



Health and Wellbeing Online Pupil Survey 2021

A Summary Report for
South Gloucestershire Council

By

Pauline Foster

Foster and Brown Research

Unit 9, Cirencester office Park

Tetbury Road

Cirencester

Gloucestershire

GL7 6JJ

E-mail; paule@fabresearch.com

Web address: www.fabresearchonline.co.uk

Telephone: 01285 700759

Contents

Executive Summary	4
First state of the nation report	4
Introduction	5
Key findings 1. Feeling safe	13
Feeling safe at school, at home and from crime	13
Feeling safe from abuse (not asked in primary)	15
Online abuse	15
In trouble with the Police and Gang behaviour (not asked in Primary)	16
Have you ever felt you've had to carry a knife? (not asked in primary)	16
Have you ever felt you have had to join a gang? (not asked in primary)	17
Run aways	17
School absence	17
Key Findings 2. Mental health and emotional wellbeing	18
2.1: WEMWBS – Warwick and Edinburgh Mental Wellbeing Scale Results	19
2.2: Positive Mental health and Emotional Wellbeing - Resilience	21
Mental Wellbeing	25
2.3: Negative Mental health and Emotional Wellbeing- Stress	31
2.4 Self-harm (not primary)	36
Overdosing	40
Communication	41
2.5 Bullying	42
Key Findings 3: The extent to which pupils adopt healthy lifestyles	47
3.1: Food poverty	47
3.2 Healthy Eating	48
Fruit and vegetables	50
Unhealthy snacks	50
Takeaways	51
Unhealthy drinks	51
Information	52
3.3: Sleep behaviour	53
3.4 Physical activity	55
3.5: Substances (drinking, smoking and taking illegal drugs)	59
Alcohol	59
Smoking	61

Drugs and other illegal substances (Secondary and Year 12/FE only)	63
4.1 Inclusion	65
4.2 School Experiences	67
How do pupils describe their school experiences?	67
How do pupils describe their school experiences?	68
Figure 4.22: Secondary Phase.....	68
4.3: How helpful has it been to learn about various aspects from the PSHE Curriculum?	70
Key Findings 5: Sexual identity and sexual health (Secondary phase).....	71
5.1: Sexual identity	71
5.2: Sexual Orientation	72
5.3: Sexual Health	73
Access to contraception.....	73
How comfortable do they feel to say “No” to sexual activity?.....	74
Do they know how and where to access contraception and sexual health advice and services?	75
How comfortable would they be using sexual health and contraceptive services?	75
Which of the sexual health and contraception services listed below would you feel comfortable using?	76
Section 6: Lockdown experiences	77
6.1: Lockdown experiences.....	77
How many pupils did not leave the house during lockdown?.....	77
How did pupils manage their schoolwork during lockdown?	79
What equipment did they have during lockdown to help do their schoolwork?	81
Discussion	82
Feeling Safe	82
Mental and emotional wellbeing	82
School experience and aspiration	83
Healthy Lifestyles.....	83
Sexual Health	84
Lockdown Experiences	85
Summary	85
Recommendations	86
Future ambitions	87

Executive Summary

The Health and Wellbeing Online Pupil Survey (OPS) has been run four times in South Gloucestershire and participation has increased from 6,000 children and young people (2015 and 2017) to over 8,000 in 2021. This was a slight increase in both schools participating (76 to 78) and numbers of pupils from 2019 despite the COVID pandemic. Because of COVID, the OPS21 was run from mid-May to mid-July, with most schools participating in June instead of the Spring term as in previous surveys. The OPS21 has data from 8,025 pupils aged 8 to 18 years old from 78 schools and settings covering over 400 questions and sub-questions.

The OPS provides an important and comprehensive picture of the needs of children and young people across the local authority. The children and young people taking part in the survey have provided a powerful vehicle for pupil voice ensuring local politicians and decision-makers recognise how children and young people are feeling and behaving. This should ensure scarcer resources are targeted at areas of most need. The opinions and concerns reflected in this survey suggest that the children and young people of South Gloucestershire are in the main, typical of young people across the UK when compared to the national data available. The results of the Health and Wellbeing OPS give a broad portrayal of pupil lifestyles across South Gloucestershire and care should be taken when interpreting individual questions as due to the nature of the survey, there are numerous variables to take into account.

First state of the nation report

The first state of the nation report looking at the mental health and wellbeing of children and young people aged 10 - 14 was published in 2019 to coincide with World Mental Health Day. Key findings included:

- 94% of children felt happy with their family, 92% happy with their friends and 95% felt they had good or very good health
- Most young people are happy with their lives, with 83% reporting high or very high life satisfaction
- Age is a clear factor of wellbeing: being older was associated with lower wellbeing
- Young females were more likely to report that they were recently anxious than males
- Bullying had the strongest link to teenage girls' emotional wellbeing across adolescence, with seeing friends and getting enough sleep also rating highly
- There are marked gender differences with experiences of cyberbullying: females report higher rates than males
- Women report lower satisfaction with their leisure time than men
- Social media did not have a strong association with teenage girls' psychological health.

Please note: data in the report sometimes contain small numbers of pupils in specific groups.

Caution should be used when interpreting these results, as statistically, we cannot conclude that we wouldn't have seen these results due to chance or due to natural variation in individual responses.

Introduction

The South Gloucestershire Health and Wellbeing Online Pupil Survey (OPS) 2021 has been funded by the Public Health and Wellbeing Division of South Gloucestershire Council and carried out by a local independent research company Foster and Brown Research Ltd. The survey has many of the same questions as asked in 2015, 2017 and 2019 OPS to allow a time series analysis.

The aim of the OPS is to provide essential information for individual schools, South Gloucestershire Council and other stakeholders to find out how children and young people in South Gloucestershire behave and what they really think about a range of health-related issues. Understanding the data will enable services to target resources more effectively in order to improve the health and wellbeing of our children and young people and develop a better understanding of our young people's experiences of life, both inside and outside school.

The survey is organised into seven sections: demographics, healthy eating, physical activity, substances, citizenship, safety and relationships. The Year 12/FE version also has a section on further education and future prospects. There are three age-appropriate versions of the questionnaire: primary, secondary and Year 12/FE college, plus a version for children and young people with learning difficulties.

The survey was carried out from mid-May to mid-July 2021 and is usually repeated every 2 years, inviting all schools to take part on a voluntary basis. The questionnaire, which was completed online at school by pupils, this year was aimed at Year groups 4, 5, 6, 8, 9, 10, 11 and 12. The survey attracted 78 schools and over 8,000 pupils completed the OPS. Only 93 young people completed the year 12 survey. This is too small a sample for some of the data comparisons.

This report is a summary of findings from the OPS structured around five themes for improving our young people's health, wellbeing and future life chances:

1. The extent to which pupils feel safe
2. Mental health and emotional wellbeing
3. The extent to which pupils adopt healthy lifestyles
4. School experience and aspirations
5. The effectiveness of care, support and guidance

The questions covered a wide range of aspects in young people's lives: lifestyles, learning experience, relationships, wellbeing, safety, aspirations, and support requirements. All the demographic data was self-reported. Teachers and teaching assistants gave assistance where and when needed.

Table 1: Key Demographics

Key Demographics 2021	Number of Respondents 2021	% of total respondents 2021
Total number of respondents	8,025	100%
Male	3972	49.5%
Female	3872	48.2%
Other	160	2.0%
Gender Fluid*	32	1.4%
Non-Binary*	44	1.9%
Year 4 (aged 8-9)	1,444	18.0%
Year 5 (aged 9-10)	1,860	23.2%
Year 6 (aged 10-11)	1,908	23.8%
Year 8 (aged 12-13)	1,115	13.9%
Year 9 (aged 13-14)	761	9.5%
Year 10 (aged 14-15)	812	10.1%
Year 11 (aged 15-16)	32	0.4%
Year 12 (aged 16+)	93	1.2%
School phase – Primary	5,212	64.9%
School phase - Secondary	2,720	33.9%
School phase – Year 12	93	1.2%
Disabled	285	3.6%
One or both parents in the armed forces	97	1.2%
Ethnicity – White British	5,173	64.5%
Ethnicity - Any other ethnic group	2,270	28.3%
Geographic Locality 1	2,684	33.4%
Geographic Locality 2	2,562	31.9%
Geographic Locality 3	2,779	34.6%
Cluster 1	594	7.4%
Cluster 2	2,242	27.9%
Cluster 3	1,614	20.1%
Cluster 4/5	1,521	19.0%
Cluster 6	2,116	26.4%

NB For gender fluid and non-binary - % is of those who answered the question, only asked in Secondary & older not total i.e. 8,025.

Table 2: Additional demographics – home & personal circumstances

Do you belong to any of the following groups?	Number of Respondents 2021	% of total respondents
SEN (special educational needs)	425	5.3%
Eligible for free school meals	383	4.8%
EHCP (Education Health and Care Plan)	137	1.8%
Dyslexic	412	5.4%

Do you belong to any of the following groups?	Number of Respondents 2021	% of total respondents
Child in care (LAC) or fostered	65	0.9%
Young Carer	47	0.6%
You or your family have a social carer	347	4.6%
One or both parents are in the armed forces	97	1.3%
Disabled (For types see below)	285	3.6%
Physical Disability	41 41	15.2% <i>of disabled</i> 0.5% <i>population</i>
Sensory Disability	36 36	13.4% <i>of disabled</i> 0.5% <i>of population</i>
Mental Health condition	65 65	24.2% <i>of disabled</i> 0.8% <i>of population</i>
Learning Disability	122 122	45.4% <i>of disabled</i> 1.5% <i>of population</i>
Long-standing illness or health condition	54 54	20.1% <i>of disabled</i> 0.7% <i>of population</i>
Other Disability	69 69	25.7% <i>of disabled</i> 0.9% <i>of population</i>
*Anyone in your family been to prison (Yes)	254	10.4%
Rooms in house: 3 or less	610	7.6%
Rooms in house: 4 or 5	1,1821	22.9%
Rooms in house: 7 or more	4059	51%
Number of people living at home: 1 i.e. on their own	39	0.5%
Number of people living at home: more than 7	325	4.1%
Access to garden – No (primary)	176	3.4%
Access to garden – Yes but don't use it (primary)	278	5.4%
Access to garden, sometimes use it (primary)	2,614	50.5%
Access to garden, use it every day (primary)	2,113	40.8%
Access to a garden – No (secondary)	63	2.3%
Access to a garden – Yes but don't use it (secondary)	240	8.8%
Access to a garden, sometimes use it (secondary)	1478	54.4%
Access to a garden, use it every day (secondary)	934	3.4%
Absent from school for more than 5 days last term. Missed school because of COVID	442	24.6% of CYP who missed school

*Only asked in secondary & older

Table 3: Schools who took part in the 2021 survey and their School Clusters

School Name	Early Help Cluster
Abbeywood Community School	2
Abbotswood Primary School	3
Alexander Hosea Primary School	3
Almondsbury CE Primary School	1
Barley Close Primary School	6
Barrs Court Primary School	4/5
Beacon Rise Primary School	4/5
Bowsland Green Primary School	2
Bradley Stoke Community School – Primary Phase	2
Bradley Stoke Community School – Secondary Phase	2
Brimsham Green School	6
Bromley Heath Junior School	6
Cadbury Heath Primary School	4/5
Callicroft Primary Academy	2
Castle (The) School	1
Charborough Road Primary School	2
Cherry Garden Primary School	4/5
Chipping Sodbury Secondary School	6
Christ Church CofE VC Junior School	6
Christ Church Hanham CofE Primary School	4/5
Christ the King Catholic Primary School	1
Coniston Primary School	2
Crossways Junior School	1
Culverhill School	3
Digitech Studio School	4/5
Downend School	6
Elm Park Primary School	6
Filton Hill Primary School	2
Frampton Cotterell CE Primary School	6
Frenchay CofE VC Primary School	6
Gillingstool Primary School	1
Hambrook Primary School	6
Hanham Woods Academy	3
Hawkesbury CofE Primary School	3
Holy Trinity Primary School	2
Horton C of E VA Primary School	3
Iron Acton C of E Primary School	3
John Cabot Academy	4/5
Kings Oak Academy	4/5

School Name	Early Help Cluster
Longwell Green Primary School	4/5
Mangotsfield C Of E Primary School	6
Manor (The) C of E Primary School	6
Marshfield CE VC Primary School	4/5
Meadowbrook Primary School	2
Meadows (The) Primary School	4/5
New Horizons Learning Centre - Courtney Road Campus, Primary	4/5
New Horizons Learning Centre - Mulberry Drive, Secondary	4/5
Old Sodbury CE Primary School	3
Our Lady of Lourdes Catholic Primary School	4/5
Park (The) Primary School	4/5
Patchway Community School	2
Pathways Learning Centre	6
Pucklechurch C of E VC Primary School	6
Rangeworthy Primary School	3
Raysfield Primary School	3
Ridge (The) Junior School	3
Redfield Edge Primary School	4/5
Severn Beach Primary School	1
Shield Road Primary School	2
St Andrew's C of E Primary School	1
St Anne's C of E Primary School	4/5
St Augustine of Canterbury Primary School	6
St Barnabas CofE Primary School	4/5
St Chad's Patchway CE VC Primary School	2
St John's Mead CofE Primary School	3
St Mary's Catholic Primary School, Bradley Stoke	2
St Michael's CE Primary School, Winterbourne	6
St Michael's Primary School, Stoke Gifford	2
St Paul's Catholic Primary School	3
Stanbridge Primary School	6
Stoke Lodge Primary School	2
Tynings (The) Primary School	6
Wallscourt Farm Academy	2
Watermore Primary School	6
Wellesley Primary School	3
Wheatfield Primary	2
Wick CE Primary School	4/5
Winterbourne Academy	3
Woodlands Primary Academy	3

Table 4: Schools response rates

Number of School Responses - Primary

School Name	Total number of Responses
Abbotswood Primary School	84
Alexander Hosea Primary School	95
Almondsbury CE Primary School	132
Barley Close Primary School	73
Barrs Court Primary School	82
Beacon Rise Primary School	344
Bowsland Green Primary School	98
Bradley Stoke Community School - Primary Phase	32
Bromley Heath Junior School	185
Cadbury Heath Primary School	27
Callicroft Primary School	152
Charborough Road Primary School	69
Cherry Garden Primary School	43
Christ Church CofE Junior School	140
Christ Church Hanham CofE Primary School	146
Christ the King Catholic Primary School	73
Coniston Primary School	72
Crossways Junior School	174
Culverhill School (special)	1
Elm Park Primary School	104
Filton Hill Primary School	74
Frampton Cotterell CE Primary School	132
Frenchay CofE VC Primary School	17
Gillingstool Primary School	13
Hambrook Primary School	27
Hawkesbury CofE Primary School	31
Holy Trinity Primary School	18
Horton C Of E VA Primary School	12
Iron Acton C of E Primary School	14
Longwell Green Primary School	147
Mangotsfield CE Primary School	165
Manor (The) CE Primary School	58
Marshfield CE VC Primary School	71
Meadowbrook Primary School	139
Meadows Primary School	16
Old Sodbury CE Primary School	26
Our Lady of Lourdes Catholic Primary School	51

School Name	Total number of Responses
Park (The) Primary School	83
Pathways Learning Centre	5
Pucklechurch CofE VC Primary School	26
Rangeworthy Primary School	13
Raysfield Primary School	158
Redfield Edge Primary School	84
Ridge (The) Junior School	82
Severn Beach Primary School	36
Shield Road Primary School	23
St Andrew's Church of England Primary School	32
St Anne's Church of England Primary School	59
St Augustine of Canterbury Catholic Primary School	52
St Barnabas CofE Primary School	70
St Chad's Patchway CE VC Primary School	29
St John's Mead CofE Primary School	76
St Mary's Catholic Primary School, Bradley Stoke	71
St Michael's CE Primary School, Winterbourne	94
St Michael's Primary School, Stoke Gifford	188
St Paul's Catholic Primary School	24
Stanbridge Primary School	102
Stoke Lodge Primary School	107
Tynings (The) Primary School	155
Wallscourt Farm Academy (CLF)	107
Watermore Primary School	61
Wellesley Primary School	29
Wheatfield Primary School	182
Wick CE Primary School	27
Woodlands Primary School	100

Number of Responses – Secondary/12+

School	Total Number of Responses
Abbeywood Community School	132
Bradley Stoke Community School - Secondary	480
Brimsham Green School	486
Castle (The) School	134
Chipping Sodbury School	46
Digitech Studio School (CLF)	46
Downend School	176
Hanham Woods Academy (CLF)	165

School	Total Number of Responses
John Cabot Academy (CLF)	126
Kings Oak Academy (CLF) - Secondary	70
New Horizons Learning Centre - Secondary	3
Patchway Community School	269
Pathways Learning Centre	12
Winterbourne Academy	668

Key findings 1. Feeling safe

Feeling safe at school, at home and from crime

1.1 Results from the pupil survey suggest that the majority of pupils in South Gloucestershire felt safe or very safe at school and at home, with 91% feeling safe at home (3% reported feeling unsafe) and 73% feeling safe at school (10% reported feeling unsafe). This is very similar to the 2019 results.

The proportion of pupils feeling **safe or very safe at home** (91.1%) is higher but very comparable with other schools in England (90.2%) – Figure 1.01.

The proportion of pupils feeling **safe or very safe at school** (73%) is slightly higher but very comparable with other schools in other Southern regions (72.1%, 72.3% for overall English schools). Figure 1.02.

Figure 1.01 Feel safe at home (n=7,379)

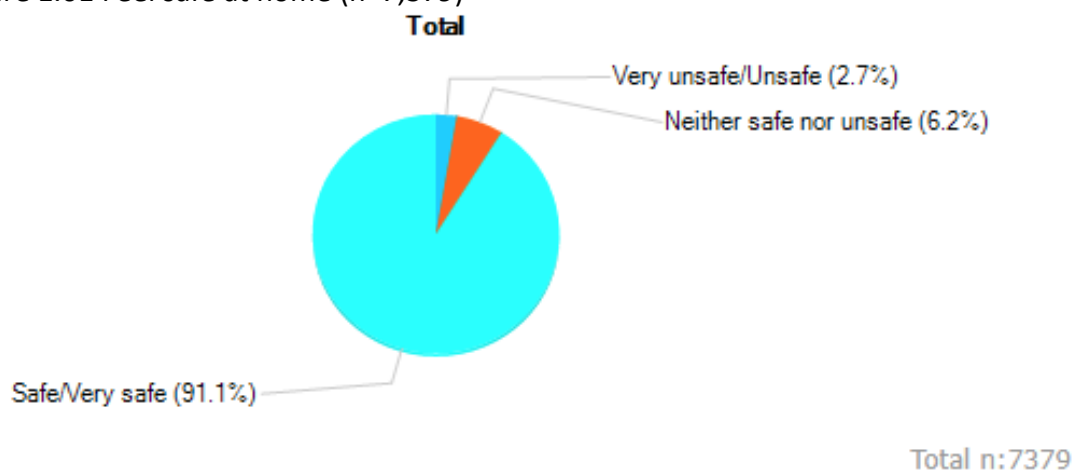


Figure 1.02 Feel safe at school (n=7,324)

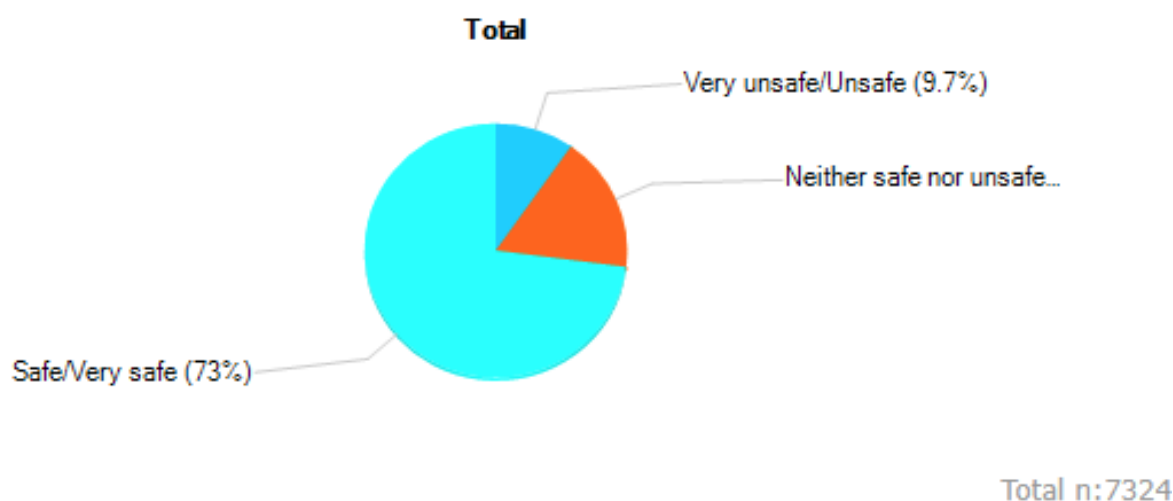
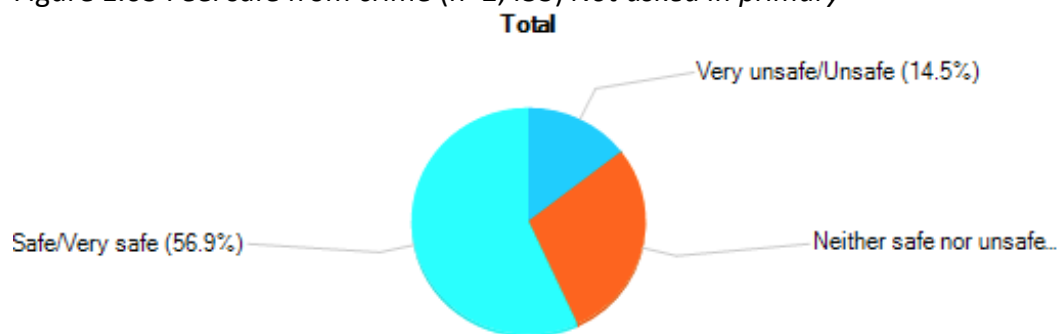


Figure 1.03 Feel safe from crime (n=2,453) *Not asked in primary*

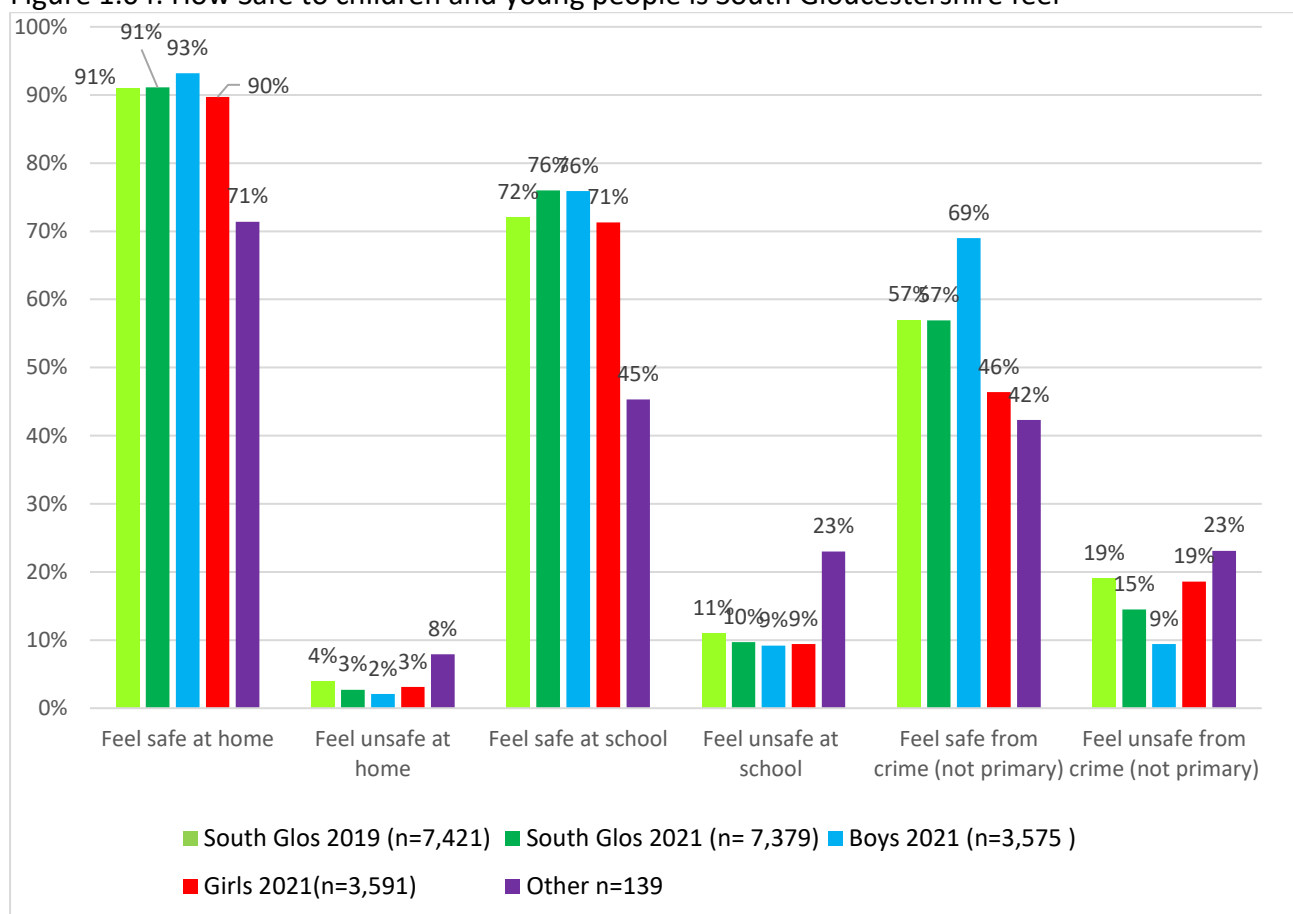


Total n:2453

The proportion of young people (not asked in the primary phase) feeling **safe or very safe from crime** (56.9%) is slightly lower but very comparable with other schools in other Southern regions (57.4%). Figure 1.03 above.

Overall girls felt less safe than boys and young people who do not identify as either male or female (other) felt least safe of all. (Figure 1.04).

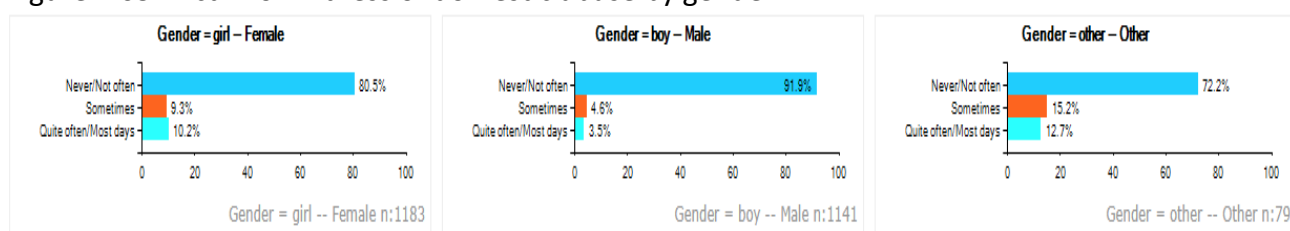
Figure 1.04: How Safe to children and young people is South Gloucestershire feel



Feeling safe from abuse (not asked in primary)

1.2. 23% of secondary & year 12 reported that they or a member of their immediate family had been a victim of domestic abuse or domestic violence. This has increased from previous years (17% in 2019 and 19% in 2017) which reflects the rise in domestic violence during lockdown widely reported across the UK. In this recent South Gloucestershire OPS2021 survey, 7% (171 pupils) said this occurred quite often or most days and 16% sometimes or occasionally. Of those pupils who reported abuse, 16% (84 pupils) said it was continuing – this equates to 3.6% of the population. Twice as many girls reported regular abuse as boys and those who identified as “other” were three times more likely to report regular abuse, but the numbers involved were very small. (Figure 1.05).

Figure 1.05: Victim or witness of domestic abuse by gender

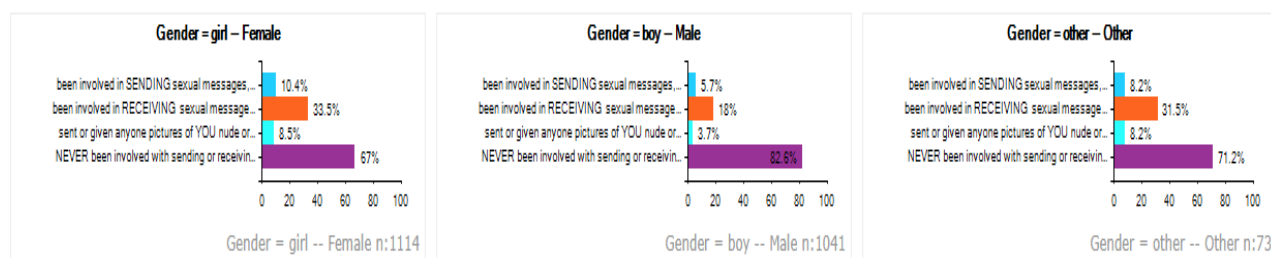


Online abuse

1.3 **Sexting** (this was not asked in primary) – 26% of pupils said they had been involved in sexting. 8% had been involved in sending sexual messages or pictures, 26% had received them, 6% had sent sexual pictures of themselves to someone else and 74% had never been involved.

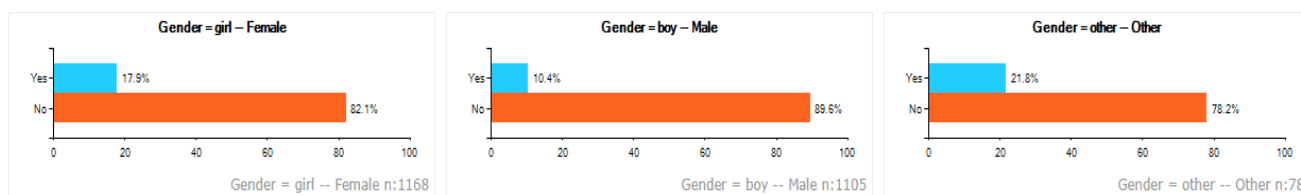
Girls were far more likely to be involved than boys and those who identified as “other” were similar to the girl’s data. (Figure 1.06).

Figure 1.06: Victim of sexting by gender



1.4 **Sextortion** (not asked in Primary) 14.5% of pupils had been blackmailed online, for example forced to send money or naked pictures. Again, girls and pupils who identified as “other” were far more likely to have experienced this. Figure 1.07 over the page.

Figure 1.07: Victim of sextortion by gender

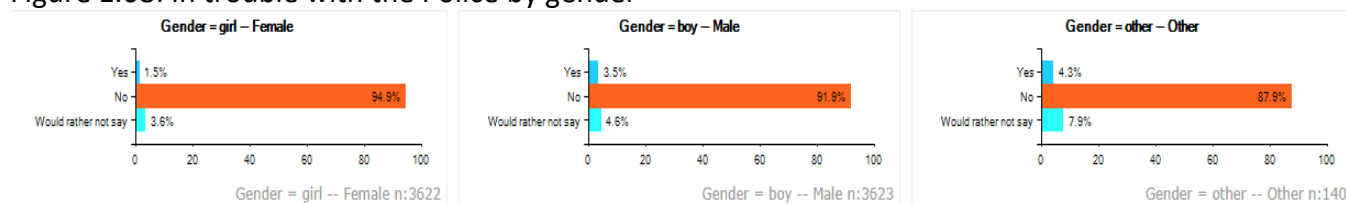


1.5 Similarly, 27% said they have posted or written something on the internet that they later regretted – 6% of these said it happened regularly (weekly or daily). This figure is slightly higher but similar to other regions where 25% said they had posted something online which they later regretted.

In trouble with the Police and Gang behaviour (not asked in Primary)

1.6 2.5% of pupils (3% of secondary/FE pupils) said they had been in serious trouble with the police, boys were twice as likely as girls to have been in trouble with the police. This has declined recent years from 3% in 2019 and 4% in 2017. (Figure 1.08).

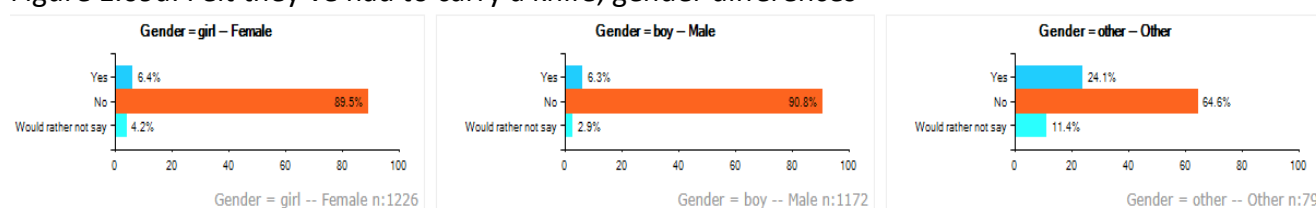
Figure 1.08: In trouble with the Police by gender



Have you ever felt you've had to carry a knife? (not asked in primary)

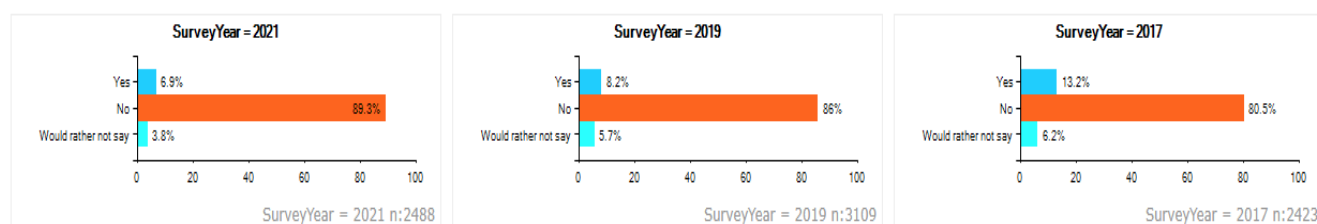
1.7 (Fig. 1.09a) 7% said they have been in a position where they have felt they've had to carry a knife. The rate was similar for boys and girls but much higher for pupils who identified as other (though total of these was only 19 pupils).

Figure 1.09a: Felt they've had to carry a knife, gender differences



This has declined in past few years from 13% in 2017 and 8% in 2019. Figure 1.09b.

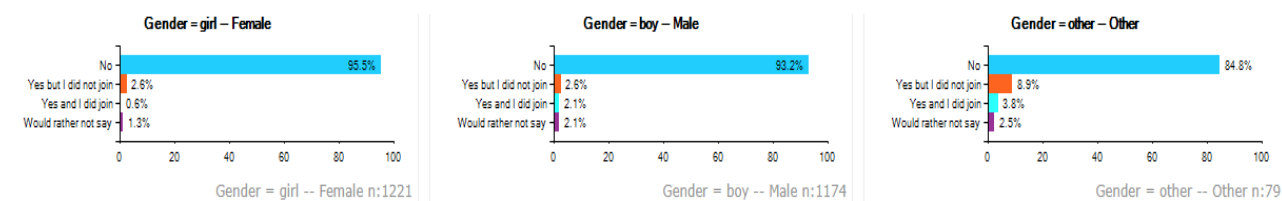
Figure 1.09b: Felt they've had to carry a knife trend data



Have you ever felt you have had to join a gang? (not asked in primary)

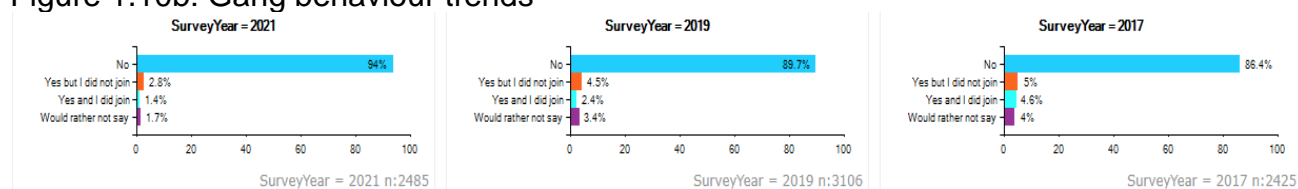
1.8 4.2% of pupils said they have been in a position where they have felt they've had to join a gang. 2.8% said they did not join and 1.4% (35 pupils) said they did join. Boys were much more likely to join than girls and higher for pupils who identified as other (though total of these was only 5 pupils). Figures 1.10 a & b.

Figure 1.10a: Gang behaviour by gender



As with police and gang behaviour this has declined over the survey years.

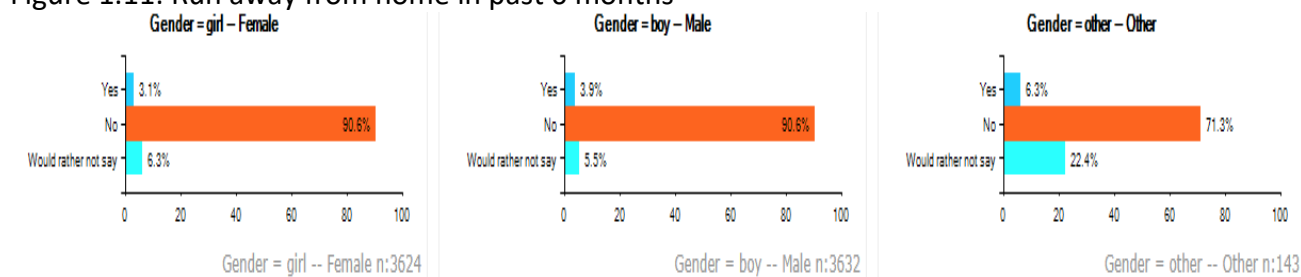
Figure 1.10b: Gang behaviour trends



Run aways

1.9. 3.6% (263) pupils reported they had run away from home or the place where they lived in the past 6 months. This level was lower than in 2019 (4.5%) and 2017 (4.7%) . Boys and girls were at a similar level and those who defined themselves as “other” were at twice the rate. (Figure 1.11)

Figure 1.11: Run away from home in past 6 months

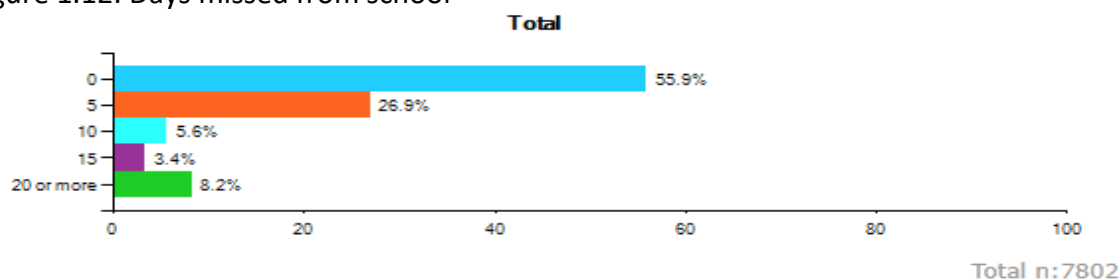


The majority, 57% of the runaways returned by themselves, 15% were found by parents or carers, 9% were returned by the police, and 8% were found by other relatives or friends.

School absence

1.10. The average pupil (all phases) missed 5 days of school in the previous term (between January and Easter 2021) and 17% missed 10 or more days. (Figure 1.12 over)

Figure 1.12: Days missed from school



39% of these were due to illness (not COVID) and 25% because of COVID (Figure 1.14). Far more pupils (13.5%) missed 15 or more days in this year's survey compared to previous years – 7.1% in 2019 and 6.1% in 2017 (Figure 1.13)

Figure 1.13: Days missed from school, trend data

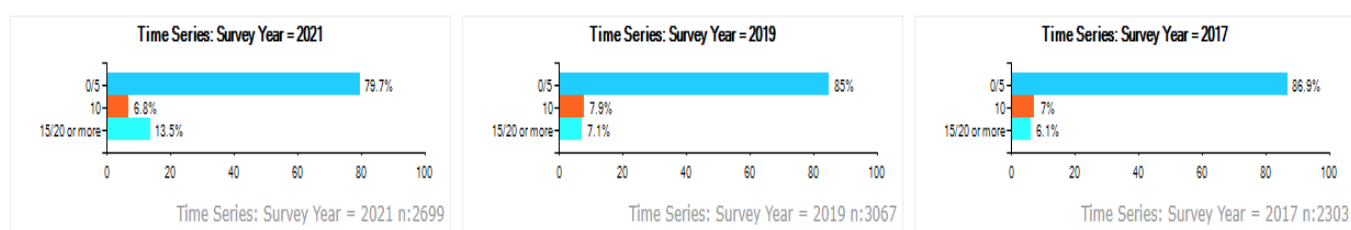
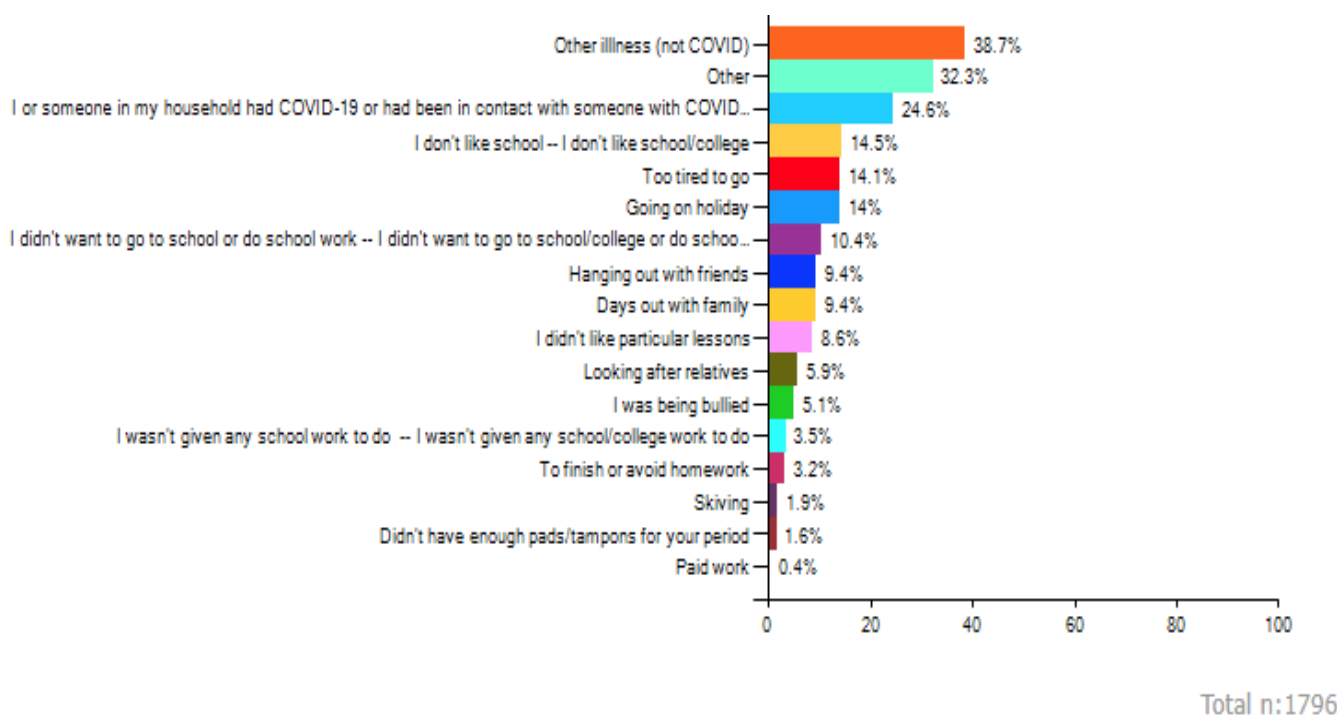


Figure 1.14: The reasons why young people missed school (more than 5 days)



Key Findings 2. Mental health and emotional wellbeing

2.1: WEMWBS – Warwick and Edinburgh Mental Wellbeing Scale Results

WEMWBS is a population measure of mental wellbeing that is widely used by public health & academics. It is a self-scoring wellbeing & psychological functioning measure. 14 positively worded questions are scored using a 1-5 Likert scale. Mean scores for individuals and groups are calculated and divided into low, medium, and high mental wellbeing levels according to the scores. WEMWBS is highly correlated with other psychological measures.

Scale	n	Correlation with WEMWBS ^a
WHO-Five Well-being Index	79	0.77**
Short Depression Happiness Scale	71	0.76**
Positive and Negative Affect Scale – Positive Subscale	63	0.73*
Positive and Negative Affect Scale – Negative Subscale	63	-0.55**
Satisfaction With Life Scale	79	0.72**
Global Life Satisfaction Scale	77	0.55**
Scale of Psychological Well-being	63	0.73**
EQ-5D Thermometer	72	0.42**
Emotional Intelligence Scale	67	0.51**

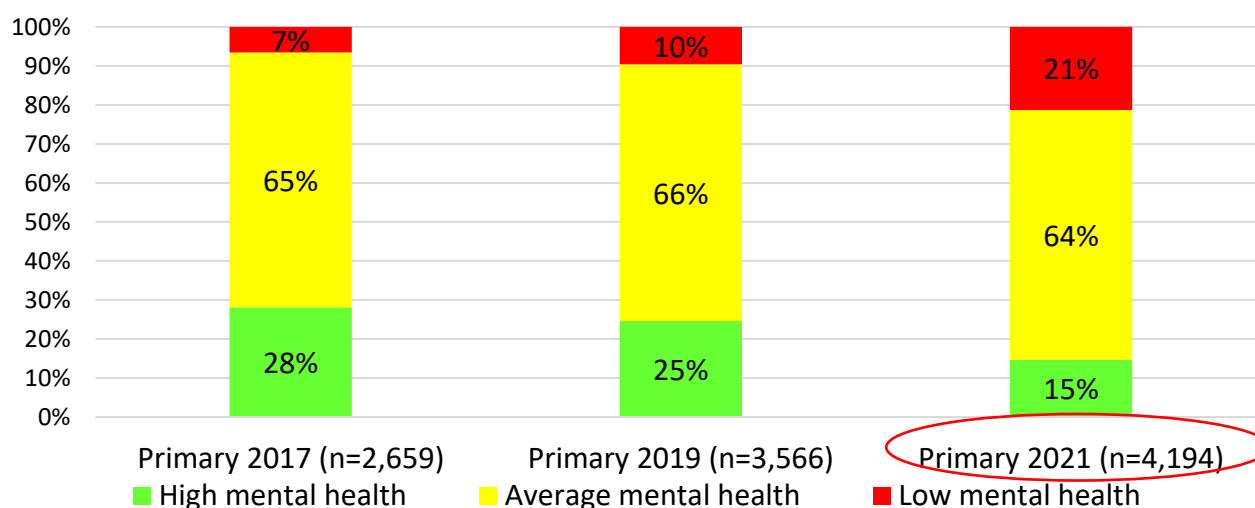
^a Pearson's correlation coefficient

* => significant at 0.05 level

** => significant at 0.01 level

We have recorded a **doubling** of self-reported poor mental health in the primary phase between 2019 (pre COVID) and 2021 (post the first wave of COVID) – Figure 2.11. This is very similar to our observations in other Counties in the South & Northeast of England in the summer of 2021¹ where an average of 22% were recorded as having low mental wellbeing and fewer (12%) with high.

Figure 2.11: WEMWBS overall scores in the Primary phase over time

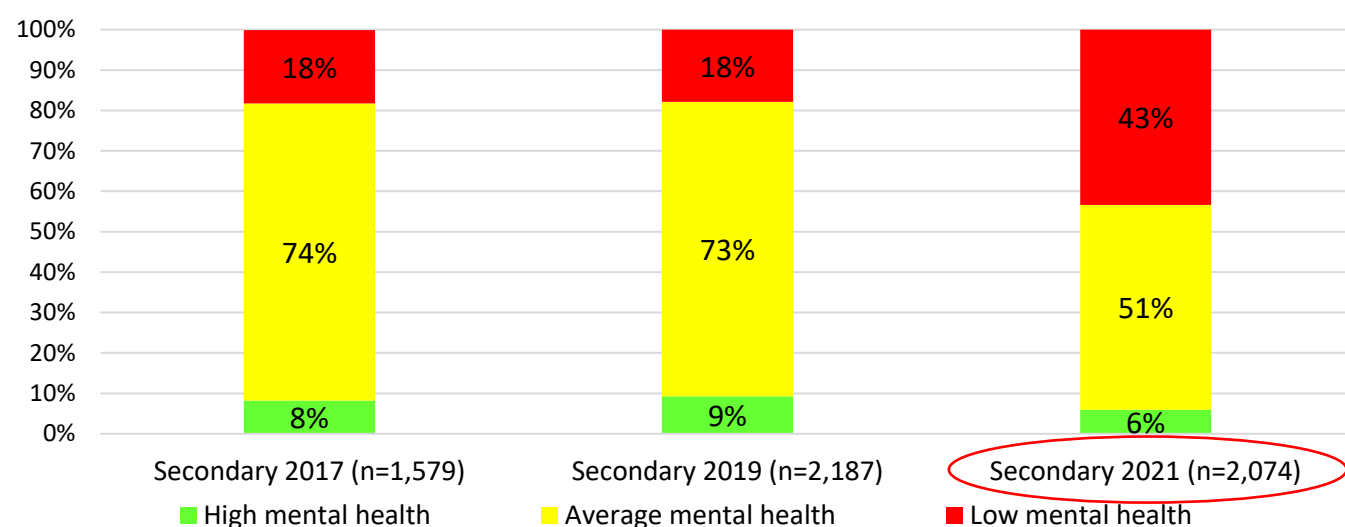


In the secondary phase we recorded an even more extreme deterioration with nearly two and a half times increase of self-reported poor mental health between 2019 (pre COVID) and 2021

¹ OxWell 2021, <https://www.psych.ox.ac.uk/research/schoolmentalhealth>

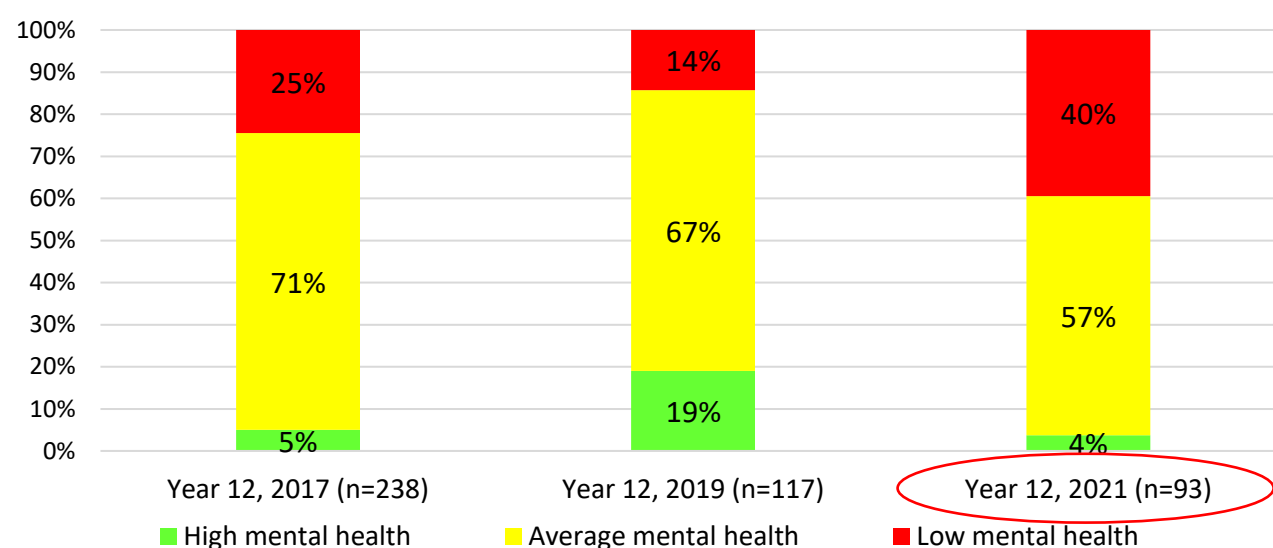
(post the first wave of COVID). (Figure 2.12). This decline was similar to other Counties in the OxWell 2021 study) but with a lower overall average (OxWell had 38% low mental wellbeing and 7,5% high mental wellbeing for the same secondary phase age range).

Figure 2.12: WEMWBS overall scores in the Secondary phase over time



In Year 12 we recorded and even more extreme responses (Figure 2.13) with over three times increase of poor mental health self –between 2019 (pre COVID) and 2021 (post the first wave of COVID). These results were better than the OxWell survey (which recorded 50% low mental wellbeing and 3.8% high) but the sample of South Gloucestershire was relatively low (n=93).

Figure 2.13: WEMWBS overall scores in Year 12 (FE/6th form phase) over time



2.2: Positive Mental health and Emotional Wellbeing - Resilience

Feeling genuinely happy, confident about the future and proud of achievements decrease with age and follows a similar decreasing trend over year groups for each OPS year. However, the 2021 data saw a marked decrease in happiness and proud of achievements for all OPS years. (Figure 2.21).

Overall, 65% of children and young people said they were **happy** or quite happy most of the time in 2021 and 17% reported they were unhappy. This was only asked in the primary phase in the OxWell survey in other regions where 70% of primary pupils recorded being happy and 11% unhappy, which is, lower but very similar to South Gloucestershire primary results (73% happy and 12% unhappy).

Figure 2.21: Resilience indicators by age, happiness

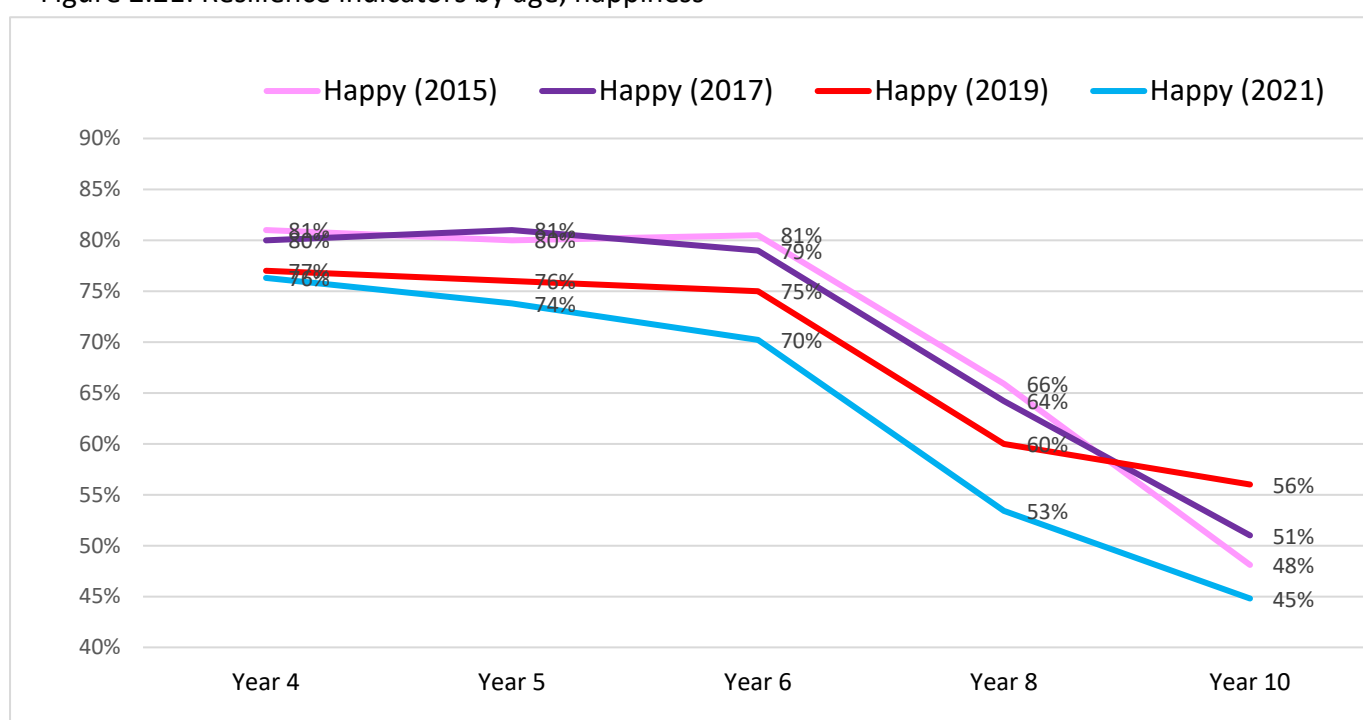
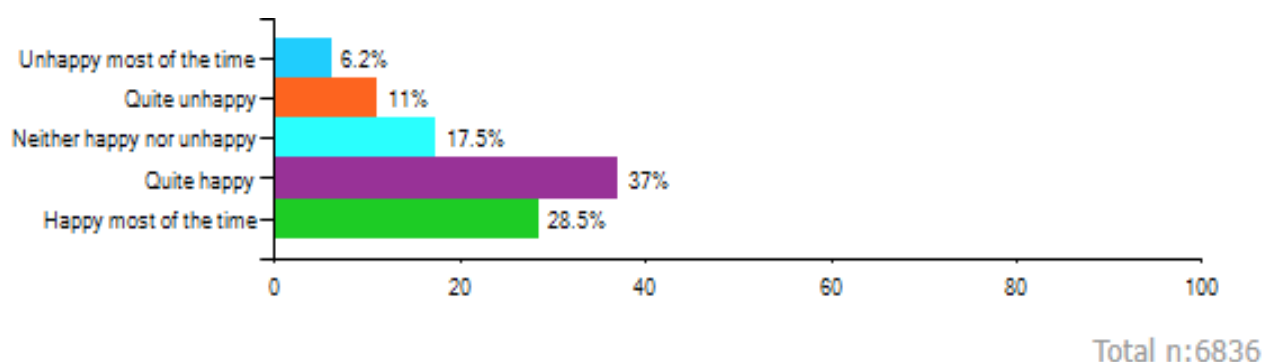
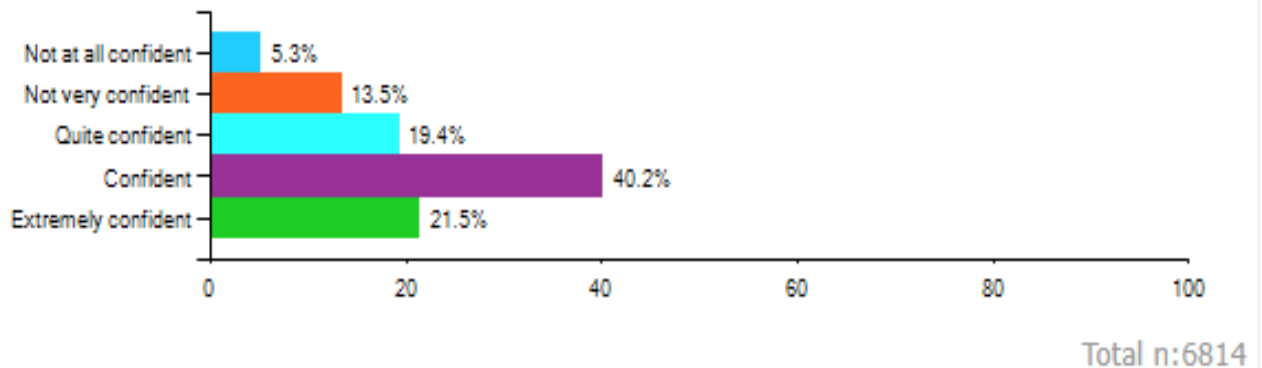


Figure 2.22: Happiness ratings for all pupils in 2021



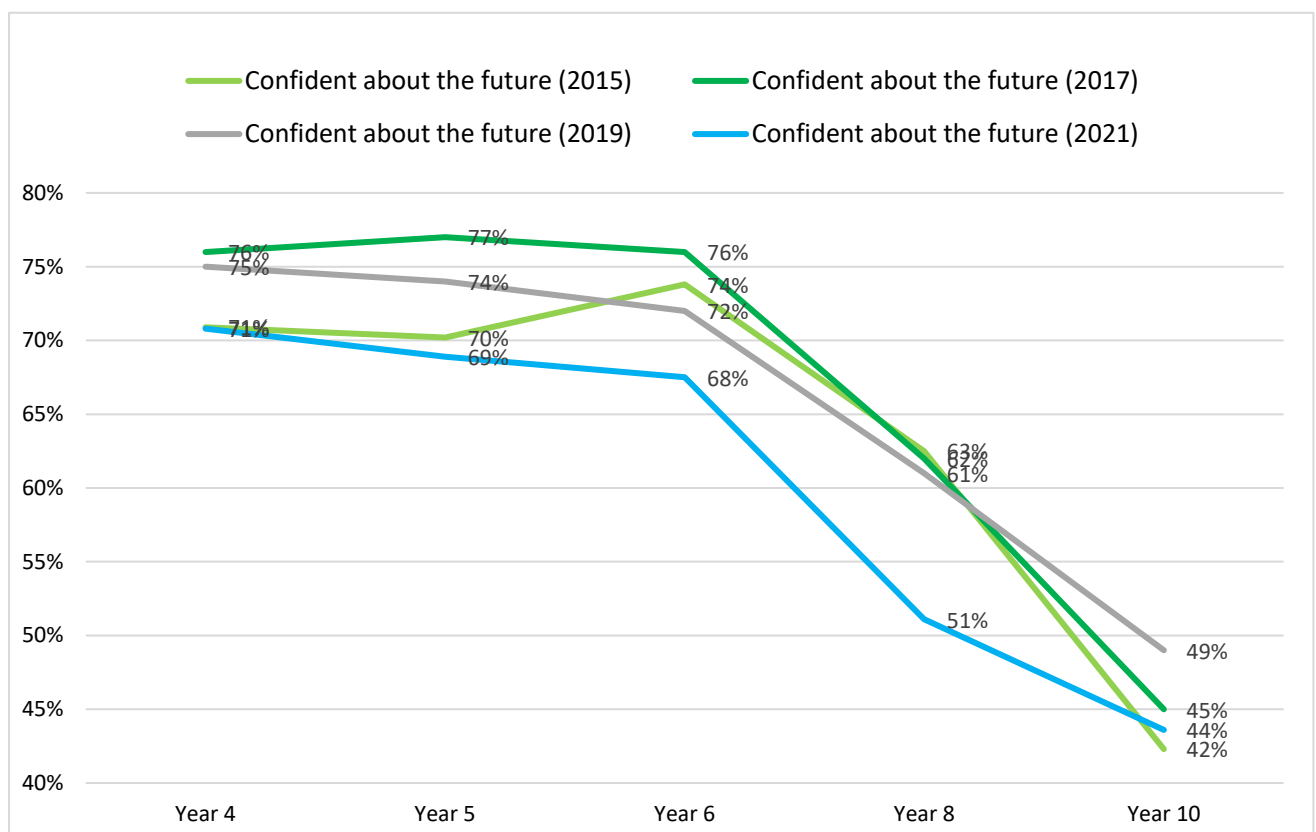
Overall, 62% of pupils were **confident (or quite confident) for the future** in 2021 and 19% were not very confident. This is a better result than other regions where 51% felt confident overall (Figure 2.23).

Figure 2.23: Confident about the future (OPS2021) – all year groups



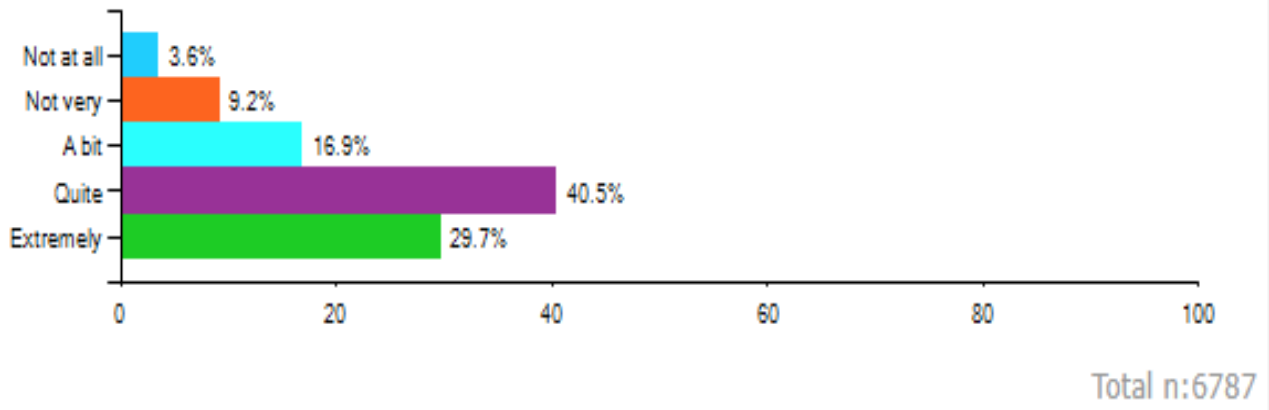
The trend of confidence about their future falling as year groups increased, followed a similar pattern to previous years, and with exception of Year 10 who were lower than previous years (Figure 2.24). Less than half (47%) of secondary pupils recorded they were confident about the future – this is almost identical to the OxWell finding of 46% in other Counties in the secondary phase.

Figure 2.24 Resilience indicators by age, confidence about their future



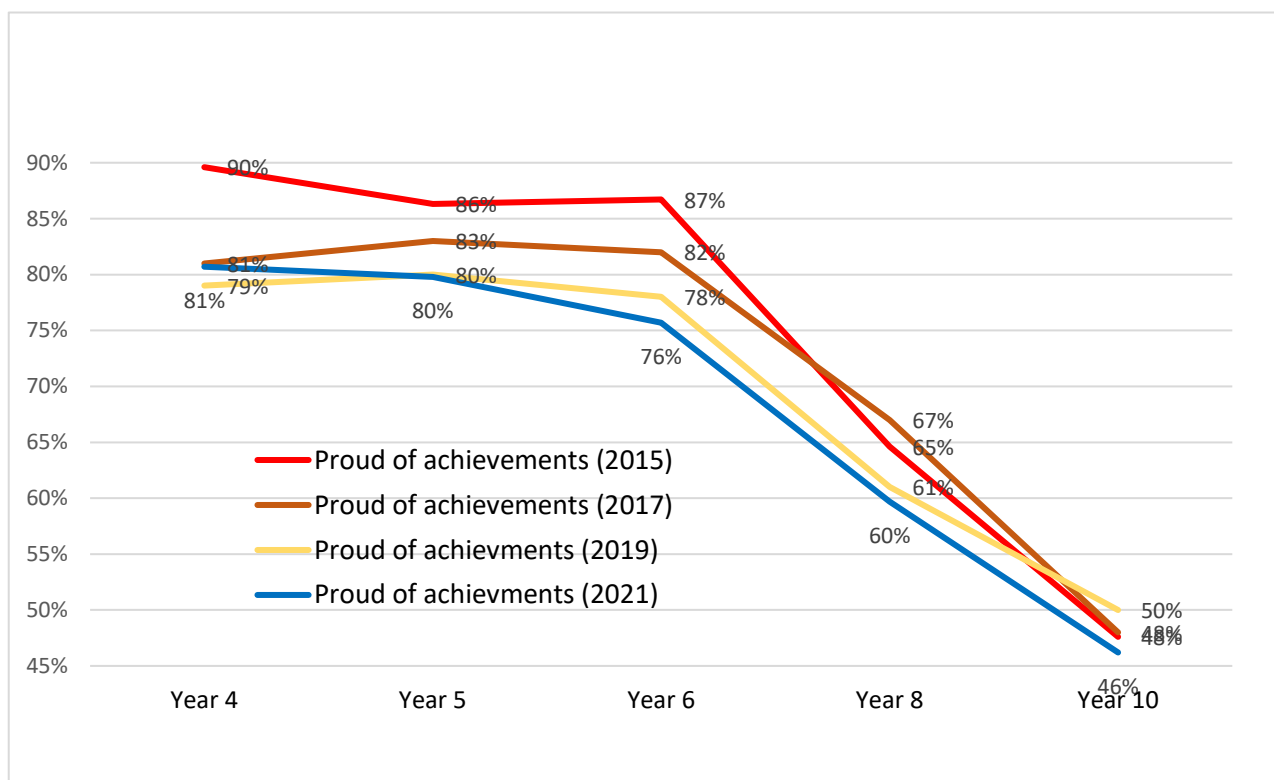
Overall, 70% of pupils were extremely or quite **proud of their achievements** in 2021 and 13% were not very proud. This again is a better result overall than other regions where in the OxWell survey 61% of pupils felt proud of their achievements overall.

Figure 2.25: Proud of achievements (OPS 2021) all year groups



The trend of a decline over year groups followed a similar pattern to previous years but all year groups over year 5 were less likely to be proud of their achievements than in previous years (Figure 2.26).

Figure 2.26: Resilience indicators by age, proud of achievements

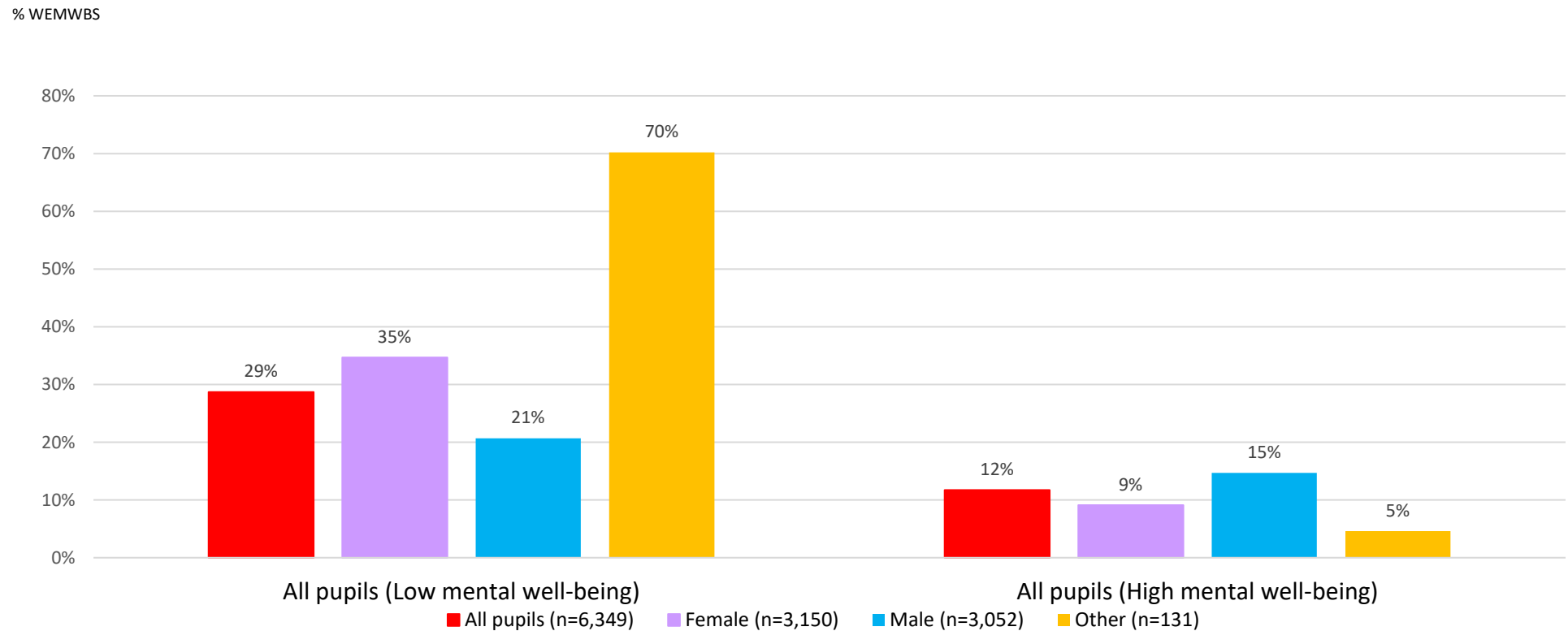


Overall, 70% of pupils said they were proud of what they have achieved in their life – very similar to the previous couple of surveys (since 2017). However, the averages are again, lower for each age group as has been the trend over the past few years.

Mental Wellbeing

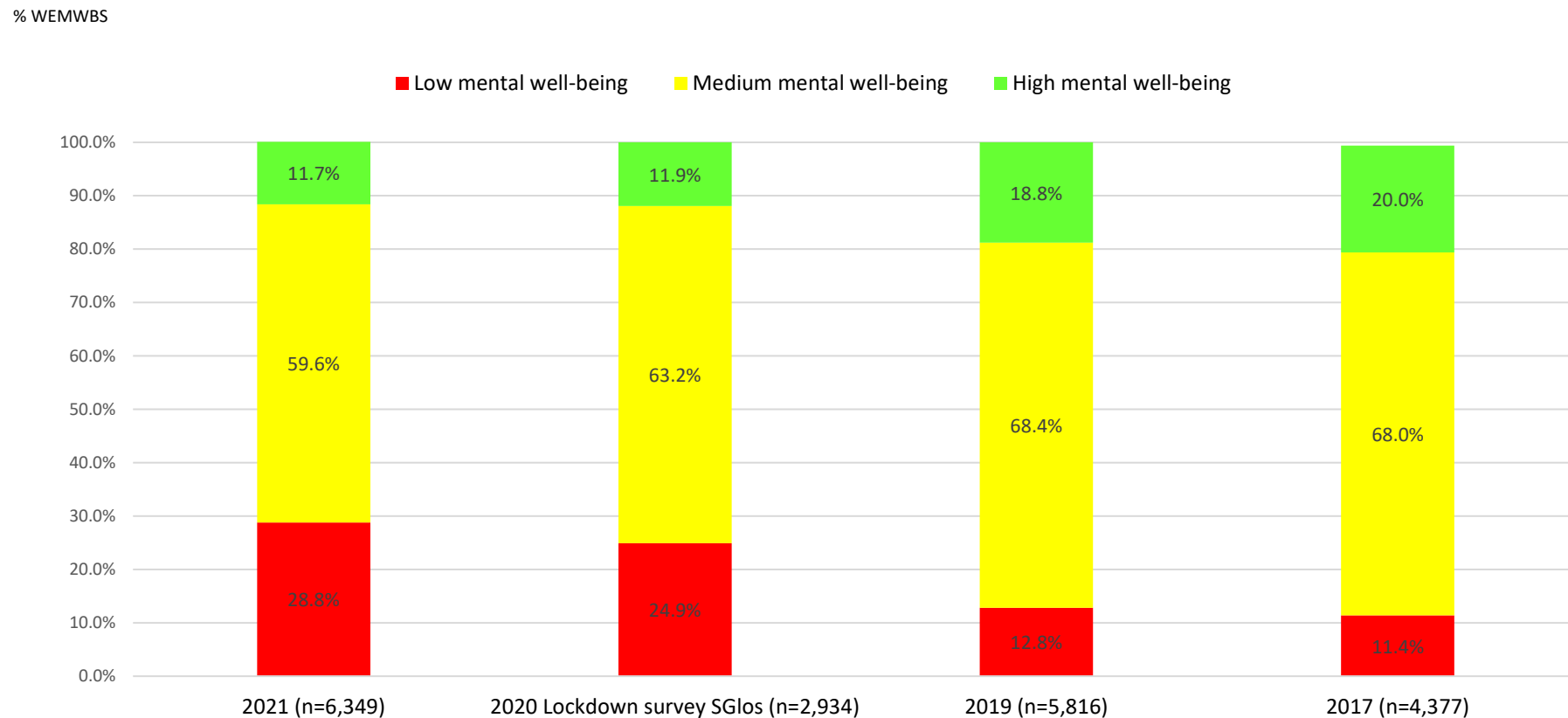
Overall, 12% of pupils were judged to have a high mental wellbeing score and 29% a low score (Figure 2.27). This better than the average we found in other regions through the OxWell surveys where overall 34% of pupils had a low score and only 9% a high wellbeing score.

Figure 2.27: Differences in mental Wellbeing (WEMWBS) between gender groups



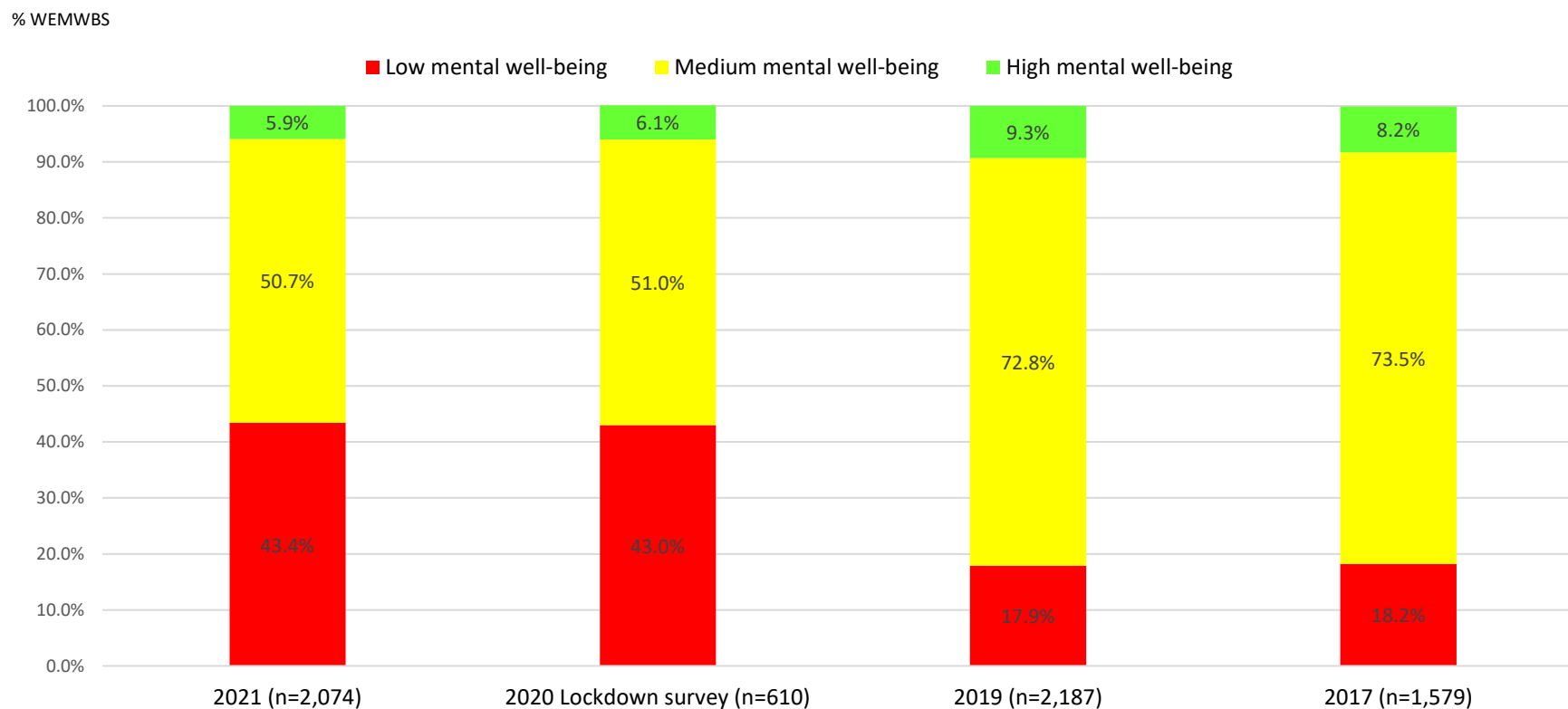
Overall girls reported lower mental wellbeing than boys and “other” who do not identify as male, or female were double the female rate with 70% reported low mental wellbeing. However, this was based on a relatively small sample (n= 131).

Figure 2.28a: Differences in mental Wellbeing (WEMWBS) over time (trend data) – all pupils



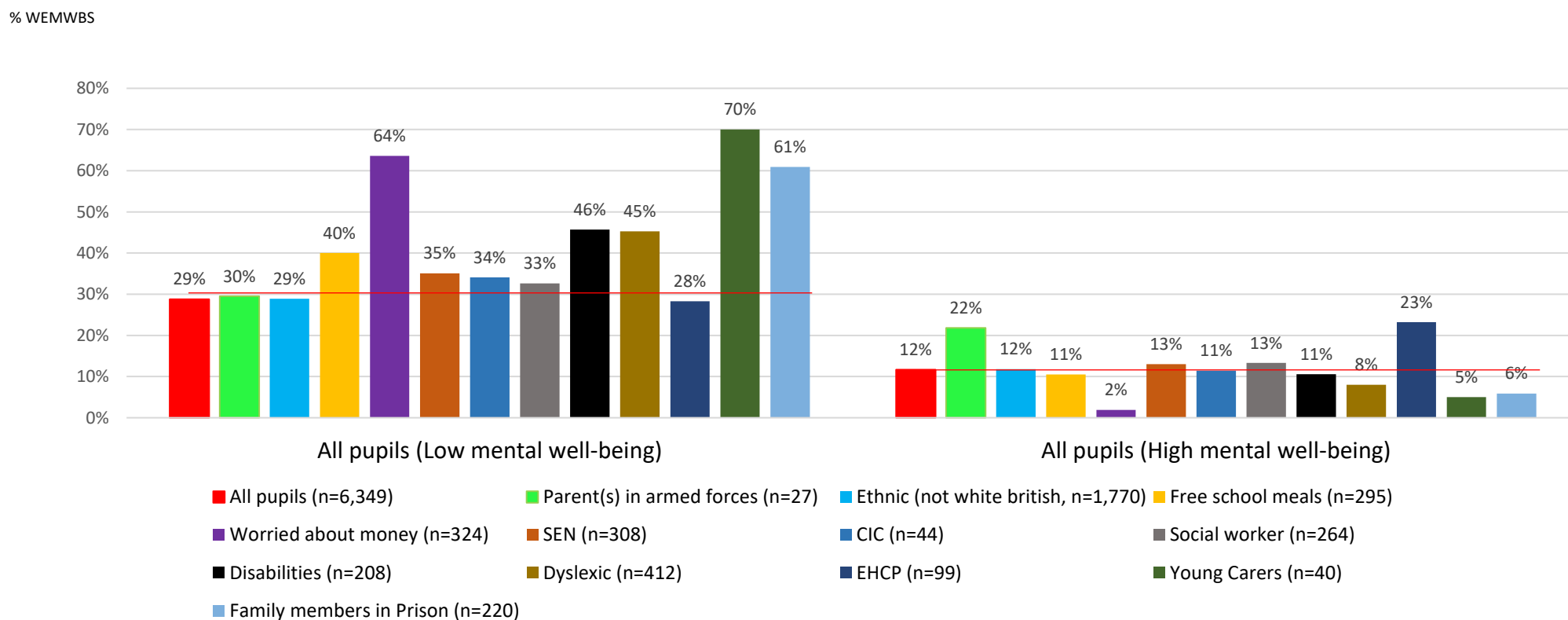
The pandemic and lockdowns periods seem to have had a significant detrimental effect on mental wellbeing shown by the significant increase in primary pupils with low mental wellbeing which more than doubled in 2021 and has increased from the similar 2020 lockdown survey. This dramatic increase was observed in other regions but the South Gloucestershire 29% level of low mental wellbeing in secondary phase pupils is higher than the overall 22% average in the OxWell2021 survey (Figure 2.28a above).

Figure 2.28b: Differences in mental Wellbeing (WEMWBS) over time (trend data) – secondary pupils



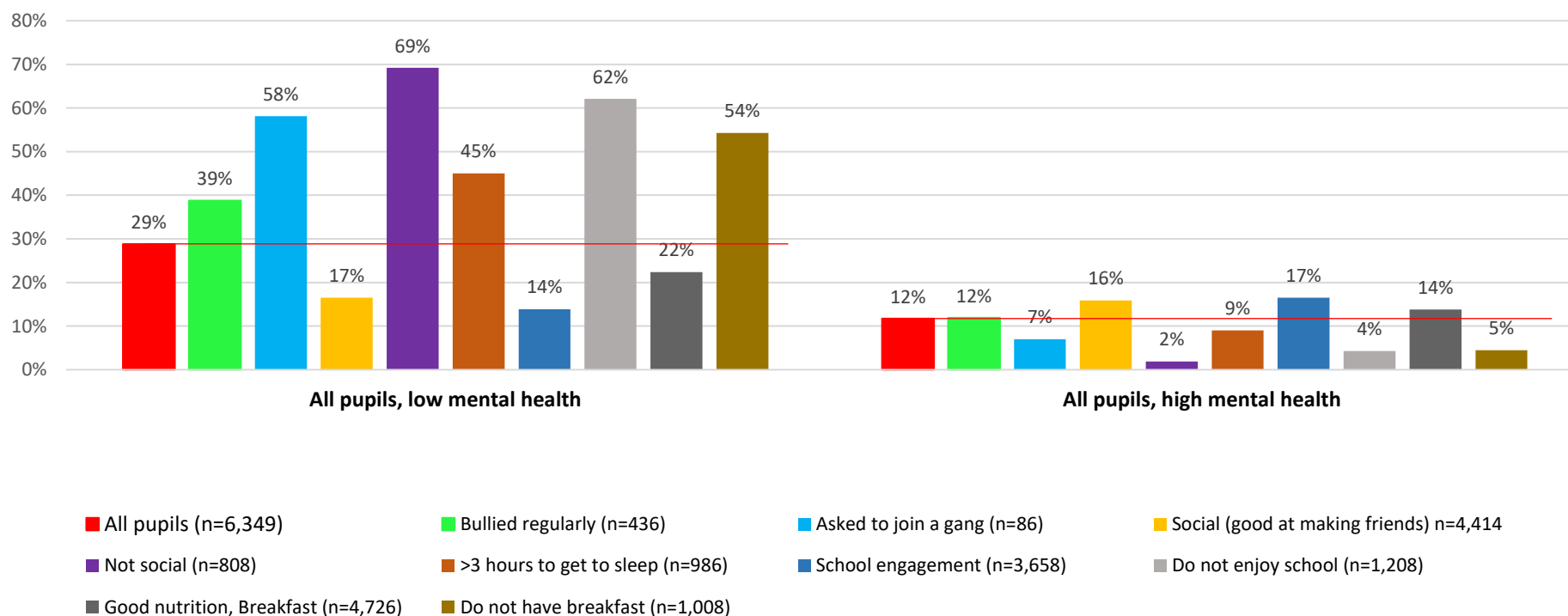
Secondary pupils saw an even bigger rise in the proportion of pupils with low mental health, over 43%. This has risen from 18% pre-pandemic. The pandemic and lockdowns periods seem to have had a significant detrimental effect on mental wellbeing shown by the significant increase in pupils with low mental wellbeing which more than doubled in 2021 and has increased from the similar 2020 lockdown survey. This dramatic increase was observed in other areas and the South Gloucestershire 43% level of low mental wellbeing in secondary phase pupils is higher than 38% average in the OxWell2021 survey (Figure 2.28b above).

Figure 2.29: Differences in mental Wellbeing (WEMWBS) between demographic groups



Overall, children and young people who are young carers, those living in poverty (worried there is enough money in the household to buy food) and those with family members in prison have the lowest ratings for mental wellbeing compared to all pupils and other groups. Those with disabilities and dyslexic pupils also had particularly low scores. However, pupils with EHCP (education, health & care plans) and those with parents in the armed forces had relatively high scores. However, these two groups had relatively low numbers of responses and the results should be treated with caution. Figure 2.29 above.

Figure 2.30: Differences in good mental health between behavioural groups
% WEMWBS

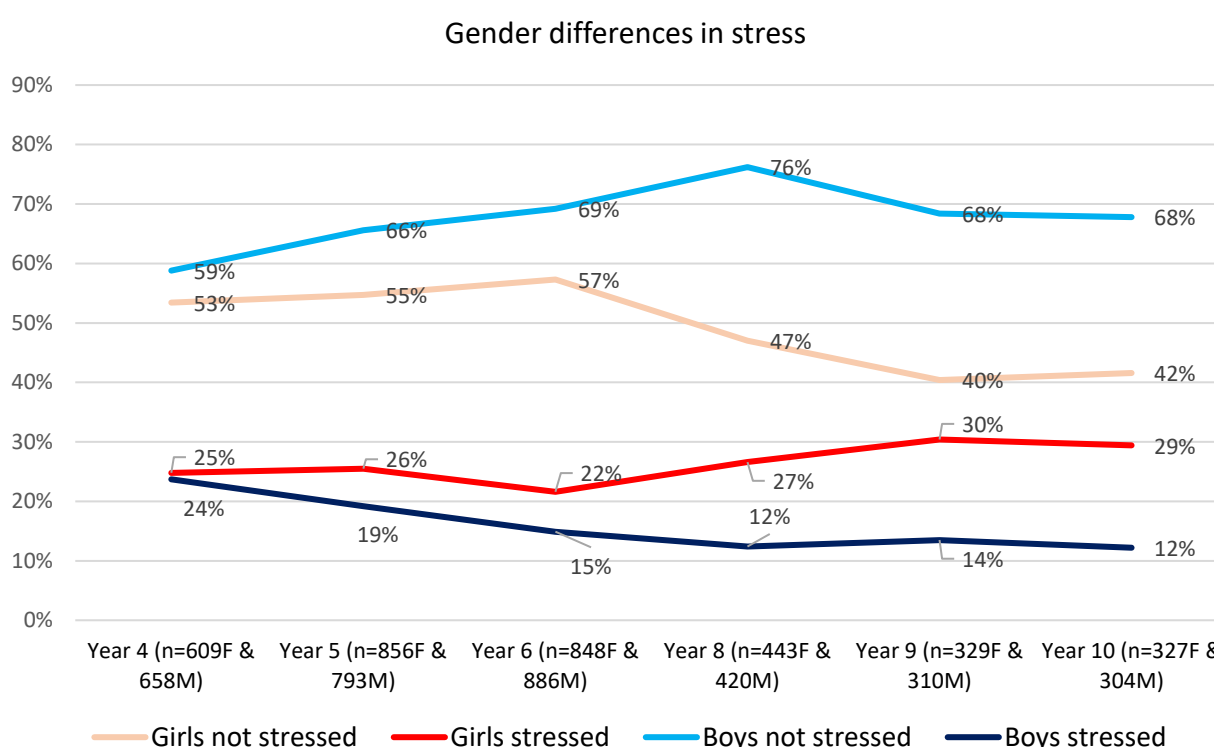


Pupils who felt they were not good at making and keeping friends (socially isolated), those not engaged in school and those who have felt pressurised to join a gang had more than twice the incidence of poor mental wellbeing and extremely low good mental wellbeing. Those pupils who rated themselves as sociable (good at making and keeping friends) and those who reported they enjoy school had better levels of mental wellbeing than average. Those who reported they had breakfast every morning also had better mental wellbeing - however these also tended to have a higher proportion of primary pupils. Figure 2.30 above.

2.3: Negative Mental health and Emotional Wellbeing- Stress

One of our key **stress** indicators in the OPS is the question “How often are you so worried about something; you cannot sleep at night?” This is significantly correlated to poor MHEWB indicators across all age groups. We found that 22% both primary and of secondary/Year12 are often so worried about something that they cannot sleep at night and girls are more stressed than boys, (26% compared to 17%) with the gap increasing with age. (Figure 2.31).

Figure 2.31: Stress gender differences; how often are you so worried about something you cannot sleep at night

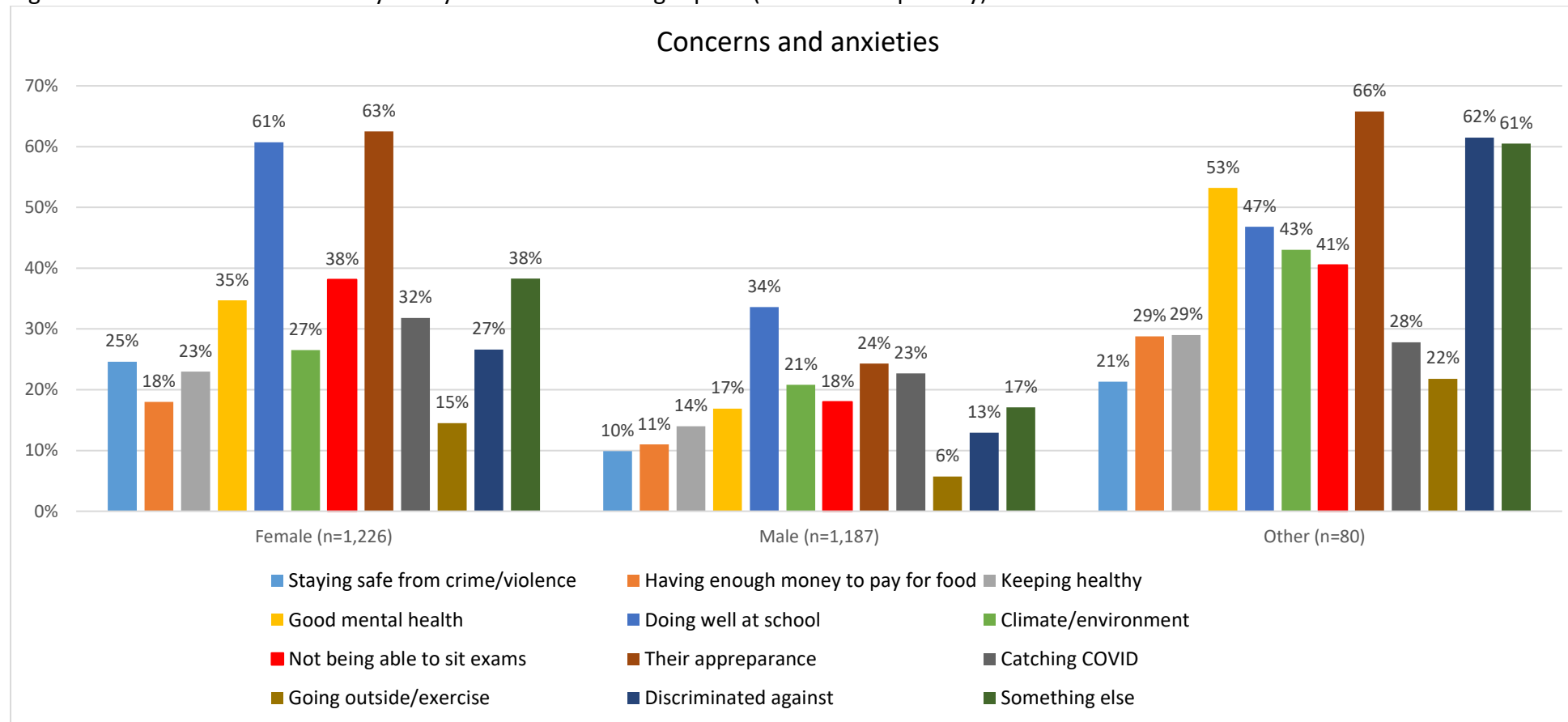


There were too few responses to do an age profile for stress differences for pupils who did not identify as either male or female (other), but overall, 50% were frequently stressed compared to 26% of the girls and 17% of the boys. 33% of others were not often stressed compared to 51% of the girls and 67% of the boys.

The most stressed (in that they were not able to sleep at night because they were worried about something) age groups reported were year 4 for boys, (24%) and Year 9 girls (30%).

In other year groups this was less frequent overall, there was a clear delineation between girls and boys with girls consistently waking more often due to worry than boys with this peaking in Year 9.

Figure 2.32: To what extent do they worry about the following topics? (Not asked in primary)



Girls were worried or very worried about every topic mentioned. In particular young people were worried about their appearance (these were all years 8 – 12) and doing well at school. Pupils who did not identify as male or female were also worried about discrimination. (Figure 2.32 above).

Over 60% of secondary & Year 12 pupils reported they felt stressed by schoolwork (Figure 2.33). This is a slight increase from 2019 and 2017 (58%). This increases as pupils get older through secondary phase, particularly in girls. This is a bit higher than the average for other regions in the OxWell2021 survey (56%). Figure 2.33 and Figures 2.34 and 2.35 showing gender differences.

Figure 2.33: Secondary pupils stressed by schoolwork

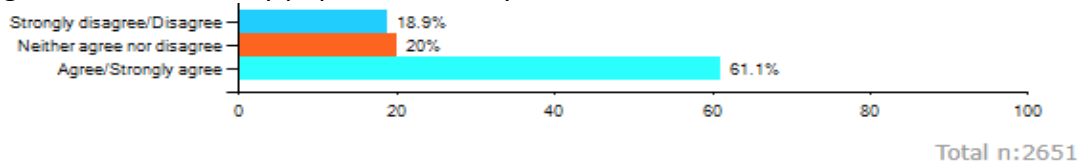
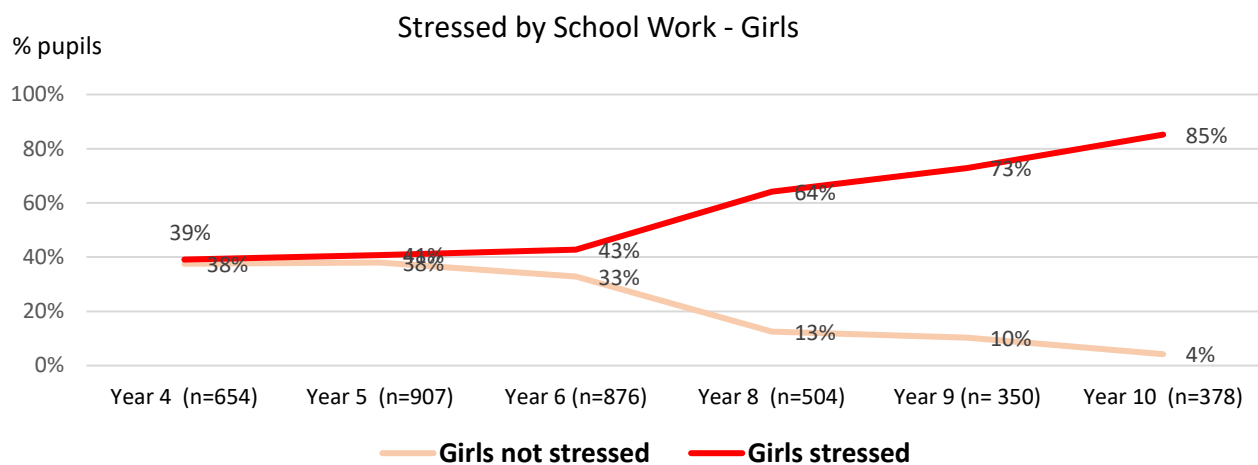
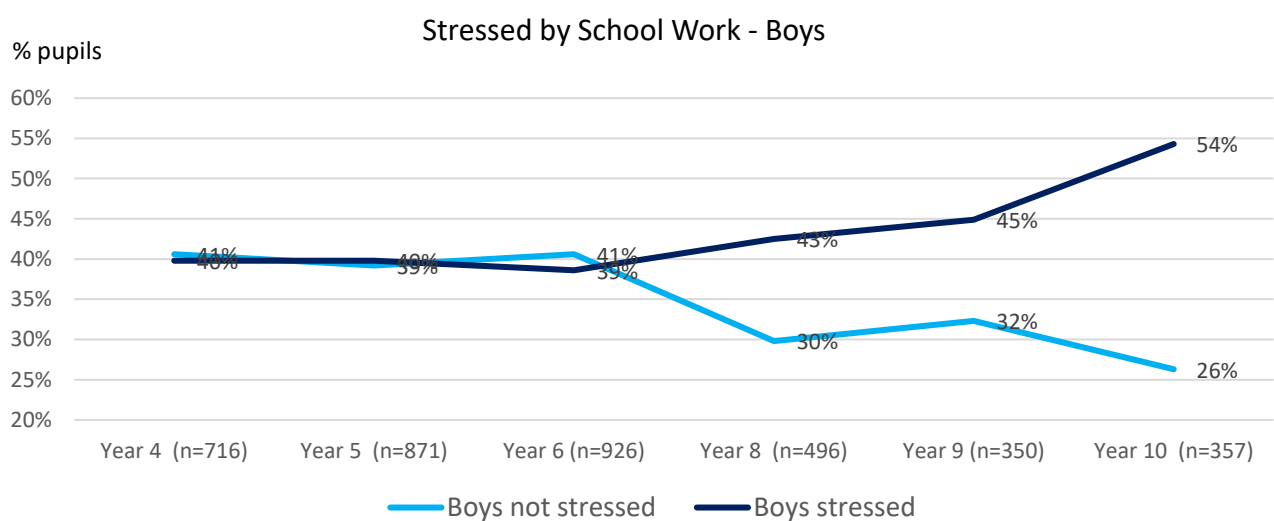


Figure 2.34: Stress; age & gender differences – Girls stressed by schoolwork



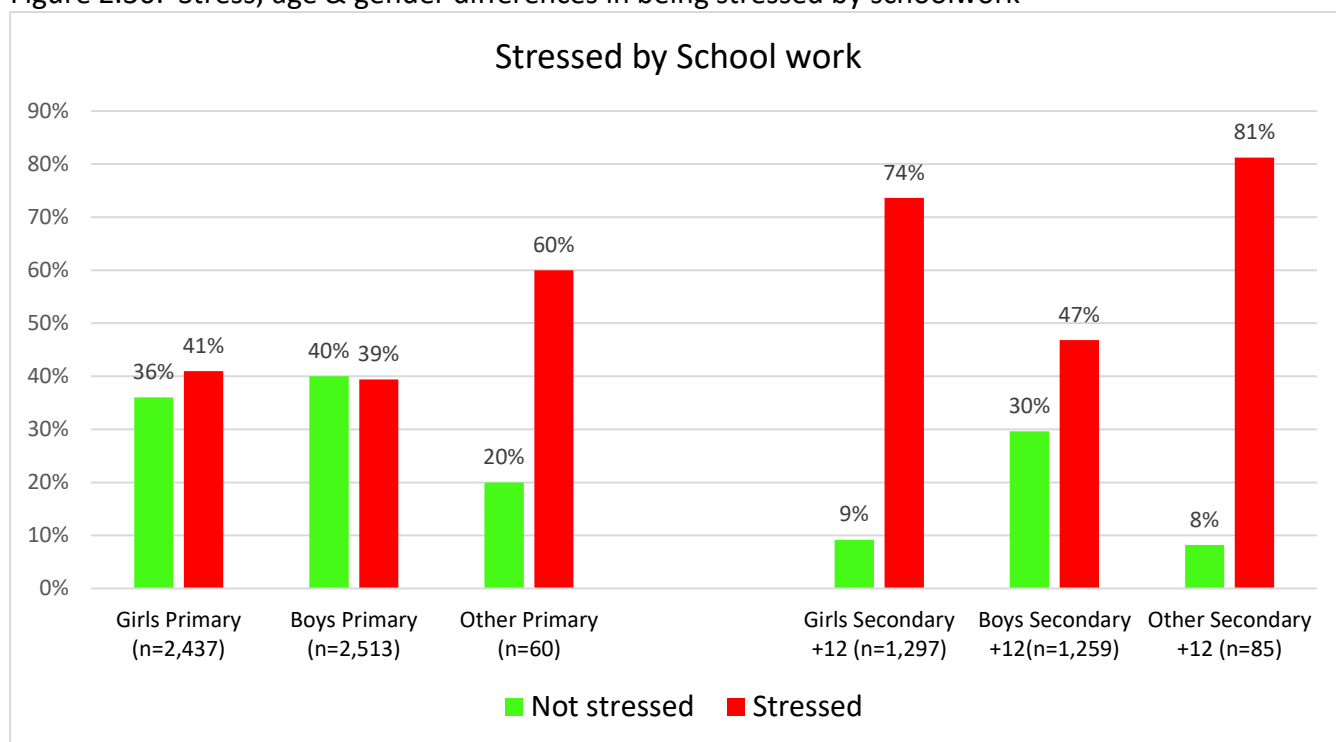
*Year 11 & Year 12 had too small samples to compare (<50)

Figure 2.35: Stress; age & gender differences – Boys stressed by schoolwork



Pupils who identify as other were even more extreme than girls.

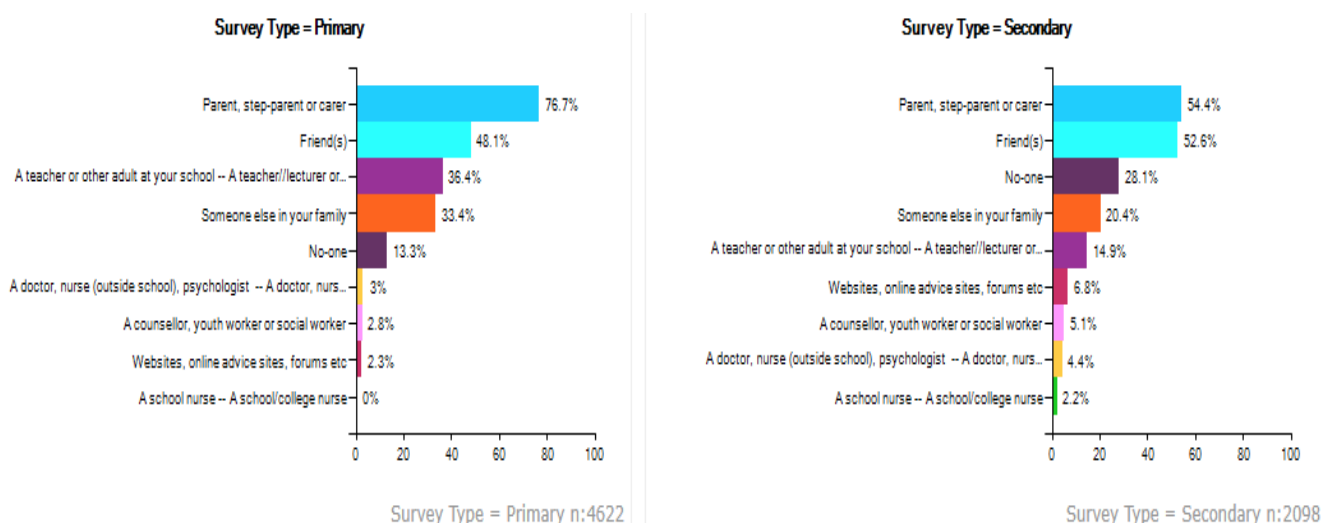
Figure 2.36: Stress; age & gender differences in being stressed by schoolwork



Secondary and Year 12/FE were asked if they felt they needed to know more about stress management and over a third, 31% reported that they would although this is a decrease from 38% in 2019. This was still one of the most popular requests in the range of options offered.

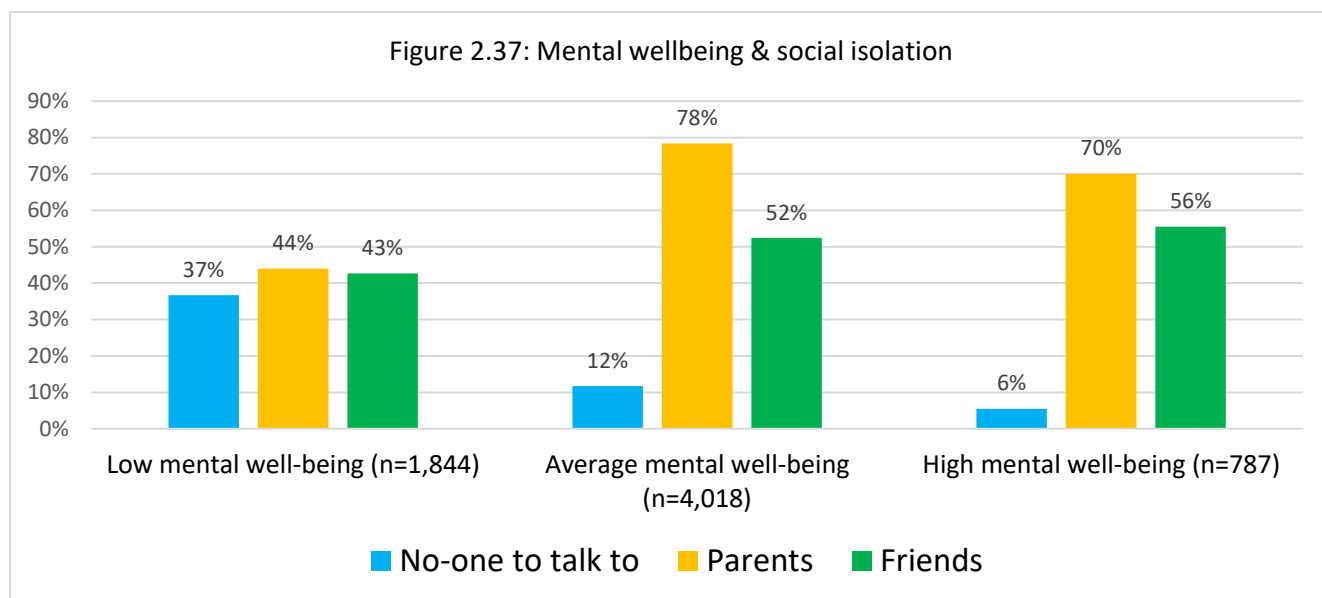
Families and relations were the main people that the majority (70%) of our pupils would go to when they felt unhappy or worried. (Figure 2.37).

Figure 2.37: Who do pupils go to when they are unhappy or worried?

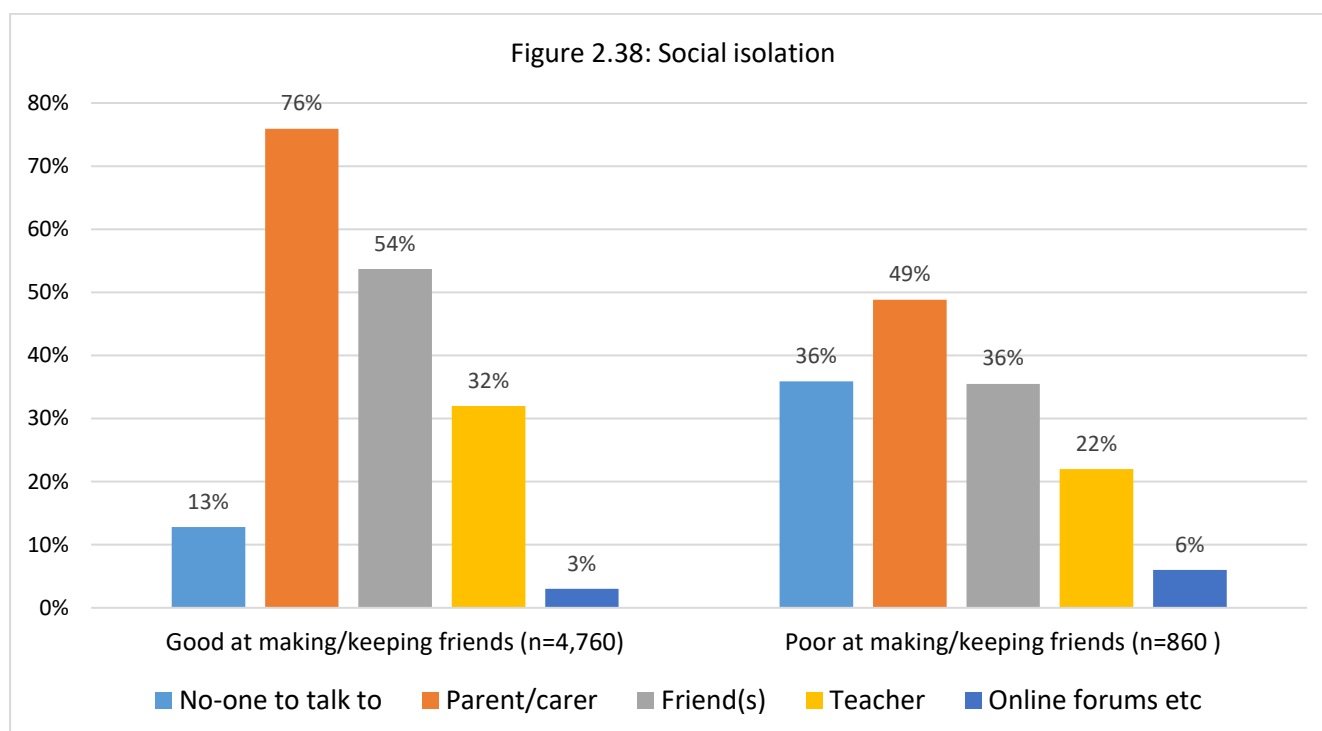


13% of primary and 28% of secondary said they had no-one to talk to, this is an increase from 2019 (when it was 12% and 22% respectively).

Over a third of all pupils who reported they had no one to talk to also had low scores on the mental wellbeing WEMWBS scale. Three quarters of those who reported being able to go to parents or friends when they were unhappy or worried also scored average or high on the mental wellbeing WEMWBS scale. (Figure 2.37)



Pupils who feel they have no one to talk to are also likely to be far more socially isolated and feel they are poor at making/keeping friends. (Figure 2.38)

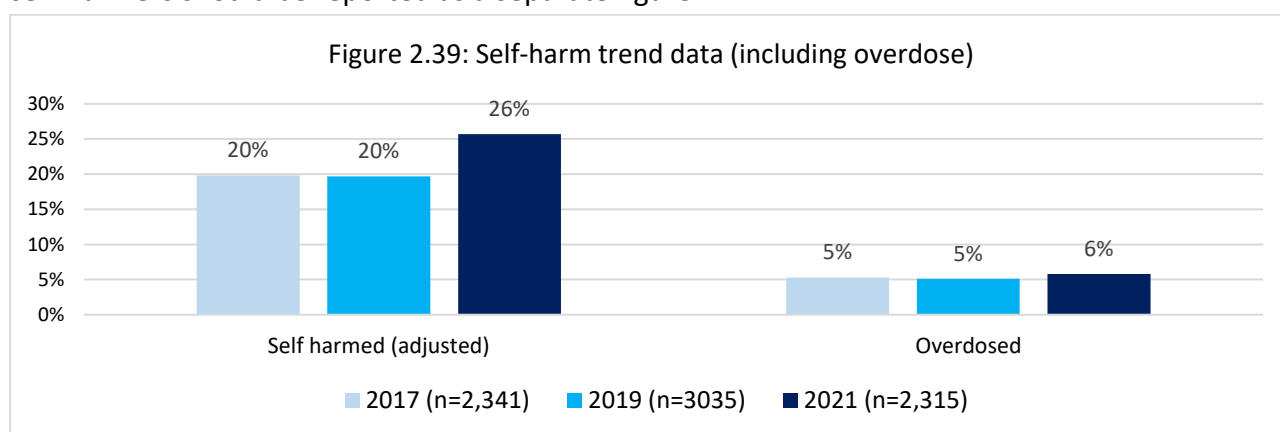


2.4 Self-harm (not primary)

Self-harm is a recognised key indicator of poor mental health and wellbeing. Only secondary and year 12/FE pupils were asked about self-harm in this survey. 26% (595)² of pupils said they had self-harmed in 2021 – this is a big increase from the 20% in 2019. Self-harm was defined this year as “for example by taking an overdose or deliberately injuring yourself in some way”, in 2019 the question was, “Have you ever self-harmed or deliberately taken an overdose?”. 21% (486) pupils said they had never taken an overdose – so just self-harmed in 2021 and this figure was 16% in 2019. (Figure 2.39)

Pupils who reported self-harming were then asked a series of questions about their self-harm, the first of which was how often they had self-harmed. 32% of young people who self-harmed (8.5% of all pupils) said they had self-harmed once or twice. Research suggests these tend to be young people who have self-harmed as part of a game or challenge or a dare and most did not go onto serious self-harm or have related mental issues. This group of young people are termed as “experimental” self-harmers and are not included in the analysis of habitual self-harmers. Foster & Brown Research work with Professor Keith Hawton³ (Oxford University) and his team (central government advisors in this field) and he supports this approach.

2.91: Of those who said that they either self-harmed or had deliberately taken an overdose, 28% (7.4% of total population) said they self-harmed occasionally (monthly). The number of **habitual, regular self-harmers** (weekly or more) that we are particularly concerned with in this study was 34% (202) or 8.9% of all respondents. This gives us a total of 16% compared to 10% in 2019 who are self-harming. It is very important that this 16% or the 9% figure is quoted when reporting self-harm and not the initial 28% which could be misleading and experimental self-harmers should be reported as a separate figure.

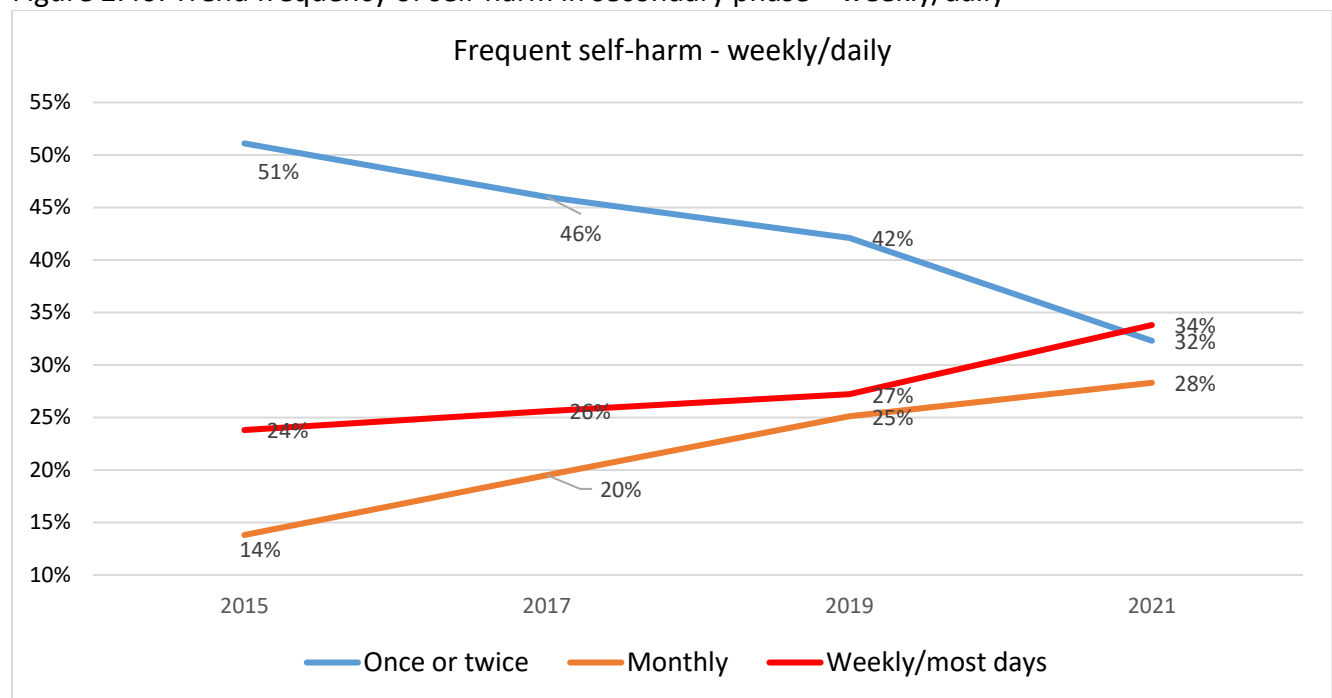


² Self-harm figures are calculated using Q5_56 – have you self-harmed and deleting the respondents who responded Never to frequency of self-harm. 629 – 34 = 595

³ Professor Keith Hawton is considered a world expert in this field and has written numerous papers and books, for example K.Hawton & K Rodham, *By their own hand. Deliberate Self-harm and Suicidal ideas in Adolescents*. Jessica Kingsley Publishers. 2008. A joint paper has been published in the Lancet based, in part, on OPS data.

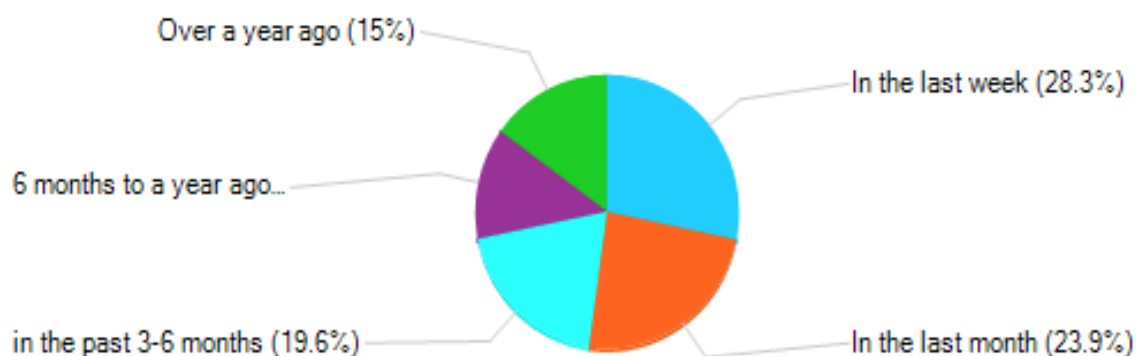
As well as the overall incidence of self-harm increasing, the frequency of self-harm has also increased with the incidence of habitual self-harm increasing to over a third of reported incidents in 2021 while experimental self-harm decreased (Figure 2.40).

Figure 2.40: Trend frequency of self-harm in secondary phase – weekly/daily



Over half (52%) reported they had self-harmed within the last month and 28% within the past week (figure 2.41).

Figure 2.41: Self-harm frequency



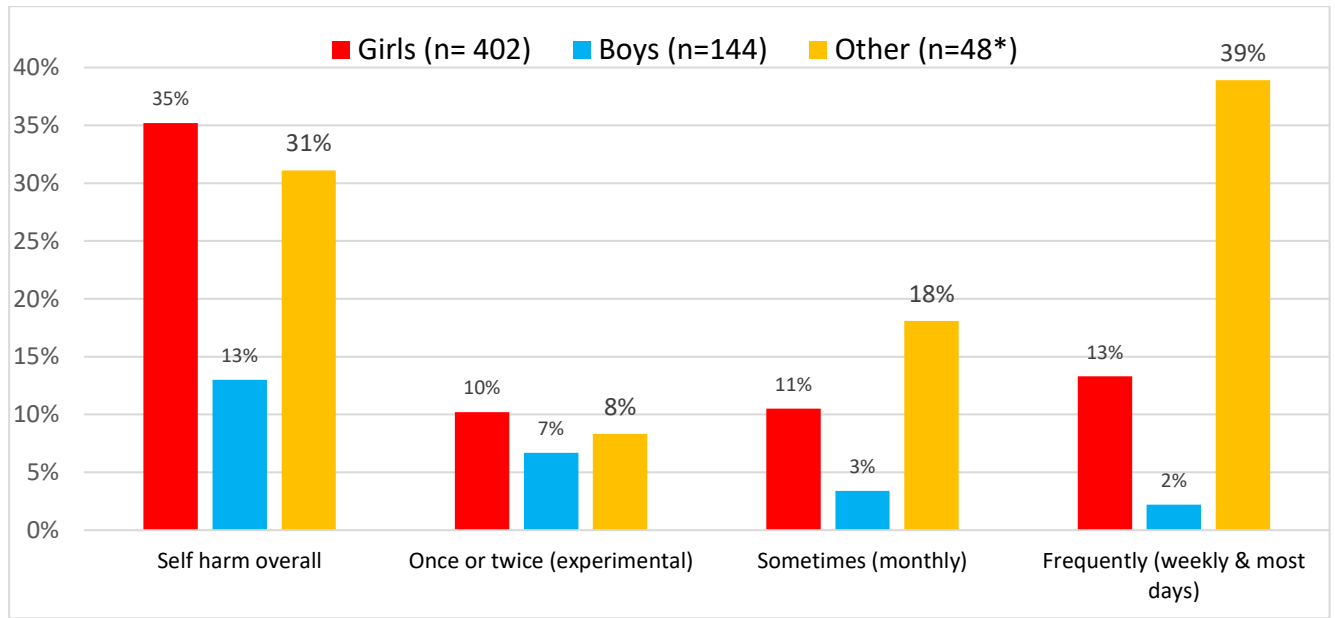
Total n:545

The incidence of regular self-harm is between 2 -3 times more prevalent in girls (35% than in boys (13%), with girls accounting for 68% of all self-harm in this study. Those boys who had self-harmed were more likely to have experimented (7% of all boys) than girls, and girls (13% of all

girls) were more likely to have been chronic self-harmers than boys (2%). This corresponds to the decline in MHEWB in adolescent girls compared to boys. (Figure 2.42)

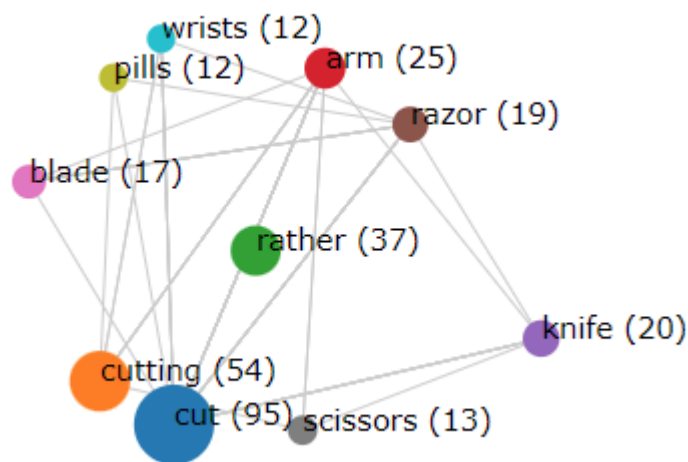
Pupils who identified as “other” followed a similar pattern, if more extreme, to the girls though the sample number was very low (n=48) and therefore it is difficult to draw any clear conclusions.

Figure 2.42: Frequency of self-harm for the population as a whole - gender differences (note Other comparatively, very low numbers n=48)



The main method of self-harm for both genders was cutting.

Figure 2.43: Methods of self-harm – Word frequency chart, top 10 words



- 26% of young people said they had self-harmed in our study, but a third of these (8.5% of the population) were experimental self-harmers (tried once or twice)

- 9% of young people (34% of self-harmers) said they self-harmed weekly or more and would be defined as chronic self-harmers⁴. This is a big increase from 5% in 2019.
- 85% of young people who said they had self-harmed (20% of the population) did so within the past year - this includes “experimental self-harm”.
- 4.8% of the population took an overdose on at least one occasion. 87% of young people who took an overdose (4.8% of the population) reported they did so in the last year.
- 67% of all who self-harmed or overdosed in our study had told someone about their self-harm and of these, 31% had told their parents/carers, and a further 9% another family member. 15% have told a teacher or trusted adult in school and 51% have told a friend.
- 33% who had self-harmed or taken an overdose had not told anyone.
- 14% of all self-harmers (3.5% of the population) said they had had medical treatment for their injury
- 20% of young people in our survey said they would like more support and knowledge about self-harming.

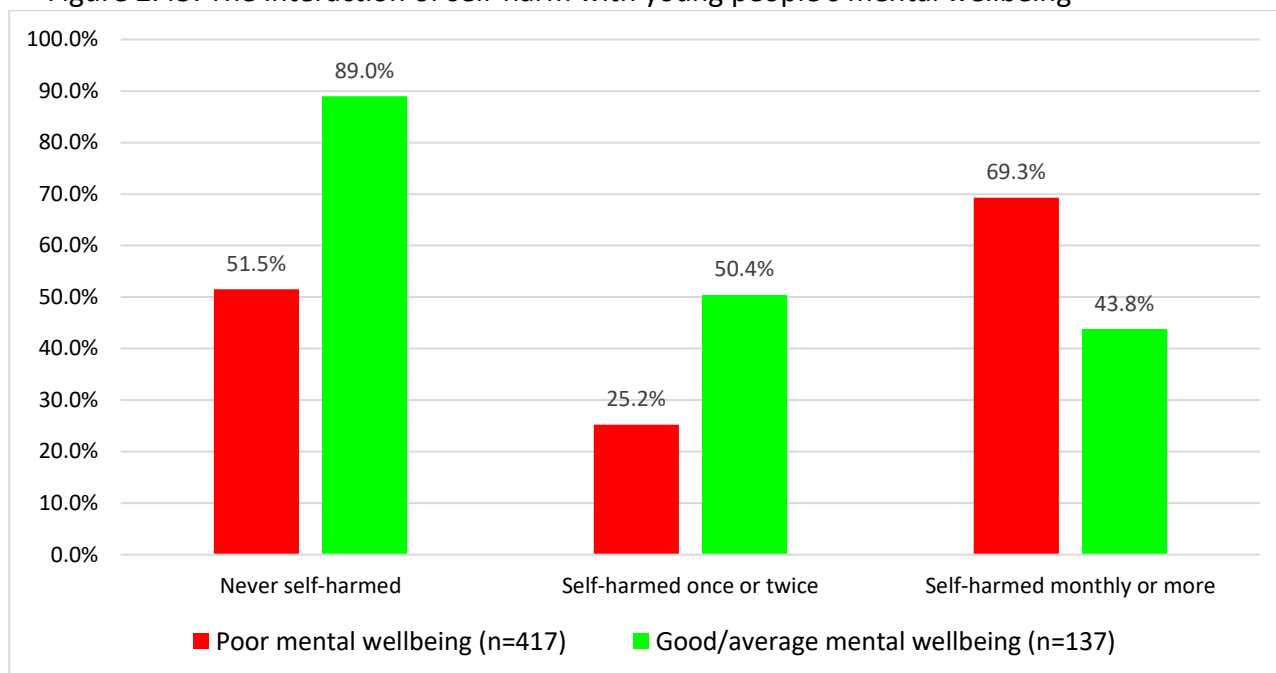
Self-harm and poor mental health appear to be inextricably linked. 72% of young people who self-harmed monthly or more frequently felt they had **not had enough help** in **handling their emotions** compared to 61% of young people who have only self-harmed once or twice (experimental). (Figure 2.44)

Figure 2.44: The interaction of self-harm frequency with how helpful learning how to handle their emotions has been



⁴ [http://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366\(17\)30478-9/fulltext](http://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(17)30478-9/fulltext)

Figure 2.45: The interaction of self-harm with young people's mental wellbeing

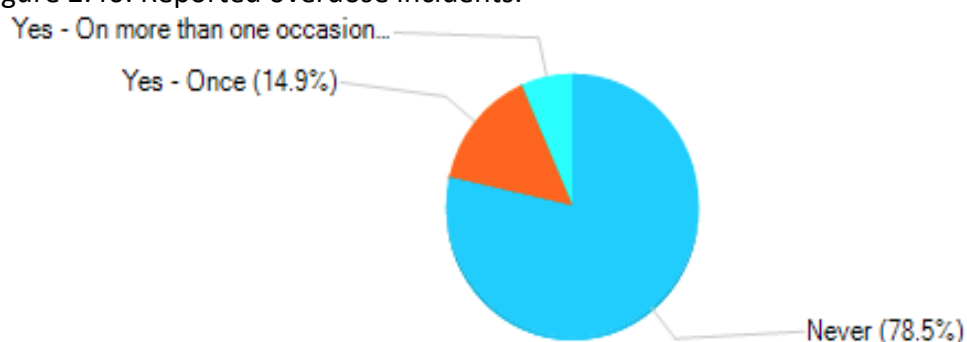


89% of pupils who reported they never self-harm have average to good mental wellbeing compared to under half this level (44%) of those who self-harm frequently (monthly or more). Figure 2.45 above.

Overdosing

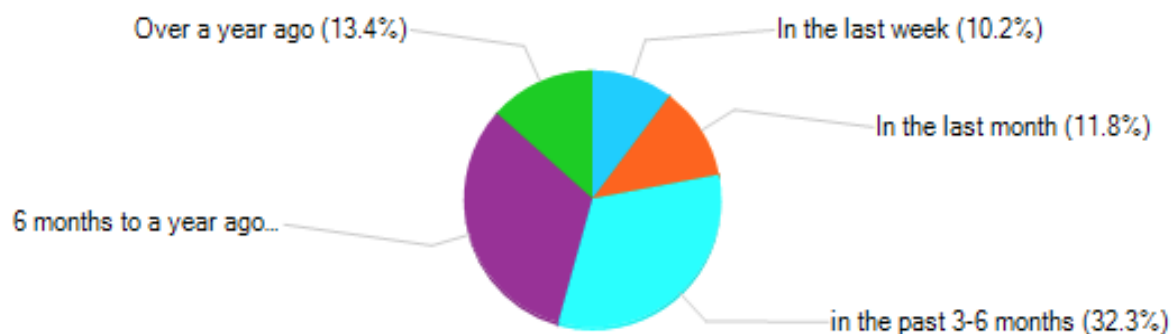
As well as self-harm, we asked pupils about overdosing. 15% - 4% of the population (n=92) said they had overdosed on one occasion and 7% - 1.8% of the population (66) on more than one occasion. 87% of these were within the last year. (Figure 2.46)

Figure 2.46: Reported overdose incidents.



Total n:619

Figure 2.47: When did they last take an overdose?

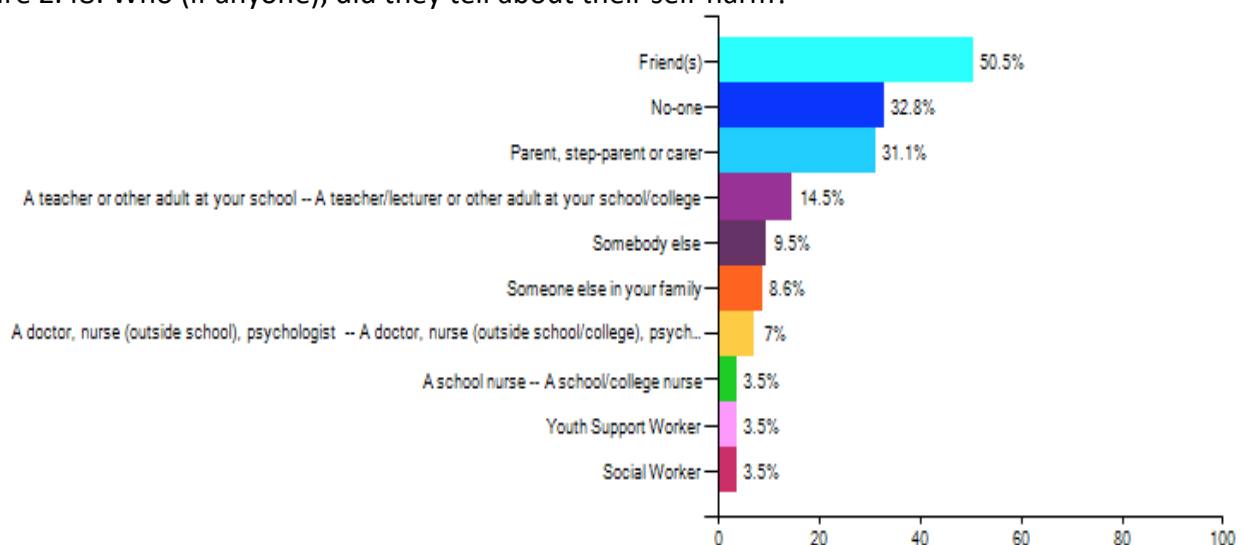


Total n:127

Communication

Pupils who said they have self-harmed and/or overdosed were asked if they told anyone about their self-harming. A third (33%) have told no-one and over half (50%) a friend. (Figure 2.48)

Figure 2.48: Who (if anyone), did they tell about their self-harm?



Total n:546

2.5 Bullying

We have seen that being bullied and the perception of the school's bullying policy are significant factors in CYP's MHEWB. Although the majority (78%) of pupils had not been bullied, for those who had, it can have a significant detrimental effect on their mental health. Reported bullying decreased with age from 29% to 16% (Figure 2.49).

Figure 2.49: Bullying frequency by age

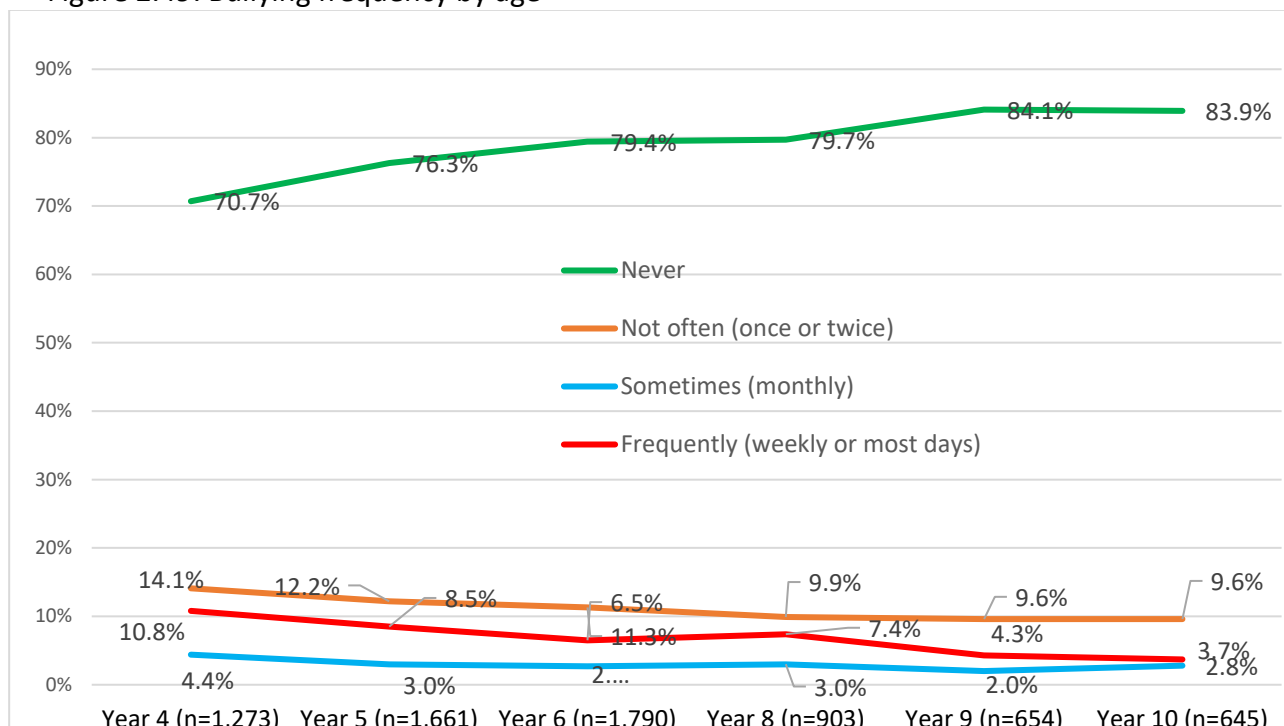
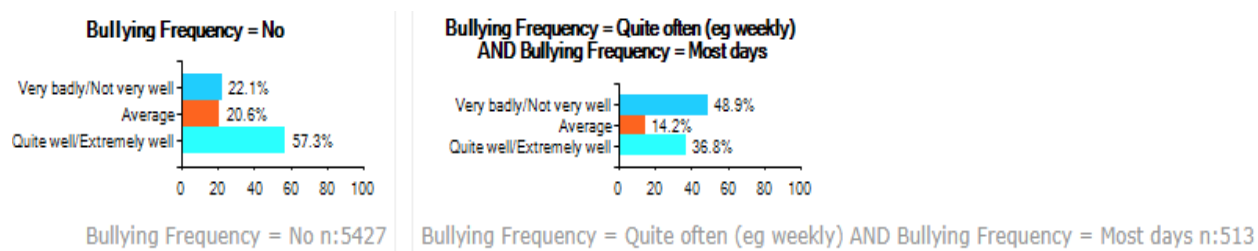


Table 2.51: Reported bullying decreases as pupils get older but perception of school management in this area gets worse.

% Pupils seriously bullied in the last year	Year 4	Year 5	Year 6	Year 8	Year 9	Year 10
Pupils seriously bullied in the last year, quite often and most days	10.8%	8.5%	6.5%	7.4%	4.3%	3.7%
Pupils who think their school deals with bullying well or extremely well	71.1%	66.0%	63.2%	32.3%	19.4	23.1%

Figure 2.52: Results from table 2.51 showing how perception on the school bullying policy changes when pupils have been bullied



Overall bullying has decreased in 2021, particularly in secondary phase where it has been consistent since 2015, figure 2.51. Figure 2.52 shows bullying trends across year groups.

Figure: 2.51 Bullying trend data (frequency of being bullied monthly or more often)

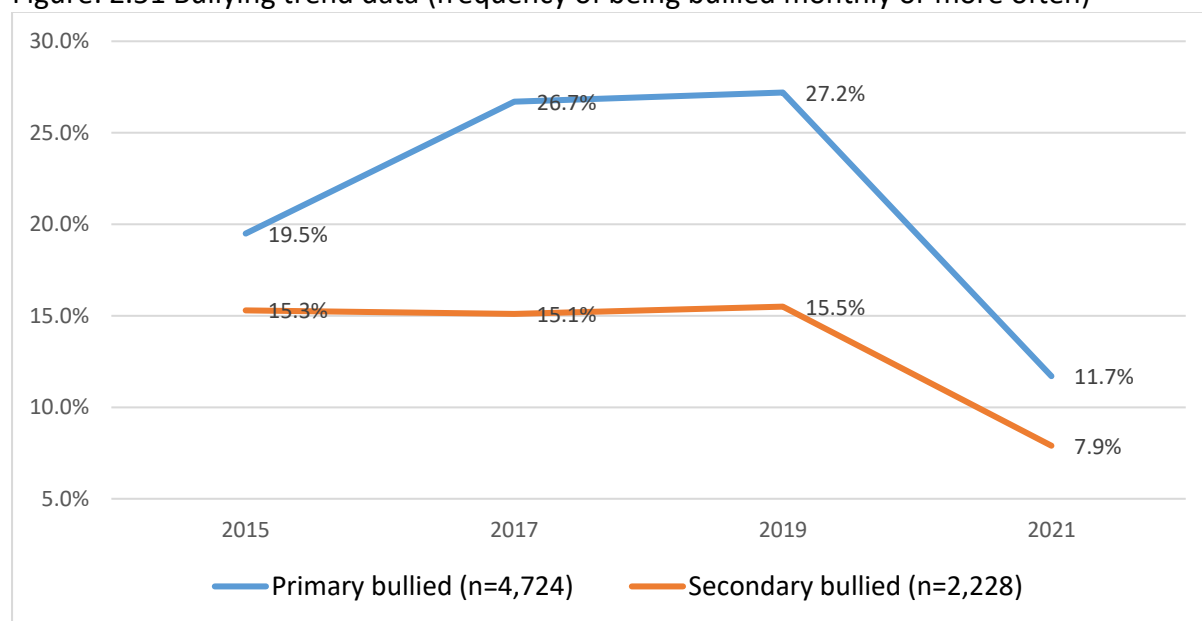


Figure 2.52: Trends for bullying sometimes/frequently across different year groups

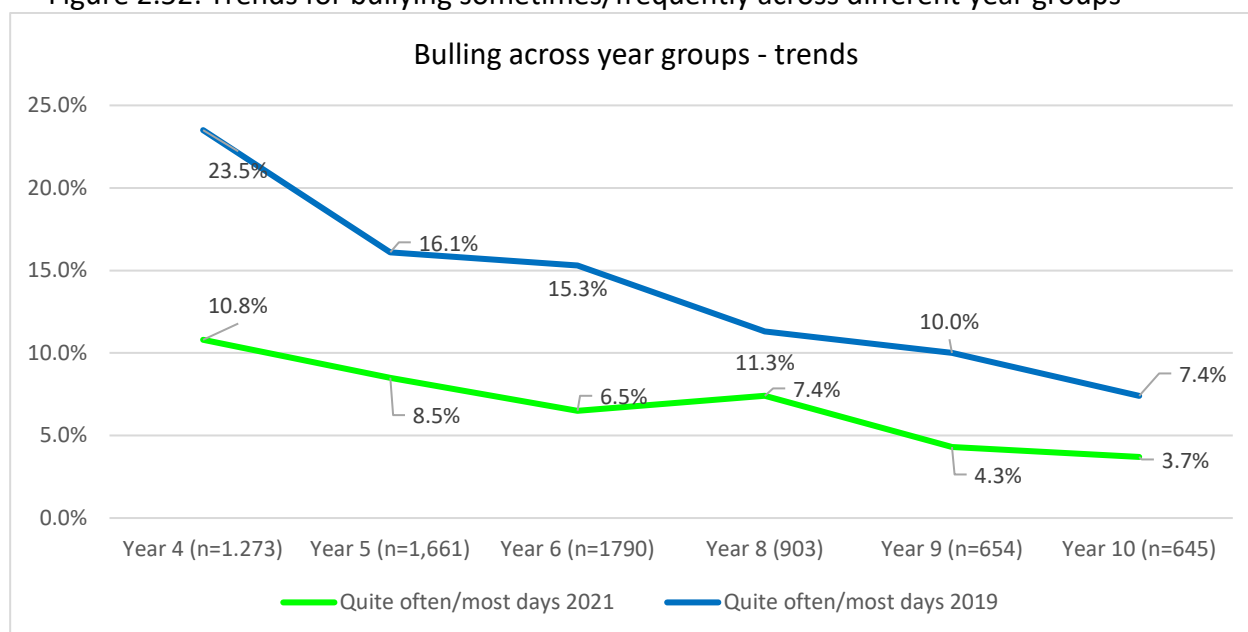
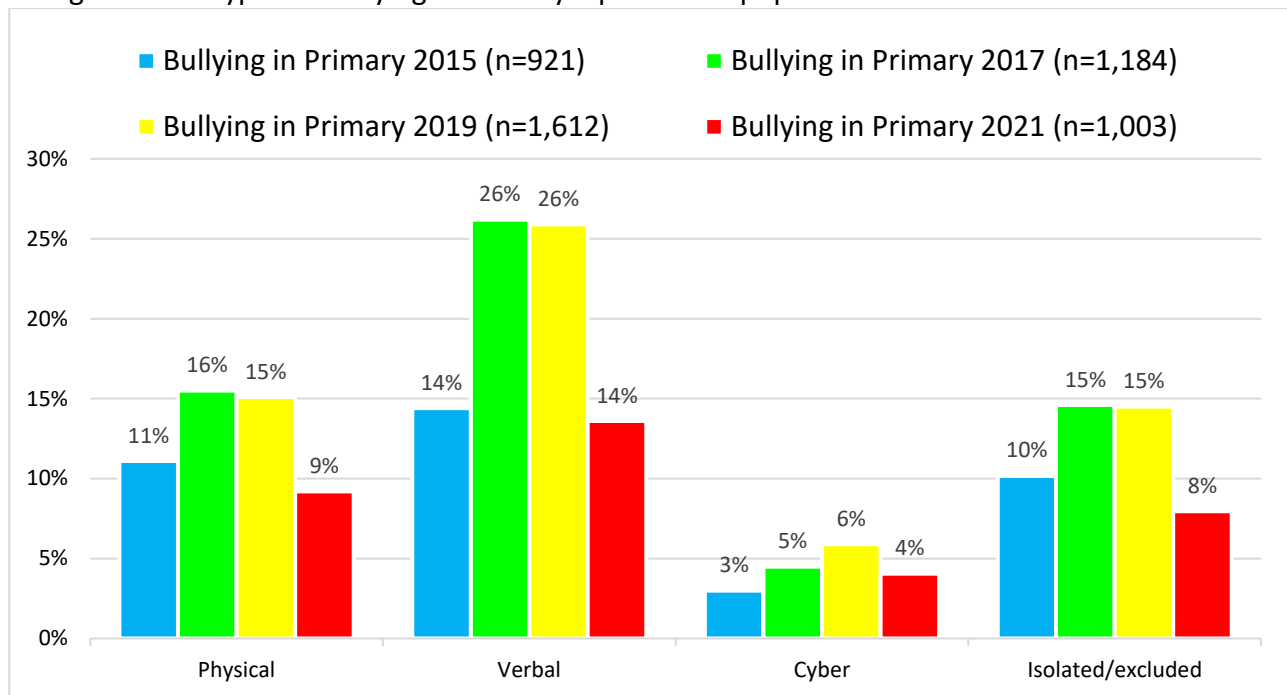


Figure 2.53: Types of Bullying in Primary – percent of population



Verbal bullying remained the main form of bullying in both the primary and secondary phase.

Figure 2.54: Types of Bullying in Secondary – percent of population

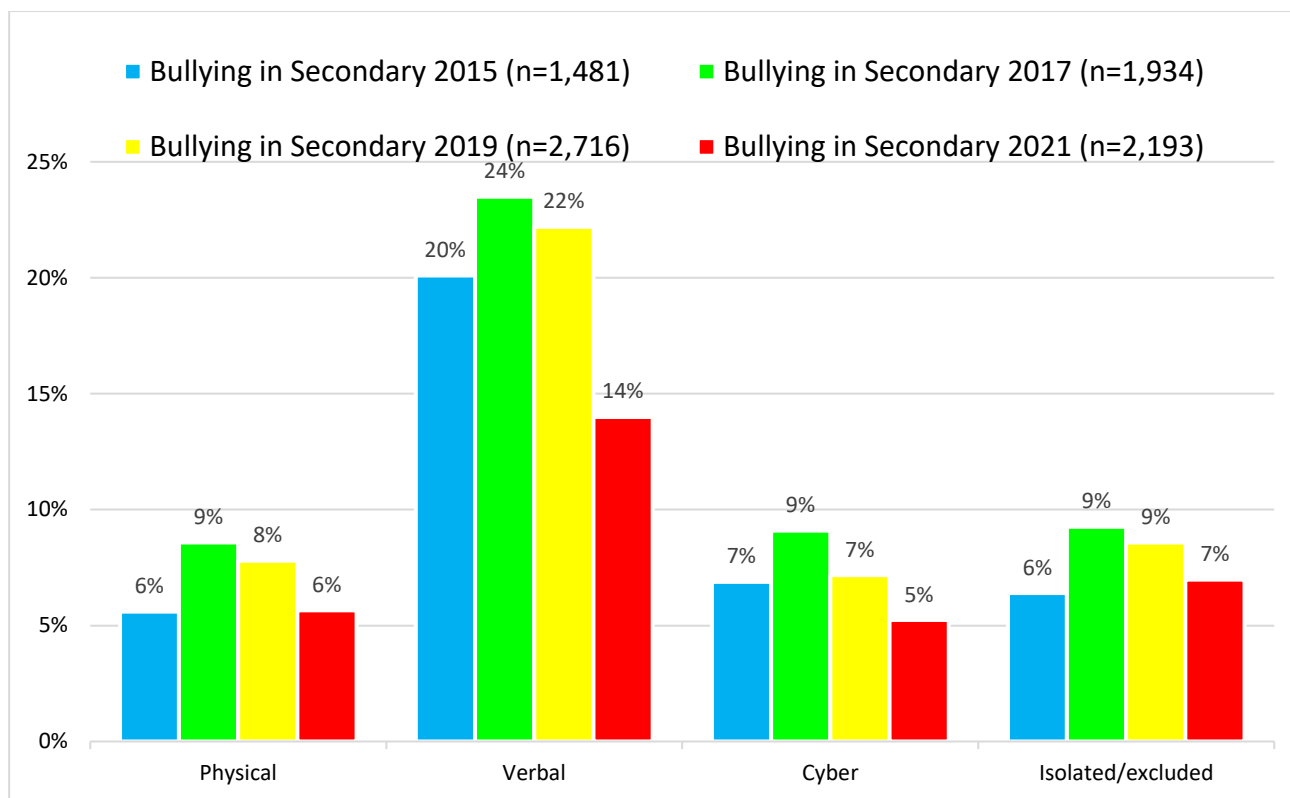
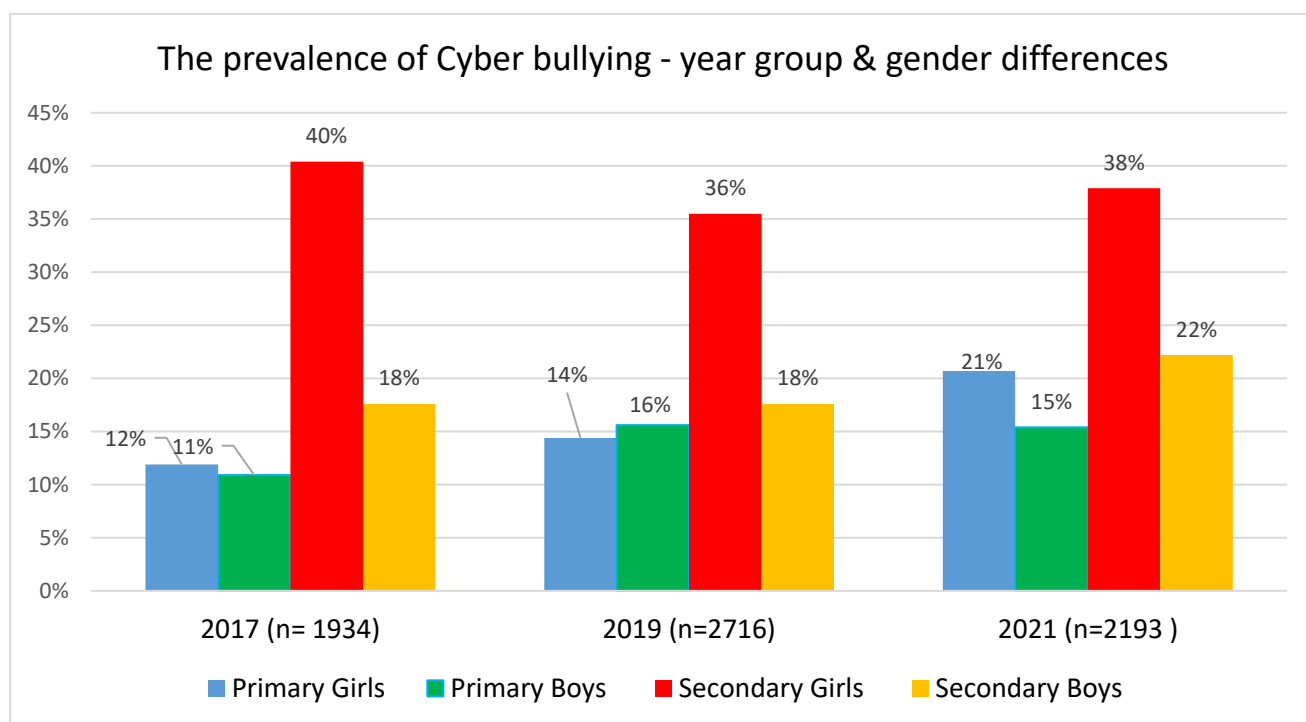


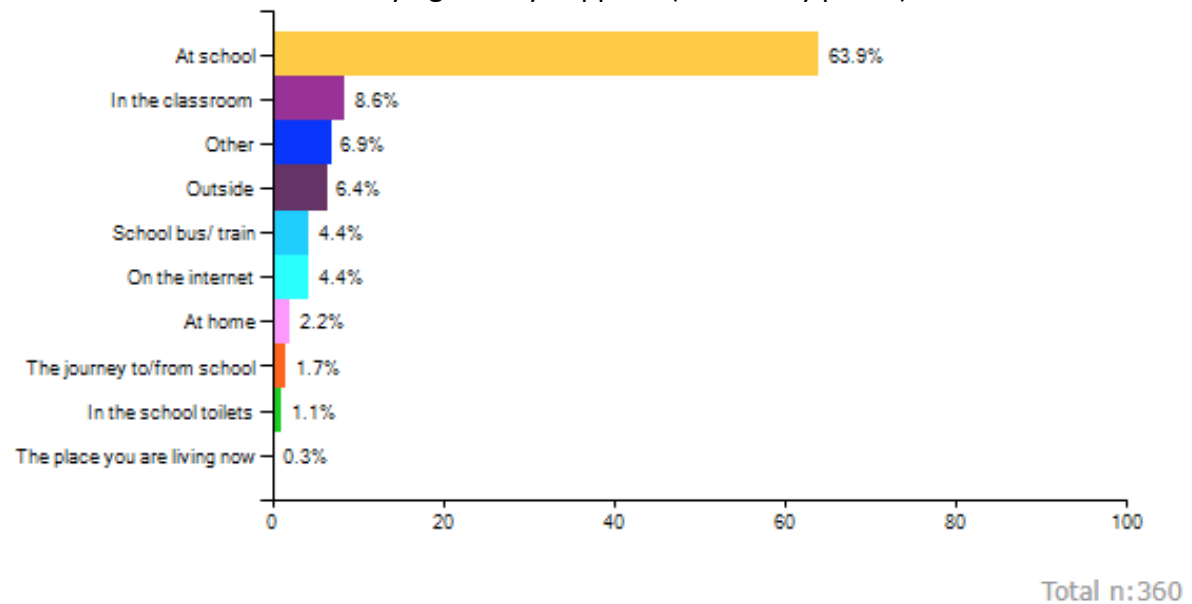
Figure 2.55: Prevalence of cyber bullying in children and young people
N.B. Year 12s were not included as there were insufficient numbers.



Cyber bullying is still not the main form of bullying overall but has increased in primary girls and slightly in both genders in the secondary phase.

Most (nearly two thirds) of the bullying was reported as taking place at school and 10% in the classroom. (Figure 2.56)

Figure 2.56: Where does the bullying usually happen? (Secondary phase)



Key Findings 3: The extent to which pupils adopt healthy lifestyles

Significant improvements in health could be made by people making relatively small changes to their lifestyles. For example, half of the current heart disease deaths and half of all cancers could be prevented by adopting a healthier lifestyle, particularly by reducing smoking, reducing obesity, increasing physical activity and eating more healthily. Unhealthy eating habits can lead to more cancer incidents through obesity and other complications than smoking and these habits are often set down in childhood. In addition, and probably more importantly, food poverty is becoming more and more prevalent throughout the UK

3.1: Food poverty

Our question on this topic was, *some young people go to school or to bed hungry because there is not enough food at home. How often does this happen to you?*

Overall, 9.3% of the pupils said they had experienced food poverty at least sometimes (monthly or more) 2.1% (162 pupils) reported this happened most days. 5% of pupils said they were eligible for free school meals. (Figures 3.11 and figure 3.12)

Figure 3.11: Frequency of food poverty reported in 2021

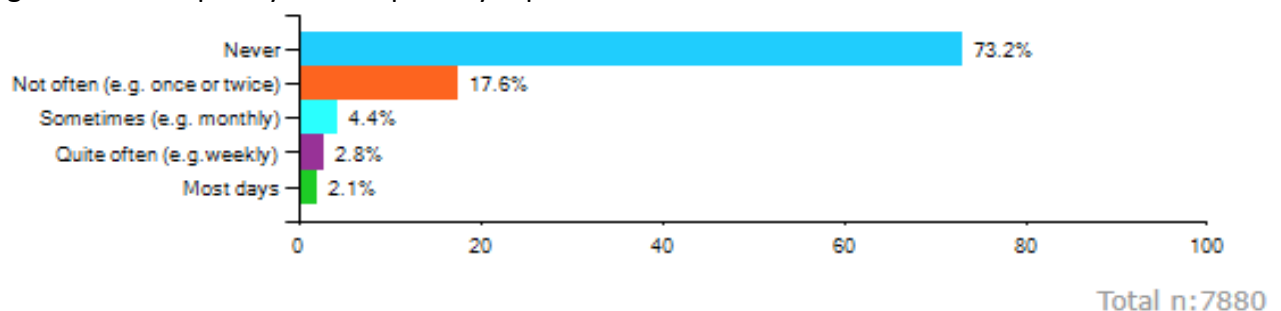
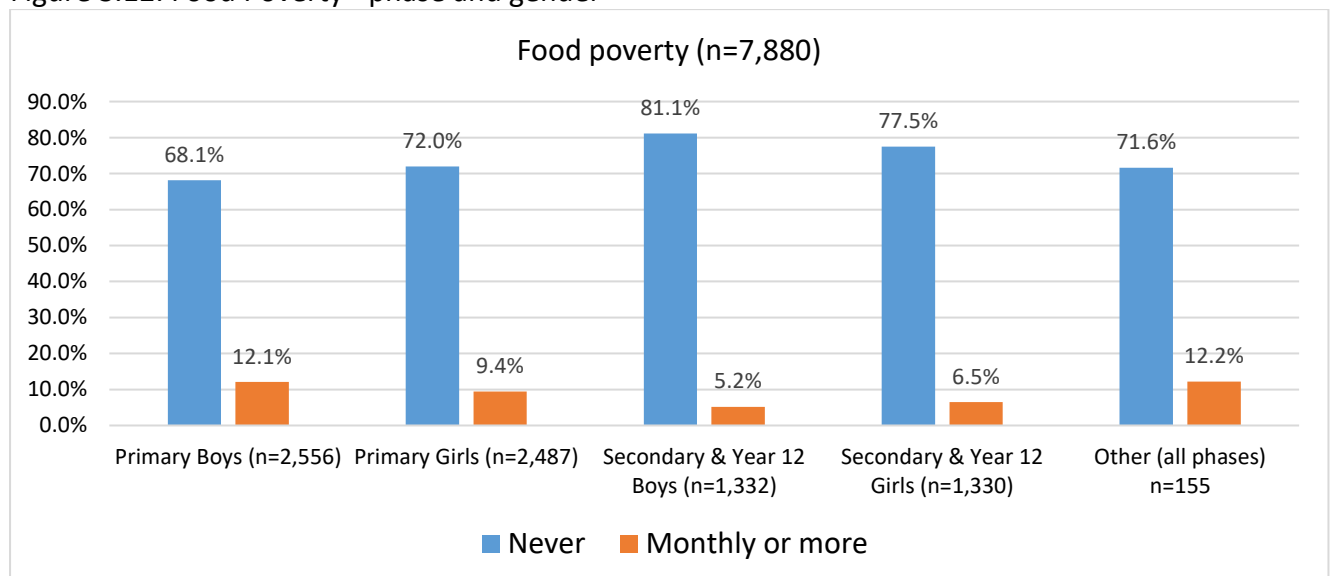


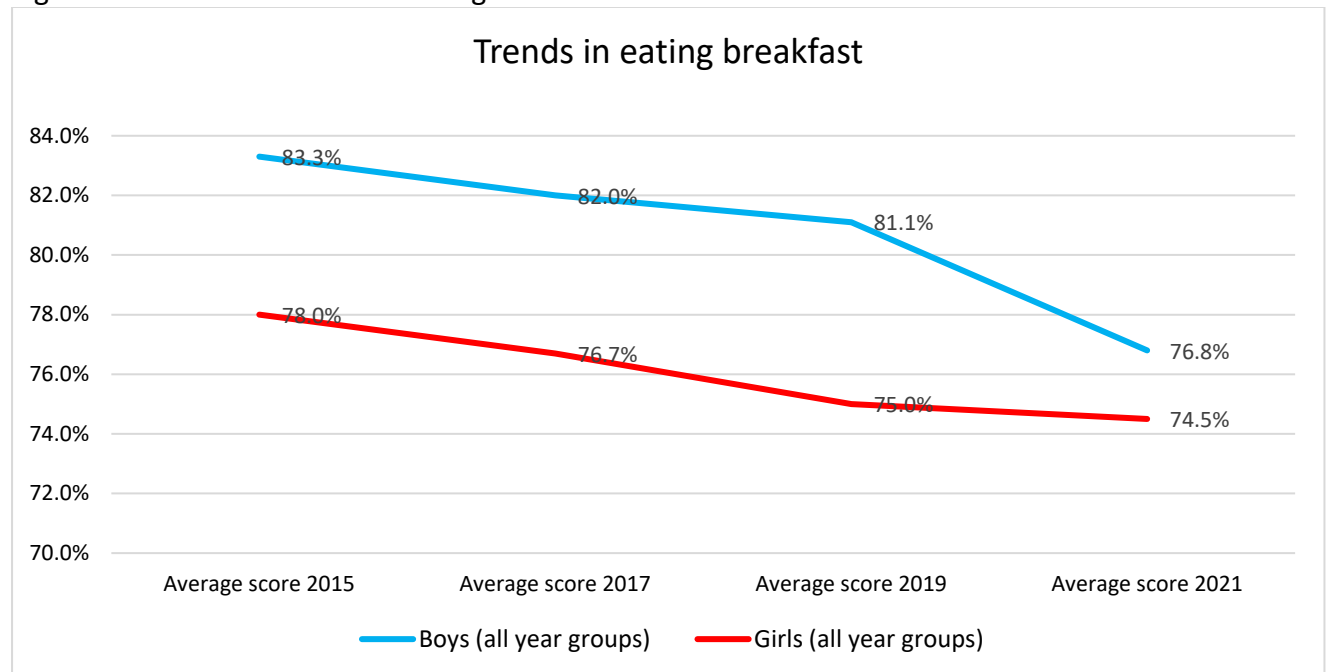
Figure 3.12: Food Poverty - phase and gender



3.2 Healthy Eating

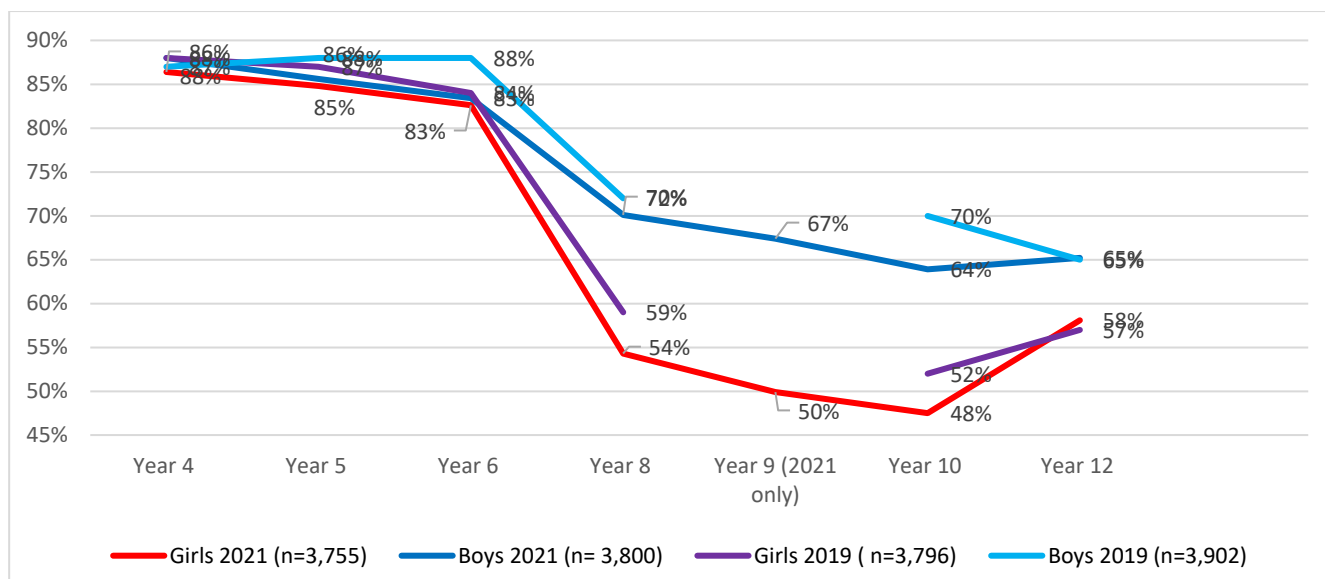
Overall, 76% of pupils ate breakfast usually or every morning. This is very similar but a slight decrease from 77% in 2019 and 78% in 2017. (Figure 3.21)

Figure 3.21: Overall decline in eating breakfast since 2015



The number of pupils who ate breakfast declined as pupils got older, especially when they left primary education. As in previous years, Boys consistently ate breakfast more frequently than girls, particularly in year 10 where less than half of girls (48%) reported eating breakfast regularly compared to 70% of boys. (Figure 3.22)

Figure 3.22: Breakfast habits, % of CYP who eat breakfast every or nearly every day

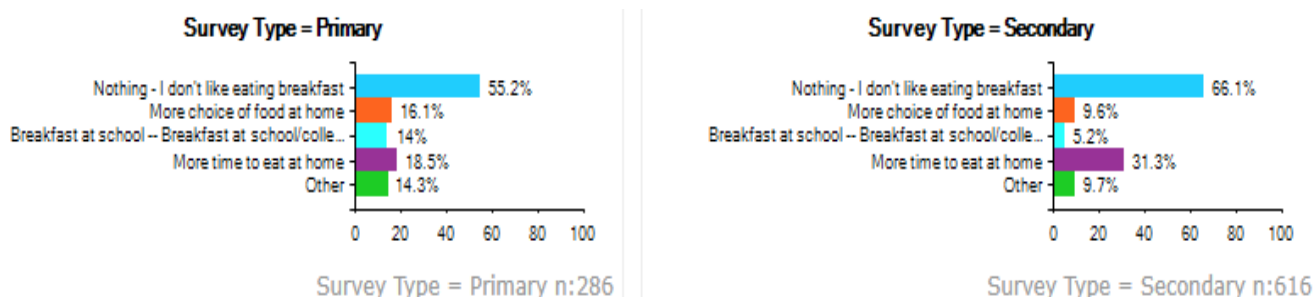


What would help them eat breakfast?

Pupils who do not usually eat breakfast were asked what would help them to do so.

Nearly two thirds of the pupils (63%) responded Nothing – they don't like eating breakfast. Of those who replied in the affirmative, more time to eat at home was the most frequent response, across all age groups. (Figure 3.23)

Figure 3.23: What would help you to eat breakfast

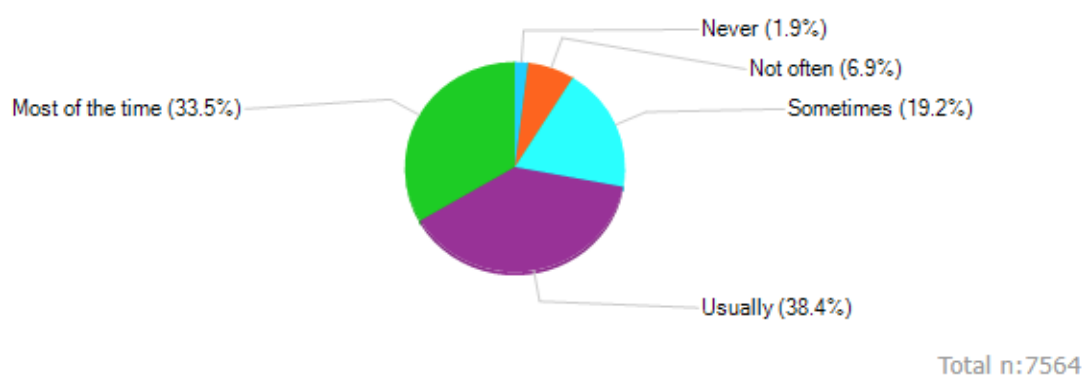


Healthy Eating at home

On average pupils felt that the food offered to them at home helps them eat healthily.

Only 9% responded Never/not often and 72% usually/most of the time. Figure 3.24.

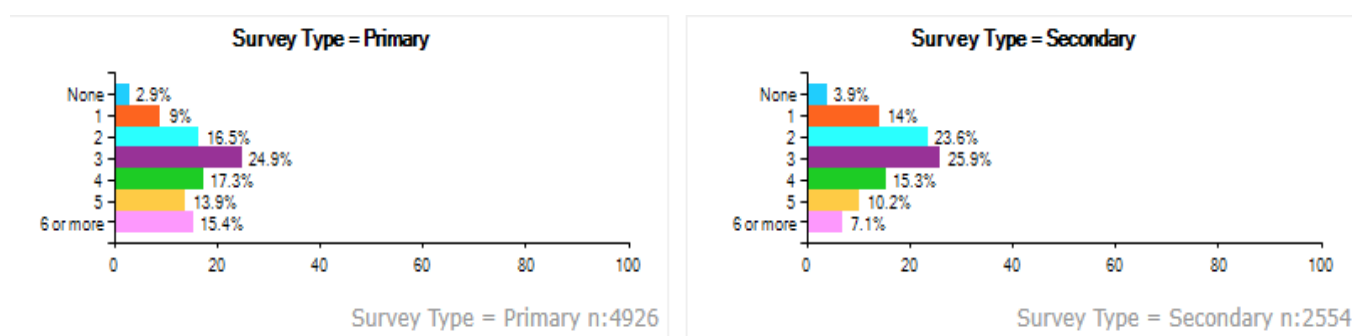
Figure 3.24: Healthy Eating at home



Fruit and vegetables

25% of pupils overall reported having 5 or more portions of fruits and vegetables per day on average. A further 30% said they had 2 or fewer portions of fruit and vegetables per day. The average across all age groups was **3.3 portions per day**, with primary (average 3.5 portions a day) averaging more than secondary (average 2.9 portions a day). Figure 3.25 over the page.

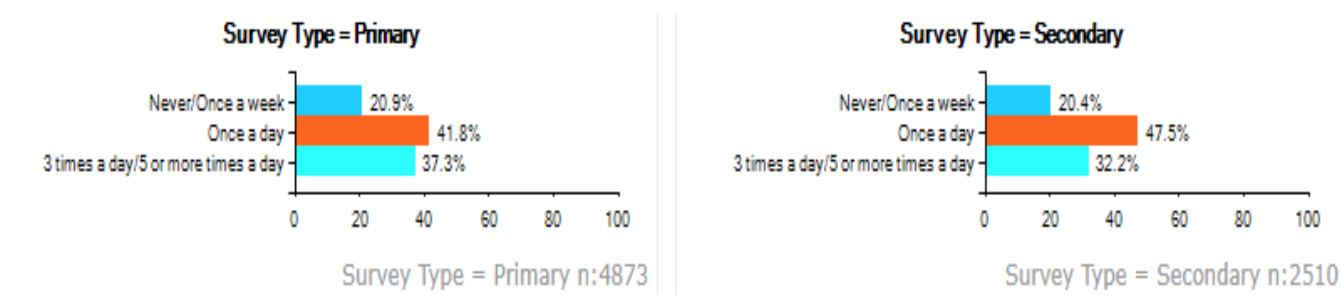
Figure 3.25: 5 Portions of Fruit and vegetables per day



Unhealthy snacks

On average most pupils reported they eat sweets, chocolate, biscuits, and crisps once a day, with a similar distribution for primary and secondary. Less than 2% (1.7%) never have these snacks and 7.5% have 5 or more servings a day. (Figure 3.26)

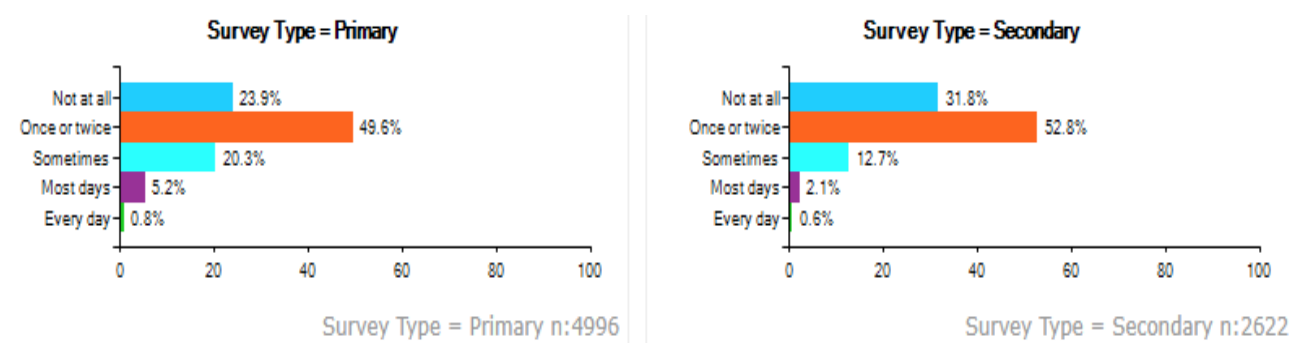
Figure 3.26: Frequency of unhealthy snacks



Takeaways

Pupils were asked how often they eat takeaways a week. On average pupils reported once or twice a week. 4.8% reported most days or every day and 27% said not at all. (Figure 3.27)

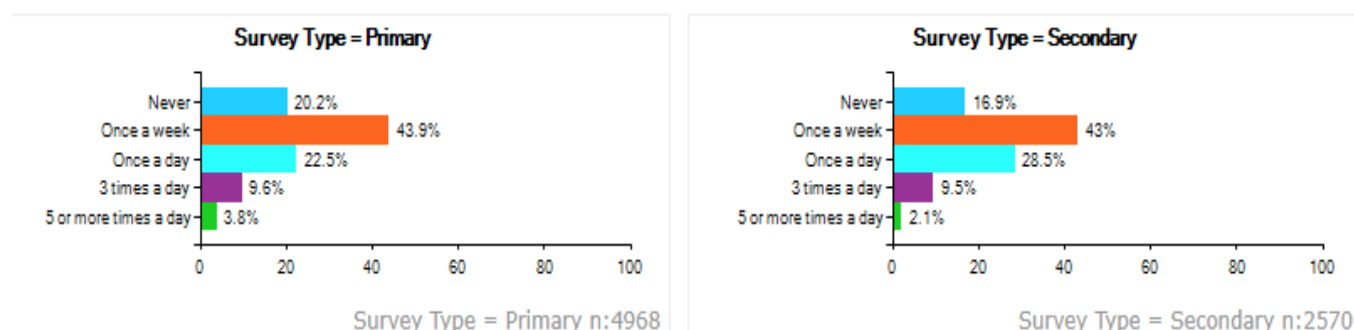
Figure 3.27: Takeaway Frequency



Unhealthy drinks

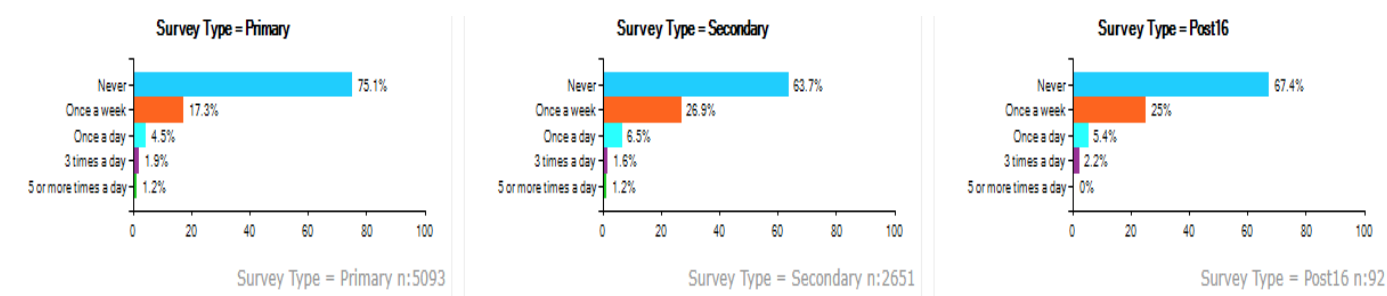
Pupils were asked how often they **drinks sweetened with sugar** (this doesn't include fruit juice or sugar free/diet drinks) but can be fizzy or still. The average overall was once a week. 13% of primary and 12% of secondary consumed sugary drinks 3 or more times a day. Figure 3.28 over the page.

Figure 3.28: Frequency of sugary drinks



The majority (71%) of pupils reported they never drank **energy drinks** (up from 68% in 2019) and a further 21% only once a week. 9% of secondary pupils and 8% of primary pupils reported they drink energy drinks once or more a day. (Figure 3.29)

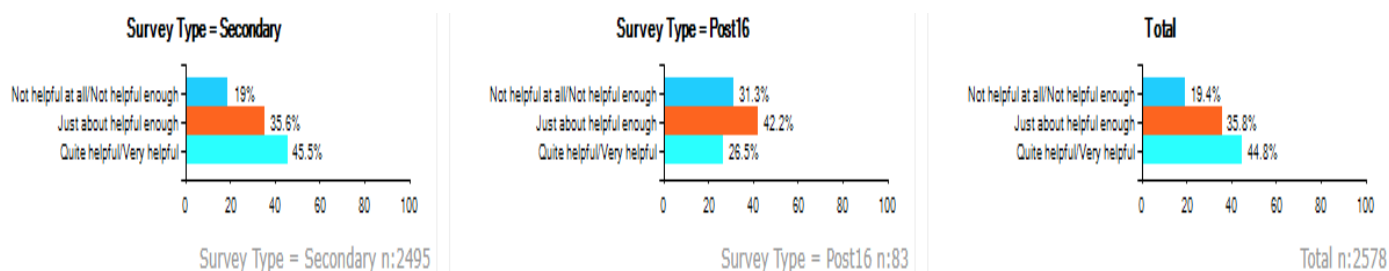
Figure 3.29: Frequency of energy drinks



Information

Secondary pupils were asked **how helpful it has been to learn about Food and Health at school**. 19% of young people in the secondary phase felt it was not helpful at all or not helpful enough and 46% felt it was quite helpful or very helpful. Year 12 pupils felt it was more helpful on average, but this was from a relatively small sample (n=83). Figure 3.30.

Figure 3.30: Learning about food and health at school



3.3: Sleep behaviour

On average pupils went to bed at about 9.30pm (Figure 3.31) and got up at ten to seven in the morning (Figure 3.33). They took about an hour to get to sleep so the average time asleep was 8 hours and 20 minutes.

Figure 3.31: Distribution of times pupils went to bed the previous night

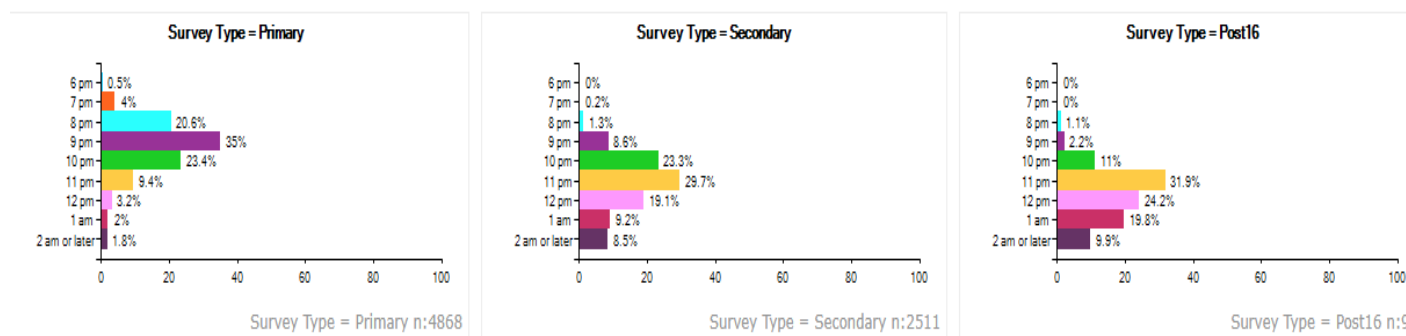


Figure 3.32: Distribution of the time it took pupils to get to sleep

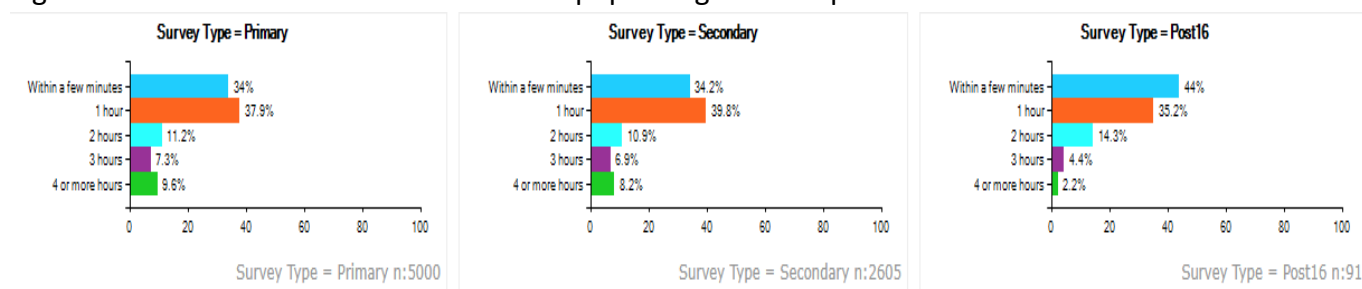
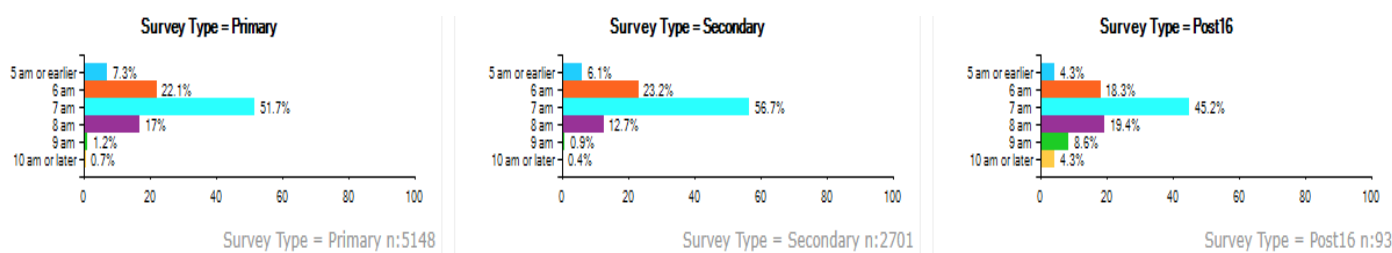


Figure 3.33: Distribution of times pupils woke up in the morning

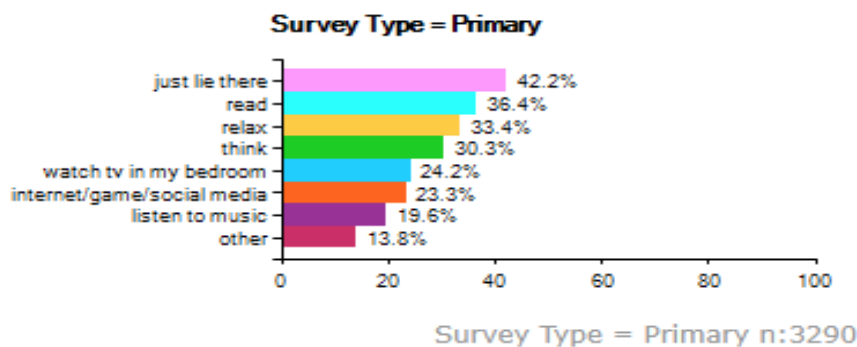


Pupils who reported it took them more than an hour between going to bed and going to sleep were asked what they did before going to sleep (Figure 3.32 above). Most pupils (46%) reported that they were relaxing / just lying there. Primary pupils also reported reading (36%) and relaxing (33%), nearly half of secondary were online on social media or playing games online, as were Year 12s. Similar to 2019, 24% of primary and 30% of secondary/Year 12s were watching TV in their room and 25% of primary and 49% of secondary/Year 12s were

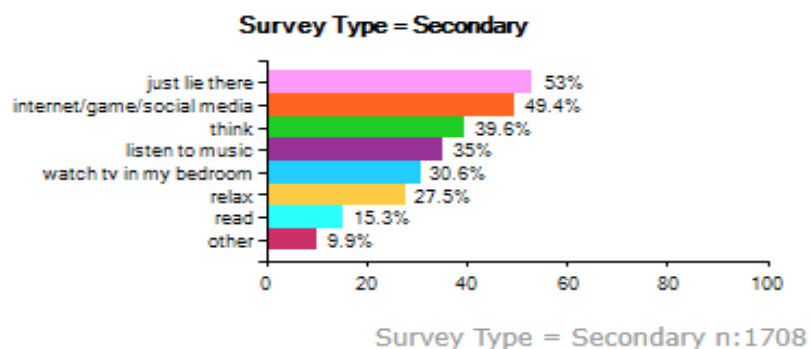
using the internet (e.g. gaming and/or social media) before they went to sleep. Figure 3.34 over the page.

Figure 3.34: What CYP did between going to bed and going to sleep

Primary

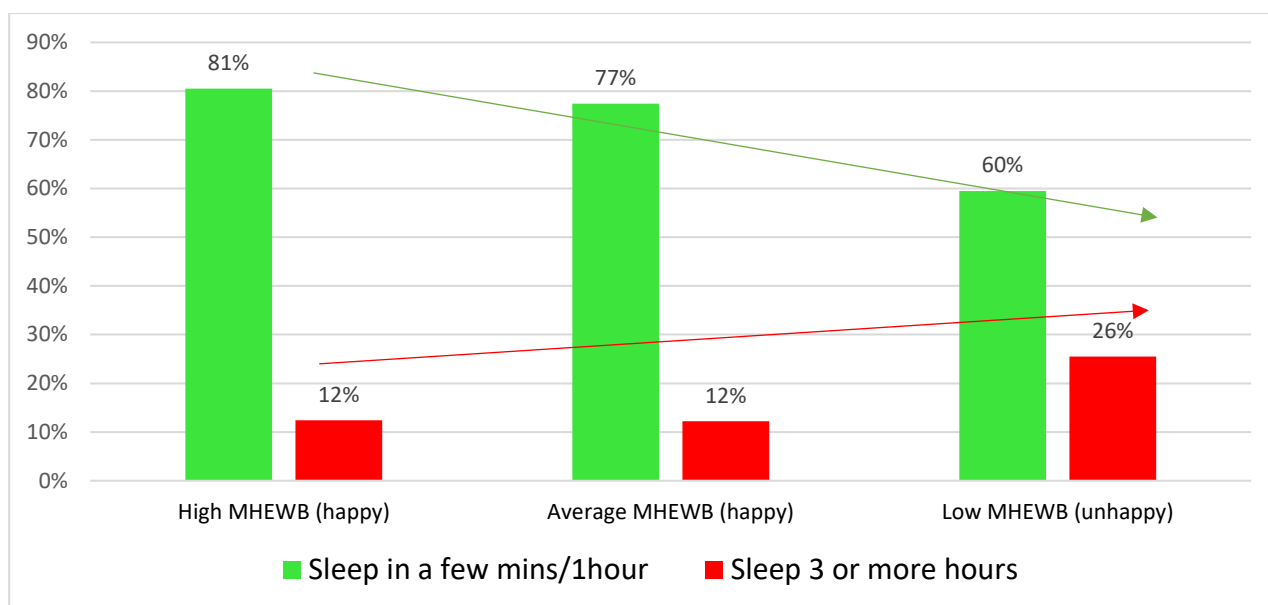


Secondary



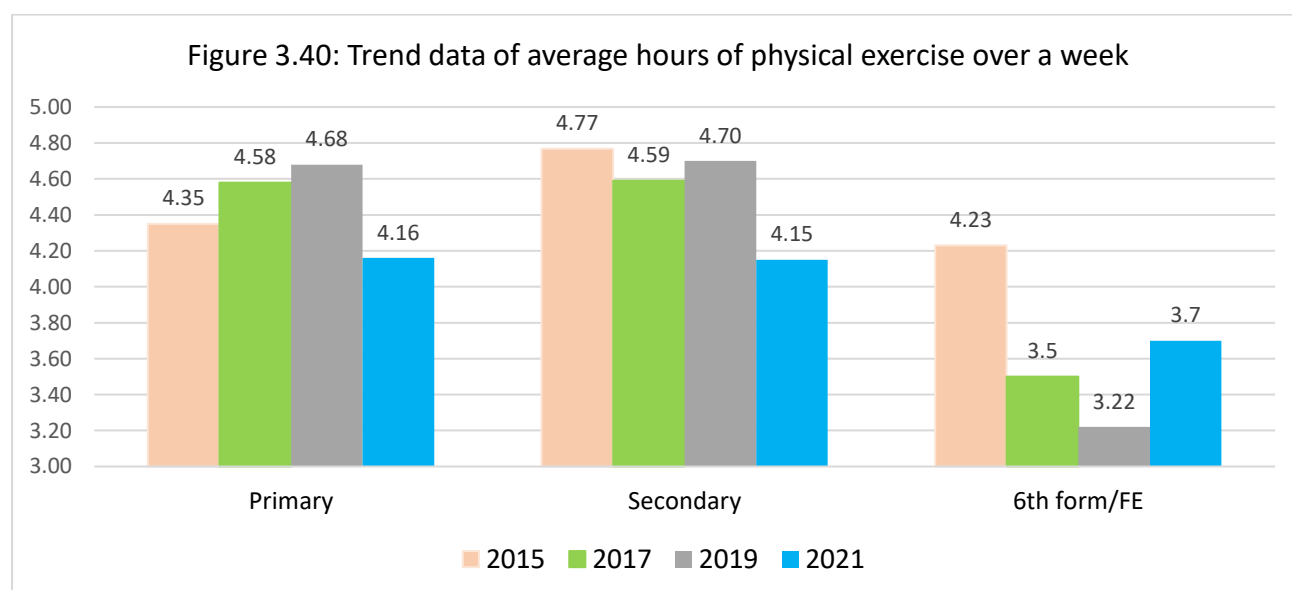
Pupils who took 3 or more hours to go to sleep once they went to bed were more than twice as likely to have poor mental wellbeing, figure 3.35.

Figure 3.35: The effect of sleeping habits on CYP's MHEWB (n= 7,696)



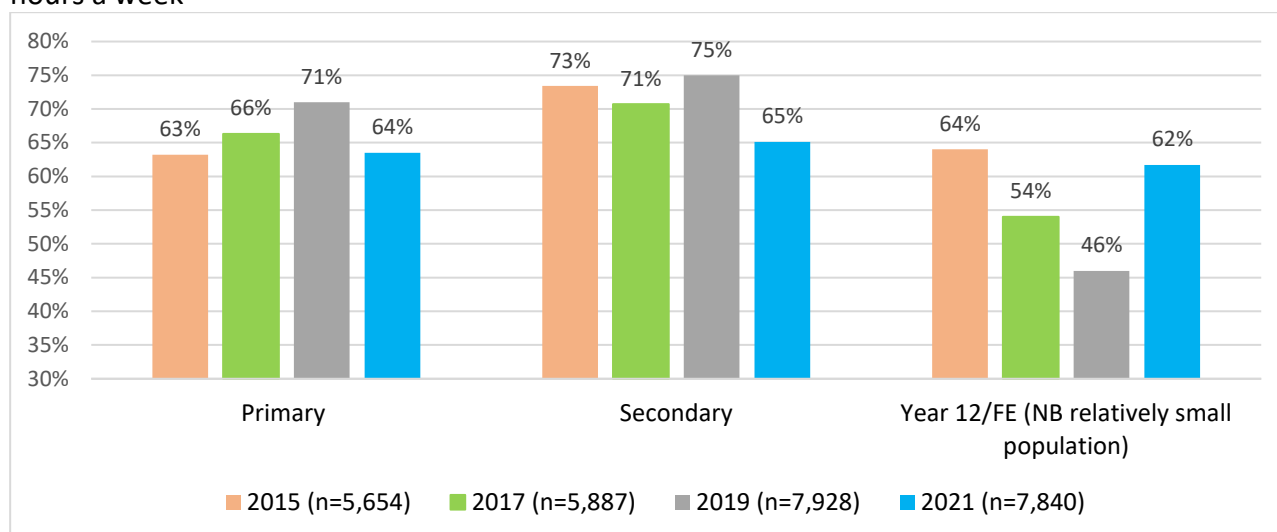
3.4 Physical activity

The average amount of physical activity pupils of all ages did over a week was 4 hours 9 minutes. Apart from Year 12/FE, (which were relatively low numbers n=86), physical activity has significantly declined compared to previous years. (Figure 3.40)



65% of pupils (n = 7,840) across all age groups in South Gloucestershire took part in at least 4 hours of physical activity (in and out of school) each week compared to 72% in 2019. 65% of pupils in secondary phase and 64% of primary pupils. 62% of Year 12s took part in 4 or more hours of physical activity which is an increase from previous years although caution must be taken with the Year 12 data as numbers are very low (n=86 and 117 in 2019). Figure 3.41

Figure 3.41: Changes in physical activity in phases. % of pupils who are physically active 4 or more hours a week



As in previous years the proportion of girls engaged in physical activity each week was lower than for boys overall; 65% (68% in 2019) of girls compared to 70% (75% in 2019) of boys did 4 or more hours of physical activity a week. Only 50% of young people who identified as other did over 4 hours of physical activity a week. The gender gap is larger for those who did 6 or more hours a week, 32% of girls and 45% of boys and only 25% for other (n=157). (Figures 3.42 and 3.43)

Figure 3.42: Changes in physical activity in phases. % of pupils who are physically active 4 or more hours a week

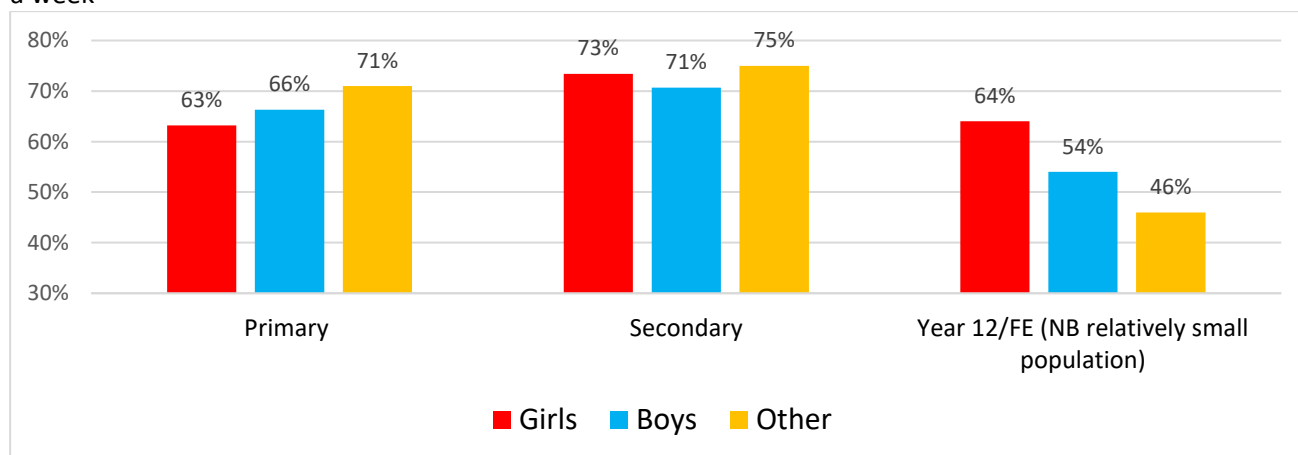
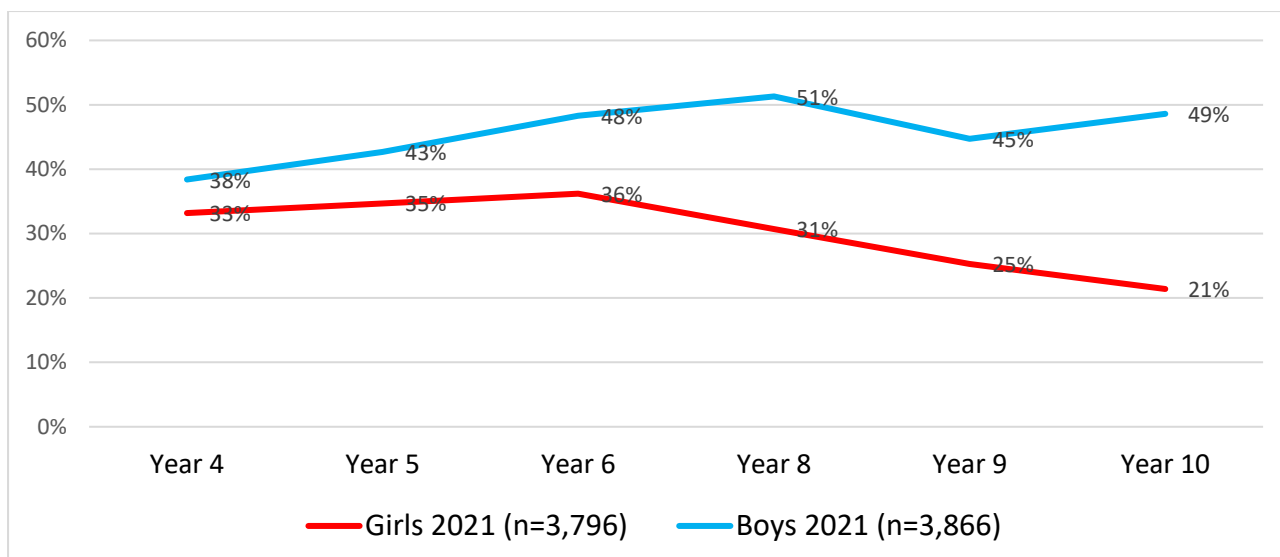


Figure 3.43: Gender differences in 6 or more hours of exercise per week 2021

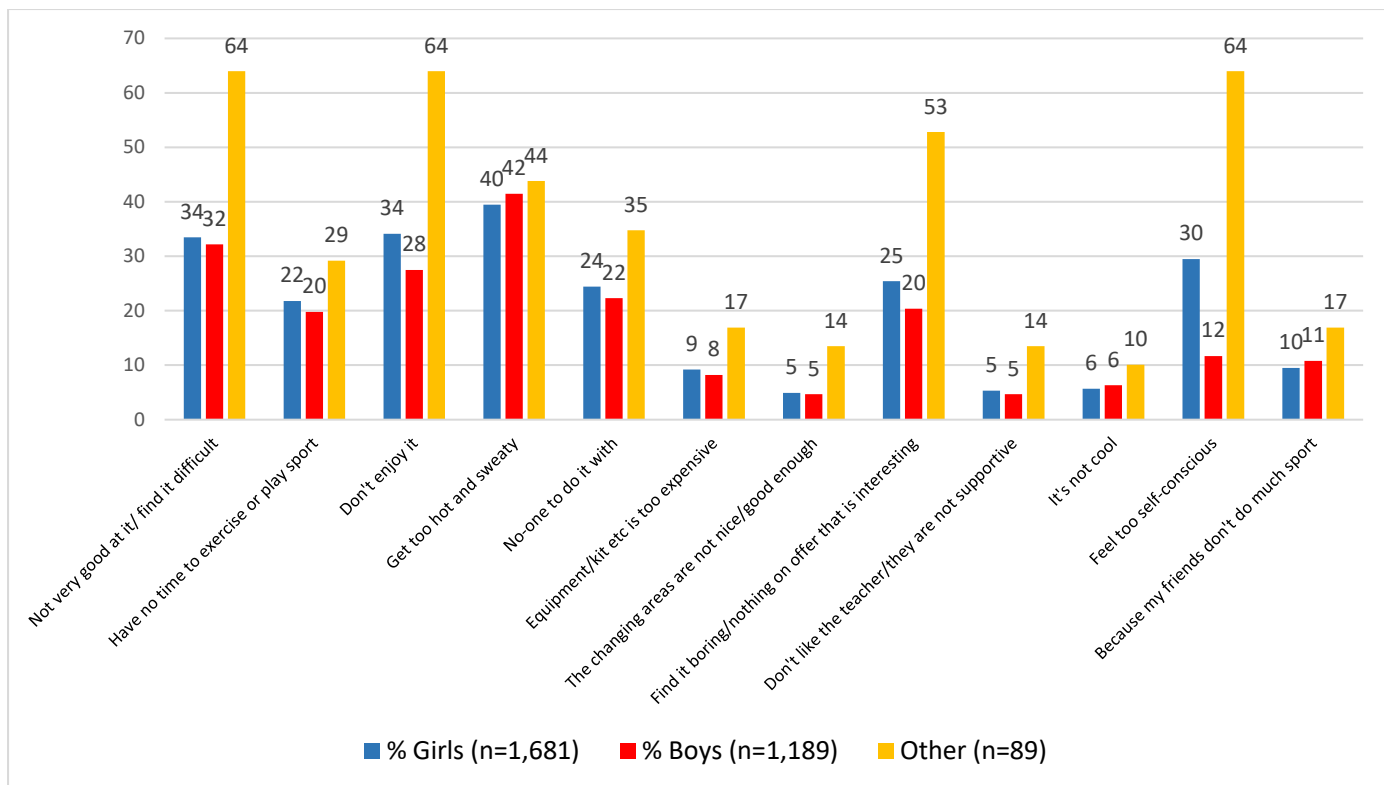


Overall, 56% of all pupils surveyed felt it was easy for them to be physically active most or all of the time of the time – only 18% reported it was never or not often easy to be physically active. Boys felt it was easier than girls (65% boys versus 48% of girls) and only 24% of pupils who identified as “other” felt it was easy.

74% of pupils would like to do more physical activity. There was a smaller gender difference, 73% of girls, 76% of boys and 65% of those pupils who identified as “other”. 19% of pupils would like to have more support and knowledge about being physically active.

41% of pupils who do little or no physical activity said they get too hot and sweaty (little gender difference). Over a third felt they were not very good at it and didn’t enjoy it (Figure 3.44)

Figure 3.44: Barriers for pupils who don’t do much sport or exercise (<2 hrs/week). % Pupils



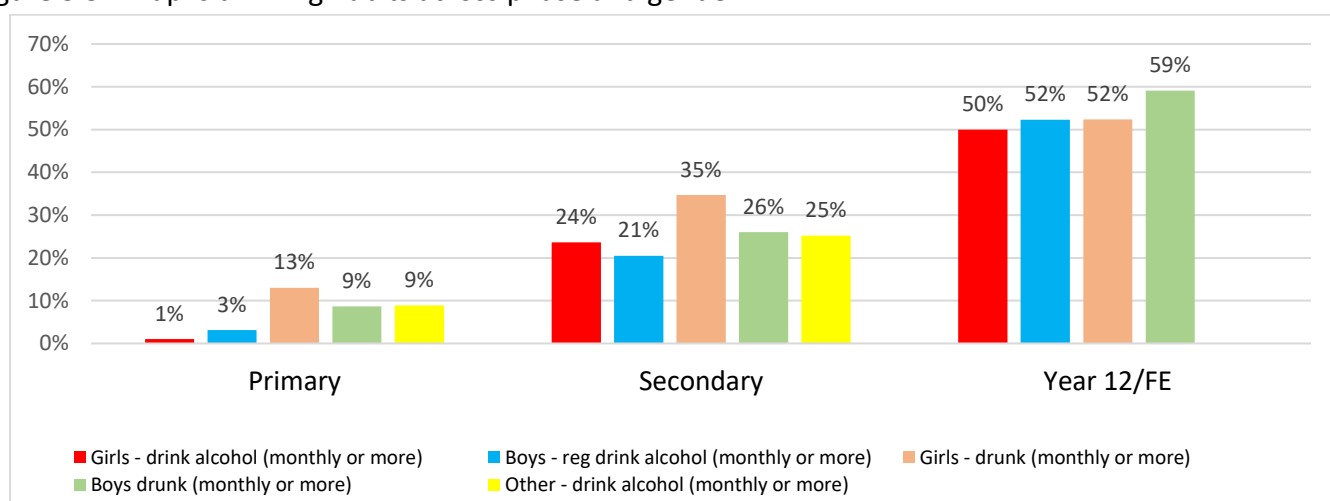
3.5: Substances (drinking, smoking and taking illegal drugs)

Alcohol

90% of all pupils and 55% of Year 12/FE (up from 37% of Year 12/FE in 2019 but relatively low numbers) reported that either they had never drunk alcohol or had only tried alcohol once or twice. This is an overall decrease in alcohol consumption from 86% non-drinkers in 2019, 85% in 2017 and 74% in 2015. This is similar to trends in other regions.

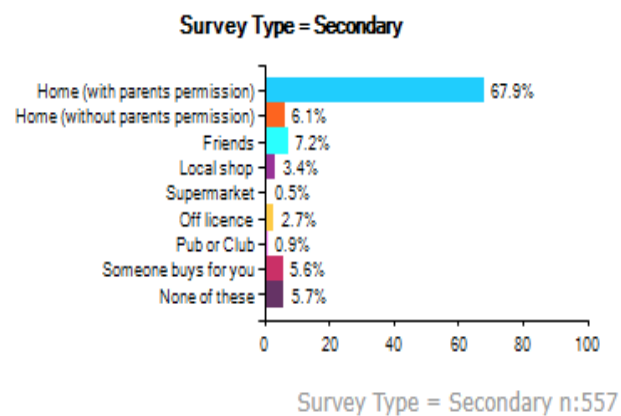
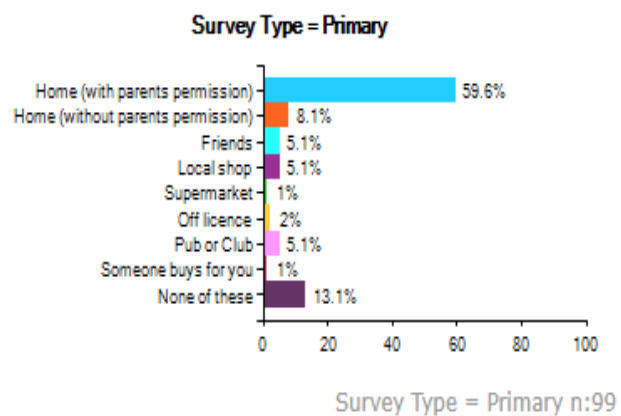
98% of primary, 78% of secondary and 49% of Year 12's had never or only tried alcohol once or twice. The differences in age and gender between those who did drink is shown in Figure 3.51. By year 12 ($n=87$), 30% of young people reported getting drunk frequently (weekly or more).

Figure 3.51: Pupils drinking habits across phase and gender



73% of pupils who drink regularly get their alcohol from home – 67% with their parents' permission. This is fairly consistent, across all ages and all regions in England. Very few pupils reported that they buy alcohol from shops, pubs or clubs (figure 3.52).

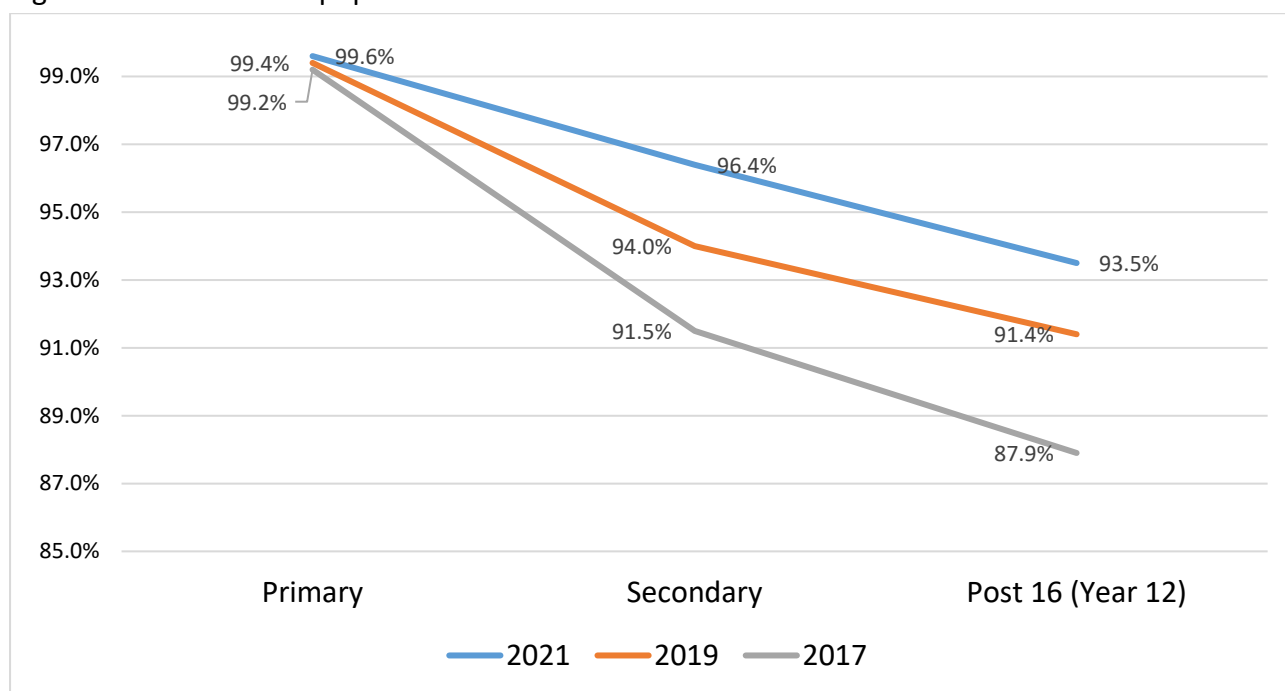
Figure 3.52: Sources of alcohol for pupils who drink regularly



Smoking

96% of all pupils reported they have never smoked and 3% had only tried it once or twice. 99.6% of primary, 96% of secondary pupils and 94% year 12's reported they had never smoked or only tried once or twice. Smoking incidence has continued to decrease over the years, as illustrated in figure 3.53. These findings are consistent with those in other regions.

Figure 3.53: Increase in pupils who don't smoke since 2017



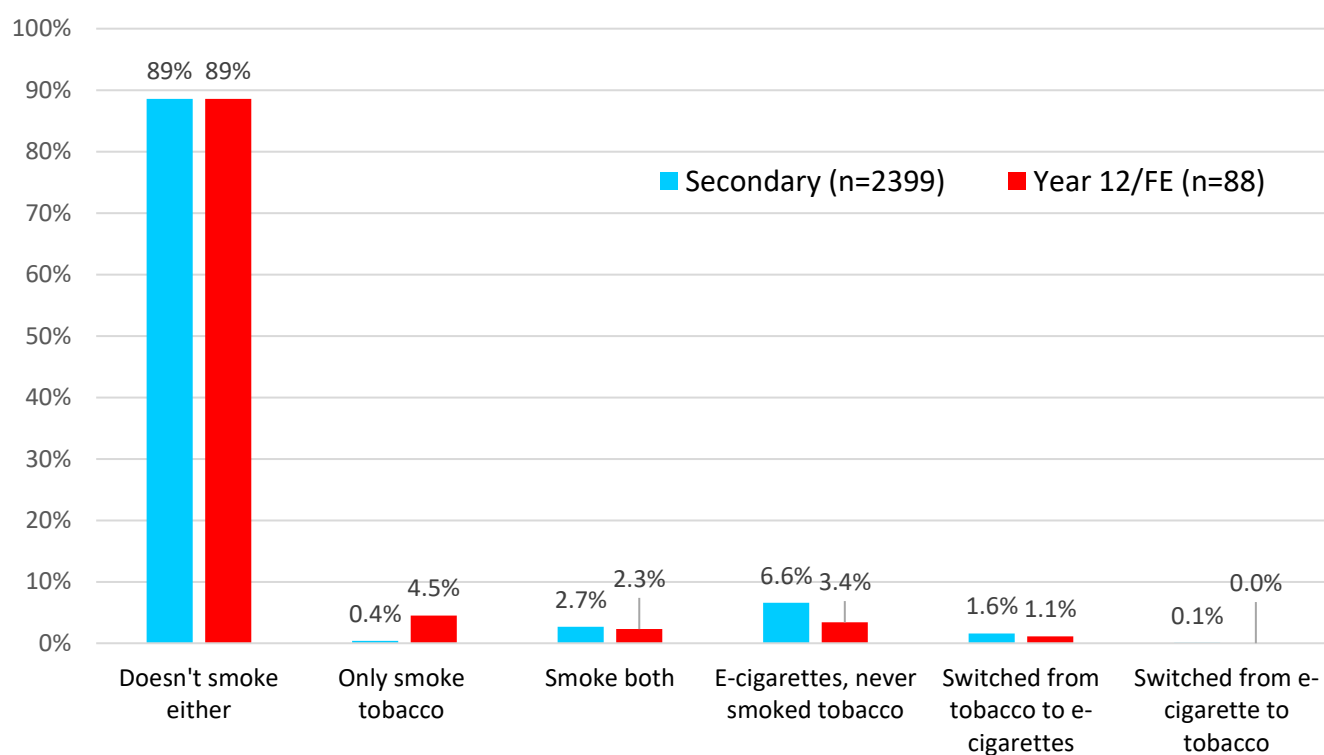
Of those who smoke regularly – the average was 6.3 a week, this is an overall average decrease from 2019's 6.7 cigarettes a week.

34% of the pupils who smoked (n=178), said they would like to stop smoking, 66% did not want to stop smoking. This is a decrease from 2019 when just over half (50.5%) said they wanted to stop smoking.

Only 8.5% of all pupils felt they needed more support and knowledge about smoking about smoking (16% primary, 13% secondary and 5% Year 12) and 80% felt smoking had been covered well in PSHE.

81% of all pupils reported they have never tried e-cigarettes (vaping) down from 93% in 2019. 10% had only tried it once or twice. 9% vaped monthly or more and of those, 3% weekly or more. This has increased from 6% who reported they used e-cigarettes in 2019 and is much higher than the 5% reported in other regions (OxWell 2021). Figure 3.54 over the page.

Figure 3.54: Smoking and vaping behaviour



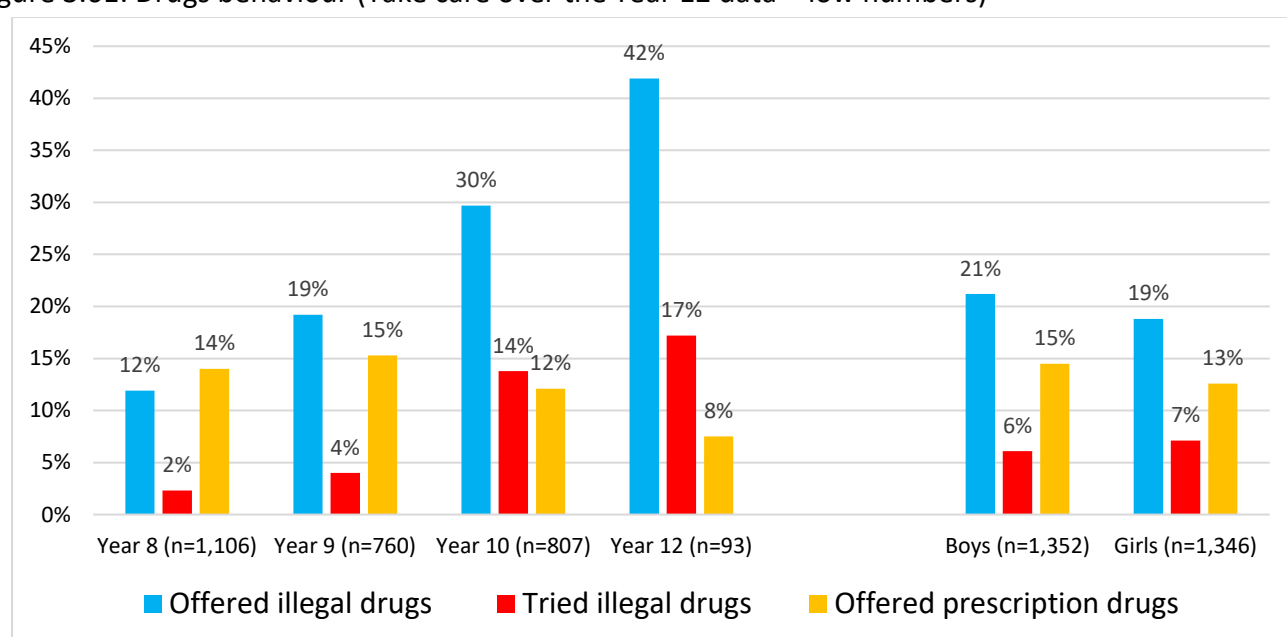
Less than 2% of pupils who smoke either tobacco or e-cigarettes had switched from tobacco to vaping whereas 7% of the secondary pupils vaped but had never smoked.

Drugs and other illegal substances (Secondary and Year 12/FE only)

There was a similar trend of decline regarding illegal drugs where more than 93% said they had never tried illegal drugs. 7% of young people reported they have tried illegal drugs (down from 9% in 2019), although 20% have been offered them (down from 24% in 2019). In other regions in England the overall average was lower – where 16.5% reported they have been offered illegal drugs or pharming (OxWell 2021) and about the same (8%) had taken them. However, this was a combination question in the OxWell survey which makes it difficult to run a direct comparison. (Figure 3.61)

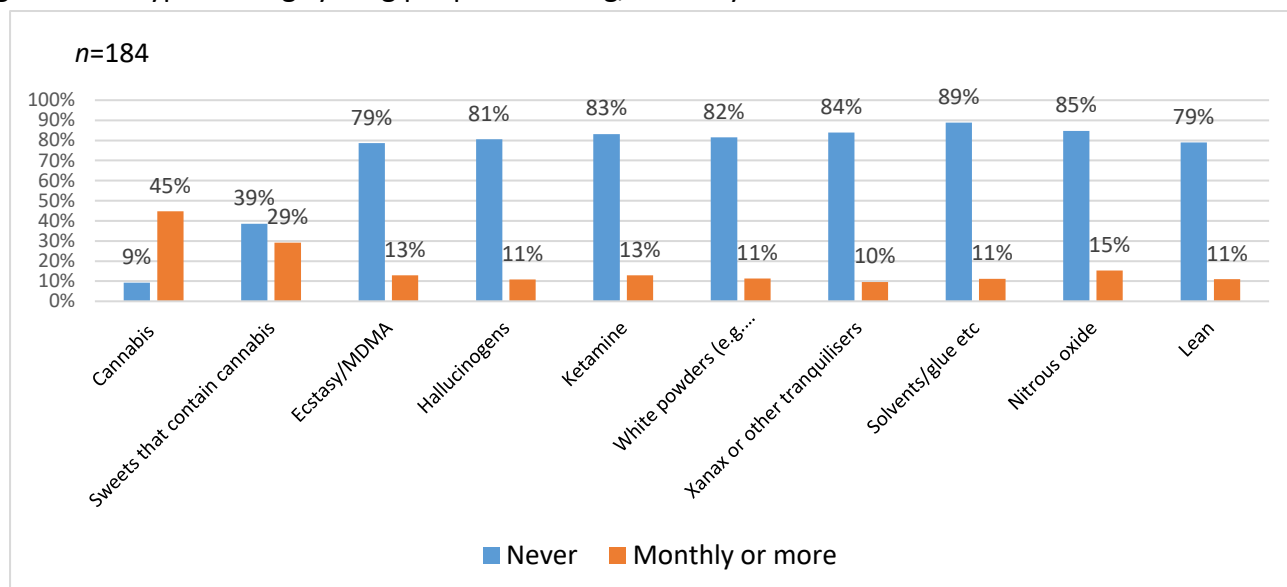
15% of South Gloucestershire young people reported they have been offered prescription drugs that were not their own (Pharming) and 14% had tried them.

Figure 3.61: Drugs behaviour (Take care over the Year 12 data – low numbers)



Being offered and trying illegal drugs rose with year groups, but there was little difference in genders overall, with boys slightly more likely to be offered illegal drugs but less likely to try them. Being offered prescription drugs (pharming) was higher in younger pupils (peaking in year 9).

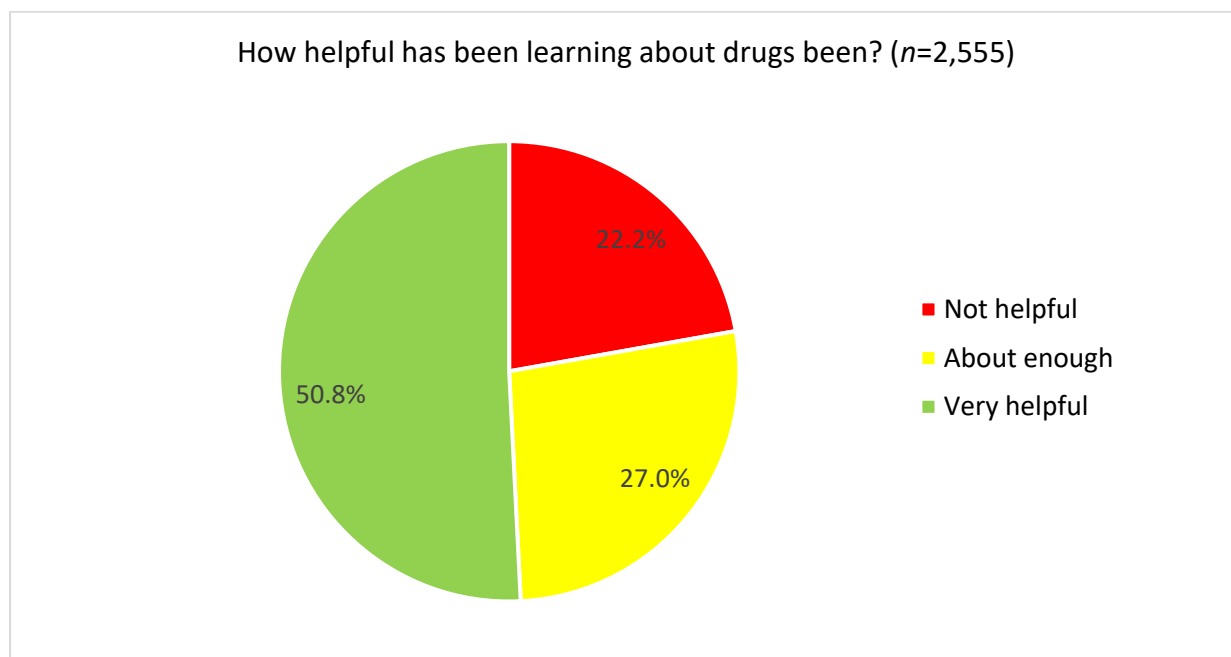
Figure 3.62: Type of drugs young people are using, monthly or more



Most pupils who use illegal substances are using Cannabis (90%) or sweets containing cannabis (61%). Over 80% of pupils who are using illegal substances are not using the other drugs that we listed (ecstasy, ketamine, tranquilisers, cocaine, solvents etc). Figure 3.62 above.

9.2% of pupils felt they would like more support and knowledge about drugs and illegal substances. Over half (51%) felt that what they have learnt in PSHE lessons has been helpful.

Figure 3.63: How helpful have pupils found it to learn about drugs and other illegal substances



Key Findings 4. School experience and aspirations

4.1 Inclusion

Do you think that your school tries to make you feel included, as a part of the school community?

Just over half (56%) of pupils felt that their school made them feel included and part of the school community. 23% felt this never or not often happened. (Figure 4.11)

There was a steep decline in secondary compared to primary phases overall, and boys tended to feel more included than girls overall with “other” slightly less included than girls.

Figure 4.11: Pupil inclusivity

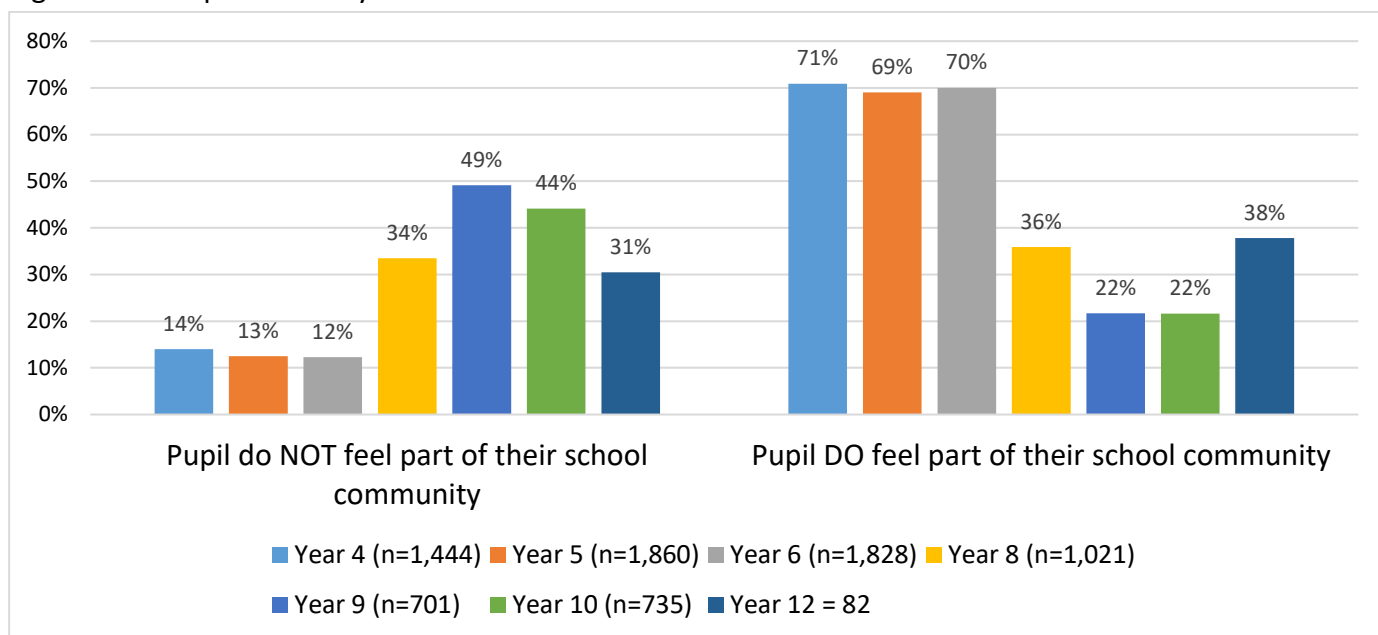
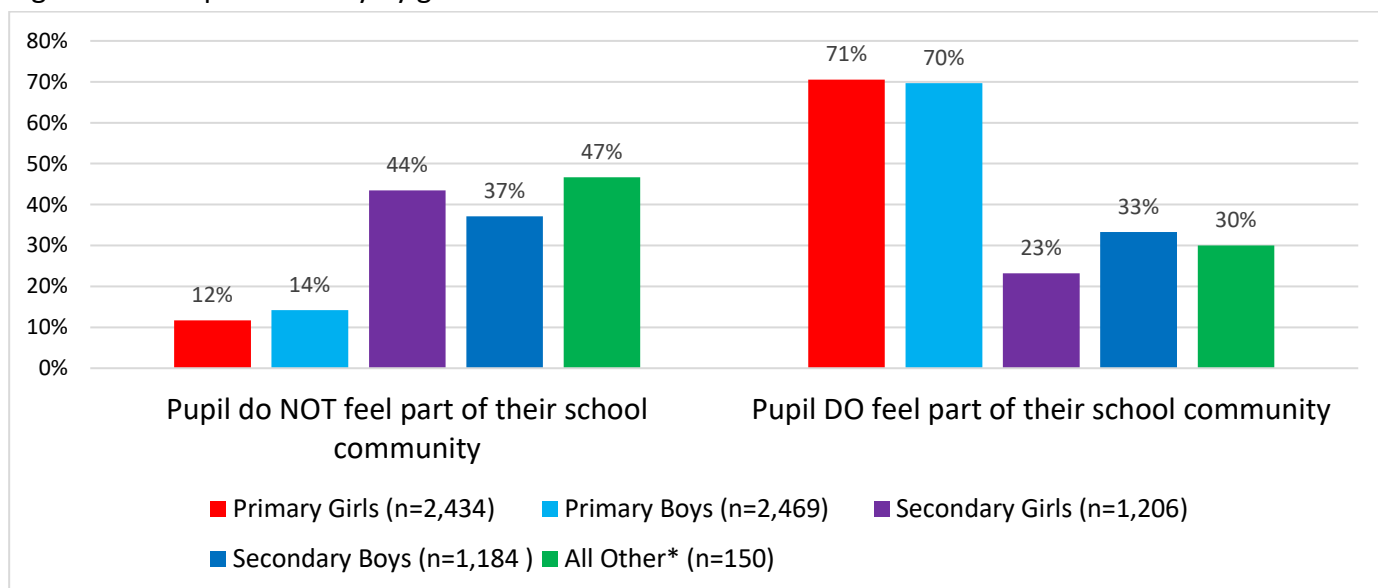


Figure 4.12: Pupil inclusivity by gender

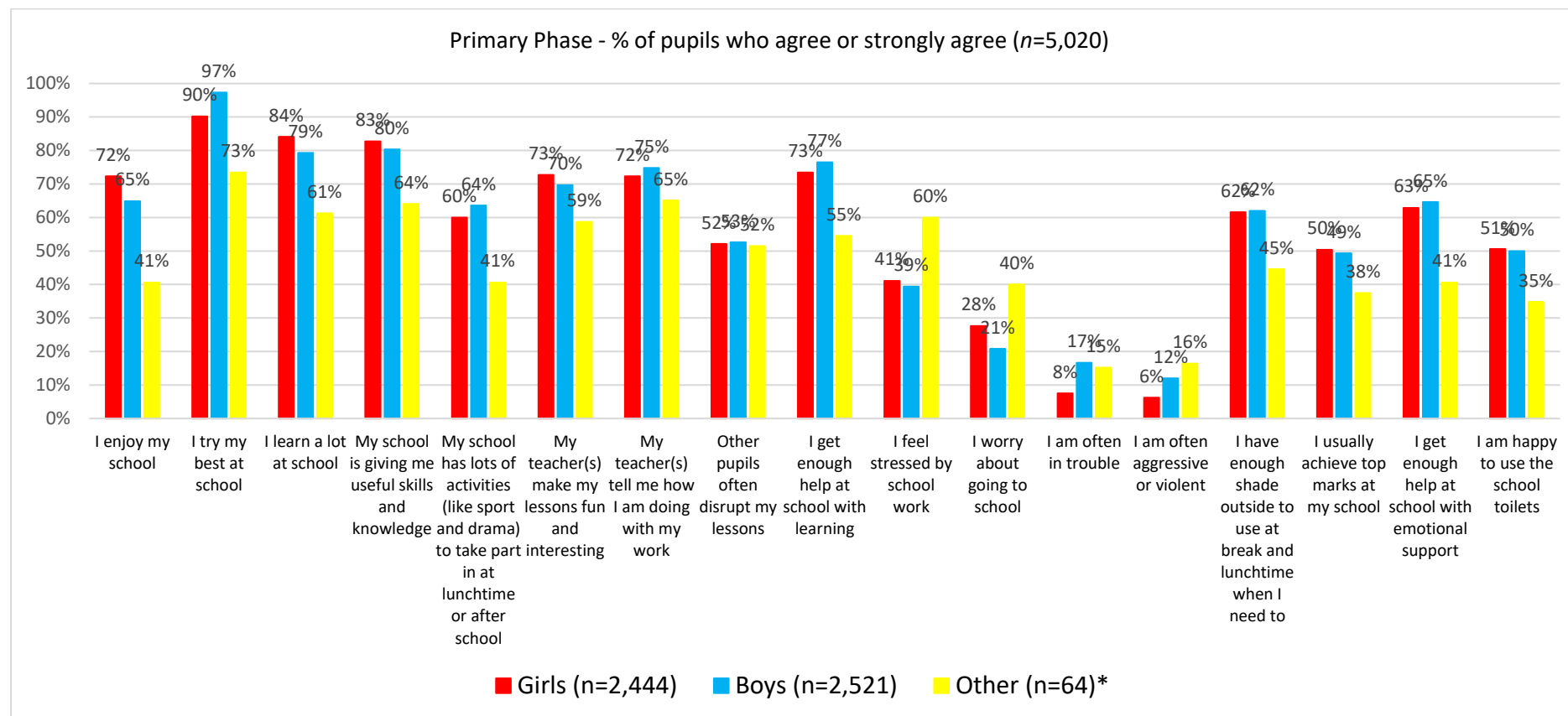


(* Other were too few to run a phase analysis)

4.2 School Experiences

How do pupils describe their school experiences?

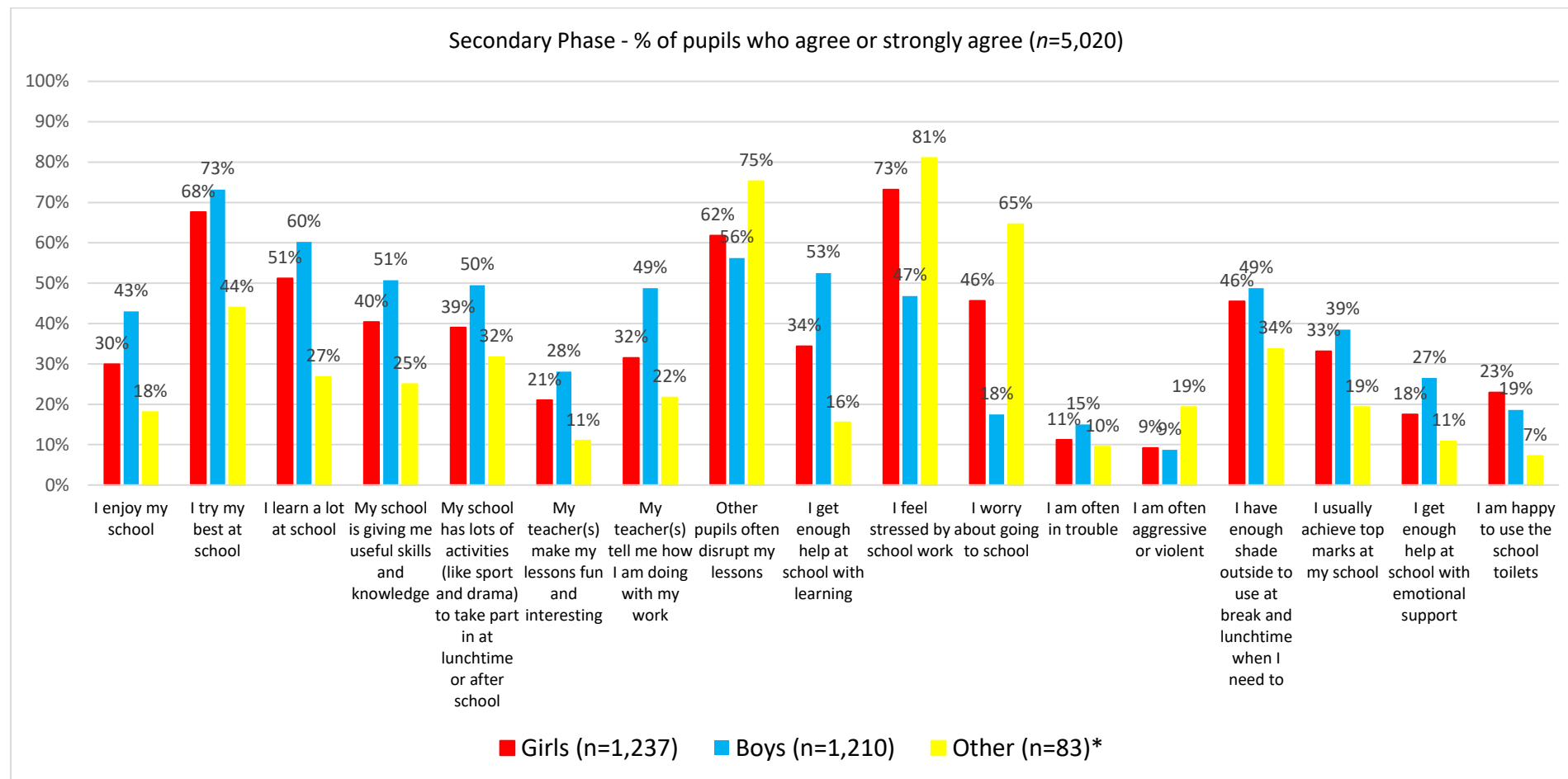
Figure 4.21: Primary Phase



**Other – relatively small sample size*

How do pupils describe their school experiences?

Figure 4.22: Secondary Phase



*Other – relatively small sample size

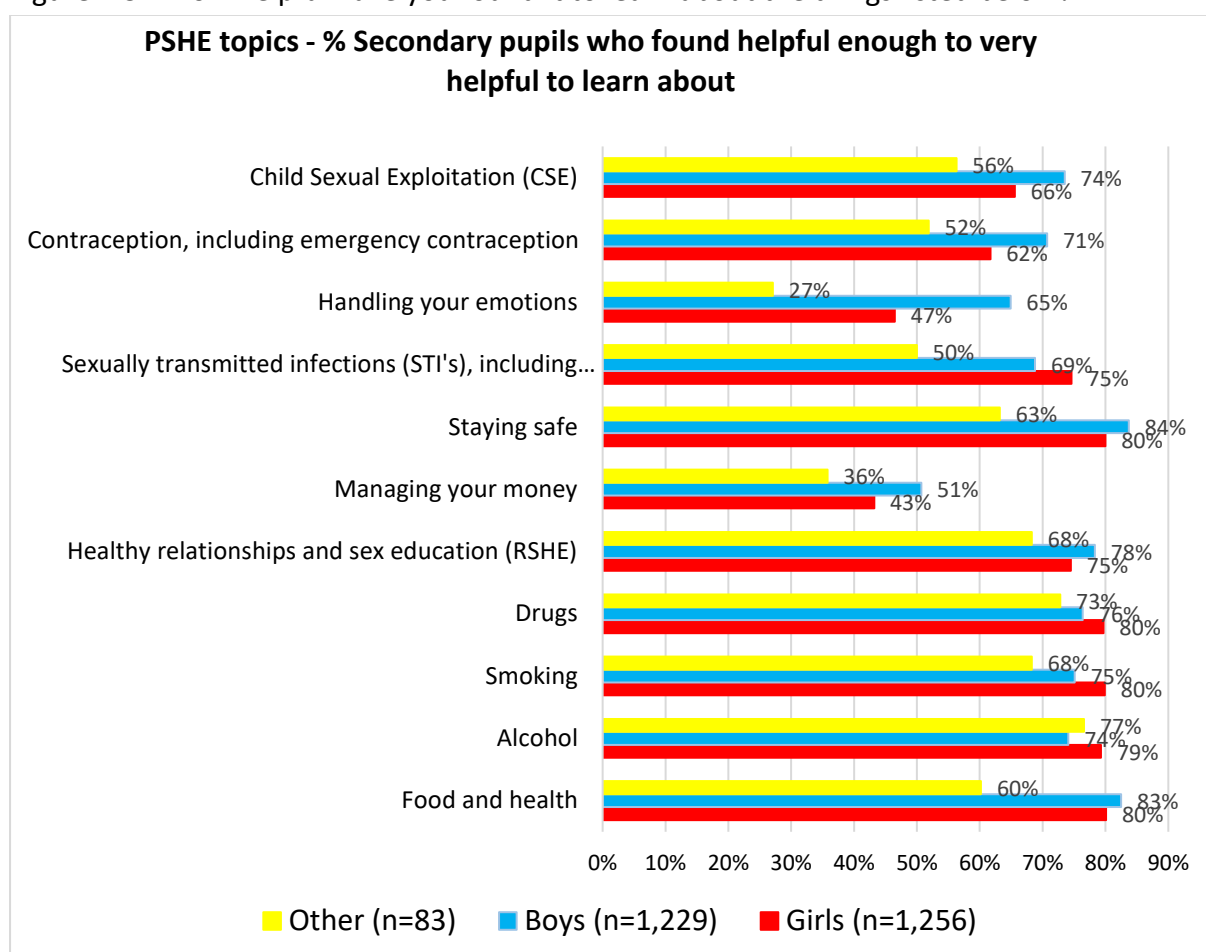
Overall boys expressed a more positive experience than girls on both phases and pupils who described themselves as “other” averaged the least positive experiences. These are illustrated in figures 4.21 and 4.22 on the previous pages.

Primary phase pupils rated their school experiences (figure 4.21) much higher than secondary (figure 4.22) on average. Primary pupils averaged the highest ratings for, “Try my best” and the least, “Often in trouble”. Secondary also rated, “Try my best” highly but being “Stressed by schoolwork was their highest on average”. Only 1 in 5 secondary pupils were happy to use the school toilets – this was down to 7% for “other”.

4.3: How helpful has it been to learn about various aspects from the PSHE Curriculum?

Secondary pupils found learning about staying safe and food and health the most useful topics they have learnt and managing money was cited as the least helpful topic they learnt about (Figure is 4.31)

Figure 4.31: How helpful have you found it to learn about the things listed below?



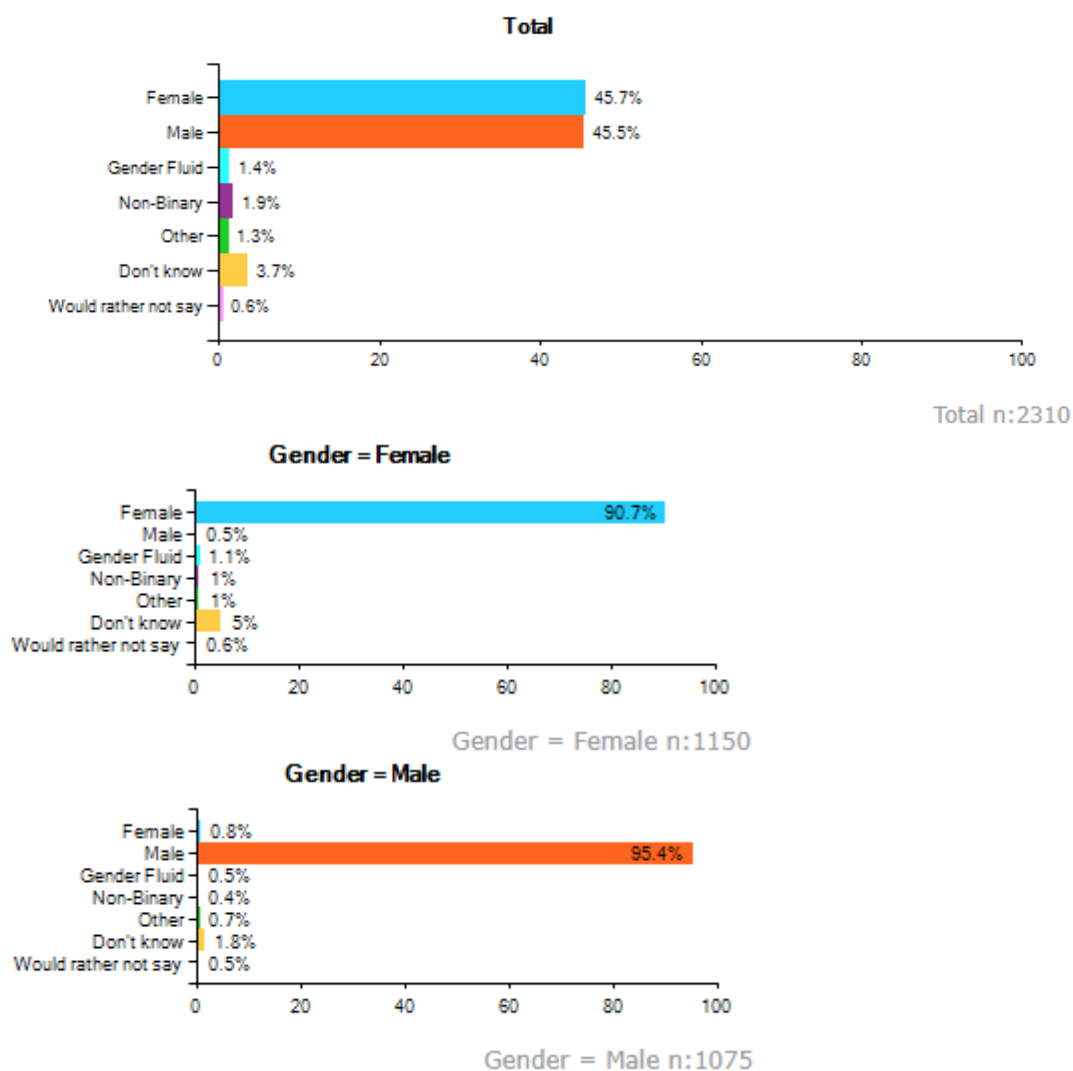
Key Findings 5: Sexual identity and sexual health (Secondary phase)

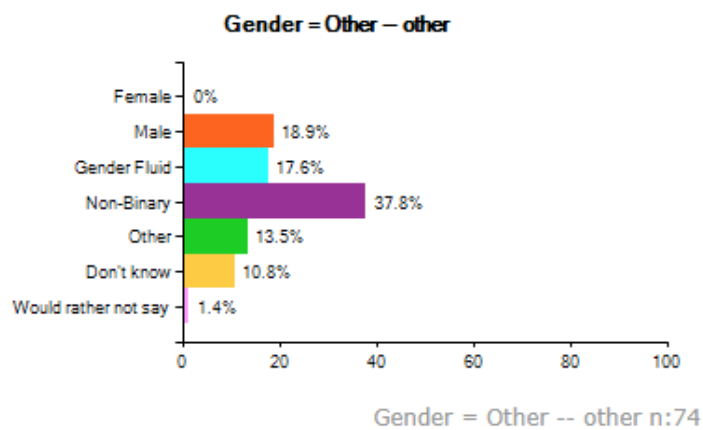
Secondary phase pupils were asked about both their sexual identity (beyond “other” as in the initial gender question in the demographics section) and their sexual orientation.

5.1: Sexual identity

91% of young people identified as male or female and 4% didn’t know (Figure 5.11). There were some differences between those who originally reported they were male or female, with girls more likely to be unsure about their gender identity. Non-binary was the most popular (38%) for those young people who identified as “other”.

Figure 5.11: Sexual Identity (Secondary & 6th form/FE pupils)

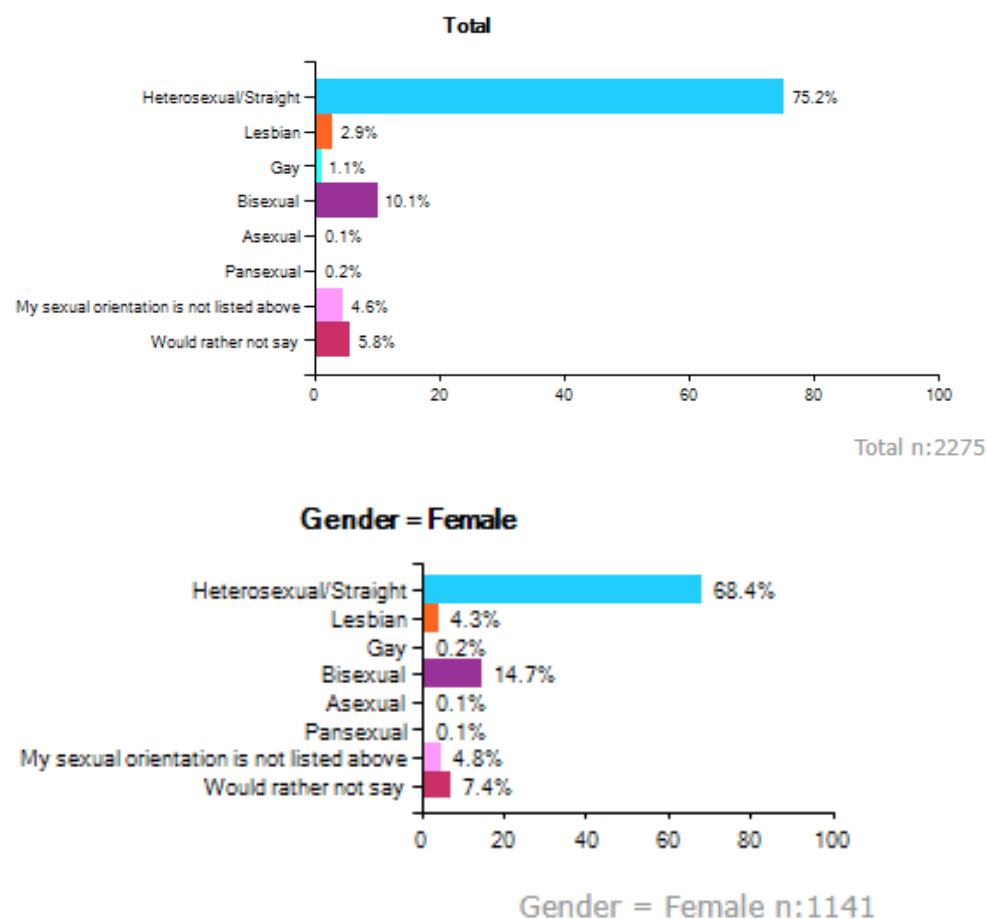


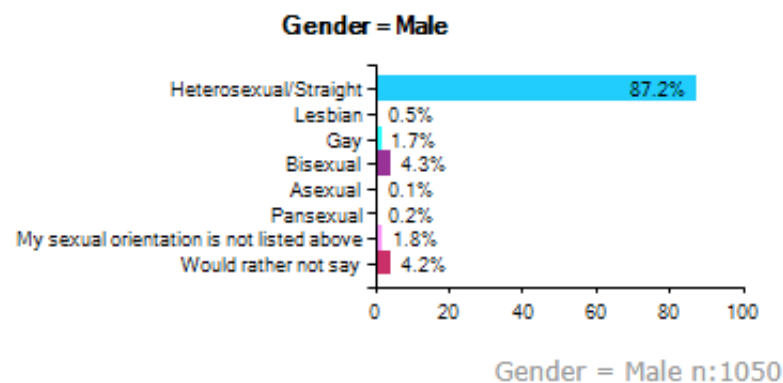


5.2: Sexual Orientation

75% of young people identified as heterosexual and 10% as bisexual. 39% of young people who identified as “other” (n=72) reported their sexual orientation is not listed. (Figure 5.22).

Figure 5.21 Sexual Orientation (Secondary and 6th form/FE)





5.3: Sexual Health

Access to contraception

62% of pupils reported that they knew where to get hold of a condom (Figure 5.31) but nearly half (49%) were not confident about how to use one (many of these may not be sexually active). Boys were more likely than girls to know where to get a condom and were more confident on how to use one.

Figure 5.31: Do they know where to get hold of a condom? (Secondary pupils)

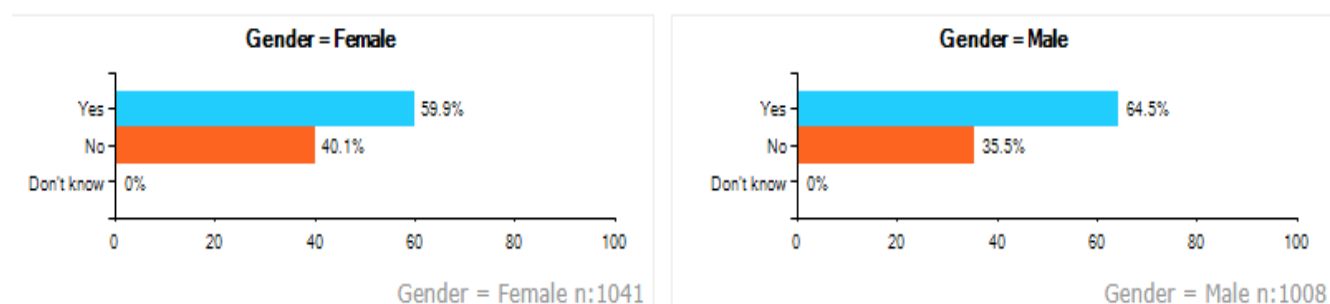
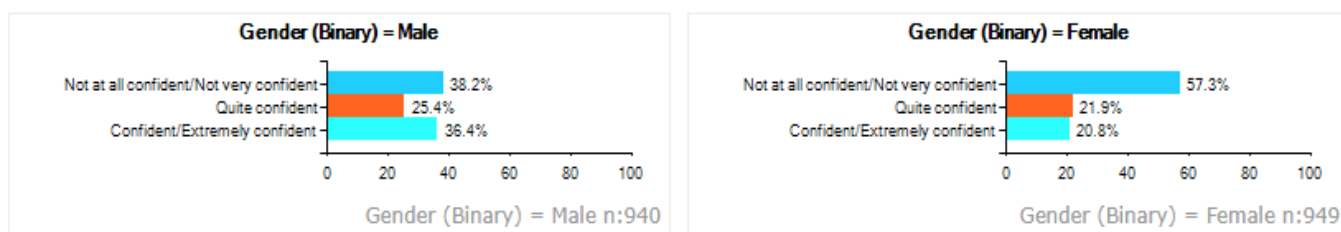
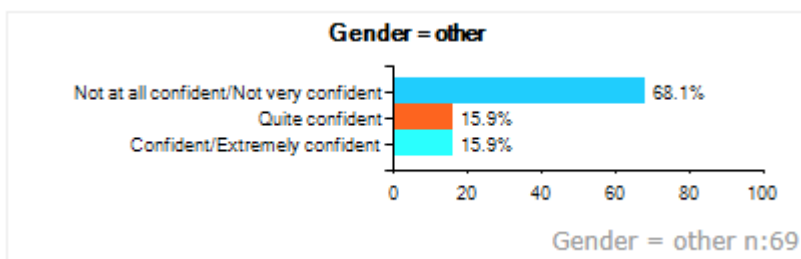


Figure 5.32: How confident are they about using a condom?

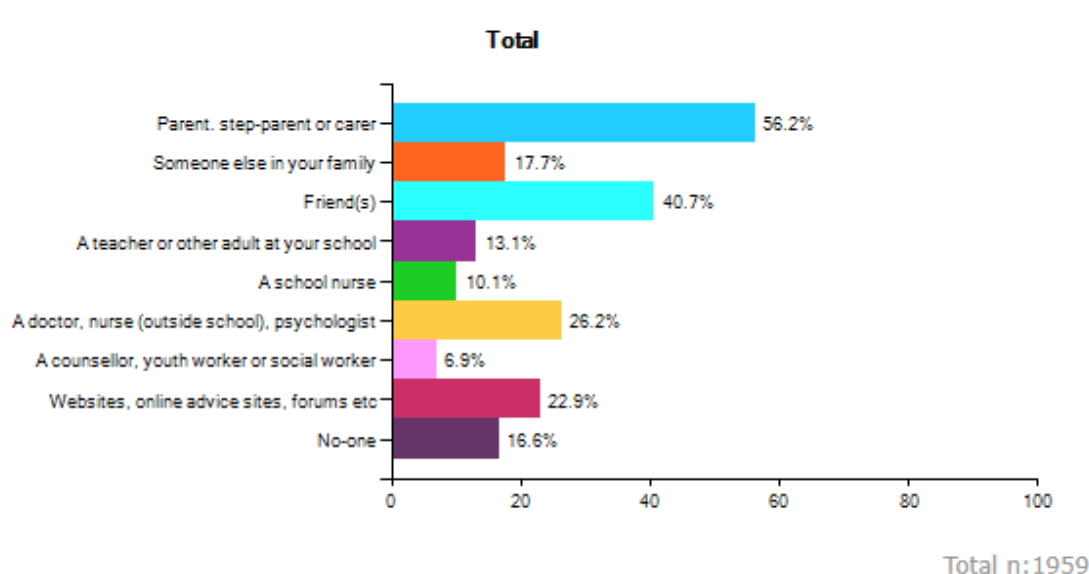


Those who identified as “other” were even less confident (below),



The majority (74%) of pupils would go to someone in their family for help and advice about contraception/emergency contraception/not getting pregnant or preventing STI's. Only 10% felt they would go to the school nurse (Figure 5.33).

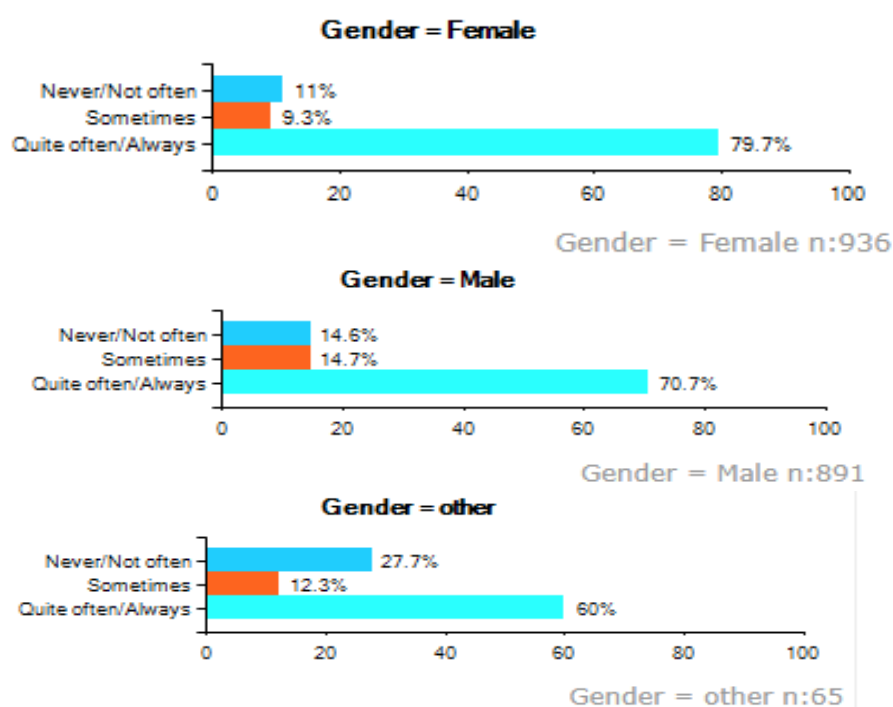
Figure 5.33: Who would they approach for help and advice about contraception/emergency contraception/not getting pregnant or preventing STI's



How comfortable do they feel to say “No” to sexual activity?

Overall girls were more confident (80%) about saying “No” than boys (71%) and those identifying as “other” the least confident (Figure 5.34).

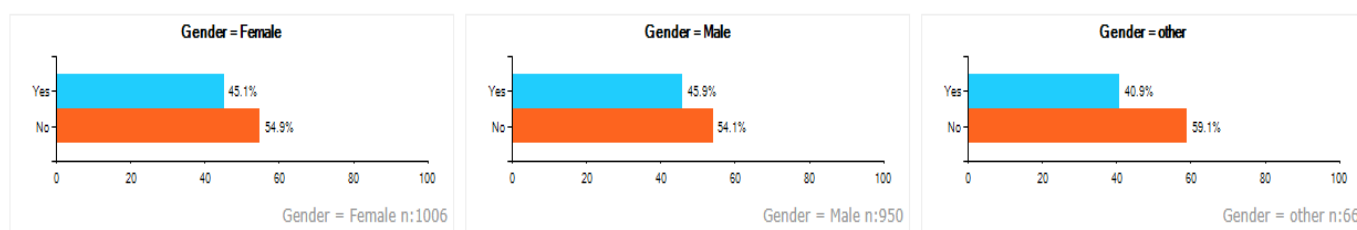
Figure 5.34: How comfortable are pupils saying “No” to sexual activity?



Do they know how and where to access contraception and sexual health advice and services?

There was little difference between genders in knowledge on how to access sexual health services – with 45% of pupils saying they knew how to do this.

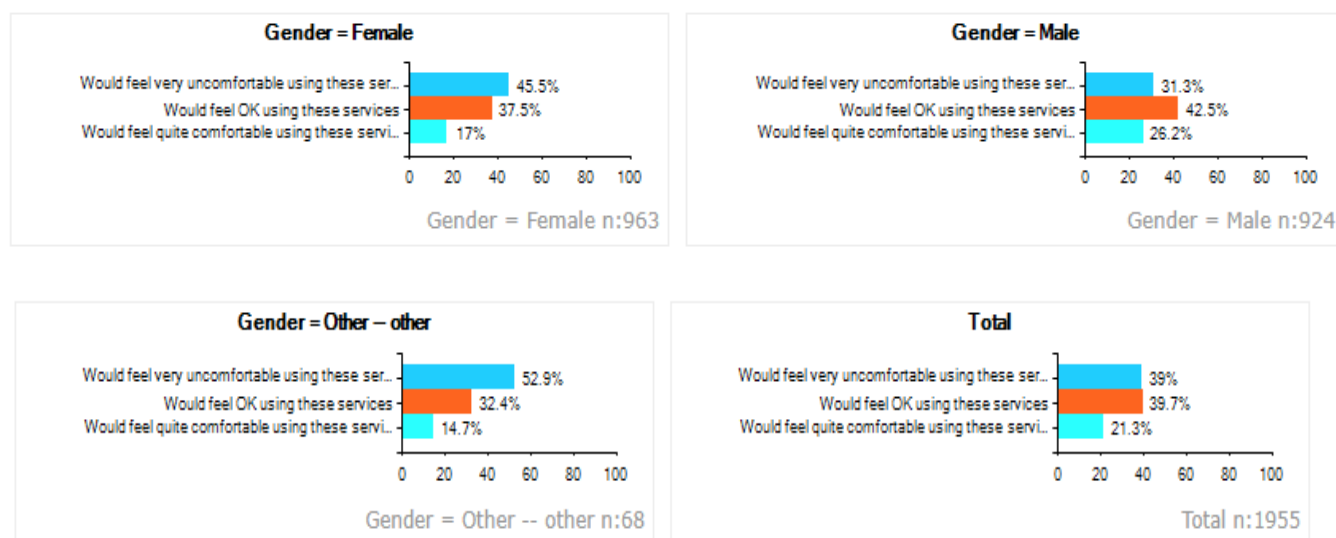
Figure 5.35: Do pupils know how and where to access contraception and sexual health services?



How comfortable would they be using sexual health and contraceptive services?

Girls were far less comfortable than boys in accessing these services (Figure 5.36 over the page) with 46% of girls compared to 31% of boys saying they would feel uncomfortable or very uncomfortable. Over half (53%) of pupils who identify as ‘other’ said they feel uncomfortable or very uncomfortable.

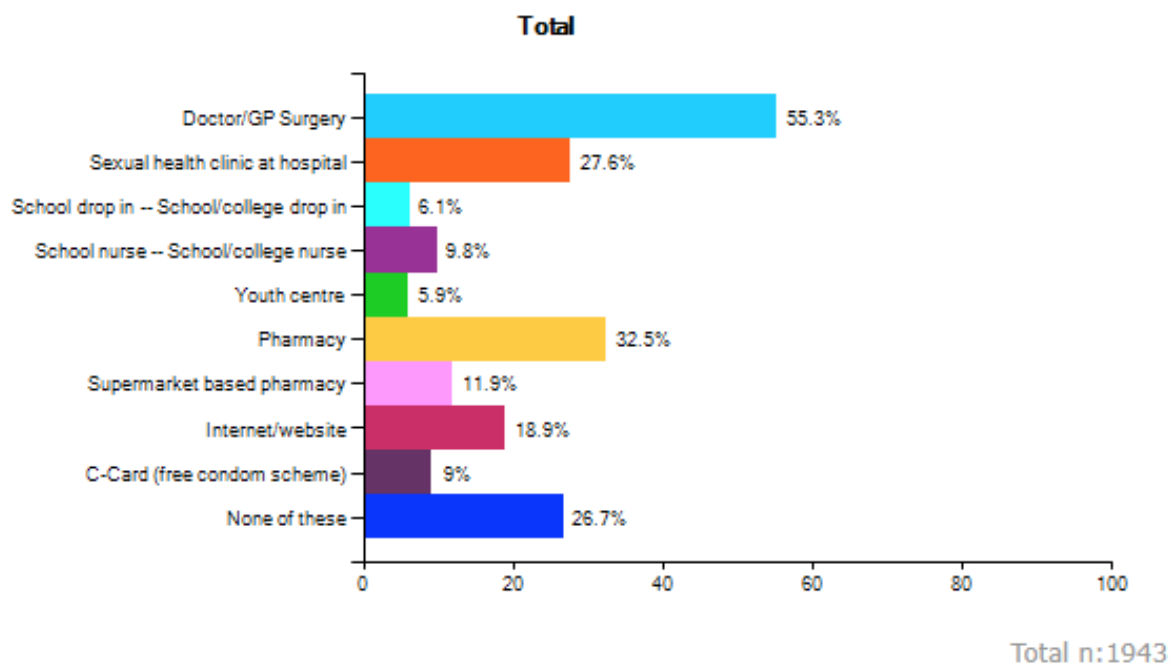
Figure 5.36: Comfortable in using sexual health services



Which of the sexual health and contraception services listed below would you feel comfortable using?

Overall young people were most comfortable going to their doctor and using GP services. There was not much difference between genders in this question. (Figure 5.37)

Figure 5.37: Which of the sexual health and contraception services are young people comfortable using? Secondary and 6th form/FE phase.



Section 6: Lockdown experiences

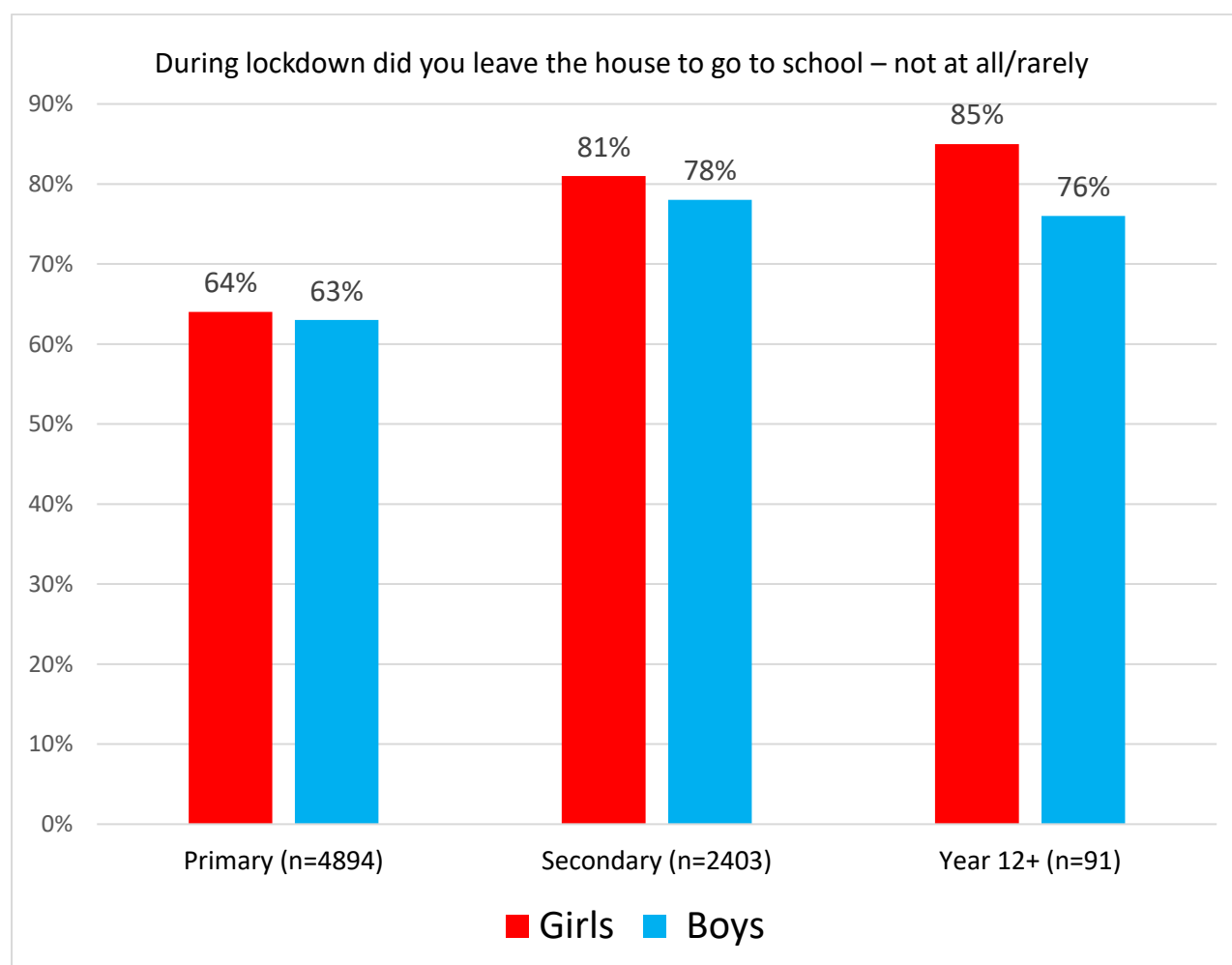
South Gloucestershire Council has invested more money into children's social care services to meet the rising need caused by the pandemic. An extra 60 staff are being taken on to provide more support to children, while the council is working closely with voluntary sector partners to support young people across the district and an extra £10 million is to be invested in social care over the next 5 years.

6.1: Lockdown experiences

How many pupils did not leave the house during lockdown?

Older pupils were more likely not to have left the house during lockdown than younger pupils (Figure 6.10).

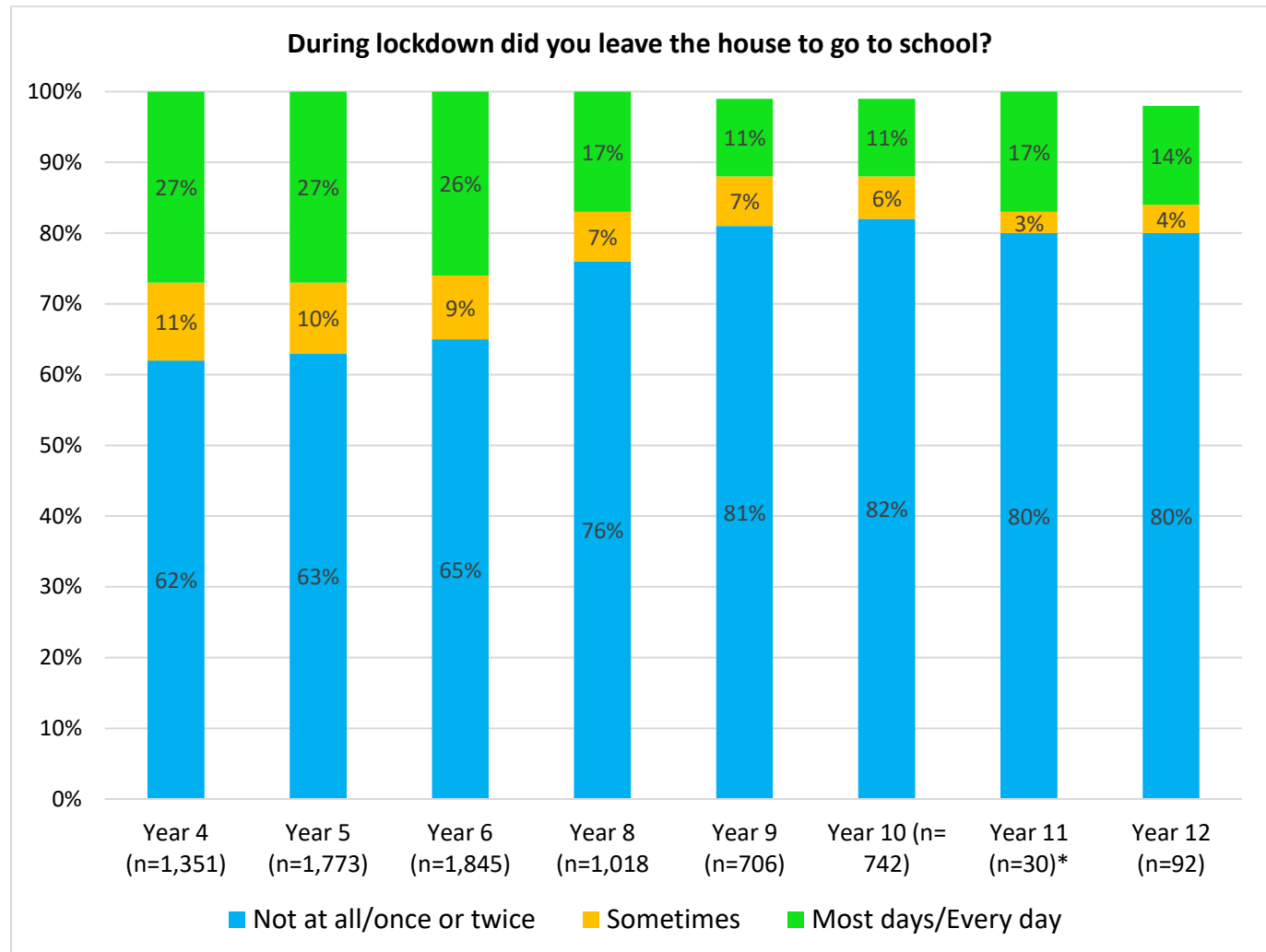
Figure 6.10: What percentage of pupils didn't leave the house very often during lockdown?



Older pupils were less likely to have attended school than younger pupils during lockdown. (Figure 6.11)

27% of primary pupils went to school most/every day during Lockdown, 13.5% of secondary pupils and 15% of 6th form/FE went to school/college every day.

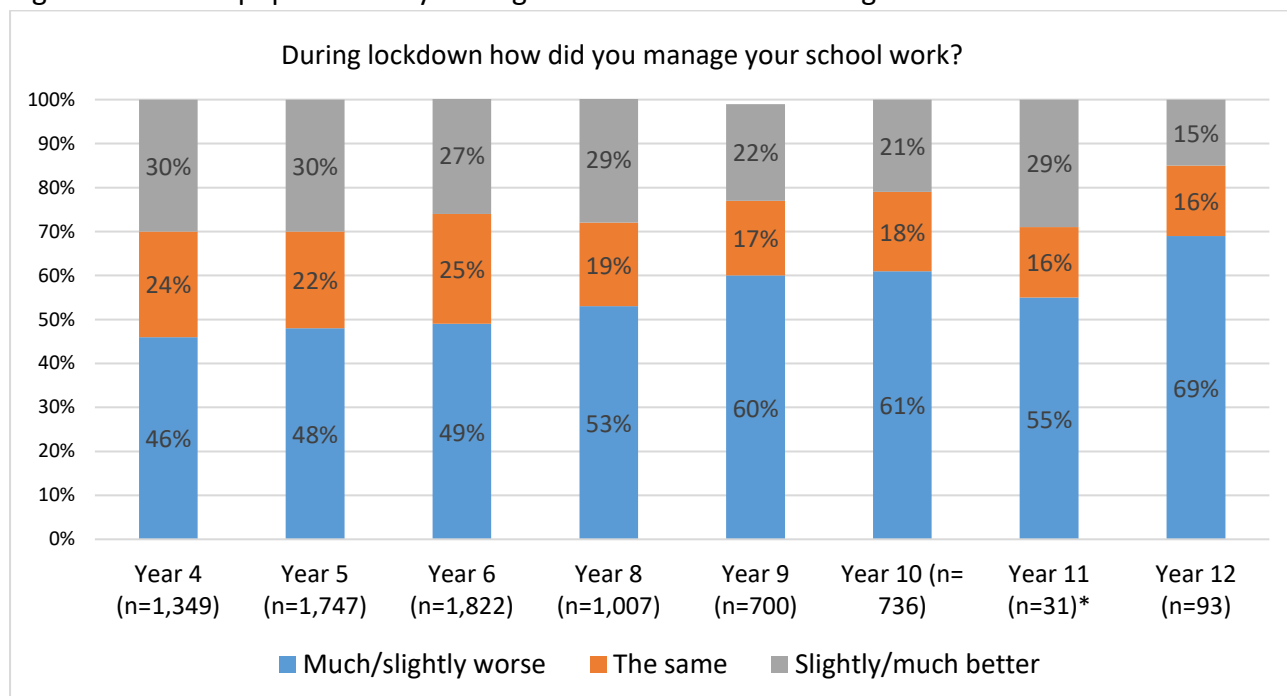
Figure 6.11: Frequency pupils went to school during lockdown.



How did pupils manage their schoolwork during lockdown?

Overall, just over half of pupils found it harder to manage their schoolwork during lockdown. This percentage increased as pupils got older (Figure 6.12).

Figure 6.12: How pupils felt they managed their schoolwork during lockdown



Older girls were more likely to report problems with their schoolwork online than boys (Figure 6.13), however they also spent, on average, more hours doing schoolwork each day (Figure 6.14 and 6.15 over the page).

Figure 6.13: How many pupils had problems with their schoolwork online

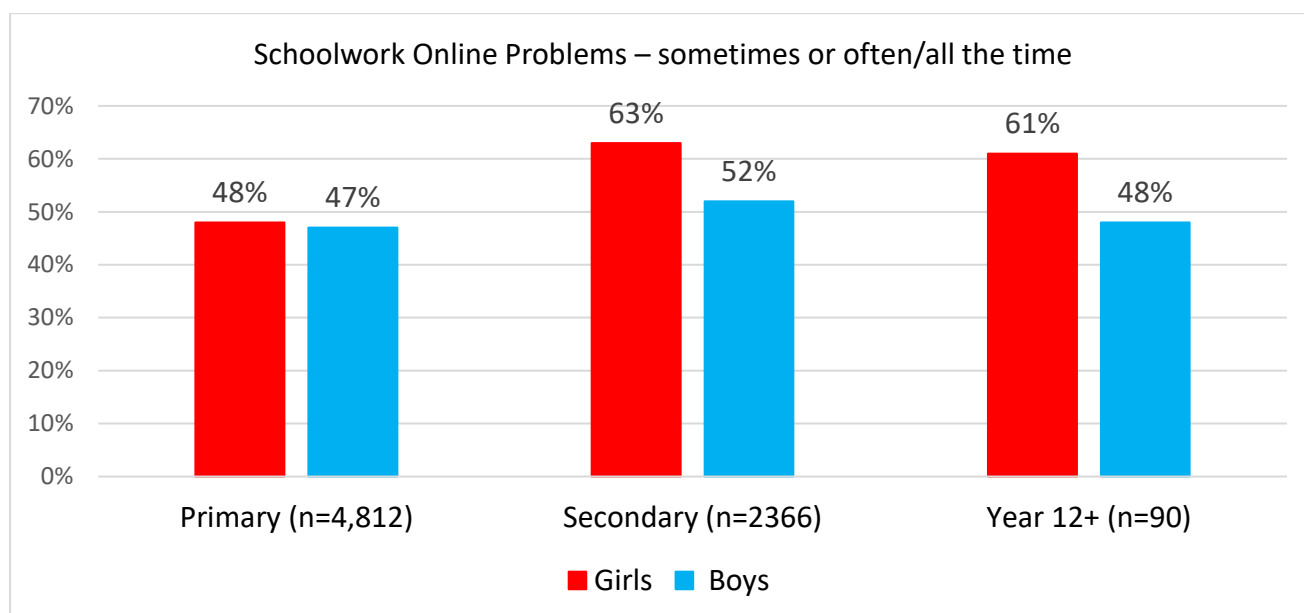


Figure 6.14: How many hours a day did pupils spend on schoolwork during lockdown

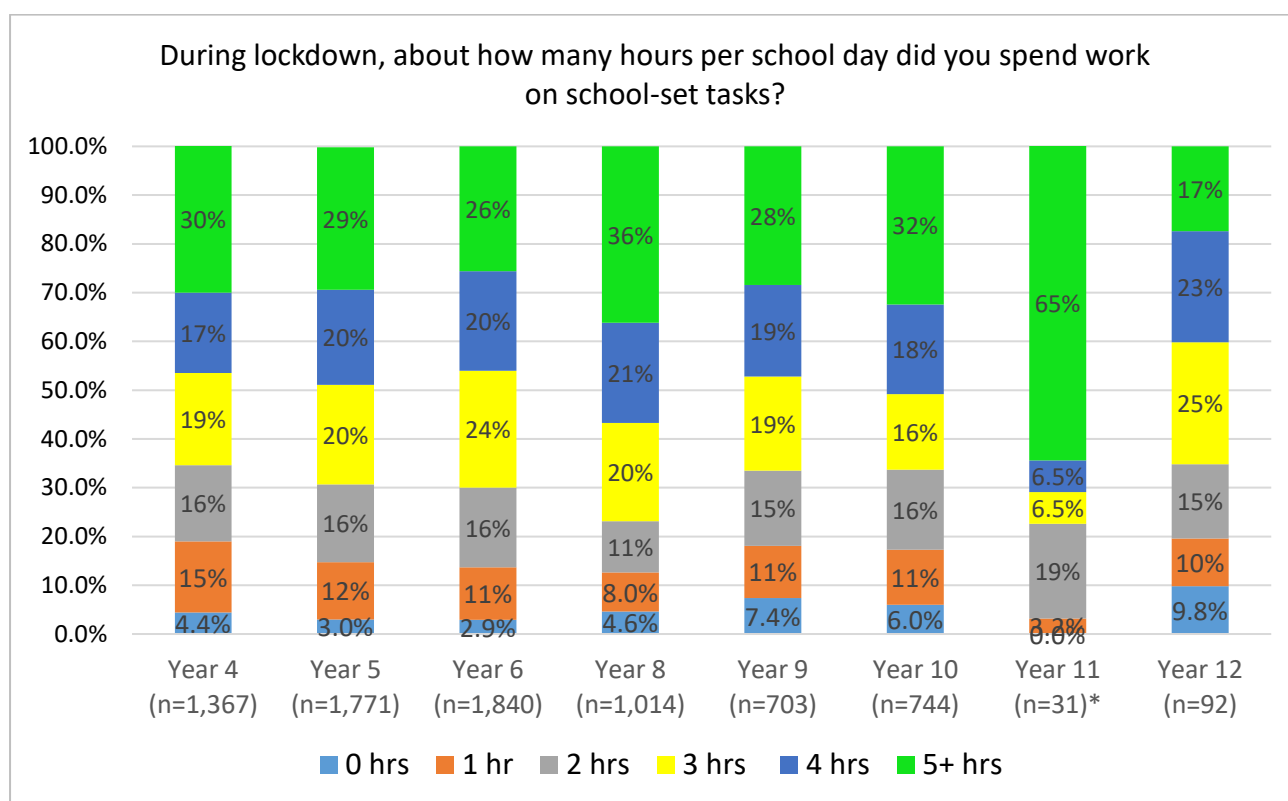
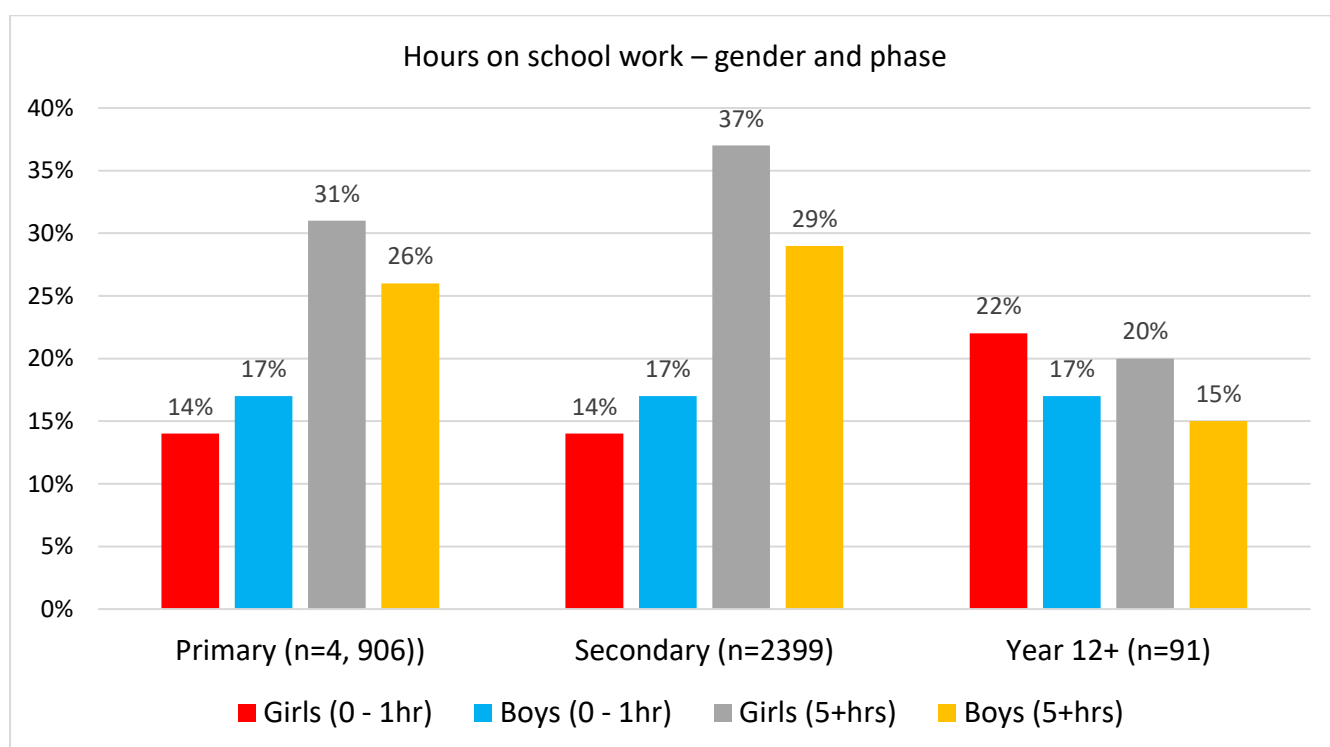
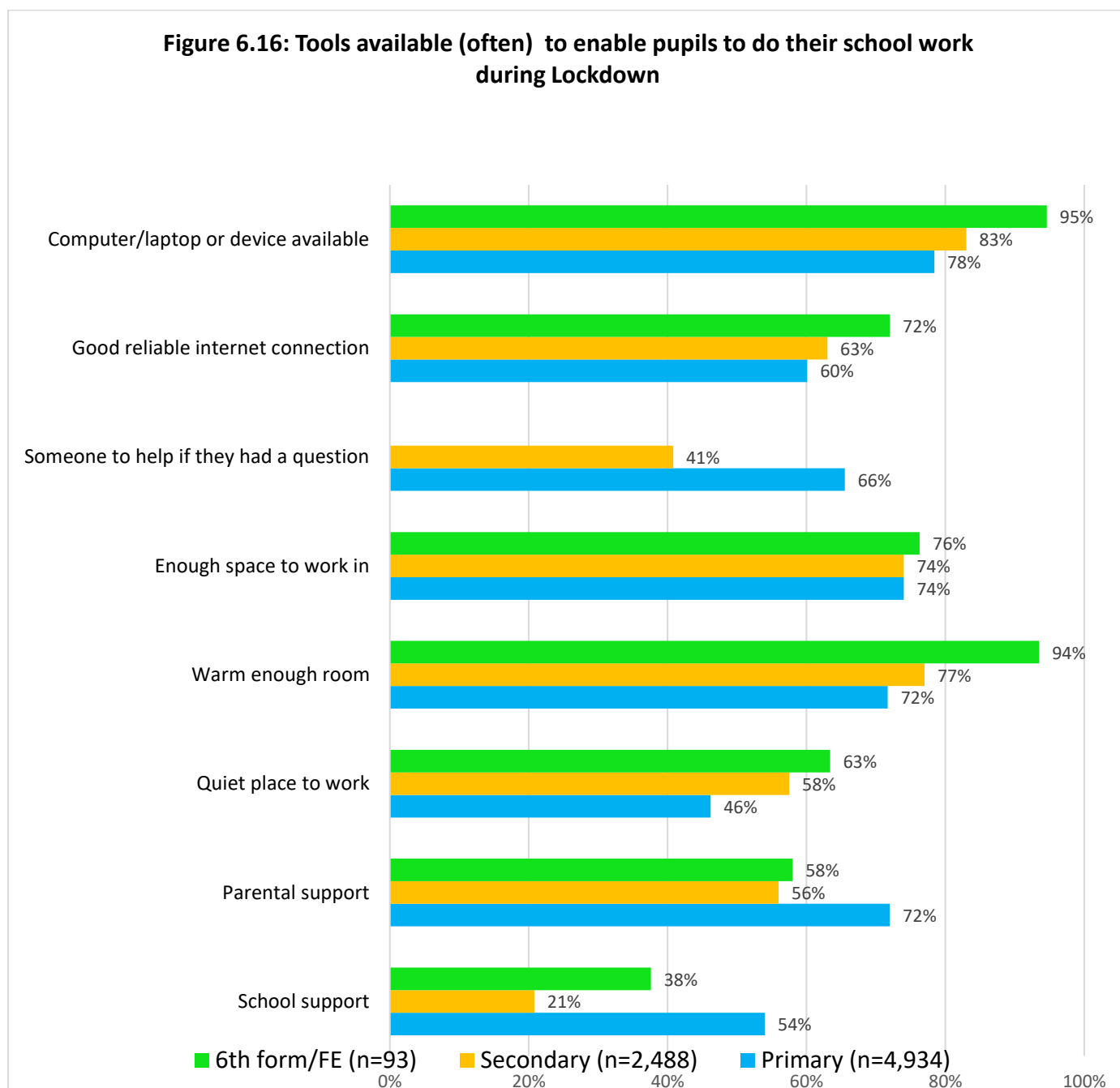


Figure 6.15: How many hours a day did pupils spend on schoolwork during lockdown by gender



What equipment did they have during lockdown to help do their schoolwork?

Most pupils had a computer or laptop or device to their schoolwork on (Figure 6.16) – only 6% did not and they had a warm enough room to work in (5% did not), although this wasn't always quiet without distractions – 18% said it was never or hardly ever quiet and only half said often. Overall pupils reported better support from parents at home – 66% said they often had enough support, than from school – 43% said they felt they had enough support from teachers at school overall.



Discussion

Despite the difficulties schools faced with the disruption of lockdown, COVID infections and adaptive timetables we had a very good response from 78 schools and over 8,000 responses, which is slightly more than the 2019 South Gloucestershire OPS.

Feeling Safe

Most pupils (91%) continued feeling safe at home (3% felt unsafe) and nearly three quarters felt safe at school (10% reported feeling unsafe). This is slightly higher but very similar to other regions in England. The proportion who felt safe from crime was slightly less than other regions but again very comparable. Overall girls felt less safe than boys and young people who do not identify as either male or female (other) felt least safe of all. In a similar pattern, twice as many girls as boys reported being a victim or witnessing abuse on a regular basis. Pupils who identified as “other” reported even more abuse. There is no reliable prevalence data on domestic abuse, but the Crime Survey of England and Wales (CSEW) calculated an estimated 1.6 million women aged 16 to 74 years experienced domestic abuse in the previous year (ONS, 2020). Only 18% of victims report this abuse.

Fewer pupils reported that they had run away from home than have been reported in previous years and fewer pupils reported that they have been in serious trouble with the police, fewer felt they had to join a gang and fewer reported they feel they had to carry a knife compared to previous surveys. Nearly double the rate of pupils reported they missed school for 15 or more days – 25% of school absences were attributed to COVID.

Mental and emotional wellbeing

Mental wellbeing has declined significantly in 2021 but the decrease in rates recorded were similar across all phases to those we have observed across the South and North-West of England (OxWell 2021). The primary phase and Year 12 were slightly better overall in South Gloucestershire and the Secondary lower overall. South Gloucestershire OPS2021 recorded twice as many pupils (4.8% compared to 2.4% in OxWell) who said they frequently went to bed hungry as in the other regions. This is a good proxy for deprivation and has a strong correlation with mental wellbeing.

Confidence in their future had dropped for all pupils from Year 5 onwards in 2021 and by year 10 under half (47%) of pupils responded they were confident about their future. This was nearly identical (46%) to the OxWell findings in other counties in England.

The drop in confidence about the future reflects the more than doubling of low mental wellbeing over the pandemic period. In 2021 43% of all secondary pupils were categorised as having low mental wellbeing (the same as in the 2020 lockdown survey). This is a higher proportion than the average found in other regions. Girls had worse mental health averages

than boys and those who are young carers, those living in poverty, and those with family members in prison have the lowest ratings for mental wellbeing compared to all pupils and other groups. Those with disabilities and dyslexic pupils also had particularly low scores. Collaborating these findings, about a fifth of primary and secondary/Year 12+ are very stressed and girls are more stressed than boys, (26% compared to 17%) with the gap increasing with age. Over half young people reported they are worried about their appearance, being discriminated against mental health. Over 60% of young people reported they were stressed by schoolwork and this increases with age which is a bit higher than other regions.

Self-harm (asked in secondary and 6th form/FE) is a recognised key indicator of poor mental health and wellbeing and in line with the mental wellbeing findings we have observed a significant increase since 2019 to 26% in 2021 from around 20% in previous years and is higher than the average for other regions (19%). 8% (33% of self-harmers) had self-harmed once or twice - so called experimental self-harm and 9% are chronic self-harmers (weekly or daily). Nearly 5% of young people had tried to overdose and two thirds of these have told someone about the attempt. 72% of young people who self-harmed monthly or more frequently felt they had not had enough help in handling their emotions.

In contrast to the mental health data, we have seen a drop in reported bullying in 2021 to less than half the levels reported in previous years. It has dropped from 27% to 12% in the primary phase and 16% to 8% in secondary. Over three quarters (78%) of pupils reported they had not been bullied in the previous year. As in previous years the most common form of bullying was verbal abuse in secondary phase (14%) and the least common was cyber bullying (5%). Nearly two thirds of bullying takes place at school, which may explain the drop in this year's incidences.

School experience and aspiration

Just over half of pupils felt that their school made them feel included and part of the school community but nearly a quarter felt this never or not often happened. Secondary pupils felt significantly less included than primary pupils and girls less included than boys. Girls also recorded less positive experiences than boys. All phases rated, "I try my best" highly, and secondary girls reported they felt stressed by schoolwork (73%) far more than boys (47%). Secondary pupils rated food and health and staying safe the most helpful to learn about in PSHE. They found learning about managing their money the least helpful.

Healthy Lifestyles

Poor nutrition has a dramatic impact on school achievement and nearly half of pupils felt it has been helpful to learn about healthy eating at school. Just over 9% of pupils reported they have experienced food poverty (go to bed hungry monthly or more) – this is higher than the average for other regions (5.4%). 5% of South Gloucestershire pupils said they were eligible

for free school meals. Over three quarters of pupils ate breakfast every morning. For those that didn't, over half said they simply didn't like eating breakfast. Nearly a third of secondary phase said more time to eat at home would help. The average consumption of fruit and vegetables across all age groups was 3.3 portions a day (at least five portions are recommended for children). On average most pupils reported that they ate unhealthy snacks (sweets, chocolate, biscuits and crisps) about once a day, takeaways once or twice a week and unhealthy sugary drinks one a week. The majority (71%) said they never drink energy drinks.

On average pupils had 8 hours 20 minutes sleep a night and took an average of 1 hour to get to sleep once they went to bed (i.e. were in bed for over 9 hours). Nearly half of pupils said they were just lying there relaxing before they went to sleep, a third of primary pupils were reading and nearly half of older pupils were on social media or playing online games.

Physical activity overall has declined compared to previous years. The exception to this are the 6th form/FE students but these results are based on relatively low numbers (Year 12/FE n=86).

The consumption of alcohol has declined overall over the years and now 90% of pupils say they have never drunk alcohol or only tried once or twice. This reflects similar findings in the OxWell surveys in other regions. Smoking has also continued to decline, although the use of e-cigarettes has risen.

Sexual Health

91% of young people identified as either male or female, 4.6% as gender fluid, non-binary or 'other' and 3.7% didn't know. 38% of pupils who identified as "other" reported they were non-binary and 18% as gender fluid and 19% identified as male.

75% of young people identified as heterosexual, 10% as bisexual and a further 10% recorded they would rather not say or their sexual orientation is not listed. More boys identified as heterosexual than girls – (87% boys compared to 69% girls) – 14% of girls recorded they identified as bisexual and 4.4% as lesbian or gay compared to 4.5% of boys identified as bisexual and 1.7% as gay.

62% of young people said they knew where to get a condom but nearly half were not confident on how to use one. 21% of girls and 36% of boys were very confident on how to use a condom. If they needed help or advice about contraception, over half (56%) of pupils would approach their parents/carers and 41% said friends. Only 10% would speak to a school nurse.

80% of girls and 71% of boys said they were comfortable in saying 'No' to sexual activity. This is similar to previous years for girls but a big increase for boys (56% in previous years).

Girls were far less comfortable than boys in accessing these sexual health and contraceptive services – nearly half (46%) of girls compared to less than a third (31%) of boys saying they

would feel uncomfortable or very uncomfortable accessing these services. Over half (55%) of pupils would be comfortable going to their GP surgery for contraceptive services.

Lockdown Experiences

Just over half of pupils found it harder to manage their schoolwork during lockdown. This percentage increased as pupils got older and is very similar to other regional findings. Older girls (63%) reported more problems with working online than boys (52%), but older girls were likely to spend more hours a day on schoolwork than boys on average.

Older pupils were less likely to have left the house during lockdown (80% vs 64%) and there was little difference in genders with younger (primary pupils) were more likely to have left their house to go to school (27% compared to 14%).

Summary

Clearly the 2021 OPS results have been affected by the COVID pandemic and lockdown experiences and we have seen a dramatic negative impact in many key areas. However, South Gloucestershire's results are in most cases broadly similar to other regions in England surveyed OxWell 2021 survey. We will be conducting a short OPS (SOPS) in May 2022 focussing on key mental health questions which should give us a good indication of how children and young people across South Gloucestershire are progressing.

Recommendations

1. Using OPS data to support key strategic outcomes across the local authority

In order that these data to influence key decision making at a strategic level a multiagency OPS oversight group has been set up. It is the ambition of this group to carry out further analysis and to share this so that children and young people's voices are represented in the many groups that exist in the local authority.

The OPS oversight group has also commissioned a short health and wellbeing survey (SOPS) to run during May / June this year, to begin to capture impact the range of catch-up and recovery interventions, currently funded through national policy, are beginning to have.

2. The CYP MH Strategy is in the process of being written following the successful completion of the CYP Needs Assessment carried out in the spring/summer 2021. The Needs Assessment engaged with several key partners from the CYP Whole Systems group, parents and carers and young people themselves, and alongside the OPS data gave us deep insight into the emerging needs of children, young people, and families. There are six priorities stemming from the Needs Assessment which will be the key focus of the strategy:

- Transition to adulthood (focus on vulnerable young people)
- Special Educational Needs and Disabilities / Social Emotional Mental Health
- Perinatal and Early Years
- Promoting mental health and emotional wellbeing (building community capacity, positive activities)
- Understanding, preventing, and responding to self-harm
- Eating disorders and eating distress

Underpinning each priority will be an action plan and a working group made up of key partners within the system. The action plans will be fluid and will adapt to the needs being seen and OPS data can be used to look at trends over time.

3. In terms of drug education and prevention work the government have released a new 10-year plan (From harm to hope: a 10-year drugs plan to cut crime and save lives (publishing.service.gov.uk) that sets out the national strategy to reduce supply, change attitudes and improve the quality of our treatment services. Locally, we are looking at how we can implement the plan and contribute to the government's targets to reduce drug-related deaths, drug-related crime and to improve health & social outcomes for those impacted by substance use. A key priority of this work that sits alongside our local drug & alcohol strategies is providing preventative, educational and targeted services for our young people. As such, we will look at the responses in the OPS on substance use along with insights from a piece of engagement with young people, their families and the professionals who work alongside them, we will review and redesign the offer for young people in South Gloucestershire.

Future ambitions

4. To ensure ongoing analysis of mental health trend data to understand the impact of the pandemic and whether this is being reversed following the rise in mental health interventions both nationally and locally. The OPS Oversight group has commissioned a short mental health survey to run this summer and so that trend data between the 2021 and 2023 OPS surveys can be better understood.

To conduct further in-depth analysis based on equalities data to better understand the inequality gaps that exist and use this to influence decision-making and commissioning of services. To date analysis of 2021 OPS data has highlighted poorer outcomes in many health and wellbeing indicators for: pupils reporting their gender as other; for pupils who have (ever) had a parent or family member on prison; for girls in year 10.

To increase participation of secondary and post 16 aged pupils and children and young people educated at home. The OPS oversight group will be undertaking some work with school colleagues to try and better understand why participation rates might historically be lower at secondary and post-16 stages. And, also to explore increasing independent access to the survey for older pupils for whom English is a second language.

To maintain and improve communications about the benefits of the OPS, and the different methods of its potential in influencing future service planning and commissioning and resource allocation across children and young people's services to ensure equity of provision and we can be confident that the right children are accessing and receiving the right support at the right time.