John Balding

The underweight girls who want to lose more

As usual, we offer readers some 'titbits' from our annual summary of Health Related Behaviour Questionnaire data — in this instance derived during 1997 from 37,538 young people between the ages of 9 and 16.

The data for the 9-11 year olds have been obtained from surveys using the primary questionnaire. This is a simpler document, which does not include all the topics found in the secondary version, and therefore not all the tables contain the full age range.

■ Your weight — which statement describes you best?

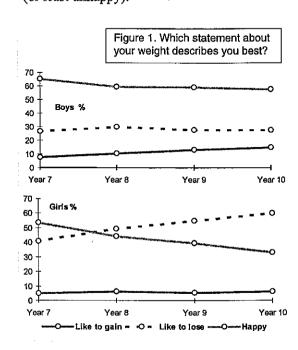
The overall tendency is for the older boys to want to put weight on and for the older girls to want to lose weight (Figure 1). This tendency is consistent with our earlier surveys.

Only about a third of the older girls, compared with more than half the boys, are happy with their weight.

Has the concern with slimness become an unhealthy social obsession if more than half the girls in their early teens want to lose weight? A discussion of their actual need to lose weight appears in the next section.

If concern about real or imagined excess weight led to participation in active pursuits,

this could be a beneficial spin-off. However, other data provided by the questionnaire survey show that girls tend to be even less physically active than boys. The figures for the girls, in particular, show very clearly an increasing level of unease about personal weight with increasing age, the Year 7 respondents being the happiest (or least unhappy).



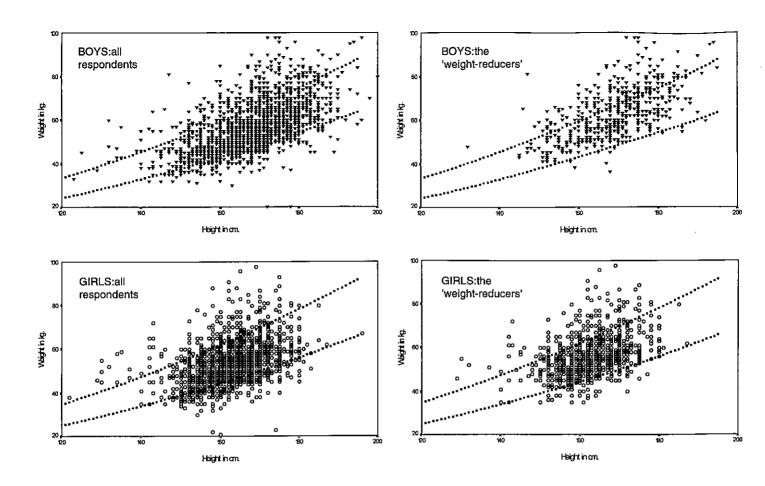


Figure 2. Year 10 boys and girls, plotted in relation to `safe weight' guidelines. The left-hand diagrams show all the respondents; the right-hand ones show only those who want to lose weight.

■ The overweight group

We decided to discover how many of the Year 10 respondents that said they wanted to lose weight really did need to on medical grounds. We could do this because their actual weight was included in the data.

This group contained 14-year-olds and 15-year-olds. In order to relate their recorded weight to published guidelines regarding 'desirable' weight, we isolated the 14-year-olds. This is because the Body Mass Index (BMI) formula for young people takes their age as well as their height into account.

Of this sample, 13.4% of the boys and 10.2% of the girls were 'overweight' according to the Child Growth Foundation formula used in this presentation. This compares with the 27.5% of all Year 10 boys and 60.0% of all Year 10 girls in the 1997 survey that would have liked to lose some weight.

The scattergrams presented in Figure 2 include two lines representing the upper and lower limits of 'satisfactory' weight. The left-

hand diagrams plot all the 14-year-olds in each gender; the right-hand figures show only those who want to lose weight.

Examining the 'want to lose weight' diagrams, it is seen that perhaps half of these boys are above the guideline for healthy weight, and the rest are concentrated in the upper part of the 'safe' band.

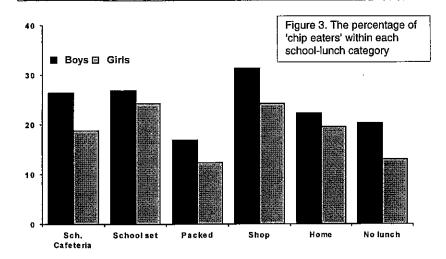
However, the pattern for the weightconscious girls is almost indistinguishable from that for the whole sample, confirming that these girls' desire to lose weight bears little correlation with their actual weight.

We also note, in the right-hand diagrams, that some individuals wishing to lose weight are already below the 'safe' weight limit.

■ The chip-eaters

Dietary concerns about 'chips with everything' prompted us to study the group of 14–15 year olds that report eating chips on most days. We did this by examining the kind of lunches eaten on the previous day by these 'chip eaters'.

Figure 3 shows the percentage of these pupils



within each 'lunch' category offered in the questionnaire. Remember that this refers to a weekday lunch at school.

School set lunches and takeaway lunches appeal to the high chip-eaters; the chip-eating boys are also likely to have a school cafeteria lunch.

Interestingly, we notice that the girls having a *school cafeteria lunch* are not so likely to be chip-eaters.

The ones who went home for lunch are less likely to be chip-eaters, but the lowest proportion of chip-eaters is found in the packed lunch category.

It is important to remember that the chipeating question records habitual weekly consumption; therefore, the fact that a packed lunch is unlikely to include chips need not affect levels of chip-eating at other meals in the week. However, we usually find that the packed lunchers do have a lower-chip diet, as in the 1997 sample, while the school lunchers and takeaway lunchers have higher overall levels.

How much chip-eating is actually accounted for by school lunches? That is, if schools did not offer chips for lunch, would the 'on most days' numbers in this group drop dramatically, and would the numbers taking school lunch also drop if chips were not available?

Finding the packed lunch consumers to be the lowest chip-eaters fits with an enquiry we pursued in the early Eighties, when we tried to assess the quality and balance of the previous day's reported consumption. We found that our data processors' judgement of the best quality and balance of the overall daily intake was linked to those homes that provided the young people with a packed lunch.

Packed lunches can signify extra concern about what young people eat

It does not automatically mean that the packed lunch itself is 'healthier' than any other kind of lunch, but perhaps the extra care and effort that parents put into providing one is also reflected in the general home diet that they provide.

■ The 'healthy' eaters

Why do boys become less choosy about what they eat as they grow older (Figure 4)? Do they care less about being 'healthy', or do they think that diet is not an important contributory factor to a healthy lifestyle?

The fact that the boys' and girls' responses to this question are so different seems to prove that they can be, and are, selective about what they eat

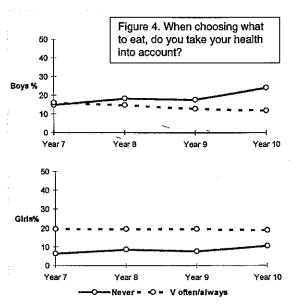
It would be interesting to know how far these preferences are communicated to those responsible for providing meals, both at home and at school.

■ On your last visit, did you feel at ease with the doctor?

Data presented in Figure 5 show that about 20% of the girls were *quite uneasy* or *very uneasy* when visiting the doctor.

The degree of ease is likely to depend upon the reason for the consultation as well as the ability of the GP to create a relaxed atmosphere for the consultation.

Data from earlier surveys, when we related confidence to the GP's gender, showed that both girls and boys were more likely to be at ease with a female doctor, although the ratio of



At least 10%

they have

don't know if

asthma or not

female to male doctors was only about 1 to 4.

A little uneasiness may not be a bad thing, if it means that they are more likely to be 'on their toes' during the consultation.

The table shows that the percentage of Year 10 respondents remembering being at ease is linked with the interval since the last consultation, the more recent visitors being more at ease.

Past 3 Past 6 Past Past Over a week month months months year vear Boys% 61.0 55.2 51.3 49.5 61.5 53.9 Girls% 50.8 43.6 36.5 33.4 27.3 31.8

Are the more distant consultations remembered less warmly, or is there less opportunity to build up a positive relationship with a GP if consultations are so infrequent? Did an uncomfortable experience make them defer the next visit?

■ How many times did you clean your teeth yesterday?

On average, the older respondents brush their teeth a little more frequently (Figure 6).

Dentists recommend brushing teeth at least twice a day (before breakfast and before going to bed).

Cleaning teeth 3 times or more means that one of these sessions could have been at school (presumably at lunchtime), or before going out in the evening. Do school facilities encourage or discourage daytime attention to dental hygiene?

A small percentage had not brushed their teeth at all on the previous day. Assuming that they brush their teeth every now and then, this means that for this group toothbrushing is an irregular habit. Had the survey been carried out on another day, they might appear under *once*.

Extending this argument, some of the *once* group may not brush their teeth at all on some days.

Earlier surveys explored young people's main reasons for cleaning their teeth. These included cosmetic reasons and the pleasure of having a 'minty mouth' as well as fighting tooth and gum disease.

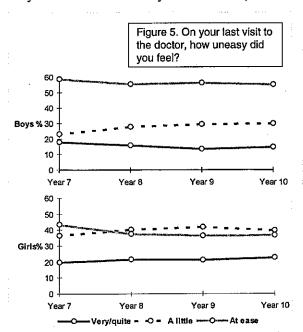
The overall twice or more percentages show a smooth transition at the primary-secondary interface. However, more primary children record cleaning their teeth 3 times or more — perhaps because their parents make them?

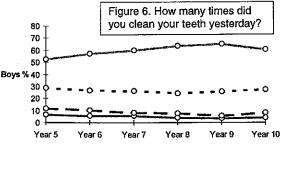
■ Do you have asthma?

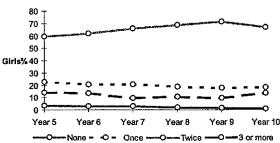
Between 10% and 15% (slightly more boys than girls) respond *yes*, although about 10% don't know — more in the primary sector.

Responses to another question reveal that a smaller percentage of the young people took asthma medication during the previous week than claim to suffer from it. This is to be expected if some of them are only occasionally affected.

Other data show that about 1 in 5 exhibit possible asthma symptoms (i.e., wheezing quite often or very often), although some of the diagnosed asthma sufferers may wheeze only occasionally because their medication keeps it under control.







Almost half were transported to school from door to door

Over half the boys play computer games

■ In the past year, have you had an accident that was treated in any of these places?

The listed places are home, school, hospital, a surgery, or somewhere else. About half report having had an accident that was treated at one of these places, although it appears that some respondents are recalling more than one accident, or possibly one accident treated in two different places.

About 1 in 6 of the accidents had to be treated at school, although some more serious accidents occurring at school might have had to be treated in hospital.

Slightly more boys than girls reported having had some sort of accident.

■ How did you travel to school today?

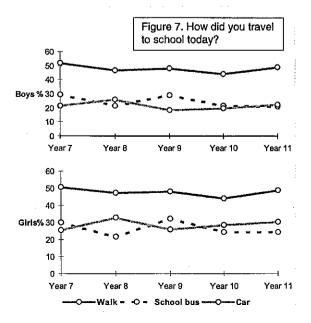
Almost 50% of the young people walk at least part of the way to school (Figure 7).

About a quarter use the school bus service, and another quarter are taken by car.

Travelling by bicycle is not a popular option, although many pupils would like to (see *Education and Health*, Vol. 15, No. 4).

More than one method of travel can be recorded. Adding the percentages in each column, a total exceeding 100% is reached. The explanation is that some of the young people got to school by two methods, such as walking and bus. It is not known how long a walk to or from the bus stop is considered worth recording separately.

Analysis of the data has revealed, among



other things, the percentage of young people that either walked or cycled all the way or were transported all the way:

	Walk /cycle		Transported	
Year	Boys	Girls	Boys	Girls
7	44	38	43	47
8	41	35	45	50
9	47	35	46	54
10	45	35	45	51
11 -	52	42	42	52

The combined figures do not add up to 100% because some of the respondents reported travelling by a combination of 'passive' and 'active' methods.

■ How long did you spend playing computer games after school yesterday?

One in six of the Year 8 boys spent more than two hours on the previous weekday evening playing (Figure 8).

Fears that these activities are competing with 'better things to do' may be justified for some of the heaviest users.

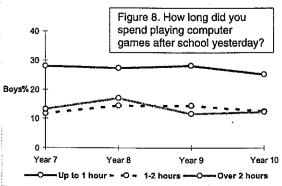
Eye-strain or other sorts of strain may also be a concern in the case of young people that spend many hours watching a small and very close screen.

Another concern may be about the types of games played.

■ How many cigarettes have you smoked during the last 7 days?

Table 1 presents uncorrected figures from our annual *Young People* reports since 1992. They show the percentage of Year 8 and Year 10 pupils (B/G) that reported smoking *at least one cigarette* during the previous week.

The corrected values take into account the variation in average age of the respondents



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		Uncorrected %			Corrected %			
		8		10		8		10
	В	G	. <i>B</i>	G	В	G	В	G
1992	6.9	7.9	20.4	27.6	5.8	6.3	19.4	26.1
1993	6.1	7.8	19.3	25.5	5.7	7.3	19.1	25.2
1994	7.1	9.2	22.0	27.0	6.3	8.2	21.4	26.3
1995	8.4	11.1	22.7	30.1	7.5	9.9	21.6	28.6
1996	9.4	11.3	24.6	31.4	8.8	10.5	23.9	30.5
1997	8.5	9.6	23.4	28.3	9.2	10.5	24.6	29.8

Table 1. The percentage of young people that had smoked at least one cigarette during the previous week; see text for explanation.

Cannabis is 'softer' for the older pupils

when the surveys took place, and reduce them to a 'mean age'.

■ What do you know about these drugs?

The response options are: Never heard of them; know nothing about them; safe if used properly, and always unsafe.

The generally higher percentages for the older respondents suggest that with increased knowledge and experience comes increased awareness of these drugs' danger. However, the fall in the perceived danger of *cannabis* in Years 10 and 11 confirms its unique status with many young people as a 'soft' drug.

Low scores in the table often mean 'no knowledge' rather than belief that the drug is safe: many young people have little knowledge of these drugs, especially those in the younger age groups. Some well-known street names are provided, but local name variants are also used in the surveys, as many varieties of drugs are

known to young people only by these names.

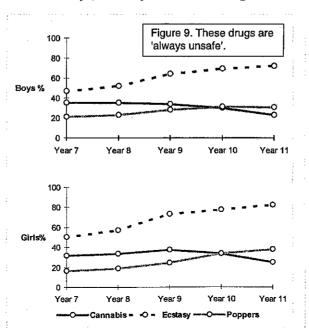
■ How recently have you used any of these drugs?

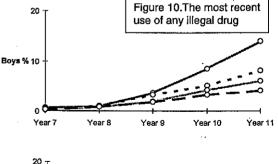
The shortening intervals since the young people's last drug use strongly suggest that this increase in frequency will be maintained beyond the final GCSE year.

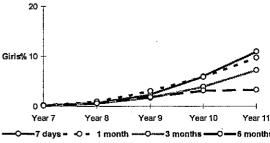
A study of the data for the 14-15 year olds shows that about half the boys and girls with any drug experience at all had used a drug within the previous month. A third had used a drug within the previous week.

We do not ask the young people directly if they are 'currently' using an illegal drug, but we have evidence that recorded recent levels of other activities such as smoking, drinking, or even toothbrushing give a reliable guide to habitual behaviour. [See Education and Health, Vol. 14, No. 5 (1996), and also Young People and Alcohol—its Use and Abuse (1996) for evidence that heavy drinking reported within the past week has a strong link with habitual heavy drinking.]

Although unusual circumstances may cause an individual to record atypical behaviour with respect to activities such as these, such variations are smoothed out when data from a large number of respondents are studied. Recorded behaviour in the past week then becomes a good guide to habitual behaviour. We can therefore claim that the group of young people recording the shortest interval since their last use of drugs is the most likely group to include current users.







Most young people with jobs

are working

outside the law

■ Have you a regular paid job during term time?

In Education and Health, Vol. 15 No. 5 (1997), we calculated the following approximate numbers of young people in the UK mainland in paid employment, based on recent Health Related Behaviour survey data:

Age	Boys	('000')	Girls
11–12	57		36
12-13	89		65
13-14	138		72
14–15	162		140

With the exception of those doing paid housework and babysitting, all the young people in the 11–12 group, and about half those in the 12–13 group (i.e., all those under 13) were being employed illegally (Figure 11).

■ Who paid over your money for National Lottery products in the last 7 days?

There is nothing illegal in having a Lottery product bought for an under-age punter, and our data show that a substantial percentage of these purchases are, in fact, made by parents with the young person's own money. However, this is by no means always the case.

The percentage all the recorded National Lottery product purchases that were illegal (in other words, they were made by the young person or a friend under 16) has been calculated as

follows.				
Year	7	8	9	10
Boys				
Draw tickets	2 5	17	26	46
'Instants'	34	31	40	64
Girls				
Draw tickets	10	9	12	42
'Instants'	20	19	26	63

■ How much do you enjoy physical activities?

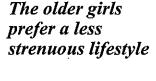
The girls' preference for a less strenuous lifestyle, suggested by other tables in the report, is supported by Figure 12. It also shows that their level of enthusiasm for physical activity declines with increasing age.

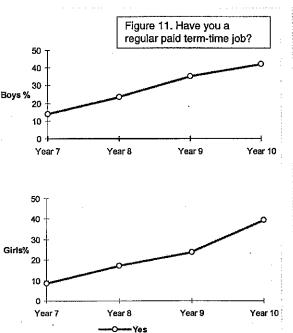
What can PE departments and schools as a whole do to 'turn on' more girls to physical activity? What image does PE portray, what activities are offered, and what links exist with community-based activities?

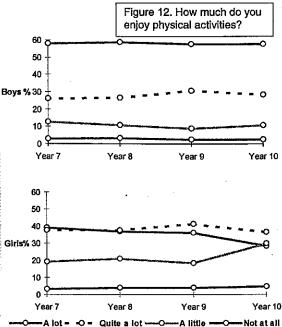
In *Bully Off*, page 3.27, we display a connection between enjoying physical activities and being less likely to fear bullying at school.

■ How many times last week did you exercise and have to breathe harder?

Exercise is a habitual thing, and it is reasonable to suppose that many of the individuals in the *never* category (Figure 13) would be in that row had the survey been carried out in any other week.







Almost all the primary children adopt some 'safe sun' strategies

The data presented here suggest that at least a third of this group exercise three times a week, although the duration of each session is not known.

Comparing the Year 10 three times or more data for the past three years (the lifetime of this recently-introduced question) gives the following percentages:

	Boys %	Girls %
1995	36.0	19.9
1996	39.3	23.3
1997	45.9	26.7

Too much should not be read into this short sequence, but at least the percentages are not going down.

■ Have you ever been scared or upset by an adult stranger?

This question was answered by Year 5 and 6 pupils only. A quarter of these very young people say *yes*; some could be reporting more than one encounter with a stranger. The numbers for the different genders and year groups are very

similar.

When asked what they did after such an encounter, more than half said they ran or walked away. About a quarter never told anyone.

■ Do you try any of the following ways of avoiding sunburn?

This is another question for the Year 5 and 6 pupils only. Well over 90% appear to be adopting 'safe sun' strategies at least some of the time.

■ How much do you worry about these problems?

More girls than boys worry *quite a lot* or *a lot* about at least some of the items in the list.

Figure 14 shows that the way you look becomes a major concern for the older girls: it is also the largest single 'worry' item in the list for both genders in Years 7-10.

Young People in 1997 is available for £35.00, including postage, from the Unit.

