

HBSC England National Report

Health Behaviour in School-aged Children (HBSC):
World Health Organization Collaborative Cross National Study

Executive Summary

sexual health
relationships family life
school substance use
well-being community life

family life health
peer relationships, friends and leisure activities
healthy behaviours
school well-being
community life

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Findings from the 2010 HBSC study for England

Authors

Professor Fiona Brooks
Josefine Magnusson
Dr Ellen Klemmera
Antony Morgan
Dr Neil Spencer

Address for Correspondence

CRIPACC
University of Hertfordshire
College Lane Campus
Hatfield, AL10 9AB

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Poor physical and emotional health in adolescence can have a highly detrimental effect on overall life chances, impacting on educational achievement, the attainment of life goals as well as restricting social and emotional development.

Since 1998 young people in England have participated in The World Health Organization (WHO) Health Behaviour in School Aged Children Study (HBSC). This report presents data on young people's health and well-being in England for 2010. Prevalence statistics for 2010 and some trend analysis across from 2002, 2006 and 2010 are included. The study sampled young people aged 11, 13 and 15 who were in mainstream education at the time of the survey. In 2010 4,404 pupils took part in the most recent survey for England.

HBSC offers:

- A unique monitoring tool for the school aged population in England that can manifest the outcomes and effectiveness of early years interventions and interventions targeted at the school aged population.
- HBSC is unique in that it also offers a means to understand and respond to the social determinants of health and well-being among young people in England, including their experiences of school, family life and their communities.
- As part of the international HBSC network comparisons can be made across Europe and the USA and Canada.

Summary of Key Messages

Life Satisfaction

In contrast to the popular portrayal of young people, over **80%** of young people in the HBSC study report having **high life satisfaction**. Life satisfaction decreases by age and family affluence, 15 year old girls from low family affluence backgrounds have the lowest life satisfaction (69% of 15 year olds girls from low family affluence backgrounds scored 6 or above on a life satisfaction scale of 0-10 compared to 88% of 15 year old boys from high family affluence backgrounds).

Physical Health

The majority (over 80%) reported that their **physical health was either 'excellent' or 'good'**. Higher life satisfaction was found among young people who viewed their health to be good. 93% of those who rated their health as 'excellent' compared to 50% of those who rated their health as 'poor' scored 6 or above for life satisfaction.

A little over **15% of young people reported having a long term illness, disability or medical condition**, of those 31% felt that it impacted negatively on their participation in education.

Emotional Well-being

Girls and especially older adolescent girls, were more likely than their male peers to **report lower life satisfaction and a greater level of symptoms that indicate higher levels of day to day stress**; for example, nearly half (over 45%) of all 15 years old girls regularly feel low and suffer from headaches at least once a week (compared to 23% of boys aged 15). Young people who reported feeling low more than once a week were much less likely to score 6 or above on the life satisfaction scale. The proportion of girls reporting these forms of stress and reduced levels of well-being, have shown a small but steady increase over time (since the survey points of 2002 and 2006).

Around **30% of young people in England report** a level of emotional well-being that can be considered as 'low grade' poor mental health, that is they **regularly feel low, sad or down**. In England in 2006 the proportion of older girls frequently feeling low was just over 45%; the highest proportion among all of the GB countries, in 2010 this figure remains unchanged.

Substance Use

Smoking as a habit in adult hood is almost always initiated during adolescence. More girls than boys are regular smokers [10% of girls compared to 7% smoke at least occasionally). The numbers of **regular smokers is small and has gradually decreased since 2002**, when the proportion of young people across all ages was 15% of boys and 21% of girls. Of those who smoke at least once a week, 29% have a father who smokes 31% of smokers have a mother who smokes, but 53% of regular smokers have a 'best friend' who smokes. Smoking within close friendship groups appears to be a more significant risk factor for smoking, even more so than parental smoking.

Alcohol consumption among young people has been an issue that has generated considerable concern over the past decade. In 2010 there has been a **marked drop in regular drinking** across all ages and especially among girls in England from 2002. In 2010, by age 15, 32% of boys and 23% of girls reported regular weekly drinking, these figures in 2002 were 52% for boys and 48% for girls. However, **20% of all young people** reported two or more incidences of **drunkenness**, a figure that has decreased significantly from 2002 (30%), but not from 2006 (23%). Moreover at age 15 the incidence of drunkenness (two or more times) among girls exceeds that of boys (45% of girls vs. 39% of boys). By age 15, 13% of all young people reported 10 or more incidences of drunkenness. It appears that young people are drinking less frequently than they did in the early 2000's, although drinking to excess remains a feature of young peoples' relationship to alcohol consumption.

Multiple Substance Use

A small proportion of young people (9% of boys and 7% of girls aged 15 were engaging in multiple substance use (smoking, alcohol consumption and using cannabis). At all ages, life satisfaction was negatively related to multiple risk behaviour, so that **the more forms of substance use young people engage in, the lower their life satisfaction**. This difference was most marked for girls.

Sexual Health

The proportion of **15 year olds who have had sexual intercourse** has remained unchanged since 2006 (27% of boys and 34% of girls). Early first sexual experience at age 12 or younger is related to lower family affluence and gender. Young people in the lowest FAS group are significantly more likely to report first sexual intercourse at age 12 or younger (18% compared to 3% and 5% respectively in the medium and high FAS groups). The proportions of 15 year olds reporting **early first sexual experience has decreased since 2002**, from 17% in 2002 to 10% in 2010 for boys and from 9% in 2002 to 4% in 2010 for girls. A sizable minority of young people who were sexually active (**around 15%**) reported **not having used any form of contraceptive at last intercourse**.

Healthy Behaviours

The adoption of **healthy behaviours** such as eating fruit and vegetables, eating breakfast, good oral hygiene and adopting an active lifestyle not only offer significant benefits for young people's overall well-being, but are markers of social and family support. In 2010 the picture of young people's behaviours across a range of health promoting items was mixed, but there have been a **few improvements since 2006**.

Between 34-47% of young people report eating fruit and/ or vegetables every day. Daily fruit eating has decreased somewhat across almost all ages compared to 2006, when daily fruit consumption among young people in England was among the highest in Europe.

Eating breakfast is increasingly being seen as having significant health benefits, including a potential impact on emotional well-being. Eating Breakfast during the week is linked to family affluence and significantly **more boys than girls reported eating breakfast**. The proportion of 15 year olds who said that they eat breakfast every weekday has decreased from 2006, when 65% of boys (compared to 60% in 2010) and 50% of girls (compared to 43% in 2010) reported eating breakfast every weekday. Overall, 12% of boys and 17% of girls said that they **never** eat breakfast during the week.

A minority of young people meet the recommended daily physical activity levels (28% of boys and 15% of girls). Compared to 2006, **more boys in 2010 than 2006 (28% 2010 v. 23% 2006) reported activity levels sufficient to meet recommended daily needs, but among girls the proportion remained unchanged**.

Medically Attended Injuries

Unintentional injury and especially those that result in being medically attended represent a major cause of mortality and morbidity among UK adolescents. In 2010 a **large proportion of young people reported having been injured** in the last 12 months (50-60% of boys and around 40% of girls) to an extent that warranted medical treatment.

Body Image

Body image is a significant marker of well-being in adolescence and perceptions relating to weight and body size are a key dimension of body image. The highest average life satisfaction score is found among young people, boys and girls, who say that their body size is 'about right'. **Boys in lower family affluence households groups are more likely to feel that their body is too fat**. Concerns about body weight and dieting behaviour have been found among girls of normal weight In 2010 almost **half of girls said they were 'too fat'** at age 15, and 25% were engaging in weight loss strategies.

School Life

School connectedness is associated with life satisfaction and overall well-being. Overall, between 40-55% of students at all ages said that they like school 'a bit'. There has been a decrease in the proportion of young people across all ages who reported that they like school a lot since 2006, when England compared very favourably to other countries. **In 2010, 16% of girls and 14% of boys aged 15 reported that they like school a lot** compared to 26% of 15 year old girls and 24% of boys in 2006. Over **60% of young people feel safe in school**, but this decreased for boys by family affluence. The lowest level of school connectedness, especially in relation to teacher support, was reported by 13 year olds. Year 9 marks the middle years of secondary school where the pupils are neither new to school or preparing for public examinations. It is also the age at which across the study findings suggest risk related behaviours start to increase and perceived well-being begins to decline.

A subjective sense of **academic achievement** is associated with final education outcomes and a predictor of future life chances. The majority (ranging from 69% of 15 year olds to 76% of 11 year olds) rate their **achievement in school** as good or very good. For boys but not girls positive perceptions relating to achievement are significantly related to higher levels of family affluence. Girls rating of their achievement was found to be most positive at age 11 when they enter the secondary school system. For boys positive perceptions relating to achievement were significantly related to higher levels of family affluence. **Excessive school pressure is associated with poor education outcomes**. In 2010, 38% of girls and 20% of boys reported feeling *a lot* of pressure from school work.

In terms of peer relationships in school, 57% at age 15 report that **classmates are kind and helpful**, this represents a decrease from 2006 when 70% of 15 year old pupils reported that other students were *kind and helpful*. The majority of young people (70%) across all ages feel that they have **not been bullied**.

The majority of young people view **PSHE positively**, and feel that their teachers are knowledgeable on the subject. PSHE lessons appear to increase interest in health-related issues and may positively impact on normative behaviours, such as personal values in relation to caring for others.

Feeling involved in school or class level decision-making decreased with age, including how seriously young people felt their ideas were treated; 47% 11 year olds felt their ideas were taken seriously in class compared to 22% 15 year olds.

Family life

Family life is a key factor in young people's ability to navigate adolescence successfully (Pedersen et al., 2004). **The majority of young people (67%) in England live with both parents**. The proportions of young people who live with single parents significantly increased from 16% in 2006 to 20% in 2010.

The majority of young people reported broadly positive views of their relationships with their parents across a range of measures; 88% of young people report that they feel well supported by their parents and 95% of young people reported that they are encouraged by their parents to do well at school. Although perceptions of the levels of **parental support in relation to school life** across a range of measures was **strongly associated with affluence**.

The ease with which young people feel that they can discuss issues that really matter to them with their parents is a marker of parental support and overall family connectedness. Young people with high family affluence scores were found to be more confident about the ease with which they could talk to their parents compared to young people with medium and low family affluence scores. The majority of young people (**83%**) found it easy to talk to their mothers regarding the *things that really bother them*. **Communication with fathers appeared to be less easy overall**, 63% of all young people found it easy to talk to their fathers about things that really mattered to them) and just over half of 15 year old girls (51%) find it easy to talk to their fathers (compared to 70% of boys aged 15) .

Considerably more boys than girls take part in sports and physical activity with their parents. This may in part account for the difference in levels between girls and boys in physical activity 37% of boys v. 28% of girls participate in sporting activity with their families at least once a week.

Community, leisure and friendships

About half of young people view their **local community** positively, as a place where community members are pleasant, supportive and can be trusted. **70% of young people feel safe in the area they live**. 65% felt that other young people cause trouble in their area and just over one third felt adults did the same. 13 year olds boys are much more likely to report having access to good places to go in their local community compared to girls (65%v. 57%).

Over 85% of young people reported having three or more close, same-sex **friends**, which remains unchanged from 2006. On average young people **spend between 2-3 evenings a week out with friends**, (four or more evenings correlates with participation in health risks and injuries). Family affluence correlated with time spent with friends, both directly after school and out in the evenings, with young people in the highest family affluence group reporting lower average number of days than young people in the lowest family group. Girls reported spending slightly less time with friends after school, but reported greater frequency of communication with friends electronically.

The proportion of young people **playing computer games 2+ hours every night during the week significantly increased since 2006 from 26% to 37% in 2010**.

Gender issues

Gender operated as determinant of young people's health in a number of ways across the dimensions of health and well-being HBSC reported on:

Boys were more likely to have access to sport and physical activity opportunities and report ease of communication with their parents. For boys family affluence appeared to have a stronger relationship to school performance, quality of peer relationships and violence (fighting) than for girls.

Girls were more likely to report positive connectedness to school and to report their achievement was good. Older Girls were more likely to report lower life satisfaction and poorer emotional well-being. Engaging in multiple forms of substance use appeared to have a potentially more detrimental effect on girls well-being than for their male peers.