



Children's Services Strategic Needs Assessment Children and Young People

August 2022



Contents

1. Introduction	6
1.1 Background	6
1.2 Process	6
1.3 Approach.....	7
1.4 Next steps	7
2. Local Context	8
2.1 Introduction	8
2.2 Population.....	8
2.2.1 Population by age range with projected figures	8
2.2.2 Estimated population figures for children and young people in Dumfries and Galloway in 2020.....	9
2.2.3 Birth rates	9
2.3 Rurality and Deprivation	10
2.4 Economy and Employment	11
2.4.1 Weekly wage	11
2.4.2 Universal credit claims.....	12
2.4.3 Employment.....	12
2.4.4 Digital Exclusion	13
2.5 Summary – Local Context.....	15
3. Children and Young People: the Universal Picture	16
3.1 Introduction	16
3.2 Education	16
3.2.1 Early Learning and Childcare	16
3.2.2 Schools and Pupil numbers.....	17
3.2.3 Achievement.....	17
Literacy and Numeracy – S4 to S6 Leavers	18
2021 SQA Attainment.....	20
3.2.4 Initial Leaver Destinations 2019/21	21
3.2.5 Annual Participation Measure.....	21
3.3 Health.....	23
3.3.1 Infant feeding.....	23
3.3.2 Dental Health.....	24
3.3.3 Child Healthy Weight	27
3.3.4 Immunisations	29
3.3.5 Teenage pregnancy.....	32

3.3.6	Emergency hospital admissions for unintentional injuries – children aged under 15.....	33
3.4	Summary.....	35
4.	Vulnerability factors: Children and Young People who may require supports or services that are additional to those provided by universal services.	37
4.1	Introduction	37
4.2	Percentage of children with 1 or more concerns at Child Health 27-30 Month Review	37
4.3	Two-Year-Old uptake of early learning and childcare	39
4.4	School Nurse Referrals.....	40
4.5	Mental Health.....	41
4.5.1	Mental Health Support in Schools Project	42
4.5.3	Community based mental health and wellbeing support	43
4.5.4	CAMHS.....	44
4.6	Children with Additional Support Needs (ASN) in Education.....	47
4.6.1	Primary pupils with Additional Support Needs 2018-21 in Dumfries and Galloway	48
4.6.2	Secondary pupils in Dumfries and Galloway with Additional Support Needs 2018-21.....	48
4.6.3	Dumfries and Galloway Pupils with Additional Support Needs by sector and Reasons for support, 2021-22.....	49
4.6.4	Attendance levels for children with Additional Support Needs in 2021/22.	49
4.6.5	Exclusions for children with Additional Support Needs	50
4.6.6	Achievement in Curriculum for Excellence Levels	51
4.6.7	Senior Phase Attainment at SCQF Levels 4 to 6.....	52
4.6.8	Children with ASN and Post school destinations	52
4.6.9	Evidence from engagement with children with additional support needs .	52
4.7	Children in Education with Child Plans.....	54
4.8	Children in Dumfries and Galloway with Autistic Spectrum Disorder	54
4.9	Children with a disability receiving a service from Social Work	55
4.10	Children assessed or declared as disabled in education	55
4.11	Free School Meals and Clothing Grants	55
4.12	Young Carers.....	55
4.13	LGBT Young People	56
4.15	Summary – Children who may require supports or services that are additional to those provided by universal services.....	56
5.	Vulnerability factors: Children and Young People in need of care and/or protection	59

5.1	Introduction	59
5.2	Child Protection.....	59
5.2.1	Number of referrals to Children and Families Social Work	59
5.2.2	Age Ranges of Children & Families Social Work referrals.....	59
5.2.3	Number of Child Protection referrals	60
5.2.4	Children on the Child Protection Register.....	60
5.2.5	Concerns at Child Protection Registration	61
5.2.6	Number of Re-Registrations within 24 Months of De-Registrations.....	62
5.2.7	Children affected by Domestic Abuse.....	62
5.2.8	Children affected by Substance Misuse.....	63
5.3	Looked-after children and young people	63
5.3.1	Percentage of our population looked-after over time, with comparators. 63	
5.3.2	Looked-after children by placement type	64
5.3.3	Attendance rates for looked-after children	66
5.3.4	Exclusion rates for looked-after children.....	68
5.3.5	Looked-after children’s attainment – literacy and numeracy.....	70
Achievement of a Level - Teacher Judgement Survey – December 2021.....		70
5.3.6	Looked-after children’s attainment – senior phase	72
5.3.7	Percentage of looked-after school leavers in a positive destination approximately 3 months after leaving school.	75
5.3.8	Percentage of looked-after pupils leaving school by stage, compared with non-looked-after pupils	76
5.3.9	Looked-after children’s health assessments.....	76
5.3.10	Number of Homeless presentations from people who had previously been looked-after.	77
5.3.11	Children from other authorities in placements in Dumfries and Galloway. 77	
5.3.12	Findings from Bright Spots	78
5.3.12	16 and 17 Year-olds presenting as homeless.....	84
5.3	Youth Offending	84
5.3.1	Referrals to the Reporter on offence/non-offence grounds, with 3-year trend data.	84
5.3.2	Children referred by Age and Grounds for referral in 2020/21	85
5.3.3	Results of referrals	86
5.3.4	Diversion from Prosecution in Dumfries and Galloway – number of young people annually	86
5.3.5	Young people subject to CARM processes.	86
5.4	Summary: Children in need of care and/or protection	87

6.	Vulnerability Factors: Parents/Carers/Families	89
6.1	Introduction	89
6.2	Maternal Health.....	89
6.2.1	BMI in Pregnancy	89
6.2.2	Maternal Mental Health.....	90
6.2.3	Smoking status at antenatal booking	90
6.3	Domestic Abuse	91
6.3.1	Domestic abuse incidents reported to Police	91
6.3.2	Referrals to Women’s Aid	92
6.4	Parental substance misuse	92
6.5	Children in Poverty.....	95
6.5.1	percentage of children in poverty.....	95
6.5.2	Relative and Absolute Poverty since 2015 in Dumfries and Galloway..	95
6.5.3	Crisis Grant and Community Care Grants	96
6.5.4	Child Payments and Child Bridging Payments	96
6.6	Summary: Parental Vulnerability Factors	97
7.	Vulnerability Factors: Communities.....	98
7.1	Introduction	98
7.2	Drug deaths.....	98
7.3	Alcohol Specific Deaths	100
7.4	Suicides	101
7.6	Summary: Community Vulnerability Factors	102
8.	Engagement and Children’s Rights.....	103
9.	Key Findings	105

1. Introduction

1.1 Background

In developing our 2023-26 Children's Services Plan in Dumfries and Galloway, we are following Statutory Guidance from the Scottish Government, and the Care Inspectorate's [10 Steps to Successful Children's Services Planning](#). The production of a Joint Strategic Needs Assessment (SNA) is Step 2. The Joint Strategic Needs Assessment should gather and analysis information from across services in order to provide evidence of current and future need for both the child population as a whole, and vulnerable groups within this. The aim is that this will then assist our partnership in identifying priorities for our 2023 Children's Services Plan.

1.2 Process

Our process for developing the Joint SNA was as follows:

- The governance and timeline for this activity were agreed by the Children's Services Strategic and Planning Partnership (CSSaPP) Executive Group.
- A multi-agency Reference Group was convened to agree content and assist in development of the document. The Reference Group involved the following roles:
 - Chief Executive Officer, Third Sector Dumfries and Galloway
 - Performance and Improvement Manager, Women, Children and Sexual Health Services Directorate
 - Strategic Planning and Commissioning Manager, NHS DG Strategic Planning and Transformation Directorate
 - Performance and Assurance Officer, Public Protection Team
 - Education Officer- Curriculum and School Improvement
 - Integration and Inclusion Manager
 - Head of Midwifery and Quality Assurance Lead
 - Lead for Nursing and AHPs, Women Children and Sexual Health Directorate
 - Health and Wellbeing Specialist, Public Health Improvement
 - Children's Services Manager
 - Area Manager Skills Development Scotland
 - Community Manager (East) Third Sector Dumfries and Galloway
 - Principal Educational Psychologist
 - Assistant Performance and Intelligence Officer
 - Children's Services Planning & Communications Officer
- The format; scope; and specific content for each section were agreed by the Reference Group.

- Data was collated and the draft document produced by Children's Services Planning and Communications Officer with support from the Reference Group which met during this process to oversee production and discuss key messages.
- The draft document was presented to Children's Services Strategic and Planning Partnership (CSSaPP) Joint Group on 23 August 2022 and further work carried out on it following this.

1.3 Approach

Our approach to developing the Joint SNA was determined by the following factors:

We sought to identify needs of the child population as a whole, and the needs of vulnerable groups within this. We also wanted to consider vulnerabilities that could affect families and communities.

In identifying data for inclusion, we were cognisant of the Scottish Government's work to develop a key set of indicators to support children's services planning. We also sought to include where possible, data where we had other authority/national figures for comparison; where we had trend data; and where we could expect to have continued trend data going forwards.

With regard to the time-frame for producing the SNA; and also the capacity for this activity, we have taken a pragmatic and manageable approach with regard to content.

1.4 Next steps

Findings from the Joint SNA will be used to inform discussions at a multi-agency partnership workshop. This workshop will identify a set of potential priority options for the next Children's Services Plan, and these will undergo further consultation.

2. Local Context

2.1 Introduction

The aim of this chapter is to bring together a set of data that describes key features of Dumfries and Galloway as a region in order to provide a context for the following chapters. This includes data on population, rurality, and the local economy.

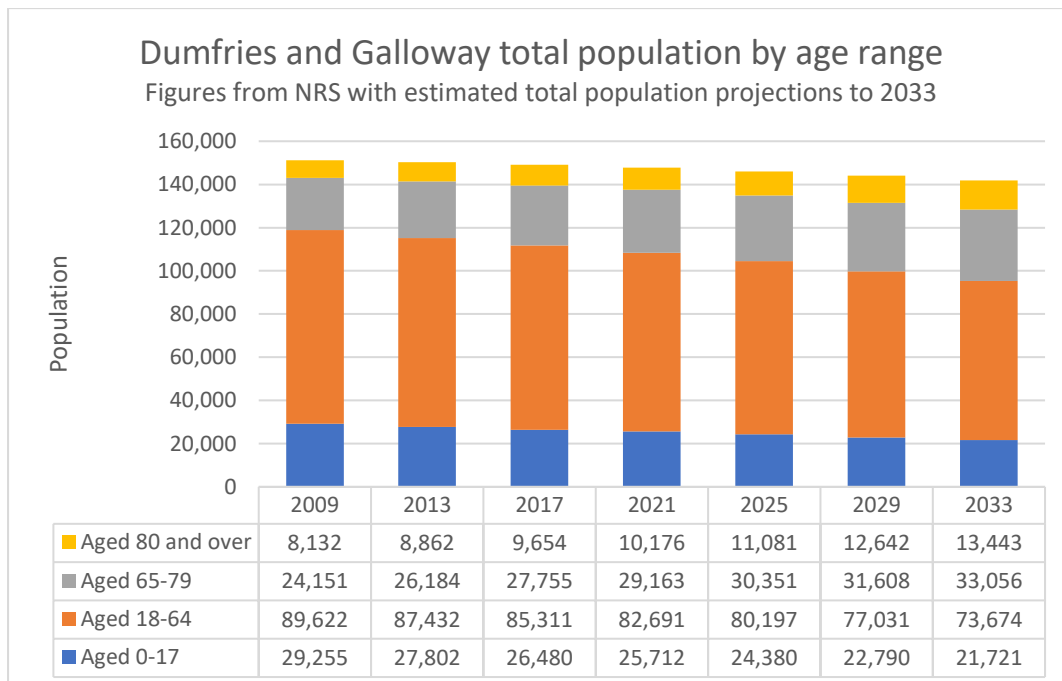
2.2 Population

Population figures, and projected population figures are published by National Records Scotland (NRS) and the latest population projections pre-date the Covid-19 pandemic.

Prior to Covid-19, for at least 2 decades, population projections for Dumfries and Galloway have shown a predicted reduction in the overall population of the region; with a decreasing proportion of children and young people and an increasing proportion of older people¹. Existing figures also predict an increase in the ‘Dependency Ratio’ – this is the ratio of people of working age to people of non-working age. The [2022 Dumfries and Galloway Regional Skills Assessment](#) by Skills Development Scotland predicts that by 2043, Dumfries and Galloway will have a dependency ratio of 80% compared with predicted 60% for Scotland. This means that for every 1000 people of working age, there would be 800 of non-working age.

2.2.1 Population by age range with projected figures

The chart below is based on existing pre-Covid figures and shows a breakdown of the population by age group from 2009, with projected figures through to 2033.



Source: [Population Estimates Time Series Data | National Records of Scotland \(nrscotland.gov.uk\)](https://www.nrscotland.gov.uk/population-estimates-time-series-data)

The chart above shows that the overall population of Dumfries and Galloway is expected to decline over the next decade, with an increasing older population (aged 65 and over) and falling numbers of children, young people, and adults of working age.

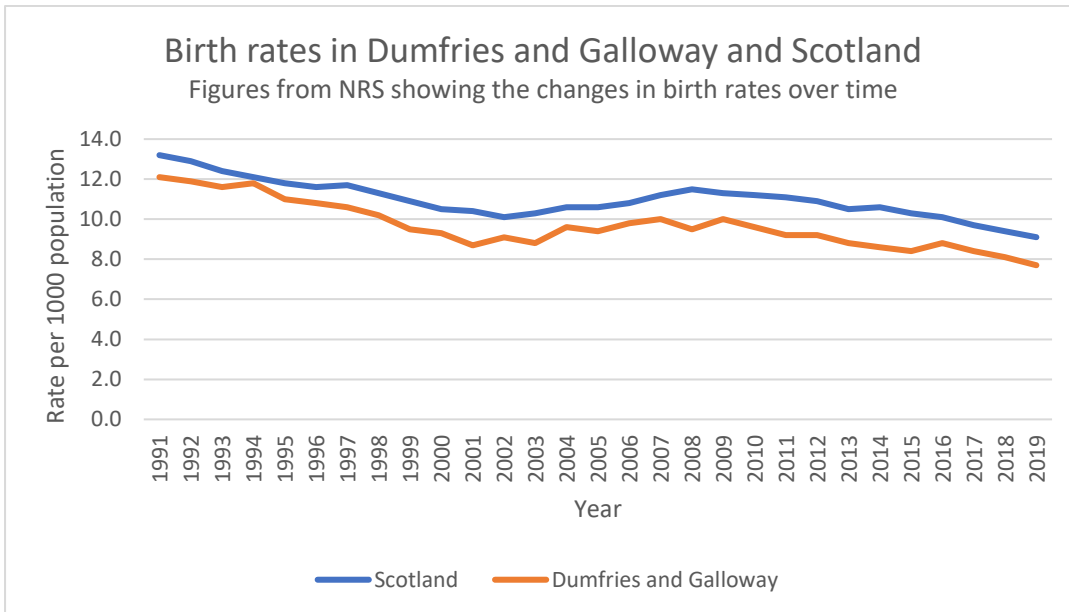
2.2.2 Estimated population figures for children and young people in Dumfries and Galloway in 2020. ³

Population aged 0-25 in Dumfries and Galloway by Age Range – estimated figures 2020		
Age range	Number of individuals	As a percentage of the 0 to 25 population
0 to 4	6,229	16.6%
5 to 11	10,406	27.8%
12 to 15	6,415	17.1%
16 to 17	2,988	8.0%
18 to 25	11,420	30.5%

[Mid-Year Population Estimates | National Records of Scotland \(nrscotland.gov.uk\)](https://www.nrscotland.gov.uk)

2.2.3 Birth rates

The chart below shows how birth rates, as a rate per 1000 population, are falling in both Dumfries and Galloway and nationally. <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/births>



Nationally, in 2002, the falling trend in birth rates started to reverse, and birth rates gradually increased from a low point of 10.1 per 1000 in 2001, to 11.5 per 1000 in 2008 when they again started to decline. Dumfries and Galloway has mostly followed national trends (it should be noted that low numbers in Dumfries and Galloway will result in more fluctuation in the chart) but the birth rate in Dumfries and Galloway has consistently been lower than that nationally.

Key message:

We aim to get it right for every child in Dumfries and Galloway – to take preventative and early intervention approaches to ensure that every child can achieve the best possible outcomes. Our Chief Officers' vision for children and young people is that "All children and young people are safe and achieve their full potential. We will listen to children, young people and their families and work together to make sure they get the right help at the right time."

With falling birth rates, we need to maintain our focus on ensuring that **all** children and young people in Dumfries and Galloway are valued and given every opportunity to fulfil their potential.

2.3 Rurality and Deprivation

Figures from the [2016 Scottish Urban Rural Classification](#) show that Dumfries and Galloway is:

- the third largest region in Scotland, characterised by small settlements of 4,000 people or less spread across a large area
- one of the most rural areas of mainland Scotland, after Argyll and Bute and the Highlands, with 21% of the population living in remote rural locations
- over a quarter of the population (28.6%) lives in an area considered to be remote (further than 30 minutes' drive away from a large town of population 10,000 or greater).
- The largest town is Dumfries (population 33,300), followed by Stranraer (10,500).

The 2020 Scottish Indices of Multiple Deprivation shows that Dumfries and Galloway has 201 datazones in total, with 19 datazones that are within the 20% most deprived in Scotland. Of these 19 datazones, 11 are in the 10% most deprived in Scotland. A total of 7,958 people live in the 11 most deprived datazones which are in North-West and Central Dumfries, Stranraer, and Upper Nithsdale. [SIMD+2020v2+-local+share+lookup.xlsx \(live.com\)](#)

Rural datazones generally cover larger areas and contain a greater mix of more and less deprived people. Therefore this area-based approach may miss significant numbers of people who experience deprivation.

In December 2020, a Report on the current position of Poverty and Deprivation in Dumfries and Galloway commissioned by Dumfries and Galloway Council confirmed findings of a 2015 study on Poverty in Dumfries and Galloway by the Crichton Institute that people who are income-deprived people in Dumfries and Galloway live in all parts of the region and not just areas identified as 'most deprived'. <https://dumgal.gov.uk/media/23800/Report-Poverty-and-Deprivation-in-Dumfries-and-Galloway-2020/pdf/Poverty-and-Deprivation-Position-Report.pdf?m=637424348890330000>

With such a high percentage of the population living in rural and remote rural locations, fuel poverty is a particularly significant issue for Dumfries and Galloway – both with regard to transport costs and home heating. Rural areas tend to have a relatively high proportion of older buildings that are more costly to heat. At the time of writing (July 2022), the UK as a whole is experiencing a ‘cost of living crisis’ in which the Energy Cap rose in April prompting a sharp increase in gas and electricity bills. A further increase in the Energy Cap is expected in October 2022.

A further issue for Dumfries and Galloway with regard to fuel poverty, is that the authority has a particularly high proportion of households that are not on the mains gas grid and rely on other more expensive forms of heating such as oil, solid fuel and electricity. Figures from NonGasMap.org.uk [Non-gas map \(nongasmap.org.uk\)](https://nongasmap.org.uk) indicate that 45.9% of homes in Dumfries and Galloway are off-grid for gas. In Dumfries and Galloway there are 12,895 properties dependent on oil for central heating (with no price cap) and 10,227 with electric heating.

2.4 Economy and Employment

From January 2021 to December 2021 there were 64,300 economically active people aged 16-64 in Dumfries and Galloway (74% of the population compared with 76.2% in Scotland). Of these, 70.8% were in employment compared with 73.1 in Scotland. [Labour Market Profile - Nomis - Official Census and Labour Market Statistics \(nomisweb.co.uk\)](https://nomisweb.co.uk)

2.4.1 Weekly wage

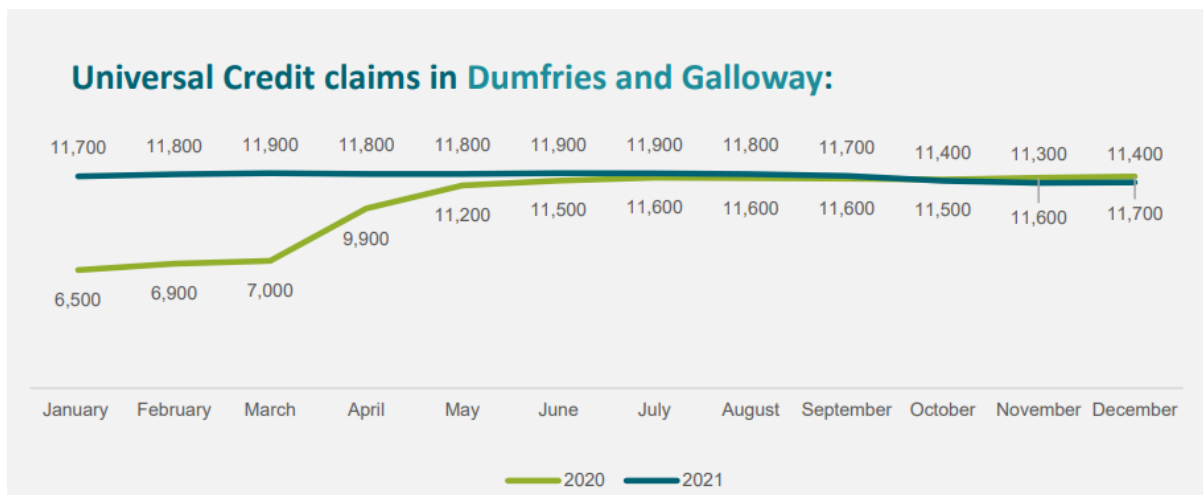
The following table shows how in 2021, Dumfries and Galloway had the lowest gross, full-time weekly wage (all employees – male and female) of all authorities in Scotland. From NOMIS [Labour Market Profile - Nomis - Official Census and Labour Market Statistics \(nomisweb.co.uk\)](https://nomisweb.co.uk)

Gross weekly wage in £ - all employees male and female 2021	
East Renfrewshire	809.4
East Dunbartonshire	754.7
Shetland Islands	677.9
South Ayrshire	670.7
Na h-Eileanan Siar	670.1
Renfrewshire	663.2
Stirling	652.5
South Lanarkshire	651.0
West Dunbartonshire	650.9
Aberdeenshire	639.0
Clackmannanshire	637.6
City of Edinburgh	637.2
East Ayrshire	629.6
Glasgow City	627.0
North Ayrshire	625.7

Angus	614.6
Fife	611.6
Highland	611.4
West Lothian	602.7
Midlothian	598.6
North Lanarkshire	597.6
Falkirk	595.4
East Lothian	594.0
Aberdeen City	587.4
Dundee City	575.0
Perth and Kinross	574.9
Inverclyde	570.1
Moray	565.8
Orkney Islands	565.2
Argyll and Bute	562.7
Scottish Borders	552.1
Dumfries and Galloway	549.8

2.4.2 Universal credit claims

The chart below shows the number of claims for Universal Credit in Dumfries and Galloway in 2020 and 2021.



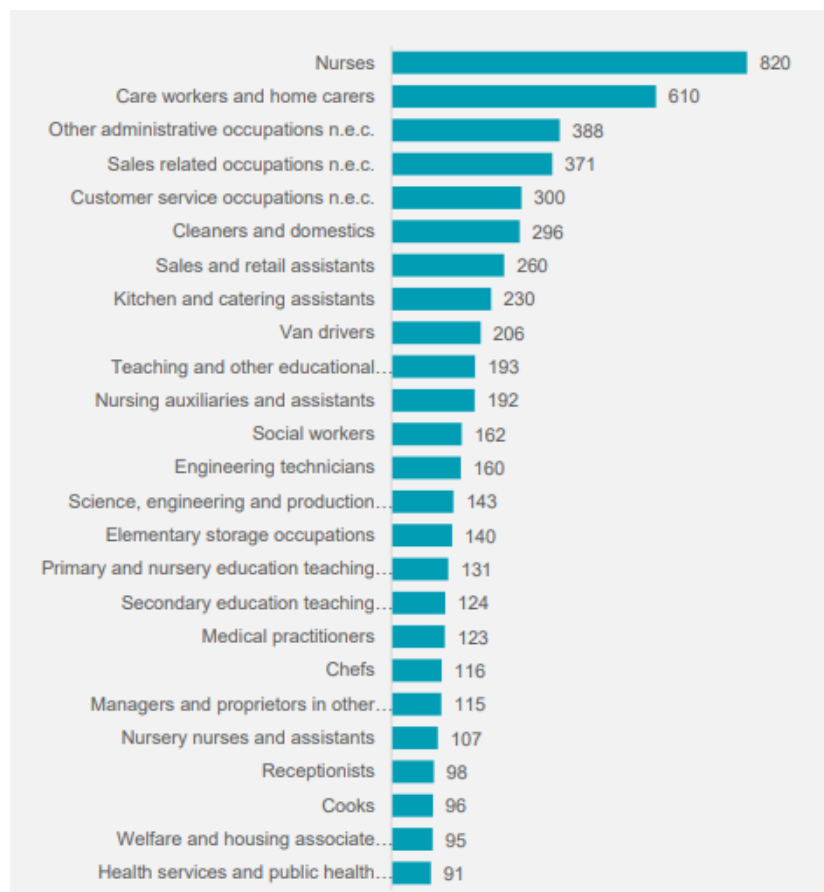
From Skills Development Scotland, Regional Skills Assessment, Dumfries and Galloway, March 2022 ([PowerPoint Presentation \(skillsdevelopmentScotland.co.uk\)](https://www.skillsdevelopmentScotland.co.uk))

2.4.3 Employment

The largest share of employment in Dumfries and Galloway is 'Caring Personal Service Occupations' at 12% of employment in the region, employing 7,500 people.

The largest number of job postings in Dumfries and Galloway from February 2021 to January 2022 were for Nurses, followed by Care Workers and Home Carers as shown below:

Job Postings by Occupation: February 2021 to January 2022, Dumfries and Galloway



From Skills Development Scotland, Regional Skills Assessment, Dumfries and Galloway, March 2022
[PowerPoint Presentation \(skillsdevelopmentScotland.co.uk\)](https://www.skillsdevelopmentScotland.co.uk)

The Scottish Government has decided to establish a National Care Service for Scotland. As yet, the full implications of this for children's services are not clear.

2.4.4 Digital Exclusion

Digital exclusion is defined as a lack of access and/or motivation and/or skills.

In October 2020 Third Sector Dumfries and Galloway commissioned a piece of digital exclusion desk research to be undertaken, the purpose of which was to investigate the extent of digital exclusion in Dumfries and Galloway. This research found that:

- Up to 30% of the population in Dumfries and Galloway could be digitally excluded by lack of access, skills or motivation
- Those most likely to be digitally excluded were also likely to be disadvantaged in other ways such as age, disability or poverty.

- There was no primary research about digital exclusion for Dumfries and Galloway, the data in the 2020 report required to be tested in a primary context.
- No one agency was identified as the “lead agency” for digital exclusion in Dumfries and Galloway
- No overall strategic approach to digital exclusion in Dumfries and Galloway.

Following this, a further research project was carried out by Third Sector Dumfries and Galloway, starting in October 2021. Findings from the latest research suggest that Covid has changed the nature of the challenge, that digital exclusion still exists but not in the shape and places we might have thought. Some of the main headlines from the research are that:

- Access to the internet is no longer the main issue, only 2% have no access to the internet. It is now about: cost, connectivity and speed; frequency of access; age/quality of device; availability of a device within a household due to sharing and income does affect the type of device and functionality.
- Skills are not perceived by respondents to be an issue. Only 9 people requested additional skills (a self-perception). However, there is low use of the internet for more sophisticated purposes (eg website management, vlogs, blogs, political engagement, IT and security issues).
- Motivation to use the internet remains a significant issue. Nearly one third of people across all groups prefer not to use online transactions and highly value other approaches. 19% of all age groups have know-how but no desire to use internet for transactions.
- The poorer a household the more digitally restricted the occupants.
- More children in a household means fewer devices per household.
- In relation to those who indicated a disability, internet access and usage is much higher than previously thought but technological accessibility is still a significant barrier.
- Nearly 8% of respondents see literacy as a barrier in conducting transactions, regardless of whether technology is involved.
- There seems to be no motivation to use the internet amongst those with language and literacy barriers.

2.5 Summary – Local Context

The population is aging, and we have a low birth rate.

Dumfries and Galloway is a rural area with some pockets of deprivation, but income-deprivation is spread throughout the region and not confined to specific datazones.

Fuel poverty is a particular issue for Dumfries and Galloway, with high transport costs and a high number of households with no access to the mains gas grid and dependent on other sources of heating.

Universal Credit claims rose sharply from 6,500 in January 2020 to 11,700 by the end of December 2020. By the end of December 2021, there were 11,400 Universal Credit Claims.

The average gross weekly wage (full time, all employees – male and female) is the lowest in Scotland.

'Caring Personal Service Occupations' are the largest share of employment (12%) in the region, employing 7,500 people.

We have high levels of job postings in Dumfries and Galloway for Nurses, Care Workers and Home Carers.

Digital exclusion is complex and the nature of this has changed since the Covid-19 pandemic. Only 2% have no access to the internet. It is now about: cost, connectivity and speed; frequency of access; age/quality of device; and availability of a device within a household.

3. Children and Young People: the Universal Picture

3.1 Introduction

The purpose of this section is to bring together a selection of key data from Education and Health that give a global picture of children in Dumfries and Galloway who receive universal services – Health and Education. This includes key indicators from Health and Education on early years provision; educational attainment; and child health.

3.2 Education

3.2.1 Early Learning and Childcare

In Dumfries and Galloway in 2021 early learning and childcare was provided by:

- 45 school nurseries
- 37 private, voluntary, independent (PVI) providers
- 34 childminders

In summer 2022 in Dumfries and Galloway, 55% of children were accessing the full 1140 hours of Early Learning and Childcare, with over 92% taking more than 600 hours. 62% of hours are provided by the local authority nursery classes with the remaining offered through funded providers. Around 6.5% of children have a blended placement using one or more providers. To avoid double counting these children are reflected in the provider where they spend the majority of their hours in the table below.

Hours	2 Year Olds			3 and 4 Year olds			5 year olds (deferred)		
	Local Authority	Private Provider	Child-minder	Local Authority	Private Provider	Child-minder	Local Authority	Private Provider	Child-minder
600 or fewer	16	25	<5	131	48	5	<5	<5	<5
>600 <900	7	26	<5	220	260	<5	8	11	<5
>900 <1140	8	17	<5	221	254	9	19	11	<5
1140	35	36	<5	1011	331	42	119	18	<5

Based on 27% of the two-year old population being eligible for funded Early Learning and Childcare around 55% are currently accessing their entitlement with this number increasing as enrolments take place throughout the year. From August 2021 children with parents who have experience of care were also eligible for funded hours.

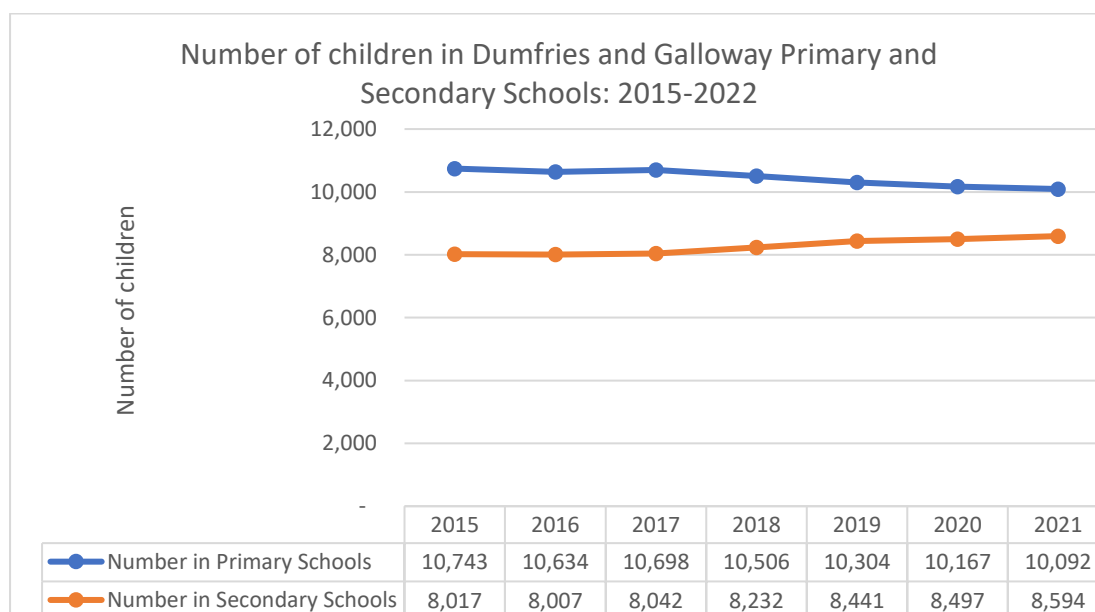
The Dumfries and Galloway early learning and childcare Parental Survey, in 2022 was completed by 261 parents/carers. Of these:

- 113 (82.5%) said Early Learning and Childcare meets their needs
- 25 (18%) families using Funded Early Learning and Childcare said it does not meet their needs, reasons included lack of availability of extended childcare and cost.

Source, Parental Survey, ELC, 2022

3.2.2 Schools and Pupil numbers

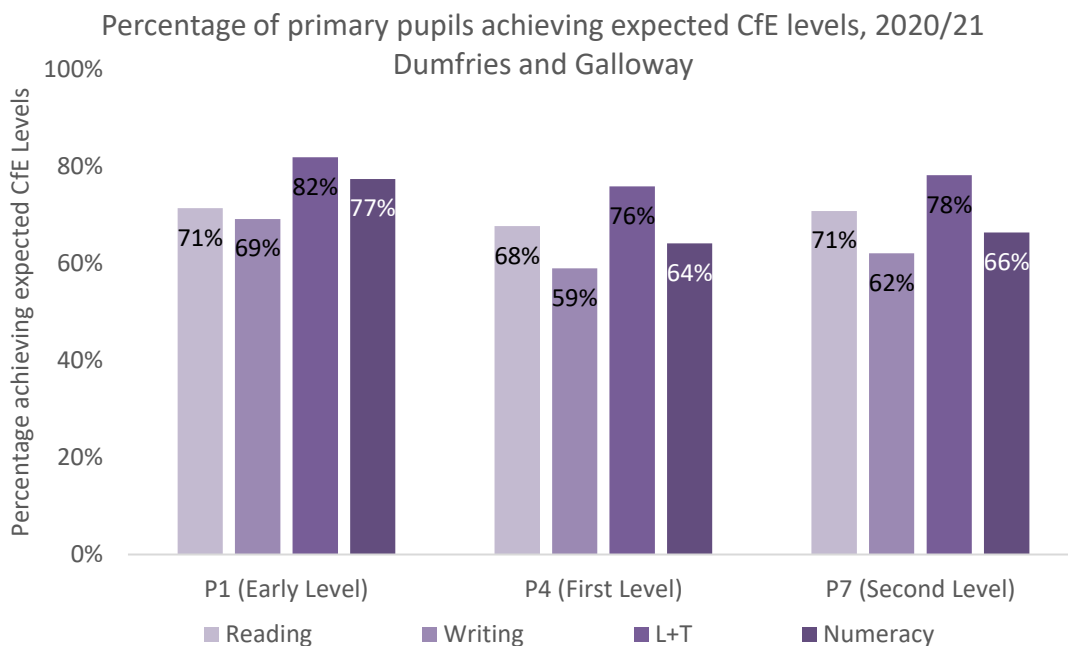
In 2021 there were 97 primary schools and 16 secondary schools in Dumfries and Galloway, with the number of children and young people in primary and secondary schools shown in the chart below.



From Pupils in Scotland 2021 [Supporting documents - Summary Statistics For Schools In Scotland 2021 - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/consultation-papers/collections/documents/Supporting_documents_-_Summary_Statistics_For_Schools_In_Scotland_2021_-_gov.scot)

3.2.3 Achievement

The chart below shows the overall results in Dumfries and Galloway for the percentage of primary pupils achieving expected Curriculum for Excellence Levels in 2020/21. The percentages are given for Primary 1 (Early Level); Primary 2 (First Level) and Primary 7 (Second Level) and are for Reading, Writing, Listening and Talking, and Numeracy.



With regard to achievement of expected CfE levels in 2020/21, for all pupils in Primary 1:

- 71% achieved the expected level in Reading
- 69% achieved the expected level in Writing
- 82% achieved the expected level in Listening and Talking
- 77% achieved the expected level in Numeracy.

For comparison, achievement of looked-after pupils in Primary 1 was as follows:

- 33% achieved the expected level in Reading
- 19% achieved the expected level in Writing
- 44% achieved the expected level in Listening and Talking
- 33% achieved the expected level in Numeracy.

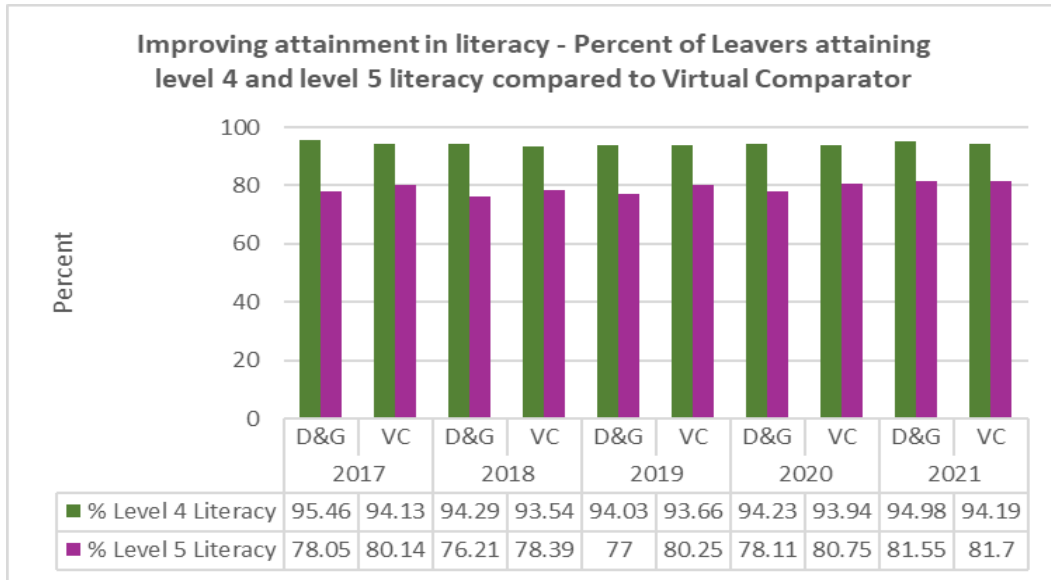
Performance of Looked after Children at early level was considerably lower than that of non-looked-after achievement in all areas, especially in writing at 19%. However in considering looked after data, it is important to note that numbers do fluctuate and actual numbers at this level may be low. Data therefore should be considered in this context. This data on looked-after children is given here for illustrative purposes and further information on achievement of looked-after children and young people is given in Section 5.

Literacy and Numeracy – S4 to S6 Leavers

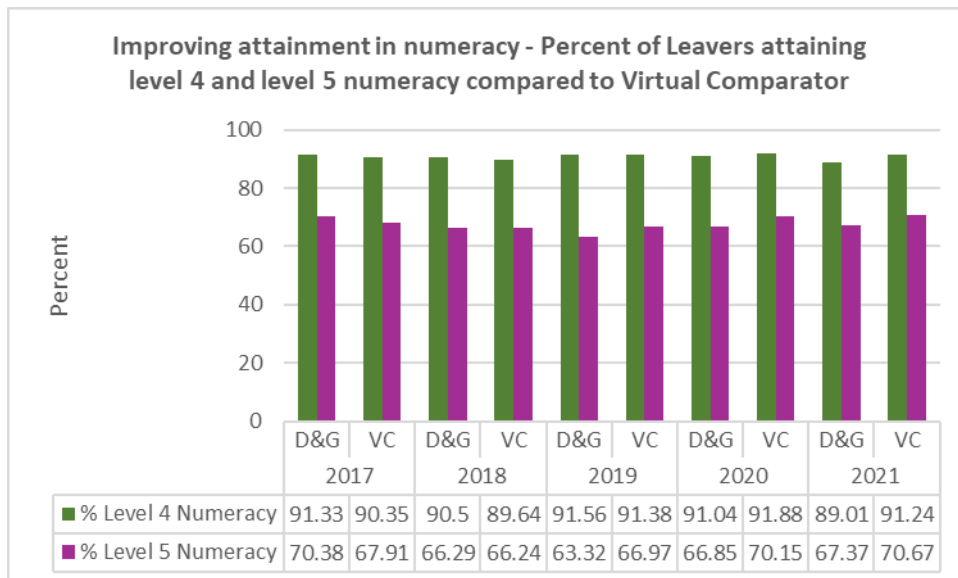
Literacy and Numeracy within the Insight dashboard is a benchmarking measure that is based upon the outcomes and assessment standards for SQA's literacy and numeracy units.

The Literacy chart shows that at level 4 and level 5 have remained at a similar value to the previous year and are in line with virtual comparator values. The Numeracy chart shows that at level 4 has fallen on the previous year, level 5 has improved slightly and both levels are less than the virtual comparator value.

Literacy



Numeracy



2021 SQA Attainment

Dumfries and Galloway trends in S5 and S6 (SEEMiS BI tool August 2021)

S5	2017	2018	2019	2020	2021	5 year trend	Difference from last year
1+ @ level 6 or better	51.89 %	56.28 %	56.47 %	60.38 %	60.32 %	8.43%	-0.06%
3+ @ level 6 or better	31.04 %	34.17 %	33.36 %	41.12 %	38.61 %	7.57%	-2.51%
5 + @ level 6 or better	13.83 %	15.58 %	13.07 %	15.97 %	15.13 %	1.30%	-0.84%
S6	2017	2018	2019	2020	2021	5 year trend	Difference from last year
1+ @ level 6 or better	63.86 %	61.39 %	64.78 %	64.30 %	70.06 %	6.20%	5.76%
3+ @ level 6 or better	43.28 %	40.06 %	45.90 %	44.22 %	49.90 %	6.62%	5.68%
5 + @ level 6 or better	30.91 %	25.88 %	31.34 %	30.49 %	33.54 %	2.63%	3.05%
1 + @ level 7 or better	19.59 %	18.93 %	21.42 %	22.85 %	24.37 %	4.78%	1.52%

From ATTAINMENT SUMMARY, Dumfries and Galloway 2020/21, report from DG Council Education Directorate July 2022

Key messages- Achievement of Curriculum For Excellence Levels

Since the onset of the pandemic, almost all areas and stages achievement of a level shows a notable decrease in pupils achieving the relevant level for their stage as recorded in June 2021. The data shows the levels for P1 pupils in 2018 who were in P4 in June 2021 and also pupils in P4 in 2018 who were then in P7 in June 2021. Looking at this data, the biggest fall in pupils achieving relevant levels for stage were for P1 to P4, most especially for writing and numeracy.

Overall children and young people across Dumfries and Galloway perform better in listening and talking at all levels than reading and writing.

SQA Attainment-

In 2020/21 achievement in S5 showed a slight decrease in overall performance with 60.32% achieving 1 or more awards at SCQF Level 6, 38.61% achieving 3 or more awards at SCQF Level 6, and 15.13% achieving 5 or more awards at SCQF Level 6. The five-year trends are showing improvements for all 3 measures. S6 performance saw improvements in all areas in 5 year trends across 1+, 3+ and 5+ Highers achieved as well as 1+ Advanced Higher. The comparison to the previous year also shows improvements in all of the measures.

In summary in S4 - National 5 entries increased by 4.2%. National 4 entries decreased by 10.3%. National 5 A- C passes decreased by 5%, National 5 passes overall decreased by 3%.

Detailed information on the attainment of looked-after children and young people is given in Section 5, but achievement is lower for looked-after pupils than for their non-looked-after peers.

3.2.4 Initial Leaver Destinations 2019/21

Dumfries and Galloway School Leavers in Initial Leaver Destinations – 2019-21			
	2018/19	2019/20	2020/21
Number of leavers	1,375	1,440	1,478
Positive Destination (%)	94.7	92.7	94.6
Higher Education (%)	35.3	40.3	38.5
Further Education (%)	30.2	30.8	24.1
Training (%)	3.8	1.7	2.4
Employment (%)	24.4	19.0	28.6
Voluntary Work (%)	0.4	0.4	0.5
Personal Skills Development (%)	0.7	0.5	0.5
Unemployed – Seeking (%)	3.1	3.5	3.7
Unemployed - Not Seeking (%)	1.0	1.7	
Unknown (%)	1.2	2.0	

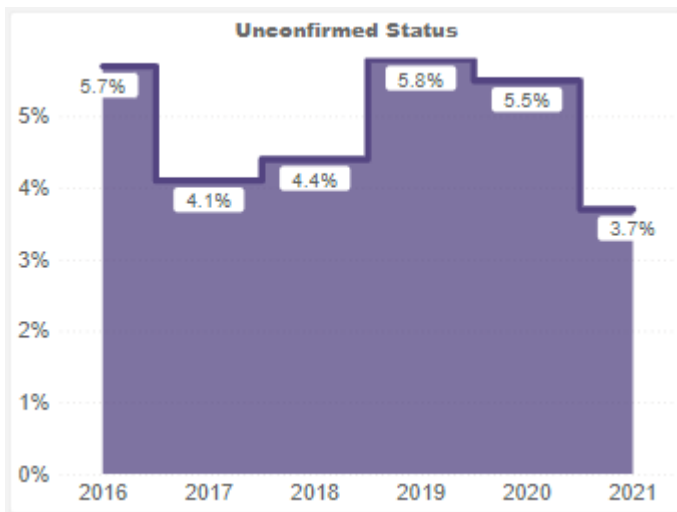
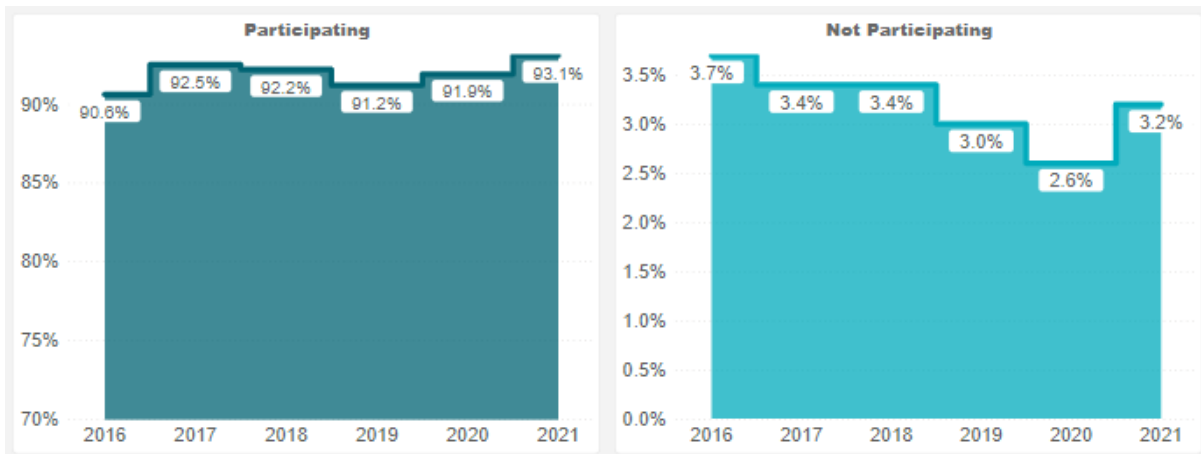
From [Supporting documents - Summary Statistics for Attainment and Initial Leaver Destinations, No. 4: 2022 Edition - gov.scot \(www.gov.scot\)](#)

3.2.5 Annual Participation Measure

The Annual Participation Measure (APM) reports on the economic and employment activity of 16-19 year olds in Scotland. It is the source of the Scottish Government’s National Performance indicator “Percentage of young adults (16-19 year olds) participating in education, training or employment”.

The data set used to produce the APM is managed by Skills Development Scotland (SDS) and combines data from a range of data sharing partners including local authorities, colleges, the Department of Work and Pensions (DWP) and SAAS, to identify what young adults are doing in ‘real time’ between the ages of 16-19. The annual methodology takes account of all statuses for 16-19 year olds in Scotland over one calendar year. For each of the 207,529 individuals included within the 2021 cohort (covering 1st April 2020 – 31st March 2021)¹, the headline participation classification (participating, not participating and unconfirmed) is based on the classification within which an individual spent the greatest number of days within the year.

The infographics below (taken from www.skillsdevelopmentscotland.co.uk) show the Annual Participation Measure for Dumfries and Galloway each year from 2016 to 2021.



[Annual Participation Measure | Skills Development Scotland](http://www.skillsdevelopmentscotland.co.uk)

Key messages- positive destinations

The latest participation measure shows that 93.1% of our 16-19 year olds are participating in training, education employment, or personal development, compared to 92.2% nationally.

The number of young people moving into an initial positive destination has increased by 1.9% year on year to 94.6%. This has been driven by a 9.6% increase in those entering employment. This compared to 95.5% nationally. At the follow up snapshot 94.4% were still in a positive destination compared to 93.2% nationally.

Data on destinations of looked-after pupils is given in Section 5, but 90.32% of looked-after pupils entered an initial positive destination in 2020-21. This is an increase on previous years, but still lower than that for all pupils.

3.3 Health

3.3.1 Infant feeding

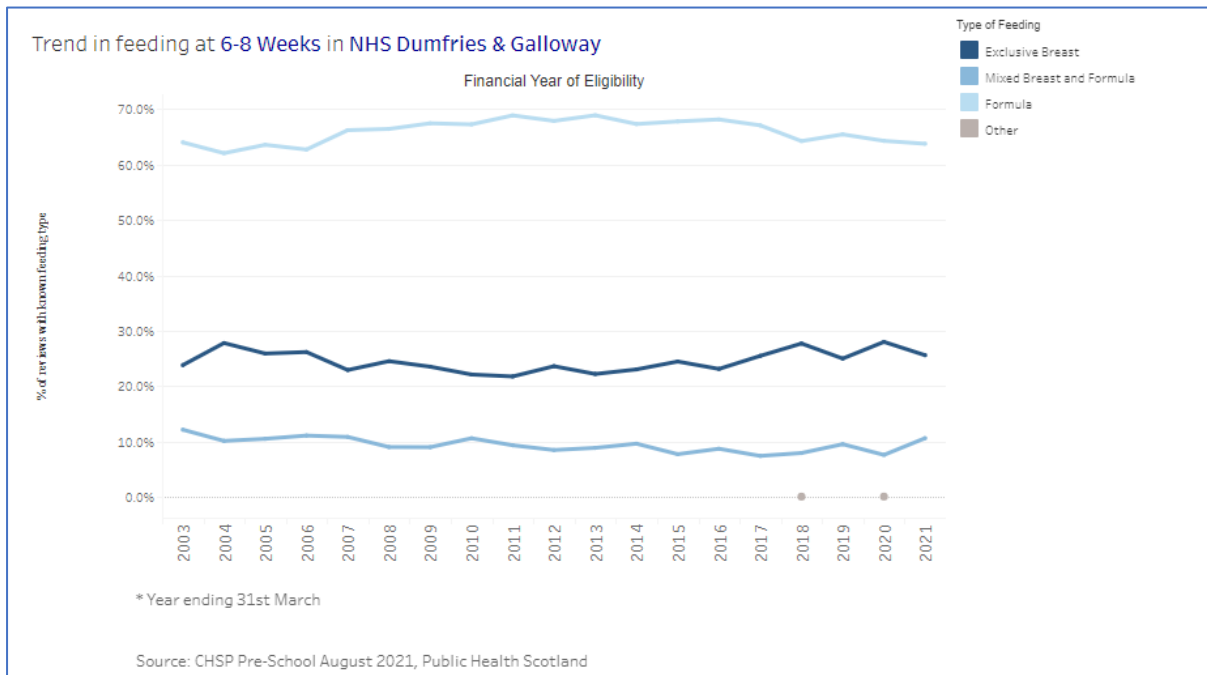
Breastfeeding provides the best nutrition for babies and young children and supports children’s health in the short and longer term. Current guidance recommends that babies should receive just breast milk for the first 6 months of life, then, after the introduction of solid foods, should continue to breastfeed up to their second birthday or for as long as the mother and baby wish.

There is strong evidence that breastfeeding reduces children’s risk of gut, chest, and ear infections and leads to a small but significant improvement in brain development and IQ. Breastfeeding also benefits mothers’ health, with strong evidence that it reduces the risk of breast and ovarian cancer, and some evidence that it may also promote maternal healthy weight and reduce the risk of Type 2 diabetes.

Infant feeding statistics Financial year 2020 to 2021 A National Statistics publication for Scotland Published November 2021
<https://publichealthscotland.scot/publications/infant-feeding-statistics/infant-feeding-statistics-financial-year-2020-to-2021/>

Information on breastfeeding is collected at Health Visitor reviews of children at around 10 to 14 days (First Visit), 6 to 8 weeks, and 13 to 15 months of age.

The chart below shows trends in infant feeding at the 6-8week review over time in Dumfries and Galloway from 2003 to 2021.



[Dashboard - Infant feeding statistics - Financial year 2020 to 2021 - Infant feeding statistics - Publications - Public Health Scotland](#)

In 2021, 25.6% of babies were exclusively breastfed at the 6-8 week review, and 10.6% were fed mixed (breast and formula). In 2020, 28% of children were exclusively breastfed, and 7.6% mixed-fed. In 2011, only 21.8% of babies reviewed at 6-8 weeks were exclusively breastfed.

Key messages- infant feeding

Breastfeeding is not just about nutrition. It provides protection against infection and disease. It helps to promote close and loving maternal-infant relationships; protecting both infant and maternal mental health.

Breastfeeding is known to have important short and long-term health benefits for both babies and mothers. The UN Convention on the Rights of the Child, article 24 states that all children have the right to the best possible health.

Breastfeeding has the potential to reduce health inequalities (Renfrew et al, 2012).

A report commissioned by UNICEF UK found that even a moderate increase in breastfeeding could save thousands of hospital admissions and GP consultations per year (Renfrew et al, 2012)

It is a Scottish Government aim to reduce the breastfeeding attrition (“drop off”) rate between birth and 6-8 weeks by 10%. Currently Dumfries and Galloway has one of the highest 6-8 week breastfeeding attrition rates in Scotland, although the percentage of babies being exclusively breastfed at 6-8 weeks has increased since 2011.

Maternity, neonatal and health visiting services in Dumfries and Galloway are all UNICEF UK “Baby Friendly” accredited.

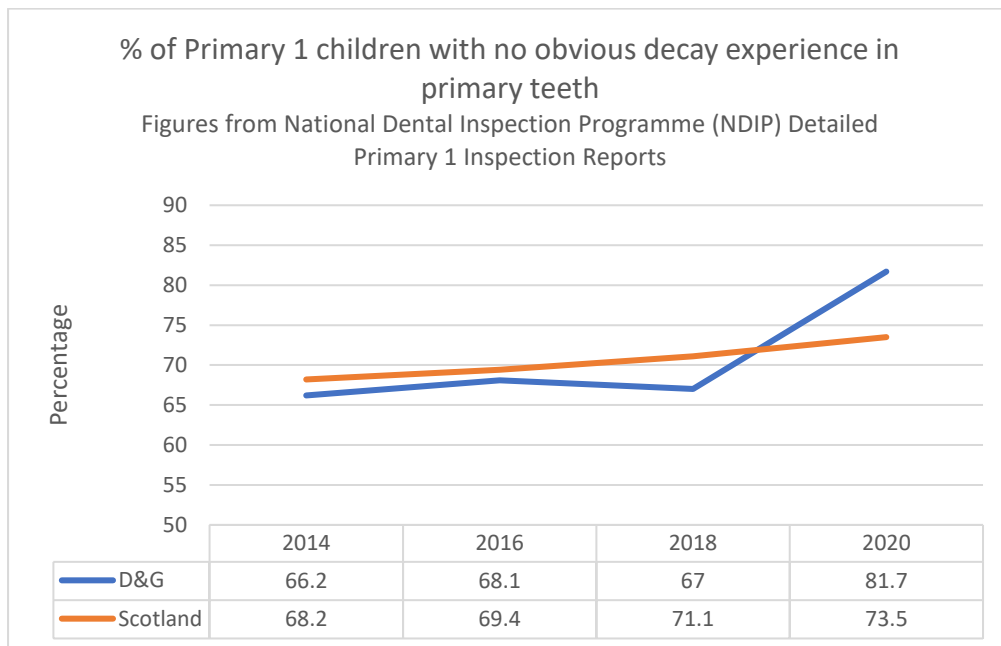
181 local business premises are signed up to the national Breastfeeding Friendly Scotland Scheme.

3.3.2 Dental Health

Dental decay is a preventable disease. However having teeth extracted under general anaesthetic is the commonest reason for children to be electively admitted to hospital in Scotland. Good oral health is recognised by the World Health Organisation as an important aspect of general health and wellbeing. Child dental health has been improving in Scotland. Nationally, almost three quarters (73.5%) of P1 children had no obvious decay experience in their primary teeth in 2020. This is a large improvement since the National Dental Inspection Programme commenced in 2003 (45%). Despite overall improvements, there remains a link between deprivation and poor oral health. Inequalities remain, with only 58.1% of P1 children having no obvious decay experience in the most deprived areas in Scotland, compared with 86.9% in the least deprived areas¹⁴.

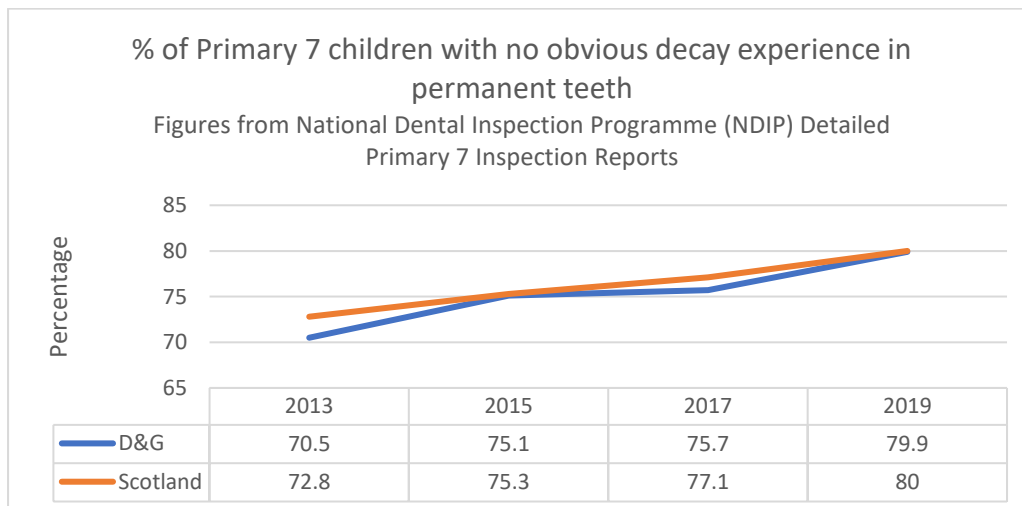
The chart below is based on data from [reports](#) on the Detailed Inspection Programme of Primary 1 Children and the Basic Inspection of Primary 1 and Primary 7 Children [NDIP \(scottishdental.org\)](http://scottishdental.org). The National Dental Inspection Programme was suspended during the pandemic, with data collection restarting during 2021/22 academic year. The data from 2021/22 will be published at the end of October 2022.

The chart shows that in 2020, 82% of children inspected in Primary 1 in Dumfries and Galloway had no obvious decay experience in their primary teeth. This compares with 74% nationally. ‘No obvious decay experience’ means that children have no decayed, missing, or filled teeth.



<https://ndip.scottishdental.org/>

The next chart is based on the detailed inspections of Primary 7 children from 2013 to 2019. The chart shows how the percentage of children in Dumfries and Galloway with no obvious decay experience has improved since 2013.



<https://ndip.scottishdental.org/>

The Childsmile programme consists of a number of elements – the issue of free toothpaste and toothbrushes to during a child's early years, supports nurseries and primary schools to offer free, daily, supervised toothbrushing (whether it is a local authority, voluntary or private nursery), delivering of twice yearly fluoride varnish to 10 priority nursery and primary school settings (P1-P5), and support to families improve and maintain oral health and facilitate dental registration. A 2015 [study](#) that carried out a cost-analysis of the Scotland-wide nursery toothbrushing programme demonstrated that within three years, the nursery tooth brushing programme was shown to have recouped its annual expenditure through savings on actual and anticipated dental treatments.

At the time of writing, there are no figures to demonstrate the impact of the pandemic on oral health. However, anecdotal information would suggest that there has been an impact. Access to NHS dental services was severely affected during the pandemic and dental teams are still working through the backlog of patients. In addition recruitment and retention of the dental workforce is now presenting significant challenges in being able to access NHS dental care for both children and adults.

The Childsmile programme is in the process of being remobilised. In May 2022 56% of nursery schools and 67% of primary schools were participating in the daily supervised toothbrushing programme. These figures are lower than pre-pandemic. The Fluoride varnish programme re-starts in August 2022.

Anecdotal evidence from Social Work is that many of the children they are working with have poor dental care. Whilst we do not have quantitative evidence of this we can also extrapolate from existing research – for example the figures showing the difference nationally between children in areas of socio-economic deprivation and those in the least deprived areas allow us to extrapolate that children in poverty in Dumfries and Galloway will be disproportionately affected by poor dental health. Research also demonstrates that Looked After Children are more likely to have dental problems and are less likely to use dental services than their peers.

Key messages- Child Dental Health

Good dental health is an important aspect of general health and wellbeing.

Children living in deprived areas and Looked After Children are more likely to have poor dental health.

In Dumfries and Galloway, 2020 data demonstrated there were positive trends with improvement in both P1 and P7. However, anecdotal evidence indicates that the pandemic could have impacted on child dental health, and this might be demonstrated in the awaited 2022 Dental Inspection Programme report. Challenges in access to NHS Dental services may also impact on children's dental health.

Nursery and Primary School tooth-brushing programmes are an effective element of the Child Smile programme, and partnership working with primary schools, nurseries and health visitors is key to the success of this preventative approach.

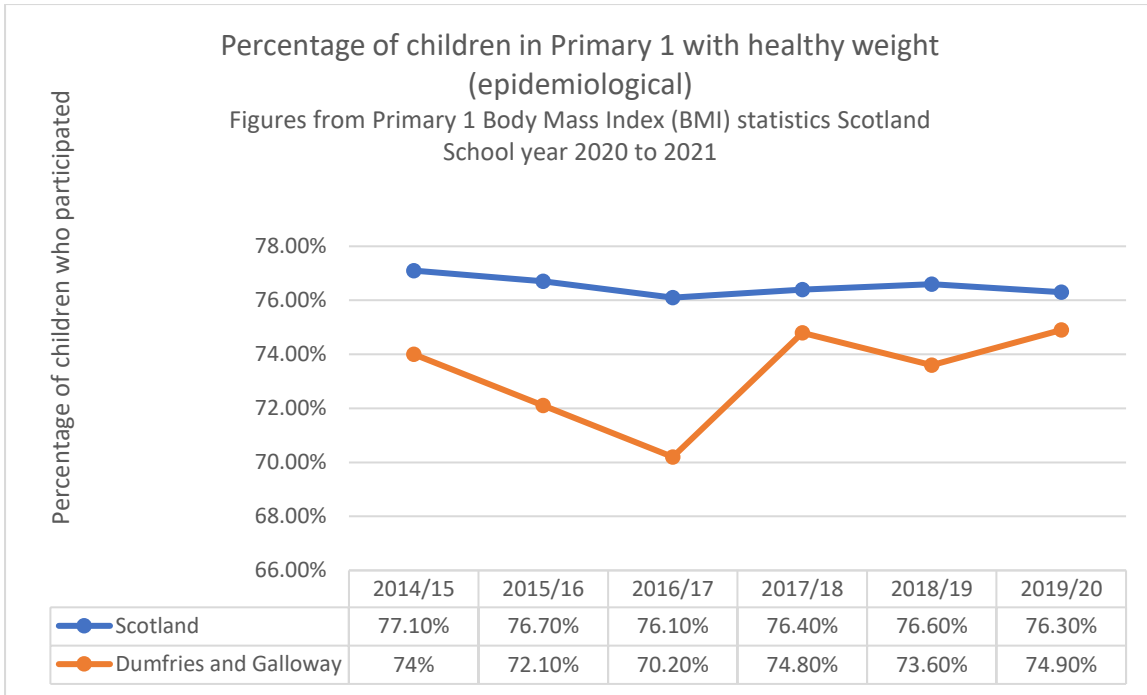
3.3.3 Child Healthy Weight

Maintaining a healthy weight throughout childhood is associated with many health benefits. Overweight and obesity in childhood is associated with a wide range of health problems such as risk factors for heart disease, type 2 diabetes, asthma, emotional distress and mental health difficulties. In addition, overweight and obese children are at risk of remaining overweight or obese as adults. The higher a child's Body Mass Index (BMI), the stronger the risk their BMI will remain high as the child grows up. Overweight and obesity in adulthood is strongly associated with health problems such as type II diabetes, heart disease, various cancers, and mental health difficulties. Children who are overweight/obese are also at risk of being bullied. Being underweight in childhood can also be a cause for concern, indicating poor nutritional intake and/or underlying medical problems. Drivers of overweight and obesity are complex, multi-faceted and shaped by a broad range of factors. Children living in more disadvantaged circumstances are more likely to be overweight or obese than those in more advantaged circumstances.

Growing up in Scotland: Overweight and Obesity at Age 10 <https://www.gov.scot/publications/growing-up-scotland-overweight-obesity-age-10/pages/3/>

The information presented in this report is derived from height and weight measurements recorded at Primary 1 health reviews. A Primary 1 health review is offered to all children in mainstream and special state schools as part of the wider child health programme. At the review, height and weight measurements are conducted by health staff in schools. Children's height is measured in centimetres to one decimal place and their weight measured in kilograms to two decimal places. The results are entered into the Child Health Surveillance Programme - School (CHSP-S) national information system and used to calculate children's Body Mass Index (BMI).

Following closures due to Covid-19 in 2019/20, schools in Scotland reopened with restrictions in August 2020, before again closing to the majority of pupils during January to March 2021. This ongoing disruption meant that there was a reduced volume of data gathered through P1 reviews. Figures are not available for Dumfries and Galloway for 2020/21 because of the low number of pupils who were measured.



[Dashboard - Primary 1 Body Mass Index \(BMI\) statistics Scotland - School year 2020 to 2021 - Primary 1 Body Mass Index \(BMI\) statistics Scotland - Publications - Public Health Scotland](#)

The most recent figures showed that the percentage of children of a health weight was slightly lower in Dumfries and Galloway than the national average. However, we have a gap in information due to the lack of available data for 2020/21. There is a question about how lockdowns could have potentially impacted on exercise and diet.

Initial findings from the 2022 Health and Wellbeing Survey in Dumfries and Galloway show that:

- 58% of Primary 5-7,
- 62.5% of Secondary 1-3, and
- 54% of Secondary 4-6 learners are meeting the physical activity guidelines over an average week.

With regard to diet, data from the 2022 Health and Wellbeing Survey show that:

- The number of Primary 5-7 learners consuming 5 or more portions of fruit and vegetables sits at 42.5% and declines to 40.3% during Secondary 1-3 stage. However, during Secondary 4-6 stage there is a large incline in the consumption of 5 fruit of vegetables to 64.9%.
- It is also noteworthy that the number of learners eating breakfast decreases in Primary 5-7 from 64.9% to 46.1% during Secondary 1-3 and continues to decrease to 41.5%. in Secondary 4-6. It has been observed from the results that females drop significantly from primary to secondary, 64.3 to 36.8%.

Nationally, the Report on Primary 1 Body Mass Index (BMI) statistics Scotland, published in 2022 highlighted that in Scotland:

- There was a 6.8 percentage point increase in the overall proportion of Primary 1 children who are at risk of overweight or obesity between 2019/20 and 2020/21, having been stable for a number of years prior to this. The most substantial increase was in the proportion of children at risk of obesity.
- Marked socioeconomic inequalities in child healthy weight have developed over the past 20 years. These have widened with the recent changes. Among children living in the most deprived areas there was an 8.4 percentage point increase between 2019/20 and 2020/21, to 35.7% at risk of overweight or obesity, compared to a 3.6 percentage point increase, to 20.8%, in the least deprived areas.
[Primary 1 Body Mass Index \(BMI\) statistics Scotland - School year 2020 to 2021 - Primary 1 Body Mass Index \(BMI\) statistics Scotland - Publications - Public Health Scotland](#)

We have data locally, that shows that the Dumfries and Galloway pregnant population have increasing BMI, and we need to understand further the impact or any potential correlation this may have on childhood obesity rates [[see Section 6.2 – Maternal Health](#)].

Key messages- Child Healthy Weight

Levels of child overweight and obesity are higher in Dumfries and Galloway than Scotland, and nationally, Scotland has higher rates of child overweight and obesity than many other Western nations.

Overweight/obesity in childhood is associated with a range of health problems, and if a healthy weight is not achieved, further health problems can develop in adulthood.

The drivers of child overweight and obesity are complex and multi-faceted and need to be addressed through a partnership approach.

We have a gap in data for 2020/21, but national evidence is that factors associated with the response to the Covid-19 pandemic have negatively affected child healthy weight. There is also an association between deprivation and child healthy weight and there is a risk that this could be exacerbated by an increase in child poverty.

Locally, we have increasing rates of pregnant women with high BMI and we need to further understand the implications for child healthy weight going forwards.

3.3.4 Immunisations

Immunisation programmes for children aim to protect the individual child from many serious infectious diseases, and the associated risks to health, wellbeing and learning, and prevent the spread of disease in the wider population. The World Health Organisation recommends that on a national basis at least 95% of children are immunised against diseases preventable by immunisation and targeted for

elimination or control. These include diphtheria, tetanus, pertussis (whooping-cough), polio, Haemophilus influenzae type b (Hib), measles, mumps and rubella.

The primary aim of vaccination is to protect the individual who receives the vaccine. Vaccinated individuals are also less likely to be a source of infection to others. This reduces the risk of unvaccinated individuals being exposed to infection. This means that individuals who cannot be vaccinated will still benefit from the routine vaccination programme. For example, babies below the age of two months, who are too young to be immunised, are at greatest risk of dying if they catch whooping cough. Such babies are protected from whooping cough because older siblings and other children have been routinely immunised as part of the childhood programme.

In recent years misinformation about vaccines has spread on social media, and a [study](#) published by the Royal Society for Public Health¹⁹ in 2019 indicated that half of all parents with small children in the UK had been exposed to this. Throughout the Covid-19 pandemic, widespread misinformation about vaccines more broadly has been spread with social media as the main source of this, and an increase in the number of social media accounts promoting misinformation. It is important to have effective communication strategies to counteract such misinformation.

In Scotland, recommended vaccines for babies 0-13 months are:

Immunisations at 8, 12 and 16 weeks of age.

- The DTaP/IPV/Hib/HepB vaccine – also commonly known as the 6-in-1 vaccine, is usually given to babies at 8, 12 and 16 weeks of age. It protects against Diphtheria, Tetanus, Pertussis (whooping cough), polio (with Inactivated Polio Vaccine) and Haemophilus influenzae type b and hepatitis B. Children should also have a Hib booster (in combination with MenC) between 12 and 13 months of age, boosters against diphtheria, tetanus, pertussis and polio from 3 years 4 months of age.
- The pneumococcal vaccine - given to babies at 12 weeks of age with a booster dose given between 12 and 13 months. The vaccine can be given at any time and one injection provides years of protection. The pneumococcal booster dose between 12 and 13 months is usually given at the same time as the Hib/MenC, MMR, and MenB vaccines.
- The MenB vaccine - helps protect against meningitis and septicaemia (blood poisoning) caused by group of meningococcal bacteria B. The MenB vaccine is routinely offered, since September 2015, to all babies at 8, 16 weeks and 12 to 13 months.
- The rotavirus vaccine - given to babies at 8 and 12 weeks of age, helping protect them against rotavirus.

Babies 12 - 13 months

- The Hib/MenC vaccine - helps protect babies against two of the causes of meningitis and septicaemia. Babies will need a dose of the combined Hib/MenC vaccine between 12 and 13 months of age to boost their protection

against *Haemophilus influenzae* type b (Hib) and helps protect against meningococcal C (MenC) infections.

Recommended vaccines for children and teenagers are:

- Flu immunisation - Influenza (Flu) immunisation is offered from autumn each year to children aged 2 years until the end of primary school.
- The DTaP/IPV vaccine – this is offered to children aged 3 years and 4 months boosting protection against diphtheria, tetanus, pertussis (whooping cough) and polio.
- The MMR vaccine – this is given in two doses. The first is when the child is at 12 to 13 months, and then at 3 years and 4 months of age. The vaccine is the safest and most effective way to help protect children against measles, mumps and rubella. Teenagers who haven't had two doses of the vaccine may also be offered the vaccine during their routine teenage immunisation at school.
- The Td/IPV vaccine – this is offered to teenagers between 13 and 18 years of age at school. The Td/IPV vaccine completes the 5 dose course that provides complete protection against tetanus, diphtheria and polio.
- The MenACWY vaccine – this is offered to all teenagers who are in S3 (around 14 years of age) at school. Young people who are in S4 to S6 and missed the opportunity to get immunised in S3 may also get the vaccine as a catch up. The vaccine is the safest and most effective way to help protect against meningitis and septicaemia caused by four groups of meningococcal bacteria A, C, W and Y.
- The HPV vaccine - The human papillomavirus (HPV) vaccine is now offered to girls and boys in Scotland from S1. Evidence shows that the vaccine helps protect boys and girls from HPV-related cancers which affect the head and neck, cervix (in females) and anogenital area.

NHS Dumfries and Galloway Primary and booster immunisation uptake rates by 24 months of age*, by financial year ending 31 March

	2017	2018	2019	2020	2021
Primary Course:					
5-in-1/ 6-in-1	98.8	98.2	97.9	98.1	97.6
MMR1	96.7	96.2	95.6	96.9	96.7
Booster:					
Hib/MenC	97.2	96.6	95.8	96.9	96.6
PCVB	97.0	96.8	95.7	96.8	96.5
MenB Booster	95.1	96.5	96.1

NHS Dumfries and Galloway MMR1 and booster immunisation uptake rates by 5 years of age*, by financial year ending 31 March

	2017	2018	2019	2020	2021
MMR1	97.7	98.4	97.8	96.8	96.1
Hib/MenC	97.7	97.9	98.2	97.1	96.3
4-in-1	97.1	96.4	96.0	95.4	94.2
MMR2	96.6	96.1	95.6	95.0	94.4

[Childhood immunisation statistics Scotland - Quarter and year ending 30 September 2021 - Childhood immunisation statistics Scotland - Publications - Public Health Scotland](#)

Key messages- Immunisations

Dumfries and Galloway has over time, maintained high child vaccination rates and the challenge is to maintain these and to continue to combat misinformation with trusted, accurate information.

It is important for partners to present a shared position that supports the importance of immunisation.

3.3.5 Teenage pregnancy

In March 2016 the Scottish Government published 'The Pregnancy and Parenthood in Young People (PPYP) Strategy' which aims to drive actions that will decrease the cycle of deprivation associated with pregnancy in young people. The strategy notes that 'evidence shows that having a pregnancy at a young age can contribute to a cycle of poor health and poverty as a result of associated socio-economic circumstances before and after pregnancy (as opposed to the biological effects of young maternal age)'.

The strategy has a number of short, medium and long term outcomes. One of the long term outcomes is a 'reduction in pregnancies and subsequent unintended pregnancies in young people'.

The latest teenage pregnancy figures were published in July 2022 and are for the year of conception ending on 31 December 2020. [Teenage pregnancies - Year of conception, ending 31 December 2020 - Teenage pregnancies - Publications - Public Health Scotland](#)

Nationally, these figures show that:

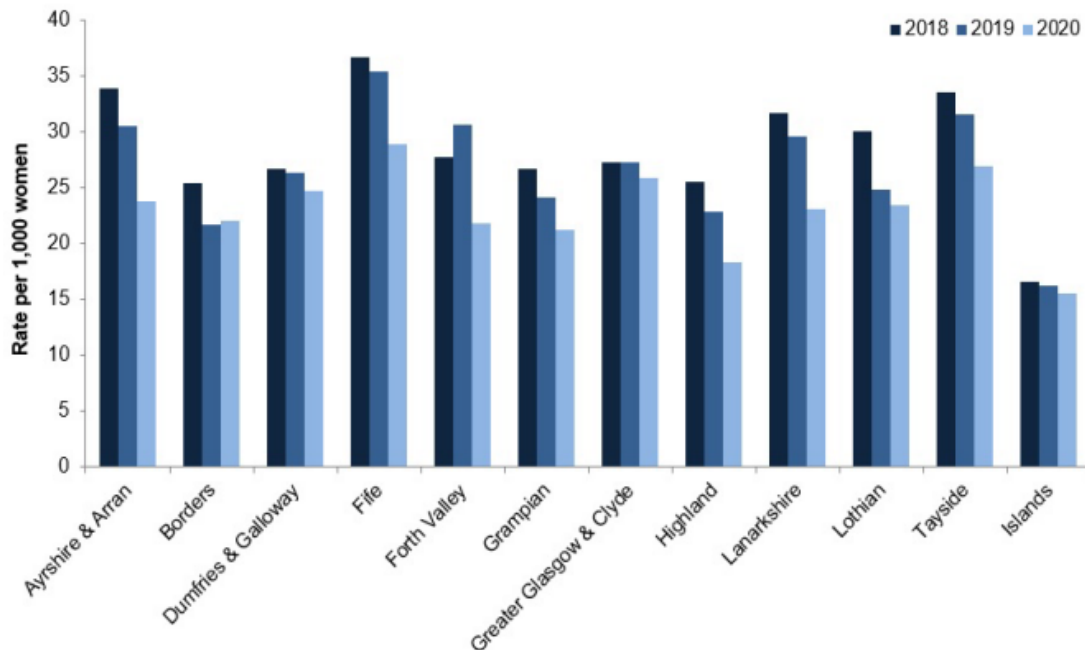
- The teenage pregnancy rate in Scotland is at its lowest level since reporting began as rates fell for a thirteenth consecutive year to 23.9 per 1,000 women in 2020 (equivalent to 3,300 teenage pregnancies).
- Teenage pregnancy rates in Scotland vary by region. In 2020 NHS Highland recorded the lowest overall rate amongst the mainland NHS Boards while NHS Fife recorded the highest (18.3 and 28.9 per 1,000 women respectively).
- The proportion of teenage pregnancies that result in termination rather than delivery has increased gradually over time and is now the slightly more common of the two outcomes.
- While teenage pregnancy rates have reduced across all levels of deprivation in the last decade, they have fallen more rapidly in the most deprived areas which has narrowed the absolute gap between the most and least deprived areas.
- In 2020, however, those living in the areas of highest deprivation still had teenage pregnancy rates five times higher than those in the least deprived (44.9 compared to 9 per 1,000 women).

- Teenage women from the most deprived areas are more likely to deliver than to terminate their pregnancy. In contrast, those from the least deprived areas are more likely to terminate than to deliver.

The chart below shows pregnancy rates for women aged under 20 by Scottish Health Board from 2018 to 2020.

The rate per 1000 women in Dumfries and Galloway in 2020 was 24.7 and the number of pregnancies was 86.

Figure 2: Teenage pregnancy by NHS Board, 2018-2020



Key message:

In Dumfries and Galloway, teenage pregnancy numbers and rate have been declining over time. In 2011 there were 175 teenage pregnancies in Dumfries and Galloway – a rate of 40.6 per 1000 women. Since 2011, there has been almost a year on year reduction – the exception being 2015 where numbers rose, and then fell again the following year to below the figures for 2014.

Our rate is higher than that of Borders and Highland, but is continuing a downwards trend.

3.3.6 Emergency hospital admissions for unintentional injuries – children aged under 15

Unintentional injury is a common cause of emergency admission to hospital for adults and children. Nationally, in the financial year ending 31 March 2021,

unintentional injuries accounted for approximately 1 in 7 emergency hospital admissions for children in Scotland, and 1 in 9 for adults. The majority of unintentional injuries do not result in hospital admission but are treated by GPs, Accident and Emergency departments or by the child's parent or carer.

The term 'unintentional injury' is preferred to 'accidents' as the latter implies that events are inevitable and unavoidable whereas a high proportion of these incidents are now regarded as being preventable. Unintentional injuries can occur in any age group, but children and the elderly are generally more vulnerable. Figures below show emergency hospital admissions in Dumfries and Galloway for children under 5, and children aged 5-14 since 2018.

Emergency hospital admissions for Unintentional Injuries for children under 5 (aged 0-4) in Dumfries and Galloway			
Type of Injury	Number of children aged 0-4		
	2018/19	2019/20	2020/21
Road Traffic Accident (RTA)	<5	<5	<5
Poisoning	9	18	18
Falls	30	34	38
Struck by, against	11	10	8
Crushing	<5	<5	<5
Scalds	8	6	<5
Accidental Exposure	10	5	<5
Other	<5	12	16
All Diagnoses	74	87	92

[Unintentional Injuries - Admissions - Scottish Health and Social Care Open Data \(nhs.scot\)](#)

The table below shows emergency hospital admissions for unintentional injuries for children aged 5 to 15 in Dumfries and Galloway over the 3-year period from 2018/19 to 2020/21

	2018/19			2019/20			2020/21		
	Number of children			Number of children			Number of children		
Type of Injury	Aged 5-9	Aged 10-14	Total	Aged 5-9	Aged 10-14	Total	Aged 5-9	Aged 10-14	Total
RTA	<5	5	9	<5	<5	8	<5	7	8
Poisoning	<5	<5	<5	5	<5	6	<5	<5	<5
Falls	36	33	69	30	16	46	28	22	50
Struck by, against	6	8	14	<5	<5	6	<5	5	9
Crushing	<5	<5	4	6	<5	8	<5	<5	<5
Scalds	<5	<5	<5	<5	<5	<5	<5	<5	<5
Accidental Exposure	<5	<5	<5	<5	<5	<5	<5	<5	<5
Other	19	10	29	9	10	19	11	10	21
All Diagnoses	71	62	133	57	37	94	46	46	92

[Unintentional Injuries - Admissions - Scottish Health and Social Care Open Data \(nhs.scot\)](#)

Key message – Emergency Hospital Admissions for Unintentional Injuries:

In Dumfries and Galloway, we have seen a yearly increase over the last 3 years in emergency hospital admissions for unintentional injuries for under-5's. The single biggest category of admission is for falls and this is the biggest category nationally. The number of poisoning incidents rose from 9 in 2018/19 to 18 the following year, and was 18 again in 2020/21

In Dumfries and Galloway, emergency hospital admissions for unintentional injuries in children aged 5-14 fell sharply in 2019/20 and there was a further slight fall in numbers. As with the younger age range (and in line with the national picture), the largest single category was 'falls'.

The reason for the increase in admissions for under 5's and the decrease in 5-14's is unclear.

3.4 Summary

Overall, the global picture for children in Dumfries and Galloway in receipt of universal services is a mostly positive one. The pandemic has had an impact on some of our indicators (for example attainment at Curriculum for Excellence levels) and there is room for improvement across a number of areas, but the global picture in Dumfries and Galloway is one of good services and good outcomes for the majority of children and young people.

However, evidence shows that children affected by poverty, children with additional support needs and children who are looked after are less likely than their peers to have positive outcomes, and this is examined in the following sections.

- 82.5% of parents surveyed in 2022 said Early Learning and Childcare meets their needs.
- In 2021 we had 10,092 primary school pupils and 8,594 secondary pupils.
- Achievement of Curriculum For Excellence Levels - since the onset of the pandemic, almost all areas and stages achievement of a level shows a notable decrease in pupils achieving the relevant level for their stage as recorded in June 2021. The data shows the levels for P1 pupils in 2018 who were in P4 in June 2021 and also pupils in P4 in 2018 who were then in P7 in June 2021. Looking at this data, the biggest fall in pupils achieving relevant levels for stage were for P1 to P4, most especially for writing and numeracy.
- Overall children and young people across Dumfries and Galloway perform better in listening and talking at all levels than reading and writing.
- SQA Attainment - In 2020/21 achievement in S5 showed a slight decrease in overall performance with 60.32% achieving 1 or more awards at SCQF Level 6, 38.61% achieving 3 or more awards at SCQF Level 6, and 15.13%

achieving 5 or more awards at SCQF Level 6. The five-year trends are showing improvements for all 3 measures.

- S6 performance saw improvements in all areas in 5 year trends across 1+, 3+ and 5+ Highers achieved as well as 1+ Advanced Higher. The comparison to the previous year also shows improvements in all of the measures.
- The latest participation measure shows that 93.1% of our 16-19 year olds are participating in training, education employment, or personal development, compared to 92.2% nationally.
- Currently Dumfries and Galloway has one of the highest 6-8 week breastfeeding attrition (drop-off) rates in Scotland, although the percentage of babies being exclusively breastfed at 6-8 weeks has increased since 2011 from 21.8% to 25.6%.
- In 2020, 82% of children inspected in Primary 1 in Dumfries and Galloway had no obvious decay experience in their primary teeth. This compares with 74% nationally. Those affected by socio-economic deprivation are more likely to have poorer dental health.
- Our percentage of children with a healthy weight has historically been lower than that nationally. We have a current data-gap for this as reviews did not take place during lockdown.
- We have maintained high child vaccination rates over time in Dumfries and Galloway.
- Our teenage pregnancy rates have been falling over time. In 2011 the rate per 1000 women under 20 was 40.6, this was down to 24.7 by 2020.
- Emergency hospital admissions for Unintentional Injuries for children under 5 (aged 0-4) in Dumfries and Galloway rose by 5 to 92 in 2021/22; while the number for children aged 5-15 fell from 133 in 2019/20 to to 94 in 2020/21 to 92 in 2021/22.

4. Vulnerability factors: Children and Young People who may require supports or services that are additional to those provided by universal services.

4.1 Introduction

In this chapter, the aim is to present data that pertains to children and young people whose needs are such that they require 'more than universal provision', but who do not necessarily meet thresholds for care and protection. This includes data on children who have concerns identified at their 27-30 Month Review; those in Education who have Additional Support Needs (ASN); those with disabilities; those who require support with mental health and those who are Young Carers.

4.2 Percentage of children with 1 or more concerns at Child Health 27-30 Month Review

Early child development is influenced by both biological factors (such as being born premature) and environmental factors (such as the parenting and opportunities for play and exploration children receive). Problems with early child development are important as they are strongly associated with long-term health, educational, and wider social difficulties.

Detecting developmental problems early provides the best opportunity to support children and families to improve outcomes. There is good evidence that parenting support and enriched early learning opportunities can improve outcomes for children with, or at risk of, developmental delay. There is also increasing evidence that intensive early interventions for children with serious developmental problems can also improve outcomes.

All children in Scotland are offered the child health programme which includes a series of child health reviews, including an assessment of children's development at 13-15 months, 27-30 months and 4-5 years. These reviews involve asking parents about their child's progress, carefully observing the child, and supporting parents to complete a structured questionnaire about the child's development. At the end of the review Health Visitors record whether they have any concerns about each area of the child's development. From [Early child development statistics - Scotland 2020 to 2021 - Early child development - Publications - Public Health Scotland](#)

The table below shows the number of 27-30 month reviews carried out in Dumfries and Galloway from 2013 to 21 and the number and percentage of children each year with at least one concern. With regard to coverage in 2020/21 – 94.1% of eligible children had their review.

27-30 month reviews over time in Dumfries and Galloway			
Financial Year	Number of reviews	Number of children with a concern	Percentage of children with a concern
2013/14	1398	303	21.7%
2014/15	1370	273	19.9%
2015/16	1304	283	21.7%
2016/17	1283	259	20.2%
2017/18	1251	202	16.1%
2018/19	1249	196	15.7%
2019/20	1240	187	15.1%
2020/21	1184	191	16.1%

[Early Child Development - 27-30 Month Review Statistics - Datasets - Scottish Health and Social Care Open Data \(nhs.scot\)](#)

At 16.1%, the percentage of children with a concern in 2020/21 was slightly higher than in 2019/20 (15.1%). For Scotland in 2020/21, the percentage with a concern was 14.9%.

In Dumfries and Galloway, in 2020/21, the highest percentage of new concerns at the 27-30 month review were in these four developmental domains:

- Speech, Language and Communication 7.85%
- Fine Motor 5.83%
- Personal/Social 3.56%
- Problem solving 4.05%

Since 2020, a large amount of research has been carried out in Scotland and in the UK on the impacts of the Covid-19 pandemic and associated measures, on children, young people and families.

In 2020, the COVID-19 Early years resilience and impact survey (CEYRIS) was conducted in Scotland [COVID-19 Early years resilience and impact survey - CEYRIS - Publications - Public Health Scotland](#).

The survey found that:

- Some deterioration was identified across all income groups in all areas asked about in terms of children's behaviour and life. The extent of the decline was worse for children in low-income households in all areas except physical activity.
- The decline during lockdown in relation to children's behaviour and life was more severe for children with a long-term health condition. The biggest differences were in relation to sleeping and the ability to concentrate.

- For five of the eight behaviours asked about in relation to children, the decline over lockdown was greater in large families compared to small ones, with the biggest differences for imaginative play and time spent outdoors.

An April 2022 Ofsted Report in England highlighted impact of pandemic on early child development – nurseries reporting difficulties with social interaction and social confidence - children just behind where they would normally be expected to be. Also “physical development - crawling, walking and perhaps related to that also greater obesity.” Care providers suggested face masks were having a negative impact on young children's language and communication skills. "Children turning two years old will have been surrounded by adults wearing masks for their whole lives and have therefore been unable to see lip movements or mouth shapes as regularly,"

Key message: concerns at 27-30 month review

In Dumfries and Galloway children born from May 2016 received all aspects of the revised Universal HV Pathway (UHVP), with the 13-15m Child Health Review being offered from April 2017. The data shown above notes a 4% decrease in children being assessed as having 1 or more developmental concern at 27-30 m review from 2017: The Evaluation of the Universal Health Visiting Pathway in Scotland Phase 1 Report (Scottish Government 2022) recognises that "the introduction of the 13-15 month review would indicate that this offers an opportunity for health visitors to pick up concerns about children at an earlier development stage than prior to the introduction of the UHVP", hence a possible indicator of reduction locally in developmental concerns at 27-30m. This demonstrates that new developmental concerns are being picked up by health visitors earlier with additional support or referrals to other specialists offered.

<https://www.gov.scot/publications/universal-health-visiting-pathway-evaluation-phase-1-report-routine-data-analysis-implementation-delivery/pages/2/>

4.3 Two-Year-Old uptake of early learning and childcare

Dumfries and Galloway	2 year olds				All 2 year olds	Percentage of all 2 year olds	
	Year	Looked after	Kinship Care or have a guardian	Parent on qualifying benefits			In Need, vulnerable or under local priorities
	2020/21	5	<5	164	<5	175	15
	2019/20	5	<5	99	<5	104	8
	2018/19	<5	<5	118	<5	134	11

Based on 27% of the two-year old population being eligible for funded Early Learning and Childcare around 55% are currently accessing their entitlement, with this number increasing as enrolments take place throughout the year. From August 2021 children with parents who have experience of care were also eligible for funded hours.

4.4 School Nurse Referrals

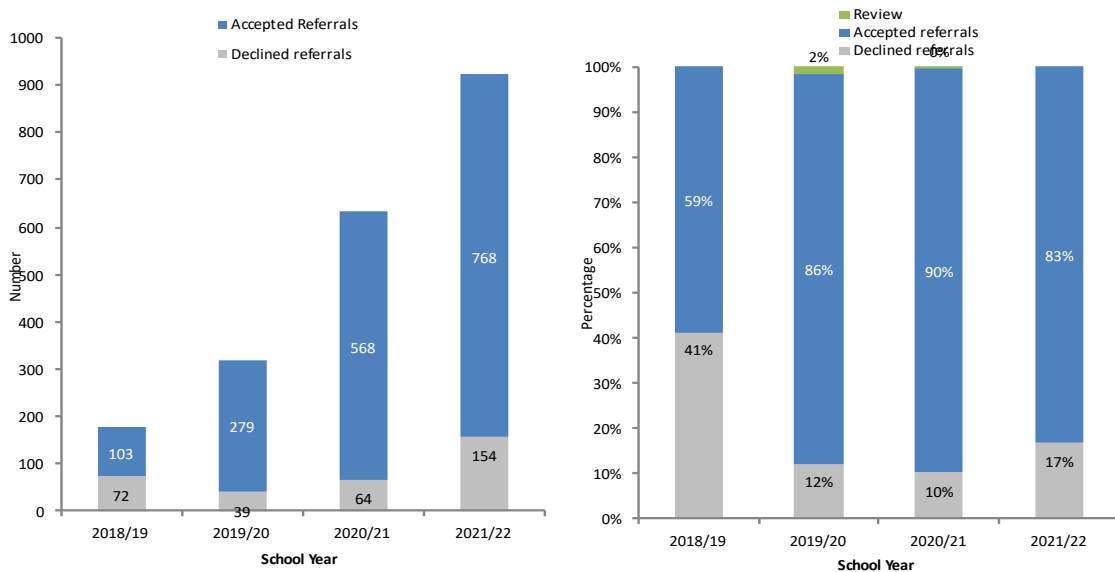
The School Nursing Service has 10 key Priority Areas and if appropriate, will provide support on any of these. The priority areas are:

- Mental Health and Wellbeing
- Substance Misuse
- Child Protection
- Domestic Abuse
- Looked After Children
- Homelessness
- Sexual Health
- Youth Justice
- Transitions
- Young Carers

The following chart shows referrals made to the School Nursing Service from 2018/19 to 2021/22.

Referrals to School Nursing Service in Dumfries and Galloway

Referrals 2021/22



Referrals to the school nurse service by end of Quarter 4 2021/22 have significantly increased compared to the previous full academic year.

The Priority Areas of all referrals to the School Nursing Service in Dumfries and Galloway in the Academic Year 2021/22 were:

- Mental Health and Wellbeing – 737
- Young Carers - <5
- Substance Misuse – <5
- Transitions – 16
- Child Protection – 44
- Sexual Health – 6
- Domestic Abuse – 13
- Looked After Children - 77

Key messages: Referrals to School Nursing Service

The majority of referrals to the School Nursing service relate to the mental health and wellbeing priority area, with most referrals being made by Education colleagues.

School Nurses work within Step 2 of the Stepped Care model for mental health support in schools at a targeted, early intervention level. They undertake holistic GIRFEC Wellbeing Assessment, Wider World assessment and resilience framework to assess wider needs, creating management plans with CYP/parents as required.

Consultations are One to One, face to face in school or at home, NHS Near Me or telephone contacts which include parents if assessed as necessary to plan. They are trained in the Essential CAMHS 1,2 &3 and LIAM approaches.

4.5 Mental Health

Mental Health and Wellbeing is one of the priorities in the current 2020-23 Children's Services Plan. The action plan for this priority aims to ensure that all children and young people have access to the mental health and wellbeing support that they need when they need it. This includes a breadth of access, close to home and in a timely manner, matched to the needs expressed.

The current Children's Services Plan started on 1 April 2020 just as the scale of the COVID-19 pandemic was becoming apparent, and the UK was about to enter the first of a series of lockdowns. As early as August 2020, research was providing evidence of the impact of the pandemic on children and young people. During 2020, the Children's Parliament conducted a series of surveys with children aged 8-14 on the experiences and views of children during the pandemic. With regard to mental wellbeing, in August 2020 a [report](#) analysing the findings of the surveys found that:

- Children displayed a decline in mental wellbeing over the three surveys. In June, more children reported being lonely, and fewer felt in a positive mood and resilient than in April.
- Across the months, around a third of respondents indicated that there are lots of things to worry about, while more than half expressed a general worry about the future. Around a quarter reported being worried about five or more things.

In 2022, Public Health Scotland published findings of the [COVID-19 Early Years Resilience and Impact Surveys](#) (CEYRIS). The main points from the third CEYRIS Report were that:

- Overall, the findings suggest that for a substantial proportion of children in [the] sample, parents and carers perceive the pandemic to have had a negative impact on child and family health, wellbeing and development.
- The impacts generally appear to be felt to a greater extent in families from low income households, who may have already been struggling before the pandemic.
- The impacts do not appear to be universal, areas that some families report as having a negative impact, others report as having a positive impact.
- There are areas where the perceived impacts tend to be positive, rather than negative, and these should not be overlooked.
- There are areas where further analysis would be beneficial, which will be presented in future publications.

Scottish Government provided various funding streams to promote mental health of children, young people and adults. In Dumfries and Galloway, funding has been used for Mental Health Support in Schools and for community services across the region to provide low-level, mental health and wellbeing support for children and young people.

4.5.1 Mental Health Support in Schools Project

This project is also known as 'counselling in schools'. It began in August 2020 and is funded by the Scottish Government for 3 years up to June 2023. The project provides young People across Dumfries and Galloway with access to low level mental health support with the aim of supporting them to overcome the challenges and barriers they face in life. This project has been developed jointly as a partnership between Youth Work Services and Educational Psychology.

The young people that this is targeted at may be those:

- Where there are concerns surrounding their well-being including mental and emotional health
- Who are considered vulnerable (using our professional judgement)
- Who are at risk of offending
- Who are struggling with a loss/bereavement or significant change.
- Who are struggling with low self-esteem or confidence

The project promotes early detection and intervention strategies that can help improve young people's resilience and ability to succeed in school and in life. The expected outcome is to prevent mental health problems developing in the first place and reducing the number of young people requiring mental health support from NHS or other more formal mental health services. The delivery of this project is supported by Youth Information Workers in secondary schools and Youth Workers within Primary schools who have completed basic mental health training to spot the signs of mental health issues in a young person, offer mental health first aid and to be aware of when it is time to escalate a situation by sharing concerns with the designated safeguarding lead within the school/mental health teams.

- Between August 2020 and June 2021, the school counselling project delivered 3,559 one-to-one sessions to pupils within secondary schools.
- In this timeframe, 351 secondary pupils received support. Referrals came from school staff, external agencies such as CAMHS, social work, and some young people self-referred.
- A total of 464 pupils were seen at 10 primary schools, which involved three youth workers delivering a cognitive behavioural therapy programme over a period of eight weeks.

4.5.3 Community based mental health and wellbeing support

Dumfries and Galloway received funding from Scottish Government for to deliver new and enhanced community based mental health and emotional wellbeing supports and services for children, young people, their families and carers. Dumfries and Galloway Council have awarded the grant to a number of our partner providers including:

- Aberlour – for an Orchard Project based at Lincluden Abbey.
- Barnardo's Hear 4 U – for the Advocacy Within Schools project.
- D & G Befriending Project – to improve and enrich the lives of vulnerable and isolated young people aged 8-18 through befriending with trained adult volunteers.
- Dumfries and Galloway Carers Centre – for a range of activities including drawing/photography, a fund for vouchers for Young Carers and/or their families; an emergency fund for Young Carers and/or their families for identified needs; a programme in partnership with Council Youth Work Services to build confidence and self-esteem for Young Carers; and working alongside providers within Dumfries and Galloway to provide different activities for Young Carers.
- Quarriers – for emotional health and wellbeing support in schools. Quarriers aim to guide and support children/young people to identify coping strategies to help them manage when times are tough. Quarriers staff based in schools help young people to build confidence to achieve their goals and develop the resilience to cope when times are tough. The aim is for the young person to be able to manage life's ups and downs more effectively when feeling

anxious, stressed, worried, overwhelmed, or low and prevent their getting drawn into damaging risk-taking behaviours.

- Upper Nithsdale Family Service - to deliver additional after school groups and the Wooden Spoon free homecooked meal group that is available to all school age children in Kelloholm and Kirkconnel; and to deliver 'The Blues Approach' program for all secondary school children who attend Sanquhar Academy. 'The Blues Approach' is consists of six sessions exploring mental health issues and provides Cognitive Behaviour Therapy to support and manage mental health issues.

4.5.4 CAMHS

Audit Scotland published a major report into children and young people's mental health services in 2018, highlighting a decline in the mental wellbeing of children and adolescents in the past decade which is reflected in the significant increase in referrals to CAMHS. It suggested that Scotland's child and adolescent mental health services were facing significant challenges, such as: increased number of referrals to specialist services, longer waiting-times to start treatment, increasing number of rejected referrals and weak non-specialist support.

In its National Performance Framework, the Scottish Government states that good mental health and wellbeing is central to ensuring that all of Scotland's children and young people grow up loved, safe, and respected so that they can realise their full potential.

The Scottish Government's Mental Health Strategy 2017-2027 included multiple specific actions for CAMHS in Scotland, with a particular focus on prevention and early intervention.

The COVID-19 pandemic has had a particularly negative impact on children and young people's mental health and wellbeing, with the impact exacerbated for those groups already at-risk of poorer mental wellbeing. The extent of longer-term impacts of the pandemic are still to be fully understood.

In October 2020, the Scottish Government published its Coronavirus (COVID-19): mental health - transition and recovery plan in response to the pandemic's impact on mental healthcare services, including CAMHS. The plan built on previous commitments, in addition to introducing new actions. The Scottish Government allocated £11.25 million to services in November 2020 to respond to the mental health and emotional wellbeing issues arising as a result of the pandemic.

Audit Scotland stated in 2018 that navigating mental health services, especially specialist services, can be confusing for children and young people and are hard to access due to a number of factors. Children and young people often do not know what support is available or where to get that support. Furthermore, the audit into rejected referrals identified a perception from children and young people that the

threshold to be accepted by CAMHS was very high. The CAMHS national service specification was published in February 2020. It outlines what children, young people and their families can expect from Tier 3 and Tier 4 support. The delivery and impact of the national service specification in improving children and young people's understanding and knowledge of CAMHS will need to be evaluated over the long-term.

The Child and Adolescent Mental Health Service (CAMHS) is a multidisciplinary team that provides assessment/treatment and interventions for children and young people experiencing mental health problems. CAMHS also offers training, consultation, advice and support to professionals working with children, young people and families. CAMHS is available for all children and young people aged between 0-18 and who meet the CAMHS referral criteria in Scotland. Dumfries and Galloway have seen an unprecedented increase in referrals to CAMHS in 2021-22. This is the same picture across Scotland. As a consequence of this the number of cases open to the team has also increased with an average of 1036.

Recent data shows that referrals to CAMHS average at 128 per month with an average of 36% of referrals being rejected per month. The rejected referrals are being monitored and tracked to provide a better understanding of the patient journey. An example of the rejected referrals are: referral passed to Psychology, referral passed to School Nursing, referred for assessment of Autism Spectrum Disorder (ASD), referred for social work, referral to Looked After Children (LAC).

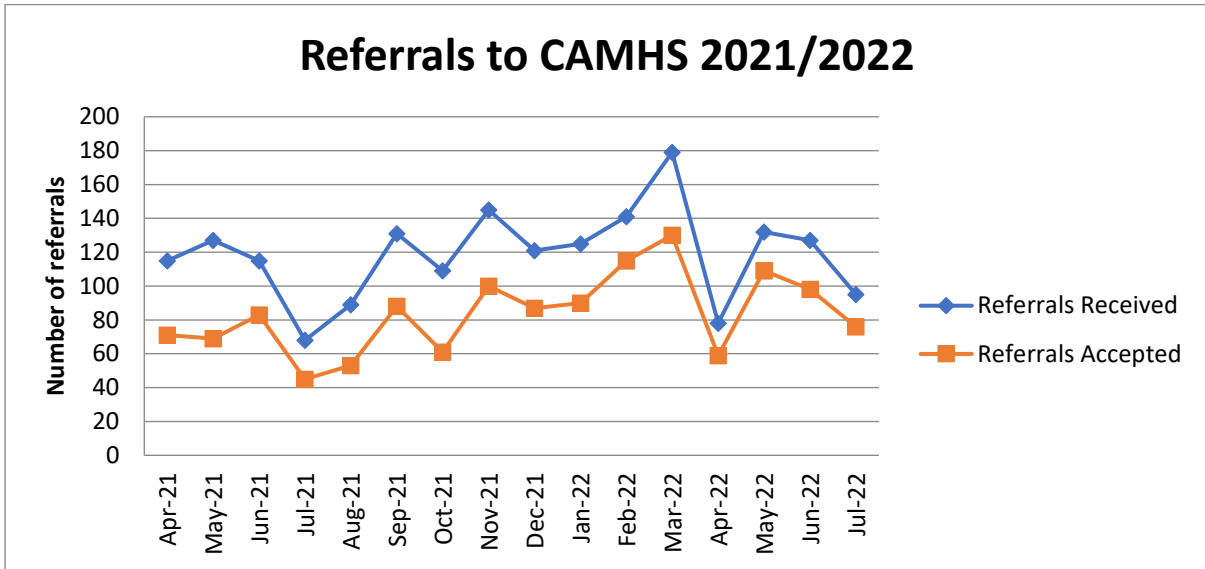
The service undertook a quality improvement project in September 2021 with the aim of improving waiting times as the service had the longest waiting times it had ever experienced. The initial assessment clinics were redesigned, and the workforce capacity increased at the "front door" to try and aim to have early conversations with all families. The redesign has significantly improved waiting times and early data suggests these changes can sustain improved access.

The Covid-19 pandemic has led to an increase in demand for mental health services, However, prior to the advent of the pandemic, mental health and wellbeing had already been identified as an important priority from a range of sources including the school wellbeing surveys that took place as part of our involvement in the Realigning Children's Services programme.

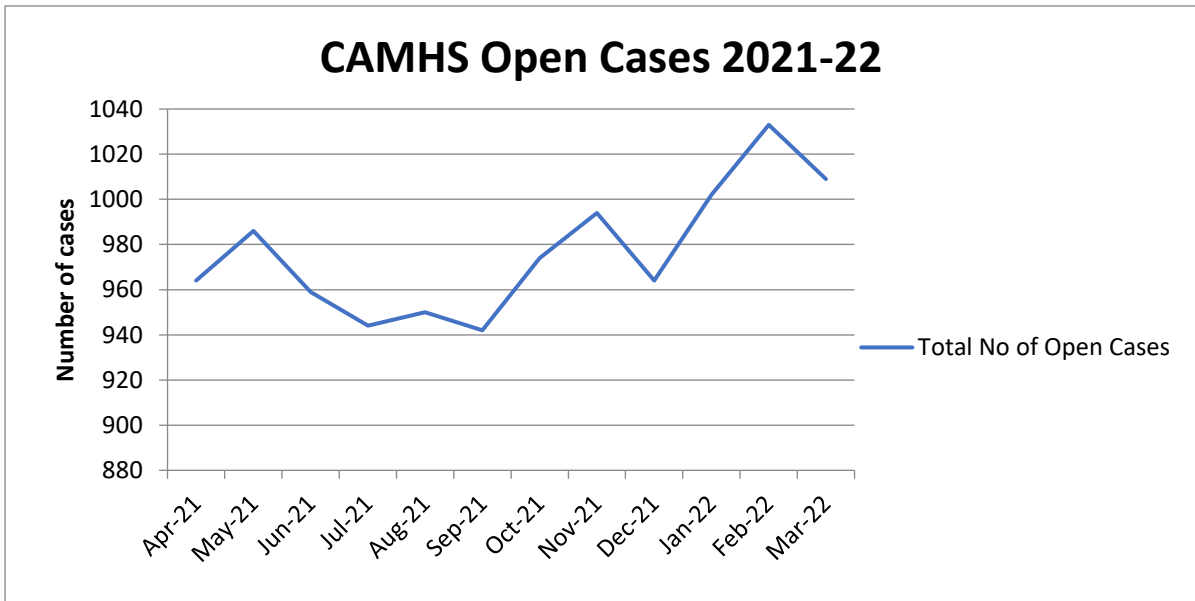
Work has taken place on the development of a hub model and mental health pathway, with the mapping of mental health services across Dumfries and Galloway. The development of a 'Single Point of Access' is integral to the model, and in March 2022, work on this was progressing, with the establishment of weekly meetings between CAMHS, School Nursing and Clinical Psychology services. At these multi-disciplinary meetings, referrals to services are screened and directed to the correct service. In developing the mental health pathway, major elements are the 'entrance and exit' parts of the pathway – and the work on the single point of access is key to

getting the referral criteria right, and entry into the pathway. This work needs to take place in line with implementation of the CAMHS Service Specification.

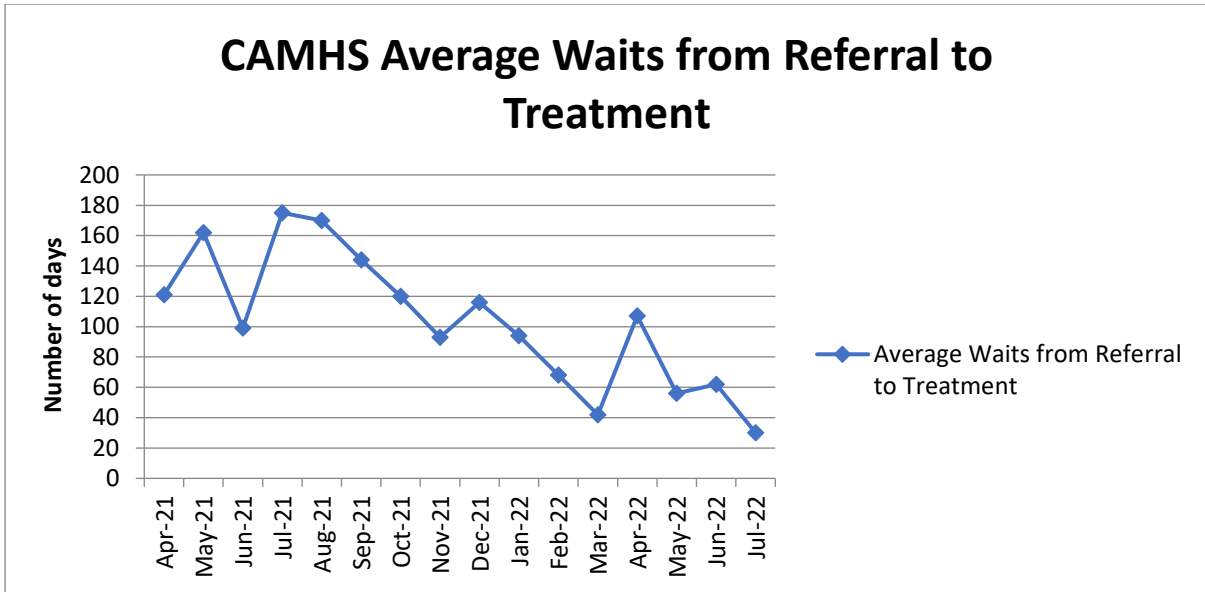
The chart below shows referrals to CAMHS in 2021/22



The chart below shows the number of open CAMHS cases each month from April 2021 to March 2022.



The chart below shows average CAMHS waiting times from referral to treatment from April 2021 to July 2022.



Data from Public Health Scotland shows that the CAMHS referral rate per 100,000 population (which indicates the reach into a population) is 17.7 for Dumfries and Galloway against a Scottish average of 9.4 per 100,000 for the quarter Jan-Mar 2022. This is a fairly standard finding across time for CAMHS in Dumfries and Galloway.

Key messages: Mental Health

Nationally, the pandemic has impacted on the mental health and wellbeing of children and young people, with the longer-term impacts still unknown.

In Dumfries and Galloway we have taken an early intervention approach, using Scottish Government funding to provide low-level mental health supports. It is not clear what the longer-term position is with regard to funding.

The single biggest category of referrals to School Nursing is Mental Health and Wellbeing.

Dumfries and Galloway have seen an unprecedented increase in referrals to CAMHS in 2021-22. There is a similar picture across Scotland. As a consequence of this the number of cases open to the team has also increased with an average of 1036.

4.6 Children with Additional Support Needs (ASN) in Education

The Education (Additional Support for Learning) Scotland Act 2004 (as amended) states that a child or young person has an additional support need where **they need additional support in order to overcome barriers and benefit from school education**. The Act also states that education authorities must have arrangements

in place to identify pupils with additional support needs (ASN) and from among them, those who may require a specific support plan. Education authorities must also be able to identify the reason(s) that additional support is needed.

The pupil census collects information on the number of pupils who require additional support to access education (and the reason they need this support), not the number of pupils who have been diagnosed with specific needs. In 2020-21, there were 6,289 pupils in Dumfries and Galloway (33.7 per cent of all pupils) with an additional support need (ASN) recorded; 3,230 primary pupils (32 per cent) and 3,059 secondary pupils (35.6 per cent). This figure includes pupils with a Co-ordinated Support Plan (CSP), Individualised Education Programme (IEP), Child Plan or some other type of support. The percentage of children in Dumfries and Galloway with ASN in 2020/21 was higher than the national figure of 32.3%.

At the time of writing, we have 12 learners in day education placements in Dumfries and Galloway.

4.6.1 Primary pupils with Additional Support Needs 2018-21 in Dumfries and Galloway

Year	Number of Primary pupils with Additional Support Needs	Number of children with CSP	Number with IEP	Number with Other Support Needs	Number with Child Plans	Number Assessed or Declared Disabled	Percentage of pupils with ASN
2021	3,230	26	981	2,515	573	322	32.0
2020	3,171	27	928	2,491	493	324	31.2
2019	3,213	42	826	2,550	515	298	31.2
2018	3,361	60	900	2,633	548	326	32.0

[Pupil census: supplementary statistics - gov.scot \(www.gov.scot\)](http://www.gov.scot)

4.6.2 Secondary pupils in Dumfries and Galloway with Additional Support Needs 2018-21

Year	Total with Additional Support Needs	with CSP	with IEP	with Other Support Needs	Child Plans	Assessed or Declared Disabled	Percentage of pupils with ASN
2021	3,059	34	618	2,594	503	361	35.6
2020	2,888	37	536	2,463	467	348	34.0
2019	2,945	47	531	2,496	460	338	34.9
2018	2,858	54	508	2,410	431	333	34.7

4.6.3 Dumfries and Galloway Pupils with Additional Support Needs by sector and Reasons for support, 2021-22

Reasons for Support	Number of Pupils			Rate per 1,000 pupils		
	Primary	Secondary	Total	Primary	Secondary	Total
Pupils for whom reason for support is reported	3,215	3,058	6,273	318.6	355.8	335.7
Learning disability	161	106	267	16.0	12.3	14.3
Dyslexia	110	382	492	10.9	44.4	26.3
Other specific learning difficulty (e.g. numeric)	607	572	1,179	60.1	66.6	63.1
Other moderate learning difficulty	1,043	928	1,971	103.3	108.0	105.5
Visual impairment	97	123	220	9.6	14.3	11.8
Hearing impairment	41	56	97	4.1	6.5	5.2
Deafblind	<5	<5	<5	<5	<5	<5
Physical or motor impairment	101	97	198	10.0	11.3	10.6
Language or speech disorder	331	175	506	32.8	20.4	27.1
Autistic spectrum disorder	253	260	513	25.1	30.3	27.5
Social, emotional and behavioural difficulty	790	785	1,575	78.3	91.3	84.3
Physical health problem	198	247	445	19.6	28.7	23.8
Mental health problem	37	69	106	3.7	8.0	5.7
Interrupted learning	73	59	132	7.2	6.9	7.1
English as an additional language	175	164	339	17.3	19.1	18.1
Looked after	157	147	304	15.6	17.1	16.3
More able pupil	38	51	89	3.8	5.9	4.8
Communication Support Needs	259	104	363	25.7	12.1	19.4
Young Carer	64	208	272	6.3	24.2	14.6
Bereavement	30	39	69	3.0	4.5	3.7
Substance Misuse	<5	5	5	<5	0.6	0.3
Family Issues	217	202	419	21.5	23.5	22.4
Risk of Exclusion	9	8	17	0.9	0.9	0.9
Other	162	110	272	16.1	12.8	14.6

**Numbers below 5 suppressed to avoid identification of individual pupils Note: Pupils with more than one reason will appear multiple times.*

Source: DG Education Directorate, ASN Report 2022

4.6.4 Attendance levels for children with Additional Support Needs in 2021/22.

Primary pupil attendance for 2021/22 is showing a fall in value of 3.8% compared to the previous year. The overall authority average is 92.1% with individual school values ranging between 44.9% and 97.3%. Authorised absence value is 6.1%, unauthorised absence 1.8% and exclusions 0.01%. The table below shows attendance for children with additional support needs.

ASN	2017/18	2018/19	2019/20	2020/21	2021/22
ASN average	93.4%	93.7%	92.8%	94.6%	90.1%
Not ASN average	95.6%	95.8%	94.8%	96.5%	93.1%
Overall average	94.9%	95.1%	94.2%	95.9%	92.1%

Secondary school attendance for 2021/22 is showing a fall in value of 4.8% compared to the previous year. The overall authority average is 88% with individual school values ranging between 80.4% and 91.8%. Authorised absence value is 7.6%, unauthorised absence 4.3% and exclusions 0.06%. The table below shows attendance for children with additional support needs.

Source: DG Education Directorate, ASN Report 2022

ASN	2017/18	2018/19	2019/20	2020/21	2021/22
ASN average	88.1%	88.9%	87.4%	90.5%	84.8%
Not ASN average	92.7%	93.0%	92.2%	93.9%	89.8%
Overall average	91.1%	91.7%	90.5%	92.8%	88.0%

The average attendance value in both primary and secondary schools for children with ASN in Dumfries and Galloway is lower than that for those without ASN.

Source: DG Education Directorate, ASN Report 2022

4.6.5 Exclusions for children with Additional Support Needs

Primary pupil exclusion rate for 2021/22 is showing an increased value of 4.37 per thousand pupils overall on the previous year and now sits at 7.93 incidents per thousand pupils. In April 2018, the authority introduced a zero target for looked after pupil exclusions and it is still yet to meet that target.

ASN	2017/18	2018/19	2019/20	2020/21	2021/22
ASN average	42.1	25.3	14.53	10.61	19.81
Not ASN average	2.44	1.41	0.96	0.27	0.87
Overall average	15.62	9.2	5.24	3.56	7.93

Secondary pupil exclusion rate for 2021/22 is showing an increased value of 38.3 in Dumfries and Galloway. Exclusion rates for secondary pupils with ASN as a rate per 1000 are shown below.

Source: DG Education Directorate, ASN Report 2022

ASN	2017/18	2018/19	2019/20	2020/21	2021/22
ASN average	82.2	91.8	67.5	62.1	74.5
Not ASN average	19.2	14.7	14.3	16.6	18.2
Overall average	40.4	39.7	33.0	32.6	38.3

At both primary and secondary stages in Dumfries and Galloway, exclusion rates for children with additional support needs are higher than those for children without ASN.

Source: DG Education Directorate, ASN Report 2022

4.6.6 Achievement in Curriculum for Excellence Levels

In 2021, in line with the national picture, the percentage of pupils achieving the expected CfE level was higher for pupils recorded as not having an Additional Support Need (ASN), compared to pupils with ASN, across all stages for Numeracy and the Literacy organisers.

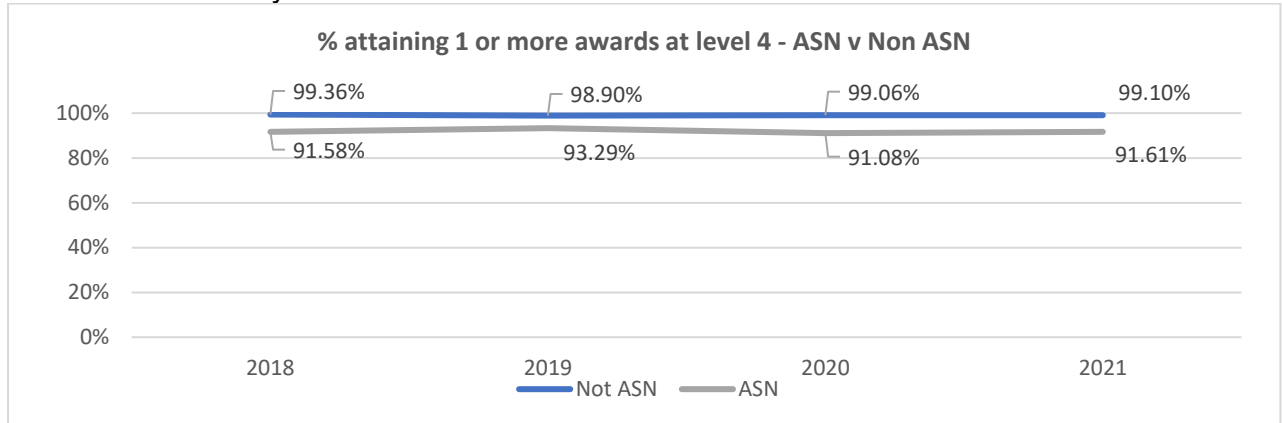
The difference in performance for 2021 between pupils with a recorded ASN and pupils with no recorded ASN in primary stages were between 30 and 45 percentage points with least difference in Listening and Talking (30 - 35 percentage points) and highest for Writing (33 - 45 percentage points).

4.6.7 Senior Phase Attainment at SCQF Levels 4 to 6

In line with the national picture, pupils with an additional support need (ASN) typically have lower attainment compared to pupils with no additional support needs.

The attainment gap between school leavers with ASN and those without ASN widens at higher levels of qualifications. The attainment gap increases from 7.49 percentage points on average at SCQF Level 4, to 19.43 percentage points on average at SCQF Level 5 and 34.49 percentage points at SCQF Level 6.

The chart below shows the percentage of school leavers attaining 1 or more awards at SCQF Level 4 by ASN status



Source: DG Education Directorate, ASN Report 2022

91.61% of school leavers with an additional support need gained 1 or more qualifications at SCQF Level 4 in 2020/21 compared to 92.71% nationally. The gap between Dumfries and Galloway leavers with an additional support need and those without in 2020/21 decreased by 0.49 percentage points on the previous year.

4.6.8 Children with ASN and Post school destinations

School leavers with an additional support need made up 32.4% of the school leavers cohort in Dumfries and Galloway in 2020/21. As with the national picture, school leavers with ASN are less likely to go on to a positive destination (initial), compared to leavers without a recorded ASN (90.57 per cent compared to 94.57 per cent).

Source: DG Education Directorate, ASN Report 2022

4.6.9 Evidence from engagement with children with additional support needs

In 2019, Dumfries and Galloway took part in the Scottish Government’s Realigning Children’s Services programme. As part of this programme, in early 2019, a total of 8,287 school pupils in years P5 to P7 (3,749) and S1 to S4 (4,538), accounting for 79% of all eligible primary pupils and 74% of all eligible secondary pupils in Dumfries and Galloway, agreed to take part in an online health and wellbeing survey. They also agreed for their responses to be linked to local authority administrative data through a secure process.

The findings of the Health and Wellbeing Survey provided detailed information on physical health and health behaviours, mental wellbeing, family relationships, peer relationships and friendships, learning environment and the local area. The linkage with local authority data allowed for analysis by factors including: Additional Support Needs; Free School Meals; Gender; Looked-After status; Child's Plan.

Findings from the 2019 Realigning Children's Services Wellbeing survey showed that for primary school pupils with Additional Support Needs:

- 12% of children with registered additional support for learning needs reported low mental wellbeing compared with 9% of those with no additional support needs
- 38 % of children with registered additional support for learning needs reported they were active every day compared with 45% of those with no additional support needs
- 21% of children with registered additional support for learning needs reported that they rarely or never eat fruit and vegetables compared with 12% of those with no additional support needs
- 75% of children with registered additional support for learning needs reported there were no occasions where anyone smoked in the family home compared with 85% of those with no additional support needs.
- Primary school pupils with additional support needs were more likely to report a higher frequency of bullying than other children.

For secondary school pupils:

- 22% of children with registered additional support for learning needs reported low mental wellbeing compared with 16% of those with no additional support needs
- 32% of children with registered additional support for learning needs reported that they ate veg at least once a day compared with 42% of those with no additional support needs
- 33% of children with registered additional support for learning needs were in the high or very high category of SDQ compared with 24% of those with no additional support needs
- within the categories within the SDQ, the biggest difference was for problems with peers category (32% ASN) compared to (21% non ASN).

From RCS [Thematic Report²²](#)

Key messages: Children with Additional Support Needs

In 2021, 32% of primary, and 36% of secondary pupils had Additional Support Needs – a total of 6,289 children.

Additional support needs can vary greatly – some children may need little support from services and others may have complex needs requiring multi-agency planning.

The 3 most prevalent reasons for support in 2021-22 were:

- Other moderate learning difficulty
- Social, emotional and behavioural difficulty
- Other specific learning difficulty (e.g. numeric)

Children with ASN on average have lower attendance rates and higher exclusion rates than those without ASN.

Children with ASN have poorer achievement at both Curriculum for Excellence levels and at Senior Phase than those without ASN.

Children with ASN are less likely on average to enter a positive (initial) post-school destination than those without ASN.

In 2019, Children with ASN scored more poorly than their peers on a range of health and wellbeing factors including: mental health and wellbeing; physical activity; diet and bullying.

4.7 Children in Education with Child Plans

- In 2019-20: there were 533 Primary pupils with a Child Plan and 453 Secondary pupils with a Child Plan
- In 2020-21: there were 507 Primary pupils with a Child Plan and 471 Secondary pupils with a Child Plan
- In 2021-22: there were 582 Primary pupils with a Child Plan and 519 Secondary pupils with a Child Plan

4.8 Children in Dumfries and Galloway with Autistic Spectrum Disorder

Year	Number of pupils where reason for support is reported	Number of pupils with ASD	Percentage of pupils with ASD
2021	3058	260	8.5%
2020	2886	222	7.7%
2019	2944	203	6.9%
2018	2858	190	6.6%

From school census.

The number of children with Autism Spectrum Disorder (ASD) has increased each year in Dumfries and Galloway and in 2021, 8.5% of children with additional support needs had ASD.

In 2022, LGBT Youth Scotland published [LIFE IN SCOTLAND FOR LGBT YOUNG PEOPLE 2022](#), the biggest piece of research ever undertaken on LGBT young people in Scotland. The research found that of young LGBT people who took part in the survey: nationally, **1 in 5 LGBT+ neurodiverse individuals left school early due to homophobia, biphobia or transphobia.**

4.9 Children with a disability receiving a service from Social Work

(Respite Services; Direct Payments; Assistive Technology; Finance Service)

The 2010 Equality Act defines a disabled person as: “someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.”

There is no central register of all Children and Young People with a learning or physical disability, but we have figures within Seemis, so figures for children with disabilities are based on access to services.

In July 2022 there were 125 children with disabilities receiving financial support from Social Work.

4.10 Children assessed or declared as disabled in education

Year	Primary Pupils in Dumfries and Galloway		Secondary Pupils in Dumfries and Galloway	
	Number with Additional Support Needs	Number Assessed or Declared Disabled	Number with Additional Support Needs	Number Assessed or Declared Disabled
2021	3,230	322	3,059	361
2020	3,171	324	2,888	348
2019	3,213	298	2,945	338
2018	3,361	326	2,858	333

4.11 Free School Meals and Clothing Grants

In the 2021/22 academic year, a total of 4,405 children were in receipt of free school meals. This was 20.6% of all children of nursery and school age. The breakdown by sector was as follows:

- Nursery Children – 549
- Primary Children – 2,346
- Secondary Children – 1,510

Also in 2021/22, 4,034 children received a School Clothing Grant to a total value of £566,428.

4.12 Young Carers

Young Carers are children and young people who help to look after someone in their family. This may be a parent or a sibling. Young Carers may miss out on things that other children have access to and often take on a level of increased responsibility within the home. The Young Carers Project aims to provide Young Carers with a break from their caring role through activities and groups held on a regular basis

throughout Dumfries and Galloway. Young Carers can access the service between the ages of 7-18 and groups are divided into primary and secondary ages. One-to-one support is also available and can help to deal with problems that Young Carers can face such as feelings of isolation, frustration or problems at school.

In March 2022, Dumfries and Galloway Young Carers Centre were supporting 186 existing Young Carers, and 32 new Young Carers. Four new Young Carer Statements had been completed in the quarter ending March 2022 and a further 31 were in progress.

4.13 LGBT Young People

The LGBT School Surveys in Dumfries and Galloway have not taken place since 2020. However, as described above, in 2022 LGBT Youth Scotland published [Life in Scotland for LGBT Young People in 2022](#). While this is national research, the findings reflect the landscape that LGBT young people experience in Dumfries and Galloway. There has been a version of this research every 5 years for the last 15 years. The research shows that over the last 15 years experiences across most areas have got worse, for example:

- Only **10%** of participants, rated the experience of school for LGBT people as “good”
- **70%** of gay/lesbian participants report experiencing bullying due to their sexual orientation at school
- There has been a big drop in the number of young people who think Scotland is a good place to be LGBTI (81% to **65%**)
- Just **28%** rural-based participants rated their local area as a good place to be LGBTI as compared to 62% of urban-based participants
- The vast majority of participants believe that homophobia, biphobia, and transphobia are a problem, both across Scotland as a whole, and in their local area.
- Just **17%** of young people surveyed reported that they would feel confident reporting a hate crime to the police if they experienced one

From [Launch: Life in Scotland for LGBT Young People 2022 | LGBT Youth Scotland | LGBT Youth Scotland](#)

4.15 Summary – Children who may require supports or services that are additional to those provided by universal services

There will be gaps in this section for various reasons. We hold a great deal of information about the performance of universal services and also about children who become looked-after. However, data provided by services only provides part of the picture and engagement with children and young people is necessary to gain a fuller assessment of need. Gaps in information can be expected regarding the needs of those children and young people who require support above that provided by

universal services, but who are below the threshold of care and protection. If potential supports are not available, or children with needs are not accessing potential supports, then a focus on data from services will give an incomplete picture of need, and it is particularly important that this is triangulated with data from children and young people themselves, in the form of Health and Wellbeing Surveys and from engagement with representative groups for example Parents Inclusion Network (PIN).

Engagement with representative groups such as PIN is a gap in this document, particularly with regard to children with disabilities. However, a strategic needs assessment specifically focused on children with ASN and/or disabilities is being commissioned by Dumfries and Galloway Education Directorate.

Key points:

Since 2016 when the Universal Health Pathway was introduced, there has been a decrease in the percentage of children having concerns picked up at 27-30 months. This is because concerns are being picked up earlier at the 13-15 month review.

Nationally, the pandemic has impacted on the mental health and wellbeing of children and young people, with the longer-term impacts still unknown.

Referrals to the School Nursing Service significantly increased by the fourth quarter of 2021/22 compared with the previous year. The majority of referrals were for mental health and wellbeing.

In Dumfries and Galloway we have taken an early intervention approach, using Scottish Government funding to provide low-level mental health supports. It is not clear what the longer-term position is with regard to funding.

Dumfries and Galloway have seen an unprecedented increase in referrals to CAMHS in 2021-22. This is the same picture across Scotland. As a consequence of this the number of cases open to the team has also increased with an average of 1036.

The information we have, presents a picture of poorer outcomes across a range of indicators for children with Additional Support Needs.

In 2021, 32% of primary, and 36% of secondary pupils had Additional Support Needs – a total of 6,289 children.

Additional support needs can vary greatly – some children may need little support from services and others may have complex needs requiring multi-agency planning.

The 3 most prevalent reasons for support in 2021-22 were:

- Other moderate learning difficulty
- Social, emotional and behavioural difficulty
- Other specific learning difficulty (e.g. numeric)

Children with ASN on average have lower attendance rates and higher exclusion rates than those without ASN.

Children with ASN have poorer achievement at both Curriculum for Excellence levels and at Senior Phase than those without ASN.

Children with ASN are less likely on average to enter a positive (initial) post-school destination than those without ASN.

In 2019, Children with ASN scored more poorly than their peers on a range of health and wellbeing factors including: mental health and wellbeing; physical activity; diet and bullying.

A total of 683 primary and secondary pupils were assessed or declared as disabled in 2021.

National research indicates that 1 in 5 LGBT+ neurodiverse individuals left school early due to homophobia, biphobia or transphobia.

In the 2021/22 academic year, a total of 4,405 children were in receipt of free school meals. This was 20.6% of all children of nursery and school age. As with children with ASN, children in receipt of free school meals are more likely to have poorer scores on a range of indicators in Health and Wellbeing Surveys.

In March 2022, Dumfries and Galloway Young Carers Centre were supporting 186 existing Young Carers, and 32 new Young Carers. There is anecdotal evidence to suggest that since the pandemic, more children and young people could be in caring roles, but this would require further investigation.

National research published this year by LGBT Youth Scotland found that the experiences of LGBTI young people across a range of factors have got worse over the last 15 years. 70% experienced bullying, only 10% rated their school experience as 'good' and only 28% of rural-based participants rated their area as a good place to be LGBTI.

5. Vulnerability factors: Children and Young People in need of care and/or protection

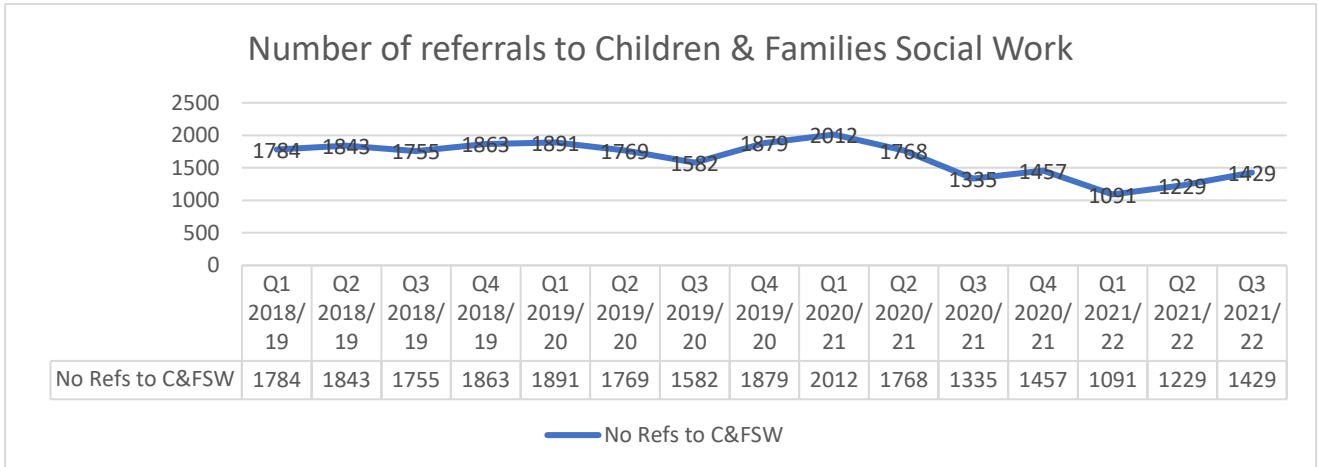
5.1 Introduction

The purpose of this chapter is to focus on children who are involved in child protection processes, those who are looked-after, and those who may be in conflict with the Law. Detailed reports on child protection and looked-after children are presented to the Public Protection Committee and the Corporate Parenting Group respectively. A selection of key data have been presented in this Needs Assessment, and further data is available in the 2022 Corporate Parenting Annual Report.

5.2 Child Protection

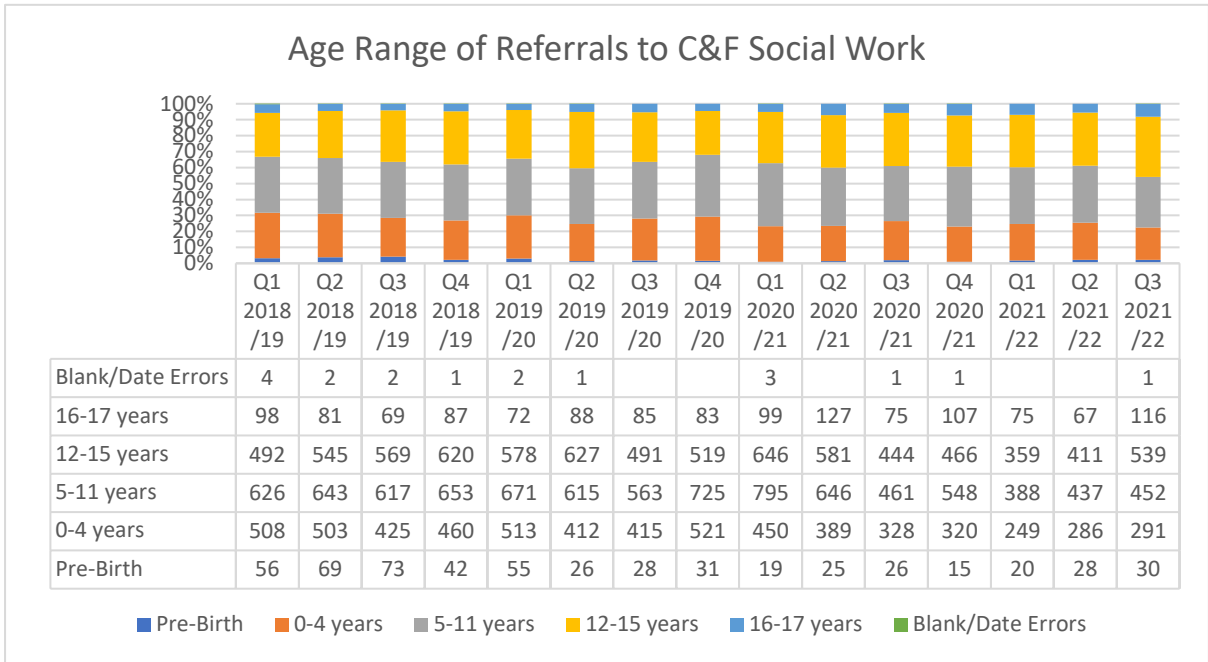
5.2.1 Number of referrals to Children and Families Social Work

Referrals to Children and Families Social Work have remained fairly stable over the reporting period. In March 2019 the Single Access Point (SAP) emerged as a change to the way in which we receive and deal with referrals at the front door, which provides consistency of screening. The lockdown periods where children were not being seen face to face by professionals from across the partnership did result in a reduction of referrals, however we are now seeing these rise, post pandemic and may continue to rise given current financial pressures on families.



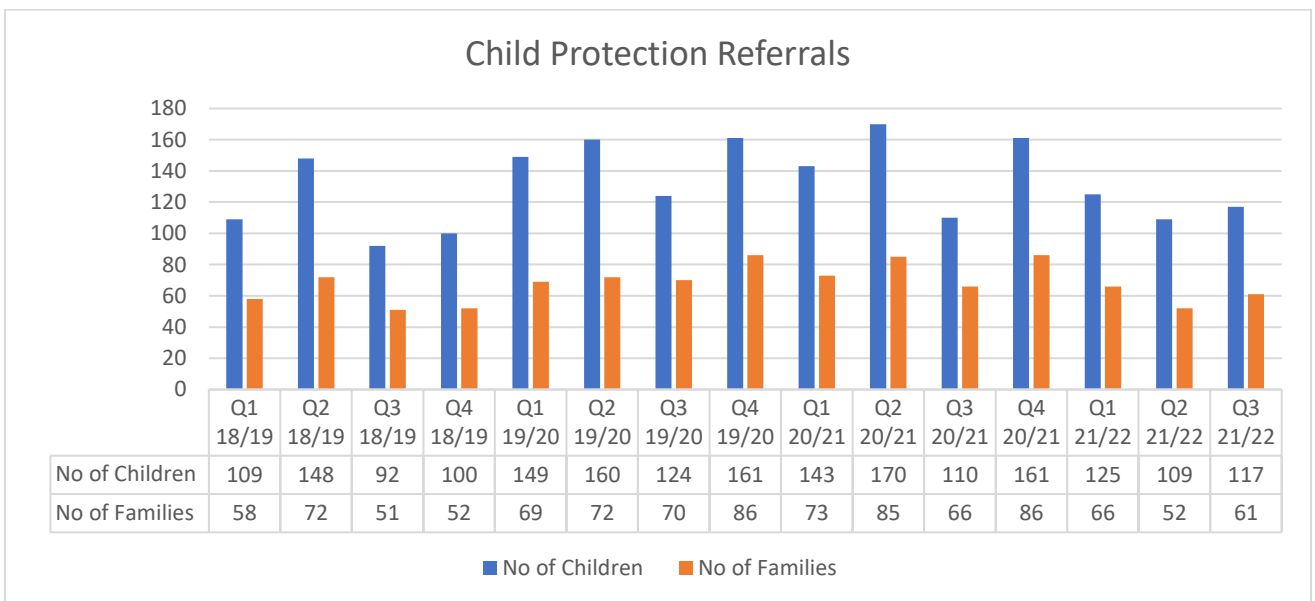
5.2.2 Age Ranges of Children & Families Social Work referrals

The age ranges of children being referred to Children and Families Social Work indicates that the largest majority are in the 5-11 years of age group however, the last reporting period noted an increase in the 12-15 years of age group with this being the highest.



5.2.3 Number of Child Protection referrals

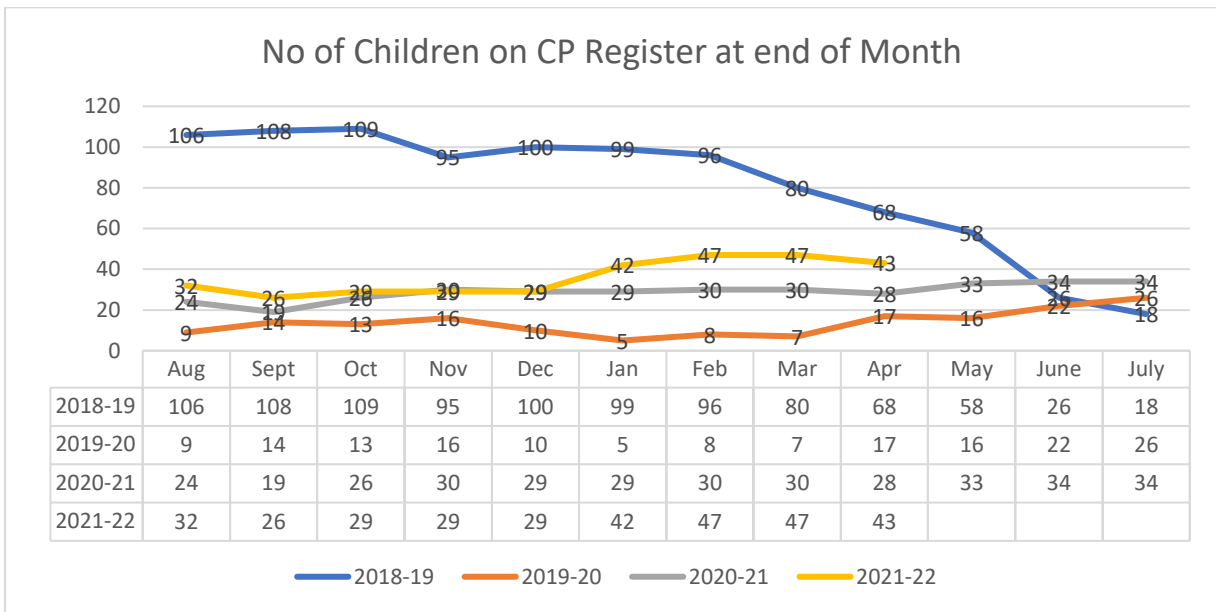
The number of child protection referrals over the last four years has fluctuated, and this is also reflected in our data from previous reporting. The ratio of children to families also fluctuates, depending on the size of the families referred.



5.2.4 Children on the Child Protection Register

This data provides information on the number of children on the Child Protection Register in Dumfries and Galloway at the end of each month since 2018. There has been a reduction in the number of children on the CP Register from the early part of 2019. From a period of high Registrations in 2018/19, which involved large family groups, this was followed by a high number of de-registrations as a result of work to address the risks being completed.

The reduction in Registrations was also influenced by the implementation of the Signs of Safety approach of working with children and families. Signs of Safety is based on building relationships with families, identifying strengths, what they do well and work together to address the concerns and help them and their network of support to be able to safeguard their children, so social work can safely withdraw from their involvement. Although numbers of children on the Child Protection Register dropped to very low levels, this has since stabilised, with Dumfries and Galloway registration numbers now aligning more with the National picture.



5.2.5 Concerns at Child Protection Registration

Concerns are identified for children at the time of Registration however, there can be more than one concern for each child. The highest concerns identified are around Domestic Abuse, Neglect, Parental Substance Misuse, Parental Mental Health Problems, Physical Abuse and Emotional Abuse. It should be noted that ‘emotional abuse’ is normally also present in most other types of concern and does feature as the highest number in most reporting periods.

Although Neglect levels seemed to fall in 2019-20/2020/21 periods, we believe this was due to the reduction of face-to-face contact with children and families to comply with the pandemic restrictions. This is starting to increase again in 2021/22 and may continue to rise in upcoming reporting periods with the cost-of-living crisis. We will continue to monitor this through our normal reporting systems.

There is now national work to look at the hidden harms of the pandemic and reduction of face-to-face activity. During the pandemic, the Scottish Government

recognised the role of universal services and issued guidance to protect this area of the workforce from being redeployed to try and mitigate for this.

5.2.6 Number of Re-Registrations within 24 Months of De-Registrations

In the last two reporting years we have seen no children re-registered within 24 months of de-registration, this reflects the change of approach with implementation of Signs of Safety. When we work in partnership with these families, ensuring that they have a safety plan to address concerns and keep children and young people safe which is supported by their network, and has been tested before withdrawal of social work services, we then do not see these children and families being brought back through child protection processes.

Key messages: Child Protection

The number of children on the Child Protection Register has decreased, from a peak in registrations in 2018/19.

The reduction was due to work being completed to address risks, resulting in de-registrations; and it was also influenced by the implementation of the strengths-based Signs of Safety approach of working with children and families.

When children are placed on the Register, there can be more than one concern for each child. The highest concerns identified are around Domestic Abuse, Neglect, Parental Substance Misuse, Parental Mental Health Problems, Physical Abuse and Emotional Abuse. 'Emotional abuse' is normally also present in most other types of concern and does feature as the highest number in most reporting periods.

In the last two reporting years we have seen no children re-registered within 24 months of de-registration, this reflects the change of approach with implementation of Signs of Safety.

5.2.7 Children affected by Domestic Abuse

At the time of writing (August 2022), Dumfriesshire and Stewartry Women's Aid are currently supporting in-service 65 women and 41 children. In April 2020 referrals to Women's Aid were reduced while in lockdown, which restricted the movement and ability to seek support and safety of women who were living with their abuser.

Children and young people's referrals reduced throughout the above captured period. Since schools returned, the service has seen an increase in children's referrals again.

5.2.8 Children affected by Substance Misuse

In late 2019 Dumfries and Galloway Alcohol and Drug Partnership commissioned a Needs Assessment of children and young people affected by their own, or others' substance use, and this was published in early 2022. This needs assessment made a number of recommendations for action, but noted "a lack of local data regarding children and young people affected by (their own or someone else's) substance use."

Dumfries and Galloway Needs Assessment of children and young people affected by (their own or someone else's) Substance use. Part 1 – The Report, Figure8 Consultancy Services 2021.

Parental substance misuse is one of the frequent concerns identified at the point where children are placed on the Child Protection Register.

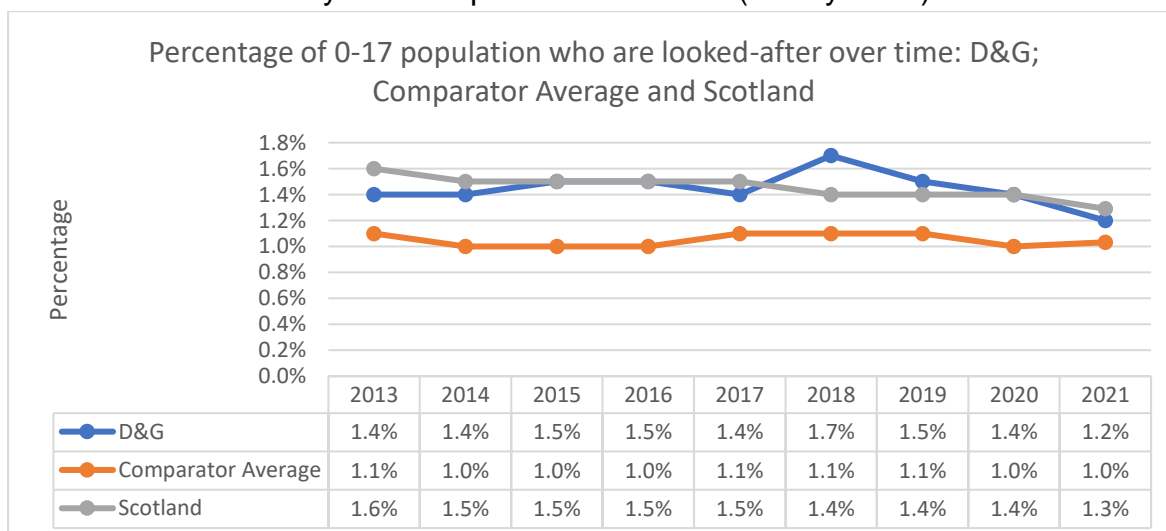
5.3 Looked-after children and young people

5.3.1 Percentage of our population looked-after over time, with comparators.

At the end of May 2022, there were 309 looked-after children and young people in Dumfries and Galloway. Numbers have fallen year on year since 2014 as shown below.

Numbers of looked-after children aged under 18 (0-17) on 31 July 2013 to 2019								
Local authority	Number on 31/07/14	Number on 31/07/15	Number on 31/07/16	Number on 31/07/17	Number on 31/07/18	Number on 31/07/19	Number on 31/07/20	Number on 31/07/21
Dumfries & Galloway	387	409	393	382	440	395	365	316

The following chart shows looked-after children and young people as a percentage of the population of children and young people aged from 0 to 17 in Dumfries and Galloway and comparator authorities (to July 2021).



Source Table 3.2 <https://www.gov.scot/publications/childrens-social-work-statistics-scotland-2020-21/documents/>

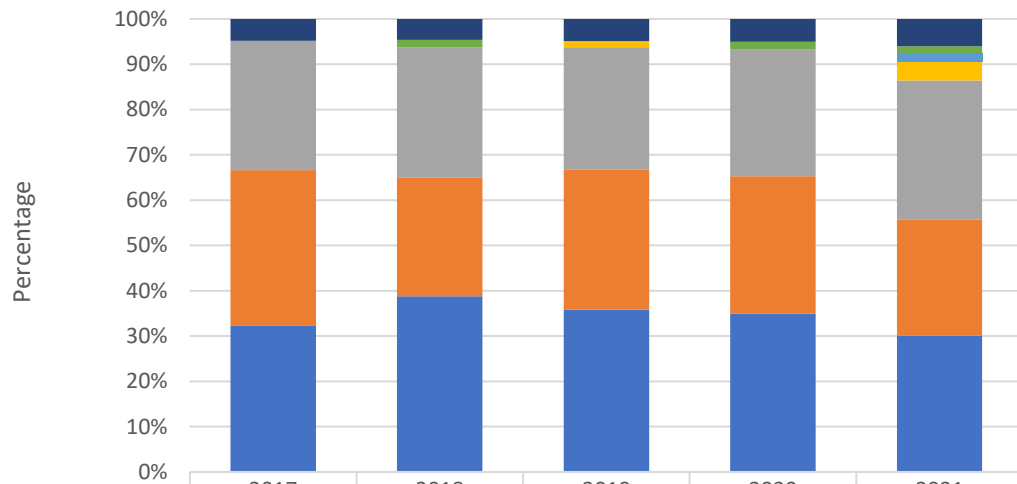
Population figures used for 2020-21 are the Mid-Year Estimates for 2020 from National Records Office [Mid-2020 Population Estimates Scotland | National Records of Scotland \(nrsotland.gov.uk\)](https://nrsotland.gov.uk)

The chart above shows the percentage of the population aged 0-17 who were looked-after on 31 July each year in Dumfries and Galloway between 2013 and 2021. On 31 July 2018, the number of looked-after children in Dumfries and Galloway had reached a particularly high point of 440, hence the increased figure of 1.7% on this date. However, from 2020, the number declined and the percentage of our under-18 population who are looked after has fallen again, down to 1.2% in July 2021. Our rate is still slightly higher than our comparator average, but has fallen below the national rate.

5.3.2 Looked-after children by placement type

Historically, Dumfries and Galloway has had a high proportion of children looked-after at home compared with similar authorities (Angus, Argyll and Bute, Highland, Moray, Scottish Borders) and with Scotland as a whole; and a significantly lower proportion of children in Foster Care. However, the percentage of children with foster carers either provided by, or purchased by the local authority, increased in 2021, and the percentage who were looked-after with friends/relatives, or at home with parents decreased. July 2021 was the first snapshot date since 2017, on which the percentage of children at home with parents had fallen (very slightly) below the percentage in foster care.

Looked-after children in Dumfries and Galloway - by type of accommodation 2017-2021



	2017	2018	2019	2020	2021
■ In other residential care (4)	4.7%	4.5%	4.8%	4.9%	6.0%
■ In other local authority home/ Voluntary Home		1.6%		1.6%	1.6%
■ In other community (3)					1.9%
■ With foster carres purchased by LA			1.3%		4.1%
■ With foster carers provided by LA	28.0%	28.4%	26.6%	27.4%	30.7%
■ With friends/relatives	33.5%	25.7%	30.4%	29.6%	25.6%
■ At home with parents	31.7%	38.2%	35.2%	34.2%	30.1%

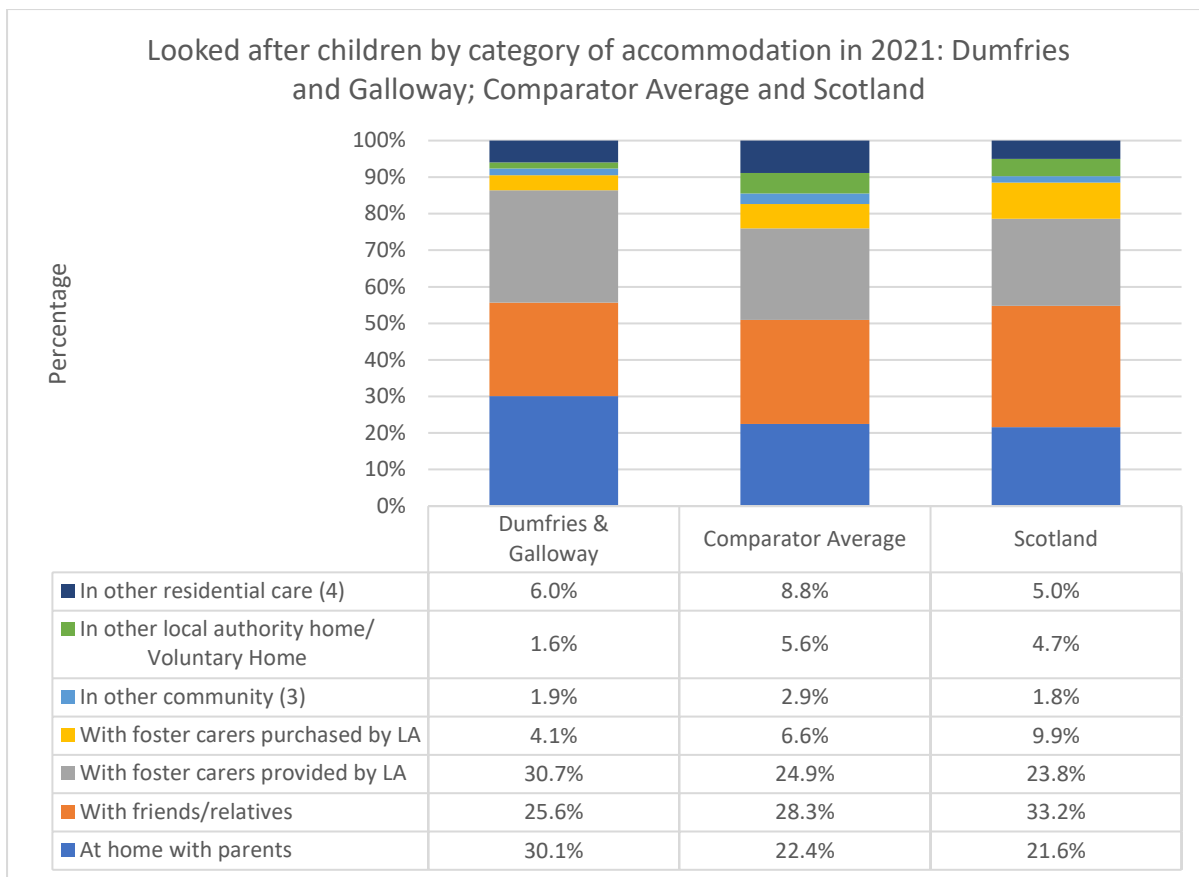
[1] Table excludes children who are on a planned series of short term placements.

[2] Cells containing * represent numbers that have been suppressed to maintain confidentiality.

[3] In other community includes with prospective adopters.

[4] Other Residential Care includes crisis care, secure accommodation and residential school.

<http://www.gov.scot/Topics/Statistics/Browse/Children/PubChildrenSocialWork>



<http://www.gov.scot/Topics/Statistics/Browse/Children/PubChildrenSocialWork>

While our percentage of children looked-after at home with parents has fallen, it continues to be higher than our comparator average, and the national rate. Our comparators, and the country as a whole, had a higher rate of children living with friends/relatives and a lower proportion of children with foster carers provided by local authorities.

5.3.3 Attendance rates for looked-after children

It should be noted that the information below for 2021/22 is being compared to previous years prior to COVID 19 and also the years that were affected by the pandemic resulting in a shorter school year based on school closure periods and blended learning.

Primary pupil attendance for 2021/22 is showing a fall in value of 3.8% for all pupils compared to the previous year. The overall authority average is 92.1% with individual school values ranging between 44.9% and 97.3%. The authorised absence value is 6.1%, unauthorised absence 1.8% and exclusions 0.01%.

Looked after Children who are looked after at home have a lower average attendance value of **89.8%** compared to children who are looked after away from home, average value of **91.6%**. A point noted when looking at the data was that

children with Previous Looked-after Status show lower attendance of **89.5%**.

The tables below (taken from the Education Quality Assurance and Improvement **Attendance and Exclusion end of year 2021/2022 report** published July 2022) show a breakdown of primary attendance by looked-after status; and also by other factors such as Gender, receipt of Free School Meals, and Additional Support Needs.

Gender	2017/18	2018/19	2019/20	2020/21	2021/22	LAC	2017/18	2018/19	2019/20	2020/21	2021/22
Female average	95.0%	95.2%	94.4%	96.1%	92.2%	LAC average	95.0%	94.8%	92.9%	93.7%	89.7%
Male average	94.7%	95.0%	94.0%	95.7%	92.0%	Not LAC average	94.9%	95.1%	94.2%	96.0%	92.2%
Overall average	94.9%	95.1%	94.2%	95.9%	92.1%	Overall average	94.9%	95.1%	94.2%	95.9%	92.1%

FSM	2017/18	2018/19	2019/20	2020/21	2021/22	ASN	2017/18	2018/19	2019/20	2020/21	2021/22
FSM average	92.5%	92.5%	94.4%	93.2%	88.6%	ASN average	93.4%	93.7%	92.8%	94.6%	90.1%
Not FSM average	95.3%	95.6%	94.0%	96.7%	93.2%	Not ASN average	95.6%	95.8%	94.8%	96.5%	93.1%
Overall average	94.9%	95.1%	94.2%	95.9%	92.1%	Overall average	94.9%	95.1%	94.2%	95.9%	92.1%

Secondary school attendance for 2021/22 for all pupils is showing a fall in value of 4.8% compared to the previous year. The overall authority average is 88% with individual school values ranging between 80.4% and 91.8%. Authorised absence value is 7.6%, unauthorised absence 4.3% and exclusions 0.06%.

Looked after Children who are looked after at home have a lower average attendance value of **70.5%** compared to children who are looked after away from home, average value of **84.6%**. Pupils of Previously Looked-After status have average value of **81.8%**.

The table below shows breakdown of secondary attendance by looked-after status; and also by other factors such as Gender, receipt of Free School Meals, and Additional Support Needs.

Gender	2017/18	2018/19	2019/20	2020/21	2021/22	LAC	2017/18	2018/19	2019/20	2020/21	2021/22
Female average	90.6%	91.2%	90.3%	92.7%	87.5%	LAC average	85.5%	85.1%	83.3%	87.5%	81.8%
Male average	91.6%	92.1%	90.7%	92.9%	88.5%	Not LAC average	91.3%	91.8%	90.8%	92.9%	88.3%
Overall average	91.1%	91.7%	90.5%	92.8%	88.0%	Overall average	91.1%	91.7%	90.5%	92.8%	88.0%

FSM	2017/18	2018/19	2019/20	2020/21	2021/22	ASN	2017/18	2018/19	2019/20	2020/21	2021/22
FSM average	85.7%	85.7%	83.8%	87.2%	80.0%	ASN average	88.1%	88.9%	87.4%	90.5%	84.8%
Not FSM average	91.9%	92.5%	91.8%	93.9%	89.9%	Not ASN average	92.7%	93.0%	92.2%	93.9%	89.8%
Overall average	91.1%	91.7%	90.5%	92.8%	88.0%	Overall average	91.1%	91.7%	90.5%	92.8%	88.0%

5.3.4 Exclusion rates for looked-after children

The **Primary pupil exclusion** rate for 2021/22 is showing an increased value of 4.37 per thousand pupils overall on the previous year and now sits at 7.93 incidents per thousand pupils.

In April 2018, the authority introduced a zero target for looked after pupil exclusions and it is still yet to meet that target. We are sitting at 6.37 per thousand for looked-after children in primary schools which equates to 1 separate incident of exclusion. It was highlighted when reporting this information that previously looked-after pupils had 9 incidents of exclusion recorded (children who may have had looked-after status within the time period).

The table below shows primary school exclusions in Dumfries and Galloway, with figures by Gender, children in receipt of Free School Meals, and children with Additional Support Needs as well as those for looked-after children.

Gender	2017/18	2018/19	2019/20	2020/21	2021/22	LAC	2017/18	2018/19	2019/20	2020/21	2021/22
Female average	4.05	1.35	0.96	0.96	2.02	LAC average	127	20.77	14.41	24.32	6.37
Male average	27.56	16.75	9.33	6.05	13.60	Not LAC average	12.93	8.81	4.93	2.90	7.95
Overall average	15.62	9.2	5.24	3.56	7.93	Overall average	15.62	9.2	5.24	3.56	7.93

FSM	2017/18	2018/19	2019/20	2020/21	2021/22	ASN	2017/18	2018/19	2019/20	2020/21	2021/22
FSM average	42.78	17.06	12.16	10.24	22.12	ASN average	42.1	25.3	14.53	10.61	19.81
Not FSM average	10.03	7.62	3.34	1.47	3.06	Not ASN average	2.44	1.41	0.96	0.27	0.87
Overall average	15.62	9.2	5.24	3.56	7.93	Overall average	15.62	9.2	5.24	3.56	7.93

Exclusions by number of incidents is shown below to support the rate per thousand information.

Gender	2017/18	2018/19	2019/20	2020/21	2021/22	LAC	2017/18	2018/19	2019/20	2020/21	2021/22
Female average	22	7	5	5	10	LAC average	32	7	5	8	1
Male average	145	90	51	33	70	Not LAC average	135	90	51	30	79
Overall average	167	97	56	38	80	Overall average	167	97	56	38	80

FSM	2017/18	2018/19	2019/20	2020/21	2021/22	ASN	2017/18	2018/19	2019/20	2020/21	2021/22
FSM average	72	30	28	26	57	ASN average	149	87	49	36	64
Not FSM average	95	67	28	12	23	Not ASN average	18	10	7	2	6
Overall average	167	97	56	38	80	Overall average	167	97	56	38	80

The Secondary pupil exclusion rate for 2021/22 is showing an increased value of 38.3. In April 2018, the authority introduced a zero target for looked after pupil exclusions and although the LAC average exclusion value has greatly reduced on the previous years, it is still yet to meet that target.

The table below shows secondary exclusion rates in Dumfries and Galloway, as rates per 1000, with figures by Gender, children in receipt of Free School Meals, and children with Additional Support Needs as well as those for looked-after children.

Gender	2017/18	2018/19	2019/20	2020/21	2021/22	LAC	2017/18	2018/19	2019/20	2020/21	2021/22
Female average	24.0	22.0	17.8	17.4	20.4	LAC average	370.1	374.1	155.1	95.4	190.5
Male average	56.4	57.5	48.2	48.1	56.2	Not LAC average	34.0	34.2	28.6	30.1	35.6
Overall average	40.4	39.7	33.0	32.6	38.3	Overall average	40.4	39.7	33.0	32.6	38.3

FSM	2017/18	2018/19	2019/20	2020/21	2021/22	ASN	2017/18	2018/19	2019/20	2020/21	2021/22
FSM average	93.4	115.0	85.4	74.4	91.6	ASN average	82.2	91.8	67.5	62.1	74.5
Not FSM average	32.7	31.0	22.6	23.3	27.2	Not ASN average	19.2	14.7	14.3	16.6	18.2
Overall average	40.4	39.7	33.0	32.6	38.3	Overall average	40.4	39.7	33.0	32.6	38.3

Exclusions by number of incidents is shown below to support the rate per thousand information.

Gender	2017/18	2018/19	2019/20	2020/21	2021/22	LAC	2017/18	2018/19	2019/20	2020/21	2021/22
Female average	97	94	77	70	88	LAC average	57	52	47	29	28
Male average	233	245	209	190	241	Not LAC average	273	287	239	231	301
Overall average	330	339	286	260	329	Overall average	330	339	286	260	329

FSM	2017/18	2018/19	2019/20	2020/21	2021/22	ASN	2017/18	2018/19	2019/20	2020/21	2021/22
FSM average	96	126	123	108	135	ASN average	225	254	206	174	228
Not FSM average	234	231	163	152	194	Not ASN average	105	85	80	86	101
Overall average	330	339	286	260	329	Overall average	330	339	286	260	329

5.3.5 Looked-after children's attainment – literacy and numeracy

Achievement of a Level - Teacher Judgement Survey – December 2021

The Scottish Government requested Curriculum for Excellence teacher judgements to be recorded and collected at individual pupil level, for all pupils in the stages of P1, P4 and P7. It is now well documented that there was no Achievement of Curriculum for Excellence Levels (ACEL) data collected in 2019/20 so comparison on this previous year cannot be made at this point and there is no secondary S3 data for either last year or for this most recent collection.

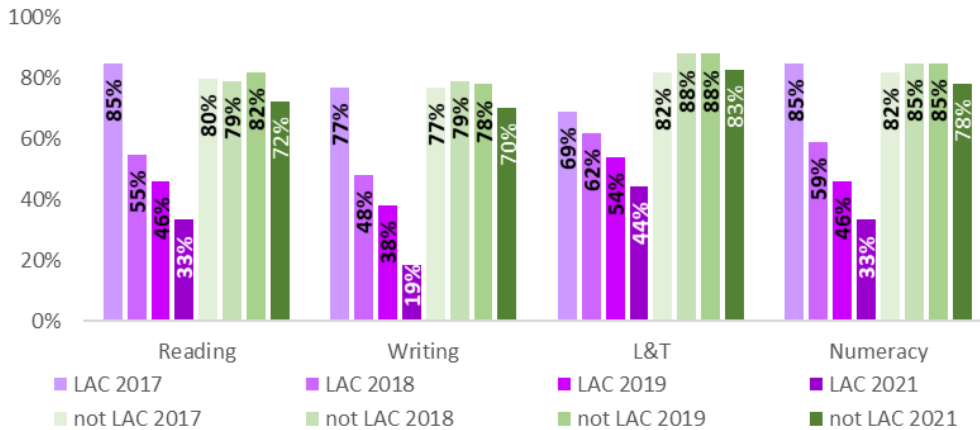
Background

All schools in Dumfries and Galloway reported levels achieved in literacy - (reading, writing, listening and talking) and in Numeracy for pupils in P1, P4 and P7. Expected levels of achievement are Early level (P1), First level (P4) and Second level (P7). This information was reported for individual pupils at each stage. Data reported was the most recent CfE level achieved at June 2021.

Key Messages from Analysed Data for looked-after children in 2021

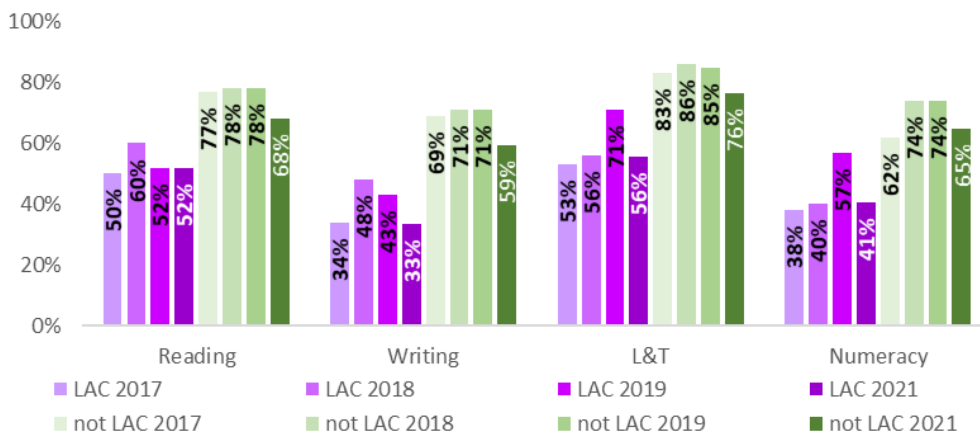
In P1, performance of Looked after Children at early level was considerably lower than that of non-looked-after achievement in all areas, especially in writing at 19%. However in considering looked after data, it is important to note that numbers do fluctuate and actual numbers at this level may be low. Data therefore should be considered in this context.

Percentage of P1 pupils achieving CfE Early Level by LAC 2017 -2019 and 2021, Dumfries and Galloway



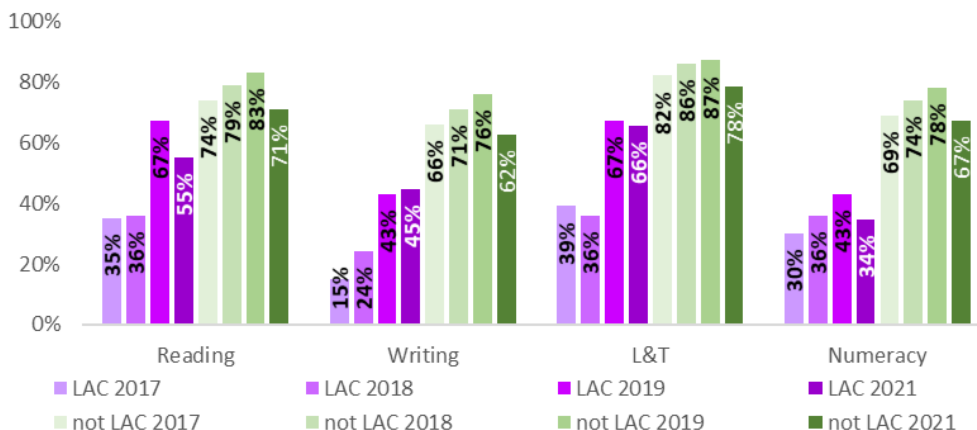
In P4, performance of Looked after Children at first level was considerably lower than that of non-looked-after children’s achievement in all areas. Fewer than 50% achieved expected levels in writing and numeracy with reading being the only element of literacy not showing a dip on the previous recording.

Percentage of P4 pupils achieving CfE First Level by LAC 2017 -2019 and 2021, Dumfries and Galloway



In 2021, performance of Looked after Children at second level was considerably lower than that of non looked-after children’s achievement in all areas. Fewer than 50% achieved expected levels in writing and numeracy although writing has shown a slight increase on previous recorded value in 2019.

Percentage of P7 pupils achieving CfE Second Level by LAC 2017 - 2019 and 2021, Dumfries and Galloway



5.3.6 Looked-after children's attainment – senior phase

Insight allows schools to compare their performance to the performance of a **virtual comparator**, made up of pupils from schools in other local authorities who have similar key demographic characteristics (gender, deprivation, additional support needs and stage of leaving / latest stage) to the pupils in each school. Each pupil within the cohort is matched to 10 virtual comparator pupils; the average attainment of a cohort can therefore be compared to the average attainment of a cohort 10 times the size. The virtual comparator is used in the following charts for benchmarking purposes, but the following INSIGHT statement should be considered alongside the charted information.

INSIGHT STATEMENT

The time period covered by these statistics means that the results will be affected by the coronavirus (COVID-19) pandemic. In particular, the **cancellation of exams and external assessment of coursework**

in 2020, and the use of the Alternative Certification Model in 2021, will have affected the attainment of many 2020/21 school leavers. It is also likely that the pandemic will have continued to affect the destination choices made by, and opportunities available to, some school leavers in 2020/21.

The impacts of these different approaches to certification upon school leaver attainment means that care should be taken when making comparisons over time. The attainment data provides an accurate reflection of the attainment with which school leavers in Scotland left school; for this reason attainment data for 2020/21, 2019/20 and previous years are presented together.

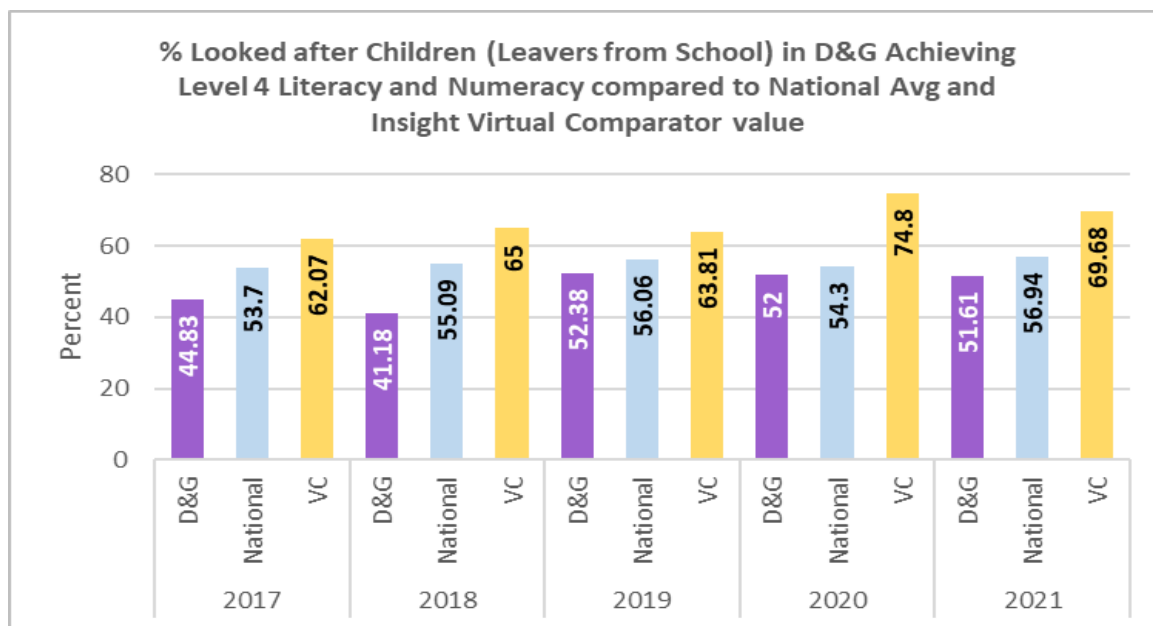
In addition to this, levels of attainment by 2020/21 school leavers are also likely to have been affected by any changes to pupils' decisions on staying on at school related to the pandemic

Care must therefore be taken when comparing the attainment of 2020/21 school leavers with that of 2019/20 school leavers and when comparing these years to the attainment of earlier school leaver cohorts. Any changes between the attainment levels of the 2020/21 cohort, the 2019/20 cohort and those of previous years should not be seen as an indication that performance has improved or worsened, without further evidence.

Literacy and numeracy at the point of leaving school

Literacy and Numeracy within the Insight dashboard is a benchmarking measure that is based upon the outcomes and assessment standards for SQA's literacy and numeracy units.

The chart shows the looked-after leavers in Dumfries and Galloway achieving both literacy and numeracy at level 4 or better has remained at a similar value over the last 3 years and is yet to meet national and Virtual Comparator targets for looked-after in this measure.



Source: Insight, SG Benchmarking tool.

Proportion of school leavers looked after at the time of Pupil Census by their highest level of attainment, 2020/21

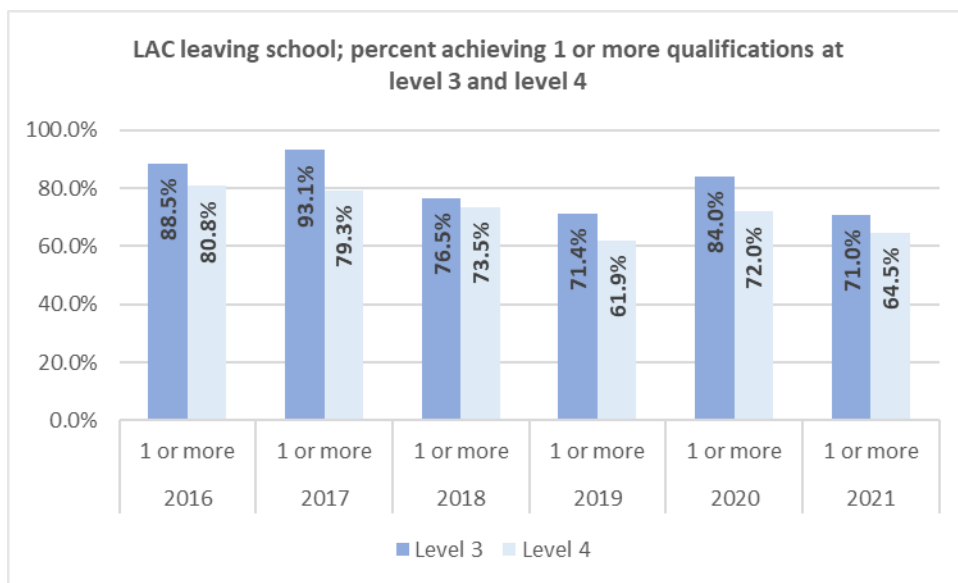
Proportion of school leavers looked after in Dumfries and Galloway by their highest level of attainment, 2014/15 to 2020/21; taken from Insight Benchmarking Tool (looked-after status at time of Pupil Census). As the table shows, the percentage of looked-after pupils leaving school in 2020/21 with level 3 and 4 awards is less positive than the previous year.

Dumfries and Galloway	Number of LAC in Leaver Cohort	% with 1 or more qualification at SCQF level 3	% with 1 or more qualification at SCQF level 4
2014/15	27	81.5%	70.4%
2015-16	26	88.5%	80.8%
2016-17	29	93.1%	79.3%
2017-18	34	76.5%	73.5%

2018/19	21	71.4%	61.9%
2019/20	25	84.0%	72.0%
2020/21	31	70.97%	64.52%

Source: Insight, SG Benchmarking tool.

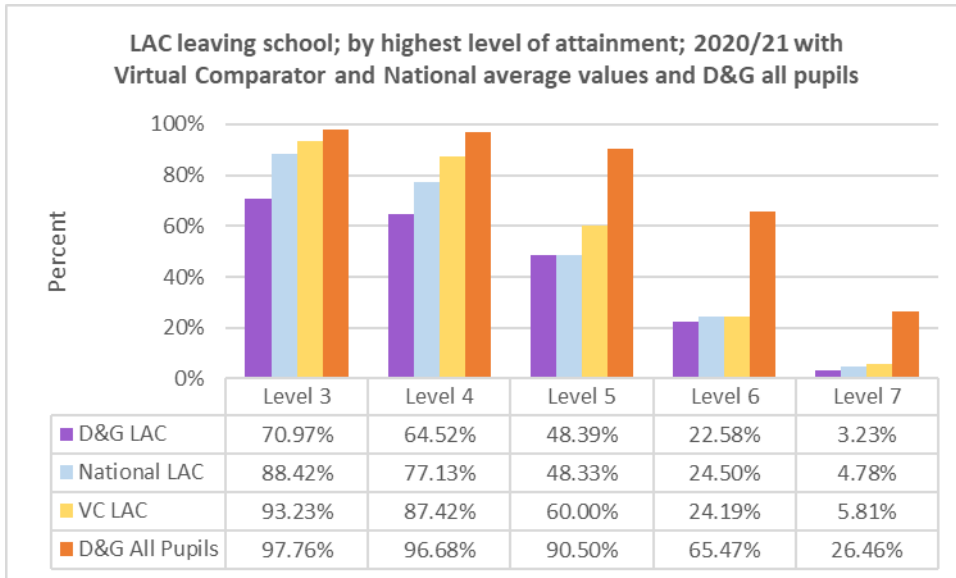
The chart below showing the data from the above table demonstrates the Improvement last year on the decline in the previous 2 years and the backward step in the most current year. It should be noted that this data is from Insight Benchmarking Tool which matches pupil data from SQA to those pupils marked as looked-after at time of pupil census in September each year.



Source: Insight, SG Benchmarking tool.

Proportion of school leavers looked after at the time of Pupil Census in D&G and comparators by their highest level of attainment, 2020/21

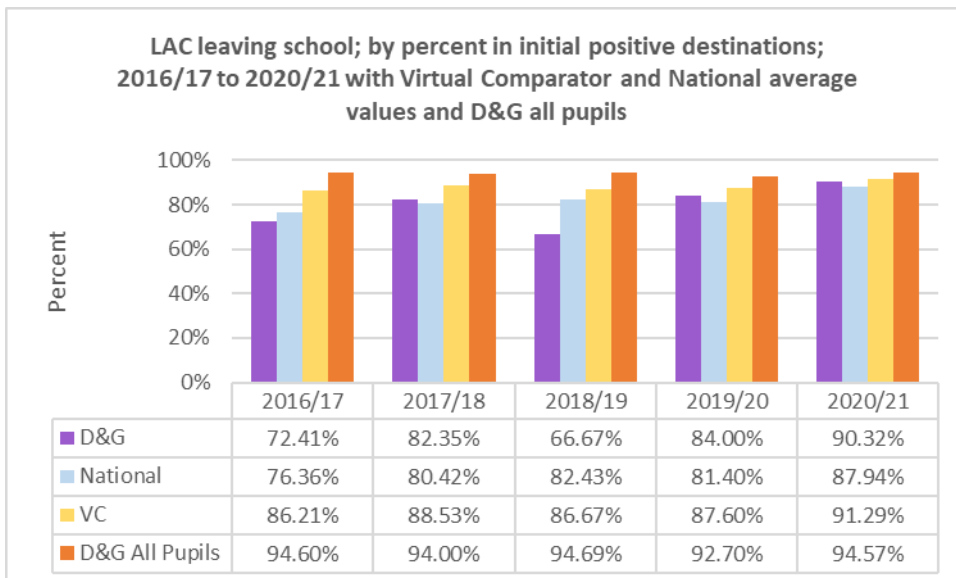
The following chart shows how Dumfries and Galloway compares with Virtual Comparator and national average values for the proportion of looked-after school leavers by their highest level of attainment in 2020/21. The chart shows the percentage of looked-after leaving school with at least 1 qualification at the levels 3 to 7, with 3 and 4 being internally assessed qualifications and 5 to 7 exam assessed (in normal circumstances) in order, National 5, Higher and Advanced Higher. Dumfries and Galloway values for all leavers in 2020/21 has also been added to the chart for comparison.



Source: Insight, SG Benchmarking tool.

5.3.7 Percentage of looked-after school leavers in a positive destination approximately 3 months after leaving school.

The following chart shows how Dumfries and Galloway compares with all pupils in Dumfries and Galloway, Virtual Comparator and national average values for the proportion of looked-after school leavers by those entering positive destinations. The stretch aim for positive destinations is 95%. Dumfries and Galloway pupils overall have come close to this value this year and looked-after pupils in Dumfries and Galloway are showing a greater improvement in reaching that target.



Source: Insight, SG Benchmarking tool.

The following table shows a breakdown of the main destinations over 3 years for looked-after leavers in Dumfries and Galloway, Virtual Comparator, the South West Collaborative average and national average for comparison. The most recent year shows that the majority of looked-after leavers in Dumfries and Galloway go to

Further Education followed by employment. A similar pattern is shown for comparators and also over the 3 years shown.

Establishment	Year	% Employed	% Further Education	% Higher Education	% Not known	% Training	% Unemployed Not Seeking	% Unemployed Seeking
Dumfries & Galloway	2020/21	29.0	41.9	6.5		9.7	3.2	6.5
Virtual Comparator	2020/21	28.1	38.1	12.6	0.3	10.7	4.5	3.9
South West Collaborative	2020/21	13.5	58.8	8.1		10.8	1.4	6.8
National Avg	2020/21	13.3	47.2	10.4	0.6	13.8	4.1	7.4
Dumfries & Galloway	2019/20	20.0	52.0	8.0		4.0	8.0	8.0
Virtual Comparator	2019/20	18.4	44.4	15.2	1.2	12.0	2.4	6.0
South West Collaborative	2019/20	9.6	51.9	8.2		17.0	5.2	8.2
National Avg	2019/20	8.7	49.4	7.9	1.2	13.0	8.5	8.9
Dumfries & Galloway	2018/19	14.3	28.6	4.8		19.1	9.5	23.8
Virtual Comparator	2018/19	23.3	41.4	11.4	1.4	11.0	5.2	5.2
South West Collaborative	2018/19	10.3	44.1	4.4	0.7	16.9	5.2	17.7
National Avg	2018/19	15.4	43.7	6.6	0.8	12.9	6.1	10.7

Source: Insight, SG Benchmarking tool.

In comparison to Dumfries and Galloway Destinations for all leavers in the table below for 2020/21, the majority leave to Higher Education.

2020/21	% Employed	% Further Education	% Higher Education	% Not known	% Training	% Unemployed Not Seeking	% Unemployed Seeking
Dumfries & Galloway All Pupils	28.63	24.02	38.6	0.14	2.37	1.56	3.73

Source: Insight, SG Benchmarking tool.

5.3.8 Percentage of looked-after pupils leaving school by stage, compared with non-looked-after pupils

This is not data that is routinely reported and we do not have comparator or national data to compare with it. The figures below show the percentage of looked-after and non-looked-after pupils leaving at each stage. **However**, these data should be treated as approximations: they are based on a manual count from technical files, and involve small numbers, and must be viewed with caution.

	Looked-after pupils % of leavers			Not looked-after pupils % of leavers		
	S4	S5	S6	S4	S5	S6
2021	33%	64%	71%	13%	31%	98%

5.3.9 Looked-after children’s health assessments

The Scottish Government produced guidance on health assessments for looked after children in May 2014. The standard stated that all children who become looked after will be provided with a health assessment within 4 weeks of notification.

The LAC Specialist Health Team are responsible for overseeing all of the health assessments for looked after children in Dumfries and Galloway. The team undertakes all new health assessments for children and young people in foster care and residential care. The health visiting and school nursing teams continue to undertake the health assessments for children looked after at home with their parents, or in kinship care. CEL 16 is the name given to the health assessment.

LAC Health Assessments in Dumfries and Galloway, January 2021 to December 2021			
Total referrals to CEL16	Total completed	Completed within 28 days	% Completed within 28 days
97	90*	69	71%

*

4 remained outstanding , 3 referrals did not proceed as the children were either returned home or moved out of region before the assessments could be completed.

71% represents an 8% decrease from 2020

The LAC Health Team still continues to experience a large 'Did Not Attend' DNA rate for new assessments however this has reduced from 20% to 14%. This has been a focus for improvement in 2021. The team continues to experience a 20% DNA rate for return appointments.

5.3.10 Number of Homeless presentations from people who had previously been looked-after.

Year	Number of homeless applications from applicants who were LAC within last 5 years
2014-15	34
2015-16	26
2016-17	36
2017-18	16
2018-19	20
2019-20	20
2020-21	28
2021-22	27

Source: Homelessness Service. Children's Services Plan Indicator P3C1M1NS_PI01

5.3.11 Children from other authorities in placements in Dumfries and Galloway.

Children from other authorities may be placed in Dumfries and Galloway in residential placements, foster placements (including with potential adopters) or kinship care.

A Residential Placements Database is kept by Social Work, and this contains details of the number of children from other authorities. However, we are dependent on other authorities to keep us regularly informed of when children from their authority move to/from Dumfries and Galloway. We have data from Education, on the number of school-age children from other authorities who are pupils in Dumfries and Galloway schools.

Figures from the Residential Placements Database indicate that we currently have 120 children from other authorities in Dumfries and Galloway. Of these

- 54 children are in residential placements

- 66 children are in Fostering/Adoption/Kinship placements.

Figures from Education show that there were 46 children from other authorities in Dumfries and Galloway schools in 2021/22. The number of inter-authority placements has been stable since 2019.

Children from other authorities in schools in Dumfries and Galloway			
	2019/20	2020/21	2021/22
Primary	27	29	25
Secondary	18	16	23
Total	45	45	46

5.3.12 Findings from Bright Spots

Dumfries and Galloway was one of only three local authorities in Scotland selected by Centre of Excellence for Children’s Care and Protection (CELCIS) to take part in a pilot of [Bright Spots](#) in Scotland.

Bright Spots is a programme that supports local authorities to listen to our children in care, and care leavers, about the things that are important to them. The focus is on what our children and young people say about their lives and what is important to them, together with ensuring that their views and experiences influence our service development.

Bright Spots focuses on the subjective wellbeing of young people and looked after children by using a survey focusing on young people telling us how they feel about their experiences. First originating in England and Wales, the survey was developed from literature reviews, roundtable discussions with professionals and from focus groups and individual interviews with 140 children and young people in care living in nine different local authorities.

There are 4 surveys in total which cover all age ranges of children from 4 years to young adults including children and young people who are looked after at home and are in kinship care. We ran two surveys over January to March 2022 to capture the views of our children and young people aged 4 to 25 years of age – ***Are they happy, safe and feel they are doing well?***

We were keen for as many of our children and young people to participate in this survey and for that, we used a ‘trusted adult’ model to help and support young people to complete the surveys where a professional known to the young person presents the survey to them, tells them what it’s about and gives them support to complete the survey if they so wish – colleagues across Dumfries and Galloway Council and our multi agency partners have been identified as Trusted Adults including youth workers, social work assistants, family support workers, education and health colleagues. The role of the ‘trusted adult’ to support completion of the surveys was an important element for safeguarding the child completing it. We had notably high rates of children and young people participating in the surveys.

Wellbeing surveys about how children feel about their experience as a looked after child are an important first element of the programme – but critically the next part of our programme will focus not just the findings, but what the corporate parenting partnership do about the findings. How will Dumfries and Galloway corporate parents respond to them and address the issues that are highlighted?

A summary of key findings from the surveys is given below, but reports with further details are available in the Appendices.

Our Life, Our Care – Key Findings

Relationships

Children and young people's responses on family time illustrated the complexity of family situations, such as time being spent with some family members and not others; five young people answered that one of their parents had passed away and that they were not seeing the other parent. 89% indicating that they were able to see their brothers and sisters; 76% of children were seeing their mother; 50% seeing their father; with 59% felt they were seeing their mother 'just right' and 30% felt they were seeing their father for the right amount of time

- 94% stated that they had at least one good friend, with **all** 8–11-year-olds felt that they had a good friend
- 76% lived in a household with a pet, higher than in the general population
- Over 50% of 11–18-year-olds had moved to live with different carers less than 3 times with 27% reporting no moves. 17% of our young people (11-18-year-old) reported 4 or more moves
- 97% reported that they trusted the adults they live with, with **all** 4–7-year-olds trusted their carers/parents
- 32% have had the same social worker in the last 12 months, with 39% stating that they had two social workers; and 24% had over three social workers in last 12 months
- The level of trust in social workers was high, but decreased with age of children and young people – 91% of 4–7-year-olds; 89% of 8–11-year-olds; 80% of 11–18-year-old

Resilience

- 76% felt that their lives were improving
- 93% 8–11-year-olds and 86% of 11-18-year-olds stated that they had a trusted adult in their live
- 78% of 8–11-year-olds stated that they sometimes get the chance to help the teacher
- 46% of 8–11-year-olds thought they were given opportunities to show they could be trusted
- 68% of 4–7-year-olds; 38% of 8-11-year-olds; 16% of 11-18-year-olds reporting they liked school
- 88% of 8-11-year-olds and 93% of 11-18-year-olds recorded that the adults they live with showed an interest in their education either 'all/most/ or sometimes.
- 12% recorded that they never or hardly ever took part in hobbies or activities outside of school / had fun

- 88% 8–11-year-olds and 93% 11–18-year-olds stated that they had spent time outdoors at least once that week
- 80% of children and young people answered that they were taught independence skills all/most/sometimes
- 100% of children and young people between 11-18-year-olds have access to the internet where they live

Rights

- 74% of 8-11-years-olds and 80% of 11-18-year-olds felt listened to when decisions were made
- 20% responded that adults did things that made them feel embarrassed about being in care
- 94% indicated that they 'always' felt safe where they lived
- 48% of 8–11-year-olds reported that they were afraid of going to school because of bullying, with 75% reporting that they felt they were getting help when bullied
- 24% of 11–18-year-olds reported that they were afraid of going to school because of bullying, with 69% reporting that they felt they were getting help when bullied
- 70% know who their social worker is, with 67% 8–11-year-olds and 87% 11–18-year-olds knowing that they could ask to speak to their social worker on their own

Recovery

Having a coherent account of one's history and understanding the reasons that led to being in care are important in the development of an integrated identity and in recovery from abuse and neglect - Less than a quarter of our younger children (4-7-year-olds) answered that an adult had explained why they were in care, the proportion increased with age – with 67% of 8-11-year-olds and 94% of the 11-18-year-olds answered an adult had explained why they were in care

- 98% of 4–7-year-olds and 79% of 8-11-year-olds always felt settled where they lived with 34% of our 11-18-year-olds sometimes felt settled where they live
- Children and young people reflected that their own bedrooms were a place for being on your own in busy homes. It is linked to safety, sense of identity and feeling a sense of belonging - 93% (4-7yrs); 88% (8-11yrs); 90% (11-18yrs) liked their bedroom
- 88% (4-7yrs); 86% (8-11yrs); 90% (11-19yrs) thought their carers noticed how they were feeling all/most or sometimes
- 56% talked regularly with their carers or parents about things that mattered to them
- Studies of populations of children in care show that children's level of difficulties are much higher in mental health – 56% (8-11yrs); 49% (11-18yrs); worried about their feelings and behaviour with 58% of our young people thought they were getting help
- 79% reported that all/most or sometimes they did similar things as their friends
- Studies show that poor body image is associated with low self-esteem, depression and self-harm with 14% of 10–17-year-olds in the general UK

population unhappy with their appearance. 45% of our children and young people in care were not happy with their appearance

Wellbeing

Over three quarters of children and young people ages 4-11- years old had been happy the previous day; with our older children and young people 11-18- years old less happy than the younger groups

- 57% of our children and young people were satisfied with their life however 14% had low satisfaction levels
- Have a meaning or purpose to life is strongly associated with wellbeing – 94% of our children and young people feel the things they do in life are worthwhile
- 72% of our children and young people were positive about their future

Our Life, Beyond Care – Key Findings

People in Your Life

The availability of one key adult has been shown to be the turning point in the lives of many young people in care, 94% of our care leavers have one or more person who gives them support, over 50% stated that this was their leaving care worker

- 79% had a trusted person in their lives
- 91% stated that they had a really good friend
- 36% stated they had a pet
- 96% had someone who listened to them
- 82% felt someone told them when they had done well
- 76% felt that they had someone who believed they will be a success

Being a Care Leaver

- 88% of our care leaver know who their leaving care worker was, with 100% stating that it was easy to contact them
- 70% have had the same leaving-care worker over the past year
- 98% reporting they trust their worker with positive, high-quality support, strong relationships and committed workers
- 73% felt involved in their leaving care planning
- 93% stated that someone had explained why they were in care

Housing

Research tells us that young people emphasised the importance of feeling safe in their homes and neighbourhoods and having good quality housing

- 75% stated that they felt safe in their home
- 69% felt safe in their neighbourhoods
- 46% felt settled where they live
- 77% stated that where you live now is for you

Living Independently

Having a very low income or experiencing economic deprivation is associated with low wellbeing

- 44% of our care leavers finding it difficult to get by financially
- 41% indicated that they were not in education, employment or training

Taking Part in Society

Research stated that care leavers talked about 'What Makes A Good Life' they were keen to emphasise that doing enjoyable things was important. Our young people told us they enjoyed activities such as *listening to/playing music, watching tv, hanging out with people I like, using social media, shopping, looking after self, exercising/sports, exploring outdoors, gaming, clubbing* with 16 of our young people highlighting barriers in having fun – mainly related to insufficient money, local infrastructure, time, health and self-confidence issues

Research also shows that care leavers in many studies described feeling very lonely and social isolated since leaving care, 55% of our care leavers often/some of the time felt lonely in the last week

- 94% can connect to the internet from home
- 89% have a smartphone

Feelings

Studies have shown that poor body image is associated with low self-esteem, depression, and self-harm.

- 36% of our care leavers responded that they were unhappy with their appearance
- 76% felt they sometimes/often were unable to control the important things in your life
- 69% confident about your ability to handle personal problems
- 72% stated things were going your way
- 63% stated difficulties were piling up so high that you could not overcome them
- 39% never or hardly ever felt proud (negative feelings) in the past week
- 20% were very positive about their future

Wellbeing

44% reported high or very high happiness in previous day

38% recorded low satisfaction with their life

71% feel the things they do in life are worthwhile

46% reported high anxiety in previous day

[from Bright Spots Programme; Report to Corporate Parenting Group, June 2022, Senior Manager Children and Families Social Work]

Key messages: Looked after children

Numbers and Rates - The number of looked-after children has fallen each year since 2018. Our rate per 1000 is still slightly higher than our comparator average, but has fallen below the rate for Scotland.

Age range - The proportion aged under 5 has remained at 22% (down from a high of 28% in 2019), and the proportion aged 16 or over has increased from 10% to 12%.

Where children are looked-after - The percentage of children with foster carers either provided by, or purchased by the local authority, increased in 2021, and the percentage who were looked-after with friends/relatives, or at home with parents decreased. July 2021 was the first snapshot date since 2017, on which the percentage of children at home with parents had fallen (very slightly) below the percentage in foster care.

Looked-after children's Attendance - Average attendance rates fell in 2021/22 for all primary and secondary pupils, both looked-after and non-looked-after, from the previous year. At both primary and secondary levels, in 2021/22, children looked after away from home had higher average attendance than those of previous looked-after status and those looked after at home.

Looked-after children's Exclusions - Overall exclusion rates for all pupils increased in 2021/22 at both primary and secondary levels. However, the exclusion rate for Primary looked-after pupils fell from the previous year, while the exclusion rate for Secondary looked-after pupils increased.

Literacy and Numeracy – achievement of Level 4 Literacy and Numeracy on leaving school

The proportion of looked-after leavers in Dumfries and Galloway achieving both literacy and numeracy at level 4 or better has remained at a similar value over the last 3 years and is yet to meet national and Virtual Comparator targets for looked-after young people in this measure.

Attainment - In 2019/20 there had been an improvement in the percentage of looked-after pupils leaving school with awards at Level 3 and Level 4. However, the percentage of looked-after children leaving school in 2020/21 with level 3 and 4 awards is less positive than the previous year.

Positive destinations - In 2020/21, 90.32% of looked-after leavers were in an initial positive destination. This is an improvement on the previous year. The majority of looked-after leavers in Dumfries and Galloway go onto Further Education followed by employment. A similar pattern is shown for comparators

Leaving Care - The Leaving Care Service have seen an increase in referrals during the reporting period. At the time of writing there are 329 Care Leavers, with the team supporting 126 care-experienced young people and 15 unaccompanied asylum-seeking young people.

Health - In 2021 (January to December) 71% of LAC health assessments were carried out within the target period (within 4 weeks of notification). This represents an 8% decrease from 2020. The LAC Health Team still continue to experience a large 'Did Not Attend' DNA rate for new assessments however this has reduced

from 20% to 14%. This has been a focus for improvement in 2021. The team continues to experience a 20% DNA rate for return appointments.

We had high levels of participation in the Brights Spots pilot programme, and the next steps for the Corporate Parenting Partnership are to decide how to use the findings to shape service-delivery, and to revise the Corporate Parenting Plan in response.

5.3.12 16 and 17 Year-olds presenting as homeless

In 2022, the number of 16-17 year olds presenting as homeless has sharply increased. In the first quarter of 2022 alone, 15 young people aged 16-17 made homelessness applications. Family breakdown is a typical reason for this. For young people aged 16-17, the need for accommodation can be temporary – for example to fill a gap before moving to college or another destination. The number of 16-17 year-olds presenting as homeless is now placing intense pressure on temporary accommodation in Dumfries and Galloway, and there is no quick fix for this.

5.3 Youth Offending

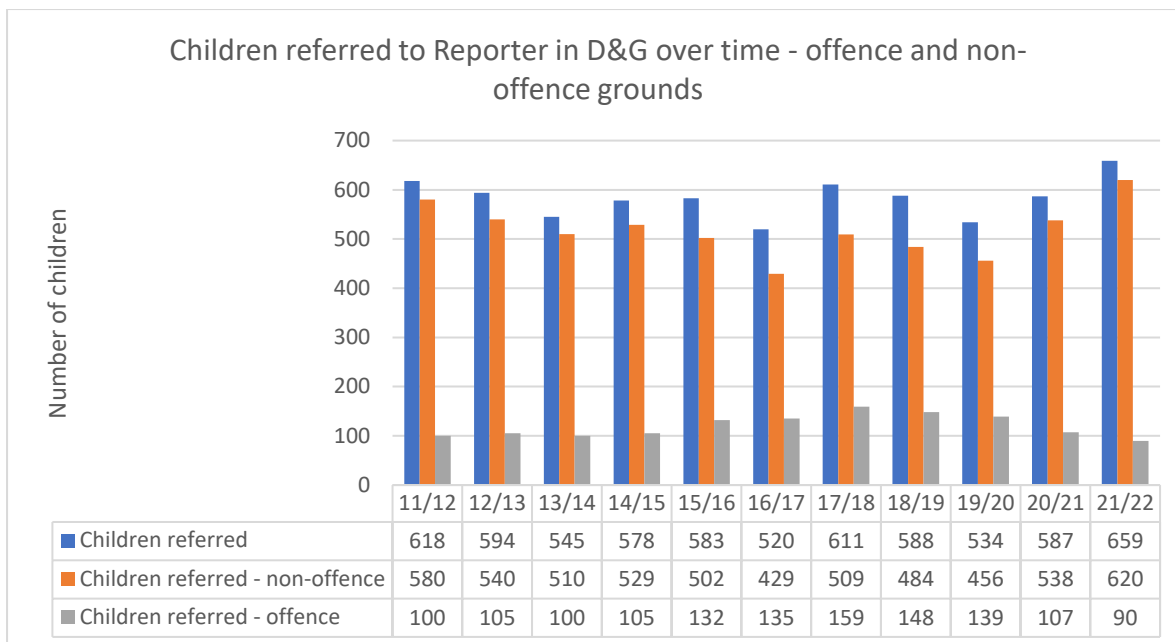
5.3.1 Referrals to the Reporter on offence/non-offence grounds, with 3-year trend data.

Nationally, statistics show that in 2020/21, 9,665 children and young people in Scotland were referred to the Children’s Reporter. This represents 1.1% of all children and young people in Scotland. The majority of children and young people (8,013), were referred due to concerns about their welfare.

In Scotland, lack of parental care is the most common ground on which a child or young person is referred to the Reporter. More children were referred in the first year of their life than any other age (502). This was 14.6% of the children referred on this ground.

The most common ages for children and young people to be referred to the Reporter continue to be 14 and 15 years although the most common age for children to be referred on care and protection grounds this year was under 1.

[From SCRA Official Statistics 2020/21 [SCRA’s Official Statistics 2020/21 - SCRA](#)]



5.3.2 Children referred by Age and Grounds for referral in 2020/21

Grounds	Age by year																	Total
	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16+	
a	20	13	16	17	14	17	10	11	10	10	10	5	13	13	7	5	<5	177
b	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5	8	8	<5	51
c	<5	<5	<5	<5	<5	<5	<5	<5	<5	0	<5	0	<5	0	0	<5	<5	14
d	<5	<5	<5	<5	<5	0	<5	<5	<5	0	<5	<5	0	<5	<5	<5	0	23
e	14	19	13	11	13	13	12	9	10	15	7	13	12	13	7	12	<5	171
f	6	8	10	9	9	10	12	14	9	6	11	9	17	7	<5	5	<5	131
g	0	<5	<5	0	<5	<5	0	<5	0	0	0	0	0	0	<5	<5	0	8
h	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	<5	<5
i	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
j	0	0	0	0	0	0	0	0	0	0	0	7	13	19	25	50	11	107
k	0	0	0	0	0	0	0	0	0	0	0	<5	0	<5	0	<5	<5	<5
l	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
m	0	0	0	0	0	0	0	<5	<5	<5	<5	8	12	22	19	31	9	92
n	0	0	0	0	0	0	0	0	0	0	0	<5	<5	<5	0	<5	0	6
o	0	0	0	0	0	0	0	0	0	0	0	<5	0	0	<5	0	0	<5
No grounds	<5	<5	<5	<5	<5	<5	5	0	<5	<5	0	<5	<5	<5	0	5	0	36
Total	38	36	37	33	39	36	33	30	33	33	34	35	56	48	56	83	20	587

The top 3 main grounds for referral in 2020/21 were:

- (a) [he]/[she] is likely to suffer unnecessarily or [his]/[her] health or development is likely to be seriously impaired, due to a lack of parental care.
 - In 2020/21, a total of 177 children were referred on this ground, with 80 of these aged 0-4. Those aged under 5 were 45.2% of those referred on this ground.
 - In 2019/20, a total of 193 children were referred on this ground, with 73 of

these aged 0-4 (37.8% of those referred on this ground).

- (e) [he]/[she] is being, or is likely to be, exposed to persons whose conduct is (or has been) such that it is likely that: (i) [he]/[she] will be abused or harmed, or (ii) [his]/[her] health, safety or development will be seriously adversely affected
 - In 2020/21 a total of 171 children were referred on this ground, with 70 of these aged 0-4. Those aged under 5 were 41% of those referred on this ground.
 - In 2019/20 a total of 119 children were referred on this ground with 47 of these aged 0-4. Those aged under 5 were 39.5% those referred on this ground.
- (f) [he]/[she] has, or is likely to have, a close connection with a person who has carried out domestic abuse
 - In 2020/21 a total of 131 children were referred on this ground, with 42 of these aged 0-4. Those aged under 5 were 32% of those referred on this ground.
 - In 2019/20 a total of 122 children were referred on this ground, with 53 of these aged 0-4. Those aged under 5 were 43.4% of those referred on this ground.

5.3.3 Results of referrals

	Arrange a Children's Hearing (on new grounds)	CSO not necessary	CSO not necessary and refer to LA	Current order/ measures sufficient	In-sufficient evidence	In-sufficient evidence and refer to LA	No jurisdiction	Total	Conversion rate - % of children that had a decision to arrange a Hearing on at least one referral in the year.
2021/22	104	184	145	184	149	6	<6	631	16.5%
2020/21	104	236	128	198	71	<6	<6	596	17.4%
2019/20	119	<6	31	26	214	131	134	523	22.8%

5.3.4 Diversion from Prosecution in Dumfries and Galloway – number of young people annually

	2019	2020	2021	2022
West: Number of young people	17	17	16	9
East: Number of young people	46	37	18	14
Total	63	54	34	23

5.3.5 Young people subject to CARM processes.

Between August 2021 and April 2022, a total of 7 young people aged 12-17 were referred to CARM.

5.4 Summary: Children in need of care and/or protection

Child Protection

- The number of children on the Child Protection Register has decreased, from a peak in registrations in 2018/19.
- The reduction was due to work being completed to address risks, resulting in de-registrations; and it was also influenced by the implementation of the strengths-based Signs of Safety approach of working with children and families.
- When children are placed on the Register, there can be more than one concern for each child. The highest concerns identified are around Domestic Abuse, Neglect, Parental Substance Misuse, Parental Mental Health Problems, Physical Abuse and Emotional Abuse. 'Emotional abuse' is normally also present in most other types of concern and does feature as the highest number in most reporting periods.
- In the last two reporting years we have seen no children re-registered within 24 months of de-registration, this reflects the change of approach with implementation of Signs of Safety.

Looked-after children

- Numbers and Rates - The number of looked-after children has fallen each year since 2018. Our rate per 1000 is still slightly higher than our comparator average, but has fallen below the rate for Scotland.
- Age range - The proportion aged under 5 has remained at 22% (down from a high of 28% in 2019), and the proportion aged 16 or over has increased from 10% to 12%.
- Where children are looked-after - The percentage of children with foster carers either provided by, or purchased by the local authority, increased in 2021, and the percentage who were looked-after with friends/relatives, or at home with parents decreased. July 2021 was the first snapshot date since 2017, on which the percentage of children at home with parents had fallen (very slightly) below the percentage in foster care.
- Looked-after children's Attendance - Average attendance rates fell in 2021/22 for all primary and secondary pupils, both looked-after and non-looked-after, from the previous year. At both primary and secondary levels, in 2021/22, children looked after away from home had higher average attendance than those of previous looked-after status and those looked after at home.
- Looked-after children's Exclusions - Overall exclusion rates for all pupils increased in 2021/22 at both primary and secondary levels. However, the exclusion rate for Primary looked-after pupils fell from the previous year, while the exclusion rate for Secondary looked-after pupils increased.
- Literacy and Numeracy – achievement of Level 4 Literacy and Numeracy on leaving school

- The proportion of looked-after leavers in Dumfries and Galloway achieving both literacy and numeracy at level 4 or better has remained at a similar value over the last 3 years and is yet to meet national and Virtual Comparator targets for looked-after young people in this measure.
- Attainment - In 2019/20 there had been an improvement in the percentage of looked-after pupils leaving school with awards at Level 3 and Level 4. However, the percentage of looked-after children leaving school in 2020/21 with level 3 and 4 awards is less positive than the previous year.
- Positive destinations - In 2020/21, 90.32% of looked-after leavers were in an initial positive destination. This is an improvement on the previous year. The majority of looked-after leavers in Dumfries and Galloway go onto Further Education followed by employment. A similar pattern is shown for comparators
- Leaving Care - The Leaving Care Service have seen an increase in referrals during the reporting period. At the time of writing there are 329 Care Leavers, with the team supporting 126 care-experienced young people and 15 unaccompanied asylum-seeking young people.
- Health - In 2021 (January to December) 71% of LAC health assessments were carried out within the target period (within 4 weeks of notification). This represents an 8% decrease from 2020. The LAC Health Team still continue to experience a large 'Did Not Attend' DNA rate for new assessments however this has reduced from 20% to 14%. This has been a focus for improvement in 2021. The team continues to experience a 20% DNA rate for return appointments.
- We had high levels of participation in the Brights Spots pilot programme, and the next steps for the Corporate Parenting Partnership are to decide how to use the findings to shape service-delivery, and to revise the Corporate Parenting Plan in response.

Homelessness and 16-17 year-olds

- An increase in the number of 16-17 year-olds presenting as homeless is placing great pressure on available temporary accommodation. Breakdown in family relationships is a common cause of homelessness for this age group.

Referrals to SCRA

- 2021/22 saw an increase in total referrals on the previous year, with an increase in referrals on care and protection grounds and a decrease in those on offending grounds.
- Lack of parental care was the single largest category of grounds for referral, closely followed by exposure/risk of exposure to persons whose conduct could present a risk to children's safety and/or health and wellbeing.

6. Vulnerability Factors: Parents/Carers/Families

6.1 Introduction

Vulnerability factors for parents/carers and families include: mental health; maternal health and wellbeing; domestic abuse and substance misuse and poverty – this are examples and not an exclusive list. Our Dumfries and Galloway Local Child Poverty Action Report 2021-2022, and draft Child Poverty Action Plan 2022-26 contain further information about poverty in Dumfries and Galloway and the steps being taken to mitigate local impacts of this, but some indicators are provided in this needs assessment as examples. The following section contains some available indicators on parent/carer/family vulnerabilities; and highlights some gaps where we need further information.

6.2 Maternal Health

In 2017 the Scottish Government published [The best start: five-year plan for maternity and neonatal care](#) which set out a five-year forward plan for the improvement of maternity and neonatal services in Scotland. The background to this was a recognition that while nationally, Scotland's maternity and neonatal services were generally providing high quality care, with high levels of satisfaction amongst women and families who use those services, services had largely developed over time, rather than being designed around the needs of women and families, leading to different approaches and care across Scotland.

Significant proportions of the Scottish population are dealing with the impact of co-morbidity, where they are living with two or more health conditions. While most women remain healthy, the above trends are evident among childbearing women, with a steady rise in older mothers and women with a range of other health issues and long-term conditions. These factors are associated with an increased need for intervention. In addition, women living in poverty, teenage mothers, women with mental health issues, and other vulnerable women are more likely to have poor pregnancy outcomes.

Maternal health and wellbeing is directly related to infant mental and physical health, underlining the importance of access to perinatal mental health services throughout the pregnancy journey. The provision of services for women with mental health issues is a key public health challenge. Significant numbers of women may be affected by mental illness in any one year, and mental ill-health is more common in deprived populations.

[From [The best start: five-year plan for maternity and neonatal care](#)]

6.2.1 BMI in Pregnancy

Obesity is a factor that alters risk in pregnancy. Local data for NHS Dumfries and Galloway informs us that in 2021, 338 women were noted to be obese at booking appointment, this is 31% of all births in the region. The level of women recorded as

having a BMI in the obese range at booking in 2017 was 21% for all births. In a 5-year period this has shown a significant increase in local obesity, in keeping with the national figures. It is important to consider any potential correlation of obesity rates in pregnancy and whether they would have an impact on the childhood obesity rates.

6.2.2 Maternal Mental Health

In Dumfries and Galloway, Perinatal and Infant Mental Health (PNIMH) Services were developed and were operational by March 2022 despite ongoing challenges with recruitment to posts – particularly the Specialist Midwife post. The Perinatal function of the PNIMH Service offers joint working with the Community Mental Health Teams using a dispersed model of service delivery.

A Maternal Wellbeing Survey was developed with input from women with lived experience and from Third sector organisations. After agreement with Senior Management Team in the Mental Health Directorate the questionnaire went live on Social Media. A total of 65 women completed it, of which 34 indicated they wanted to meet to find out more about becoming involved in further participation work. All of these women were contacted and 12 agreed to meet for individual conversations about their lived experience. The next stage is to develop a reference group to support co-production as the PIMH service develops.

In Perinatal Mental Health Nursing 31 assessments were carried out between September 2021 and August 2022.

More women within the perinatal period have been assessed by Community Mental Health Teams (CMHTs) without the Perinatal Mental Health Nurse being involved. Work is underway to look at how to capture this information going forward. Dumfries and Galloway is a dispersed service so due to capacity issues the Perinatal Mental Health Nurse cannot be at all Joint assessments.

In Perinatal Psychology 50 assessments were carried out in the same time period. There were also 9 additional 'Did Not Attend' (DNAs) to the first appointment with no response to the follow-up contact.

Eighty consultations have been provided to health and social care staff on perinatal clinical issues.

6.2.3 Smoking status at antenatal booking

The figures below show the percentage of women smoking at antenatal booking in the year ending 31 December 2021. Dumfries and Galloway had a higher percentage of current and former smokers than Scotland, but it should be noted that there were 1,187 bookings in Dumfries and Galloway, and 52,584 in Scotland, so smaller numbers will have more of an impact on the percentages in Dumfries and Galloway.

Percentage of women by smoking status at antenatal booking, year ending December 2021			
	Current Smoker %	Former Smoker %	Never Smoked %
Dumfries and Galloway	14.1	15.2	70.7
Scotland	12.1	14.6	73.3

[Antenatal booking in Scotland - Calendar year ending 31 December 2021 - Antenatal booking in Scotland - Publications - Public Health Scotland](#)

Key messages: Maternal Health

We have high levels of obesity in pregnancy in Dumfries and Galloway with a significant local increase over the last 5 years. This is in keeping with the national picture.

Perinatal mental health is one of our priority areas in our current Children's Services Plan, and new services were developed and operational in 2022 despite recruitment issues.

We have a higher percentage of smokers at antenatal booking than the average for Scotland – although our percentages can be affected by relatively small numbers.

6.3 Domestic Abuse

6.3.1 Domestic abuse incidents reported to Police

The figures below show domestic incidents reported to Police in Dumfries and Galloway, with 3-year trend data.

	Reporting year: April to March						3 year mean	5 year mean
	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22		
Domestic Abuse Incidents	1034	1220	1264	1343	1529	1406	1378.7	1278.0

The number of domestic abuse incidents and crimes peaked in 2020/21 but has since decreased. The number of incidents had been increasing each year pre-pandemic.

From report: Police, Fire and Rescue Sub-committee, [Agenda for Police, Fire and Rescue Sub Committee on Friday, 10th June, 2022, 2.00 pm - Dumfries and Galloway Council \(moderngov.co.uk\)](#)

6.3.2 Referrals to Women's Aid

Figures below from Dumfriesshire and Stewartry Women's Aid show the comparison between 2019 (pre-pandemic) and 2020.

Adult referrals 2019	Adult referrals 2020
April - 34	April - 27
May- 46	May- 53
June - 33	June- 53
July- 44	July- 51
August- 32	August- 53
September- 45	September- 51
October- 41	October- 48
November - 41	November - 51
Waiting list October 2019 - 11	Waiting list October 2020 - 42

The Scottish Government estimates that one in four women will experience domestic abuse during their lifetime. We can extrapolate from this that a high number of children will live in households where domestic abuse is present. Domestic abuse is one of the frequent concerns at Child Protection Registration.

Key messages: Domestic Abuse

The number of children and young people affected by domestic abuse is difficult to quantify, but we know that it is a significant factor in Child Protection Registrations, and the estimated number of women who are affected by it, would suggest that a high number of children will live in households where it takes place.

6.4 Parental substance misuse

Parental substance misuse is the long-term misuse of drugs and/or alcohol by a parent or carer. This includes parents and carers who:

- consume harmful amounts of alcohol
- are dependent on alcohol
- use drugs regularly and excessively
- are dependent on drugs.
- May not be able to properly care for their children because of their substance use.

The [2006 Aberlour Report: Have we Got our Priorities Right](#) described:

- Chaotic parental lifestyles, leading to neglect of their basic physical and emotional needs
- Poor or inconsistent parenting - lack of affection, nurturing, consistent boundaries or routines

- Unsafe home environments where children are left alone or unsupervised for long periods or left with unsuitable carers; are exposed to drugs, drug use and the effects of intoxicated behaviour, along with domestic abuse and criminal activity
- Children assuming caring roles for siblings and sometimes for their own parents
- Nursery or school attendance and attainment suffering
- Stigma which can lead to isolation from peer networks and susceptibility to bullying

The extent of parental substance misuse in Dumfries and Galloway is difficult to evaluate. The 2022 publication of a Needs Assessment commissioned by Dumfries and Galloway Alcohol and Drug Partnership highlighted the need for “a medium-term action plan to ensure robust data is collected, analysed and used to inform future commissioning processes and decisions.”

[from Dumfries & Galloway Needs Assessment of Children and Young People affected by (their own or someone else's) substance use, Part 1 The Report, Figure8 Consultancy, 2021]

With limited local data, we can consider the national picture and seek to extrapolate estimates from this about parental substance misuse in Dumfries and Galloway.

Nationally, publications on ‘Births in Scottish Hospitals’ no longer contain information on drug use during pregnancy, but national data is available from the Scottish Public Health Observatory with the key findings as follows, in Scotland:

- In 2020/21, drug use was recorded in 1.7% (766) of 45,466 maternities in Scotland. This was equivalent to a rate of 16.8 maternities with drug use recorded per 1,000 maternities, slightly higher than in 2019/20 (16.1). The 2020/21 rate of maternities with drug use recorded was lower than in 2011/12 (19.7 per 1,000 maternities), when the highest rate in the time series provided was observed.
- In 2020/21, where maternal drug use was recorded, the drugs most often used during pregnancy were cannabis (410, 9.0 per 1,000 maternities), opiates/opioids (163, 3.6 per 1,000 maternities), ‘(146, 3.2 per 1,000 maternities), cocaine (130, 2.9 per 1,000 maternities) and sedatives (53, 1.2 per 1,000 maternities).
- Recorded rates of opiate/opioid use during pregnancy consistently decreased over the time series from 9.7 per 1,000 maternities in 2011/12, before increasing slightly from last year (159, 3.3 per 1,000 maternities). Recorded rates of cocaine use increased substantially from 2016/17 (74, 1.4 per 1,000 maternities) to 2018/19 (151, 10.1 per 1,000 maternities), but have decreased since.

- In 2020/21, the rate of maternities with drug use recorded was highest in the under 20 age group (66.6 per 1,000 maternities) and lowest in the 30-34 and 35-39 age group (11.6 per 1,000 maternities).
- In 2020/21, the rate of maternities where drug use was recorded was over five times higher in the most deprived neighbourhoods in Scotland (deprivation quintile 1: 29.7 per 1,000 maternities) than in the least deprived neighbourhoods (deprivation quintile 5: 5.0 per 1,000 maternities). For the most deprived communities, the 2020/21 rate of maternities where drug use was recorded was the highest observed since 2012/13 (deprivation quintile 1: 29.8 per 1,000 maternities).
- In 2020/21, a total of 141 (0.3%) of 45,939 babies born in Scotland were recorded as having been affected by, or having withdrawal symptoms from, maternal use of drugs of addiction. In 2020/21, the rate of babies affected by maternal use of drugs was 3.1 per 1,000 live births. This rate decreased steadily over time from 6.9 per 1,000 live births in 2011/12, but has increased slightly from 2019/20 (2.8 per 1,000 live births). Figures for Dumfries and Galloway are shown in the table below.

Babies in Dumfries and Galloway and Scotland, affected by maternal use of drugs – to 2020/21										
Area	2011/ 12	2012/ 13	2013/ 14	2014/ 15	2015/ 16	2016/ 17	2017/ 18	2018/ 19	2019/ 20	2020/ 21
D&G - number of live births	1,382	1,352	1,275	1,226	1,262	1,243	1,268	1,149	1,114	1,105
D&G - babies affected by maternal use of drugs	12	10	18	15	8	*	*	*	*	*
D&G - rate per 1000 live births	8.7	7.4	14.1	12.2	6.3	*	*	*	*	*
Scotland - rate per 1000 live births	6.9	6.4	5.7	5.8	4.5	4.2	4.2	3.4	2.8	3.1

*figures are redacted due to low numbers.

<https://www.scotpho.org.uk/behaviour/drugs/data/health-harm>

- Across the whole UK, between April 2020 and March 2021, a record number of [adults contacted the NSPCC helpline](#) with concerns about a child/children. The top concern was adult health and behaviour (including worries about parental alcohol and substance misuse, domestic abuse and parental mental health), which increased 42%.
- The [Scottish Health Survey 2018 \(Revised 2020\)](#) reported that 24% of adults surveyed drank at hazardous or harmful levels
- Parental substance misuse is a frequent concern in Child Protection Registrations in Dumfries and Galloway.

Information about Drug Deaths is given in the following section: Community Vulnerabilities.

Key messages: Parental Substance Misuse

As with domestic abuse, the number of children and young people affected by parental substance misuse in Dumfries and Galloway is difficult to quantify. However, we know that it is a significant factor in Child Protection Registrations.

6.5 Children in Poverty

Poverty can be considered in terms of 'relative' and 'absolute' poverty, with these [defined by the Scottish Government](#) as follows:

- Absolute poverty - individuals living in households whose equivalised income is below 60 percent of inflation-adjusted median income in 2010/11. This is a measure of whether those in the lowest income households are seeing their incomes rise in real terms.
- Relative poverty - individuals living in households whose equivalised income is below 60 percent of median income in the same year. This is a measure of whether those in the lowest income households are keeping pace with the growth of incomes in the economy as a whole.

Detailed information about child poverty in Dumfries and Galloway is provided in

6.5.1 percentage of children in poverty

Statistics from the End Child Poverty Campaign identify that 22.89% of children in Dumfries and Galloway were in poverty in 2020/21. This equated to 5171 children living in poverty.

This data is based on the DWP/HMRC statistics "Children in low income families: local area statistics" (March 2022). The statistics provide the number and percentage of children aged 0-15 years who are living in households with below 60% median income before housing costs. The data provided here uses the DWP/HMRC local indicators combined with information about housing costs at the local level to estimate poverty rates after housing costs.

Source; [End Child Poverty - Campaigning for an end to child poverty](#)

6.5.2 Relative and Absolute Poverty since 2015 in Dumfries and Galloway

The figures in the table below show the percentage of children (under 16) in relative and absolute low-income families from 2015 and 2021.

	Percentage of children in Relative and Absolute poverty 2015-21						
	2015	2016	2017	2018	2019	2020	2021
Dumfries and Galloway							
Percentage of Children (aged under 16) living in Relative Low Income families	16.1 %	16.8%	18.3%	20.7%	20.0%	22.2%	18.4 %
Percentage of children (aged under 16) living in Absolute Low Income families	16.2 %	15.6%	15.0%	17.0%	16.2%	18.5%	14.6 %

[Children in low income families: local area statistics 2014 to 2021 - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

Figures for 2021 show a fall, but it should be noted that these pre-date the current Cost of Living Crisis with rising inflation and energy bills. As noted in Section 1, Dumfries and Galloway has a combination of existing low wages – the lowest in Scotland and high levels of fuel poverty.

6.5.3 Crisis Grant and Community Care Grants

Crisis grants are a means tested grant available through the Scottish Welfare Fund to help meet the short-term financial needs of people who are facing a disaster or emergency. Figures below are for Crisis Grants and Community Care Grants paid out in the financial year 2021/22.

Fund	Applications Received	Applications Paid	Value
Crisis Grants	6,997	4,774	£465,354
Community Care Grants	2,332	1,374	£1,013,633

6.5.4 Child Payments and Child Bridging Payments

The Scottish Child Payment is £20 per week given by the Scottish Government for each eligible child under 6 years old in low-income households. It will be rolled out to children between the age of 6 and 16 by the end of 2022. To be eligible, a claimant must be in receipt of:

- Universal Credit, or waiting for their first payment of Universal Credit
- Income Support
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance
- Pension Credit
- Housing Benefit

- Child Tax Credit
- Working Tax Credit
-

Scottish Child Payment Bridging Payments were introduced by the Scottish Government to bridge the gap until Child Payments are fully rolled out. Families with children aged 6 and over, who get free school meals because of household income, can get the bridging payment. This includes families with children 16 and over. Claimants must also be getting one of the following:

- Both Working Tax Credit and Child Tax Credit with a household income of £7500 or less or
- Universal Credit with a monthly earned income of not more than £625 or
- Child Tax Credit only with an annual income of less than £16,105 or
- Income related Employment and Support Allowance or
- Be an Asylum Seeker, receiving support under part IV of the Immigration Act 1999.

Bridging payments are administered by local authorities and figures below are for those issued by Dumfries and Galloway Council from October 2021 to summer 2022.

Period	Number of payments	Value
October 21	3748	599,680
December 21	3809	607,440
Spring 22	3831	498,030
Summer 22	3835	500,890
Total	N/A	£2,206,040

Key messages: Poverty

Almost a quarter of children (23%) in Dumfries and Galloway were living in poverty in 2020/21.

With the lowest wages in Scotland, high transport costs and a significant amount of housing with existing high heating costs, the Cost of Living Crisis presents particular challenges for Dumfries and Galloway and risks many more families falling into poverty.

6.6 Summary: Parental Vulnerability Factors

There is an existing link between parental mental health, domestic abuse and substance and one or more of these can feature together as concerns when children are placed on the Child Protection Register. Deprivation, mental health problems, substance misuse and poorer maternal health are linked. The 'Cost of Living Crisis' risks exacerbating a whole range of existing parental vulnerabilities.

7. Vulnerability Factors: Communities

7.1 Introduction

There are many different factors that can be considered community vulnerabilities. A dedicated needs assessment focusing on communities might include information on: levels of crime, anti-social behaviour, racially motivated offences, poor housing, pockets of deprivation, environmental factors, employment opportunities, access to services and other factors. For the purposes of this document, data on drug deaths, alcohol-related deaths, and suicides have been included.

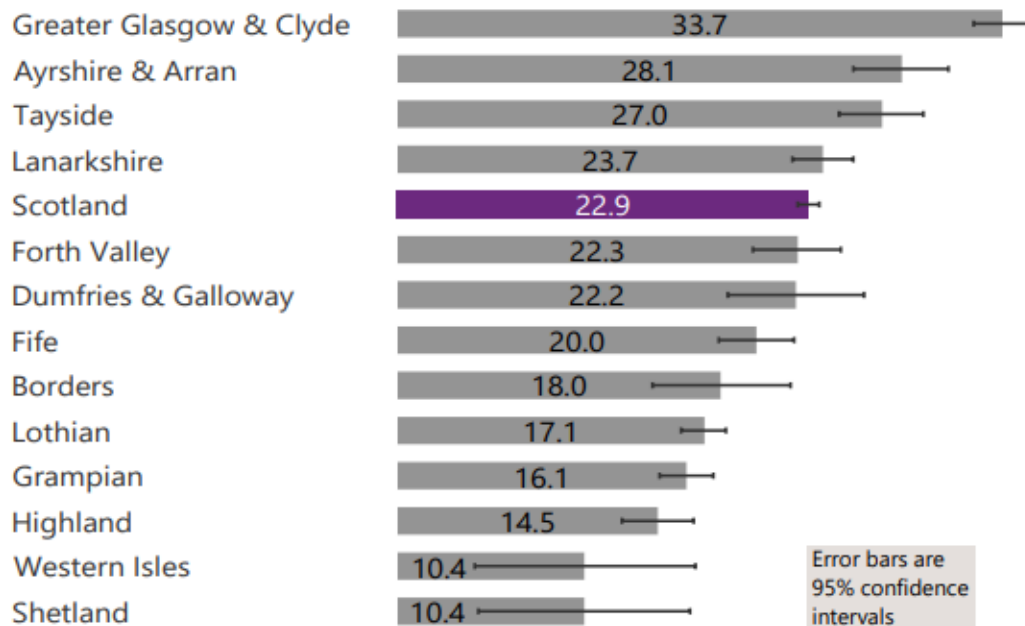
7.2 Drug deaths

Nationally, in 2021 there were 1,330 deaths due to drug misuse in Scotland. This is 9 deaths fewer than in 2020. This makes 2021 the first year since 2013 where drug misuse deaths have not increased. It is still the second highest annual total on record. People aged 35-44 were most likely to die from drug misuse. People aged 35-44 were most likely to die from drug misuse. Drug misuse deaths have increased in recent years in all age groups except 15-24. 65% of drug misuse deaths were of people aged between 35 and 54. More than two thirds of those who died were male.

In 93% of all drug misuse deaths in Scotland in 2021, more than one drug was found to be present in the body. Of all drug misuse deaths in 2021, the following substances were implicated:

- opiates/opioids (such as heroin/morphine and methadone) – 1,119 deaths (84% of the total)
- benzodiazepines (such as diazepam and etizolam) – 918 (69%)
- gabapentin and/or pregabalin – 473 (36%)
- cocaine – 403 (30%)

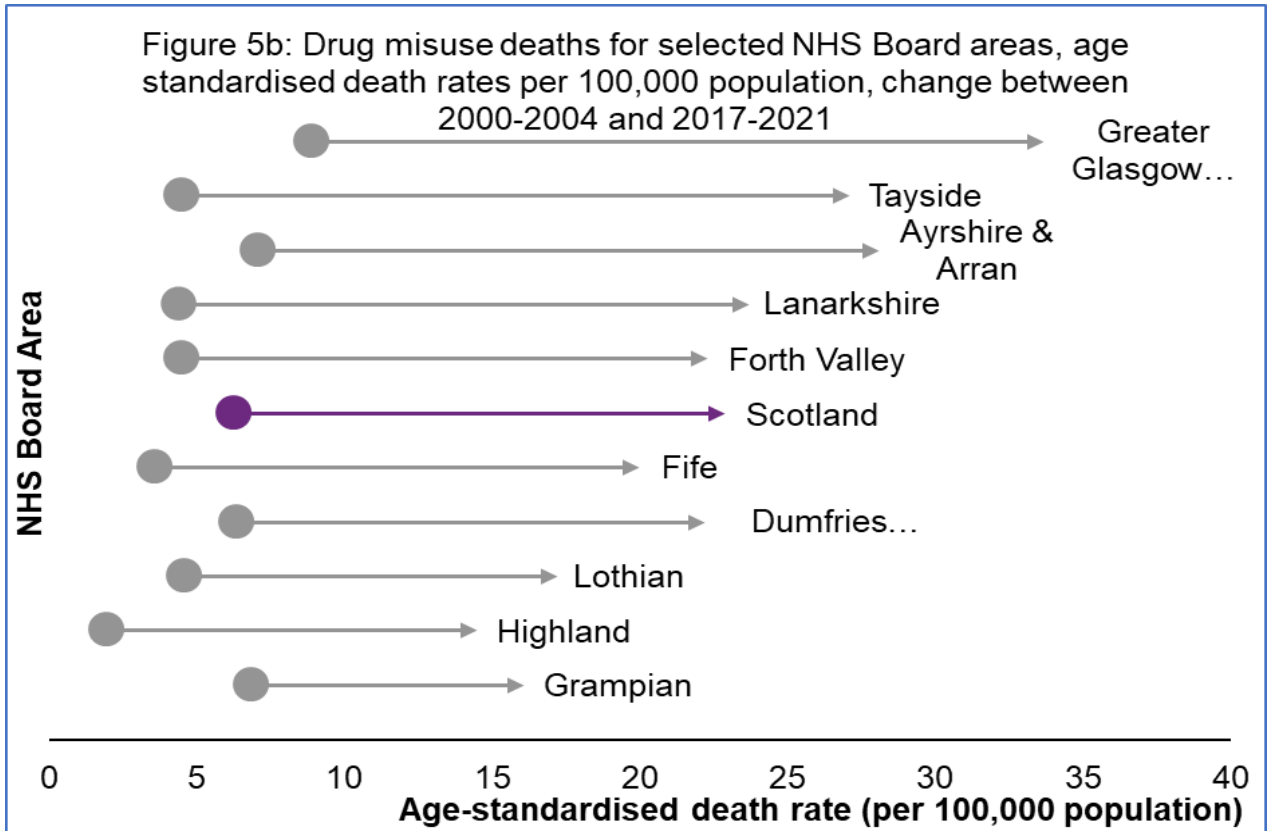
Drug misuse death rates* by NHS Board area, 2017-2021



* age standardised death rates per 100,000 population.

<https://www.nrscotland.gov.uk/files//statistics/drug-related-deaths/21/drug-related-deaths-21-report.pdf>

The chart below shows how drug deaths as a rate per 100,000 population have changed over time across Health Boards in Scotland.

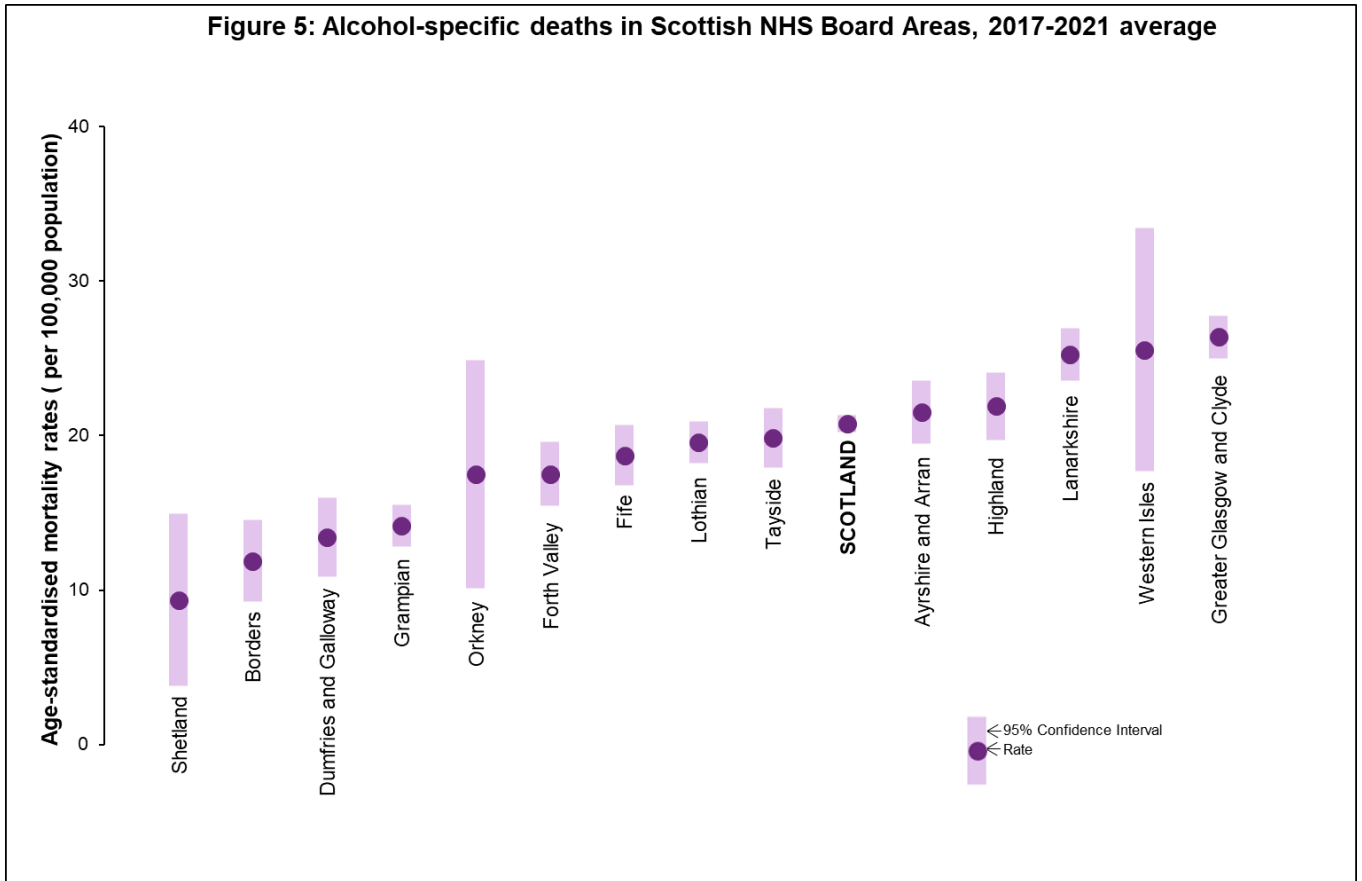


The chart above shows that for the period 2000-2004, in Dumfries and Galloway, the drug death rate worked out as 6.4 per 100,000 population. By 2017-2021, this had increased to 22.2 per 100,000 population. The rate in Scotland went from 6.3 to 22.9 per 100,000 over the same time period.

7.3 Alcohol Specific Deaths

Nationally, the number of alcohol specific deaths was up 5% to 1,245 in 2021. Alcohol-specific deaths have generally risen since 2012. Before this point, deaths falls sharply from the peak of 1,417 in 2006 to 968 in 2012. Last year, deaths rose by 5% or 55 deaths to 1,245. Most of the increase since 2019 has come from male deaths. Alcohol-specific deaths were 5.6 times as likely in the most deprived areas of Scotland compared to the least deprived areas. [Alcohol-specific deaths | National Records of Scotland \(nrscotland.gov.uk\)](https://www.nrscotland.gov.uk)

The following chart shows Alcohol Specific Deaths in Scottish Health Boards as an average from 2017-21

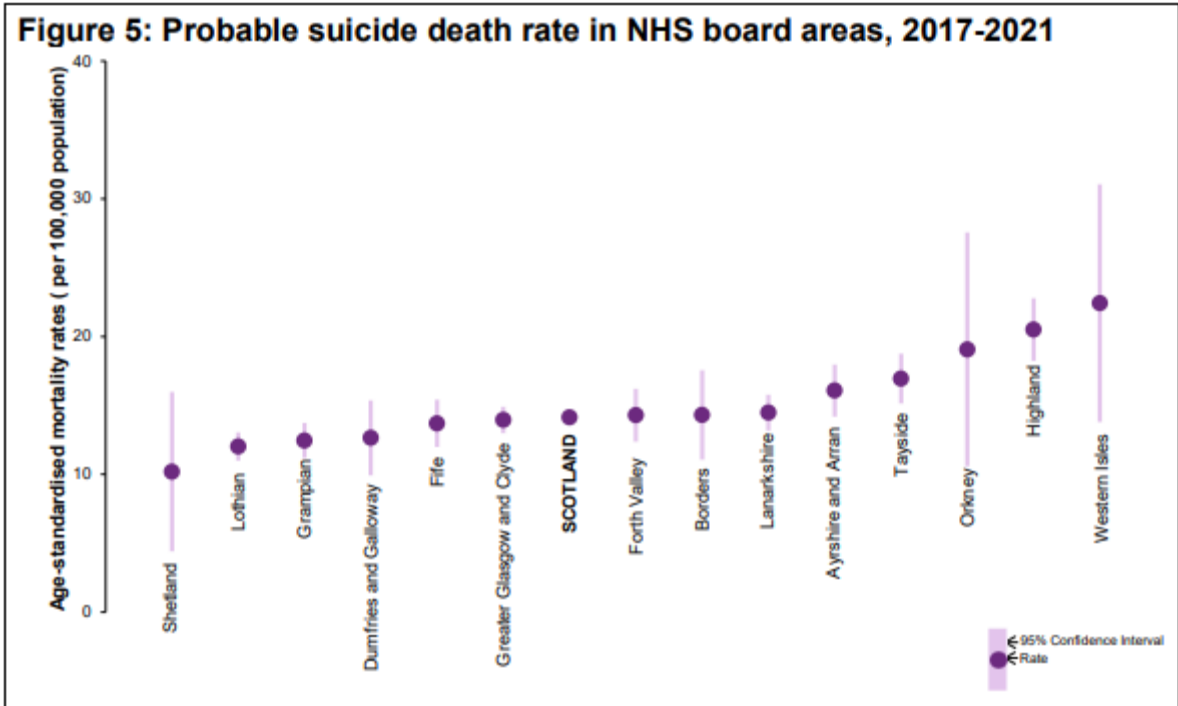


The chart above shows that the average alcohol specific death rate in Dumfries and Galloway was 13.4 per 100,000 (as a 5 year average from 2017-21). The rate for Scotland over the same time period was 20.8 per 100,000. [alcohol-specific-deaths-21-all-tabs.xlsx \(live.com\)](#)

7.4 Suicides

There were 753 probable suicides in Scotland in 2021, a decrease of 52 (6%) from 2020. Most of the decrease in the past year can be attributed to a fall in female suicides, which decreased by 42 (18%). The rate of suicide in males was 3.2 times as high as the rate for females. Suicide rates are highest between the ages of 25 and 64. [Fewer suicides in Scotland | National Records of Scotland \(nrscotland.gov.uk\)](#)

The chart below shows probable suicides by NHS Board area in Scotland.



<https://www.nrscotland.gov.uk/files//statistics/probable-suicides/2021/suicides-21-report.pdf>

The chart above shows that suicides as a rate per 100,000 in Dumfries and Galloway were 13.4 as a 5 year average for 2017-21. The rate in Scotland as an average for the same time period was 20.8 per 100,000.

7.6 Summary: Community Vulnerability Factors

- Our drug misuse death rate for 2017-2021 was 22.2 compared with 22.9 for Scotland. This is as an age-standardised rate per 100,000 people.
- The average alcohol specific death rate in Dumfries and Galloway was 13.4 per 100,000 (as a 5 year average from 2017-21). The rate for Scotland over the same time period was 20.8 per 100,000.
- Suicides as a rate per 100,000 in Dumfries and Galloway were 13.4 as a 5 year average for 2017-21. The rate in Scotland as an average for the same time period was 20.8 per 100,000.

8. Engagement and Children's Rights

Under the Children and Young People (Scotland) Act 2014, local authorities, health boards and other public authorities have a duty to report every 3 years on the steps they have taken to secure better or further effect of the requirements of the United Nations [Convention on the Rights of the Child](#) (UNCRC).

The United Nations Convention on the Rights of the Child (UNCRC) is the world's most widely ratified treaty. The convention has 54 articles that cover all aspects of a child's life and set out the civil, political, economic, social and cultural rights that all children everywhere are entitled to. It also explains how adults and governments must work together to make sure all children can enjoy all their rights. Every child has rights, whatever their ethnicity, gender, religion, language, abilities or any other status.

Our Children's Rights Report for 2017-20 is available [here](#).

In March 2021, the Scottish Parliament passed the UNCRC (Incorporation) (Scotland) Bill which would embed the UNCRC into Scots Law. This law will mean that public authorities have to ensure that everything they do complies with children's rights. A challenge from the UK Government resulted in a Supreme Court decision that some elements of the legislation lay outwith the powers of the Scottish Government. Since then, work has been taking place by Scottish Government to amend the legislation, while continuing to plan for implementation.

In April 2019, the report on the 10,000 Voices survey was published. The 10,000 Voices survey ran in Dumfries and Galloway for the duration of 2018, with participants aged between 10 and 25. The consultation captures the views of 46.9 per cent of all young people living, working and studying in Dumfries and Galloway, making it the largest collection of young people's views in Scotland for a single local authority area. Young people provided answers to two types of questions: the first focusing on the physical environment of their communities (the buildings, streets, public spaces and natural spaces that make up a place) and the second focusing on the social environment (the relationships, social contact and support networks that make up a community). The findings of 10,000 Voices were presented to Community Planning Partnership as well Dumfries and Galloway Council and NHS Board.

Plans are underway to repeat 10,000 Voices and this will give us a pre-and post-pandemic perspective on young people's views.

Also in 2019, Dumfries and Galloway participated in Health and Wellbeing Surveys as part of the Realigning Children's Services Programme, and a [headline report](#) and [thematic report](#) were published with the findings from these. A total of 8,451 school pupils in years P5 to P7 (3,776, 80% of all eligible primary pupils) and S1 to S4 (4,675, 76% of all eligible secondary pupils) took part in the survey in Dumfries and Galloway and their responses were linked to local authority administrative data

through a secure data linkage process. This meant that we were able to compare how the collated responses for children by stage and gender, and also by factors such as looked-after status; receipt of Free School Meals; Additional Support Needs. In 2022, further Health and Wellbeing Surveys were carried out in Dumfries and Galloway Schools. The findings are currently being analysed.

9. Key Findings

Factors associated with the rural nature of Dumfries and Galloway mean that inflation and sharp increases in energy bills will have an especially significant impact. As a region, we went into the current Cost of Living Crisis already with the lowest wages in Scotland and high levels of fuel poverty.

Fuel poverty is a particular issue for Dumfries and Galloway, with high transport costs and a high number of households with no access to the mains gas grid and dependent on other sources of heating. At the time of writing (August 2022), the Energy Price Cap is due to rise by 80% to £3,549 in October 2022 following a previous rise in April 2022. This means that average tariffs will have risen by approximately 175% compared to last year.

'Caring Personal Service Occupations' are the largest share of employment in Dumfries and Galloway. We have high levels of job postings in Dumfries and Galloway for Nurses, Care Workers and Home Carers. We have had recruitment challenges for several years for posts within Health, Social Work and the Care sector. Innovative recruitment approaches have been implemented, but recruitment challenges remain. We do not know what the impact of the planned National Care Service will be.

Overall, the global picture for children in Dumfries and Galloway in receipt of universal services is a mostly positive one. The pandemic has had an impact on some of our indicators (for example attainment at Curriculum for Excellence levels) and there is room for improvement across a number of areas, but the global picture in Dumfries and Galloway is one of good services and good outcomes for the majority of children and young people.

Nationally, the pandemic has impacted on the mental health and wellbeing of children and young people, with the longer-term impacts still unknown.

In Dumfries and Galloway we have taken an early intervention approach, using Scottish Government funding to provide low-level mental health supports. It is not clear what the longer-term position is with regard to funding. Even with this approach, we have seen an unprecedented increase in referrals to CAMHS in 2021-22. There is a similar picture across Scotland. The single biggest category of referrals to School Nursing is Mental Health and Wellbeing.

The information we have, presents a picture of poorer outcomes across a range of indicators for children with Additional Support Needs. Approximately a third of pupils in Dumfries and Galloway have Additional Support Needs – a total of 6,289 children. Some may require little or no support from services, others may have complex needs requiring multi-agency planning.

We need more information about the needs of children with disabilities – this is a gap but a Needs Assessment on children with additional support needs and/or disabilities is being commissioned by Education.

Since 2016 when the Universal Health Pathway was introduced, there has been a decrease in the percentage of children having concerns picked up at 27-30 months. This is because concerns are being picked up earlier at the 13-15 month review.

The number of children on the Child Protection Register has decreased, from a peak in registrations in 2018/19. The reduction was due to work being completed to address risks, resulting in de-registrations; and it was also influenced by the implementation of the strengths-based Signs of Safety approach of working with children and families.

When children are placed on the Register, there can be more than one concern for each child. The highest concerns identified are around Domestic Abuse, Neglect, Parental Substance Misuse, Parental Mental Health Problems, Physical Abuse and Emotional Abuse. 'Emotional abuse' is normally also present in most other types of concern.

In the last two reporting years we have seen no children re-registered within 24 months of de-registration, this reflects the change of approach with implementation of Signs of Safety.

Numbers and rate of looked-after children have fallen, but our looked-after children are still on average experiencing poorer outcomes, particularly with regard to educational attainment, than those who are not looked after. Our participation in the Bright Spots programme has given us information from children and young people about their experiences and what needs to change. The next steps are to deliver changes in service delivery.

Referrals to the Reporter have increased in Dumfries and Galloway, with neglect the most common ground for referral.

An increase in the number of 16-17 year-olds presenting as homeless is placing great pressure on available temporary accommodation. Breakdown in family relationships is a common cause of homelessness for this age group.

In 2021, almost a quarter of children in Dumfries and Galloway were living in poverty, and the increase in energy bills, alongside price rises generated by an inflation rate of 10.1% in July 2022 risks pushing many more households into poverty.

We have increasing levels of maternal high BMI, and a higher than the Scottish average percentage of women smoking at their antenatal booking.

Our rates for suicide and alcohol-specific deaths are lower than the national average, but our drug-related death rate is only slightly below that for Scotland.

While implementation of the UNCRC (Incorporation) (Scotland) Bill has been delayed, it is expected that this will become law, and we need to ensure we take cognisance of the rights agenda in the next Children's Services Plan.

For further information, please contact ChildrensServices@dumgal.gov.uk