

IN OUR SHOES

Director of Public Health Annual Report 2022



Leeds
CITY COUNCIL



Contents

Welcome and foreword	03
Introduction	04
What we did	06
Snapshot of child health in Leeds	10
Timeline	12
Key themes	18
📍 Children’s mental health	18
📍 Parental mental health	26
📍 Children’s physical health	30
📍 Poverty, housing and where we live	38
📍 Children’s safety	42
📍 Play and screen use	48
📍 Child development, communication and language	52
📍 Educational attainment	58
📍 Accessing services	62
📍 Childhood infections	66
📍 Positive impacts	70
Headline findings and recommendations	74
Updates on recommendations from 2017/18	76
Acknowledgements	78
Further reading	80

“ **History will judge us by the difference we make in the everyday lives of children.** ”
- Nelson Mandela

Foreword

“ **We could never have loved the Earth so well if we had had no childhood in it.** ”
- George Eliot

Welcome to the 2022 Director of Public Health Annual Report for Leeds. I’m delighted to share this report with you, as my first annual report since taking on the role of Director of Public Health for Leeds at the start of the COVID-19 pandemic in March 2020.

The main focus of this report is on the current state of children and young people’s health in Leeds. This includes exploring the impact of the COVID-19 pandemic on their lives. The report covers from when the first COVID-19 cases were identified in Leeds, to the ongoing impact as we learn to live with COVID-19 and respond to new threats and opportunities relating to children’s health.

Leeds is a wonderful, vibrant and growing city. The city’s many strengths include our proud and diverse communities, a robust and dynamic economy, beautiful green spaces and thriving centres of learning, culture and sport. Like every large city in the UK however, Leeds has complex challenges and not everyone experiences the same health outcomes.

For example, women living in Leeds Dock, Hunslet and Stourton have the lowest life expectancy in all of England. This highlights how the gap in life expectancy between people in the most and least deprived areas of Leeds is growing.

This report shines a light on key data relating to children and young people in Leeds. It shows the difference between the Leeds average and the children living in areas which fall into the most deprived 10% nationally. Everyone in Leeds needs to be aware of these unequal and unfair outcomes. We must ensure that all children have the same chance to fulfil their potential.

I am grateful to those children, young people and families who have taken time to share their stories and experiences. Thanks also to colleagues and partners who have shared case studies of work underway. These show how we are responding to the issues identified through research and, most importantly, the experiences of children, young people and families in Leeds.

The recommendations in this report provide a guide to what further action is needed to maximise the chances for all children in Leeds to have a fair start in life.

Victoria Eaton
Director of Public Health,
Leeds City Council



Introduction

From 23 March 2020 until 24 February 2022, legal restrictions were in place in England to minimise the spread of COVID-19. For almost all families, this meant more time at home. Life - family time, learning, work, celebrations, medical appointments and shopping - collapsed into a room and a screen. The outside world faded for those caring for someone identified as 'clinically extremely vulnerable' (around 55,000 people in Leeds). Even buying groceries or taking local walks became risky activities.

We all experienced common challenges during the most intense months of the pandemic. Adjusting to the new landscape of work and home-schooling. Feeling isolated from friends. Worrying about loved ones getting sick. Many also experienced unexpected pleasures, including more family time and quieter streets.

But those common challenges were not experienced equally. And this was especially true of lower income families, families from

particular ethnic groups, and those living with disability and chronic illness. These groups bore the brunt of both the illness itself and the measures put in place to protect us from it. Those living in unstable, crowded or unhealthy housing were more likely to become seriously ill or die from COVID-19. Families in deprived areas experienced:

- **increased domestic violence and parental mental health issues;**
- **wider deficits in their children's food security;**
- **wider deficits in their children's educational attainment.**

All of this was happening behind closed doors.

Hidden Lives

As public health specialists, we count, analyse and observe so many daily details that make up people's lives. This includes the factors that fundamentally influence their health. However, what happens behind closed doors usually remains unknowable. This report attempts to show how these unseen experiences have impacted the health and wellbeing of children and young people in Leeds. Children were less likely to become ill with COVID-19 than adults. They were not the focus of protective measures. However, the pandemic affected them profoundly and unequally. The ongoing impact of this experience continues.

In 2022, there were 8,543 babies in Leeds aged 1-2, all born under pandemic restrictions. Their parents were more likely to have experienced mental health issues. They were less likely to have built an effective support network. And they were less able to access affordable childcare than the parents of babies born in previous years. These

babies and toddlers were also more likely to have engaged extensively with screens for play and connection from an earlier age than their siblings.

Growing up, these 'pandemic babies' are more likely to contract measles or mumps due to a fall in vaccination rates. They are also more likely to experience issues with speech and language, and other developmental delays.

For children who started school in the last two years, these developmental delays are now causing issues in the classroom. Children of all ages are also more likely to have developed mental health issues or seek assessments for neurodevelopmental or eating disorders. Being unable to play outside led to more time on screens, sitting down. This was especially true for children who didn't have access to a garden. Factors that influence children's weight and activity levels were experienced even more unequally than before.

Young people preparing to move to secondary school, further education or work experienced significant disruption. They missed out on important social milestones and development opportunities. They were also more likely to be exposed to harmful content online than before. Worries about future pandemics, climate change and economic anxiety have become overwhelming for many. More young people are absent from school or being home-schooled than pre-pandemic, often due to high levels of anxiety.

This report aims to step into the shoes of the children and young people who lived through the pandemic. By sharing their stories, we will shine a light on their experiences and the ongoing impacts they experience. We will show some ways that we have worked together as a city and through our services to support families. Finally,

looking to the future, the report identifies recommendations for making Leeds a better place for children and young people to live and grow up in.



Creation Station Engagement - Children's Lives



“ There has been a two-year delay in children's development and learning, and at the same time so many families have fallen into poverty. We all need to work together to make things better for families. ”

Children's Centre Manager

What we did

The first stage in creating this report was to conduct a comprehensive review of the available literature about the impact of living through the COVID-19 pandemic on children and young people. We reviewed over 100 papers and reports to identify key themes and statistics that would inform the report's development.

We then conducted an online survey aimed at professionals working with children and young people in Leeds, titled The impact of the COVID-19 pandemic on children in Leeds. This survey was promoted via various methods, including social media and directly with partners. The responses were analysed to identify recurring themes, which have been explored within this report.

We also ran an online 'Call for Creative Submissions'. This was promoted within Leeds attractions including the Thackray Museum and Kirkgate Market, and through

social media and outreach to partners. It asked children and young people to create something that explained how the pandemic impacted them and to share it via our online form. These submissions were also analysed for key themes which are presented throughout this report.

We conducted focus groups with communities of children and young people across Leeds.

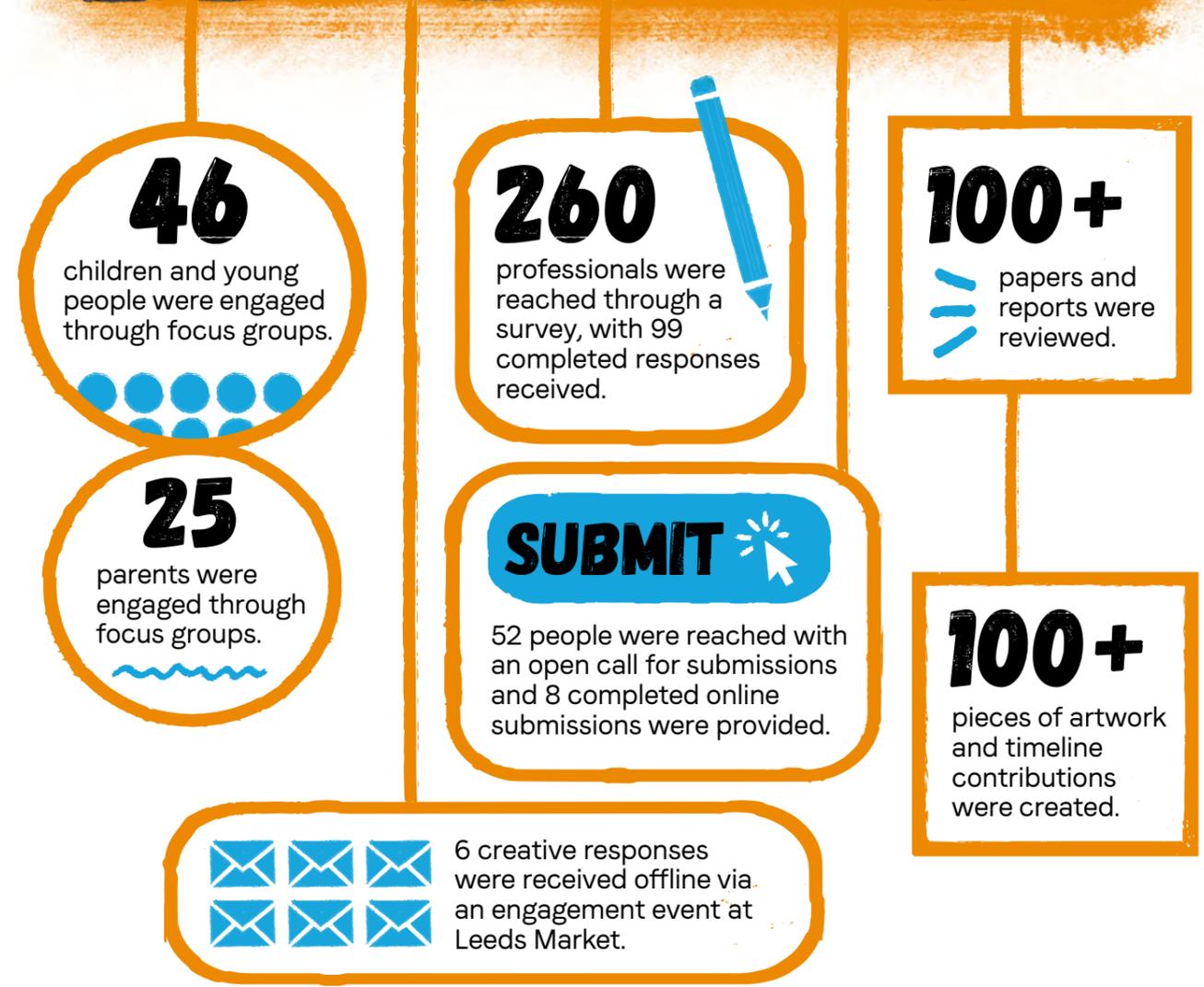
These took place at:

- **Shakespeare Primary School, Burmantofts;**
- **Allerton CE Primary School, Moor Allerton;**
- **LS-TEN Skate Park and Youth Group, near Hunslet;**
- **Parklands Children's Centre, Seacroft.**

Within these groups, we engaged with professionals, children, young people and parents representing a broad mix of demographics, locations, ethnicities, and ages. We also engaged with disabled children and young people across all age groups.

These groups involved drawing and writing activities for children, young people, and parents. This included adding key events to a timeline, and drawing their experiences of the pandemic. They were also asked to fill out 'impact cards' to sum up their experiences and the impact they had. The data was then processed, coded and analysed for key themes and trends.

Over 100 pieces of artwork and timelines produced by children and young people were supplied through the community engagement approaches. These have been referenced throughout the report.



Following this research, we analysed the data and identified 11 key themes. As shown on the following pages, we developed a short film highlighting the individual stories of children and young people in Leeds. We also developed an infographic of key

population health indicators. This report will discuss each key theme in turn, summarising the experiences of children and families in Leeds. Each theme is supported by contributions from children, families and partners.



'In Our Shoes' film production

Creating the 'In Our Shoes' Short Film

To accompany the written Director of Public Health Annual Report, we produced a short film. The film highlights the individual experiences of children, young people and families in Leeds.

Shortlisting and filming preparation

Candidates for the film were shortlisted from those who participated in the community engagement processes. When shortlisting teenage participants, we also approached local youth groups such as Brave Words Youth Theatre, in Beeston. We gave parents/carers and children information sheets that explained what the film was about. Once parents/carers confirmed that they/their child wanted to take part, parents were asked to sign a consent form. Shoot locations were planned to celebrate the diversity of the city, in locations throughout Leeds.

Filming

Filming occurred across 3 shoot days, with anywhere between 2 and 7 participants filmed per day. Participants also received a voucher following filming to thank them for their time.

Each shoot day involved 6-7 crew members and up to 4 locations in Leeds. Adjustments to the shoot setup were made according to the participants' needs. For example, at one of the locations, we set up a 'quiet room' away from the kit and crew. This ensured that a participant with Autism Spectrum Disorder (ASD) could comfortably take part in the filming.

The voiceover for the film was recorded by each participant, telling their individual story. A script was prepared in advance based on participants' contributions to community engagement activities. Participants were consulted about the script. Changes were made if requested. Where the script necessitated a child or young person talk about a sensitive topic (such as family bereavement), this was discussed with parents/carers prior to the recording. They were given the opportunity to amend or remove the content if they felt their child would not feel comfortable speaking about it.

The film features a broad mix of demographics, locations, ethnicities, ages, and experiences. It highlights the experiences of children and young people and gives us the chance to walk in their shoes. It highlights that whilst we were all in the same storm, we were not all in the same boat.

Behind the scenes at the film shoot:



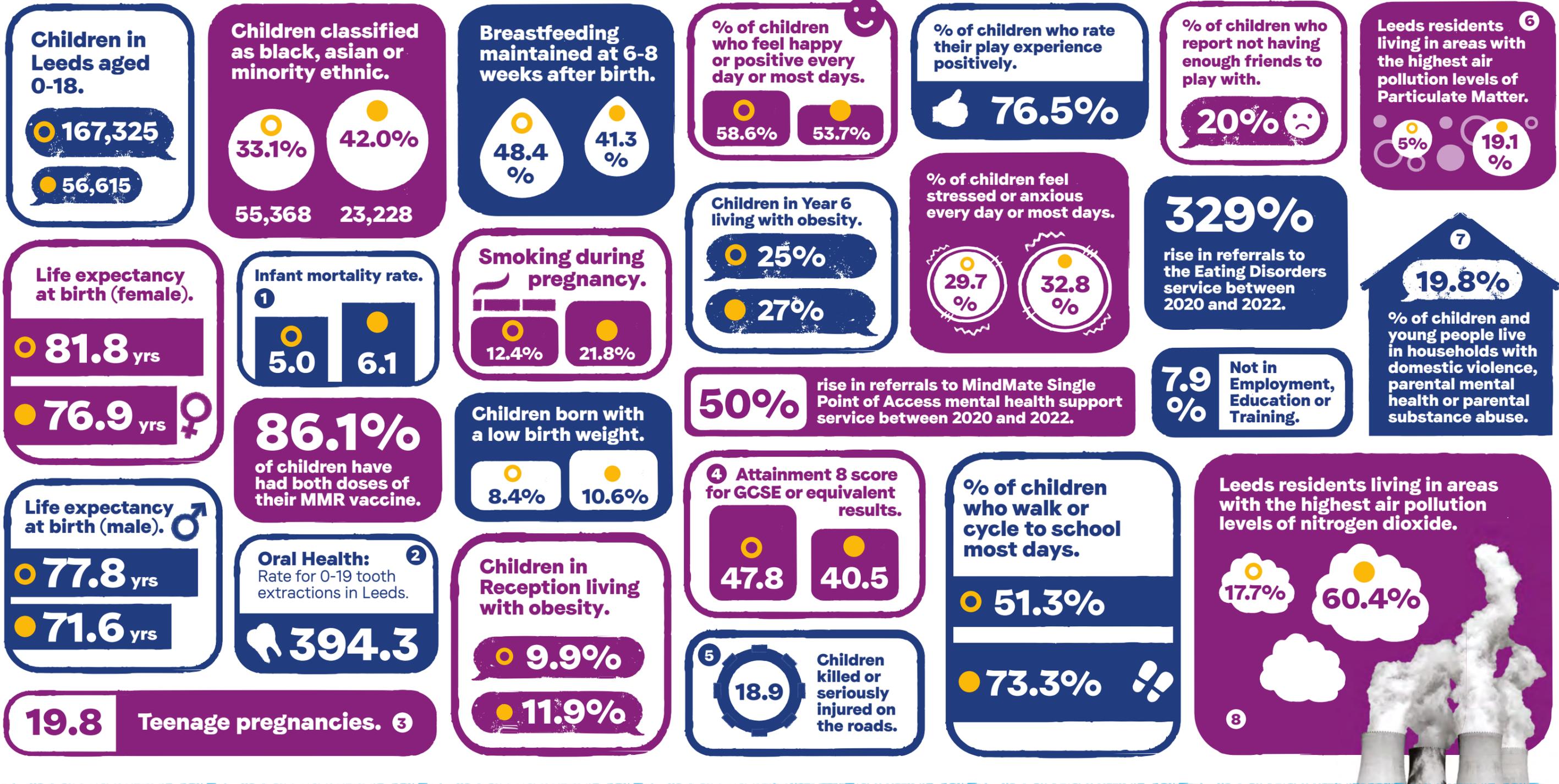
[Watch the film](#)

“**Doing the filming was really exciting. I was quite nervous before because I knew it was important and lots of people would see it. But it was really fun.**
- Hawa”

“**It was hard to talk about some things. But it is important. People need to know what it was like for us.**
- Tilly”



Snapshot of child health in Leeds



● **Leeds Average.**
● **Deprived Leeds** (the people living in Leeds who live in an area ranking in the 10% most deprived nationally).

1 Per 1000 live births.
2 Finished Consultant Episodes of tooth extraction rate (all diagnoses) per 100,000 2021-22.
3 Under 18 conception rate per 1000.
4 Headline measures at key stage 4 are based on results of eight GCSEs or equivalent,

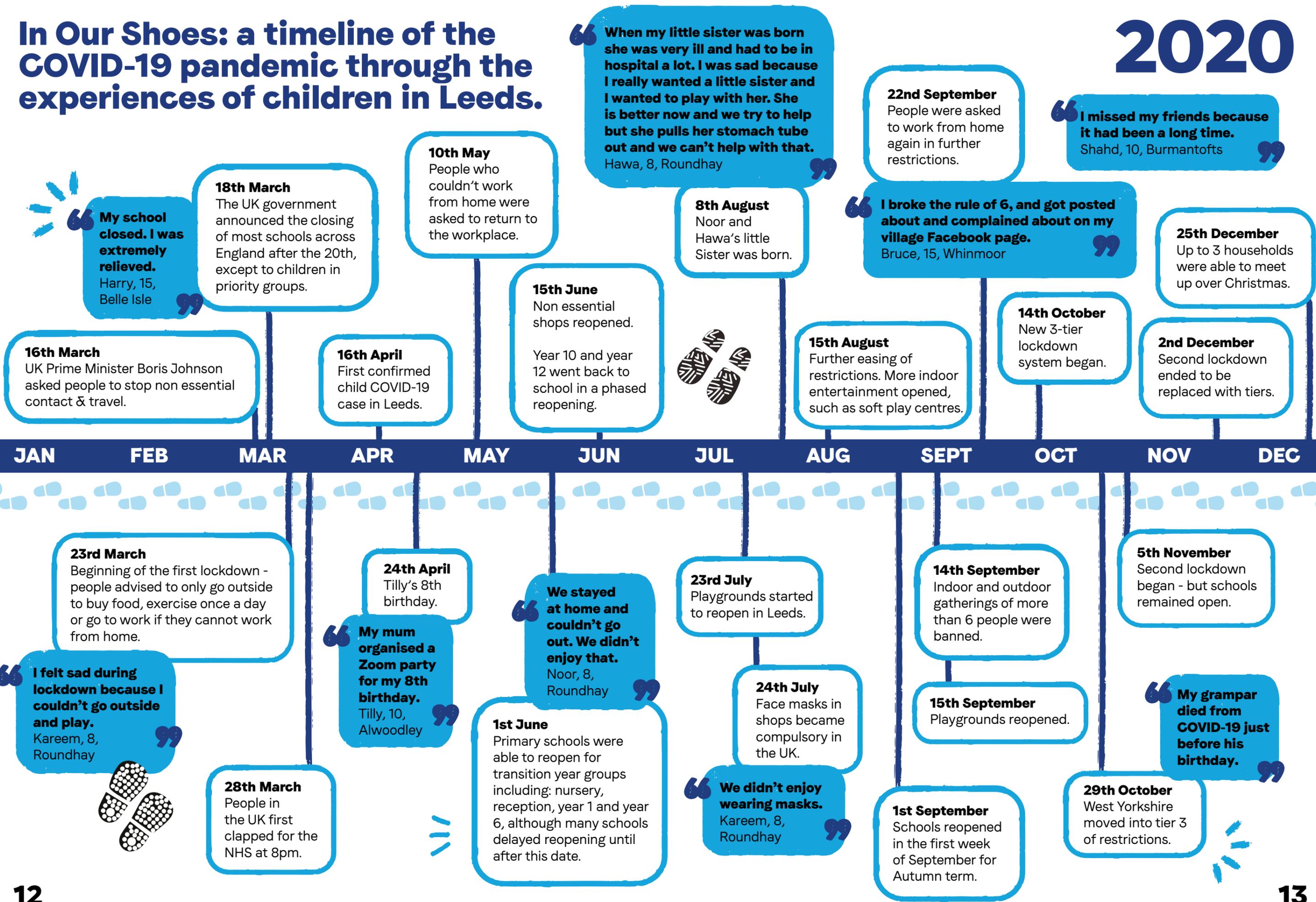
including English and Maths. The overall achievement is known as Attainment 8.
5 Rate per 100,000.
6 Leeds residents in highest air pollution vulnerability decile - Nitrogen Dioxide (NO2).
7 Percentage of children and young people in

Leeds estimated to live in household with any one of the 'toxic trio' (domestic violence or parental mental health or parental substance abuse).
8 Leeds residents in highest air pollution vulnerability decile - Particulate Matter (PM2.5).

Find out more about Leeds Health Population Data.

In Our Shoes: a timeline of the COVID-19 pandemic through the experiences of children in Leeds.

2020



My school closed. I was extremely relieved.
Harry, 15, Belle Isle

18th March
The UK government announced the closing of most schools across England after the 20th, except to children in priority groups.

10th May
People who couldn't work from home were asked to return to the workplace.

When my little sister was born she was very ill and had to be in hospital a lot. I was sad because I really wanted a little sister and I wanted to play with her. She is better now and we try to help but she pulls her stomach tube out and we can't help with that.
Hawa, 8, Roundhay

22nd September
People were asked to work from home again in further restrictions.

I missed my friends because it had been a long time.
Shahd, 10, Burmantofts

16th March
UK Prime Minister Boris Johnson asked people to stop non essential contact & travel.

16th April
First confirmed child COVID-19 case in Leeds.

15th June
Non essential shops reopened.

Year 10 and year 12 went back to school in a phased reopening.

8th August
Noor and Hawa's little Sister was born.

I broke the rule of 6, and got posted about and complained about on my village Facebook page.
Bruce, 15, Whinmoor

25th December
Up to 3 households were able to meet up over Christmas.

14th October
New 3-tier lockdown system began.

2nd December
Second lockdown ended to be replaced with tiers.

15th August
Further easing of restrictions. More indoor entertainment opened, such as soft play centres.

JAN FEB MAR APR MAY JUN JUL AUG SEPT OCT NOV DEC

23rd March
Beginning of the first lockdown - people advised to only go outside to buy food, exercise once a day or go to work if they cannot work from home.

24th April
Tilly's 8th birthday.

We stayed at home and couldn't go out. We didn't enjoy that.
Noor, 8, Roundhay

23rd July
Playgrounds started to reopen in Leeds.

14th September
Indoor and outdoor gatherings of more than 6 people were banned.

5th November
Second lockdown began - but schools remained open.

I felt sad during lockdown because I couldn't go outside and play.
Kareem, 8, Roundhay

My mum organised a Zoom party for my 8th birthday.
Tilly, 10, Alwoodley

1st June
Primary schools were able to reopen for transition year groups including: nursery, reception, year 1 and year 6, although many schools delayed reopening until after this date.

24th July
Face masks in shops became compulsory in the UK.

15th September
Playgrounds reopened.

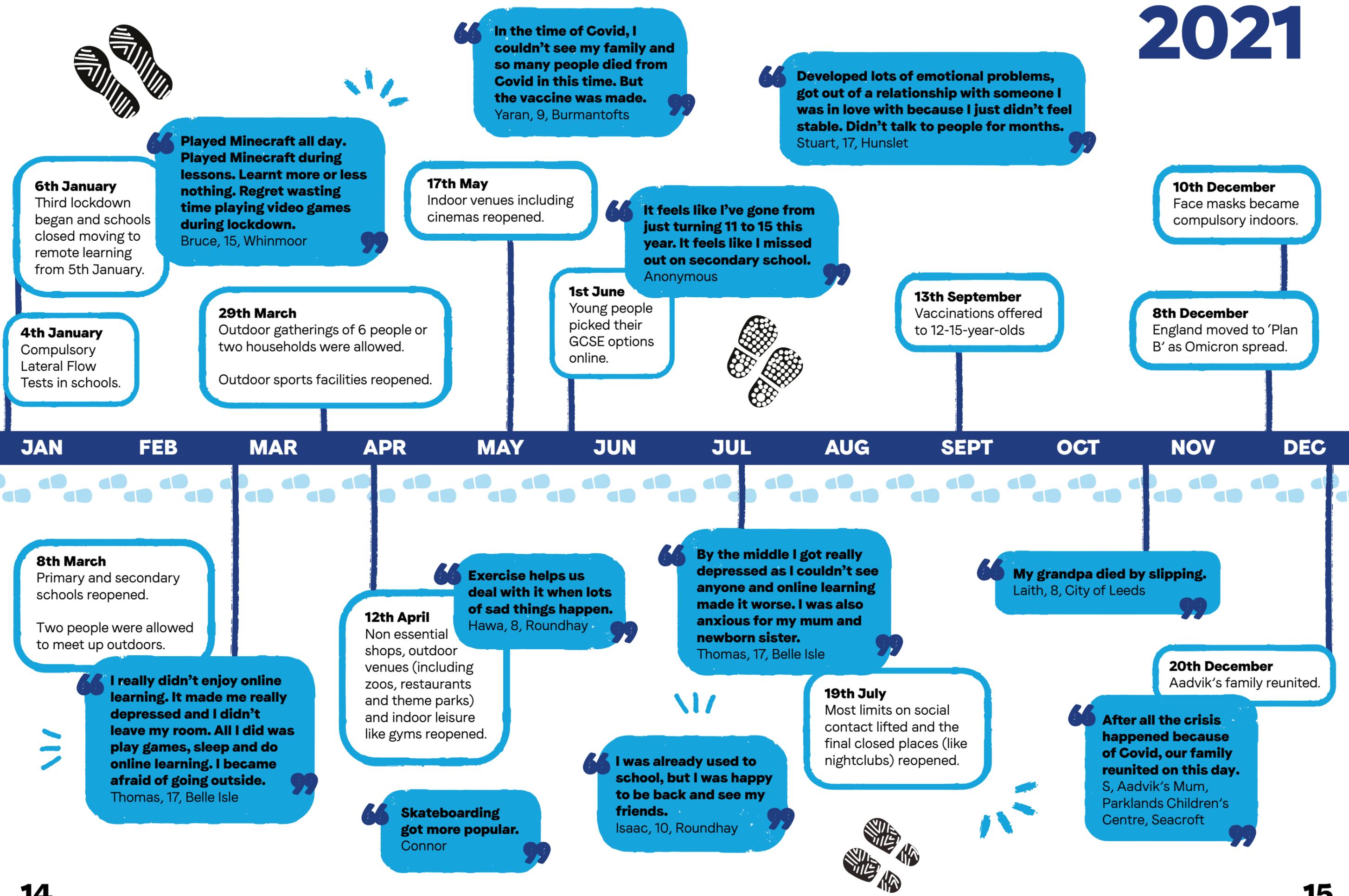
My granpar died from COVID-19 just before his birthday.

28th March
People in the UK first clapped for the NHS at 8pm.

We didn't enjoy wearing masks.
Kareem, 8, Roundhay

1st September
Schools reopened in the first week of September for Autumn term.

29th October
West Yorkshire moved into tier 3 of restrictions.



19th January

The UK Prime Minister Boris Johnson announces that all restrictions introduced to limit the spread of the Omicron variant of COVID-19 are to end on 26 January 2022.

1st February

NHS offering vaccines to vulnerable children aged 5-11.

6th May

Government published guidance on Living with COVID-19.

I adore my Daddy and Mummy says our bond is even stronger because he was there 24/7 in the beginning.

Teddy, 3, (written by Teddy's Mummy)

[In the pandemic] I played Xbox way too much, it was so depressing...so now I can go outside and do stuff, I do it as much as I can.

Thomas, 17, Belle Isle

Sometimes in loud or aggressive environments, I get extremely overwhelmed to the point where I'm non-verbal, which still happens.

Stuart, 17, Hunslet

JAN

FEB

MAR

APR

MAY

CHILDREN'S LIVES NOW

4th April

NHS offering vaccines to general population of children aged 5-11.

24th February

The legal and mandatory self-isolation period for those with COVID-19 ends in England, although the guidance for those who test positive to stay at home will remain until April 2022.

27th January

In England, all regulations on face coverings and COVID-19 vaccination passes are lifted, as the country returns to Plan A restrictions.

Covid helped me find what I love now and what I'm going into further education for.

Harry, 15, Belle Isle

Even now, there's still some stuff [services] that haven't resumed. You think: "when is it all going to be back on track?". It's the uncertainty that's hard. Some Mums have definitely slipped through the net.

Eva, parent to Reggie, 15 months

I feel scared.

Watch Hazel, 4, talk about what makes her feel scared now.

COVID-19 forced people to stay in and school clubs and activities had to stop. Children struggled, became lonely and isolated. This affected children's mental and physical health. Now everything is more expensive so families are struggling.

Mason, Leeds Children's Mayor

Children's mental health

“

My school closed very early on in the pandemic. I had been excluded about 3 weeks before. Covid was the best thing that could have happened. I no longer had the exhausting weight of people's perspectives, nobody could judge me and I could focus on myself. Our school didn't have lots of work for us so I spent a lot [of time] in online counselling and researching what was actually happening.

”

Harry, 15, Belle Isle

What did children experience?

Children's experiences throughout the pandemic varied greatly. Some children and young people felt the lockdown experience reduced their stress levels. For example, lessening the likelihood of bullying or social anxiety. In fact, 22% of the 7,253 Leeds pupils who completed a [wellbeing survey](#) in spring 2021 reported improvements to their mental health during lockdown.

However, in general there has been a significant deterioration in the mental health of children and young people in Leeds. Factors include the disruption to children's education and social development; their ongoing worries about lost education; impact on their future and the wider impacts of the pandemic on families.

“

There is a lot of uncertainty; mental health issues are very common. Young people seem disillusioned, disconnected. They feel they've been abandoned.

”

Young People's Housing Support Worker

In our survey, teachers, educational psychologists and youth workers all pointed to high levels of school absence in 2021-2022 that could be linked to children and young people's mental health. Emotionally Based School Avoidance (EBSA) has been identified as a challenge for the education system. Professionals supporting families with SEND have identified that some

parents are reluctantly opting to home-school their children. This is seen as an alternative to putting their children through absence-management procedures.

The high levels of distress experienced by children and young people during the pandemic are reflected in referral rates to mental health support services in Leeds. According to local NHS data, between 2020 and 2022, MindMate Single Point of Access referrals increased by 50%. The eating disorders service saw an unprecedented rise in referrals of 329%. Referrals for autism assessments increased by 70% between 2019 and 2022.

The relationship between increasing poverty and worsening mental health is more apparent as families have been pushed further into poverty by the pandemic. During the peak of COVID-19, [substantially more referrals](#) for mental health support for young people were made by people living in the most deprived areas than those in least deprived areas. Young people from the 10% most deprived areas also experienced around twice the number of mental health crises than young people from the 10% least deprived areas. The Leeds My Health, My School survey indicates that, on average, pupils eligible for Free School Meals report lower levels of wellbeing.

A significant number of children and young people also lost loved ones. 24% of respondents in the 2021 wellbeing survey said someone in their family had died over the past year. And 1.9% lost a parent or carer.

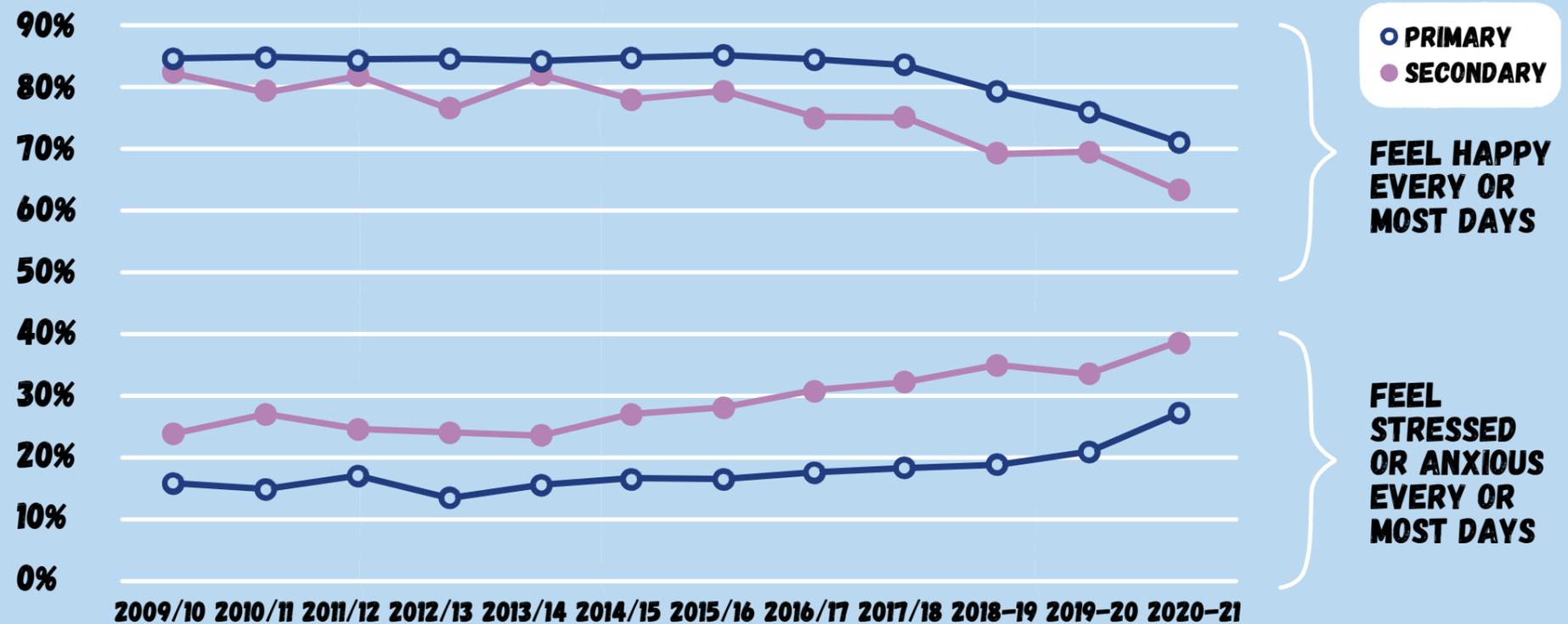
Why is this important?

Mental health can impact on all aspects of children's lives including relationships, educational attainment and physical wellbeing.

Mental health is seen as a priority issue by children in Leeds. More than 80,000 contributors to the [Child Friendly Leeds 12 wishes](#) identified support for mental health and wellbeing as a high priority.

Even before COVID-19, children's happiness levels had been falling. At the same time, stress and anxiety levels had steadily increased. In 2021, the [My Health, My School survey](#) showed that 19% (1,948) of primary pupils and 33% (2,222) of secondary pupils in Leeds reported feeling stressed or anxious everyday or most days. The survey also indicated that 25% of secondary-aged pupils had thought about taking their own life. Disabled students were 1.78 times more likely to think about ending their life. Students identifying as LGBTQ+ were 2.52 times more likely to consider ending their life.

Proportion of children in primary and secondary school feeling 'happy every or most days' and 'stressed or anxious every or most days'



“**Young people often talk about feeling overwhelmed by the demands of school, they just can't face it because they're struggling with their mental health.**”
Youth Worker



33%
of secondary pupils reported feeling stressed or anxious.

25%
thought about taking their own life.

“**I really didn't enjoy online learning. It made me really depressed and I didn't leave my room. All I did was play games, sleep and do online learning. I was afraid of going outside.**”
Thomas, 17, Belle Isle

How are children in Leeds supported?

Child Bereavement UK Leeds

This is a specialist bereavement support service. It helps Leeds-based children and young people aged up to 18 (up to 25 years old with SEND) when someone important to them has died or is not expected to live. The service provides free, confidential, pre-bereavement and bereavement support in school, in a community space local to the family or at their centre in Hunslet.

Child Bereavement UK Leeds also provides free face-to-face and online training for practitioners. This helps them to improve their knowledge around bereavement and improve confidence in supporting children and young people.

#SpeakUpLeeds

A [Health Needs Assessment](#) in 2019 exploring mental health ethnic inequalities for children and young people identified that Black boys are under-represented in mental health support services in Leeds. Focus groups highlighted a lack of trust in services and a high level of stigma around mental health.

Further insight sessions with 31 boys across Leeds (including a core group at Carr Manor Community School) explored their personal experiences as Black boys and how this affects their mental health. The boys realised the benefits of talking about this and wanted to encourage others to do so too, resulting in the co-development of the [#SpeakUpLeeds campaign](#).

Short social media films and a ten-minute in-depth [film](#) were produced to raise awareness of their experiences and normalise talking about mental health. Learning from #SpeakUpLeeds is currently being built into developing groups around racial identity and mental health within other schools.

“I don’t think there’s a lot of coverage of Black boys that have done well. It’s more what they’ve [done] wrong or how they’ve been treated badly, so I think that creates a negative view of Black boys as a whole.”

“I enjoyed getting to talk to other people who were in the same situation as you - it made you proud to be Black.”



MindMate

The [MindMate website](#) provides information about self-help and support services related to children and young people's mental health. Young people share their experiences via blogs by MindMate Ambassadors (young people with personal experience of mental health difficulties). These are also shared in the film-based section of the website 'Real Stories', with the aim of reducing stigma and encouraging others to seek help.

Young people, parents and professionals are involved in the continual developments of the website, such as the new [Neurodiversity Hub](#). Social media promotion, printed resources and signs installed in parks and schools aim to raise awareness of the website.

Schools can access [MindMate projects](#) to support a whole-school approach to mental health. Resources include:

- **MindMate Champions (a self-assessment audit tool);**
- **MindMate Curriculum;**
- **MindMate School Ambassadors (a pupil leadership training package to support pupils to run their own mental health projects).**



Leeds Resilience Programme

This programme delivers in-school sessions to children and young people displaying, or at risk of, poor social, emotional and mental health. This evidence-based programme aims to provide children and young people with the skills to manage their emotions, behaviours and attitudes. It teaches them to cope effectively with difficult situations. It also helps them develop the capacity and confidence to make informed decisions to manage and improve their own health and wellbeing. The programme covers six key areas: activities and interests, physical health, mental health, sleep, support systems and achievements.

I want this group to continue because it helped me feel better and have more confidence, it also made me want to come to school and feel better about myself.

Primary School Pupil



Parental mental health

“**Parents who are struggling are having to support struggling children.**”

Child Psychotherapist



What did children experience?

The pandemic put a lot of stress and strain on parents. Causes included fear and uncertainty about the pandemic, supporting home-schooling, worries about finances, and concern about family health and wellbeing. Many parents felt socially isolated. New mothers had limited opportunities to connect with others.

There was an increase in depression and anxiety among parents during lockdowns. [One study in Bradford and London](#) found that 28% of mothers reported depression and 21% reported anxiety symptoms during the first lockdown. Families living in poverty were at the greatest risk of mental ill health.

Leeds 0-19 Public Health Integrated Nursing Service (PHINS) reported using the adult mental health pathway around 1,200 times in 2021/22. In the first three-quarters of 2022/23, this had reduced to 800 times.

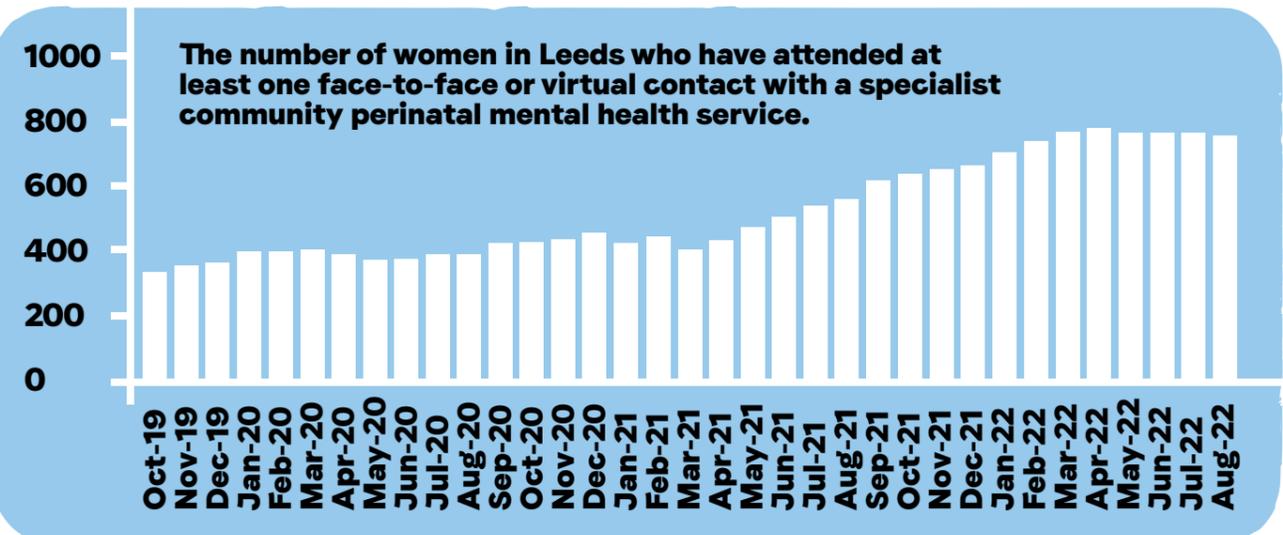
The chart below shows the number of women in Leeds who have attended at least one face-to-face or virtual contact with a specialist community perinatal mental health service.

In Leeds, our partners, and the families and children we spoke to, reported parental mental health issues as a key concern during the pandemic. In particular, there were concerns about levels of anxiety, including social anxiety. Parents reported feeling guilty, for example, around the time their children spent using screens. They also felt isolated with limited support. For some, the return to normal life was challenging. We heard stories from children and young people about their parents developing mental health issues and how it affected them.

The impacts on families were unequal. When there were mental health issues before the pandemic, families have been more vulnerable and less resilient. Partners were concerned that if the emotional needs of parents are not met, the emotional needs of children are not met either.

“**I have become more anxious and suffer with anxiety since the pandemic - now on medication.**”

Katie, Parent



Why is this important?

For children, the mental health of parents has wide-ranging impacts on family life and how their parents can support and engage with them. Maternal depression can have impacts on children's health and development as they grow up. This can include less secure attachment and increased behavioural problems. Parents who have positive mental health and wellbeing are more able to support their children's needs and development.



How are children and families in Leeds supported?

Children's Centres

During the pandemic lockdown period, Children's Centres adapted their core offer to ensure continued engagement with families via:

- **socially-distanced outreach visits;**
- **using online platforms.**

This was extended to outdoor 'walk and talk' sessions as restrictions lifted. The counselling service adapted face-to-face sessions to online delivery and now offers a hybrid model to ensure the service is more accessible to all.

Children's Centres supported online sessions of 'Preparation for Birth and Beyond' classes, along with other parenting programmes such as [HENRY](#). Staff supported families with weekly welfare visits whilst delivering food parcels, vouchers and supplies of nappies. As groups have now resumed, the focus is still very much on reconnecting families via activities such as:

- **family learning courses;**
- **weekly Play and Stay sessions;**
- **breastfeeding peer support groups.**

Many Children's Centres offer a volunteering programme. One volunteer said "I missed my normal volunteering at the children's centre and it really impacted my mental wellbeing. It's great getting back to the centre now, especially when helping others in my community."

Roadshow summer events were delivered to reconnect communities as restrictions lifted. A '5 Ways to Wellbeing' Family Learning Course took place at both Burley and Little London in response to the aftermath of COVID-19.

Course themes included:

- **Take notice;**
- **Random acts of kindness;**
- **Connect;**
- **Keep learning;**
- **Be active.**

Activities included:

- **Mindfulness for the whole family;**
- **Kindness bingo;**
- **Worry dolls;**
- **Learners' skills-share - celebration of skills sets;**
- **Family activities - den building, parachute games, balloon tennis.**

Baby Steps

Baby Steps is an evidence-based perinatal education programme for families with additional needs. [The NSPCC developed the programme](#) in partnership with Dr Angela Underdown. It incorporates the latest findings from research into infant mental health. This helps strengthen relationships and improve outcomes for babies.

The overall aim of Baby Steps is to optimise parents' and babies' health and wellbeing and promote protective factors including sensitive parenting and secure attachment. In Leeds, Baby Steps is delivered by a multidisciplinary team comprising:

- **Health Visitors (Leeds Community Healthcare);**
- **Midwives (Leeds Teaching Hospital Trust);**
- **Family Support Practitioners;**
- **Social Workers (Leeds City Council).**

Reasons for referral include:

- **mental health issues;**
- **domestic violence;**
- **substance misuse;**
- **teenage pregnancy;**
- **living in poverty.**

In 2021/2022, the team received 264 referrals and 20 groups were delivered. 122 parents attended at least one session. Many families then go on to access other supportive services within Children's Centres and more widely.

Children's physical health

Poem by Attia, 15, Meanwood

Get out of a slump
I'm in a slump, I'm feeling stressed
It's really bad, I feel depressed

That COVID thing just beat me down
My smiling face took on a frown
I couldn't see my closest friend
Oh when, oh when, would this thing end
And Zoom fatigue was all too real
At times I felt I couldn't feel
I stayed at home to do my work
While stuck inside, I went berserk

Because of this, things don't get done
I'm really down, this is not fun
I eat too much I'm on a binge
To weigh myself I'd surely cringe
I've weathered thick and worried thin
I know I'll thrive, I'll not give in

It's hard right now it's really bad
This soon will pass, I'll feel more glad
But then I reach a friend who's dear
Reminding me to get in gear

The hope I find within my reach
It stretches far, and endless breach
Quite quietly I clench my fist
And vow once more that I'll persist
The turning point is getting near
Beginning now, I'll get in gear
I tell myself the ways is clear
To sally forth and get in gear
I know today I have no fear
I'm on my way, I'm now in gear
And this will be my greatest year
As I decide to get in gear



What did children experience?

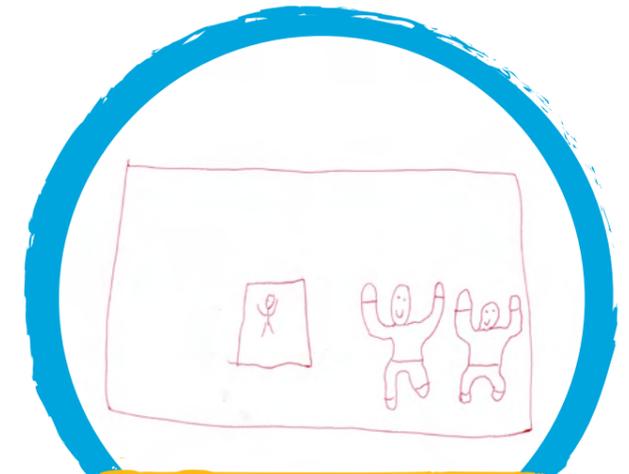
Children's routines were significantly disrupted during the pandemic. This affected their sleep, eating, and activity levels.

In July 2020, a [Children's Commissioner report](#) identified 40% of 14-19 year-olds in England were snacking more than usual. Difficulties with sleep were [reported nationally](#) by 57% of 17-19 year-olds and 29% of 6-10-year-olds.

Children had fewer opportunities to engage in physical activity and were more sedentary, with screen time significantly increasing. The [Active Lives survey](#) showed 50% of children in Leeds achieved recommended levels of physical activity in the academic year 2018/19. This fell to 43% in 2019/20. Activity levels varied significantly, however, with 35% of children in the [Leeds Pupil Wellbeing survey](#) reporting increased activity in 2020. Children from affluent areas, those of a white ethnic background, and who were not disabled, were more likely to be active.

Professionals responding to our survey observed that families with no access to green space experienced the most severe impacts of lockdown measures. According to the [Office for National Statistics](#), one in eight British homes have no garden. Black people are more than four times as likely as white people to have no outdoor space. This made it particularly difficult for some families to be active in lockdown.

Access to adequate amounts of healthy food was also an issue for many. During lockdown, food security reduced.



Me and my brother doing Joe Wicks.

Alex, 10, Burmantofts

Children from low-income households were significantly less likely to have adequate food. In 2020/21, the number of people in Leeds accessing food banks [increased by 47%](#) compared to the previous year. Although a scheme to continue free school meals was put in place, [one study found that](#) only half of eligible children in the UK had access to it.

In our survey, professionals frequently referenced the difficulty of maintaining a healthy routine during the pandemic. Families also found it difficult to resume routines once lockdown measures were relaxed. For some, the issues with sleep, activity and eating habits that arose during lockdown have now become ingrained.

In Leeds, 9.9% of Reception children and 25.1% of Year 6 children were living with obesity in 2021/22. Pre-pandemic obesity levels were similar for Reception (10.1% in 2019/20), but there was a significant increase in Year 6 children living with obesity (from 20.8% in 2019/20).

Why is this important?

[Sleep is closely linked to mental wellbeing.](#)

Good sleep helps to:

- regenerate the brain and body;
- boost immunity;
- support learning and concentration;
- guard against both stress and obesity.

Children who are overweight or obese are more likely to develop ill health, including diabetes, poor mental health, and tooth decay. There's also [an elevated risk](#) of developing conditions such as heart disease in adulthood. Obesity and inactivity are closely linked. Children who aren't active are [more likely](#) to be overweight. When children are inactive, they are also [less likely](#) to:

- experience good academic outcomes;
- build strong bones, muscles and a healthy heart and lungs;
- maintain mental wellbeing and good self-esteem;
- develop physical skills for life.

Childhood obesity, and inactivity, are not experienced equally across all parts of society. Children in the most deprived areas of Leeds are [three times more likely](#) to be obese than those in the least deprived areas. Obesity rates are also higher in children from some ethnic backgrounds. The relationship between food insecurity and

obesity is complex. However, one thing is clear – the impact on mental health is significant. Children in Leeds who experienced food insecurity were identified as [three times more likely](#) to feel stressed or anxious than those who had adequate access to healthy food.

The environment children live in can make it difficult for them to be active and eat healthily, and the pandemic exacerbated the environmental inequalities that strongly influence children's health.



“

PE is my favourite subject, because I can just play. In home learning, they gave us exercises but it wasn't as good.

Shahd, 10, Burmantofts”

“

My brother made me do exercise with him every night outside in my back garden.

Child, Leeds”

How are children in Leeds supported?

The Leeds Children's Mayor - Leeds Schools Olympics

Leeds Children's Mayor is a local democracy programme delivered by the Voice, Influence and Change team for schools, in partnership with the Democratic Services department. In total, 7,870 children voted for Mason Hicks as Leeds Children's Mayor 2022/23, from a shortlist of 12 candidates. His manifesto is focused on raising awareness of children's mental and physical health. Mason's ambition is to create a 'Leeds Schools Olympics' that all schools can take part in, with an emphasis on inclusion. The idea is to bring together children from all backgrounds, including children who are refugees, and those with special needs.



Children's Mayor, Mason, meeting His Majesty, King Charles III, in November 2022

DAZL

DAZL (Dance Action Zone Leeds) Dance & Health Charity uses dance as a creative pathway to engage communities and improve their physical and mental health. DAZL engages 6,500 young people each year across Leeds, delivering activities in 23 of the 33 Leeds City Council Wards. During the first national lockdown, DAZL offered Garden Groovers sessions to communities across Leeds. This provided outdoor dance opportunities that brought families together safely, to be active and have fun.

DAZL co-delivers the Leeds Family Healthy Living Service commissioned by Leeds Public Health, which promotes and supports healthy lifestyles.



More than 3,000 children accessed free intensive swimming lessons with Active Leeds

Active Leeds accessed Holiday Activity Funding to provide free one-week intensive swimming courses for children eligible for Free School Meals in 2022. To date, over 3,000 children have accessed the lessons with:

- 🎯 **100% gaining water safety knowledge;**
- 🎯 **65% progressing from non-swimmer to beginner;**
- 🎯 **20% able to swim unaided for five metres, which is significant progress for all the children involved.**

Community-run organisation Bramley Baths has been active in supporting the COVID-19 recovery, with crash courses for swimming, school swimming lessons, and programmes to reduce social isolation and develop its community garden space.

Healthy Holidays and post-COVID swimming

Learning to swim is an important life skill. It saves lives, as well as supporting physical and mental wellbeing. The national curriculum target is that all children can swim 25 metres unaided on leaving primary school and schools work hard to achieve this.

However, only 35% of children from low-income families in England met this target in 2021/22. Children from some ethnic groups are also less likely to swim, compounding this inequality. Many children only learn to swim through school, and for those currently in Years 5-7, who missed lessons in lockdown, this window of opportunity is closing.

“
In the pandemic I read a lot and laid on the couch.”
Gabriella, 10, Chapeltown

“
I felt very energetic because I was not going out enough.”
Maxwell, 8, Roundhay

“
I [only] used to sleep every 3 days, it made me feel exhausted.”
Aland



The HENRY 5-12 Healthy Families Growing Up Programme

The HENRY 5-12 Healthy Families Growing Up Programme launched in September 2021. Delivered by the Leeds Health and Wellbeing Service, the programme builds on the success of the HENRY approach in early years. The programme includes an eight-week course which supports families to make changes for better health, exploring key themes such as:

- **emotional wellbeing;**
- **whole family lifestyle habits;**
- **food;**
- **parenting;**
- **physical activity.**

To date, 120 families have engaged across 14 completed courses. Programme evaluation shows the approach is making a difference to families' lives and wellbeing. Courses are offered in areas of Leeds where levels of overweight and obesity are known to be higher, therefore engaging families most likely to benefit.

Facilitators from a range of community organisations have been trained, including primary school staff, which means courses can be delivered across multiple settings.



Bite Back

It should be easy to eat healthily, but it isn't. [Bite Back 2030](#) believes that all young people should be surrounded by affordable, nutritious food. This means at school, on the high street, and on screens.

Bite Back 2030 works with eight young campaigners in Leeds who aim to make the city a healthier place to live. Sneha, Zainab, Asher, Mahnaz, Liya, Amelia, Alex, and Emmanuel are part of a national movement of around 100 young campaigners who are committed to fixing the broken food system.

The young campaigners recently headed to Westminster to call on the government to extend free school meals to all children living in poverty. In Leeds, the young campaigners are launching a research project in schools to ask young people about the impact their school food has on their health.



Bite Back delivers petition to Government

Poverty, housing and where we live

What did children experience?

The experiences of the pandemic varied widely. This depended on:

- 📍 **where they lived;**
- 🏠 **what their housing was like;**
- 💰 **how much money their family had.**

The pandemic brought increased pressure and stress when lots of families were already finding it difficult to afford everything needed for a healthy life. By December 2020, [nearly 6 million people](#) in the UK were claiming Universal Credit - twice the pre-pandemic figure.

Studies between 2020 and 2022 found children living in poverty experienced greater impacts on their education, health and wellbeing as a result of the pandemic. For many, this included [poorer mental health](#). These families experienced [greater impacts](#) from the reduced access to health services, especially dentistry. Many children [started](#)

[falling behind \(or further behind\) in school](#). Some families endured lockdown in homes that were unsafe, overcrowded, or not warm enough for good health.

A range of COVID-19 support was provided to those facing financial hardship in Leeds. This included over 150,000 food parcels given via Community Care Hubs. More than 60,000 people in the city accessed a foodbank in 2020/21 - a 47% increase on 2019/20. To better support children's sleep and learning, Leeds charity Zarach distributed [2,950 bed bundles](#).

Despite this #TogetherLeeds approach, social and economic impacts linked to the pandemic have caused ongoing financial insecurity for many families. This has been made worse in 2022/23 by crises in the national economy. In Leeds, the percentage of children under the age of 16 [living in low income families](#) increased:

- 📊 **17% in 2015**
- 📊 **25% in 2021**

“ **I live in a flat and I didn't like it during Covid. I felt separated.**
Samuel, 10, Burmantofts ”

This equated to an additional 13,500 children.

Fuel poverty has been a particular burden, especially for families already experiencing pandemic-related issues such as job loss, long-term illness, or bereavement. In 2018, 10.3% of households in Leeds [experienced fuel poverty](#). By 2020, this had shot up to 17.6% - significantly higher than the national average.

The private rented sector has the [highest levels of fuel poverty](#). Less than 8% of owner-occupier households in the UK are classed as fuel-poor, compared to 19% of households in rented accommodation. High numbers of families in Leeds live in private rented accommodation. Many of these are in the Inner East and Inner South of the city. These areas have been identified as having the [poorest standard](#) of accommodation in the city. Leeds also has the [highest rental costs](#) in the region. More than 26,000 people in the city are registered as [seeking access to social housing](#). 11,300 of these have dependent children.

Our partners told us lockdown was worse for families living in high-rise flats or overcrowded housing, with no gardens or access to green space. They noted growing gaps in child development, health and learning between families who were living in poverty and families with more money. Their experiences suggested that families with more money found it easier to recover after COVID-19 restrictions ended.



“ **We've seen many, many families go into crisis as a result of the pandemic. They need support today before we see a wave of huge issues flood the system.** ”
Charity CEO

“ **The gap between rich and poor has been widened by the pandemic.** ”

Clinical Director,
Leeds Children's
Hospital

Why is this important?

Health and wealth are closely linked, and this is especially the case for children. An evidence review found that children living in poverty are more likely to:

- die in the first year of life;
- be born small;
- become overweight;
- do less well in school;
- die in an accident.

Children growing up in poverty also have a higher risk of ill health later in life. This includes cancers, heart disease and respiratory conditions. Overall, they will have poorer life chances.

Where children live, including the condition, affordability, location, and stability of their housing, has a wide-ranging impact on their early health and development. Fuel poverty leads to cold homes for children. This can also cause issues with damp and mould, causing harm to children's respiratory health in the short and long-term. It can also have wider impacts on children's education, health and wellbeing. These impacts are made worse because families often cut back on spending in other areas that affect health, in order to pay for fuel bills.

“The impact was not uniform. It was far more detrimental to vulnerable families - those on low incomes, whose children have SEND, or who were already struggling with mental health issues.

Deputy Headteacher,
Primary School



How are children in Leeds supported?

Fuel poverty support

In 2022, £339,000 was granted by the West Yorkshire Health and Care Partnership to assist households in Leeds at risk of fuel poverty. The funding is targeted at households most in need. For example:

- Where someone is clinically extremely vulnerable.
- Where they are at risk of hospitalisation due to illnesses related to cold weather.

GPs will identify patients from low-income households who are likely to benefit from the scheme and refer them to [Home Plus Leeds](#). Up to 50,000 households will be contacted to raise awareness and provide advice on fuel poverty and wellbeing. 450 households will be directly assisted to reduce fuel poverty. 175 homes will receive a heating intervention.

“

Some parents lost their jobs as they had to stay at home due to school closures, which impacted on their mental health. Now, with the cost-of-living crisis, families are being pushed to the brink of desperation.

”

Worker, Kidzclub Leeds

Health and planning

The natural and built environment that children and young people grow up in can have a significant and enduring impact on their physical and mental health. A partnership of Public Health and Planning colleagues, working alongside Transport, Parks & Countryside and Active Leeds, has been established to support making places more healthy. The work of this group includes:

- shaping planning policies for health and wellbeing in the draft Local Plan Update;
- establishing a more formalised consultation role within the planning application process to manage the impact new developments have on health;
- monitoring the effectiveness of the Hot Food Takeaways Supplementary Planning Document, which limits the provision of hot food takeaways close to secondary schools.

Children's safety



What did children experience?

The 'stay at home' requirements of lockdown exposed some children and young people to increased risk of adverse experiences. This was mainly because access to safe spaces outside the home was restricted. Opportunities to identify children and young people living in unsafe or challenging situations were also notably reduced. Normally, universal services like schools, health, and youth services help detect early signs of abuse and neglect. All these had either paused or reduced face-to-face delivery to comply with pandemic control measures.

In these circumstances, many children felt unsafe at home. In a 2021 [Wellbeing survey](#) completed by 7,253 children in Leeds, 16% said they were worried about increased arguing in their family, and 7% identified they'd been physically hurt by someone in their household.

Links between domestic violence and alcohol are well established. Alcohol consumption [increased](#) during the pandemic. Research from North East England showed the rate of increase was [much higher](#) in parents than non-parents.

It's estimated that [19.8% \(33,580\)](#) of children and young people in Leeds live in a household with one of the so-called 'trio of vulnerabilities.' This comprises domestic violence, parental mental health problems and parental substance misuse. These issues often co-exist, particularly in families where significant harm to children has occurred.

Modelling data from the [2020 Children's Commissioners Vulnerability Report](#) found that, of children in Leeds:

- 7.30% were estimated to live in a house with domestic violence;
- 5% lived in a house with parental drug and alcohol misuse;
- 15% lived in a house with parental mental health problems;
- 1.2% (1,994) of children and young people were estimated to live in houses with all 3 of the trio of vulnerabilities.

Read the Children's Commissioners Vulnerability Report

It is highly likely that these figures underestimate the true position. Local data on reported incidents of domestic violence

cases shows this figure to be closer to 27%, rising to 30% during the pandemic. The number of incidents was [higher in more deprived wards](#).

Young people can also become victims of domestic violence through their own partner relationships. Results from the My Health My School Survey 2020/21 showed:

- 18% of secondary pupils felt pressured by a boyfriend/girlfriend to have sex;
- 21% (421) of secondary pupils said they need better information and learning about 'safe and unsafe relationships'.

Many missed out on Personal, Social and Health Education (PSHE) during the pandemic. In 2021, more than 50,000 young people shared experiences of sexual violence with the [Online Safety Commission](#), often from peers. Partners also told us they were concerned some young people were seeing harmful content online. They felt this had worsened due to increased time spent on screens in the pandemic.

My mum developed severe mental illness during lockdown and I had to move in with my grandparents which is still difficult as my mum still calls up upset. She cried and threatened to hurt herself a lot, and it was scary.

Young Person, Leeds



Why is this important?

The 'trio of vulnerabilities' can be damaging for children's wellbeing and outcomes. The presence of domestic abuse in the home is a risk factor for child physical abuse and neglect. [NSPCC research](#) on the potential impact of the COVID-19 pandemic found that the risk of child abuse was higher when caregivers became overloaded by the stressors in their lives. This included those stressors experienced by many during the subsequent lockdowns. Together with the reduction in normal protective services available, children and young people were at increased risk of harm.



How are children in Leeds supported?

Family Plus Service

The Forward Leeds Family Plus team works to ensure that families receive a rounded package of early help when a parent or carer is in drug or alcohol treatment.

Interventions offered include:

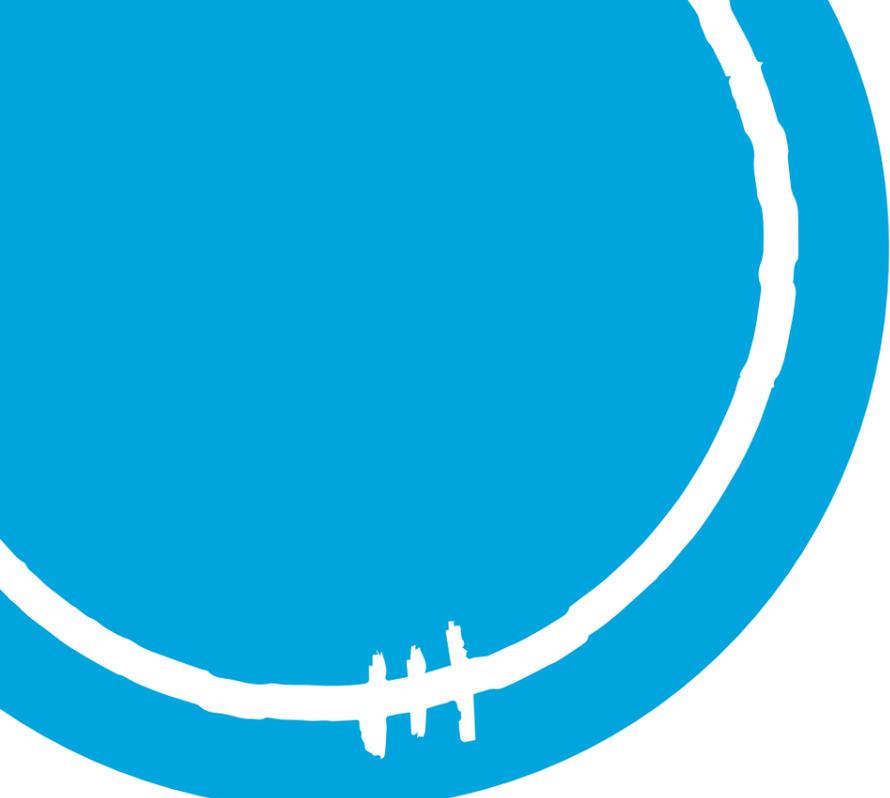
- **support with routines and boundaries;**
- **facilitating groups and activities for families to spend positive time together;**
- **exploring challenging behaviour in children, and looking at ways to manage this;**
- **support with building and strengthening relationships with schools and/or nurseries;**
- **linking in with other services such as dentists, mental health support and routes to employment.**

Included in the offer is specialist one-to-one and group work provision for children and young people. This supports them with issues around emotional health and wellbeing. It also teaches drug and alcohol awareness to prevent children developing substance misuse problems.

[Forward Leeds](#) also has specialist Substance Co-ordinators based at the city's three [Early Help Hubs](#). Parents/guardians can access informal support and, if required, be referred to other relevant organisations.



The Family Plus service offers a holistic service to families where a parent or carer is accessing drug or alcohol treatment.



Women's Mental Health Matters - Breathe Free

The [Breathe Free](#) project aims to support women aged 16 and above who've experienced complex trauma, usually domestic abuse, and who may be at risk of having a child removed into care as a result.

Case Study

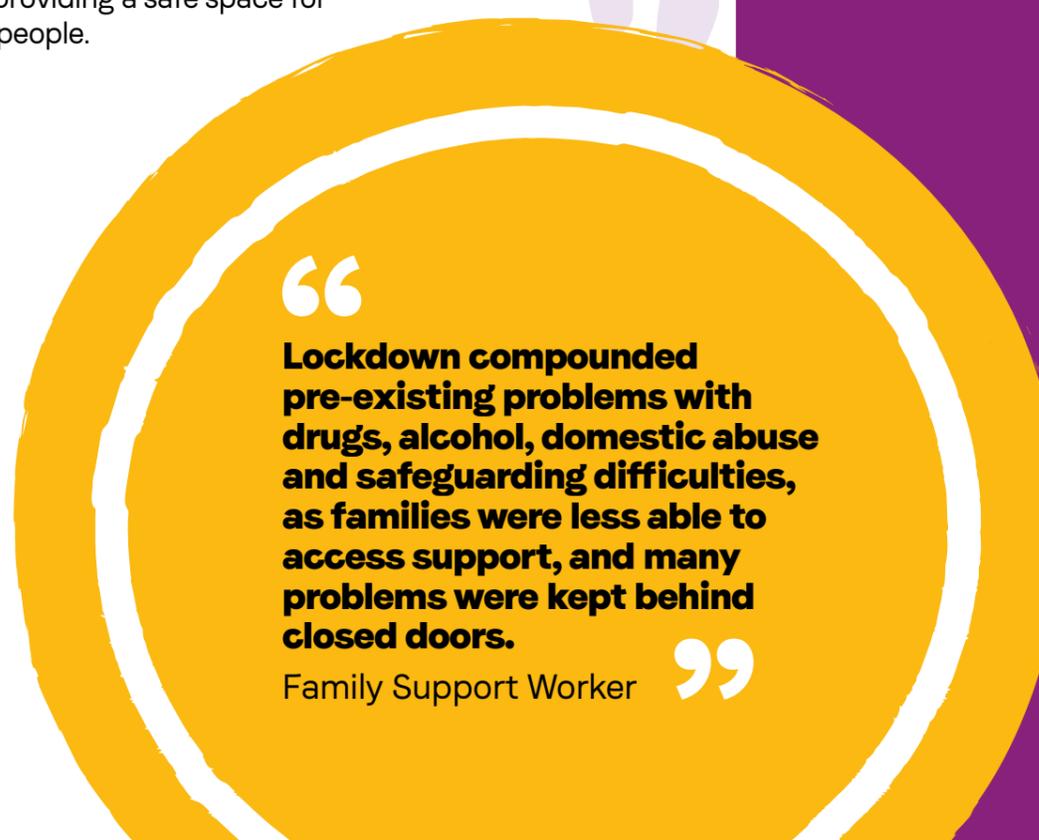
J was referred to Breathe Free following a separation from her abusive husband. She is a mum-of-two who is currently seeking asylum. English is her second language. Through her participation in Breathe Free, J has become more confident. She now understands her rights as a woman and knows that what happened was abuse. J reported allegations of rape and sexual assault against her husband to the police. Breathe Free staff advocated on her behalf with police and professionals involved in child contact arrangements, alongside offering emotional support. She is attending refugee and asylum-seeking support groups through Women's Health Matters and has become a volunteer with the organisation. She completed the Breathe Free course and is now set to deliver training for Leeds Beckett University.

SAFE Schools Partnership

The SAFE (Safe, Achieve, Fulfil, Exceed) schools partnership involves local organisations St Giles, GIPSIL, BARCA and Guiseley Community Foundation. SAFE schools is a response to the impact of disrupted schooling on children's safety. When children are not at school, this has a significant impact on their exposure to exploitation, especially for those experiencing inequalities. This continues to be an issue as more children are home-educated or absent from school. The approach offers training to school students and professionals on issues including knife crime, county lines and gangs, as well as toxic masculinity and building healthy relationships. It also offers after-school provision for children and young people who are identified as having:

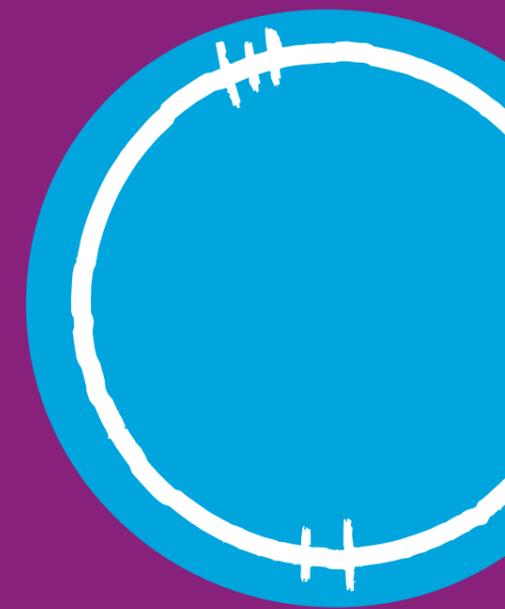
- **issues with attendance;**
- **contact with Social Services;**
- **involvement with gangs.**

By taking both a universal and targeted approach, the SAFE schools partnership encourages reflection, resilience-building, and aspiration raising as well as providing a safe space for vulnerable young people.



“
Lockdown compounded pre-existing problems with drugs, alcohol, domestic abuse and safeguarding difficulties, as families were less able to access support, and many problems were kept behind closed doors.
”

Family Support Worker



Play and screen use



What did children experience?

During the pandemic, playgrounds were closed. Children were unable to connect with friends face-to-face. There were restrictions on time spent outdoors. This meant fewer chances for physically active and social play.

[Research conducted in 2021](#) on behalf of Save the Children stated that 92% of children in England experienced an impact on their play during the pandemic. Most primary-age children missed out on informal play opportunities at school. Pre-school children [lost crucial experiences](#) from the play-based learning approaches that underpin early years settings. These types of play are difficult to replicate in most homes, though children [still found ways](#) to be playful.

In 2020, the Play Sufficiency research project was set up in Leeds. It aimed to understand if there are enough opportunities for children to play. It found that all children did not experience play equally. 70% of children in Pupil Referral Units (PRUs) and 50% of children in Specialist Inclusive Learning Centres said

“ I used to be on my computer for 12 hours a day for school and basic socialising. ”
Bruce, 15, Whinmoor

they did not play outside at all. Some children could only identify rooms in their house as places they played. There was also significant variability in children’s experience of play in schools. Streets were identified as an important setting for play. However, there were significant barriers to playing outside. These included:

- **traffic;**
- **a perception of danger;**
- **anti-social behaviour from both adults and young people;**
- **litter.**



Professionals, parents and children spoke about the pandemic making some people feel more wary of others and less safe in community spaces. Parents’ concern for their children’s safety reduces available spaces for play. Yet [many parents](#) lack the time, confidence, or inclination to actively enable play in the home.

Ofcom research from 2021 found that:

- **99% of children went online;**
- **17% of 3-4-year-olds had their own mobile phone.**

A 2022 [systematic review](#) of 46 international studies found screen use increased by 52% during the pandemic. Digital devices were a vitally important lifeline during the pandemic. They helped with:

- **connecting with family and friends;**
- **accessing work and education;**
- **leisure and shopping.**

But, this reliance on use of screens has raised concerns about the impact on children’s safety and development. Some parents told us they were worried about how much time their children spent on digital devices and the impact this had on their physical activity levels.

In addition, professionals shared concerns about children’s exposure to harmful content. There were worries about an over-reliance on screens leading to poor sleep, inactivity and unhealthy eating. There were also concerns about a relationship between excessive use of screens for gaming or social media, and impaired communication skills and issues

with academic performance. While a reduction of children’s independent outdoor play and increased use of screens was an established trend before 2020, the pandemic undoubtedly accelerated this development.

Why is this important?

As outlined in the 2019 [Leeds Commitment to Children’s Play](#), play is a fundamental part of childhood which is essential for growth and development. It is how children make sense of the world around them. Play supports learning, physical fitness, emotional wellbeing and social development. In 2022, the time, space and opportunity to play was identified as a top priority by more than 80,000 children in Leeds, as part of the co-creation of the [Child Friendly Leeds 12 Wishes](#).



How are children in Leeds supported?

ParkPlay

ParkPlay launched in Leeds in January 2022. The organisation worked alongside Active Leeds to identify communities which would benefit the most through insight and community conversations.

ParkPlay aims to provide a weekly free event every Saturday in a local green space, with the intention of connecting communities and supporting them to move more through fun games and activities for all ages.

To date, three ParkPlays have been launched in Leeds (one is currently paused), with the potential for more to develop where there is a community interest in running one. ParkPlay is aimed at all generations joining in, playing together as a family. The idea is to develop ParkPlay as something run by the local community for the local community. [A short film was developed by Active Leeds](#) capturing what ParkPlay is, from the weekly session that runs in Beeston Hill.

Play Streets Enablement Project

Play Streets offer resident-led opportunities for children to play traffic-free on their own street, via temporary road closures. Research indicates that regular Play Streets enhance community cohesion, reduce loneliness, and improve children's physical activity levels and resilience. The benefits are likely to be greater in communities with:

- **less access to green space;**
- **poorer air quality;**
- **higher inactivity levels;**
- **lower social capital (community connections).**

Prior to the pandemic, Play Streets were predominantly occurring in affluent areas of Leeds. In leading the Play Streets Enablement Project, Fall into Place and KidzClub Leeds worked in partnership to support Play Streets in communities that face greater challenges.

Since September 2020, the project has supported residents to establish at least 20 new Play Streets in priority neighbourhoods in Leeds (all in the 10% most deprived nationally). A [Facebook group](#) offers peer support for organisers. There is a [promotional film](#) and an evaluation demonstrating positive outcomes for children and adults.

“The life it’s brought to the street is something quite special.”
- Resident organiser



Child development, communication and language

“Children now need support with the fundamentals of communication - eye contact, turn-taking, sharing attention with others.”

Speech and Language Therapist



What did children experience?

Several [studies](#) have shown increased [delays in development](#) among very young children. This is particularly true of those born in the pandemic who are now taking baby steps into the world. A range of changes may have contributed to this, including:

- **maternal stress and depression;**
- **reduced access to childcare;**
- **reduced opportunities for play and social contact with other children;**
- **reduced interaction with their wider family.**

In our survey, staff in childcare settings and children's centres identified issues with basic skills. These included skills like dressing and toileting, and social behaviours such as sharing, turn-taking and managing their emotions. Teachers and education staff reported issues with:

- **challenging behaviour;**
- **managing emotions;**
- **communication skills.**

Professionals reported that some children found entering childcare or educational settings particularly challenging. Some children had very little contact with people outside their household for the duration of the pandemic. Some families were still avoiding leaving the house. In professional settings, adults wore masks. This may also have impacted children's learning, language and communication skills.

An increased number of children have required additional support for their language development. This has led to a rise of 15.7% (between 21/22 and 22/23) in referrals to Speech and Language

Therapy in Leeds. The biggest consequence of this has been longer waiting lists for assessment and treatment.

There are now significant unfair differences in children's communication and language development, increasing inequalities that pre-existed COVID-19. A 2022 [Children and Families Health Needs Assessment](#) found that in 2019, 27% of five-year-olds in Harehills were not achieving expected speech and language outcomes. This was compared to an average of 18.9% across Leeds.

In our focus groups, children and young people told us about how their experiences during the pandemic affected their confidence and ability to communicate. After only spending time with family in the household, they told us about challenges communicating when restrictions ended. This included communicating in lessons at school or on the phone.

Why is this important?

Early childhood is a [window of opportunity](#) for brain development, laying the foundations for children's life chances. Children with a good level of development, including language and communication, are [more likely](#) to be able to do well at school. They are also [more likely](#) to have good health and wellbeing later in life. For children to achieve their potential, they need building blocks of brain development. These include loving and secure relationships with caregivers, opportunities for social interaction with children and adults, and learning throughout childhood. There are [large inequalities](#) in child development between those living in the most and least deprived areas.

“ After the pandemic, I didn’t talk to anyone because I wasn’t used to talking to anyone except my mum and dad. Now I’m back at school it’s getting better.

Akshitha, 10

”

“

[James is] not talking much. He did not attend baby groups, did not see a health visitor until he was two-years-old. James loves staying active. I did see the midwife once or twice, however I had some concerns about James’s delayed speech and it would have been helpful to have seen the health visitor who would have monitored all James’s developmental milestones. I do realise however that James’ speech delay could be the impact of Covid and not being able to socialise. I have noticed that not being able to mix with children his own age has had an effect on how he interacts. This has also had an effect on his behaviour when visiting other houses. He tends to run all over and empty cupboards etc.

Emma, Mum to James, 2

”

How are children in Leeds supported?

Increasing uptake of nursery places for two-year-olds

In June 2020, a Children’s Centre working party was set up in response to challenges arising from the pandemic. Home learning resources were produced by the Children’s Centre Teacher team, including links to the ‘50 Things To Do Before You’re 5’ app, and a Bookstart pack. From March 2020-21, these resource packs were distributed via outreach visits to families with a two-year-old child eligible for Free Early Education Entitlement (FEEE). A key aim of this approach was to encourage families to take up their free nursery place, which has been shown to support early learning and development. At least 75% of eligible two-year-olds received a pack. As a result, there was an increase in families making enquiries and taking up places. Some had not been aware of the offer, and several commented on how much they enjoyed the packs:

“The children will love some fresh ideas thrown into our play time....” - Parent of a two-year-old

Leeds is involved in a research programme with Nesta, the innovation agency for social good, to better understand engagement with the offer and test ways to improve take-up. For those families who are not eligible or who are reluctant to take up the offer, all Children’s Centres offer weekly Stay and Play groups. This helps reduce isolation and supports parents with being ready for school.

PEEP

PEEP (Peeple) is a charity that supports children's development by working with families and practitioners to make the most of play and learning opportunities in everyday life.

PEEP received funding to train and support practitioners in Leeds, with a focus on those working in priority areas. The practitioners ran PEEP training groups for pre-school children and their parents/carers. Training was offered to 34 practitioners from a variety of organisations, including:

- **Children's Centres;**
- **Gypsy Roma Traveller Team;**
- **Libraries;**
- **Third sector organisations.**



PEEP at Harehills/Richmond Hill, February 2022

They attended [PEEP Learning Together Programme Training](#) and benefited from [post-course delivery support](#). This trained them to deliver sessions with families incorporating and modelling different activities that can be easily repeated at home. The groups explored practical ideas, strategies and resources with parents/carers and children together. This contributed to stronger parent-child relationships and increased knowledge and confidence for parents/carers in supporting children's learning and play in day-to-day life.

PEEP is now delivered via:

- **baby/toddler groups;**
- **1-2-1 sessions;**
- **children's centres;**
- **outreach workers;**
- **third sector providers.**

“We have integrated the PEEP ethos into our play and stay groups for a while now with successful attendance and wonderful feedback from families.”

- Natalie, Family Outreach Worker

It has had lots of positive feedback from parents and carers who report trying different activities at home.

“PEEP training has allowed us to focus more on topics, outcomes, language skills and family partnership...we have integrated the PEEP ethos into our play and stay groups for a while now with successful attendance and wonderful feedback from families.”

Natalie, Family Outreach Worker (Headingley, Horsforth, Ireland Wood Children's Centres)

“I've learned more ideas on how to learn shapes through food and I've noticed Azaan is using more words and playing more using learning ideas. I feel he is more ready for nursery.”

Maria

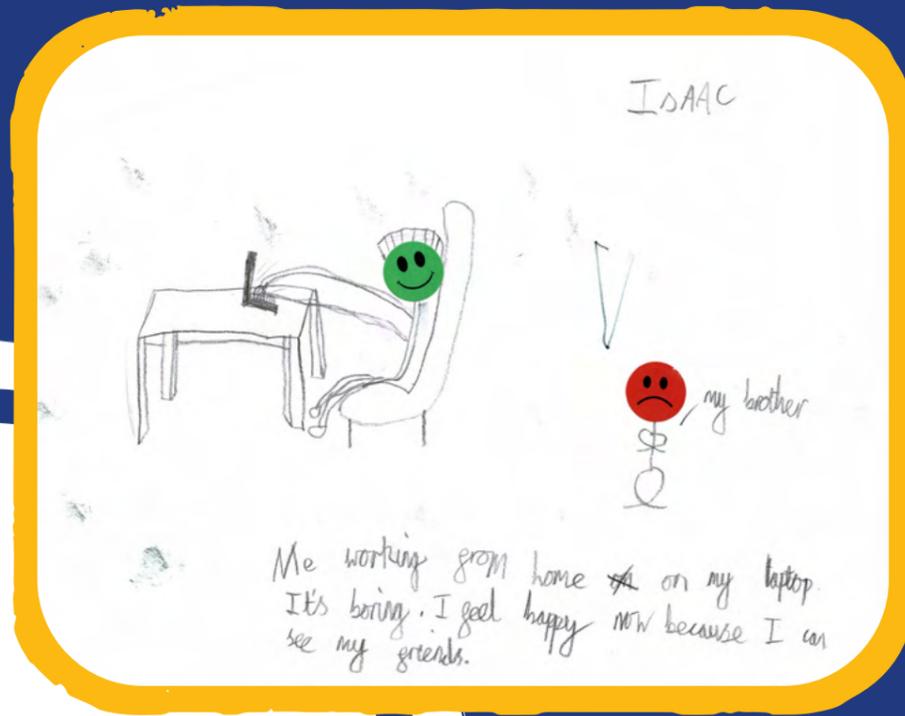
“I have seen a huge improvement with my son. For example, how he plays with other children. At the beginning he used to cry when he saw the children, now he can play with other kids easily.”

Tsega

“I have learned spending quality time taking part in activities such as reading, singing, arts & crafts and how important they are to her development.”

Maxine

Educational attainment



“

Me working from home on my laptop. It's boring. I feel happy now because I can see my friends.”

Isaac, 10, Alwoodley/Roundhay

What did children experience?

Children's lives changed dramatically when schools closed. Families from different backgrounds had very varied experiences of school closures, home-schooling and impacts on educational achievement.

Some children and young people faced significant barriers to home learning. These included access to computers, WiFi, and a quiet space to learn. [Ofcom estimated](#) 36% of primary school and 17% of secondary school pupils in the UK did not have access to an adequate device for online home learning in 2020. In our survey, professionals identified that families struggled to support home learning:

- **in single-parent households;**
- **when both parents worked;**
- **when there were siblings with multiple and conflicting needs;**
- **when mental health difficulties and other illnesses, safeguarding issues or poverty made the home environment challenging;**
- **when children had additional educational needs, disabilities or illnesses.**

Listen to Skye, 14, talk about doing her SATs, moving to secondary school and what should be improved if a pandemic was to happen again.

Since the start of the pandemic, school attendance has reduced. This is due to a range of factors, including COVID-19 related absence and Emotionally Based School Avoidance (EBSA). The number of children who are home-educated has increased significantly. At the end of the 2020-21 academic year, 907 children and young people in Leeds [were recorded as electively home-educated](#). This is compared to 507 in October 2019 (a 56% increase).

The extent of learning loss during the pandemic was [significant](#), and experienced unequally. Primary school pupils in Yorkshire and Humber experienced around [5.3 months of learning loss](#) in maths. This compared to less than a month's loss in London. Nationally, learning losses in secondary schools with a high proportion of pupils from disadvantaged backgrounds were around [50% higher](#) than in those with low rates of free school meal eligibility.

Impact on educational outcomes was the most cited concern by the professionals we surveyed. Around 85% of contributors identified this as a significant issue.

Despite this, the number of students in Leeds who achieved good GCSEs (measured using the Attainment 8 score) has increased since before the pandemic. In [2018/19](#), 45% of Leeds students achieved good GCSEs (35% in deprived areas of Leeds). Results for 2021/22 indicate 48% of students across the city achieved good GCSEs (40% in areas of deprivation).

Why is this important?

Education can open up opportunities for children and young people and have lifelong impacts on health and wellbeing. School enables academic achievement and vocational skills development. The school environment also influences all aspects of children's lives and health, including through:

- 🎮 **play;**
- 👥 **social connections;**
- 🙋 **pastoral support;**
- 🏥 **health education.**

Higher levels of education are associated with [a range of health benefits](#) throughout life. These include longer life expectancy, and reduced risk of disease. Reducing the gap in educational attainment for children in more deprived areas of the city is therefore key to reducing inequalities in health and wellbeing.

“

We had to slowly reintroduce children back to routines and re-engage them in school life. We didn't go straight back to teaching the curriculum. Instead, we worked on social skills, getting our children active and ready to learn again.

Primary school teacher

”

How are children in Leeds supported?



The Refreshed 3As Plan

In summer 2021, the Leeds City Council Children and Families Directorate ran a series of consultations with education professionals from early years to post-16. The consultations identified key priorities for children and those working in schools and settings because of the pandemic. This led to the formulation of the [Refreshed 3As Plan](#), which had five main priorities:

- 📖 **Reading;**
- 👤 **Attendance;**
- 🧑 **Special Educational Needs;**
- 😊 **Wellbeing;**
- 🚶 **Transition.**

As a result, the work of services in the Children and Families Directorate has been aligned around these five priorities. For example, the Early Years team has developed transition modules. These modules looked particularly at the importance of relationships with, and between, parents, staff and children. This is a response to the needs of young children whose first years were disrupted by the pandemic and who developed attachment issues.

COVID Catch-up: Reading

Being able to read fluently enables children to progress at school. It also helps to develop empathy and the language to express emotions. Since September 2021, the Children and Families Directorate has carried out 132 reading 'deep-dives' in primary schools to evaluate how well early reading is taught. A fluency project has supported older primary-aged children and younger secondary pupils in their reading, with some pupils making three years' reading progress in eight weeks.

Fresh Start

Fresh Start is a group programme delivered by the Gypsy Roma Traveller Outreach and Inclusion team (GRT). Fresh Start works with children aged 6-15, who are awaiting school places or are newly arrived in the UK. The programme covers topics including:

- 👥 **community cohesion;**
- 🎒 **school life and integration;**
- 😊 **improving confidence;**
- 🗣️ **giving children the opportunity to have their voices heard.**

During the pandemic, the GRT team:

- 🏠 **provided online support;**
- 📱 **distributed around 30 digital devices and WiFi dongles;**
- 🎨 **developed bespoke learning resources for children in Romanian, Czech and Slovak.**

The team used [Facebook](#) to raise awareness of their work, the Fresh Start programme, and promote COVID-19 messaging. The GRT team continues to support many newly arrived families with school applications and integration. The team worked with approximately 150 children in 2022.

Digital devices

Leeds City Council facilitated the distribution of digital devices from the Department for Education. In summer 2020, 2,181 devices were allocated for children with a social worker and to care leavers. 382 devices were distributed to Year 10 disadvantaged pupils in local authority schools. Multi-academy trusts received their own allocation.

In autumn 2020, the government made a further allocation of devices available to schools on an individual basis for children having to shield, or if their bubble had been disbanded. The Leeds Tech Angels project was also established in April 2020 to collect and refurbish unused laptops and distribute them to children.

Accessing services

“

I gave birth to Daniel in hospital in the afternoon and was discharged that evening. I felt that I would have been scared if this had been my first baby as I didn't have the support that I had experienced in my previous births. I felt lucky because I knew what to do with a newborn.

Chinazom, Mum to Daniel, 2

”

“

It was a struggle getting an appointment with the GP and the school needed to do a referral but didn't do it for ages. It was like a sitcom, the school saying we don't need a referral but GP said we did. In the end we had to get private medical insurance to get the referral for the ASD assessment process. When I got the ASD diagnosis it felt like a burden off my shoulders because the process was repetitive and exhausting.

Harry, 15, Belle Isle

”

What did children experience?

During the pandemic there were significant changes to the way services for children were provided. There were delays to appointments. Many appointments moved to only being available online. This meant that some children found it hard to access the services or support they needed. This included health services and support for children with special educational needs or disabilities (SEND).

In Leeds, rapid changes were made to the way services worked so support could continue to be offered to children when lockdown started in spring 2020. Changes which might normally have taken years were implemented within weeks. The #TogetherLeeds spirit was vital in enabling the development and delivery of novel online services, doorstep youth work and at-home care parcels. Despite this, there have been ongoing challenges around the ability of services in the city to meet rising needs.

Parents of children with SEND in Leeds reported both [positive and negative experiences](#) in 2020. Most welcomed the information, food parcels, resources, and outreach support they received. However, many spoke about struggling to access services to meet their children's health needs, especially for mental health.

Parents told us about their disrupted experiences of maternity care in 2020/21, including delays seeing a midwife and hearing difficult news at an appointment without their partner.

Professionals also gave examples of the impact of delays, such as:

- **children who didn't have timely orthopaedic surgery and are now living with mobility issues;**
- **children having more long-term communication difficulties due to not receiving timely treatment.**

Some felt parents had lost trust in the system and were now more difficult to engage.

Over a year since COVID-19 legal restrictions ended, there remain challenges around meeting demand for services and waiting times. In our survey, professionals highlighted growing waiting lists, in particular for mental health services and speech and language therapy. Dentistry was particularly affected by pandemic service restrictions. According to a Leeds [Health Needs Assessment](#), only 11% of 0-17 year-olds in Leeds accessed NHS dental services in 2020. By December 2021 this was still only at 47%, meaning most children in Leeds had not seen a dentist in more than two years.

Why is this important?

Children and families need to access a wide range of services to stay healthy and receive support for additional needs.

These include:

- **routine health services, such as GP appointments and dentists;**
- **specialist health services, including doctors' appointments for long-term conditions and serious illnesses;**
- **additional support and services for children with SEND;**
- **health care in pregnancy and early years, including midwives and health visitors.**

An interview with Eva and Reggie III

“I was pregnant with Reggie during lockdown. It was quite scary. I thought there would be a lot more groups and support. When I found out that he had Down’s Syndrome, they said they’d induce too and that was really scary.”

“My Mum died when I was younger so I didn’t have that female support system during my pregnancy. My Midwife was really lovely but she was so pushed in her role, she had to go back to her old job. I was meant to get a new Midwife after she left, but that never happened. Once there was some support, it was all online on Zoom which was a bit shocking. I’m not very good with that stuff and it was all very strange.”

“It feels like such a blur because I was so stressed about the Down’s Syndrome diagnosis and what would happen. Because of the pandemic I didn’t have the classes - no one ever told me how to breathe. Knowing I hadn’t been taught that really made me panic. I was really scared. And then being told they’d induce as well - I didn’t know what would happen. It was all really stressful.”

“Even now, there’s still some stuff [services] that haven’t resumed. You think: “when is it all going to be back on track?” It’s the uncertainty that’s hard. Some Mums have definitely slipped through the net.”

“I did worry because I wasn’t sure how Reggie would get on with socialising. He is getting better now. I remember the first Christmas we were able to spend together with the family. There wasn’t many of us, just close family, but Reggie was shocked there were so many people. He was scared and cried.”

“Reggie is also very Mummy-centric. He was used, during lockdown, to having both parents there (Dad was working from home). Now when we’re not together, he finds it really hard sometimes.”

“At first, he didn’t interact with other children. Now he does more, but other children mainly have to come to him. He seems to be getting better at interacting but he is used to doing his own thing and sitting and playing on his own.”

“I’m pregnant with my second child now - due in March. This time around there are more things to go to. Last time, once some things opened up, I had to travel a long way to get to them. Well, they were maybe half an hour away but when you’re pregnant and have to walk, that is a long way.”

“I feel like I have a better support network this time around. However, my Midwife this time hasn’t told me about any opportunities or made any referrals. My Midwife can hardly ever see me. Because Reggie has Down’s Syndrome, I got a lot more support. Now I see a different person every time and no one refers me to any support. All the groups and things - you can’t just sign up, you have to have a referral and they haven’t made the referrals. If it was my first pregnancy, I wouldn’t know about anything. I was also a bit gutted that I can’t go to some of the same groups I went to last time I was pregnant, because they’re only for first time Mums. The birth will be different this time too - they’re saying I might have to have a C-section. You’d think I’d have more support this time round because of everything opening up after the pandemic, but that really hasn’t been the case.”

Eva and Reggie III,
15 months

How are children in Leeds supported?

The Voice Influence and Change (VIC) Team

The VIC Team manage the Leeds Local Offer website. This provides information for children and young people with SEND and their families about the services available to them in Leeds. In 2022, students from the Powerhouse West SILC worked with the Leeds Local Offer lead person to review and develop the [young people’s section](#) on the website.

Young people and families have shared that they value short videos about services. Videos have been developed for the Leeds Local Offer website:

- [Short Breaks and Fun Activities;](#)
- [SENDIASS;](#)
- [Education Health and Care Plans;](#)
- [A Graduated Approach;](#)
- [Post-16 options.](#)

The VIC team have developed different ways for young people with SEND to have a voice and influence on SEND

services in Leeds. A [short video](#) has been developed by young people to explain the different ways young people can have their voices heard. This includes the [SEND Youth Forum](#). The team have also developed a [one minute guide on voice and influence](#).

Healthwatch Leeds

Healthwatch Leeds enables the voices and experiences of local people to influence decisions made in their health and care. From 2021-22, 554 people in Leeds contacted Healthwatch for advice about services including dentistry, mental health support and GP access. Healthwatch also produced 50 reports about the improvements people would like to see to health and social care services in Leeds. Volunteers from YouthWatch focus on services for young people, including [mental health services](#). Changes have been made to postnatal GP checks and information given about the perinatal mental health pathway. This was informed by what [people told Healthwatch](#) about the impact of the pandemic on their pregnancy care.

Childhood infections

What did children experience?

Many children experienced infection from COVID-19. However, for most children, these infections were mild. The pandemic restrictions resulted in a reduction in children mixing. Therefore, they were not as exposed to common childhood infections during this time. In our survey, service partners described children being unwell for longer periods and spending more time away from nursery and school compared to pre-pandemic. Partners also reported seeing more severe symptoms from common childhood illnesses in children following lockdown.

Since September 2022, the [UK Health Security Agency \(UKHSA\)](#) reported an out-of-season increase in both Scarlet Fever and Group A Streptococcus (Strep A) infections. The increase is most likely related to high amounts of circulating bacteria. It isn't possible to say for certain what is causing higher than usual rates of these infections. There is likely a combination of factors, including increased social mixing compared to the previous years as well as increases in other respiratory viruses.

[The UK routine childhood immunisation schedule](#) is set by NHS England. It is regularly reviewed to reflect the evidence base and to ensure the best protection for children. GPs continued to provide the vaccination offer throughout the pandemic and children were still invited to receive vaccinations. Despite this, there was a reduction in children getting vaccinated within some communities. There may be multiple reasons for this including a lack of confidence in the COVID-19 vaccine. This may have influenced some families' opinions around other vaccines.

[Research undertaken](#) with 2,000 parents and guardians of children aged 5 and under by the Department of Health and Social Care (DHSC) and UKHSA, shows that:

- **only 36% (over a third) believe that vaccinations are important in helping prevent the spread of infections and viruses;**
- **18% (almost 1 in 5) who haven't had their child vaccinated for Measles, Mumps and Rubella (MMR) are not aware that MMR remains a threat in the UK.**

In England, [recent data](#) shows that uptake for routine childhood immunisation has dropped

below the World Health Organisation (WHO) recommendation of 95%. This has been further accelerated by the pandemic; a trend reflected in Leeds.

Using MMR vaccination uptake as an example, UKHSA data (Sept 2022) shows that nationally uptake has dropped to the lowest level in a decade. It is now below 90% in 2-year-olds and 84.7% in 5-year-olds. This is a trend reflected in Leeds uptake data, which is 88.6% in 2-year-olds and 82.9% for 5-year-olds. This

is below the 95% WHO target needed to achieve and sustain measles elimination. Nationally, 1 in 10 children under the age of 5 are therefore not fully protected from measles.



“With children not mixing for so long, there seems to be an impact on their immunity, with lots of illnesses circulating.”

Nursery Worker

Why is this important?

Any action to disrupt the transmission of infectious disease is essential to children in terms of health and education. The most effective way to protect children and young people against serious infectious diseases is through vaccination. WHO states "The two public health interventions that have had the greatest impact on the world's health are clean water and vaccines." Childhood vaccinations protect individual children from a range of serious diseases. They also contribute to keeping other children safe by eliminating or greatly decreasing the spread of infections.

“

In the time of Covid, I couldn't see my family and so many people died from Covid in this time. But the vaccine was made.

Yaran, 9, Burmantofts

”

How are children in Leeds supported?

Preventing the spread of infection amongst children is important and remains a priority in Leeds. Intensive work has taken place in educational settings, supported by infection prevention services, focusing on raising awareness of:

- **hand hygiene;**
- **ventilation;**
- **reducing the spread of infection by staying at home if unwell;**
- **early intervention to minimise impact from outbreaks;**
- **getting vaccinations when called.**

Regular nurse-led community engagement events continue to be held to promote:

- **health and wellbeing;**
- **the importance of infection prevention;**
- **routine childhood immunisations.**

Partners across the city have worked to strengthen plans that drive our local priorities, including awareness raising and targeted work for specific low uptake populations. In addition, primary care

vaccination coordinators are working with families in the lowest uptake areas to increase confidence, dispel myths and encourage vaccine uptake. Community catch-up clinics have also been provided for communities with low uptake. Resources are being developed to assist families who have been identified as digitally excluded to help them make an informed decision around vaccine consent.

“ **I couldn't spend time with family because they had Covid so I had to spend time isolating.**

Child, Leeds

”

Positive impacts on family life

“
Me and my dad were always together in the house and that helped me. Me and my Dad shared a room. We'd watch films and we were always together and talking. That built that relationship up a lot.

Harry, 15, Belle Isle”

“
I live with my parents and nan and my brother and dogs. It was pretty sad during lockdown but there was some good bits. Like in the afternoons when we'd finished school work we did things like Joe Wicks or British Sign Language.

Alex, 10, Burmantofts”

“
I couldn't read in Amharic but now I can.

Rakeb, 11, Harehills”

What did children experience?

Spending time together

For many families, the COVID-19 pandemic brought a valued opportunity to spend time together. Some mums found it easier to establish breastfeeding with fewer social distractions. Children also spoke about enjoying the extra time they spent with their parents.

Spending more time with Dad

Professionals told us that lockdown sometimes made family bonds stronger, especially between dads and children. Fathers positively reported getting more involved with childcare. Across the UK, Dads represented [one in nine](#) primary caregiver (economically inactive) parents in 2022, compared with one in 14 in 2019.

Changes in working patterns

The changes to working patterns because of the pandemic have proved enduring. More flexible working practices means more opportunities for both parents to work from home for at least some of the time. These were identified by both professionals and parents we spoke to as a positive legacy of the pandemic.

Some parents reported being more able to balance paid employment with parenting than prior to the pandemic.

However, difficulties with accessing childcare have impacted significantly on the working lives of other parents.

More flexible services

Changes to ways of working have also enabled services to create more flexible and inclusive ways of engaging with families. New networks were established such as the Together Leeds Youth Network. These enabled organisations to work more effectively together for the benefit of children and young people. Speech and language therapists in particular spoke of the positive changes to their service delivery. They say this has enabled families to engage in different ways. These more flexible services can be particularly beneficial for families who are working or struggle to afford transport to appointments. It can also benefit those who are experiencing social anxiety or other mental health issues.

Reductions in road traffic

Every family's pandemic experience was unique. However, one aspect of lockdown in Leeds was truly shared - the traffic-free streets.

This reduction in road traffic was a global phenomenon. In Leeds, around [half as many pedestrians were seriously injured or killed](#) in 2020 than in 2019. Children are more likely to be victims of pedestrian road traffic accidents than adults under 70. This meant the quiet streets of mid-2020 represented a significant drop in child injuries and fatalities.

While traffic volumes have returned to pre-2020 levels, the 'art of the possible' exemplified by the silent streets of lockdown pre-empted the bold ambition of Leeds City Council's 2022 Vision Zero strategy - that by 2040 no one will be killed or seriously injured on roads in Leeds.

“
Costs were lower as I didn't have to pay for after school care so I could save some money. As I am still working from home, I feel that this will help when James starts school as I will be able to take him and pick him up so there will be no costs involved.

Emma, Mum to James, 2”

Headline findings and recommendations

Headline findings

We analysed the literature review, statistics on health outcomes and what children and partners who work with children told us. We have identified key impacts of the pandemic and areas to focus on in order to improve children and young people's health in Leeds.

Children living in more deprived areas experienced higher levels of air pollution, worse housing and less access to gardens compared to children living in more affluent areas of the city. This had a big impact on how they experienced the pandemic and had a consequent negative impact on their physical and mental health.

Some children were less safe during lockdown. There were reduced opportunities to identify neglect and abuse. Some children experienced an increase in arguing at home, parents using alcohol and witnessing domestic violence.

Although some children and young people reported improvements to their mental health during lockdown, overall there remains a significant deterioration in the mental health of children and young people in Leeds. Parental mental health also deteriorated during the pandemic. Families living in deprived areas were at greater risk of poorer mental health.

Children's physical health was impacted in terms of sleep, food, play, screen time, and activity levels. This impact was not equally experienced. It resulted in a

significant increase in children living with obesity, especially in areas of the city which are deprived. This rise has dropped back to slightly below pre-pandemic levels for reception-class children but remains higher than pre-pandemic levels for children in year 6. In addition, levels of children living with obesity in both reception and year 6 remain higher for children living in deprived areas of Leeds compared to the Leeds average.

Children's communication, language and general development was impacted by the lockdown. It had the greatest impact in poorer communities, with many partners reporting children are now behind in their social, emotional and communication development.

Children's educational attainment was impacted disproportionately. Schools with a higher proportion of children from disadvantaged backgrounds lost most learning.

Health care services were not accessible to all and there remain significant delays to some services, specifically:

- dentistry;
- speech and language therapy;
- mental health services.

Rates for childhood vaccinations have also dropped. This may lead to increased childhood infections.

Some children had positive experiences during lockdown. This included more time with family members, particularly dads; more flexible services and less road traffic. However, these were not experienced equally.

Recommendations

- 1 All partners in Leeds to ensure the voices of children and young people are central to all work planned, taking into account the Child Friendly Leeds 12 Wishes.
- 2 Leeds City Council and partners to work to ensure children are kept safe with a focus on:
 - prevention of harm;
 - parenting support;
 - Early Help;
 - reducing domestic violence.
- 3 Leeds City Council, the Leeds Office of the West Yorkshire NHS Integrated Care Board, and partners to continue to prioritise work to improve and protect children's mental health. This will be delivered through the:
 - Leeds Children and Young People's Plan;
 - prevention workstream of the Future in Mind Strategy.
- 4 Leeds City Council to build on the success of existing support to parental mental health and wellbeing, with a focus on the development of family hubs.
- 5 Leeds City Council to work with partners to continue to deliver a programme of work to protect and improve children's physical health. This will focus on:
 - implementing the recommendations from the play sufficiency research;
 - increasing physical activity opportunities;
 - increasing equitable access to green space;
 - increasing access to healthy food;
 - Implementing the child healthy weight plan.
- 6 Leeds City Council to ensure that children are central to the delivery of work to become a Marmot city, with a focus on:
 - improving housing;
 - planning;
 - mitigating the impacts of poverty;
 - children getting a fair start in life;
 - ensuring the Thriving Strategy is implemented.
- 7 The Best Start partnership to aim for all children in Leeds to receive the best start in life, with a focus on children from more deprived backgrounds. This includes redressing the gap in speech language and communication development.
- 8 Leeds City Council to maintain work underway to ensure equitable catch up in terms of educational attainment. This will be achieved through delivering the five main priorities of the 3As Plan:
 - Reading;
 - Attendance;
 - Special Educational Needs;
 - Wellbeing;
 - Transition.
- 9 The Leeds Office of the West Yorkshire NHS Integrated Care Board to ensure health care services are accessible to all children and young people. This will focus on:
 - dental services;
 - mental health services;
 - speech, language and communication.
- 10 NHS England and The Leeds Health Protection Board to increase coverage rates of childhood immunisations.

Update on recommendations from DPHAR 2017-18

Leeds City Council Public Health Intelligence Team to continue to monitor life expectancy and report back to the Leeds City Council Executive Board and Leeds Health and Wellbeing Board.

Life expectancy at birth continues to be monitored, comparing life expectancy in the most and least deprived communities in Leeds to maintain a focus on health inequalities in Leeds.

Leeds City Council Public Mental Health team to lead insight work with local communities to explore and understand self-harm behaviours.

We have led a research project exploring self-harm behaviours in adults. The My Health My School survey provides self-reported data regarding patterns of self-harm in young people.

Leeds Strategic Suicide Prevention Partnership Group to ensure that reducing suicide in 30-50 year old men remains a priority within the Leeds Suicide Prevention Plan.

We are undertaking an audit of Coroners records to see if this group of men remain a priority (as we are seeing a rise in women dying by suicide). We also monitor our weekly suspected suicide data.

Leeds City Council to ensure delivery of targeted work with men at high risk of suicide as part of the new Mentally Healthy Leeds service.

Men at high risk of suicide will be one of the target populations for the new Mentally Healthy Leeds programme. The programme will be encouraged to work with other organisations, including Men's Health Unlocked, Man About Town and Humans Being, who all work with men.

Leeds City Council to identify a broad range of indicators to assess progress on Inclusive Growth through the new Inclusive Growth Strategy, reflecting different geographies and populations within the city.

Leeds City Council has worked with the Social Progress Imperative to have a Social Progress Index for Leeds. This is to support the Inclusive Growth Strategy and Best City Ambition.

Leeds City Council to ensure that its new Leeds Inclusive Growth Strategy improves the socio-economic position of the most deprived 10% of communities in the city.

Leeds City Council continues to develop innovative work to increase employment and skills and to support broader economic development, through the Inclusive Growth Strategy. The strategy is being refreshed but it will maintain a strong focus on the most deprived communities in the city. It will be closely aligned with Leeds' ambition to reduce health inequalities, including the Marmot City programme.

The Leeds Best Start Strategy Group to help ensure that parents are well prepared for pregnancy and that families with complex lives are identified early and supported.

A range of antenatal education programmes are delivered including: Preparation for Birth and Beyond, aimed at improving the knowledge and confidence of first-time parents; the Baby Steps support programme for new parents who are more likely to need extra help and less likely to access antenatal education and antenatal provision for refugees and asylum seekers.

Leeds City Council to undertake a comprehensive health needs assessment for women.

In 2019 Leeds City Council published "The State of Women's Health", which produced a comprehensive picture of life, health and wellbeing for women and girls in partnership with Women's Lives Leeds and their partners.

Leeds City Council, Leeds Clinical Commissioning Groups (CCGs) and Forward Leeds to use local insight to develop a social marketing campaign targeting young women and aimed at reducing alcohol consumption and promoting access to services.

Following local insight, an agency was commissioned to develop a responsible drinking campaign aimed at 18-25 year olds.

Leeds City Council, Leeds Clinical Commissioning Groups (CCGs) and Leeds NHS Trusts to increase identification and brief advice (IBA) in primary and secondary care with a particular focus on areas of deprivation with highest alcohol harm.

Four Fibroscan machines have been purchased and are used at Forward Leeds and in primary care. The project has increased identification and brief advice in these settings, as well as the identification of early-stage liver disease and onward referral into specialist treatment. The project uses health data/ intelligence in order to focus on areas of deprivation and those with the highest alcohol harm.

Leeds City Council and Forward Leeds to review alcohol treatment services for females and ensure services are appropriate to the needs of women.

Service users are offered a gender specific worker, with women only groups for those in treatment and recovery, as well as a mother and baby group. The service also fast tracks pregnant women who are dependent drinkers and suitable for detox to help reduce Foetal Alcohol Syndrome. Forward Leeds have also been working closely with Basis Yorkshire and Joanna Project to improve pathways into treatment for sex workers.

Leeds City Council to use the drug misuse death audit findings to better target interventions to prevent drug deaths in Leeds.

Leeds created a new naloxone lead post and set up the Leeds Drug Alert System, which has now been used on a couple of occasions to alert partners adulterated/ potent substances. The Dual Diagnosis Strategy Group was reformed, with Forward Leeds also having extended its Co-Occurring Mental Health, Alcohol and Drug service to meet increasing demand.

Leeds City Council and Forward Leeds to review routes of opiate drug treatment for males and ensure that interventions occur at times of greatest risk and that treatment services are appropriate to need.

There are ongoing processes in place to review pathways into treatment for males using opiates. In addition, new funding has been used to establish a street-based team to support those rough sleeping, or at risk of rough sleeping, into treatment.

Leeds City Council and Leeds Drug and Alcohol Board members to ensure that partners work collaboratively to address the physical and mental health needs of heroin/opiate users, enhancing access and support with employment, housing and other services that promote sustained recovery.

Forward Leeds have extended its Co-Occurring Mental Health, Alcohol and Drug Team. Health Care Assistants also provide enhanced support in relation to the physical health needs of those in drug and alcohol treatment. Leeds established an Individual Placement Support Employment Team, who work alongside people in treatment, supporting them into work. Forward Leeds has an annual service user graduation event that celebrates sustained recovery. The 5-WAYS Recovery Academy have also expanded the number of BRiC (Building Recovery in Communities) workers, to support sustained recovery.

Acknowledgements

A warm thank you to everyone who has contributed to this year's annual report.

Authors

Pippa Bird
Victoria Eaton
Sally Hall
Kathryn Ingold
Michelle Kane

Focus group and online contributors

Children at Allerton Church of England Primary School
Children at Shakespeare Primary School
Young People at LS-TEN
Children and their families at Parklands Children's Centre
Children, young people and families that provided online submissions

Case study contributors

Family Plus Service
Women's health matters
CBUG Leeds
Speak up campaign
Mind Mate
Resilience programme
Calm harm
Vaccination uptake innovation
Play streets enablement project
Park Play
PEEP
Increasing uptake of nursery places aged 2
Children's Centres
Bosom Buddies

Babysteps
COVID catch up
Fresh Start - GRT education
Digital devices
The Leeds Children's Mayor
DAZL
Healthy Holidays
HENRY
Bite Back
Bramley Baths
Healthy Placemaking Group
Voice, influence and Change Team
Together Leeds Youth Network
Leeds Community Health 0 - 19 PHINS
Active Leeds
Leeds Dads

Supporting organisations

Leeds Markets
Thackray Museum
Playful Anywhere
Brave Words, running Beeston Youth Theatre

Community engagement facilitators

Brightsparks Agency
(with special thanks to Lizzie Owen and Christine Shipley)

Public health data and intelligence

Frank Wood
Suresh Perisetla

Editor(s)

Brightsparks Agency
(with special thanks to Leonie Tayler)

Graphic design

Brightsparks Agency

Photography and filming

Leeds City Council Communications Team
Brightsparks Agency

Families featured in the 'In Our Shoes' film

Alex
Emma and James
Daniel
Noor and Hawa, with Zaheer and Hooriya
Tilly, with Sammy and Ted
Beeston Youth Theatre Group
Daniel and Chinazom
Ayesha
Isaac & Maxwell

Filming locations

Leeds Primary Schools
Beeston Youth Theatre, run by Brave Words
at Beeston Village Community Centre
Precious Glimpse Roundhay

Project management

Rebecca Thomas
Adele Priestley
Ruth Poole



Further reading



General

[Leeds Children and Families Health Needs Assessment \(2022\).](#)

[Leeds City Council Report to Scrutiny Board 2021: The long-term impacts of Covid-19 on children and families in Leeds.](#)

[12 wishes - Child Friendly Leeds \(2022\).](#)

[Youth Council Campaign Group: Your Health Matters Survey Report, 2022.](#)

[Children's Commissioner report: The Big Ask, The Big Answer 2021.](#)

[Children's Commissioner policy paper: Proposals to Support Disadvantaged Children 2021.](#)

[Children's Commissioner report: Childhood in the time of Covid 2020.](#)

[The Children's Society Good Childhood report 2022.](#)

[State of the Nation 2021: Children and Young People's Health and Wellbeing, Department for Education.](#)

[State of the Nation 2022: Children and Young People's Health and Wellbeing, Department for Education.](#)

[Child of the North report, 2021 \(Northern Health Science Alliance\).](#)

[Priorities for the child public health response to the COVID-19 pandemic recovery in England Archives of Disease in Childhood \(bmj.com\).](#)

[Where to make a difference: research and the social determinants in pediatrics and child health in the COVID-19 era | Pediatric Research \(nature.com\).](#)

[Children's perspectives and experiences of the COVID-19 pandemic and UK public health measures - PubMed \(nih.gov\).](#)

[Growing up during a public health crisis: a qualitative study of Born in Bradford early adolescents during Covid-19 - PubMed \(nih.gov\).](#)

Children's safety

[Alcoholic liver deaths increased by 21% during year of the pandemic \(gov.uk\) \(2021\).](#)

[Children's Commissioners Vulnerability Report \(2020\).](#)

[Covid-19 and alcohol—a dangerous cocktail \(bmj.com\) \(2020\).](#)

[Domestic Violence and Abuse Update - Leeds City Council \(July 2021\).](#)

[My Health My School Survey \(2021\).](#)

[Forward Leeds - Working with Families.](#)

[Leeds Wellbeing Surveys.](#)

[Leeds a compassionate city: building a trauma informed city together \(2021\).](#)

[One minute guide: Early Help Hubs.](#)

[Parents 2 x more likely than non-parents to drink more since Covid \(2021\).](#)

[Social isolation and the risk of child abuse during and after the Coronavirus pandemic - NSPCC \(2020\).](#)

[Women's Health Matters - Breathe Free Project.](#)

[Children's Commissioner Online Safety Commission: Our recommendations for making the online world safer for children \(2021\).](#)

Children's mental health

[Mental Health of Children and Young People in England 2022 - wave 3 follow up to the 2017 survey - NDRS \(digital.nhs.uk\).](#)

[Child suicide rates during the COVID-19 pandemic in England - ScienceDirect.](#)

[How is COVID-19 Affecting the Mental Health of Children with Special Educational Needs and Disabilities and Their Families? | SpringerLink.](#)

[Adolescent Carers' Psychological Symptoms and Mental Well-being During the COVID-19 Pandemic: Longitudinal Study Using Data From the UK Millennium Cohort Study - PubMed \(nih.gov\).](#)

[UK children's sleep and anxiety during the COVID-19 pandemic - PubMed \(nih.gov\).](#)

[Child Friendly Leeds: 12 Wishes.](#)

[COVID-19 and Adolescent Mental Health in the United Kingdom - PubMed \(nih.gov\).](#)

[Leeds MindMate Single Point of Access: Information for professionals supporting children and young people in Leeds.](#)

[Longitudinal increases in childhood depression symptoms during the COVID-19 lockdown Archives of Disease in Childhood \(bmj.com\).](#)

[My Health, My School Survey.](#)

[Pupil wellbeing survey data analysis - School Wellbeing \(2021\).](#)

['You're just there, alone in your room with your thoughts': a qualitative study about the psychosocial impact of the COVID-19 pandemic among young people living in the UK - PubMed \(nih.gov\).](#)

[Covid-19 and child criminal exploitation in the UK: implications of the pandemic for county lines | SpringerLink.](#)

[Social, Emotional and Mental Health Needs Assessment: Children and young people from Black, Asian and Ethnic Minority Communities in Leeds \(October 2019\).](#)

[Speak Up Leeds: #BlackBoyJoy.](#)

[Speak Up Leeds: #SpeakUpLeeds Film \(Video\).](#)

[MindMate Website.](#)

[MindMate: Opportunities provided by LCG Health and Wellbeing Team.](#)

[NHS Leeds CCG & City Council Satellite Analysis Mental Health of Children and Young People in Leeds.](#)

[MindMate: Neurodiversity information hub.](#)

Parental mental health

['When will this end? Will it end?' The impact of the March–June 2020 UK COVID-19 lockdown response on mental health: a longitudinal survey of mothers in the Born in Bradford study | BMJ Open.](#)

[How is the COVID-19 lockdown impacting the mental health of parents of school-age children in the UK? A cross-sectional online survey - PubMed \(nih.gov\).](#)

[The impact of the Covid-19 lockdown on the experiences and feeding practices of new mothers in the UK: Preliminary data from the COVID-19 New Mum Study - ScienceDirect.](#)

[Psychosocial experiences of postnatal women during the COVID-19 pandemic. A UK-wide study of prevalence rates and risk factors for clinically relevant depression and anxiety - PubMed \(nih.gov\).](#)

[The Impact of the Pandemic on Mental Health in Ethnically Diverse Mothers: Findings from the Born in Bradford, Tower Hamlets and Newham COVID-19 Research Programmes \(2022\).](#)

[Henry: Online Healthy Families Programme - Leeds.](#)

[Learning from adapting the Baby Steps programme in response to COVID-19 - NSPCC Learning, 2020.](#)

[The Effect of Maternal Depression on Infant Attachment: A Systematic Review - PubMed \(nih.gov\).](#)

Childhood infections

[Children and young people remain at low risk of COVID-19 mortality - The Lancet Child & Adolescent Health.](#)

[National rates and disparities in childhood vaccination and vaccine-preventable disease during the COVID-19 pandemic: English sentinel network retrospective database study.](#)

[Group A streptococcal infections: seventh update on seasonal activity in England \(UKHSA\).](#)

[Around 1 in 10 children starting school at risk of measles \(gov.uk\).](#)

[Parents' and guardians' views and experiences of accessing routine childhood](#)

[vaccinations during the coronavirus \(COVID-19\) pandemic: A mixed methods study in England](#)

[NHS England Vaccination Schedule.](#)

[COVID-19: impact on childhood vaccinations: data to August 2021.](#)

[Vaccines and immunization - World Health Organization.](#)

Children's physical health

[Are free school meals failing families? Exploring the relationship between child food insecurity, child mental health and free school meal status during COVID-19: National cross-sectional surveys.](#)

[Half of children entitled to free school meals did not have access to the scheme during COVID-19 lockdown in the UK - PubMed \(nih.gov\).](#)

[London Childhood Obesity Taskforce Engagement with Children and Youth: Evidence in Support of Calls to Action \(London's Child Obesity Taskforce\).](#)

[Accelerometer-measured physical activity and sedentary time among children and their parents in the UK before and after COVID-19 lockdowns: a natural experiment - PubMed \(nih.gov\).](#)

[Changes in children's physical fitness, BMI and health-related quality of life after the first 2020 COVID-19 lockdown in England: A longitudinal study - PubMed \(nih.gov\).](#)

[Impact of COVID-19 restrictions on preschool children's eating, activity and sleep behaviours: a qualitative study | BMJ Open.](#)

[Covid-19 lockdown: Ethnic differences in children's self-reported physical activity and the importance of leaving the home](#)

[environment; a longitudinal and cross-sectional study from the Born in Bradford birth cohort study.](#)

[COVID-19 and the impact on child dental services in the UK - PMC \(nih.gov\)](#)

[The impact of the COVID-19 pandemic on oral health inequalities and access to oral healthcare in England.](#)

[Active Lives Children and Young People Survey - Academic year 2021-22, Sport England State of Child Health: Royal College of Paediatrics and Child Health \(2020\).](#)

[Children's Commissioner: Childhood in the time of Covid \(September 2020\).](#)

[Mental Health of Children and Young People in England 2021 - wave 2 follow up to the 2017 survey \(2021\).](#)

[Pupil wellbeing survey data analysis - School Wellbeing \(2021\).](#)

[ONS: One in eight British households has no garden \(2020\).](#)

[Leeds Children and Families Health Needs Assessment 2022.](#)

[Mentally Healthy Schools: Sleep.](#)

[Physical Activity in the Prevention of Childhood Obesity: The Position of the European Childhood Obesity Group and the European Academy of Pediatrics \(2020\).](#)

[Public Health England: What works in schools and colleges to increase physical activity? \(2020\).](#)

[DAZL & BARCA Leeds Garden Groovers Doorstep Social Distancing Dance Project.](#)

[Sport England: Children's activity levels recover to pre-pandemic levels \(2022\).](#)

[Bite Back 2030: Website.](#)

Play and screen use

[Active Leeds: Park Play \(Video\).](#)

[Leeds Commitment to Children's Play.](#)

[Assessment of Changes in Child and Adolescent Screen Time During the COVID-19 Pandemic: A Systematic Review and Meta-analysis.](#)

[Play in the time of the pandemic: children's agency and lost learning, Sue Rogers, 2022.](#)

[Play Streets Network Leeds \(Facebook Group\).](#)

[Leeds City Council: Play Streets in Leeds in 2022.](#)

[Summer of Play - Save the Children \(2021\).](#)

[Play in the Pandemic - Virtual Exhibition \(play-observatory.com\).](#)

[Parents don't spend enough time playing with their children: Prof. Tanya Byron \(2010\).](#)

[Children and parents: media use and attitudes report 2022 \(ofcom.org.uk\).](#)

Educational attainment

[The 3As Gateway.](#)

[The Annual Standards Report 2018-2019.](#)

[Child of the North: Building a fairer future after COVID-19.](#)

[Children and parents: media use and attitudes report 2022.](#)

[Impact of school closures on the health and well-being of primary school children in Wales UK: a routine data linkage study using the HAPPEN Survey \(2018-2020\).](#)

[The impact of the COVID-19 pandemic on children's socioemotional wellbeing and attainment during their reception year.](#)

[The influence of education on health: an empirical assessment of OECD countries for the period 1995–2015.](#)

[Learning during the pandemic: quantifying lost learning.](#)

[Leeds City Council: Elective Home Education Report.](#)

[Tackling the long-term impacts of Covid-19 on children and families.](#)

[Voices of England's Missing Children.](#)

Child development, communication and language

[Peep learning together programme training.](#)

[People | Post-course delivery support.](#)

[50 things to do before you're five.](#)

[Bookstart Toddler and Pre-schooler packs.](#)

[COVID-19: Babies born during the pandemic show slight development delays.](#)

[Leeds Children and Families Health Needs Assessment 2022.](#)

[The 1000 Critical Days: The Importance of the Conception to Age Two Period.](#)

[Study of Early Education and Development \(SEED\): Impact Study on Early Education Use and Child Outcomes up to age four years.](#)

[Social and Emotional Skills in Childhood and their Long Term Effects on Adult Life A review for the Early Intervention Foundation.](#)

[Build Back Fairer: The COVID-19 Marmot Review.](#)

[Pandemic may have impacted babies' social communication skills.](#)

Accessing services

[Caring for a sick or injured child during the COVID-19 pandemic lockdown in 2020 in the UK: An online survey of parents' experiences.](#)

[Breastfeeding Experiences During the COVID-19 Lockdown in the United Kingdom: An Exploratory Study Into Maternal Opinions and Emotional States.](#)

[Impact of COVID-19 on outpatient appointments in children and young people in England: an observational study.](#)

[Health visiting in England: The impact of the COVID-19 pandemic.](#)

[The impact of COVID-19 on Children's Social Care in England.](#)

[The sustained impact of Covid-19 on speech and language therapy services in the UK.](#)

[Recognising the potential long term impacts of Covid-19 on children in Leeds.](#)

[Developing the young people's section on the Leeds Local Offer website.](#)

[Leeds SEND Local Offer: Leeds Short Breaks Offer.](#)

[Leeds SEND Local Offer: Leeds SENDIASS.](#)

[Leeds SEND Local Offer: Education, Health and Care Plans \(EHCP\).](#)

[Leeds SEND Local Offer: SEND Graduated Approach - support in schools](#)
[Leeds SEND Local Offer: Post 16 Options in Leeds.](#)

[Leeds SEND Local Offer: Local Offer - CYP Voice and Influence in SEND.](#)

[Leeds SEND Local Offer: What is the Leeds SEND Youth Forum?](#)

[Child Friendly Leeds: One minute guide: Voice and influence.](#)

[Healthwatch Leeds.](#)

[Healthwatch Leeds: Why do we write reports?](#)

[Healthwatch Leeds: Weekly Check Ins.](#)

Poverty, housing and where we live

[Children in low income families: local area statistics 2014 to 2020.](#)

[Fuel Poverty, Cold Homes and Health Inequalities in the UK.](#)

[Child of the North Report: Building a fairer future after COVID-19.](#)

[Are free school meals failing families? Exploring the relationship between child food insecurity, child mental health and free school meal status during COVID-19: national cross-sectional surveys \(2022\).](#)

[Covid-19: impact on child poverty and on young people's education, health and wellbeing \(2021\).](#)

[Zarach: Bed bundles.](#)

[Annual Fuel Poverty Statistics Report 2018.](#)

[Leeds City Region Housing Affordability and Need Study: Technical Report 2: Affordability \(2020\).](#)

[Poverty and child health in the UK: using evidence for action \(2016\).](#)

[Fuel Poverty Update 2022.](#)

[Home Plus Leeds.](#)

Positive impacts on family life

[COVID may have enhanced many dads' involvement in parenting, 2023.](#)

[Leeds Road Traffic collision statistics, 2017-2021.](#)

[Reported road casualties Great Britain: pedestrian factsheet 2021.](#)

[Economic activity and employment type for men and women by age of the youngest dependent child living with them in the UK: Table S \(ONS.gov.uk\).](#)

[Leeds Dads.](#)





If you need information from this report in a different format, please email:
webmaster@leeds.gov.uk.

Please tell us the web address (URL) of the content, your name and email address and the format you need. For example: audio, braille, BSL or large print.

This report is available online at:
**[www.leeds.gov.uk/
PublicHealthAnnualReport22](http://www.leeds.gov.uk/PublicHealthAnnualReport22)**

Further information on health statistics for Leeds and past reports are available online at:
<http://observatory.leeds.gov.uk>

We welcome feedback about our annual report. If you have any comments, please email:
publichealth.enquiries@leeds.gov.uk

Report Design: [Brightsparks Agency](#)

© Copyright Leeds City Council 2023



Leeds
CITY COUNCIL

