

2015 Children and Young People Health & Wellbeing Survey

Sexual Health Summary

Secondary School Results

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Joe Prince and Natalia Urry

What the survey is...

The Secondary School Wellbeing Survey is carried out alongside a Primary School Wellbeing Survey every two years. These surveys have been carried out in 2011, 2013 and 2015. They have been developed by Bath and North East Somerset Council (B&NES), in partnership with the Schools Health Education Unit (SHEU).

The Secondary School survey asks B&NES pupils in Year 8 (12 and 13 years old) and Year 10 (14 and 15 years old) about a wide range of issues, such as life satisfaction, worries, eating behaviours and smoking, alcohol and drug use.

The purpose of the survey is to acquire data that can be used to inform decisions, at both a local authority and school level, to improve the wellbeing of pupils in B&NES. It is also used in the classroom as the stimulus for discussion with young people.

Data from the 2015 Secondary School Health & Wellbeing Survey can be particularly useful when considered in conjunction with the following:

- results of previous B&NES CYP Health & Wellbeing surveys, particularly 2011 and 2013;
- results of similar school surveys carried out by SHEU across the country;
- findings from the 2015 Good Childhood Report (Children's Society); and
- findings from the 2014 Smoking, Drinking and Drug use among young people in England report (Health and Social Care Information Centre [HSCIC]).

What the survey is not...

The survey is undoubtedly extremely valuable in helping to understand the issues that affect the health and wellbeing of young people locally. However, it has its limitations and it is important to bear these in mind when interpreting the results.

Firstly, the survey is not statistically representative of all Year 8 and Year 10 pupils as not all schools participated, nor was a random sample selected.

The pupils that completed the survey were those in schools that choose to participate and who were present on the day of the survey. Therefore, it excluded pupils that were not in school on the day of the survey due to illness or exclusion, and in a small number of schools, those that were not able to do the survey due to restricted access to computers.

Due to the fact the survey was for school pupils in Year 8 and Year 10 in B&NES, it excluded children resident in B&NES who go to schools outside B&NES. Therefore, the survey included some children not resident in B&NES.

The survey was designed as an anonymous survey. Names and other personal identifiable information were not collected. Therefore, pupils cannot be identified. Furthermore, due to safeguarding and ethical issues the survey was unable to ask very sensitive personal questions.

Participation

Schools



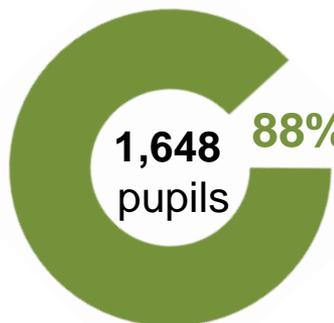
12 out of **13** state funded secondary schools took part.

In terms of the trend data it is important to note that there were **4** secondary schools that did not take part in all three years, 2011, 2013 and 2015.

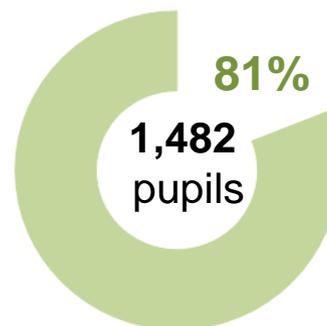
Pupils



Using the January 2015 School Census, estimates have been generated as the proportion of pupils that took part in the survey:



Year 8 pupils took part



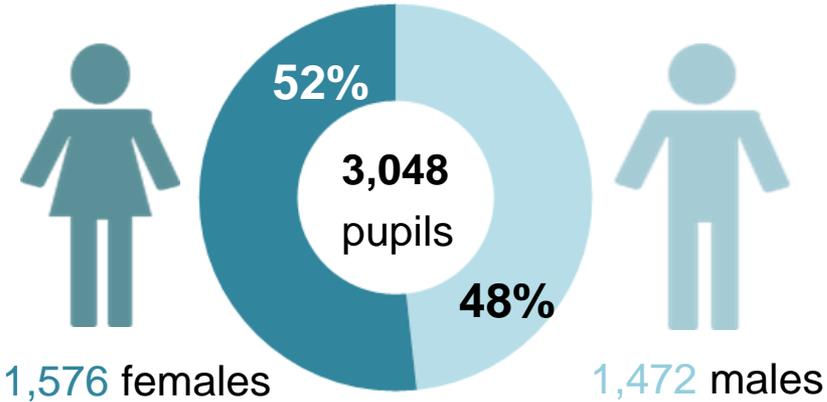
Year 10 pupils took part

This equates to **84%** overall
(**Year 8 and Year 10**)

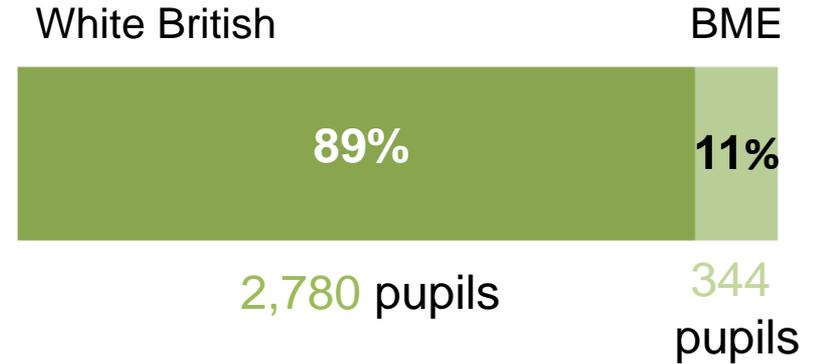
There is however variation in pupil participation, e.g. participation by Year 10 pupils per school ranges from **93%** to **49%**.

Demographics* (Year 8 and Year 10)

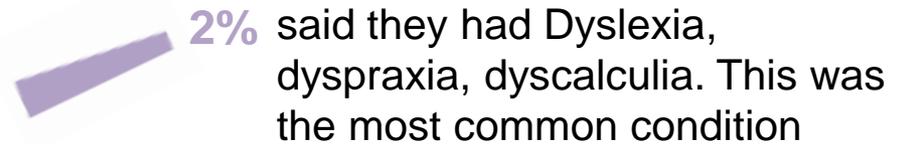
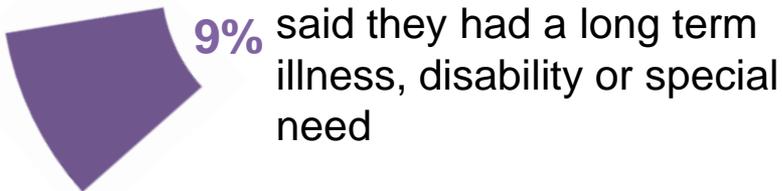
Gender



Ethnicity



Long term illness, disability or special need



11% said they did not know

* All demographics are self-reported by the pupils

Demographics*

Free School Meal Ever 6 (FSMEver6) (Year 8 and Year 10)



18% pupils stated that they had been eligible for Free School Meals in last six years [part of the **Pupil Premium** cohort] (**562** pupils).

Adults at home (Year 8 and Year 10)



65% of pupils live with their Mum and Dad together (**2,027** pupils), **35%** of FSMEver6 pupils compared to **71%** of non-FSMEver6 pupils.

16% of pupils live with mainly or only Mum, **2%** mainly or only Dad (**449** and **62** pupils).

9% of pupils live with Mum and stepdad/partner (**281** pupils)

7% of pupils live with Mum and Dad separately (shared) (**218** pupils)

* All demographics are self-reported by the pupils and all numbers of pupils are approximate.

Demographics*

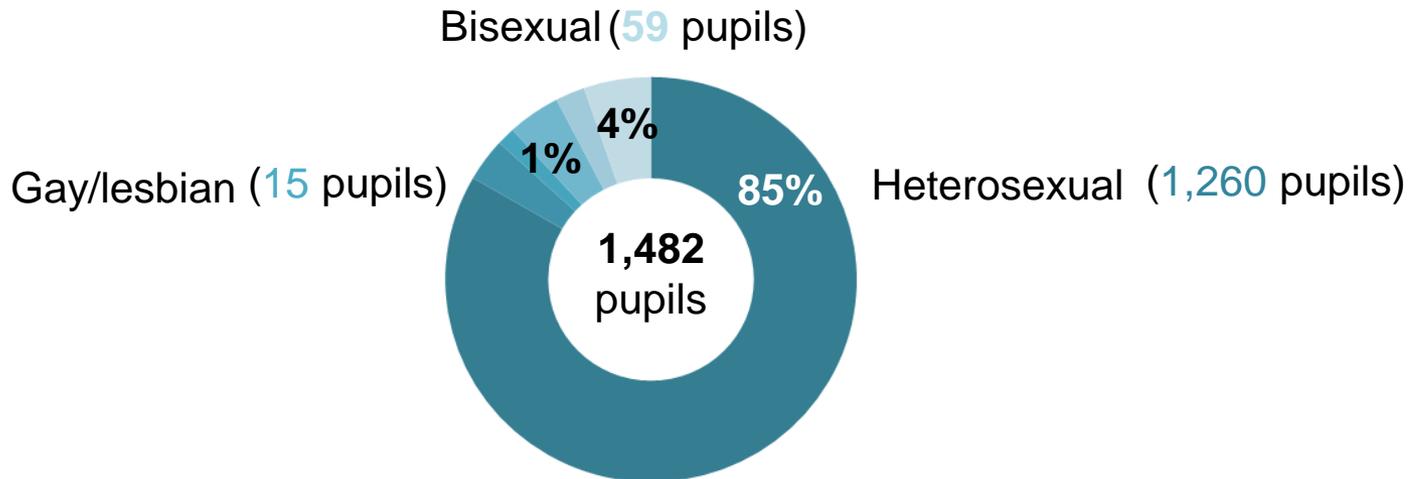
Young carers (Year 8 and Year 10)



6% of pupils said they were young carers (**186** pupils)

*FSMEver6 pupils are almost **3x** more likely (**14%**) to be a young carer (**79** pupils), compared to non-FSMEver6 pupils (**5%**).

Sexuality (YR 10)



* All demographics are self-reported by the pupils and all numbers of pupils are approximate.

Key Findings

Sexual experience

- 18% of Year 10 pupils said that they had had sex, but the proportion was significantly higher amongst FSMEver6 pupils

Worrying about sex and relationships

- Pupils worry more about sex and relationships as they get older, and in Year 10 girls appear to worry more than boys

Contraception

- Less than half of pupils knew where they could get condoms free of charge, and the proportion has decreased since 2013
- A much higher proportion of Year 10 pupils knew where they could get condoms free of charge compared to Year 8 pupils

Key Findings

Prevention of Sexually Transmitted Infections

- There appears to be a lack of knowledge about the prevention of STIs amongst pupils in B&NES

Getting information about sexual health and contraception

- The vast majority of pupils (84%) said they went to a professional for information about sexual health and contraception

School lessons about sex and healthy relationships

- Two-thirds of pupils felt that their school covered sex education either fairly or very well, and 59% felt their school covered healthy relationships either fairly or very well

The Department of Health has highlighted sexual health as an integral part of physical and mental health, important to both individuals and to wider society.²⁰

The World Health Organisation defines sexual health as “...*a state of physical, emotional, mental and social wellbeing, related to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.*”²⁰

A B&NES Sexual Health Needs Assessment (SHNA) was carried out in 2014 and completed in January 2015. Its purpose is to provide a more detailed understanding of the sexual health needs of the local population, including of children and young people. The SHNA focused particularly on populations at greater risk of poorer sexual health outcomes, such as those from deprived communities, in social care, and those with learning disabilities. The SHNA is to be used in the development of an action plan to improve local sexual health through increased awareness and development of services.²⁰

The findings of the B&NES Child Health Wellbeing Survey provide important additional information in terms of understanding the particular sexual health experiences and needs of Children and Young People in B&NES.

For more information see the [Sexual Health](#) section of B&NES's JSNA.

Sexual experience*

In the B&NES survey only Year 10 pupils were asked about their sexual experience.

18% (257) of Year 10 pupils said that they had had sex (either penetrative sex or oral sex).

A significantly higher proportion of Year 10 FSMEver6 pupils said they had had sex:



* All numbers of pupils are approximate

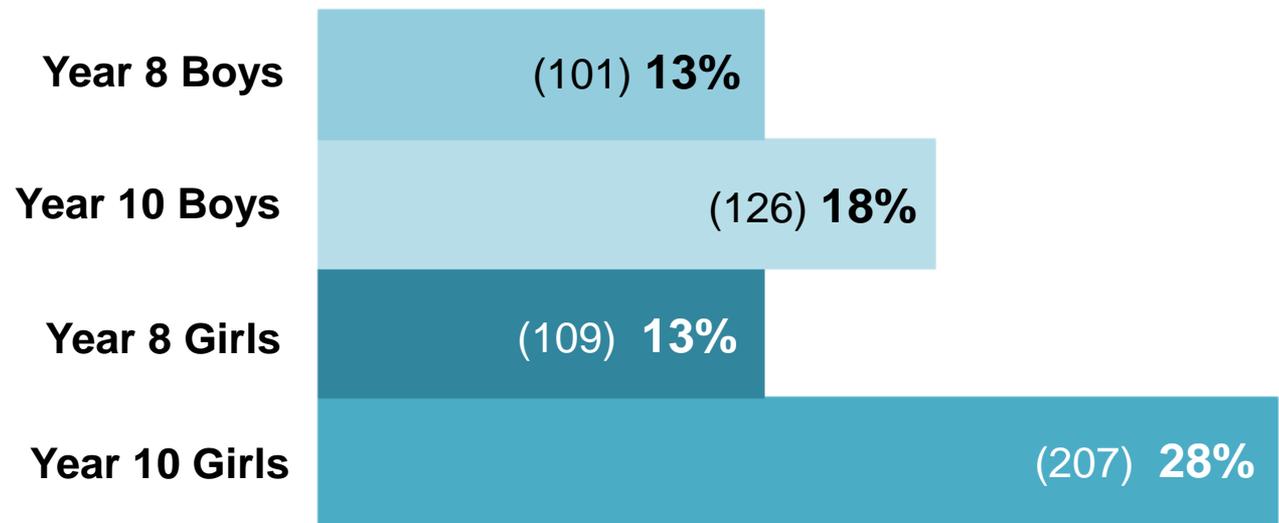
Worrying about sex and relationships*

18% (563) of B&NES Year 8 and 10 pupils responding to the survey said they worried quite a lot or a lot about sex and relationships.

Pupils worry more about sex and relationships as they get older and in Year 10 a higher proportion of girls said they worried quite a lot or a lot about sex and relationships compared to boys :



**Worrying about
sex and relationships**

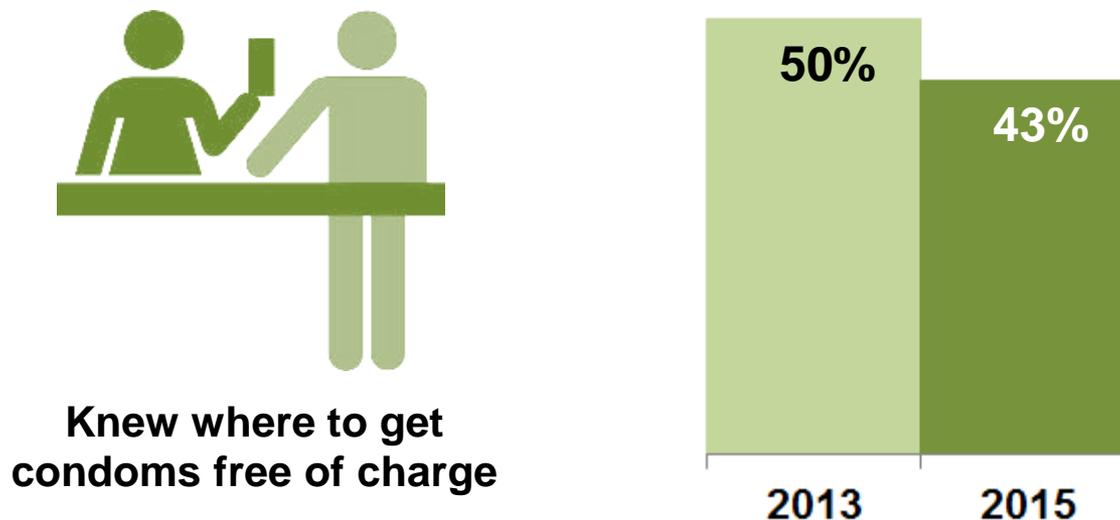


* All numbers of pupils are approximate

Contraception*

Less than half (**43%**, 1,247) of the B&NES Year 8 and 10 pupils said that they knew where they could get condoms free of charge, this was slightly lower than the SHEU national result (**45%**).

The proportion of pupils that said that they knew where they could get condoms free of charge has  compared to 2013:



**Knew where to get
condoms free of charge**

2013

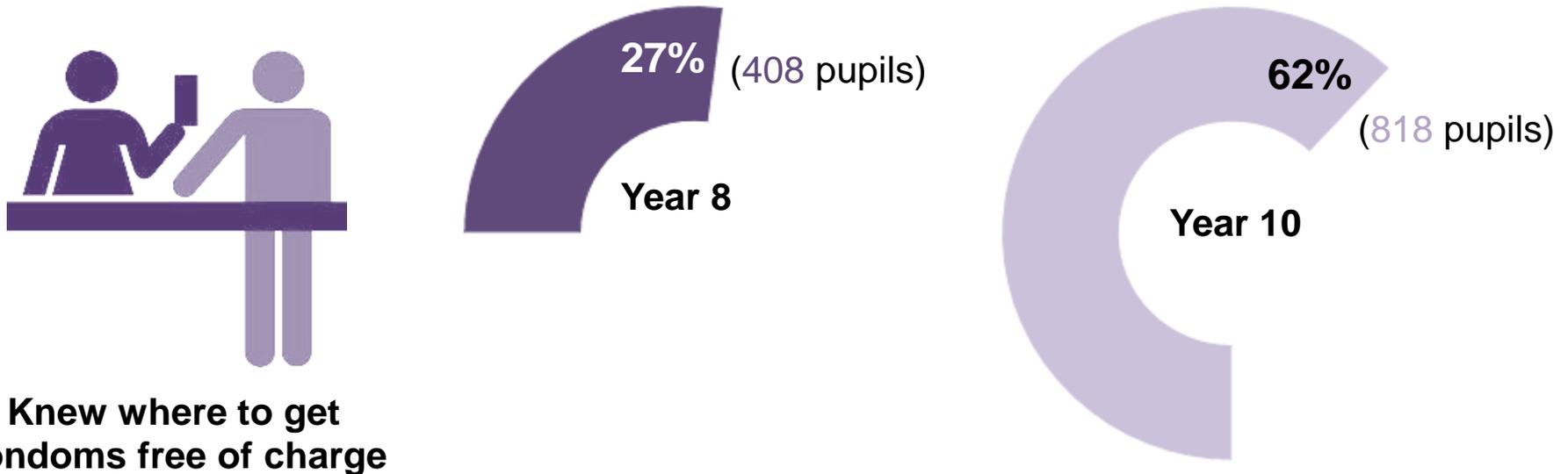
2015

* All numbers of pupils are approximate.

** The pupils surveyed by SHEU nationally are not statistically representative of pupils nationally because not all local authorities participate and those that do are self-selecting.

Contraception – Age *

A much higher proportion of Year 10 pupils said that they knew where they could get condoms free of charge compared to Year 8 pupils:



**Knew where to get
condoms free of charge**

* All numbers of pupils are approximate
For more information see the section [Contraception](#) of B&NES's JSNA.

Teenage Conceptions

The levels of sexual activity amongst young people and their use of contraception has an impact on the number of teenage conceptions.

In 2013 the under-18 conception rate per 1,000 females aged 15 to 17 years was **17.0** across B&NES (**51** pregnancies), significantly lower than the England rate (**24.3**).²¹ Between 1998 and 2013, the under-18 conception rate  by **41%** across B&NES, and by **48%** in England:²²



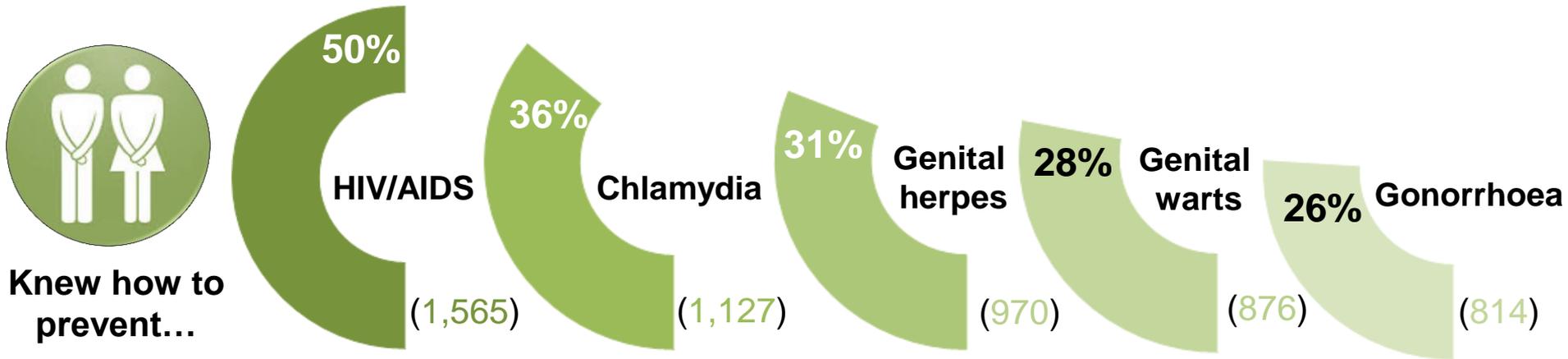
In 2013 the rate of conceptions in those under-16 years was low across B&NES, at **2.7** per 1,000 females aged under-16, compared to **4.8** in England.²¹

For more information see the section [Teenage Conceptions](#) of B&NES's JSNA.

Prevention of Sexually Transmitted Infections *

In the B&NES survey Year 8 and 10 pupils were asked if they knew how to prevent the following sexually transmitted infections: HIV/AIDS, Chlamydia, Genital herpes, Genital warts (papilloma virus) and Gonorrhoea.

The results indicate there is a lack of knowledge about the prevention of STIs amongst pupils in B&NES:



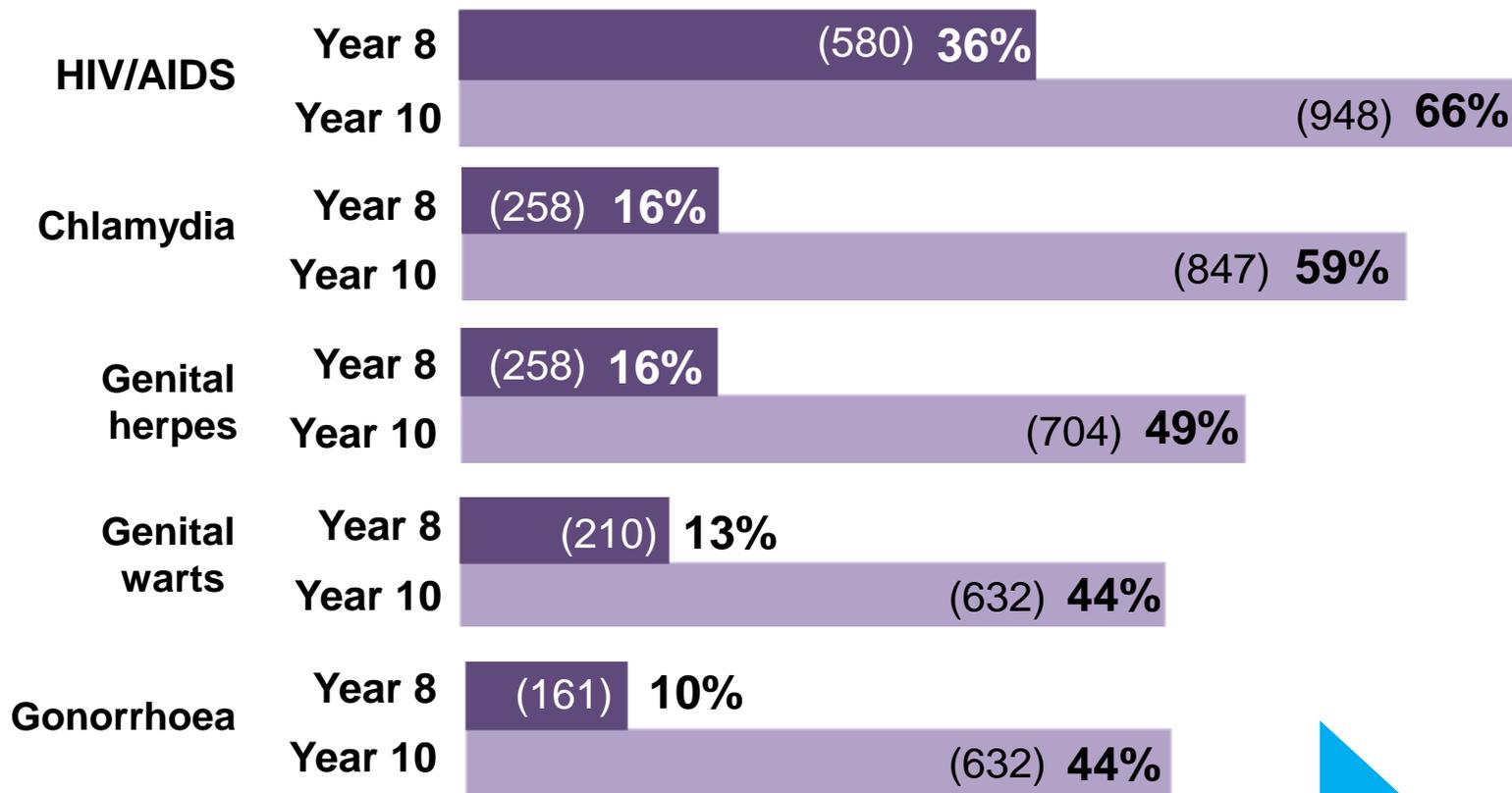
* All numbers of pupils are approximate

Prevention of Sexually Transmitted Infections – Age *

The B&NES survey indicates that a much higher proportion of Year 10 pupils think they know how to prevent STIs than Year 8 pupils:



Knew how to prevent...



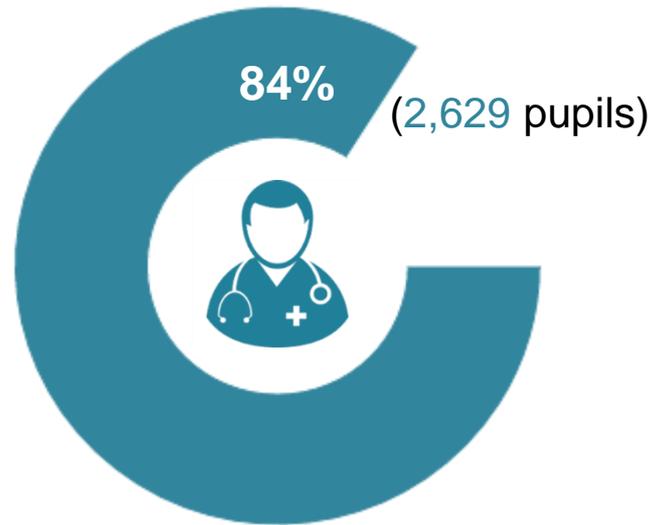
*All numbers of pupils are approximate

Getting information about sexual health and contraception *

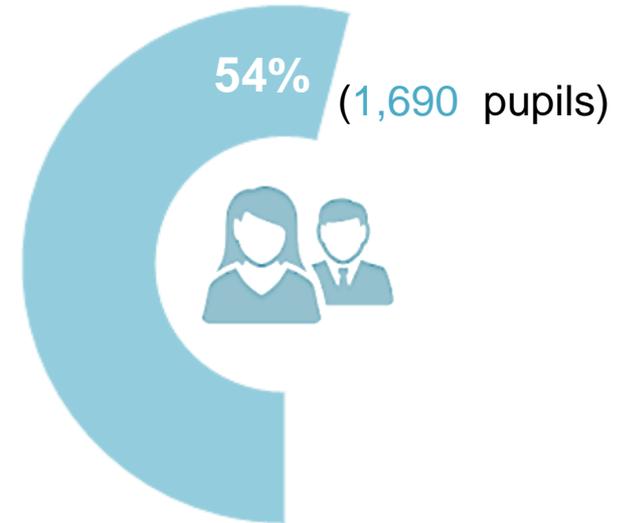
When B&NES Year 8 and 10 pupils were asked where they go to get information about sexual health and contraception, the vast majority of them said they went to a professional and over half said they would go to a trusted adult:



**Where they go for
sexual health and
contraception info**



A professional
(GP, Sexual health clinic,
School Nurse, Teacher)



A trusted adult
(Parent/guardian,
another adult they trust)

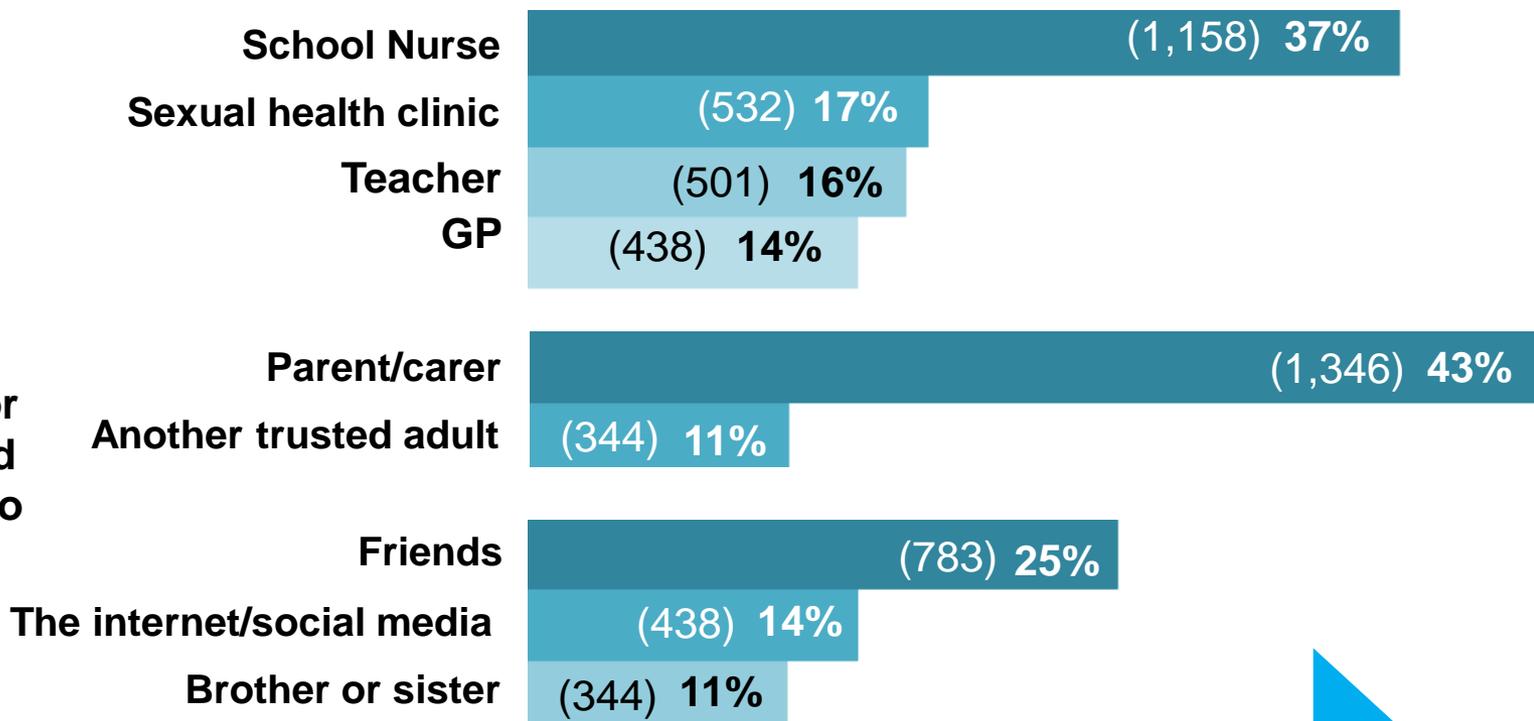
*All numbers of pupils are approximate

Getting information about sexual health and contraception*

In terms of the individual people/places that the pupils said they went to for information about sexual health and contraception, parent/carer (**43%**) came out top, followed by the school nurse (**37%**) and then friends (**25%**):



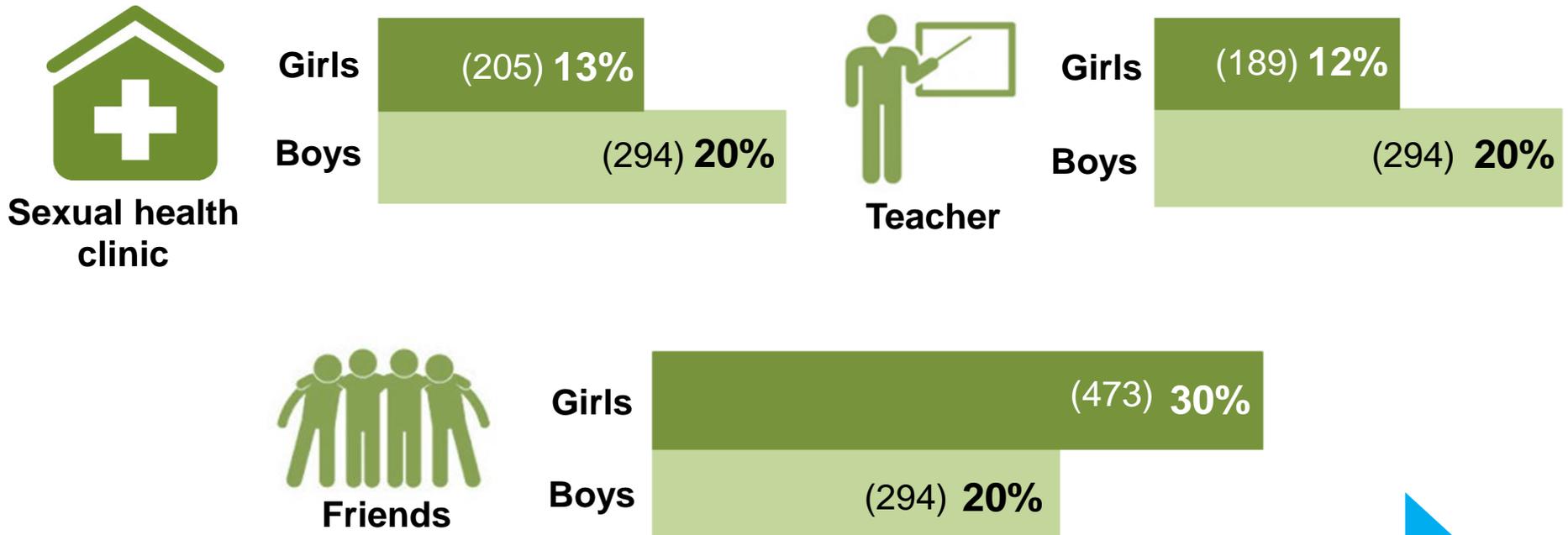
Where they go for sexual health and contraception info



*All numbers of pupils are approximate

Getting information about sexual health and contraception – Gender *

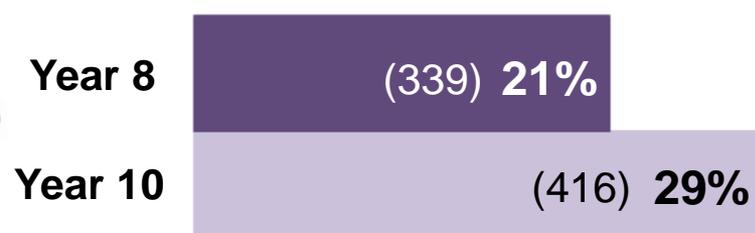
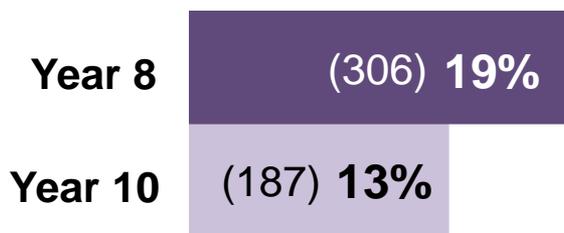
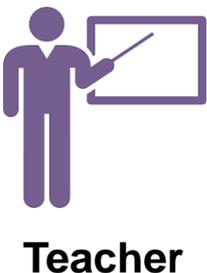
There were some key differences in terms of the individual people/places that girls and boys said they went to for information about sexual health and contraception. The results indicated that boys were more likely to go to a sexual health clinic or a teacher, and girls were more likely to go to their friends:



* All numbers of pupils are approximate

Getting information about sexual health and contraception – Age*

There were some key differences in terms of the people/places that Year 8 and Year 10 pupils said they went to for information about sexual health and contraception. A smaller proportion of Year 10 pupils said they went to a parent/carer or a teacher compared to Year 8 pupils, but a higher proportion of Year 10 pupils said they went to their friends than Year 8 pupils:



* All numbers of pupils are approximate

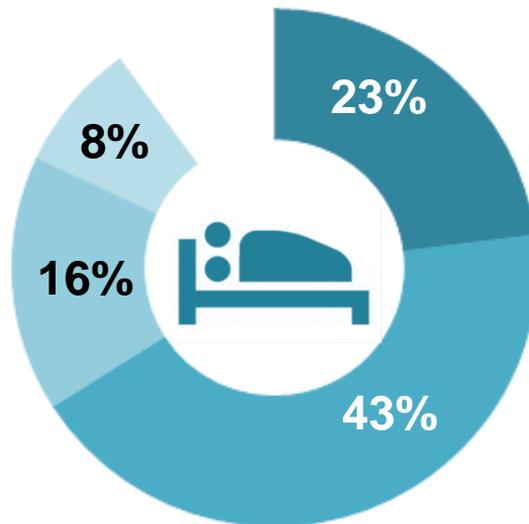
Sexual Health

School lessons about sex and healthy relationships

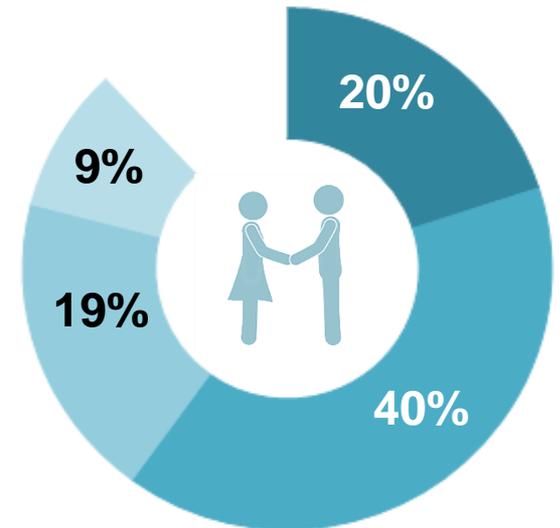
66% of B&NES Year 8 and Year 10 pupils felt that their school covered sex education fairly or very well and **59%** felt it covered healthy relationships fairly or very well:



How well it is covered in school



Sex education



Healthy relationships

Very well		Not very well	
Fairly well		Not at all well	

School lessons about sex and healthy relationships – Gender

A higher proportion of boys felt that their school covered healthy relationships fairly or very well compared to girls:



School covered
healthy relationships
fairly or very well



Priorities of the Young Parliament

As part of a Young Parliament held in B&NES in 2015, 11 schools and 55 pupils came together to debate and participate in four workshops around the themes: Curriculum for Life, Preparing for the Next Steps, Ways to Wellbeing, Mind, Body and Soul and Power to the Pupils.

A number of key priorities were identified that reflect some of the issues highlighted by the Child Health and Wellbeing Survey:²³

Emotional Wellbeing

- Young people need to share their experiences of mental health issues and Personal, Social and Health Education (PSHE) lessons should focus more on mental health
- There should be more education around self-harm

Empowerment

- Pupils should be taught about politics in order to increase engagement by young people
- Pupils should be able to take part in staff meetings at school and be involved in the recruitment and ongoing assessment of staff

Achievements

- There should be more support/praise for well-behaved children

Aspirations

- More vocational options are needed in school, as well as better careers guidance and talks from professionals about their employment experiences

Healthy eating

- Healthy food should be made cheaper and more appealing

Exercise

- Exercise needs to be presented in a more positive light in the media
- There should be fitness videos available for pupils and greater access to gym equipment

Body image

- There needs to be more education and discussion about body image in PSHE lessons

School lessons about sex and healthy relationships

- It is important that sexual health and healthy relationships are discussed in school lessons

- ¹ The Children's Society (2015) The Good Childhood Report, <http://www.childrensociety.org.uk/what-we-do/resources-and-publications/the-good-childhood-report-2015>
- ² Cabinet Office and Department of Health (2015) Children and young people's risk behaviours: discussion paper, <https://www.gov.uk/government/publications/children-and-young-peoples-risk-behaviours-discussion-paper>
- ³ All Party Parliamentary Group on Body Image (2012) Reflections on body image, http://www.ncb.org.uk/media/861233/appg_body_image_final.pdf
- ⁴ PSHE Association (2015) Current trends in health, wellbeing and risky behaviours amongst children and young people: a synthesis of recent evidence, https://www.pshe-association.org.uk/resources_search_details.aspx?ResourceId=591
- ⁵ Hale, L. and Guan, S. (2014), Screen time and sleep among school-aged children and adolescents: A systematic literature review, *Sleep Medicine Reviews*, **21**:50–58.
- ⁷ B&NES Research and Intelligence Team (2015) Healthy Weight, Joint Strategic Needs Assessment, Bath and North East Somerset Council, <http://www.bathnes.gov.uk/services/your-council-and-democracy/local-research-and-statistics/wiki/obesity>
- ⁸ Public Health England (2015) Child Health Profile June 2015 - Bath and North East Somerset, <http://www.chimat.org.uk/resource/view.aspx?RID=101746®ION=101635> (downloaded 23/09/15)
- ⁹ Research Intelligence Team, Bath and North East Somerset Council (2013) Hospital Inpatient Admissions for Self-Harm in B&NES residents - financial years 2006/07-2012/13, in house analysis of SUS data
- ¹⁰ Health and Social Care Information Centre (2014) National Child Measurement Programme - England, 2013-14 school year [NS], <http://www.hscic.gov.uk/catalogue/PUB16070> (viewed 26/01/2015)

- ¹¹ Jaarsveld, C. and Gulliford, M. (2015), Childhood obesity trends from primary care electronic health records in England between 1994 and 2013: population-based cohort study, Arch Dis Child doi:10.1136/archdischild-2014-307151, http://adc.bmj.com/content/early/2015/01/07/archdischild-2014-307151.full?g=w_ep_open_tab (downloaded 06/02 2015)
- ¹² Public Health England (2013), Breakfast and Cognition: Review of the literature, available from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/256398/Breakfast_and_cognition_review_FINAL_publication_formatted.pdf
- ¹³ Association for Young People's Health (2015) Key Data on Adolescence 2015, <http://www.youngpeopleshealth.org.uk/wp-content/uploads/2015/09/KeyData2015.pdf>
- ¹⁴ Public Health England (2013) National Diet and Nutrition Survey Results 2008/09 - 2011/12, Average daily consumption of '5 a day' fruit and vegetable portions in the UK, by age and gender, 2008/09-2011/12, <http://www.youngpeopleshealth.org.uk/wp-content/uploads/2015/09/KeyData2015.pdf>
- ¹⁵ Craig and Mindell (2012), Health Survey for England, Proportion of young people aged 8-15 meeting physical activity recommendations by age and sex, Health Survey for England 2012, <http://www.youngpeopleshealth.org.uk/wp-content/uploads/2015/09/KeyData2015.pdf>
- ¹⁶ Health and Social Care Information Centre (2015) Smoking, drinking and drug use among young people in England in 2014, <http://www.hscic.gov.uk/catalogue/PUB17879/smok-drin-drug-youn-peop-eng-2014-rep.pdf>
- ¹⁷ Health and Social Care Information Centre (2015) Smoking, drinking and drug use among young people in England in 2014, data tables
- ¹⁸ Bath and North East Somerset CCG (2015) SUS Alcohol specific hospital episode statistics in under-18s 2010-15, Bath and North East Somerset CCG cluster, in-house analysis and report
- ¹⁹ Public Health England (2015), Local Alcohol Profiles for England, <http://fingertips.phe.org.uk/profile/local-alcohol-profiles>

- 20 Bath and North East Somerset Council (2015) Bath and North East Somerset Rapid Sexual Health Needs Assessment, http://www.bathnes.gov.uk/sites/default/files/siteimages/Your-Council/Local-Research-Statistics/full_version_rapid_sexual_health_needs_assessment_2015.pdf
- 21 ONS (2015), Conception Statistics, England and Wales, 2013, Table 5 and 6, <http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-348338>
- 22 Public Health England (2015) Health Profiles -Children and Young People's Health, Under 18 conceptions, <http://fingertips.phe.org.uk/profile/healthprofiles/data#page/4/gid/8000073/pat/6/par/E12000009/ati/101/are/E06000022/iid/20401/age/173/sex/2>
- 23 Bath and North East Somerset Council and CCG (2015) Young Parliament 2015, St Marks School, Me, Myself, My School