schools served by individual District Health Authorities, and have made available to them combined results so that individual schools can compare their results with the total picture for the district. Recently, in one district including a large city and involving nearly 30 schools — not the Avon study described above — the Health Authority and the LEA personnel responsible for coordinating and funding the enterprise divided the schools, for analysis purposes, into inner city, outer city, and rural groups. Table 1 reveals differences in smoking behaviour for 4th year boys and girls in this particular study.

Perhaps the results are predictable: higher levels of smoking prevail (1) for girls and (2) for the inner city neighbourhoods. Sheralgh Htreed commented on similarly ‘predictable’ results for consumption of alcoholic drink. However, the term ‘inner urban’ or ‘inner city’ to describe an area of poor housing and attendant social problems is not necessarily accurate geographically, since we know of at least one city where the ‘problem’ areas are in ill-planned suburban housing estates.

The presentation of such tables for all the 240 behaviours recorded provides a feast for the epidemiologist in the Health Authority and a resource for the LEA advisory staff.

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Tuckshops and healthy eating: a second survey
Sue Curtis
District Dietitian
Tameside & Glossop Health Authority

This follow-up report on the tuckshop provision in a group of Bradford schools suggests some encouraging improvements in the nutritional quality of their stock, linked to an awareness of their important contribution to a student’s health education programme.

A first survey of Bradford tuckshops was carried out in February and March, 1986. This was reported in the May 1987 issue of Education and Health. During September and October 1987 I carried out a second survey, for the following reasons:

1. To examine any changes taking place in school tuckshops since the first survey.
2. To produce up-to-date information for work with First School teachers and liaison teachers.
3. To provide information for the Education Directorate of the Local Authority, which was then adopting a food and health policy.

The survey
The questionnaire used in the first survey was adapted to answer the following questions:

- Did the school run a tuckshop?
- What were the reasons for running or not running one?
- What sort of foods were sold?
- Who organised the tuckshop?
- When was the tuckshop open?
- Had the previous tuckshop report influenced schools?

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- When was the tuckshop open?
- Had the previous tuckshop report influenced schools?
Why did schools not run a tuckshop?
A wide variety of reasons were given by the 37% of schools in the sample who came into this category. Health-related reasons accounted for 33%, practical and educational reasons 28% each, 11% quoted financial reasons, while non-specific reasons were given in another 11% of cases.

What sort of foods were sold?
Table 1 gives a breakdown of answers to this question, divided into categories of food. The following comments refer to foods in decreasing order of popularity.

The results show that, overall, crisp-type snacks were most commonly stocked. There was no change between 1986 and 1987. Biscuits of various types were the next most common stock, followed by confectionery items. Both were stocked slightly less frequently in 1987 than in 1986, while miscellaneous items were twice as likely to be sold - in particular, cereal bars, Bombay mix, and dried fruit. Classroom-produced foods and raw vegetables were more frequently sold.

Fresh fruit was being stocked more than twice as frequently in 1987, and nuts were being stocked more frequently too. In 1987, drinks were being sold by fewer than 1 in 5 tuckshops. Cakes were stocked by only 5% of schools.

Who organised the tuckshop?
All 74 schools completed this section of the questionnaire. Some Upper schools ran more than one tuckshop, and some had multi-snack machines in addition to tuckshops. The results show that teachers and headteachers were involved with 83% of the tuckshops, non-teaching staff with 30% of them, and 19% were run without using teachers' time. Pupils were involved with 41% of the tuckshops.

The biggest change since 1986 was that the school catering service was involved with 56% of the Upper school tuckshops. This represented a big increase in their involvement.

When was the tuckshop open?
Table 2 shows the times of opening. It will be seen from this that almost all were open on every school day, and were only open for morning break.

Changes since 1986 included a limited opening before school began, and a reduced opening at lunchtime.

Did the report for 1986 influence the school's attitude towards a tuckshop?
The report, based on the 1986 survey, had been circulated to all headteachers. Only 14 schools (11%) had been influenced by the report, but the comments made were encouraging, and are listed separately.

These comments indicate that teachers view the health of their pupils as being important, and that they are aware of the strong link between nutrition and health. They highlight the effect of the home environment and the child's experiences on the forming of food preferences. They also indicate the time-consuming aspects of tuckshops when organised by teaching staff, and the difficulties of obtaining an appropriate range of food from the local cash-and-carry.

As part of class activities, have children in your school organised and run a cafe of any type?
Of the schools in the sample, 20% of First schools, 10% of Middle schools, and 23% of Special schools had been involved with cafe activities as part of class work. The following list shows the wide variety of foods prepared in First schools.

Savouries included soups, raw vegetables, toast and savoury toppings, cheese and crackers, beans on toast, curry, sandwiches, pancakes, Asian savouries, fish and chips, and chappattis.

Drinks included milk shakes and orange juice.

Semisweet and sweet foods included scones, muffins, biscuits, jelly, cakes, wholemilk flour cookies, wholemilk flour cakes, Asian sweets, West Indian sweets, and fresh fruit.

In the examples given, nearly as many savoury foods were mentioned as were sweet foods. However, cakes were the most often-mentioned item, and these tend to be sugary and fatty. Vegetable and fruit-based dishes were not much prepared. However, wholemill products were made quite frequently.

Recommendations
The 56% response rate to this questionnaire was smaller than the 89% rate in 1986. Hence the results are likely to be less accurate. Nevertheless, the tuckshop provision in Bradford schools has improved nutritionally overall. The popularity of the various foods stocked was not determined.

The following general comments and recommendations are made in the report:
1. The profitability of school tuckshops should not be the major concern. School tuckshops should enable pupils to choose healthy snacks.
2. The healthy items should be at least equally represented along with the less healthy items.
3. Parents and older children should be consulted about their needs for a tuckshop.
4. Lower-fat crisps, preferably reduced in salt, should be stocked.
5. Cereal bars, digestive, semi-sweet, and suitable wholemill biscuits should be promoted at the expense of chocolate biscuits, cream biscuits, and cakes.
6. First schools should not sell confectionery and sugary pop.
7. All schools should promote the sale of semi-skimmed milk as a break-time drink.
8. Drinks machines using powdered whiteners of poor nutritional content should be replaced by dried skimmed or semi-skimmed milk.
9. The recent changes in government legislation prohibiting local authorities from supplying free milk to children from nursery age to 7 years old could well be...
Headteachers' comments on the influence of the 1986 report

First schools
- We are currently thinking of starting re-structuring our tuckshop and its management. 'Better' foods are now included.
- We buy reduced-fat crisps, when available, from the cash-and-carry.
- The report highlighted the time-consuming nature of tuckshops and the negative effects on health – teeth in particular.
- The children have enough sweets at home. A biscuit is better with milk.
- We changed our school policy in response to the last report – we now have a healthy eating policy – i.e., no 'red' items in school!

Middle schools
- We are looking at a wholefood supermarket in Halifax with a view to encouraging new lines.
- We try to encourage the children to choose healthy food, i.e., cereal bars and apples.
- We bought low-fat crisps.
- We are attempting to educate the children's snack food – a long process.
- We stopped selling sweets.
- We sell fewer toffee and chocolate bars.

Upper schools
- The school canteen provides hot snacks at break-time, i.e., sausage rolls, Cornish pasties, chip butties. However, the year tuckshops continue to operate and these are considered the sale of more health-conscious foods.

Special schools
- The report confirmed our original opinions.
- If we decide to run a tuckshop, we have a definite feeling that we would be looking towards healthy eating.

...detrimental to health... First schools in particular should stock semi-skimmed milk for children to buy.

10. A working party should be convened to tackle the problems of supplying suitable snack foods to school tuckshops.

Conclusion
The overall picture in Bradford may be highlighted as follows:
1. First schools provide the healthiest 'tuck', and have improved since 1986.
2. Middle schools still provide high-fat snacks, but are selling less confectionery. They need to sell more fresh fruit.
3. Upper schools are improving, stocking more fresh fruit, miscellaneous items, and nuts. They need to market their healthy snacks more positively.
4. Special schools are also improving – but none sell fresh fruit yet.

My thanks are due to all the schools that participated in the survey, and to Mrs Joan Phillips for typing the report.

Contact Sue Curtis (Mrs), District Dietician, Tameside General Hospital, Ashton-under-Lyne, Lancs. OL6 9RW (Tel: 061-330 8373 ext. 6320).

A media study with pupils and parents

Barry Ecuyer
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Alvaston, Derby

A school's investigation into the television viewing habits of its pupils has proved to be a valuable component of its Media Education programme. As well as introducing elements of questionnaire design and data processing, the results have relevance for PSHE work and have led to the involvement of parents in the questionnaire study and the follow-up meeting.

Work on Media Education has been developing in this school over a number of years. In an attempt to involve the parents more, we arranged an Open Forum at which the BBC, ITV, IBA, and the LEA were represented, along with the independent producer Philip Whithead. To publicise this event, and to focus attention on the subject of children and their use of television, we devised a questionnaire for parents and a viewing diary for children. These were offered to every school in Derby, and were used by just three of them, including Moorhead Primary School. The results were then returned to parents and members of the public at an Open Forum.

When children are asked to list programmes watched, we have found the results unreliable. For example, programmes may be listed by a variety of names, and peer pressure influences the choice of programmes which a child (as with an adult?) will publicly admit to watching. The diary method we have used eliminates both these factors, and yields, we believe, a more reliable result.

The children's diary consisted of a listing of all programmes transmitted between 3.30 and 10.30 on Monday, Tuesday, and Wednesday in the second week of February, 1988, together with a separate record for breakfast-time television.

The recording system
In discussion with the older children, it had become apparent that they recognised several different levels of viewing. At one level there is total involvement with the programme. At the other end of the scale there is listening to the soundtrack whilst engaging in other activities, looking at the screen only when stimulated to do so by interesting sounds. We asked all the children to record whatever they watched by entering either a C or a P against the programme – C denoting complete attention, P denoting partial or background attention.

We suggested that the very young ones might simply record 'viewed' or 'not viewed', but many of them used the differentiating record, which caused no