The Unit and its work

The Schools Health Education Unit is part of SHEU, which has its offices in Exeter, and supports and promotes:

(a) Health Care planning at community level through co-operative survey and report writing with Local Authorities, GP practices and other bodies.

(b) The design of intervention programmes in schools through curriculum review in health and social education, and the provision of stimulus material.

(c) Co-operation between teachers, parents, children, governors, and health-care professionals through survey work in both primary and secondary schools.

These survey services are tailored to suit a co-operative method of working between different agencies supporting health promotion at community level.

"Just to say a huge thank you for all your efforts in helping us with the ... survey amongst pupils. It has provided us with significant data which will be used across the school to help us improve. It helped us to obtain a healthy schools standard as well. I hope we can make this an annual feature as we can track the changing health of our pupils.” -- Headteacher

We ran an anti-bullying group for Year 9 as a preventative measure, based upon data provided by our current Year 10 students.

The travel data revealed that a high number of pupils took the car to school so we involved the BIKE-IT scheme who ran assemblies, brought in their bikes (including one with a pedal-powered smoothie maker!), and raised awareness of health and green issues.

The information about how happy the students were with their lives raised some concerns as far fewer girls were as happy as the boys, so work was done around developing aspirations, role-models and self-esteem."

Deputy Head, Secondary School

Special questionnaires have been developed for particular needs, such as monitoring young people’s smoking levels. Reports can be tailored to meet specific needs.

The primary and secondary versions of the HRBQ have been used in 9,343 separate schools, some schools repeating surveys of their pupils on five occasions, and over one million pupils (1,295,398) between the ages of 9 and 16+ have taken part in the surveys from across the UK.

The Health Related Behaviour Questionnaire surveys

An increasing number of authorities have become involved in funding and in co-ordinating the surveys in schools in their localities.

The outcomes from this are numerous:

(a) Strong links between individual schools and health personnel are created or maintained.

(b) Priorities for intervention/education programmes can be identified, from within schools or from without, or, co-operatively.

(c) Trusts can receive the combined results from children on their GP practice lists, together with a report.

(d) Methods and stimulus materials have been developed using the specific data from the school, the district, or the region.

A secondary school carrying out a Health Related Behaviour Questionnaire survey selects a mixed-ability sample of about a hundred pupils from each year group being studied. A primary school, being smaller, may survey the entire year group. An hour
schools: 36% of all schools sampled this year were Scottish. However, this has not so big an effect as one might suppose, for most of these schools are very small primary schools. The proportion of the pupils who are Scottish is just 12%, and if we look at the proportion of Daily Record readers in the Family and Home chapter (p.50) it is not very great at all.

2. Temporal

The 1997 sample was unusual, not in its regional distribution but its timing: most of the largest surveys took place in the autumn, and so the pupils in each year group were in the first term of their school year. We did notice that for some of the behaviours that are strongly age-related, like smoking, the levels reported were unusually low. If we corrected for age as an influence, the levels returned to previous normal levels: see Balding (1998 & 1998a).

Confidence

We have more confidence in attributing real significance to a change if:

- it is not associated with major changes in the wording or placing of the question;
- it persists as either a long-term change from one level to another, or part of an upward or downward trend carrying over several years.

These issues have been explored in more depth in our ’Trends’ series eg. Young People and Illegal Drugs: Attitudes to and experience of illegal drugs 1987-2008

5 Conclusion

We hope that this account will provide some insight into the work we have done on the important questions of reliability and consistency. Over the years we have brought a number of lines of enquiry to bear on these issues, and hope by discussing them here to allow a more informed assessment of the quality of the data presented on the following pages.

"As a Deputy Head in a large secondary school I was involved in taking part in a city wide health and wellbeing survey over a period of six years. Completing the survey every two years grew in importance year on year, with the final cycle having a major impact on our SDP, PHSE curriculum, Ofsted outcomes and governor understanding.

Over the six year period we moved from a small sample in two tutor groups filling in a paper survey to two year groups completing an online survey. The reports produced give graphical analysis of a wide range of issues. As a result of the survey we increased the number of PSHE workshop days for students to address issues such as smoking, drug and alcohol awareness, anti-bullying workshops.

The surveys helped Governors make a positive informed decision to allow Brook Advisory Clinic nurses on site to support students. As a result of taking part and using the evidence provided we were able to offer more support for students which had a direct impact on improved attendance and outcomes."

Deputy Head Secondary School
Sleep

How many hours sleep did you get last night?

1. ‘8 hours or more’ sleep are reported by the majority of this sample.
2. The percentages of those having ‘8 hours or more’ declines with age. 78% of Year 8 males reported having ‘8 hours or more’ compared with 68% of Year 10 males.
3. The percentages of those having ‘6 or 7 hours’ increases with age. 21% of Year 8 females compared with 32% of Year 10 females reported having ‘6 or 7 hours’ sleep.

Comments

1. This question, and the next two questions, were new additions in 2006 to the ‘Young People’ reports. Pupils are asked to write down the number of hours’ sleep they had ‘last night’.
2. In 2010 the options changed from the number of hours sleep to the number of hours sleep by categories eg. “less than 3 hours”.

Percentages of Yr 10 females’ sleep patterns, weight loss, worrying and bullying:

<table>
<thead>
<tr>
<th>Hours of sleep</th>
<th>Would like to lose weight</th>
<th>Worry ‘A lot’</th>
<th>Never afraid of going to school because of bullying</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 3 hrs</td>
<td>59%</td>
<td>81%</td>
<td>50%</td>
</tr>
<tr>
<td>4-5 hrs</td>
<td>71%</td>
<td>83%</td>
<td>60%</td>
</tr>
<tr>
<td>6-7 hrs</td>
<td>64%</td>
<td>68%</td>
<td>85%</td>
</tr>
<tr>
<td>8-10 hrs</td>
<td>57%</td>
<td>51%</td>
<td>82%</td>
</tr>
</tbody>
</table>

It is clear that, for 14-15 year old females in this sample, the more sleep they get they are less likely to: want to lose weight, worry ‘a lot’ and feel afraid of going to school due to bullying.
Fear of school bullying

Afraid of going to school because of bullying...and bullied at school

1. 31% of the Year 6 females and 30% of the Year 8 females fear bullying at least sometimes.
2. The females are more fearful than the males and the older they get the less afraid they become.
3. Up to 39% report being bullied in the last 12 months.

Comments

1. The proportion of pupils fearing bullying in different schools varies widely. Items in the survey have been linked with fear of bullying: low self-esteem and poor perceived control, and also asthma, eczema and birth order (Bully Off, Balding 1996).
2. Since 1999, the figures for fear of being bullied, at least sometimes, show females remaining higher than males.
3. This year, around 37% of 10-11 year olds report some form of bullying (see chart below).
School bullying

School taking bullying seriously

1. Up to 21% (slightly more males than females) think the school does not take bullying seriously.
2. 6% of older pupils think their school deals very well with bullying.
3. Up to 29% think their school deals quite well with bullying.

As pupils get older fewer say schools take bullying seriously

Comments

1. The ‘school takes bullying seriously’ question was first included in 2010 and positive responses fall as pupils get older.
2. The ‘dealing with bullying’ data were added to this report for the first time.
**Bullying and relationships**

As pupils get older, fewer say *schools take bullying seriously*

**Bullying someone ... relationship incidents**

1. Up to 8% (more males than females) report bullying someone *last year*.
2. Pupils in this sample report various incidents in their boyfriend/girlfriend relationships.

**Comments**

1. Figures, from previous years, for pupils bullying show males reporting higher percentages in the ‘Yes’ option but the differences between the genders is not great.
2. The ‘relationship’ data are included in this series of reports for the first time.

Have any of these things happened to you in a relationship with a boyfriend/girlfriend?
‘Yes’ in the past or ‘Yes’ with my current BF/GF

<table>
<thead>
<tr>
<th>Used hurtful or threatening language to me</th>
<th>Had sex or do other sexual things</th>
<th>Threatened to hit me</th>
<th>Threatened to tell people things about me</th>
<th>Hit me</th>
<th>None of the above (or missing data)</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Yr 8 M</em></td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td><em>Yr 8 F</em></td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td><em>Yr 10 M</em></td>
<td>2</td>
<td>4</td>
<td>3</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><em>Yr 10 F</em></td>
<td>3</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

Available sample

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“I bullied someone last year”
**E-Safety**

75%-85% of pupils say they have been advised how to stay safe while chatting online.

**Chat messages...online pictures...chatting online**

1. Up to 85% say they have been advised how to stay safe while chatting online, up to 74% say they chat online and up to 69% say they follow the advice.

2. More females than males report: given and using advice; using webcam and chatting online, only chat to friends/family and got upset about receiving Internet message/picture.

**Comments**

1. This is the first time this data have been presented in this series of reports.

Talking to teachers and other professionals concerned with young people's wellbeing, we have heard a lot of concern about the Internet. Our clients all seem to want to know slightly different things about the young people in their area, so we don't have good overall figures for many questions. We have a couple of headlines from local surveys:

- 34% of pupils in one authority have looked online for pornographic or violent images, films or games.
- 5% of pupils in the same authority have ever had images sent of themselves that they have been embarrassed by or upset about sent.
- 10% of pupils in another authority have been bullied over the Internet.
**Disability or illness**

**Do you have a disability or a long-standing illness?**

1. Around 7% of this sample say they have a disability or a long-standing illness.

**Comments**

1. This is the first time this information has appeared in these annual reports.

The information above shows that those Yr 10 pupils who reported having a long-standing illness or disability were less likely to report having tried smoking and more likely to report having being bullied in the last year compared with non-disabled pupils.
Young carer

Are you a ‘young carer’?

[Definition provided]

1. 8% of the 12-13 year olds in this sample say they are carers.

Comments

1. This is the first time this information has appeared in these annual reports.

2. We usually ask this question after showing young people the Local Authorities’ working definition of a young carer and asking them who it is that they look after.

Yr 10 young carers were less likely to visit the dentist in the last 6 months and think it is important to go to school regularly. They are more likely to report: having being bullied; having a long-term illness; feel unsafe after dark; having low self-esteem and having no lunch yesterday compared with non-young carers.
Free school meals

16% of the older pupils do/could have free school meals.

Do you have ‘Free School Meals’

[Definition provided]

1. 16% of the older pupils in this sample do/could have had free school meals.
2. At the time of the survey, 6% of 14-15 year olds reported they currently had free school meals.

Comments

1. This is the first time this information has appeared in these annual reports.
2. Schools are very alert to the percentage of pupils who have free school meals as extra Pupil Premium funding may be forthcoming.

Percentages of Yr 10 pupils ever tried smoking, bullied last year, sexually active, want full-time education after Yr 11 in one authority by free school meals (FSM)

<table>
<thead>
<tr>
<th></th>
<th>All Yr 10</th>
<th>Yr 10 FSM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tried smoking</td>
<td>37%</td>
<td>51%</td>
</tr>
<tr>
<td>Bullied last year</td>
<td>16%</td>
<td>29%</td>
</tr>
<tr>
<td>Sexually active</td>
<td>23%</td>
<td>35%</td>
</tr>
<tr>
<td>Want to stay in full-time education after Yr 11</td>
<td>62%</td>
<td>45%</td>
</tr>
</tbody>
</table>

* p< 0.05

Those Yr 10 pupils who get free school meals were less likely to want to continue with full-time education and more likely to report having tried smoking, been bullied in the last year and were sexually active.
Useful school lessons

How useful have you found lessons about the following subjects?
Responses to ‘quite useful / very useful’

1. Lessons about Drug education, Safety, Sex and Relationship education and Physical Activity are the most useful for both age groups and genders.
2. Least useful is reported to be Citizenship.
3. It is noticeable how ‘usefulness’ declines with age for nearly all subjects.
4. The Sex and Relationship education lessons appear to be the only ones where more 14-15 year old females report a higher percentage compared with 12-13 year old females.

Comments

1. Pupils are asked to ‘circle one number for each answer’ and each number refers to a scale of ‘usefulness’. This scale ranges from can’t remember any, not at all useful, some use, quite useful, to very useful.
2. The drugs subject is most often written as ‘Drug education (including alcohol and tobacco)’ in the current versions of the questionnaire.
3. What factors influence the degrees of ‘usefulness’ reported for each subject? Is it surprising that most reported levels of ‘usefulness’ decline with age? How do these data relate to the general question about enjoying school lessons? (see next page)
Worries

School-work and The way you look continue to be the main worries for 14-15 year olds

How much do you worry about these problems?
Responses to ‘quite a lot / a lot’

1. Among the highest worries for 14-15 year old males are problems with school work, family problems and The way you look.
2. The way you look continues to be a major worry for many 12-13 year old females but not the main worry for 10-11 year old females.
3. Among the highest worries for 14-15 year old females are problems with school work and The way you look.
4. The none of these category shows that more females than males worry about things in the list.

Comments

1. These problems do not necessarily concern the respondents themselves, they could indicate worry about family or friends or even ‘society’.
2. As the females grow older, higher percentages worry about all the categories listed apart from Being bullied.
3. As the males grow older, they worry more about school-work, money and the way you look. Interestingly, they worry less about family problems.
Sources of support (2)

Where would you go first for help or information about the following?

1. Family are the usual first source of support for most of the topics.
2. Issues around Healthy eating are first discussed by 69% at home.
3. Friends are a particularly important source of support for the way you look (42%). Someone at school (teacher or another adult) is one of the sources of support for bullying problems for 13% of 12-15 year olds.

Comments

1. Healthy eating issues are first discussed by 69% at home. Although the home would traditionally be the first place for this issue, it is perhaps surprising that, given the emphasis on food and healthy eating in school, more pupils do not see school as a resource.

<table>
<thead>
<tr>
<th></th>
<th>%</th>
<th>Family</th>
<th>Friends</th>
<th>Someone at school teacher or other adult</th>
<th>Connexions Personal Adviser</th>
<th>Doctor, nurse, other health worker</th>
<th>Local advice centre</th>
<th>Books, Magazines</th>
<th>Internet e.g. web pages</th>
<th>Telephone helpline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drugs</td>
<td></td>
<td>50</td>
<td>29</td>
<td>3</td>
<td>1</td>
<td>9</td>
<td>3</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Healthy eating</td>
<td></td>
<td>69</td>
<td>10</td>
<td>2</td>
<td>1</td>
<td>11</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Helping and volunteering</td>
<td></td>
<td>62</td>
<td>13</td>
<td>10</td>
<td>5</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Money problems</td>
<td></td>
<td>87</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>The way you look</td>
<td></td>
<td>49</td>
<td>42</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Puberty and growing up</td>
<td></td>
<td>63</td>
<td>24</td>
<td>1</td>
<td>1</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Bullying</td>
<td></td>
<td>61</td>
<td>22</td>
<td>13</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Thinking you are gay, lesbian or bisexual</td>
<td></td>
<td>63</td>
<td>23</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>0</td>
</tr>
</tbody>
</table>
Control over health (1)

“I am in charge of my health.”
“If I keep healthy, I’ve just been lucky.”

1. The four groups in the sample were fairly close in their responses, although more males than females agreed with (“I am in charge of my health”) and disagreed with (“If I keep healthy, I’ve just been lucky”).

Comments

1. These two sets of statements are used, together with the two on the following pages to generate a ‘health locus of control’ score.

2. We have discovered some interesting correlations with these responses. For example, a feeling of low health control links with fear of bullying and more smoking.
Sexuality

Which of the following best describes how you think about yourself?

1. 82% of this sample report they are straight/heterosexual.
2. Up to 13% of the data were missing (not filled in) although 2% ticked the box - Prefer not to say.

Comments

1. This information has been included in this annual report for the first time.
2. We generally offer this item only to Yr 10 students.
3. In Local Authorities where this question has been used, we see differences between LGB students and their peers in self-esteem (lower), bullying (higher) and substance use (higher).

<table>
<thead>
<tr>
<th></th>
<th>All Yr 10</th>
<th>Yr 10 LGB</th>
</tr>
</thead>
<tbody>
<tr>
<td>High self-esteem</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Bullied at school last year</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Ever tried smoking</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Ever tried drugs</td>
<td>%</td>
<td>%</td>
</tr>
</tbody>
</table>

* p<0.05