**Key themes from the Realigning Children’s Services Wellbeing Surveys in Falkirk**



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| **Overview**   * Most children in Falkirk appear happy, consider themselves healthy, like the areas they live in and have good relationships with family, peers and teachers. * However, there are always children who do less well and there are some specific areas of concern, including substance misuse, diet and physical activity, and mental wellbeing. * There are persistent and pronounced inequalities in some health and wellbeing outcomes among children and young people in Falkirk. * Poor outcomes in one area of wellbeing are often accompanied – and potentially compounded – by poor outcomes in another. * Experience of - and engagement with - school itself is a powerful predictor of mental wellbeing. * Efforts to improve attainment and wellbeing need to remain closely aligned, as pressure of school work is associated with poorer mental wellbeing, especially among girls. * In secondary school, girls have poorer mental and emotional wellbeing and are less likely to engage in physical activity, especially as they get older. * As both boys and girls age attitudes towards school, family and their local area tend to become more negative. * Services are not necessarily reaching the right children. * Underlying parental attitudes towards professional support may be an important factor in influencing service uptake. |
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# Introduction

In late 2016 and early 2017, Falkirk Council school pupils in years P5-7 and S1-4 participated in a health and wellbeing survey, carried out as part of Realigning Children’s Services – a Scottish Government-supported programme aimed at improving local planning of services for children and families.

The surveys were conducted in class, under exam-like conditions, using an online questionnaire (the content of which differed for pupils in primary and secondary schools). Pupils’ responses were subsequently linked – securely and anonymously – to a limited range of additional information held by education and social work services. In total, 4,147 primary pupils and 4,448 secondary pupils took part in the exercise, representing a very sizeable proportion of all eligible pupils.

This short briefing is intended for teachers and other practitioners with an interest in the findings. It highlights some of the main themes emerging from the survey and provides details about how to find out more.

A multi-agency working group has been set up to make sure that the issues raised within the full RCS programme report are included in the future planning of services for Falkirk children and families.

# Key themes

**Most children in Falkirk appear happy, consider themselves healthy, like the areas they live in and have good relationships with family, peers and teachers**

Despite the challenges of contemporary childhood and adolescence, it is important to keep in mind that wellbeing outcomes for a majority of children in Falkirk appear to be positive across the domains of personal, social and place.

By way of illustration:

* 80% of pupils in primary school and 81% in secondary school rate their own health as being either very good or good
* 76% of parents of children aged 8 or under rate their child’s health as very good
* 75% of pupils in P5 to P7 always or often feel that their life is going well
* 77% of pupils in primary school and 72% in secondary school say that they like school a lot or a bit
* 97% of primary school pupils and 98% of secondary school pupils say they have at least one close friend
* 72% of S1 to S4 pupils agree that the area they live in is a good place to live

On a range of other indicators, too, wellbeing outcomes appear to be positive for a majority or most children.

**However, there are always children who do less well and there are some important specific areas of concern**

The overall picture is positive – and Falkirk should be encouraged by the findings. However, it is important to keep in mind that there are children with key vulnerabilities that should continue being prioritised by practitioners. These children include those from the most deprived areas and those with additional support needs.

For example, rates of **smoking** among S2 pupils in Falkirk are similar to those in Scotland as a whole, and slightly lower than the national figure in S4. Rates of **alcohol consumption** and **drug use** are both similar to the national picture. But this still means that, in S4, 19% of pupils reported drinking alcohol within the last week, 9% reported being a current smoker and 18% that they had ever used drugs.

*Source: RCS secondary school survey, Falkirk 2017 and Scottish Health Survey 2015*

These behaviours are, of course, not only potentially harmful in their own right, but tend to cluster together and may be associated with other forms of risk-taking (e.g. feeling pressured to have sex).

**Exposure to second-hand smoke** in the home remains a significant problem too, affecting around 15% of S1 to S4 pupils every day or almost every day and a further 13% at least sometimes. This also impacts disproportionately on those from poorer households (see below).

In the context of rising obesity levels, the findings on **diet** and **physical activity** should also give pause for thought. Daily consumption of fruit or vegetables is far from being the norm in Falkirk - each being reported by around a third of secondary school pupils, for example. Unhealthy choices, such as consumption of fizzy or sugary drinks, were also common.

**Table 1: Frequency of consumption of various foodstuffs, S1 to S4 pupils (%)**

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| --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | |
| How many times a week do you normally eat or drink the following things? | | | Every day | 5 or 6 days a week | 2 to 4 days a week | Once a week or less |
| *Row percentages* |  |  | | | | |
| Fruit | | | 34 | 14 | 26 | 25 |
| Vegetables | | | 36 | 17 | 23 | 24 |
| Sweets or chocolate | | | 36 | 20 | 29 | 15 |
| Crisps or fried potatoes | | | 23 | 18 | 29 | 30 |
| Sugary drinks | | | 24 | 13 | 23 | 40 |
| Diet drinks | | | 17 | 11 | 20 | 52 |
| Fruit juice or smoothies | | | 28 | 16 | 19 | 38 |
|  | | |  |  |  |  |

*Source: RCS secondary school survey, Falkirk 2017*

Compounding such dietary choices is the relatively **sedentary lifestyle** of many children, especially as they progress through the school system. Half of S1 to S4 pupils in Falkirk (50%), for example, are physically active on fewer than five days a week. Indeed, one in nine (11%) say they are active on just one day or less.

These figures contrast with those from the primary school survey, suggesting that the healthy behaviours learned throughout primary school are not sustained as children get older. Around half the pupils in P5 to P7 (47%) were physically active every day, with a further third (33%) active on most days. Daily consumption of fruit was also more common at primary school level. And from P5 onwards, boys tended to make poorer dietary choices. For example, among P5 to P7 pupils, 69% of boys said they ate fruit every day or most days compared with 79% of girls; by contrast, 34% of boys drank fizzy drinks with the same frequency compared with 22% of girls. In secondary school, 42% of S1 to S4 boys consumed sugary drinks every day or most days compared with 32% of girls of the same age.

**Figure 2: Pupils physically active for at least an hour a day, by gender and school year (%)**

*Source: RCS primary school survey and secondary school survey, Falkirk 2017*

In terms of **mental and emotional wellbeing**, there are indications that the picture in Falkirk is also similar to that across Scotland as a whole. In 2017, for example, the proportion of S2 and S4 pupils in Falkirk within the ‘normal’ range for the total difficulties SDQ score was the same as the Scotland average for 2015. However, it is also worth noting that, both locally and nationally, there are signs that the proportion of pupils with ‘very high’ scores may be increasing. This issue will be further investigated by the working group as, if confirmed, such a trend would have significant implications for the type and capacity of service provision required.

*Source: RCS secondary school survey, Falkirk 2017 / SALSUS 2010, 2013 & 2015*

Although we are not in a position to compare experiences of **bullying** in Falkirk with the position nationally, in absolute terms, the proportion of children affected remains somewhat high. Cyberbullying appears to be a presence in the lives of a significant minority of young people. For example, 16% of pupils in primary school said that they had been bullied by other children ‘sending emails, text messages or posting something online’. However, the proportions reporting experience of some form of offline victimisation were considerably greater. For instance, 39% of primary pupils had experienced some form of physical bullying; 49% had been left out of games and chats; and 56% had been called names or made fun of.

A slightly different set of questions about bullying was asked of secondary pupils. Again, these showed that a sizeable minority of pupils had been affected by bullying in the previous months and that much of this occurred offline.

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| --- | --- | --- | --- |
| **Table 2: Experience of bullying within last month, S1 to S4 pupils (%)** | | | |
|  | Yes – online / by phone | Yes – offline | No – not at all | |
| *Row percentages* | | | | |
| Hit, kicked or punched you, taken your belongings or hurt or threatened you physically in some other way | N/A | 13 | 87 | |
| Teased you in a mean way or called you hurtful names | 14 | 24 | 67 | |
| Spread mean rumours or told lies about you, deliberately ignored you or excluded you from a group | 14 | 25 | 68 | |
|  |  |  |  | |  |

*Source: RCS secondary school survey, Falkirk 2017*

The precise definition and measurement of bullying is, of course, open to debate - and it is possible (and even likely) that different questions would have produced different prevalence rates. What is clear, however, is that experience of being bullied is an effective predictor of two other things: having a lower level of mental or emotional wellbeing and bullying other children. For both these reasons, the survey findings around bullying merit further investigation, to help to identify those especially at risk and how and when appropriate interventions might be targeted.

**There are persistent inequalities in health and wellbeing among children and young people**

It is perhaps not surprising to find that poverty and deprivation are key predictors on many measures. However, the extent of some of those differences - and the fact that they can be demonstrated using data that are specific to the local context of Falkirk - should serve as a reminder of the work that remains to be done. Such inequalities are not necessarily consistent. On some measures - such as enjoyment of school or physical activity - there is little variation across socio-economic backgrounds. On others, however, the differences remain stark. In the least deprived quintile, for example, 9% of P5 to P7 pupils were exposed to second-hand smoke; in the most deprived areas, by contrast, the figure was 39%.

*Source: RCS primary school survey, Falkirk 2017*

Similar patterns were evident in relation to caring responsibilities and concern about family members. For instance, 45% of primary school pupils in the most deprived areas worried a lot about a family member’s health compared with 29-30% in the two least deprived quintiles; and 30% of secondary school pupils eligible for free school meals described themselves as young carers compared with 10% of others.

At primary school level, differences in health behaviours were noticeable, with children eligible for free school meals and children living in the most deprived areas being more likely to drink fizzy drinks every day and less likely to brush their teeth at least twice a day. By secondary school, the same groups of children also reported lower levels of positive mental wellbeing (on the WEMWBS scale) and more social, emotional and behavioural problems (on the Strengths and Difficulties Questionnaire).

**Poor outcomes in one area of wellbeing are often accompanied – and potentially compounded – by poor outcomes in another**

It is possible for children to be doing well in some health and wellbeing domains and poorly in others, however, poor outcomes in one area are often accompanied by poor outcomes in others. These are often likely to reinforce and amplify each other. For example, in Falkirk, it is apparent that those most likely to drink sugary drinks are also least likely to brush their teeth regularly, with obvious implications for dental health. Among those in P5 to P7 who drink fizzy drinks every day 56% brush their teeth at least twice a day compared with 80-83% of those who rarely or never drink fizzy drinks. The same children are also less likely to eat fruit and vegetables or to be physically active, with compounding consequences for obesity levels.

*Source: RCS primary school survey, Falkirk 2017*

**Experience of - and engagement with - school itself is a powerful predictor of wellbeing outcomes**

School is a potential setting for support and programmes that can help to promote wellbeing among children and young people. But the survey findings also emphasise the extent to which the everyday experience of school itself is important. For example, the extent to which children are engaged, and have good relationships with peers and teachers is likely to be fundamental to mental and emotional wellbeing in particular. For instance, the surveys showed that those children who feel that other pupils treat them with respect, have lower exposure to bullying, have close friends or friends that are nice to them, and who enjoy school more all tend to enjoy better mental and emotional wellbeing (as measured by the widely-used Warwick-Edinburgh Mental Wellbeing scale – see <https://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/> for further details).

*Source: RCS secondary school survey, Falkirk 2017*

**Efforts to improve attainment and wellbeing agendas need to remain closely aligned**

There is a well-established and widening gap between the attainment of boys and girls at secondary schools in Scotland. Perhaps not surprisingly then, as girls progress through secondary school they are progressively more likely than boys to feel pressured or strained by school work. In S1, 19% of girls and 14% of boys say they feel like that ‘a lot of the time’, but by S4, the same is true of 69% of girls and 40% of boys. There is also a strong association between feeling pressured by school work and having lower levels of mental and emotional wellbeing.

**Figure 7: S1 to S4 pupils feeling pressured by school work ‘a lot of the time’, by school year and gender (%)**

*Source: RCS secondary school survey, Falkirk 2017*

This reinforces the need to ensure that the goals of improving attainment and children and young people’s health and wellbeing remain closely aligned (as set out in the National Improvement Framework for Scottish Education) – and that an awareness of the potential relationship between them needs to lie at the heart of efforts to address both. Encouraging pupils to do well at school needs to be done without creating excessive concern or anxiety among pupils about their school work - pressure which may have adverse consequences for their mental and emotional wellbeing.

**Girls appear to have poorer mental and emotional wellbeing and are less likely to engage in physical activity, especially as they get older**

In P5 to P7, girls were slightly more likely than boys to have higher levels of life satisfaction and more positive mood and emotions. However, this pattern reversed in secondary school, with some quite large differences, particularly for older children. For example, girls in S1 to S4 were more likely than boys to have a ‘very high’ emotional symptoms score in the SDQ (25% compared with 9%) and to have a lower WEMWBS score (a mean of 47.6 compared with 51.3). The interaction with age means that S4 girls exhibit particularly low levels of positive mental wellbeing, with an average WEMWBS score of just 44.9, and 37% having a ‘very high’ SDQ emotional symptoms score. Other recent studies such as the CSN Policy Briefing 2016[[1]](#footnote-1) suggest that there may be particular pressures on teenage girls. These ranged from anxieties about attainment, to body image issues and higher levels of social media use (all of which are apparent in the data from Falkirk). In particular the surveys note that the gender gap in mental and emotional wellbeing is widening.

**Figure 8: Mean WEMWBS scores by school year and gender (%)**

*Source: RCS secondary school survey, Falkirk 2017*

Physical activity is another area where outcomes are very similar for boys and girls in younger age groups but diverge as children age. In P5 to P7, for example, 80% of both boys and girls report that they were active every day or most days; by S4, 49% of boys and just 36% of girls report being active on at least five days a week. Efforts to maintain levels of physical activity for older pupils, but especially for girls, might have positive consequences not only for the prevention of obesity, but for maintenance of mental and emotional wellbeing.

**And as both boys and girls age, attitudes tend to become more negative**

Between S1 and S4, there is a clear change in the attitudes of children, as well as their behaviour. In S1, 80% of children like school a lot or a bit, but this declines to 60% by S4. Attitudes towards teachers show a similar increase in negativity over the same period. Outside of school, changes can also be seen: for example, 71% of those in S1 strongly agree that they enjoy spending time with their family compared with 48% of those in S4. At the same time, older pupils are less willing to talk to family members about worries than younger ones. Attitudes towards the local area also change: nearly half (45%) of pupils in S1 strongly agree they can trust people in the area compared with a quarter (25%) of those in S4. And by S4, a third of pupils (34%) say they do nothing in their free time most days or every day, compared with one in seven (14%) of those in S1.

**Services are not always reaching the right children**

The findings from the primary and secondary school surveys show an association between various indicators of need and being in receipt of ASN or other children’s services. But this is not necessarily as close as one might expect. The survey also suggests that there are many other children with emotional or behavioural difficulties who are not receiving services and there are others who are currently receiving such support who do not seem to exhibit the same levels of need. While this may be explained in part because the data linkage exercise does not capture all aspects of service use and by the fact that some children will not exhibit need precisely because they are in receipt of services, it does highlight the need to look critically at the question of which services and supports are reaching which children.

**Attitudes towards professional support may influence uptake**

Of course, services not only need to be available and accessible: parents also need to feel comfortable and confident in engaging with these services. The parent survey provides some useful clues as to why that may not always be the case. In particular, it suggests that there remains considerable anxiety about ‘professional involvement’ - particularly in areas of greater deprivation and among single parents. For example, 17% of single parents agreed with the statement, ‘If you ask for help / advice on parenting from professionals…they start interfering / trying to take over’ compared with just 12% of those in two parent households, and 37% of single parents agreed with the statement ‘If people knew you were getting professional support with parenting, they would probably think you were a bad parent’ compared with 24% of those in two parent households.

**Table 3: Attitudes towards parenting support (%)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Agree ‘If you ask for help / advice on parenting from professionals…they start interfering / trying to take over’ | Agree ‘Professionals like health visitors and social workers do not offer parents enough advice and support…’ | Agree ‘If people knew you were getting professional support with parenting, they would probably think you were a bad parent’ |
| All | 13 | 20 | 26 |
|  |  |  |  |
|  |  |  |  |
| Least deprived three quintiles | 10 | 19 | 25 |
| Most deprived two quintiles | 17 | 21 | 28 |
|  |  |  |  |
| 2 parent household | 12 | 19 | 24 |
| 1 parent household | 17 | 25 | 37 |
|  |  |  |  |

*Source: RCS parent survey, Falkirk 2017*

**To find out more**

If you would like to find out more about the findings of the surveys, a fuller report is available. To find out more about how the surveys were carried out, or about possibilities for further analysis, please contact [rcs@gov.scot](mailto:rcs@gov.scot) or call or 0131 244 1664.

1. <http://www.lgiu.org.uk/wp-content/uploads/2016/08/DfE-research-wellbeing-of-young-people.pdf> [↑](#footnote-ref-1)