

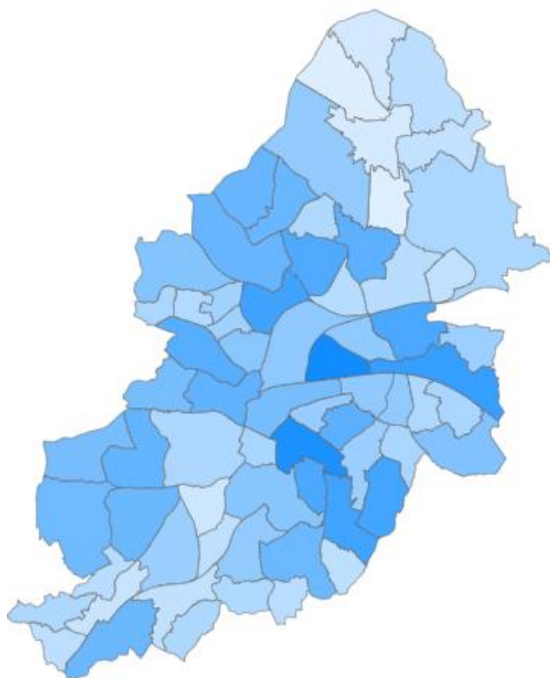
A summary picture of Children & Young People in Birmingham: Starting Well (under 5s)

This document provides a summary of the key facts and figures for children aged under 5 in Birmingham. For detailed information on a wider range of data (including sources), please see the [JSNA Starting Well dashboard](#).

Every child deserves the best possible start in life, and the early years are a crucial period for laying the foundation for lifelong health, well-being, and success. The Starting Well Joint Strategic Needs Assessment (JSNA) celebrates the opportunities to nurture and support children, families, and communities during this vital stage of development. Starting well is critical because early life experiences influence a child's ability to thrive and lay the groundwork for long-term health and well-being.

The Starting Well JSNA provides evidence-based insights to guide decision-making, ensuring resources are targeted effectively and interventions are designed to meet the unique needs of children and families within the city. Through collaboration with stakeholders, the JSNA seeks to build a healthier, more equitable future for young children.

Population



Birmingham is predominantly a young city, with just over half (51.4%) the population aged under 35 years. Around 74,579 Birmingham citizens are aged 0-4 years, representing 6.4% of the population. Just over half (50.6%) of the 0-4 age group are male and 49.4% are female.

The East of the city has larger numbers of children aged 0-4 years, with the highest proportions of 0-4 year olds seen in the following wards: Tyseley and Hay Mills (8.1%), Bordesley Green & Highgate (8.0%), and Alum Rock (7.9%).

The 0-4 age group is forecast to grow to around 81,794 by 2033, an increase of 16.2%.

Figure 1: Proportion of population aged 0-4 years by ward (ONS 2022 Population estimates)

Deprivation

Income Poverty

Across the city, 27.6% of children (aged 0-15 years) live in income deprived families. This is significantly higher than the England average of 17%. There is much variation across the city, with the highest levels of income poverty seen in Nechells, Allens Cross and Castle Vale. In these wards, over 70% of children live in income deprived families. Nechells and Castle Vale wards are in the 10% most deprived areas nationally.

Absolute and Relative Low-Income Families

There are 82,888 children under the age of 16 years in Birmingham living in absolute low-income families, equivalent to almost one in three (32.5%) children. Five year trends show this rate is increasing. Similarly, two in five (40.8%) children are living in relative low-income families, totalling 104,433 children. This rate is also increasing. Both these rates are significantly worse than the England average.

Healthy Start

Breastfeeding

Almost three in four (72%) babies received breast milk as their first feed in Birmingham in 2023/24, equivalent to 9,310 babies. This was similar to the England average.

Healthy Child Programme

The Healthy Child Programme offers every family information and guidance to support parenting and healthy choices via a programme of screening tests, immunisations and developmental reviews.

In 2023/24:

- Around 86.8% of infants received a new birth visit from a health visitor within 14 days of birth, significantly higher than the England average of 83%.
- Around 85.2% of one-year-olds received a 12-month review by the time they were 15 months old, significantly lower than the England average of 86.5%
- Around four out of five (81.2%) children received a 2 to 2½ year review by the age of 2½, significantly higher than the England average of 78.4%
- Around three in four (76.3%) children achieved expected levels of development in their 2 to 2½ year review, significantly lower than the England average (80.4%)

Immunisations

In general, early years vaccination coverage in Birmingham is significantly lower than the England average. Five-year trends show coverage is decreasing and getting worse for almost all immunisations aimed at under-fives. This includes the combined 6-in-1 vaccine, the DTaP/IPV and Hib/MenC boosters and the MMR vaccine.

In 2023/24:

- **DTaP/IPV/Hib/HepB (combined 6-in-1):** almost nine in ten (87.5%) children received all three doses of the vaccine before their second birthday. Around three in four (73.9%) received a DTaP/IPV booster by the age of five years.
- **Hib/MenC booster:** around eight in ten (79.5%) children received a Hib/MenC booster by their second birthday.
- **MMR:** around three quarters (74.8%) of children received two doses of the MMR vaccination before the age of five years.
- **Hepatitis B (offered only to infants born to infected mothers):** around 95.9% (equivalent to 93 children) of infants born to Hepatitis B-infected mothers received six doses of the HepB vaccine before the age of 2 years.

Educational Development

School Readiness

School readiness is the broad range of knowledge and skills that provide the right foundation for future progress in school and life. The Early Years Foundation Stage Profile is used to inform plans for child development and identify where intervention is required.

In 2023/24 around 65% of children in Birmingham achieved a good level of development at the end of Reception, equivalent to 9,491 children. This was significantly worse than the England average of 67.7%. Among children with free school meal status, this figure was 59.3% (2,714 children), significantly higher than the England average of 51.5%.

Many factors influence whether a child reaches development goals, including deprivation, ethnicity and gender. Children living in the most affluent areas are more likely to reach expected levels of development. As many of Birmingham's children live in deprived areas, this has an impact on overall achievement, which is lower than average.

However, the percentage of children living in IDACI decile 1 (most deprived 10% nationally) who achieved expected levels of development was higher in Birmingham than the England average. 68% of girls and 55% of boys living in IDACI decile 1 in Birmingham achieved expected levels of development compared to 65% and 51% nationally.

Locally and nationally, more girls achieve expected levels of development than boys.

Childhood Obesity

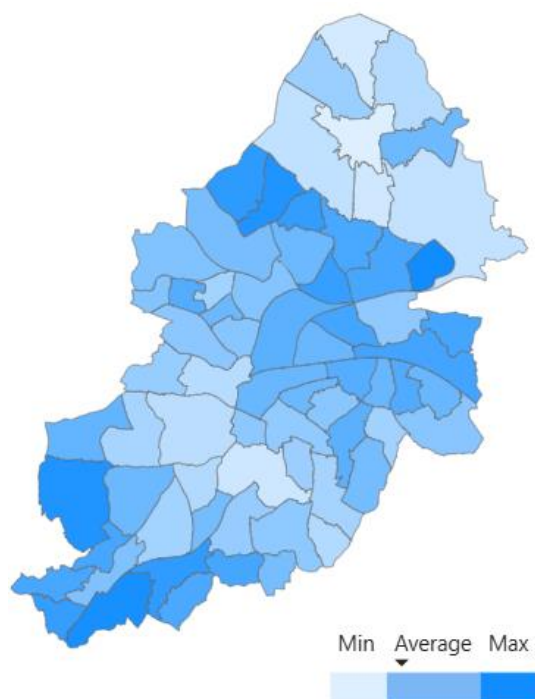


Figure 2: Prevalence of overweight (including obesity) in Reception children, 2021/22-2023/24 (Fingertips, 2025)

In the period 2021/22-2023/24, just over one in five (22.4%) Reception-age children were classed as overweight (including obesity). Prevalence of overweight and obesity in reception children in Birmingham is significantly higher than the England average of 21.9%.

Prevalence of overweight (including obesity) in reception children was highest in the wards Castle Vale (28.8%), Longbridge & West Heath (28.3%) and Bartley Green (27.8%). Obesity levels were highest in Ward End (15.6%), Bartley Green (15.4%) and Gravelly Hill (15.3%).

Obesity in Reception-age children was around three times higher in the most deprived ward (Ward End - 15.6%) than in the least deprived ward (Hall Green South - 5.3%). Prevalence of obesity was around 1.5 times higher in the most deprived wards than the England average of 9.6% (Figure 2).

Emergency Hospital Admissions

Emergency hospital admissions for injuries

The rate of emergency admissions due to injuries for under 5s in Birmingham was 121.2 per 10,000 population per year (2016/17-2020/21), similar to the England rate (119.3). Admission rates varied between wards in Birmingham. The highest rates were seen in Castle Vale (277.3), Allens Cross (244.8), and Handsworth Wood (235.2), while Sutton Roughley (68.0) and Bournbrook & Selly Park (72.9) reported the lowest rates.

The most common causes of injuries that led to an emergency admission for children aged 0-4 years (rate per 100,000 persons, during the period 2016/17-2020/21) were:

- **Falls from furniture:** there were 510 emergency admissions due to falls from furniture, a rate of 122.6. This was similar to the England rate (123.1).
- **Poisoning from medicines:** there were 420 emergency admissions due to poisoning from medicines, a rate of 101.0. This was significantly worse than the England average of 78.7.

- **Burns from food and hot fluids:** there were 260 emergency admissions due to burns from food and hot fluids, a rate of 62.5. This was significantly worse than the England average of 44.4.
- **Inhalation of food or vomit:** there were 55 emergency admissions due to inhalation of food or vomit, a rate of 13.2. This was similar to the England average of 14.2.
- **Hot tap water scalds:** there were 40 emergency admissions due to hot tap water scalds, a rate of 9.6. This was significantly worse than the England average of 5.4.

Hospital admissions for dental caries (0-5 years)

In the period 2020/21-2022/23 there were 90 hospital admissions for dental caries in children aged 0-5 years in Birmingham, equivalent to 32.8 admissions per 100,000 population. This was significantly lower than the England average of 178.8 admissions per 100,000.

Hospital admissions for respiratory tract infections

In 2022/23, there were 737.4 admissions per 10,000 population for lower respiratory tract infections in children under a year old in Birmingham, similar to the England average (789.2). In the same period, there were 96.1 admissions per 10,000 in children aged 1 year, and 30.0 admissions per 10,000 in children aged 2-4 years, both lower than the England rates.

Road traffic accidents

There were 25 children aged 0-5 years who were killed or seriously injured in road traffic accidents in Birmingham in 2023/24, equivalent to 9.1 children per 100,000 population. This was similar to the England rate (7.5 per 100,000).

Infant Mortality

During the period 2021-23, there were 361 infant mortality cases in children aged under 1 year in Birmingham, a rate equivalent to 8.4% of live births in the relevant period. This was significantly higher (more than double) than the England average of 4.1%.

Infant mortality is highly correlated with poverty, and Birmingham rates are highest within the poorest areas of the city. The ambition for Birmingham is to halve the infant mortality rate in the city by 2030.