EAT, SLEEP, SELFIE, REPEAT

GROWING UP IN WARWICKSHIRE WITH SOCIAL MEDIA

Director of Public Health Annual Report 2018

Warwickshire
County Council

ACKNOWLEDGEMENTS

If you would like this information in a different format, please contact Marketing and Communications on 01926 413727

References are available online: **warwickshire.gov.uk/publichealthannualreport**

CONTENTS

FOREWORD

I am very pleased to welcome our Director of Public Health's (DPH) Annual Report for 2018, which this year focuses on the impact of social media on young people's health and wellbeing. Looking after our young people's health and wellbeing is a priority for us all. National and local research has highlighted the need to make sure young people are aware of both the opportunities and risks around social media and how to stay safe online.

I see this years' report as a helpful resource which should be shared with our schools, parents and adults responsible for young people, as well as service commissioners and the wider community. We need to make sure that we are all more aware of the positive and negative impacts that social media has, and the opportunities it presents for connecting with our young people.

Councillor Les Caborn
Portfolio Holder for Adult Social Care and Health, Warwickshire County Council

INTRODUCTION

Social media is a part of everyday life for many of us, and especially for our younger people. The effects of social media have been well documented over recent years and we know that the impacts social media can have on young people's health and wellbeing can be both positive and negative.

I wanted to use this year's report to highlight these impacts but also to ask "WhatsApp'ening in Warwickshire?" and hear the voice of our young people to find out their own thoughts about how social media impacts on their lives and their health and wellbeing.

Dr John Linnane
Director of Public Health, Warwickshire County Council

Chapter 1 of my report provides an overview of the health and wellbeing of Warwickshire's population. **Chapter 2** introduces social media and highlights some national findings. **Chapter 3** presents the findings from our own research on social media and its impact on young peoples health and wellbeing. **Chapter 4** provides progress on last year's recommendations. The **Glossary** at the end of the report will help with understanding key terms in social media.

I am delighted to see how engaged schools and young people have been with this research. I am pleased that we received 2,324 responses to our questionnaire which we circulated with the support of our schools. This is a big achievement and a higher response than many of the national studies we reviewed.

Central to this year's theme is the role that schools, teachers, parents and carers have in understanding and supporting our young people with the impacts social media may have on health and wellbeing. This year's recommendations focus on how we can work together in partnership to ensure our young people are staying safe and well online.

2018 RECOMMENDATIONS

1. Social media can improve access to physical and emotional health and wellbeing information. Warwickshire County Council (WCC) and local NHS partners need to recognise that social media is potentially the best method to engage, inform and signpost young people to information, support and services.

2. Tackling the resilience of young people in a social media world is urgent. All partners need to demonstrate that we adequately resource and work in partnership to protect our young people from harm through social media.

3. We need to take account of the influence that social media can have on promoting healthy lifestyle choices (including getting enough sleep, being physically active and having a balanced diet). Resources aimed at promoting healthy lifestyles and support young people should be adapted to reflect this.

4. Social media can influence relationships in both a positive and negative way. We should ensure that Relationship and Sex Education, as part of the broader Personal Social and Health Education (PSHE) curriculum, includes information on how social media can impact on relationships and how to prevent inappropriate relationships and contact with others online.

5. Social media dependency may be detrimental to health and wellbeing. We should raise awareness to help young people, parents and carers recognise the signs and symptoms of this and provide information on where to seek support.

THE PICTURE OF HEALTH AND WELLBEING IN WARWICKSHIRE

There have been many improvements in public health over the last twelve months and generally health at a Warwickshire level is reported as good compared to England. This chapter provides an update on the health and wellbeing of our local population at district/borough, county and Clinical Commissioning Group (CCG) levels. Warwickshire's contribution to health and wellbeing in the West Midlands is also presented.

Warwickshire has an estimated population of **564,562**[1]

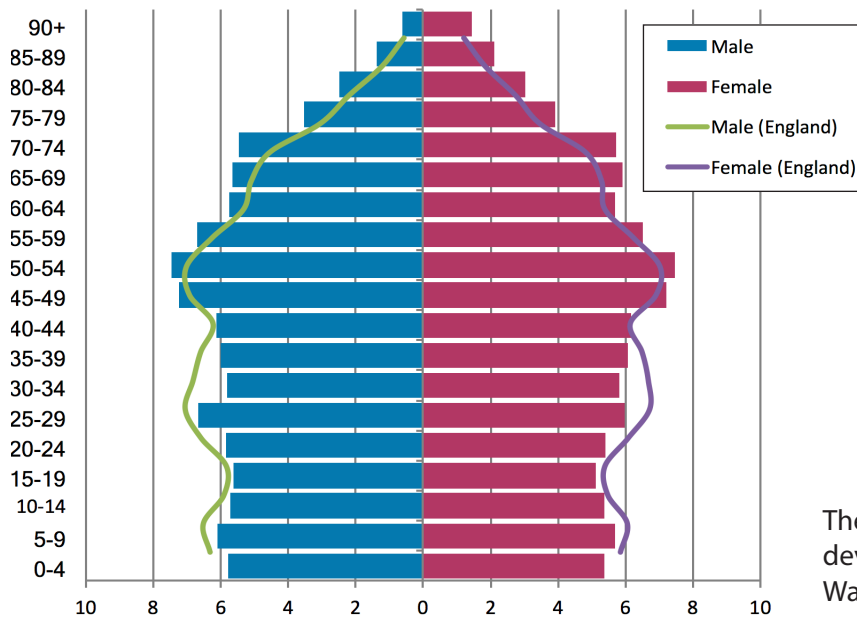| Males	Females	Total
279,194	**285,368**	**564,562**

Source: ONS mid-2017 population estimates [1]

22%

are under 20

Currently around **22.4%** of the population are under 20; although the numbers in this age group are projected to increase by around **3,390** by 2041, this proportion is likely to reduce to **21%.**[2]

There are a large number of new housing developments planned to take place across Warwickshire during the current local plan period (2011-2031). These are expected to impact on population growth.

Over the period 2016-2041 the population in Warwickshire is expected to increase by around **53,250** people (9.5%); Rugby Borough is expected to have the greatest population growth (14.2%) and Stratford-on-Avon District the least (6.7%).[2]

53,250

population increase by 2041
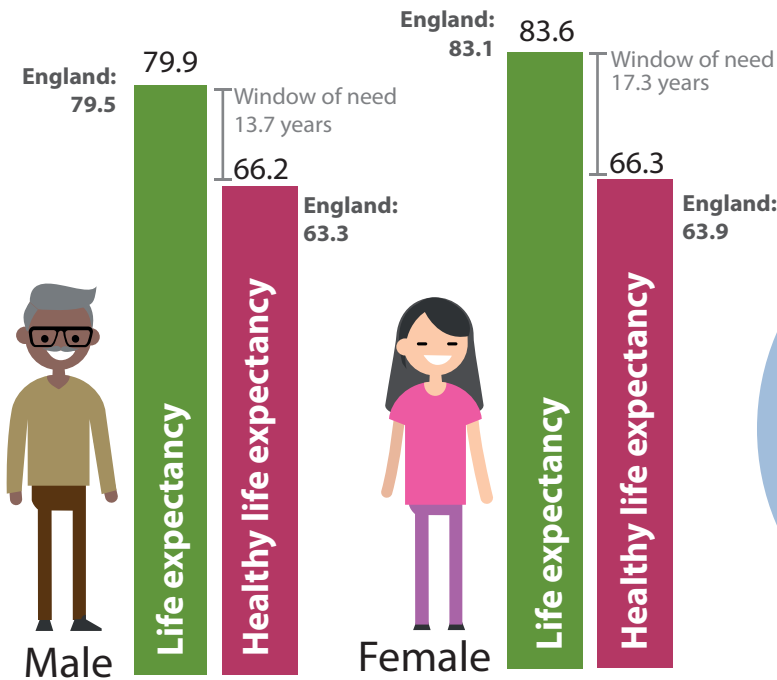
Number of homes planned per district/borough:

North Warwickshire[3]	9,070
Nuneaton & Bedworth[4]	13,374
Rugby[5]	12,400
Warwick*[6]	17,139
Stratford-on-Avon[7]	14,600

*period 2011-2029.

Life expectancy at birth is significantly better in Warwickshire than the England average for both males at **79.9** years and females at **83.6** years[8]. However in 2014-16, compared to the previously reported period, life expectancy decreased slightly in males and remained the same for females[8]. This reflects a national trend of improvements in life expectancy slowing down during the second decade of the 21st century.

Life Expectancy at birth (2014-16)

England: 83.1

79.9

England: 79.5

Window of need 13.7 years

66.2

England: 63.3

83.6

Window of need 17.3 years

66.3

England: 63.9

Life expectancy

Healthy life expectancy

Male

Life expectancy

Healthy life expectancy

Female

In Warwickshire in 2014-2016 healthy life expectancy continues to be significantly higher than the England average but shows a reduction of 1.8 years for males and 1.3 years for females compared to 2013-2015[8].

The gap between life expectancy and healthy life expectancy is known as the 'window of need'. While it is good that we are living longer, the window of need shows that much of the additional time is spent in poor health – around **14 years** for men and **17 years** for women in Warwickshire[8].

Years spent in poor health impact on families and workplaces, and increase pressure on health and social care services.

The 'window of need' for males in Warwickshire is 2.5 years narrower than the England average and for females 1.9 years narrower than the England average.

Deprivation has a significant impact on life expectancy[9]. The life expectancy gap is calculated as the difference between life expectancy in the least and most deprived areas of Warwickshire. In Warwickshire the life expectancy gap is larger for males (**7.5 years**) than females (**5.2 years**)[8].

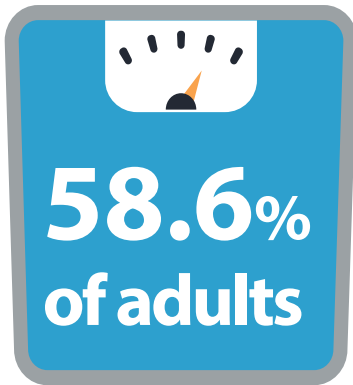**On average females in the least deprived areas are likely to live**

5.2
years longer

than those in the most deprived areas.

This goes up to 7.5 years for males.

7.5
years longer

Warwickshire continues to face a number of public health challenges*

58.6% of adults are classified as overweight or obese

England: 61.3%

2016/17

590 per 100,000 adults (18+)

Hospital admissions for alcohol related conditions

England: 636   2016/17

12.6% of adults (18+) smoke

England: 14.9%

2017
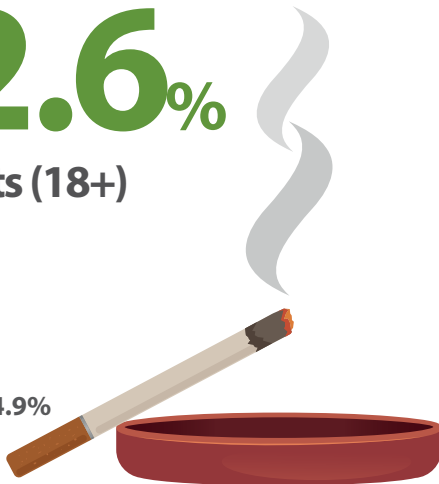
The conception rate in females aged 15-17 is

18.7 per 1,000

England: 18.8

2016

There were

502.9 hospital admissions as a result of self-harm per 100,000 10-24 year olds

England: 417.4   2016/17
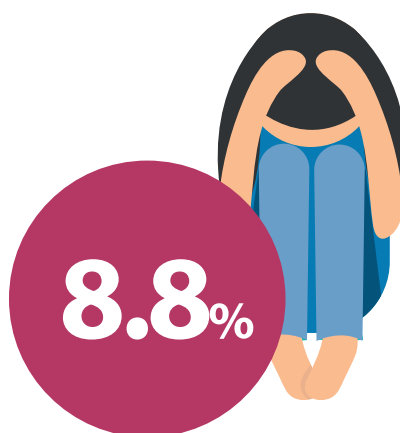
8.8% of adults (18+) on GP practice registers are recorded as having depression

England: 9.1%   2016/17

0.74% of patients (all ages) on GP practice registers have a severe mental illness

England: 0.92%   2016/17

Wider factors influencing health and wellbeing*

48.1% of pupils achieved...

GCSE
MATHS and ENGLISH
GRADE 9-5[10]

England: 42.9% 2016/17

We have a good level of school readiness...

72.6% of all eligible children achieved a good level of development at the end of Reception

England: 70.7% 2016/17

77% of people aged 16-64 are in employment
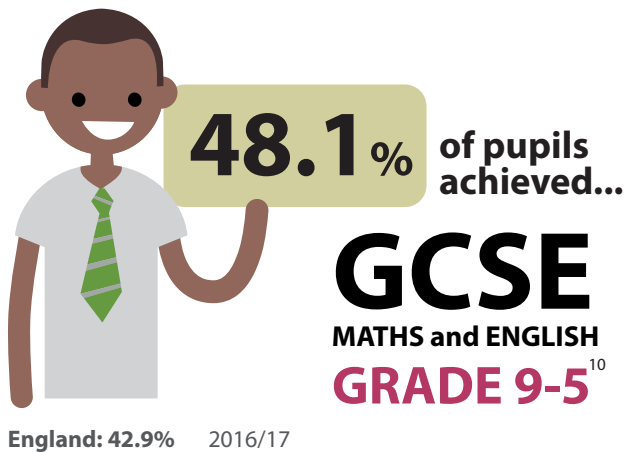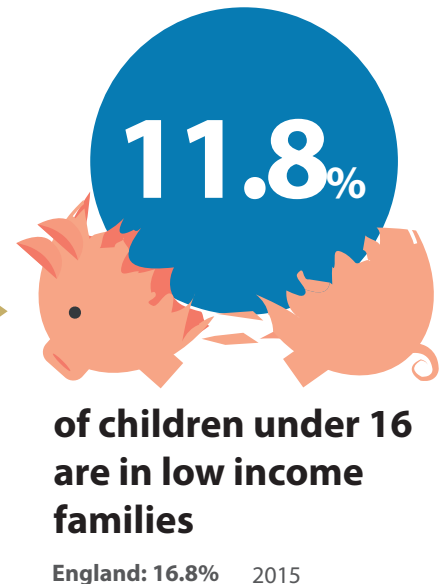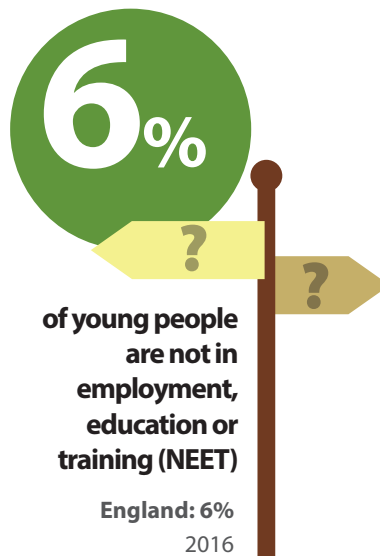
HIRED

England: 74.4% 2016/17

6% of young people are not in employment, education or training (NEET)

?   ?

England: 6% 2016

11.8% of children under 16 are in low income families

England: 16.8% 2015
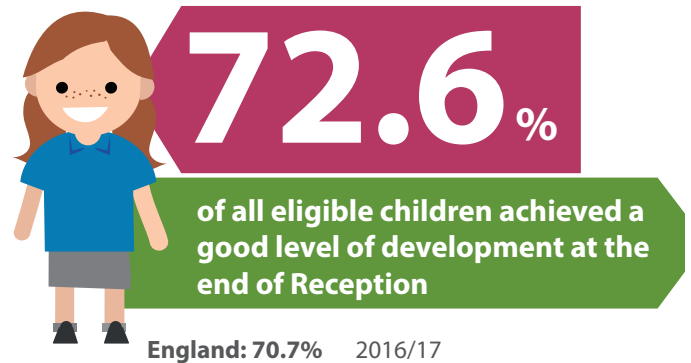
There have been improvements in core areas of public health and in some of the wider determinants that affect health, particularly around young people in Warwickshire:

- The rate of teenage conceptions continues to fall from 19.5 per 1,000 in 2015 to **18.7 per 1,000** in 2016.

- Hospital admissions as a result of self-harm in 10-24 year olds in Warwickshire have reduced from 510.7 per 100,000 in 2015/16 to **502.9 per 100,000** in 2016/17.

- The percentage of children living in low income families has decreased from 14.0% in 2014 to **11.8%** in 2015.

- The percentage of children achieving a good level of development at the end of Reception has increased from 71.0 % in 2015/16 to **72.6%** in 2016/17.

- Wider rate of hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years has decreased from 124.7 per 10,000 in 2015/16 to **119.0 per 10,000** in 2016/17.

All data on these pages is from PHE Fingertips[8], unless otherwise stated.

Warwickshire Health Profile 2018[8]

This shows the current health performance of the Warwickshire County and allows comparisons of performance between the districts and boroughs. The values are coloured to indicate statistical significance compared to England. This is the most recent compiled and published data as of 30th July 2018.

● Better ● Similar ● Worse

Short name	Unit	England	Warwickshire	North Warwickshire	Nuneaton & Bedworth	Rugby	Stratford-on-Avon	Warwick	Period
Under 18 conceptions	per 1,000	18.8	18.7	15.7	29.8	16.7	12.1	16.4	2016
Low birth weight of term babies	%	2.8	2.3	1.4	3.1	2.3	1.4	2.5	2016
Smoking prevalence in adults	%	14.9	12.6	5.7	16.4	14.0	9.8	13.9	2017
New sexually transmitted infections	per 100,000	743	550	608	725	552	419	480	2017
5 year olds free from dental decay	%	76.7	78.4	79.3	71.8	78.1	82.6	80.9	2017
Overweight & obese (reception)	%	22.6	22.8	24.3	24.3	21.0	22.5	22.2	2016/17
Overweight & obese (Year 6)	%	34.2	31.5	35.8	35.5	31.2	28.9	27.6	2016/17
Hospital admissions for unintentional and deliberate injuries in children (aged 0-14 years)	per 10,000	101.5	119.0	103.1	118.0	156.2	103.9	108.0	2016/17
Excess weight in adults	%	61.3	58.6	67.9	66.8	58.4	50.5	55.8	2016/17
Suicide rate (aged 10+)	per 100,000	9.9	12.2	13.7	14.1	8.8	11.6	12.9	2014-16

Indicator	Units								Period
Infant mortality (under 1 year)	per 1,000 live births	3.9	4.7	4.9	6.2	4.3	4.3	3.6	2014-16
Preventable mortality	per 100,000	182.8	172.7	182.4	205.7	175.1	152.3	158.4	2014-16
Under 75 mortality rate: cardiovascular	per 100,000	73.5	68.4	69.8	80.8	75.5	56.2	63.1	2014-16
Under 75 mortality rate: cancer	per 100,000	136.8	131.1	128.0	142.9	124.9	128.9	128.8	2014-16
Hip fractures in people aged 65 and over	per 100,000	575	556	612	522	552	567	539	2016/17
Emergency Hospital Admissions for Intentional Self-Harm	per 100,000	185.3	161.2	156.0	189.2	179.0	143.8	144.2	2016/17
Killed or seriously injured on the roads*	per 100,000	39.7	60.9	84.9	35.9	75.1	81.5	44.3	2014-16
Admitted to hospital for alcohol-specific conditions (under 18)	per 100,000	34.2	43.8	54.3	60.0	39.0	37.5	32.1	2014/15-16/17

The values are coloured Red, Amber and Green (RAG) to indicate statistical significance compared to England. RAG ratings are affected by small numbers for some indicators.
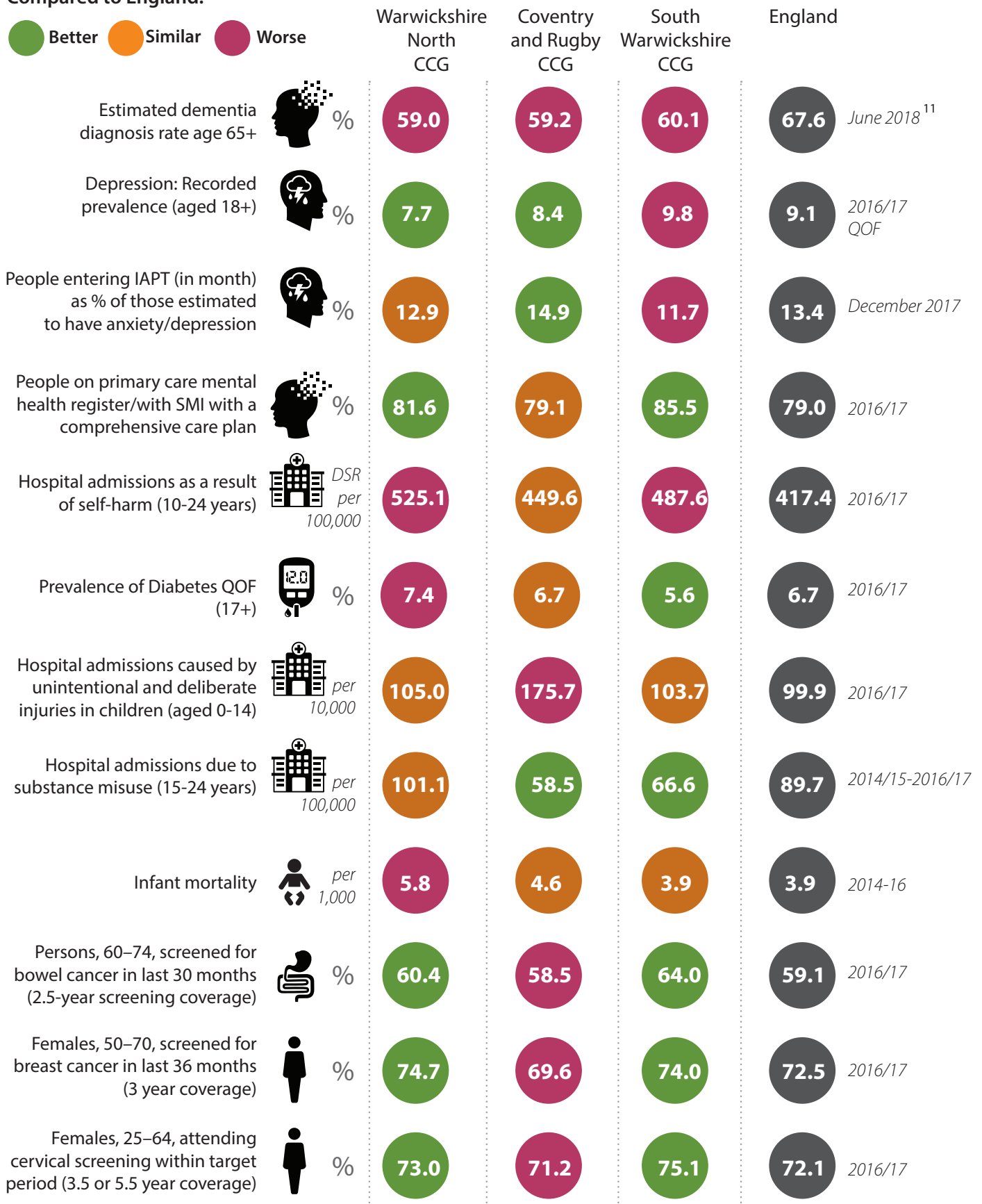
This includes all people (residents & non-residents) killed or seriously injured on Warwickshire roads.

Clinical Commissioning Group (CCG) Health and Wellbeing Profiles

There are 3 CCG organisations commissioning health services in Warwickshire. The indicators below provide information on both the services provided and the health of the population served*.

Compared to England:

🟢 **Better** 🟠 **Similar** 🔴 **Worse**

Indicator	Warwickshire North CCG	Coventry and Rugby CCG	South Warwickshire CCG	England	
Estimated dementia diagnosis rate age 65+ %	59.0	59.2	60.1	67.6	*June 2018* [11]
Depression: Recorded prevalence (aged 18+) %	7.7	8.4	9.8	9.1	*2016/17 QOF*
People entering IAPT (in month) as % of those estimated to have anxiety/depression %	12.9	14.9	11.7	13.4	*December 2017*
People on primary care mental health register/with SMI with a comprehensive care plan %	81.6	79.1	85.5	79.0	*2016/17*
Hospital admissions as a result of self-harm (10-24 years) *DSR per 100,000*	525.1	449.6	487.6	417.4	*2016/17*
Prevalence of Diabetes QOF (17+) %	7.4	6.7	5.6	6.7	*2016/17*
Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14) *per 10,000*	105.0	175.7	103.7	99.9	*2016/17*
Hospital admissions due to substance misuse (15-24 years) *per 100,000*	101.1	58.5	66.6	89.7	*2014/15-2016/17*
Infant mortality *per 1,000*	5.8	4.6	3.9	3.9	*2014-16*
Persons, 60–74, screened for bowel cancer in last 30 months (2.5-year screening coverage) %	60.4	58.5	64.0	59.1	*2016/17*
Females, 50–70, screened for breast cancer in last 36 months (3 year coverage) %	74.7	69.6	74.0	72.5	*2016/17*
Females, 25–64, attending cervical screening within target period (3.5 or 5.5 year coverage) %	73.0	71.2	75.1	72.1	*2016/17*

All data on these pages is from PHE Fingertips[8], unless otherwise stated.

Health and Wellbeing in the West Midlands Combined Authority

The health and wellbeing of residents across the West Midlands is an important component of social and economic performance in the region. Warwickshire, although not one of the seven constituent local authorities of the West Midlands Combined Authority (WMCA), plays a crucial role in contributing to the desire to improve life chances for all residents in the region. The following data compares values for key health and wellbeing measures in Warwickshire with those in the WMCA and the seven metropolitan geographies.

Compared to England: 🟢 **Better**   🟠 **Similar**   🔴 **Worse**

	Warks	WMCA	Bham	Coventry	Dudley	Sandwell	Solihull	Walsall	Wolv
Life expectancy at birth - Males (yrs) (2014-16)	79.9	77.8	77.2	78.5	78.6	77.0	80.4	77.2	77.2
Life expectancy at birth - Females (yrs) (2014-16)	83.6	82.2	81.9	82.4	82.9	81.4	84.2	82.0	81.3
Healthy life expectancy at birth Males (yrs) (2014-16)	66.2	59.7	59.7	62.2	59.9	57.1	64.6	57.7	56.6
Healthy life expectancy at birth Females (yrs) (2014-16)	66.3	60.3	59.3	62.9	61.9	59.5	66.0	57.2	58.6
Window of need (Males)	13.7	18.1	17.5	16.3	18.7	19.9	15.8	19.5	20.6
Window of need (Females)	17.3	21.9	22.6	19.5	21.0	21.9	18.2	24.8	22.7
Infant mortality rate per 1,000 live births (2014-16)	4.7	6.6	7.9	4.6	5.5	5.8	4.5	7.1	5.6
Teenage conceptions (aged 15-17) rate/1,000 (2016)	18.7	23.2	21.4	26.6	20.2	27.4	14.6	30.0	25.8
% of women who smoke at time of delivery (2016/17)	9.9	10.4	8.1	10.9	13.6	10.0	9.8	11.8	17.1
Smoking prevalence in adults (%) (2017)	12.6	14.3	13.7	15.9	13.7	17.4	10.5	14.5	14.4
Fuel poverty (%) (2015)	12.2	14.1	15.6	14.4	11.8	14.3	10.6	13.2	14.6
Physically active (%) (2016/17)	65.9	60.0	62.4	59.3	59.9	54.2	64.0	59.0	55.9
Suicide rate per 100,000 (2014-16)	12.2	9.8	10.0	8.3	9.5	10.8	10.0	10.3	10.1

Source: Public Health England, https://fingertips.phe.org.uk/ accessed 25/7/18[8] AND West Midlands Combined Authority (July 2018), State of the Region report[12].
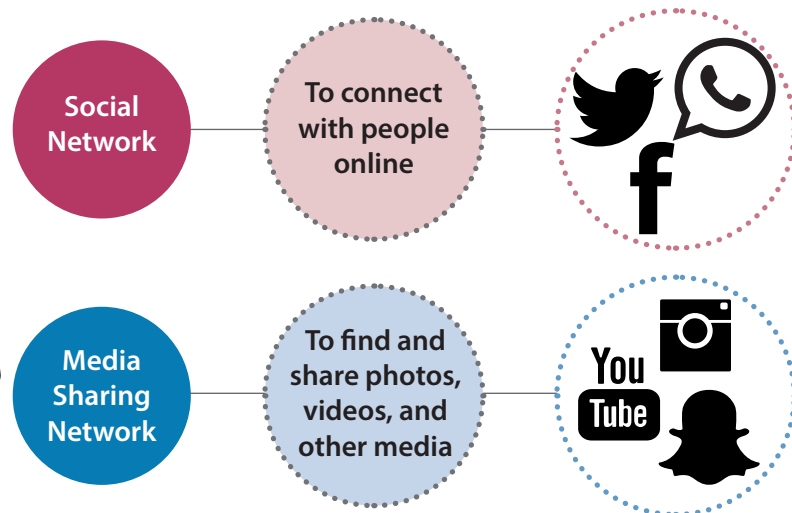
SOCIAL MEDIA AND ITS IMPACT ON YOUNG PEOPLE'S HEALTH AND WELLBEING

Social media has transformed the way in which we communicate and is now a part of most people's lives, especially young people's[13]. Social media can be defined as websites and applications that allow people to communicate and share information on the internet[14].

It can be accessed on a computer, tablet or a mobile phone and there are different types for different uses[15]:

WHAT IS SOCIAL MEDIA?

Like   Comment   Share

Social Network — To connect with people online

**Media Sharing Network** — To find and share photos, videos, and other media

HOW MANY PEOPLE USE SOCIAL MEDIA?

The use of the internet for social media has been rising over recent years. In 2011 **45%** of internet use was reported as being for social networking and by 2017 this figure had risen to **66%**[16]. Worldwide **1 in 4** people now use websites and applications such as Facebook, Twitter and Instagram[17].

Social media use by age[16]

16-24
96%

25-34
88%

35-44
83%

45-54
68%

55-64
51%

65+
27%
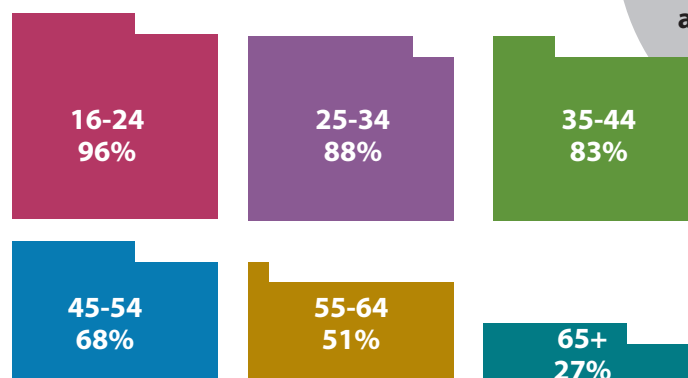
Young people use the internet to access social networking sites more than any other age group. The most common type of device for them to access the internet on is a smartphone[16].
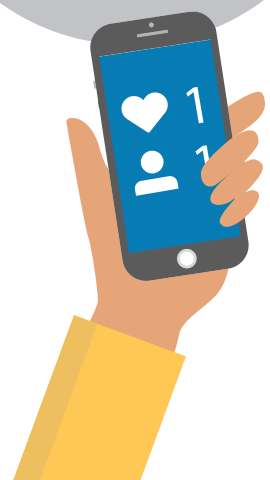
A study by Ofcom in 2017 found that, of those questioned, 12-15 year olds spend the most time online per week (including using social media, gaming and watching videos) compared with younger age groups[18]:

9 hours

13.5 hours

21 hours

5-7 year olds

8-11 year olds

12-15 year olds
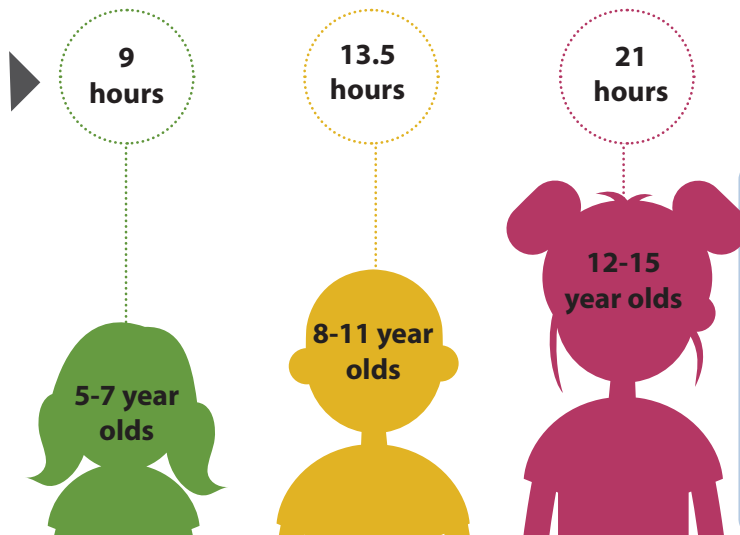
Girls aged 12-15 said they spent more than **21 hours per week** using their mobile phone, which is nearly **50% more** than time spent by boys[18].

Ofcom also reported on the proportion of children and young people who have a social media profile[18]:

3%

24%

74%

Many social media websites and applications have a minimum age limit for use of 13 years[19].

SOCIAL MEDIA AND THE IMPACT ON HEALTH AND WELLBEING

Most young people growing up in 2018 have never known a world without social media. The way in which it enables young people to connect online, build friendships, be creative and learn can impact on all aspects of health and wellbeing in both a positive and negative way[13] .

POSITIVE IMPACTS
- Healthy lifestyle choices
- Informed about the world
- Inspired to be more active
- Positive body image
- Emotional support
- Build and form new friendships/relationships
- Connect to peers and family
- Creativity
- Self-expression
- Self-identity

NEGATIVE IMPACTS
- Poor body image
- Low self esteem
- Feeling sad
- Feeling anxious/worried
- Feeling depressed
- Lonely and socially isolated
- Cyber bullying
- Peer pressure
- Poor sleep habits

Schools, parents and carers play a key part in educating children and young people about online safety but the responsibility for empowering them to stay safe and use the internet and social media appropriately goes much wider in society[20]. Understanding the impact of social media on our young people provides the opportunity for prevention and early intervention to protect and improve their health and wellbeing.

WHAT DO WE KNOW ALREADY ABOUT THE IMPACT OF SOCIAL MEDIA ON YOUNG PEOPLE'S HEALTH AND WELLBEING?

The following four reports provide a snapshot of some of the findings from recent national research:

UK Safer Internet Centre, Digital Friendships: the role of technology in young people's relationships - 2018[21]

Participants

2,000 young people aged 8-17 years

Method

Online survey

Key findings

- The most popular platforms being used to chat to friends on a daily basis are YouTube (41%), WhatsApp (32%), Snapchat (29%), Instagram (27%) and Facebook or Facebook Messenger (26%).
- Over half (54%) of respondents said they would feel isolated if they couldn't talk to their friends via technology.
- 39% said they have made friends online that they wouldn't have met otherwise.
- Expectations are being formed in young people's relationships around replying to messages, inclusion in group chats and the importance of 'likes'.
- Popularity, status and self-esteem can play a role in how young people interact with each other; 40% have felt left out and 36% think that others lead more exciting lives.
- The majority of young people are having positive experiences and interactions online but many are also having negative experiences.

University of Birmingham - Impact of Social Media on Young People's Health and Wellbeing: Evidence, Guidelines and Actions - 2018[22]

Participants

1,346 young people aged 13-18 years

Method

Focus group and workshops

Key findings

- 63% believe social media is a good source of health information.
- 53% would change their health-related behaviours if it was posted by an official organisation e.g. by the NHS or Sport England.
- Over half of young people (53%) use social media to access health information on food, physical activity, sleep and body image.
- 46% reported changing their health-related behaviours as a direct result of accessing content on social media.
- 43% of young people reported that health-related content on social media positively impacts their health.
- Nearly all young people reported seeing inappropriate content on social media related to food, physical activity and body image e.g. water diets.
- Young people reported that peer pressure on social media and its relationship with body dissatisfaction is a bigger problem than cyberbullying.

Royal Society for Public Health - #StatusofMind - Social media and young people's mental health and wellbeing - 2017[13]

Participants
1,479 young people aged 14-24 years

Method
Survey

Key findings

- Different social media platforms can impact on health and wellbeing in different ways.
- YouTube has the most positive impact on health and wellbeing and Instagram the most negative impact on health and wellbeing:
  - YouTube (most positive)
  - Twitter
  - Facebook
  - Snapchat
  - Instagram (most negative)
- Social media has been described as more addictive than cigarettes and alcohol.
- Social media use is linked with increased rates of anxiety, depression and poor sleep.
- Social media can improve young people's access to other people's experiences of health and expert health information.
- Those who use social media report being more emotionally supported through their contacts.

Children's Commissioner - 'Life in Likes' report - 2017[19]

Participants
32 young people aged 8-12 years

Method
Focus groups

Key findings

Young people:
- Knew how to cheer themselves up or calm down using social media.
- Were aware of online safety but less so of protecting themselves from situations that could affect their mood and emotions.
- Felt that social media was important for maintaining relationships.
- Were conscious of keeping up appearances on social media.
- Felt good when they got 'likes' and 'comments'.
- Said social media could inspire and help them learn.

Most popular social media platforms:
Snapchat, Instagram, Musical.ly, WhatsApp

VOICE OF WARWICKSHIRE'S YOUNG PEOPLE
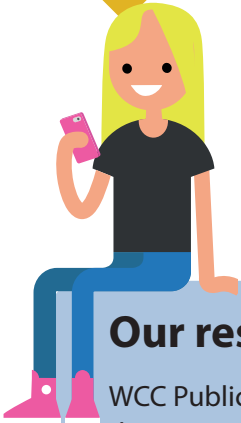
Our research

WCC Public Health invited young people aged 10-18 years from across the county to participate in a research project. In total over 2,300 young people took part. The findings of the research will help to provide a better understanding of the impact that social media has on young people's health and wellbeing. This in turn will help us to make evidence-based recommendations to key stakeholders to help improve the health of children and young people in Warwickshire.

For the purpose of this research social media was defined as websites and applications that enable users to create and share content or to participate in social networking. We did not include online gaming.

A mixed methods approach was used to find out what it is like growing up in a world of social media and how it can impact on health and wellbeing.

An online survey was used to collect local data on key themes that emerged from a literature review and from focus groups with young people attending four schools in Warwickshire.

Survey respondents profile

Number of young people	2,324*
Age	10 - 18 years old
Year group	Years 6-8: 56% Years 9-13: 44%
Gender	47.2% boys 47.5% girls 1.9% trans 3.4% prefer not to say
Social media use	89% of young people responding used social media

Not all respondents answered every question in the survey.

Key themes

The research identified five key themes where social media had an impact on health and wellbeing.

Wellbeing

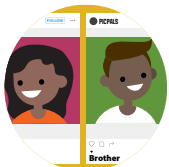Wellbeing is about feeling good and doing (functioning) well[23].

Identity

The characteristics that determine who or what a person or group is[24].

Lifestyle

The interests, opinions and behaviours chosen by individuals[25].

Relationships

A relationship describes how people are emotionally involved or connected in some way[26].

Fear of missing out

Fear of missing out (FOMO) is considered a form of social anxiety and describes the feeling of not wanting to miss any opportunities to have social interactions and experiences[13].

For analysis purposes we grouped respondents by:

Gender

Girls   Boys

Daily Usage

Low users - 2 hours or less   **High users** - 3-6 hours   **Super users** - 7 hours or more
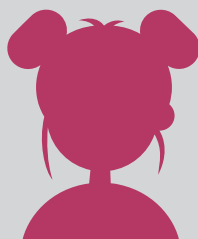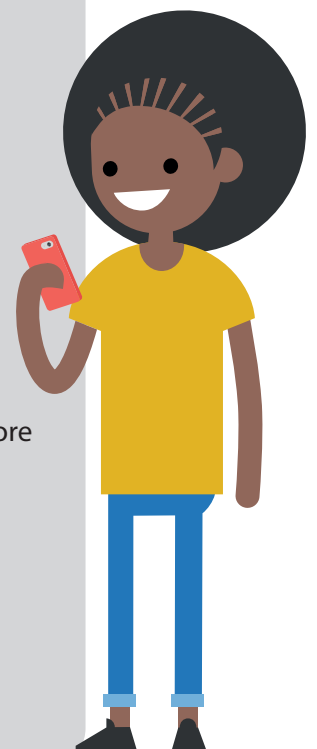
Age group

'Younger' age group - Years 6-8 (ages 10-13)

'Older' age group - Years 9-13 (ages 13-18)

WELLBEING

Wellbeing is about feeling good and doing (or functioning) well[23].

BACKGROUND

Adolescence is a crucial time for emotional and social development[27]. The relationships we form and the identities we shape during this time can impact on feelings of wellbeing[13].

Social media has the ability to impact on the emotions of children and young people in both a positive and negative way. It can provide a place for young people to express themselves; form, build and maintain friendships; connect with people (some of which may be outside of their usual social circle), and learn about the world around the them[13].

For some young people social media can negatively affect wellbeing, for example through the impact of cyberbullying. It can also encourage unhealthy behaviours such as obsession with body image, which is linked to low self-esteem and the inability to cope with life's ups and downs[13]. Low self-esteem and low resilience are more prevalent in teenage girls and is related to significant increase in self-harm and other destructive behaviours[13,28,30].

Understanding more about the social media interactions our young people are having, and how this may be impacting on their mental health and wellbeing, is important to be able to support them. Good mental health can provide the foundation for good physical health and for a range of other important life skills, capacities and capabilities[29].

FINDINGS FROM NATIONAL RESEARCH:

Young people who were heavy users of social media, (spending more than two hours per day on social media) were more likely to report poor mental health, including psychological distress[13].

Young people were increasingly turning to social media as a means of emotional support to prevent and address mental health issues. 40% of 8-17 year olds said that it is easier to tell someone how they feel online than in person[13,21].

Children associated social media with positive moods and happy emotions. From Year 4 to Year 7 (aged 8-12), children described actively using social media to boost their mood and make them laugh, by watching funny videos and sending funny things to their friends[24].

19% of young people aged 8-17 years old had thought about stopping using social media because it has a negative impact on their mood[22].

82% of young people reported that they had felt excited by something online in the last week[22].

Overall use, nighttime-specific use and emotional investment were each associated with lower self-esteem[30].

"I used to have major issues with severe paranoia, self-hatred and low self-esteem, and thanks to the support from online communities, I am getting a lot better. I'm so grateful for social media; it has undoubtedly saved my life."
Girl, Year 10

VOICE OF WARWICKSHIRE'S YOUNG PEOPLE

60% of young people felt that overall social media had a positive impact on their emotions.

34% weren't sure.

6% reported a negative impact.

Females were significantly more likely to report a negative impact on their emotions.

25% of young people have seen negative comments about themselves on social media which have upset them.

More girls have experienced this than boys:
Girls: 30%
Boys 20%

73% of young people report social media never makes them feel lonely/excluded.

54% reported social media never makes them feel angry.

37% occasionally felt angry.
9% often felt angry.

5% of young people report social media often makes them feel worried.

30% occasionally feel worried.

65% never feel worried.

More respondents in the older age group are likely to use social media to find support or help if they are upset or worried about something:

Older group: 30%
Younger group: 19%

69% reported feeling included/connected to friends through social media.

"Social media makes me feel happy when I receive kind messages or when a funny video shows on Facebook or Youtube"
Girl, Year 10

"I personally think that having social media opens up a whole new amazing world"
Girl, Year 7

"It is extremely positive and key to my lifestyle. It allows me to explore things I never thought were possible"
Boy, Year 11

RECOMMENDATION

Social media can improve access to physical and emotional health and wellbeing information.

Warwickshire County Council (WCC) and local NHS partners need to recognise that social media is potentially the best method to engage, inform and signpost young people to information, support and services.

IDENTITY

The characteristics that determine who or what a person is[24].

BACKGROUND

Children and young people develop a sense of their identity as they are growing up. Identity is fluid and it can be influenced and shaped by our beliefs, life experiences and social circumstances.

We know that the majority of young people use social media regularly. This can contribute to the shaping of their identity as the views of friends and others online may affect the way children and young people behave and feel on and offline[13].

Social media profiles can be a way for young people to express their identity and for others to see who they are[13]. Profiles can be created on certain websites and applications, such as Facebook and Instagram. They can be positive as they enable young people to connect online, however sharing personal information online could pose a safety risk to children and young people if not properly managed[31].

FINDINGS FROM NATIONAL RESEARCH:

Children and young people were conscious of keeping up appearances on social media, particularly when they started secondary school, and identity and seeking peer approval become more important[19].

8-12 year olds reported the importance of 'staying true to yourself' and being authentic on social media. Girls were worried about looking 'pretty' and boys were more concerned with looking 'cool' and having the right clothing[19].

8-12 year olds became aware of how they looked compared to others when they started following celebrities and other people on social media, and felt that comparisons were unattainable[19].

Many children and young people had developed aspirations after being exposed to new ideas online and things they had seen on social media shaped their career goals[19].

"How I use social media helps me find people with similar problems and interests as me. Without it I would feel lonely and depressed."
Girl, Year 10

"The worst thing about social media is jealousy – feeling pressured to look a certain way.... Or look like someone else.... And the fear that comes with that of not being good enough."
Girl, Year 10

"I have found that if I use social media to post images or opinions I become more self-conscious, which is why I don't have an Instagram or Twitter account."
Girl, Year 13

VOICE OF WARWICKSHIRE'S YOUNG PEOPLE

51% did not feel under pressure to look better or 'perfect' in pictures.

28% did feel under pressure.

21% weren't sure.

55% could be themselves on social media.

17% felt they couldn't.

28% weren't sure.

42% of young people overall weren't sure if social media makes them feel positive about how they look.

25% of girls agreed social media makes them feel positive about how they look compared to **20%** of boys.

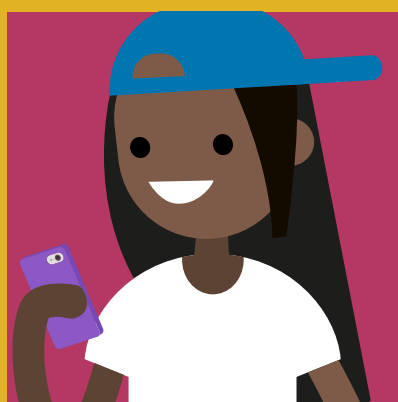**54%** of young people reported that social media helps them to be creative.

28% agreed that they see pictures on social media that make them want to change how they look.

54% disagreed.

18% weren't sure.

#selfie

"It inspires me to do things better and to just become a better person in general."
Girl, Year 10

"Filters mean you can post the most perfect version of yourself."
Boy, Year 13

"So many people (including myself) have put unrealistic photos of themselves where they're covered in makeup and filters to make them flawless, when that isn't real life. And teenagers (also myself included) see these images of people that aren't real and feel the need to aspire to look like that."
Girl, Year 11

RECOMMENDATION

Tackling the resilience of young people in a social media world is urgent. All partners need to demonstrate that we adequately resource and work in partnership to protect our young people from harm through social media.

LIFESTYLE

The interests, opinions and behaviours chosen by individuals[25].

BACKGROUND

Lifestyle choices include the food we eat, our level of physical activity and the use of substances such as tobacco and alcohol. These choices can affect children and young people's health and wellbeing in either a positive or negative way. For example, choosing to eat healthy foods and exercise regularly can help young people to maintain a healthy weight and impact on their long term health and wellbeing. Children and young people's lifestyle choices are influenced by a variety of factors including:

• **The family and home environment**
• **Where they go to school**
• **Their friends and peer networks**
• **The media**
• **The wider society in which they live**

Social media can be a powerful tool to encourage children and young people to make healthy lifestyle choices[21,22]. It enables them to access up-to-date and accurate health information and resources, and it can create opportunities for children and young people to connect with others and share experiences. Conversely, information from less credible sources could encourage them to make inappropriate choices[22].

FINDINGS FROM NATIONAL RESEARCH:

63% of young people believed social media is a good source of health information[22].

Over half of young people (53%) used social media to access health information on food, physical activity, sleep and body image[22].

Likes and followers are used by young people to inform their judgements about whether information is credible and which types of health-related content they should act upon[22].

Nearly all young people aged between 13-18 reported seeing inappropriate content related to diet/nutrition, exercise and body image[22].

As a result of accessing health materials through social media some young people have reported:

• Developing obsessive/addictive health monitoring behaviours e.g. tracking activity levels[22]
• Engaging with extreme diets and exercises[22]
• Experiencing heightened levels of body dissatisfaction[22]

Some media platforms, such as YouTube, contain videos that portray smoking in a positive light and this was exposing children and young people to significant risks related to smoking[32].
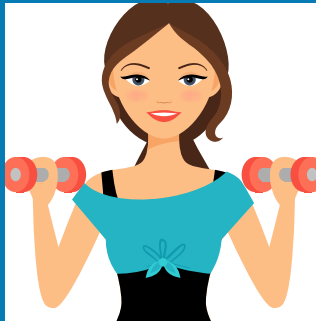
VOICE OF WARWICKSHIRE'S YOUNG PEOPLE

26% of young people have made healthier lifestyle choices because of what they have learnt on social media.

This was true for more girls than boys:
Girls: 32%
Boys: 21%

44% of young people are inspired to be active by posts, pictures and people they see on social media.
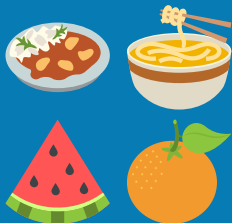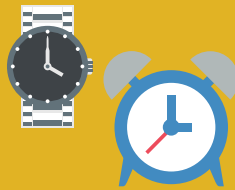
58% of young people do not think the amount of time they spend on social media impacts on their physical activity levels.

More boys think this than girls:
Girls: 53%
Boys: 63%

24% of young people have seen how to eat healthily by posts, pictures and people they see on social media.

This was true for more girls than boys:
Girls: 29%
Boys: 19%

"I had a friend who followed lots of conflicting diet information and weight loss posts on things like Instagram and she has ended up with an eating disorder"
Girl, Year 12

"It wastes so much time and I feel it can make me more tired or less active as I fill up spare time with social media."
Girl, Year 12

"Some pages and public figures motivate and inspire me to change my lifestyle so that I am happier, healthier and more active."
Girl, Year 12

"It is extremely positive and key to my lifestyle...if it wasn't for social media and technology in general then my life would be extremely tedious."
Boy, Year 11

RECOMMENDATION

We need to take account of the influence that social media can have on promoting healthy lifestyle choices (including getting enough sleep, being physically active and having a balanced diet). Resources aimed at promoting healthy lifestyles and support young people should be adapted to reflect this.

RELATIONSHIPS

A relationship describes how people are emotionally involved or connected in some way[26].

PICPALS UNFOLLOW ...
Best Mate

PICPALS FOLLOW ...
Mum

PICPALS UNFOLLOW ...
Brother

PICPALS UNFOLLOW ...
Friend
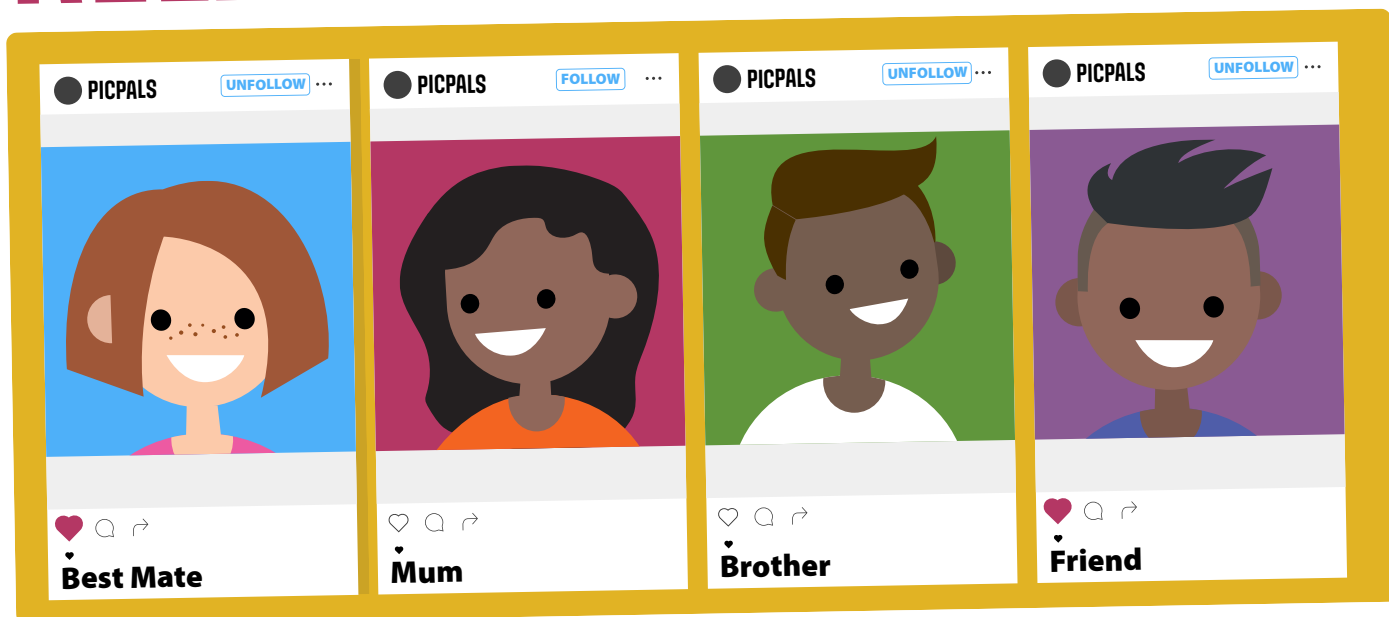
BACKGROUND

As social beings, the ability to make and keep relationships is essential to us and can influence the way we operate within society. Healthy relationships can be the key to being mentally healthy and having a positive sense of wellbeing[33].

Social media can have a powerful effect, for good or bad, on a range of relationships[21]. It can be an important tool for forming and maintaining relationships with friends and family, as well as people outside of young people's usual social circles. It can also enable a young person to become more independent and communicate without barriers. However, social media presence (or a lack of) can contribute towards breakdowns in relationships with family and friends both on and offline, as highlighted in the national findings[19].

Social media can also be used by children and young people to access information and advice on relationships[22].

"Social [media] is fine, lets you keep in touch with people e.g. friends and family." Boy, Year 9

FINDINGS FROM NATIONAL RESEARCH:

Some children and young people found that maintaining online friendships could be stressful and a source of distraction from offline activities[19].

Being 'offline' or not being contactable was in some cases considered socially damaging. People could fall out if their friends felt they weren't being responsive enough online[19].

38 % of 14 - 17 year olds reported sending a sexual image to a partner during or after a relationship while 49% had received them[34].

The way parents were using social media also affected children's own use and perceptions. Children whose parents use social media a lot tended to feel that it was more essential than children whose parents tended to use it less[19].

Schools focus primarily on cyberbullying, but for young people, a bigger problem is peer-pressure on social media and its relationship to enhanced body dissatisfaction[22].

VOICE OF WARWICKSHIRE'S YOUNG PEOPLE

91% of young people agree social media helps them keep in touch with friends.

61% of young people often experience friends sending kind messages to them.

This is much higher for girls (72%) than boys (48%).

23% of young people agree social media causes problems between friendships.

46% have occasionally experienced falling out with friends because of social media.

30% have often or occasionally experienced cyberbullying.

Experiencing Cyberbullying is more common in those who use social media for longer:

Super users: 42%
High users: 33%
Low users: 25%

68% would stick up for a friend if they saw them being bullied on social media.

50% of young people said that social media makes it easier to say 'no' to things they don't feel comfortable doing in relationships.

18% disagreed.
32% weren't sure.

9% reported social media puts pressure on them to be in a relationship.

69% reported it didn't put pressure on them.

22% weren't sure.

"PSHE lessons are also far too outdated on some social media issues like pornography. If the education system is nervous about talking about it the teenagers will become nervous as well."
Girl, Year 12

"Social media actually helps me to feel like I'm not alone in the world. I will see a post on Tumblr about something (eg. insomnia or asexuality) which I can relate to."
Girl, Year 8

"It's easier to make friends or get closer to people you may have a crush on."
Boy, Year 8

RECOMMENDATION

Social media can influence relationships in both a positive and negative way. We should ensure that Relationship and Sex Education, as part of the broader Personal Social and Health Education (PSHE) curriculum, includes information on how social media can impact on relationships and how to prevent inappropriate relationships and contact with others online.

FEAR OF MISSING OUT

Fear of Missing out (FOMO) is considered a form of social anxiety and describes the feeling of not wanting to miss any opportunities to have social interactions and experiences[13].

BACKGROUND

Social media creates an environment where it is easy for children and young people to be continually online and connected with their peers. This has become a large contributing factor to the FOMO phenomenon.

Children and young people experience considerable pressure to be available all of the time and to know and be involved in everything that is going on around them - this can lead to compulsive social media checking and significant emotional investment. FOMO can enhance the perception that other people are having rewarding experiences that you are not involved in or feel excluded from. Everyone else can appear to be having a better time[13,27,35].

The impact of FOMO on health and wellbeing shows a strong link with poor sleep quality and poor mental health and wellbeing, both of which are underlying factors in a range of health conditions[27].

FOLLOW
LIKE
STATUS UPDATE
COMMENT
INVITE
FRIEND REQUEST
MESSAGE
SELFIE

FINDINGS FROM NATIONAL RESEARCH:

Social media has been described as more addictive than cigarettes and alcohol. Social media addiction is thought to affect around **5%** of young people[19].

40% of young people aged 8-17 said that they feel left out when people post things that they haven't been included in, with girls more likely to feel this (**43%**) in comparison to boys (**37%**)[21].

Over a third of young people say that they feel that other people's lives look more exciting than theirs on social media with girls, once again, more likely to feel this (**40%**) in comparison to boys (**33%**)[21].

73% of young people said they think it's important for their friends to reply to their messages once they've seen them, with **60%** saying they think it's important to be included in group chats by their friends[21].

1 in 5 young people said they wake up during the night to check messages on social media, leading them to be three times more likely to feel constantly tired at school than their classmates who don't use social media during the night[13].

"I'd love to have my electronics all the time... my mum makes me bring things down an hour or so before bed and she monitors what I do."
Girl, Year 7

"I use social media much less than I did this time last year and am much happier as a result."
Girl, Year 11

"It makes me more grumpy being on social media for too long."
Girl, Year 9

"My friends are always on it so you feel a bit left out but in a good way because I am not involved in conflicts."
Girl, Year 7

VOICE OF WARWICKSHIRE'S YOUNG PEOPLE

43%
said they check social media as soon as they wake up.

This is higher in the older group than the younger age group:
Older group: 51%
Younger group: 36%

31%
agree social media impacts on the amount of sleep they get.

This is much higher in the older age group that the younger age group:
Older group: 40%
Younger group: 23%

21%
check social media if they wake up during the night.

68% do not check.
11% weren't sure.

29%
said they often or occasionally worry that their friends have 'better lives' than them when they look on social media.

71% never worry about this.

A total of
32%
of respondents occasionally or often get upset about not being invited into a group chat.

68% never get upset about this.

53%
never feel jealous of others because of social media.

47%
often or occasionally feel jealous of others because of social media.

> "I get fed up when everybody else uses it and I can't, so I feel left out and sad because my friends are using another electronic website app which I believe is useless and silly and depressing"
> Boy, Year 8

RECOMMENDATION

Social media dependency may be detrimental to health and wellbeing. We should raise awareness to help young people, parents and carers recognise the signs and symptoms of this, and provide information on where to seek support.

SUPPORT FOR YOUNG PEOPLE

Whether you need support, or want advice about the impact social media may be having on someone you know, or you want to find out more about how to keep safe online, there are many national and local websites available to help:

HEALTH & WELLBEING

WCC's Children and Young People: www.warwickshire.gov.uk/social-care-and-health/children-and-young-people/children-and-young-people-health - contains links to national support sites such as Bullying UK and Childline.

Big White Wall (16+): www.bigwhitewall.com - online mental health and wellbeing service to help young people deal with life's ups and downs.

ChatHealth: www.warwickshire.gov.uk/chathealth - confidential text messaging service for advice on all kinds of health and wellbeing issues.

If you are the parent or carer of a school-aged child, you can text a school nurse on **07520 619 376** *Monday to Friday from 9am to 5pm*.

If you are 11 – 19 years old you can text a school nurse on **07507 331 525** *Monday to Friday from 9am to 5pm*.

SEXUAL HEALTH & RELATIONSHIPS

Respect Yourself website: respectyourself.info -a sex positive resource providing information and signposting about relationships, sex, consent and much more for young people aged 13-25.

All About Me - an age appropriate relationship and sex education programme for primary schools which accredited teachers can access. Please contact **phadmin@warwickshire.gov.uk** for further information.

ONLINE SAFETY

NSPCC Net Aware: www.net-aware.org.uk
The NSPCC has reviewed the most popular sites, apps and games that children and young people use for social networking. This site provides useful information for parents to learn more about how children use social media so they can help children and young people keep safe online. If you are worried or need advice about social media call the Helpline **0808 800 5000**.

UK Safer Internet Centre: www.saferinternet.org.uk - advocates for the safety of children and young people online. If you are a professional and have a concern about a child or young person using social media call the Helpline **0344 381 4772**.

Cyber Safe Warwickshire: www.cybersafewarwickshire.com/young-adults offers practical help and advice for young people affected by cyber crime and online safety issues. If you have been affected by crime call the 24hr victim support line on **0808 16 89 111.**

You&Co: www.youandco.org.uk is Victim Support's youth programme, that helps young people cope with the impacts and effects of crime. Warwickshire Victim Support can be called on **01926 682 693.**

VOICE OF WARWICKSHIRE'S YOUNG PEOPLE

61%
young people feel safe on social media.

31% **were not sure if they feel safe.**

8% **do not feel safe.**

13%
of all respondents have experienced strangers asking them for inappropriate images.

This was higher in the older group at **21%** compared with **7%** in the younger group.
It was also higher with girls than boys.
**Girls: 18%**
Boys: 8%

Young people reported they were **more likely** **to talk to their parents/ carers than their friends if they were worried about something that happened on** **social media**.

59%
stated that they did not use their full names on social media.

"...if there is rude or inappropriate content or people I block and report them/it"
Prefer not to say,
Year 7

PROGRESS WITH 2017 RECOMMENDATIONS
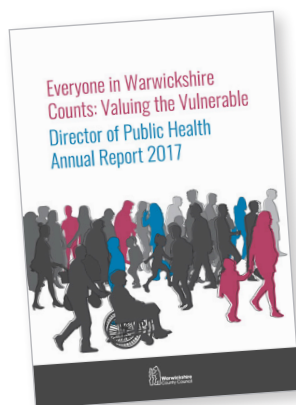
Everyone in Warwickshire Counts: Valuing the Vulnerable

This chapter outlines progress with the recommendations made in last year's annual report, which were endorsed by the Warwickshire Health and Wellbeing Board in September 2017. The report entitled, 'Everyone in Warwickshire Counts: Valuing the Vulnerable', focused on the health and wellbeing of vulnerable people. The theme was chosen as whilst the health and wellbeing of the Warwickshire population in general has seen significant improvements over recent years, the health and wellbeing of vulnerable people continues to lag behind.

Since publication of the report, WCC and partners have supported and implemented key initiatives to improve the health and wellbeing of those who are most vulnerable.

Recommendation 1

In order to ensure a continued focus on the needs of the most vulnerable, I recommend all Commissioners should:

a. Adopt the Social Value Act (2012) to secure economic, social and/or environmental benefits for vulnerable groups through procurement processes.

b. Expand the statutory Equality Impact Assessment (EqIA) processes for services to include, where relevant, additional vulnerable groups e.g. the homeless or Children Looked After, along with the nationally defined 'protected groups'.

Progress

- In 2017/18, WCC revised the guidance on the Social Value Act for Commissioners. This is being promoted to WCC Commissioner's in 2018/19.

- South Warwickshire CCG (SWCCG) commissioners are reviewing the Social Value Act within procurement processes.

- In autumn 2017, WCC equalities representatives endorsed the recommendation to expand EqIA where relevant to include vulnerable groups.

- SWCCG have refreshed the organisation's standard equality analysis to include consideration for vulnerable groups.

Recommendation 2

We need to ensure the current approach to community resilience and community hub developments across Warwickshire includes an explicit assessment of the impact of hubs, and their reach, on vulnerable groups. For example, an evaluation should include an assessment of the impact of hubs on access to services and/or outcomes for vulnerable individuals and groups.

Progress

WCC has agreed to seek to evaluate the impact of hubs in 2018/19. This will include an assessment of the impact of hubs on access to services and/or outcomes for vulnerable individuals and groups.

Recommendation 3

Commissioners and providers should consider opportunities to reduce vulnerability among key groups, for example, schools should be encouraged to work towards achieving the Warwickshire Young Carers Schools Award and frontline staff working with Gypsies and Travellers should be provided with community engagement training where appropriate.

Progress

Loneliness and social isolation

WCC Cabinet established a Loneliness Advisory Group to recommend to Cabinet the practical steps that the county council can take to reduce loneliness and social isolation in Warwickshire.

The group has met with representatives from a number of organisations to gain further insight into the issue of loneliness and social isolation and how it directly affects Warwickshire residents.

Recommendations and an action plan are being developed by the group for implementation in 2018/19.

Homelessness

WCC Cabinet announced investment of £300,000 to tackle homelessness. A two-year programme of work will focus on those with mental health, drugs and/ or alcohol problems. WCC will work with district and borough councils and other key stakeholders to determine the best approach to support the local homeless population.

Just about managing

WCC have recently partnered with Birmingham City Save Credit Union to introduce an Employee Credit Union Scheme as part of the HR Benefits Policy. Affordable credit is an issue both with those in work and on benefits. Staff will be encouraged to save directly from the HR Payroll and will have access to affordable loans. If this scheme is successful it could be rolled out to district and borough authorities and then be made available more widely in Warwickshire.

Young carers

Warwickshire Young Carers Service secured three years of funding to support schools in the county to achieve the Warwickshire Young Carers Schools Award. Nine schools have achieved the award and another school is in the process. The service is continuing to promote the award to schools across the county.

Physical healthcare needs of people with Severe Mental Illness (SMI)

People with SMI often die 20 years earlier than their peers from potentially avoidable diseases, in particular cardiovascular disease. WCC Public Health established a group to specifically address the physical health needs of those with SMI. The group reports to the Coventry and Warwickshire Mental Health Sustainability and Transformation Partnership (STP) Board.

Cancer screening

Certain population groups are less likely to take up cancer screening opportunities and as such are more likely to present with cancer at a late stage when the likelihood of successful treatment is reduced. In 2018, Warwickshire Public Health is working with colleagues in the local CCGs, NHS Trusts and voluntary sector to provide training to those who work with individuals with a learning disability, a mental illness or those from black or minority ethnic groups or more deprived groups who are all less likely to take up screening opportunities.

GLOSSARY

App - a computer programme designed to run on a mobile device such as a phone/tablet.

Clinical Commissioning Group (CCG) - NHS organisations set up by the Health and Social Care Act 2012 to organise the delivery of NHS services in England.

Commissioning - planning, setting up and contracting of a service.

Deprivation - refers to unmet needs caused by a lack of resources of all kinds, not just financial. The English Indices of Deprivation 2015 use 38 separate indicators, organised across seven distinct domains of deprivation which can be combined, using appropriate weights, to calculate the Index of Multiple Deprivation 2015 (IMD 2015). This is an overall measure of multiple deprivation experienced by people living in an area.

Directly Standardised Rate (DSR) - The rate of events that would occur in a standard population if that population were to experience the age specific rates of the subject population.

Emoji - A graphic picture or smiley used in social media messaging or webpages. (emojipedia.org/)

Equality Impact Assessment (EqIA) - a process designed to ensure that a policy, project or scheme does not discriminate.

Excess weight - overweight including obese.

Facebook - online social networking website for sharing video, photos and written content.

Facebook Messenger - instant messaging services for chatting using text or sending videos or photos.

Fuel Poverty - households are considered to be fuel poor where they have fuel costs that are above average and were they to spend that amount, they would be left with a residual income below the official fuel poverty line.

Healthy life expectancy - the average number of years a person would expect to live in good health based on current mortality rates and prevalence of self-reported good health.

Improving Access to Psychological Therapies (IAPT) - a service that provides evidence based psychological therapies for adults with anxiety and depression.

Instagram - A social networking app which allows users to share pictures and videos with their friends.

Life expectancy - the average number of years a person would expect to live (based on current mortality rates).

Low birth weight - recorded birth weight under 2500g.

Low income families - families in receipt of out of work benefits or tax credits where their reported income is less than 60% of the national median income.

Mixed methods approach - The use of both qualitative and quantitative methods when conducting research.

Musical.ly - A social media platform for creating, sharing and discovering short music videos.

Obese - Adults are defined as obese if their body mass index (BMI) is greater than or equal to $30kg/m^2$. In children, obesity is defined as BMI greater than or equal to the 95th centile for population monitoring, 98th centile for clinical assessment.

Ofcom - An abbreviation of The Office of Communications. The broadcasting and competition regulator of the UK Government.

Overweight - Adults are defined as overweight if their BMI is greater than or equal to $25kg/m^2$. In children, overweight is defined as BMI greater than or equal to the 85th centile for population monitoring, 91st centile for clinical assessment.

Physically active - at least 150 minutes of moderate intensity physical activity per week.

Prevalence - measures existing cases of disease and is expressed as a proportion e.g. 1% of the population or as a rate per 1,000 or per 100,000.

Protected groups - Protected groups are identified in the Equality Act 2010 as sharing a particular characteristic against which is it illegal to discriminate. The groups are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.

PSHE - Personal Social and Health Education.

Quality and Outcomes Framework (QOF) - a system for the quality improvement and payment of general practitioners in the National Health Service (NHS).

Screening coverage - the proportion of the resident population eligible for a screening programme (e.g bowel, breast, cervical) who were screened adequately.

Selfie - a photo of oneself taken by oneself.

Smartphone - a handheld portable computer that can be used to make phone calls and send text messages as well as access the internet.

Severe Mental Illness (SMI) - Patients with schizophrenia, bipolar affective disorder and other psychoses.

Snapchat - A messaging app used on portable computer devices such as smartphones to send photos, videos and messages.

Social media - websites and applications that enable users to create and share content or to participate in social networking.

Social media profile - social media profiles can be created by users as a way to identify themselves to other users online. These are available on certain social media websites and applications such as Facebook and Instagram.

Social network - the collection of people and organisations that a person shares content with on social media.

Stakeholder - in terms of business, an organisation interested in your area of work, or a 'partner'.

Tablet - A portable computer device with a touch screen used to access the internet and with multiple applications.

Tumblr - microblogging and social networking site.

Twitter - an online social networking service for sharing news and sending messages called 'tweets'.

Warwickshire Health and Wellbeing Board (HWBB) - a statutory committee of the county council whose primary purpose is to provide strategic direction and develop shared outcomes for improving health and wellbeing in Warwickshire.

Whatsapp - an instant messaging service using text as well as voice and video calling on a smartphone or tablet.

'Window of need' - the period of time between healthy life expectancy and life expectancy.

YouTube - A website for sharing video content.

If you or someone you know has been affected by any of the issues covered in this report please refer to page 30 for information on where to access support.

Warwickshire
County Council