this information and our request is helpful in supporting the Committee when determining your future work programme. We look forward to working with members of the Committee again during this Senedd term and are happy to be contacted on any aspect of our work.

⁹ ibid

¹⁰ Welsh Government (2017) [Taking Oral Health Improvement and Dental Services Forward in Wales](#)

¹¹ Ash Cymru/Wales (accessed 2020) <https://ash.wales/wales-smoking-statistics/>

¹² Hewitt G., Anthony R., Moore G., Melendez-Torres G.J., Murphy S. (2019) [Student Health and Wellbeing In Wales: Report of the 2017/18 Health Behaviour in School-aged Children Survey and School Health Research Network Student Health and Wellbeing Survey](#). Cardiff University, Cardiff.

¹³ Sport Wales (2018) [School sport survey 2018: state of the nation](#)

¹⁴ Welsh Government (2020) [Clean Air Plan for Wales](#)

¹⁵ ONS (2018) [Conceptions in England and Wales](#) and RCPCH Wales (2020) [State of Child Health](#)

¹⁶ See Section on Education

¹⁷ Welsh Government (2020) [Written Statement](#) - Existing Smoke free restrictions will be extended to hospital grounds, public playgrounds, outdoor children's care settings and school grounds from 1st March 2021 under existing legislation.

¹⁸ See for example. Welsh Government (2019) ['Healthy Weight, Healthy Wales'](#) guidance

¹⁹ See for example, Welsh Government (2019) [A Healthier Wales](#)

²⁰ W/Government should implement recommendations from the [Cross Party Group on Hospices and Palliative Care 2018 Inquiry: 'Inequalities in access to hospice and palliative care'](#), which relate to paediatric palliative care services. Recommendations include: access to out-of-hours services and increased resourcing of community nursing. See also more detailed evidence received from Lynette Thacker (Clinical Nurse Specialist Paediatric Palliative Care)