

# WIRRAL HEALTH & WELLBEING KNOWLEDGE HUB

HOME OF THE JOINT STRATEGIC NEEDS ASSESSMENT

Wirral JSNA Bulletin - Supplementary Content – March and May 2026

Produced by Wirral Public Health Intelligence Team

## Contents

Adults, Children and Older People .....	1
Artificial Intelligence.....	3
Climate Emergency .....	3
Equalities.....	4
Health .....	4
Health Behaviours .....	6
Housing .....	6
Inequalities.....	7
Neighbourhoods .....	7
Poverty .....	8
Preparedness.....	9
Social Care.....	9

Please note content collated between March to May 2026

### Adults, Children and Older People

#### Young people and work : interim report

The young people and work report is an independent review of the increase in the number of young people who are not in education, employment or training (NEET). This [interim report from Department for Work and Pensions](#) covers the findings of the discovery phase, which focused on providing a diagnosis on the increase in the number of young disabled people and those with a health condition who are NEET.

#### Healthy Ageing: physical activity in an ageing society

This [House of Commons Health and Social Care Committee report](#) states that boosting resilience to illness, frailty and falls through physical activity will be key to keeping the country's ageing population healthy and living independently for longer. This change will be fundamental to the government's objective of switching the NHS's focus from treating illness to preventing it and will help stabilise the rising cost of funding the health service as demand continues to rise.

## **The ‘tipping point’: when unpaid carers can no longer combine caring with paid employment**

This [Carers UK report](#) shows that, while carers want to stay in work, a combination of limited support from employers and services, an increase in caring responsibilities and declining personal health is leaving some feeling as though they have no choice but to give up work to care. This report finds that many unpaid carers balancing work and care are at breaking point, with 47% of those in employment thinking about cutting their hours or leaving their job completely - a decision which could affect their financial security and future circumstances.

## **Bye bye baby: assessing Britain’s falling birth rate since the early 2010s**

This [Resolution Foundation briefing](#) explores Britain’s recent baby bust and whether it should be a cause for concern for policy makers. Most developed countries are grappling with a falling birth rate, and the UK is no different. There have always been a range of reasons that people postpone having children or choose not to have them at all – some reflecting preferences (such as prioritising education, careers or simply not wanting children), and some driven by constraints (from fertility difficulties to economic pressures). After a baby boom in the 2000s, the UK’s total fertility rate has fallen sharply since 2012 – reaching a joint-record low of 1.6 children per woman in 2023, with the latest 2024 figures suggesting it could fall further still.

## **Renewed Women’s Health Strategy for England**

The [renewed strategy, from Department of Health and Social Care](#), is aligned with the 10 Year Health Plan for England and sets out how women will have voice, choice and power in their health and health care.

## **Care on hold: why digital-first GP access risks excluding older people**

This [Re-engage report](#) finds that one in three people aged 75 and over can only get to see their doctor if they book digitally, and the same proportion feel they are cut off from care. With nearly 90% of older people still trying to make appointments by phone or in person, Re-engage believes many of them are being cut off from their doctor, which risks increasing their loneliness and isolation. [The report](#) calls on UK governments to make accessing GP appointments easier for older people as many practices continue to insist on online bookings only.

## **Why are a growing number of young people who are NEET reporting work-limiting health conditions?**

Being not in employment, education or training (NEET) is strongly linked to lower earnings and worse health over a person’s lifetime and leads to weaker economic growth and wider inequalities. This [Health Foundation analysis](#) examines why rising numbers of NEET young people and the wider 16–24 age group are reporting work-limiting health and the potential longer-term impacts.

## **Every child achieving and thriving**

Government published a Schools White Paper, [Every child achieving and thriving](#), which proposes significant reforms to the education and Special Educational Needs and Disabilities (SEND) systems in England. A consultation on reforms to the SEND system, SEND reform: putting children and young people first, was published alongside the Schools White Paper and sets out a broader set of reforms which build on the proposals set out in chapter 3 of the White Paper.

## Screen use by children aged under five: independent report

This [report from Department for Education](#) contains the findings and recommendations of the Early Years Screen Time Advisory Group on the effects of all types of screen use in the early years of childhood. It takes into account the latest research into the impacts on child development, both positive and negative, of early years screen use. It examines quantitative and qualitative evidence on the effects of all types of screen use, including computers, tablets, mobile phones, and television. It sets out the panel's findings and its recommendations to parents and the government.

## Menstrual health of girls and young women

This [House of Commons Women and Equalities Committee report](#) finds that women's health is not being sufficiently prioritised in the government's system-wide NHS reforms. Systemic change is needed not just in the health service, but in the education system and online communications, to support women and girls to understand their health and receive the right care.

## Artificial Intelligence

This [study from King's College London](#) finds that AI is creating a shift in how people access health care, yet public attitudes to the technology remain divided. The research finds that one in seven of the public have used AI chatbots for health advice instead of contacting a GP or other NHS service, and 10% say they have used AI for mental health therapy or wellbeing support instead of seeing a trained professional. However, 20% of those who sought health advice from AI say the technology did not encourage them to seek a professional opinion – and a similar proportion (21%) report having decided against seeking professional health care advice because of something an AI chatbot said.

## Attitudes to technology and AI in health care: findings from our 2025 survey

Polling from [the Health Foundation's third annual health tech tracker survey](#) shows that while the public backs most of the proposed new functions for the NHS App, many remain cautious around the use of artificial intelligence in health care. With the government's 10-Year Health Plan signalling major ambitions to expand the NHS App, the survey of 8,000 members of the public and over 2,000 NHS staff reveals that around three quarters of the public would be happy to use the NHS App for functions such as booking hospital appointments (76%), choosing a preferred hospital (73%) and accessing information about procedures (73%). However, support drops significantly when AI-generated advice is involved.

## Climate Emergency

### A well-adapted UK

This [report from the UK Climate Change Committee](#) sets out solutions to address the growing impacts of climate change affecting every aspect of life in the UK. This includes better cooling, flood protection and a more secure water supply as the most critical priorities to protect the UK from the three biggest climate risks – heat, flooding and drought. It looks at the impact of these risks on both the NHS and health.

## Equalities

### **Bismarck versus Beveridge revisited: does the model shape the outcome?**

[This IPPR report](#) finds that there is no evidence that insurance-based healthcare systems outperform tax-funded systems. The analysis – spanning 22 high-income countries – concludes that switching the NHS to a European-style insurance system would not improve performance across measures of capacity, access, quality, efficiency and equity. The report says that health system outcomes vary far more within funding models than between them. It finds that the causes of poor NHS performance are not structural but practical and sets out four areas in which targeted investment would make the most difference for the NHS.

### **Trans lives 2025: continuing to endure the hostile environment**

This [TransActual report](#) outlines how rising anti-trans hatred is creating a hostile environment for trans people in the UK. A UK survey of over 4,000 trans people found that 99% say media coverage has harmed their mental health, 99% have heard politicians express transphobic views, and many have been refused non-transition health care for being trans. The survey showed that 64% of respondents reported having avoided going to the GP and 56% of respondents felt more unsafe because their ID does not reflect their gender identity.

### **LGBTQIA+ mental health: disparities, barriers, and interventions: a UK and global literature review**

This report from Queerwell looks at mental health disparities experienced by LGBTQIA+ individuals. Trends remain consistent across geographic boundaries, socioeconomic contexts and identity subgroups. Mental health disorders, most notably depression, anxiety, suicidal ideation and self-harm, are more prevalent among LGBTQIA+ populations than they are among their heterosexual, cisgender counterparts. Studies demonstrated that, while they are not attributable to LGBTQIA+ identities themselves, these elevated risks stem from the societal context in which such identities exist. Please note that free registration is required to access the report.

## Health

### **Health Bill: fact sheets**

This [collection of fact sheets, published by the Department of Health and Social Care \(DHSC\)](#), provides an overview of key aspects of the Health Bill. It includes a summary of the Bill itself; how it will enable the creation of a single patient record; the role and functions of the restructured DHSC; data and digital functions; oversight of the health system; an overview of integrated care boards as strategic commissioners and proposed legislative changes affecting patient safety and patient voice.

### **Cancer in the UK: overview 2026**

This [Cancer Research UK report](#) finds that more than 403,000 people are being diagnosed with cancer each year in the UK. It summarises key evidence across prevention, diagnosis, treatment and outcomes, looking at where progress is being made and what challenges remain. It breaks down the factors that are contributing to the rise and sets out what the country can do to slow it down.

### **Healthy life expectancy trends in the UK: a watershed moment**

This [Health Foundation analysis](#) examines how healthy life expectancy in the UK has changed over the past decade, how it varies across local areas and how these trends compare with other high-income countries.

### **Big Food in schools: quick, cheap and profitable**

This [Bite Back research](#) brings together data from school menus, sector experts and over 2,000 students to uncover what is really happening in school canteens across England. Grab-and-go food now makes up a major part of what students eat, but it is often low in nutrition and replacing proper meals. English school food is being influenced by a system that prioritises profit, not student health. There is no consistent system ensuring English schools meet food standards across the day. Students in England say school food is not meeting their needs, and their voices are often ignored.

### **Public satisfaction with the NHS and social care in 2025: results from the British Social Attitudes survey**

The British Social Attitudes survey offers a unique look at how the British public are feeling about their health service. It aims to understand not only how people feel the NHS runs, but also what is driving their satisfaction; how they rate individual services; and what they make of social care. The results this year appear to show the year-on-year falls in satisfaction seen since the pandemic have eased, yet the results do not offer a clear indication of why the public are more satisfied, nor if this is a true turning point in the public's views. The [King's Fund report](#) of the survey shows that, in 2025, 26% of British adults were satisfied with how the NHS runs – a statistically significant 6 percentage point increase from 2024, and the first increase in satisfaction since 2019.

### **Module 3: the impact of the Covid-19 pandemic on the healthcare systems of the United Kingdom**

This [UK Covid-19 Inquiry report, the third of the Inquiry's ten investigations](#), has examined the impact of Covid-19 on health care systems across the four nations. It investigated how governments and society responded to the pandemic, the capacity of health care systems to adapt and the impact on patients, their loved ones and health care workers. It finds that, because health care systems were already overstretched and in a precarious state, the UK entered the pandemic ill-prepared. It concludes that the UK's health care systems "came close to collapse." Ultimately it "coped, but only just."

### **Understanding the rise in the purchase of unregulated medicines online**

This [report from the Patients Association](#) presents the findings of a project to better understand the experience of patients when purchasing medicines from unregulated online sources, including website and social media. The project aimed to explore why patients turn to unregulated online channels, the role of social media and targeted advertising, the risks patients face, and what public awareness activity could better support people to stay safe. The research involved a desk-based review of existing evidence and two focus groups conducted in August 2025 with patients and carers from across England.

## **The public's perspective: the state of health and social care**

[Healthwatch England commissioned Savanta](#) to poll 2,593 adults (18+) to understand people's use of NHS and private healthcare, and their confidence in NHS services. The research shows a sharp rise in the number of people turning to private care as confidence in timely NHS access remains low, particularly for elective procedures.

## **Adverse Weather and Health Plan**

The [Adverse Weather and Health Plan](#) aims to protect individuals and communities from the health effects of adverse weather and to build community resilience.

## **Health Behaviours**

### **World obesity atlas 2026**

The [atlas, produced by Global Obesity Observatory](#), finds that prevalence of obesity among school-age children has increased from 4% in 1975 to nearly 20% in 2022, with the fastest increases in low- and middle-income countries where most of the world's children live. For the first time in history, more children globally will be living with obesity than with underweight. The data presents a picture of the scale, distribution and projected trajectory of childhood obesity. It includes global, regional, and national estimates of children living with overweight and obesity, along with projections extending to 2040. It also provides figures on the number of children already exhibiting early signs of heart disease, stroke, diabetes, and liver disease as a result of excess weight.

### **Smoking, health and social justice**

Smoking remains the biggest avoidable cause of death and disability in the UK, but its impact is far from equal. This [Royal College of Physicians report](#) sets out the unequal health and economic impact of smoking in the UK, shaped by poverty, poor housing, employment insecurity and industry practices. It calls on government to introduce opt out tobacco dependency treatment across all NHS services as a matter of public health and economic urgency.

## **Housing**

### **Better homes, better health: insights from linking housing and health data**

This [Health Foundation briefing](#) presents new findings from the Networked Data Lab, a UK-wide network of analysts led by the Health Foundation. Teams in five areas of the country (Cheshire and Merseyside, North West London, West Yorkshire, Grampian and Wales) accessed, linked and analysed local data sources to produce new evidence on the links between housing and health.

## Inequalities

### **Quantifying multiple insecurities in financial, housing, work, health and caring: trends, breakdowns by characteristics and impacts on wellbeing**

This [Centre for Analysis of Social Exclusion UK study](#) shows multiple insecurity can be measured and tracked across financial, housing, work, health, and care domains. Insecurities are widespread and often interconnected, with financial insecurity increasing risks in other areas. Societal shocks worsen insecurity, especially for vulnerable groups such as women, young and older people, single parents, the unemployed, disabled individuals, ethnic minorities, and those in deprived areas. Multiple insecurity is linked to lower wellbeing. Policy plays a crucial role - effective interventions can reduce insecurity, while poor policy can worsen it - offering deeper insight into poverty, disadvantage, and everyday risks.

### **Socioeconomic disadvantage and self-reported health: changes among the working-age population over time**

This [Health Foundation analysis](#), underpinned by modelling from the Office for National Statistics, looks at changes from 2011 to 2021 to understand which socioeconomic factors were associated with the working-age population no longer reporting good health. The findings help to understand factors related to self-reported health and inequalities within this. This could inform policy interventions to improve health and where to target these, given the established link between self-reported health and population-wide morbidity and mortality measures.

## Neighbourhoods

### **Unpacking the neighbourhood health framework: the good, the bad and the puzzling**

With the 10 Year Health Plan criticised for lacking detail on how the litany of initiatives and ideas within it will be delivered, the recently published neighbourhood health framework was meant to help provide a clearer picture on how care will be shifted from hospitals to communities. This [Nuffield Trust long read](#) assess the framework's strengths and weaknesses.

### **Neighbourhood health framework: what you need to know**

The neighbourhood health framework sets out the government's plan to establish a neighbourhood health service across England. This [briefing](#) contains an overview of the framework and analyses what it means for integrated care boards and providers.

### **Towards population health delivery models: what you need to know**

This [NHS Confederation briefing](#) outlines the headline points and analysis of NHS England's blueprint for how the new population-level delivery models will operate. It sets out how single neighbourhood providers, multi-neighbourhood providers and integrated health organisation models fit together and are intended to complement one another. It concludes that clear mapping between contracts will be important for setting outcomes and ensuring accountability.

## **Fit for the future: towards population health delivery models**

To realise the ambitions set out in the 10 Year Health Plan, services must be delivered in new ways that better meet patients' needs and provide care as close to home as possible. As set out in the Neighbourhood Health Framework, this means improving routine health care services, moving to a more proactive care model for people with multiple long-term conditions and delivering better alternatives to hospital care. This [NHS England publication](#) sets out new population health delivery models to facilitate these changes, supporting integrated care boards (ICBs) to commission providers around the needs of defined populations. ICBs – working with partners, including local authorities and health and wellbeing boards – will agree neighbourhood footprints that form clearly defined populations. Single neighbourhood, multi-neighbourhood and integrated health organisation contracts will be commissioned around these populations.

## **Neighbourhood health framework**

This [Department of Health and Social Care framework](#) defines neighbourhood health and sets out the challenges neighbourhood health and care services should address. It aims to establish clear metrics for success and maps out the process systems should go through to establish local metrics. It also defines the roles of integrated care boards, local authorities, health and wellbeing boards, and other partners in neighbourhood health's development and implementation.

## **Poverty**

### **A warm home, a fair chance: the lived realities of fuel poverty for children**

This [National Energy Action report](#) looks at how fuel poverty is affecting childhood in the UK. It describes how cold, damp and poorly heated homes shapes children's health, confidence, friendships, and ability to learn - and how schools are increasingly left to shoulder the consequences. It includes accounts and insights from educators working across primary, secondary and specialist settings, and testimonies from young people themselves.

### **How the quality of school food can be improved to increase uptake**

This [Food Foundation briefing](#) shows how improving the quality of food leads to more children eating school food and demonstrating that this is what young people need. The briefing brings together two bodies of evidence to make that case. First, the experiences and voices of young people themselves - what they are currently being served, why it matters to them, and what they want to change. Second, case studies from schools across the country that have already transformed what they serve - going further and faster on healthy food than current standards require.

## Preparedness

### **Pandemic preparedness strategy: building our capabilities**

[This publication](#) sets out the commitment of all four nations of the UK to rebuild readiness and prepare underlying capabilities for future pandemics. It also outlines a strategy to take rapid co-ordinated action to protect communities equitably and minimise disruption in people's lives. It includes principles for pandemic preparedness endorsed by all four nations to develop and implement their approaches to improve preparedness and work together to develop cross-UK capabilities. It builds on lessons identified from the Covid-19 pandemic and the UK Covid-19 Inquiry as well as early findings from the national pandemic exercise.

## Social Care

### **Social care 360**

People often complain about the lack of data in social care. In fact, there is a significant amount, but it is held in databases that are rarely explored and analysed together. That is why [The King's Fund produces social care 360 every year](#), pulling together all the relevant data to provide a uniquely rounded view of the sector which identifies the key trends over time.

### **Improved outcomes through partnership working: a vision for social care**

The [report from My Home Life England](#) brings together learning from a two-year appreciative inquiry, drawing on conversations with 90 stakeholders and the experiences of over 2,600 care leaders. It uses an 'appreciative lens' to explore what effective partnership looks like between adult social care providers and the wider health and care system - particularly when relationships are based on respect and equality, not hierarchy. It draws on the concept of 'adult-to-adult' relationships between organisations and colleagues, as identified within Transactional Analysis. The evidence concludes that, where adult-to-adult relationships are prioritised and care providers are engaged as equal partners in the wider system, outcomes improve for everyone.

**Disclaimer:** The views, opinions and purpose of the content expressed in these republished articles are those of the original authors and do not necessarily reflect the official policy or position of Wirral Council and its staff.

If you have any local information, research or reports you think useful to share then get in touch [phintelligence@wirral.gov.uk](mailto:phintelligence@wirral.gov.uk) or if the bulletin has been passed onto you and you would like to subscribe please [complete this form](#).

Thanks, John

**Please note content collated between March and May 2026**