

Gloucestershire Pupil Wellbeing Survey 2020

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Gloucestershire Pupil Wellbeing Survey 2020 Acknowledgements

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Thanks also go to:

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Foreword

Welcome to the Pupil Wellbeing Survey report for 2020. I am pleased to be sharing with you the findings of the 2020 Pupil Wellbeing Survey (PWS). Since its inception in 2006, the biennial survey has provided a unique and invaluable insight into the experiences and lives of the county's children and young people, both in and out of school.

The 2020 survey was interrupted by Covid-19, but the voices of over 20,000 pupils and students were still captured across 74% of Gloucestershire's schools and colleges. The survey covers a number of key aspects of young people's health and wellbeing, from their lifestyle choices and engagement with school through to their emotional wellbeing and aspirations for the future. The survey helps us to understand children and young people's perspectives on many areas of their lives, including whether they enjoy school, whether they feel safe, and their mental health and wellbeing.

The survey provides an opportunity to explore the impact of emerging issues on our young people as well as helping us to understand how young people's experiences have changed over time. All questions were reviewed before the 2020 survey went live and new questions were added around access to mental health services, consent and exclusions. We have included questions on Adverse Childhood Experiences (ACEs) in the report for the first time, which allows us to understand more about early trauma and the impact that can have on our population.

Many positive findings were identified, for example that 95% of secondary pupils reported that they had never smoked or had only tried it once or twice. The survey also showed that the majority of secondary school and Year 12 pupils find health relationships and sex education teaching helpful. However, the survey also helps to identify areas to focus on for improvement, including for example, that the majority of children do not meet the recommended level of physical activity each week. Schools are helping to address this and more signed up for the Daily Mile in 2020 than any

other year, with 170 schools participating. Importantly, the majority of our children and young people are happy and feel safe at home and at school but this isn't true for all of the county's children. We must continue to work together to ensure all children have the best start in life and feel safe and nurtured as they grow up.

We also know that Covid-19 has had an impact on children and young people's mental health, and we need to continue prioritising Covid-19 recovery and support for schools going forward.

The 2020 results have already been shared with schools and colleges to help them identify areas for improvement and action; and my colleagues in the Council and our partners are using the findings to inform our work with children and young people.

I hope you enjoy this report and find its content insightful and useful. It is a unique opportunity to hear from Gloucestershire's young people and I'd like to thank all the participants for sharing their experiences with us.



Sarah Scott

Sarah Scott
Director of Public Health

Introduction

Background to the Gloucestershire Pupil Wellbeing Survey (PWS). The Gloucestershire Pupil Wellbeing Survey (PWS) replaces the former Online Pupil Survey (OPS) which was first carried out in 2006, and has been repeated every two years. The latest survey conducted in the Spring Term of 2020 but was cut short by Covid-19.

The PWS is commissioned by Gloucestershire County Council (GCC) and run by an independent research company.

The purpose of the PWS is to provide information on the health and wellbeing of children and young people attending schools and colleges in Gloucestershire; with the aim of informing work, both in and outside of school, to improve the lives and outcomes of the county's young people.

The PWS uses age appropriate questionnaires and is carried out in specific year groups in primary (Years 4, 5 and 6), secondary (Years 8 and 10) and post 16

(Year 12/Further Education). There is also a version of the questionnaire for children and young people with special educational needs.

The questionnaire covers a range of areas, including young people's lifestyle choices and behaviours, emotional wellbeing, relationships, school experience and safety.

The survey has grown over time and participation by educational settings, and individual pupils, remains voluntary. Gloucestershire's Further Education colleges (FE) took part for the first time in 2012 and independent schools joined in 2014.



Snapshot of the 2020 survey sample

20,977

children and young people aged between 8 and 18 years participated, resulting in:

20,205

complete records once the data had been 'cleaned'.

This is a reduction on the 2018 response rate, and is equivalent to

54%

of pupils in the selected year groups.

This reduction was due to the survey having to close early following the onset of Covid-19.

The pupils came from a total of

268

schools, colleges and other educational establishments across the county; representing:

85%

of the county's primary schools

82%

of secondary schools

55%

of FE colleges

75%

of special schools and 'Alternative Provision' Schools.

Of the sample of 20,205 young people:

48.3% were male 50% were female

Where stated, 75.8% of students gave their ethnicity as 'white British' and 11.5% identified themselves as being from another ethnic group.

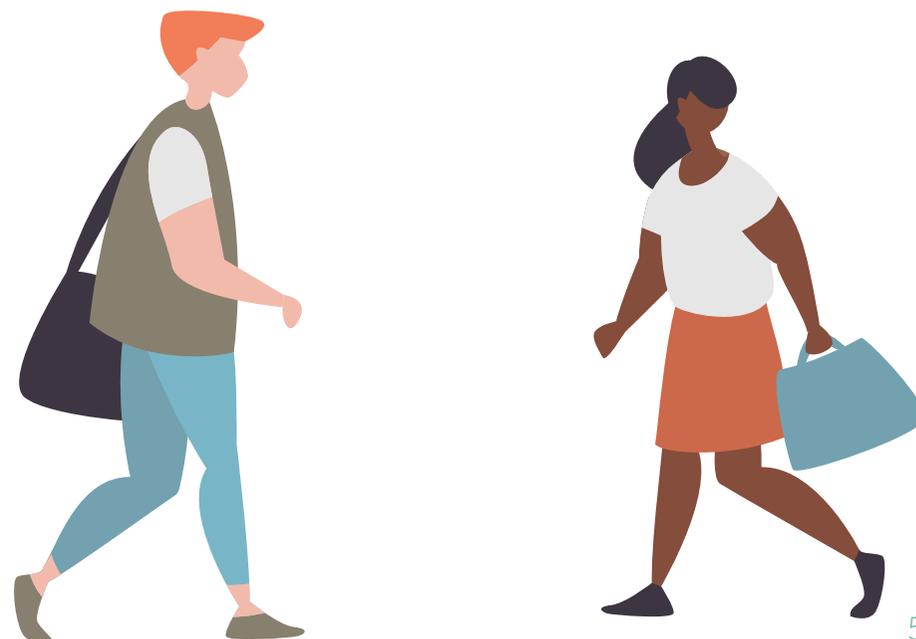
53% were attending primary schools (Years 4, 5 and 6)

33% were attending secondary schools (Years 8 and 10)

14% were in post 16 education (Year 12/FE)

6.2% of participants self-identified as having a disability

8.7% reported that they had Special Educational Needs (SEN) or an educational health care plan



Headline findings from the 2020 PWS

8 out of 10 (81.7%) pupils said the food provided at home enabled them to eat healthily most of the time and this has been stable for the last 8 years; around a sixth of pupils (17.5%) have three or more unhealthy snacks a day. This is a significant reduction from 2018. Primary aged boys eat more unhealthy snacks than girls.

It is recommended that young people do at least 7 hours of physical activity a week. 70% of pupils are doing at least four hours a week, but only 47% of pupils are doing 6 hours or more. This is a slight reversal of a downwards trend since 2012.

95% of secondary school pupils have never smoked or only tried it once or twice. The percentage who smoke regularly has been reducing steadily over the past 8 years; and only 3.1% of young people (secondary and Year 12/FE) regularly vape. This has been reducing steadily since 2016.

Fewer young people are drinking alcohol. In 2006, 46% of secondary school pupils had never tried alcohol, or only tried it once or twice. In 2020, the figure was 80%.

87% of secondary pupils have never tried illegal drugs or have only tried them once or twice.

Two thirds of pupils (65.4%) said they were happy (an improvement on 2018 but in line with previous years) and 7 out of 10 pupils (70.4%) were satisfied or quite satisfied with their lives (an increase on previous years, reversing a gradual decline observed since 2010); but wellbeing tends to decrease as pupils get older (particularly in girls).

Although the vast majority of pupils feel safe at home (90%) (in line with previous years) and at school (78%) (in line with previous years), 2.7% of pupils don't feel safe at home and 5.9% feel unsafe at school.

While 7 out of 10 primary school pupils (70.3%) enjoy school; only half of secondary schools pupils (51%) feel the same. However overall, 73.4% of pupils felt that school gave them useful skills and knowledge, slightly declining in the last 8 years.

Stress from school work increases as pupils get older; and girls are more likely to feel stressed than boys. Overall, 1 in 5 pupils (21.2%) frequently woke or couldn't sleep because they were worried about something. This has been increasing steadily since 2012.



What is Gloucestershire Healthy Living and Learning (GHLL)?

GHLL was launched in 2012 to support and promote health and wellbeing in schools and colleges across Gloucestershire, with the aim of helping children and young people to achieve their full potential and lead healthy and happy lives.

The GHLL programme, developed by Gloucestershire County Council, provides schools with resources and training to support teachers to support their students on issues relating to their physical, emotional and mental wellbeing. GHLL's work with schools and other partners is informed by the findings of the PWS as well as other surveys such as the Oxwell (a survey for children and young people during lockdown) and the Moves/Transitions survey for year 6's moving to secondary school.

Schools and colleges are also supported to work toward the GHLL 'Healthy School' or 'Healthy FE' accreditation which requires schools to demonstrate that they have made a measurable difference to the health and wellbeing of their students. We have 100% engagement with schools and colleges in the county and currently, 70% of schools/colleges in the county have received the award (which is valid for three years); and a further 29% are actively working on their review.

The Mental Health Champions Award is in addition to the Healthy Schools Award and validates the Whole School Approach. 72% of schools and colleges are actively working toward this award with 52 schools currently having achieved the Mental Health Champions Award. The award, which launched in 2016, was created to acknowledge the commitment and resources that Gloucestershire schools have invested in supporting the mental health and wellbeing of their school community. This award gives schools the opportunity to showcase good practice and identify areas for further development.



Healthy lifestyles and behaviours

Healthy eating.

What children eat and drink during their early years can affect their health for many years to come. General eating habits are formed in early life, so it is important that children and young people eat a healthy balanced diet which includes the essential vitamins, minerals and other nutrients that they need for healthy growth and development.

Research shows children who stay a healthy weight tend to be fitter, healthier, better able to learn, and more self-confident. Young people who experience being overweight or obesity during childhood are often still affected as adults.

What does the data tell us?

Research suggests that children who eat breakfast tend to eat more healthily overall. 73% of pupils reported eating breakfast regularly i.e. every or most mornings. The number has remained fairly constant since the 2010 survey, however as pupils get older they are less likely to eat breakfast regularly.

Generally girls eat breakfast less frequently than boys. Overall, 15% of boys reported that they never, or did not often, eat breakfast, compared to 20% of girls.

It is recommended that children limit their intake of sugary or high fat snacks and fizzy drinks, which tend to be high in calories and low in nutrients. In 2020, 17.5% of pupils reported having three or more snacks every day (for example sweets,

Did you know?

In Gloucestershire 9.2% of reception aged children are living with obesity Similar to England at 9.7%. For Year 6 children the figure rises to 18.6% compared to 20.2% in England. (reference is NCMP 2018/19 data set)

chocolate, biscuits and crisps). This is a significant reduction on previous years. Boys reported eating more unhealthy snacks than girls in primary school however this was more equal in secondary and FE settings.

One fifth (18.7%) of pupils consumed fizzy drinks at least once a day. This increases with age and boys consume more than girls across all age groups. However, the trend for consumption of fizzy drinks has declined since 2014.

Positively, 81.7% of pupils stated that the food provided at home enables them to eat healthily most of the time. This figure has remained stable since 2012 across all age groups.

When asked about any support they might need from school, 18.5% of pupils felt they needed more support and knowledge about healthy eating, 20.9% wanted more knowledge about maintaining a healthy weight, and 32.7% wanted more cooking skills.

What are we doing?

It is estimated that the food a child eats at school accounts for a third of their nutritional intake in a day, so it is important that what is provided in school or is brought in, is nutritious and balanced. Schools in Gloucestershire support this ethos. Most primary schools for example will have a healthy eating policy and guidelines on preparing a healthy lunchbox.

Schools are supported to promote healthy eating through staff training, the provision of teaching resources and sessions for students and parents.

Schools can also choose to focus on healthy eating as part of their GHLL accreditation. Examples of projects which have been introduced include cooking and tasting sessions with a focus on fruit and vegetables.

Although this survey was completed before schools were closed due to the pandemic, we know that home-schooling added pressures to parents and may have had an impact on diet including an increase in snacking. During the pandemic, GHLL has encouraged schools to record any interventions that they have done with parents or children related to healthy eating and has continued to offer advice and guidance on healthy eating.”

Outside of the school setting, in 2019 GCC and the NHS Clinical Commissioning Group commissioned BeeZee Bodies (BZB) to provide the community weight management services. BZB engaged extensively with communities and families most at risk of obesity from the most deprived areas in Gloucester and Forest of Dean. As a result of this co-production BZB has adapted their current service to the needs of local families. This service is available to overweight and obese children aged between 5 and 16 years old and their families, who are residents of Forest of Dean and Gloucester.

Did you know?

The Government has set a national ambition to halve childhood obesity and significantly reduce the gap in obesity between children from the most and least deprived areas by 2030.



When asked about any support they might need from school



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Physical Activity.

Children need to be active every day to promote their healthy growth and development. Lack of physical activity is a risk factor for many health problems, including weight gain, type 2 diabetes, and mobility problems. Keeping active can also help improve young people's quality of sleep, concentration and confidence. Children who establish healthy lifestyle patterns at a young age are more likely to carry them on.

What does the data tell us?

The Government recommend that 5-18 year olds undertake at least one hour of physical activity every day for their health and wellbeing. In the 2020 survey fewer than half (47.3%) of pupils reported doing at least 6 hours a week. 51.1% of boys reported doing at least 6 hours of physical activity a week, compared to only 41.1% of girls.

While the majority of pupils aren't meeting the recommended levels of physical activity, 70% of pupils did report doing at least 4 hours of physical activity (including active play) each week. This is in line with the 2018 level of 72%.

Overall, 65.4% of pupils felt they did enough exercise to keep themselves healthy (54.7% of girls and 65.8% of boys). Of the pupils who said they were active for only two hours or less a week, 34% felt this was enough to keep themselves healthy. Only 24.2% recognised that they did not do enough. Girls (who were less active) were more aware than boys that they were not active enough to keep themselves healthy.

The most important reasons that secondary pupils gave for their decision to be more physically active were getting fit, getting better at sport and enjoyment. Pupils who were less active cited lack of ability, disliking getting too hot and sweaty and having no one to be active with.

Did you know?

To maintain a basic level of health, children and young people aged 5 to 18 need to do:

- **At least 60 minutes of physical activity every day. This should range from moderate activity, such as cycling and playground activities, to vigorous activity, such as running and tennis.**
- **On 3 days a week, these activities should involve exercises for strong muscles and bones, such as swinging on playground equipment, hopping and skipping, and sports such as gymnastics or tennis.**

What are we doing?

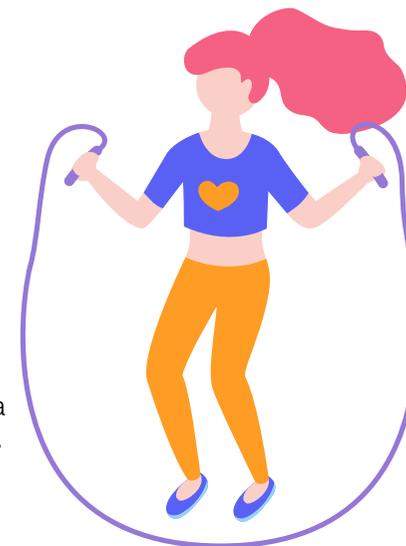
GHLL continue to work in partnership with Active Gloucestershire on a dedicated programme of work to support schools to boost the physical activity levels of their pupils.

Funding from the County Council and the NHS in Gloucestershire has also encouraged primary schools across the county to improve the fitness, health and wellbeing of their pupils through taking part in The Daily Mile initiative. This gets children walking, jogging or running for 15 minutes each day. 170 schools in Gloucestershire signed up to the 2020 campaign; which is just over 60% of all primary schools and 35,000 pupils. Active Gloucestershire is working with more schools across the county to increase participation. The link between mental health and physical health has inspired schools to undertake 'walk and talk' with Children and Young People as well.

Active Discovery has been created by GHLL, Active Gloucestershire and the School Games Organiser network. It is a challenge that can be used in school, home or both to encourage physical activity whilst exploring the outdoor school environment and/or the local area. A collection of activities is provided for pupils to choose from and through completion of these, pupils can work towards badges and certificates. It fits in well with all of the areas of the Five Ways to Wellbeing and promotes the benefits of physical activity as a means of boosting mental health and wellbeing.

Schools can use 'Active Discovery' in their own way and it can be incorporated into existing outdoor provision and learning. It is ideal for schools as part of their Recovery/ Reconnecting curriculum.

During Covid-19 Active Gloucestershire have been working with Hartpury College to develop a coaching programme which can be rolled out virtually to schools and colleges and distributed through lead GHLL teachers. Lead tutors have been supported to embed a volunteering programme into their curriculum. This has consisted of a school games induction, safeguarding and the provision of time and support to enable young people to create, develop and deliver a series of online school games challenges for local Gloucestershire schools. There has been a special focus on coaching for girls, pupils from lower socio-economic groups and BAME pupils.



51.1%
of boys

reported doing at least

6 hours

of physical activity a week



41.1%
of girls

reported doing at least

6 hours

of physical activity a week



In 2020

less than half
of pupils

were doing at least

6 hours

of exercise a week



Smoking.

Child and adolescent smoking is a serious risk to health. The earlier people become regular smokers the harder it is to quit and the greater the risk of developing respiratory problems, cancers and heart disease.

What does the data tell us?

Positively, most secondary school pupils do not smoke with 95% of secondary pupils reporting they had never smoked or had only tried it once or twice. Of those that did smoke, 35.4% would like to stop smoking. The smoking trend has halved since 2012 with only 2.4% reporting regularly smoking cigarettes (all year groups) in 2020 compared to 4.9% in 2012. The proportion saying they have never tried smoking has increased from 89.7% to 94.7% in the same period.

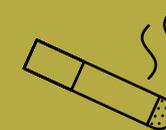
Young people are more likely to try smoking as they get older. By the time they reach Year 12/FE, only 80.5% of pupils reported never having tried smoking; compared to 97.6% in Year 8 and 90.4% in Year 10.

Vaping is increasingly popular in the UK and there are concerns that this increase may result in young people taking up vaping. However, 71.2% of young people (secondary and Year 12/FE) said they had never vaped, 20.5% had tried it once or twice, and only 3.1% are regular vapers (weekly to daily) which is similar to 2018. The rise in vaping may be down to the increased availability of vapes and the continued growth in advertising for these products.



94.7%
of pupils

have never tried smoking



The smoking trend has

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with only **2.4%** reporting
regularly smoking cigarettes
(all year groups) in 2020
compared to **4.9%** in 2012

What are we doing?

The County Council commissions a Healthy Lifestyles Service which supports people to quit smoking. This service is available to children and young people aged 12 and above.

The service also delivers a Peer Support Prevention Programme that works with secondary school pupils in years 8 to 10 to build knowledge, skills and understanding relating to risk taking behaviours, including smoking.

The Healthy Lifestyles Schools program (Thinking about Life - risk taking behaviours) offered to all secondary schools across Gloucestershire provides learners engaged on the program with age relevant information relating to the risk behaviours and their associated impacts on the young person in both the short and long term. The program aims to educate young people across a range of considered risk behaviours including smoking, alcohol, other addictive substances as well as the potential impacts and repercussions of peer pressures and social media using both face to face specialist and supported teacher led delivery.

The face to face sessions provide young people a safe space to discuss and explore these subjects whilst ensuring they understand how and who to go to, to seek help and support.

COVID 19 has heavily impacted this program due to the national closure of schools and the restrictions schools have placed on external visitors due to risk. During this academic year contact and engagement with schools has been maintained and suitable adjustments to delivery methods have been implemented. This has included delivering lessons virtually and maintaining some face to face mentoring opportunities where possible. Currently 250 young people across Gloucestershire in year 8 have had interaction with the program during the 2020-2021 academic year.

Ongoing communication with schools is being undertaken to ensure that the program reflects the needs of schools and young people following COVID 19 so that the program can be relevant for a planned restart in September 2021 for the 2021-2022 academic year.

Specific targeted 'quit smoking initiatives' for secondary school pupils were planned for role out during the 2020-2021 academic year but were placed on hold due and will be rolled alongside the face to face program for the 2021-2022 academic year.



Drugs and alcohol.

It is important that young people have the knowledge and resilience to make informed decisions about alcohol and drugs. Alcohol and drug use during the teenage years is related to a wide range of health and social problems. It can lead to young people taking risks and putting themselves in harmful situations.



What does the data tell us?

Between the Online Pupil Surveys carried out in 2006 and 2020:

- Fewer young people in Gloucestershire are drinking alcohol. The proportion of secondary school pupils reporting that they have never tried alcohol, or have only tried it once or twice has risen from 46% to 75.1%.
- There has been a slight increase in young people taking illegal drugs. The proportion of secondary school pupils reporting that they have never tried illegal drugs, or have only tried them once or twice, has fallen from 95% to 87.7%.

For the minority of secondary pupils (Years 8 and 10) who drink alcohol regularly, frequency of alcohol consumption has remained broadly unchanged since 2014, with 18.5% drinking alcohol monthly and 6% drinking it weekly or daily. The most commonly reported source of alcohol for pupils who drink in Years 8 and 10 is 'home with their parents' permission'.

Since the survey started in 2006, there had been a steady decline in the percentage of secondary school pupils reporting that they had been offered illegal drugs. However this has now started to rise. In the 2014 survey 17% of Year 8 and 10 pupils reported that they had been offered illegal drugs compared to 21.4% in 2020. There has also been an increase in secondary pupils who have tried illegal drugs from 6.7% in 2014 to 11.2% in 2020.

However the proportion using drugs regularly remains low at around 3% (15.4% of those who had ever tried drugs).

The PWS also includes questions about New Psychoactive Substances (NPS) (formerly known as legal highs). Positively, there has been a sustained reduction in the percentage of students who were offered NPS between 2016 and 2020. In the 2016 survey, 10% of secondary school pupils and 29% of Year 12/FE had been offered NPS. In the 2018 survey, this fell to 8.3% and 22% respectively. In the 2020 survey, this fell to 3.7% and 12.7% respectively. The proportion of students who have tried NPS has also fallen over the same period. Only 1.1% of secondary pupils and 2% Year 12/FE students report using NPS regularly. Only 1.6% of secondary and 6% of Year 12/FE students report ever trying NPS.

What are we doing?

Despite a concerning rise in reported drug use, the PWS data indicates that the majority of the county's students are not taking drugs or drinking alcohol. Gloucestershire Healthy Living and Learning (GHLL) produce a range of teaching resources to support teachers to talk to students about alcohol and drugs; covering issues such as the risks and harms to their health and safety, tackling peer pressure, and the link with emotional wellbeing.

The Gloucestershire Safeguarding Children's Board also provides training for schools and other professionals, to help them identify young people who may be engaged in substance misuse; and put them in touch with local sources of support. When schools are concerned about students



The proportion of secondary school pupils reporting that they have

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46% to 75.1%

using substances, they can commission partner organisations, such as **Infobuzz**, to deliver tailored workbook interventions, which often lead to better school engagement overall. Schools monitor outcomes from these interventions as part of their pupil wellbeing responsibilities, and can analyse how they are doing through GHLL and the Pupil Wellbeing Survey.

Our **Young People's Substance Misuse Treatment** Service is part of Gloucestershire's Youth Support, where psychosocial interventions are delivered to referred young people by a multi-professional health team following NICE clinical guidance. Youth Support works restoratively with young people who are the most at risk of not making a successful transition into adulthood, including young offenders and those arrested for drugs offences.

The social norms approach

GHLL encourages schools to focus on the 'social norms approach' to health education, particularly around teaching on substance misuse and other risky behaviours.

The social norms approach works on the principle that humans are group oriented. We tend to look to others to determine our own behaviours and decisions. At the same time we also tend to overestimate the risky behaviours our peers are engaged in.

The social norms approach aims to correct young people's misperceptions by emphasising the proportion of their peer group who engage in positive and protective behaviours. This is an evidence based approach to health education which is proving to be effective in reducing a range of risky behaviours.



Emotional wellbeing and relationships

Wellbeing and mental health.

A young person's emotional health and wellbeing has an impact across all other aspects of their life, including educational attainment, their ability to make friends, sleep, eat healthily and keep active. It can also impact on their emotional health and wellbeing as an adult and their opportunities later in life.

Did you know?

Over half of mental health problems in adulthood begin by the age of 14 and 75% by the age of 18.³

What does the data tell us?

Overall, 60% of pupils said they were happy, while 15% said they were unhappy. PWS data indicates that self-reported happiness tends to decrease as young people get older, and this is most noticeable in girls. 70% of boys in Year 4 reported that they were happy, compared to 55% of boys in Year 10. For girls, 67% in Year 4 were happy, compared to only 38% in Year 10.

The proportion of pupils reporting that they were satisfied with their lives follows a similar pattern. Overall 70.4% of pupils reported that they were 'quite satisfied or satisfied' with their lives. However, life satisfaction was highest at primary level, and declined at secondary level and again at Year 12/FE. Again girls were less likely to be satisfied with their lives than boys, particularly at secondary level. There has been a gradual decline in overall life satisfaction among secondary pupils since the 2010 survey.

The PWS also asks pupils to score themselves against the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). WEMWBS is a validated tool, used nationally, which can provide an insight into emotional wellbeing. Based on their WEMWBS scores, 76.1% of girls and 84% of boys had high or average levels of emotional and mental wellbeing.

However, 21% of female secondary pupils and 17.5% of female Year 12/FE students had scores indicating 'poor' or 'extremely poor' mental health. Again, the WEMWBS scores suggest that poor mental wellbeing tends to increase as children get older. Notably, just under a third of pupils in the 2020 survey (29.5%) said that they found it 'pretty tough to be me' often or all the time.

Some young people use self-harm as a coping mechanism for emotional distress; and the PWS asks secondary school pupils and Year 12/FE students whether they have ever self-harmed. In the 2020 survey, 77.1% of pupils had never self-harmed. However, of those who reported ever self harming 17.1% had self harmed in the previous week.

What are we doing?

There is a range of initiatives and services in place both in and outside of schools to support young people with their emotional health and wellbeing.

GHLL provide resources and training to enable teachers to have a wider understanding of mental health issues affecting children and young people. Courses include Mental Health First Aid which helps teachers to spot signs of mental health distress to support their pupils; as well as courses on self-harm. Resources are also provided to help teachers support pupils to understand their feelings and improve their resilience.

The Mental Health Champions Award, has been created to acknowledge the commitment and resources that Gloucestershire schools have invested in to support the mental health and wellbeing of their school community.



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Beyond Fed Up

The teaching pack 'Beyond Fed Up' has been written by teachers for teachers, to enable them to tackle the sensitive subjects of emotional wellbeing, self-harm, and suicide.

It is designed for young people aged 11-16 years, and aims to help them understand their own mental health, build emotional resilience, and be aware of the needs of the young people around them. It also helps them have the confidence to seek help if they are concerned about their own feelings or the emotional health of their peers. In response to the Covid-19 pandemic, some additional support services have been made available to children and young people to give them more options for accessing help at the current time. These include support from professionals via text messaging; over the phone; or via online chat.

Self Harming Training for Schools

Through GHLL, school staff, parents and pupils (aged 11+) have been offered training on self-harm. A Trainer with lived experience of self-harm talks openly and honestly about their own experiences and offers practical strategies to overcome it. The sessions have been delivered for 12 years face to face in Gloucestershire, with some delivery online during the onset of Covid-19. School staff, who have received the training, have remarked on how the training has reduced stigma and how it is adapted to meet the audience need, whilst dealing with the topic sensitively.

Sleep.

A good night's sleep is important for a child's physical and mental wellbeing; and development. It is recommended that teenagers get around nine hours sleep a night; increasing to 10 hours for children aged 8 to 10 years. Anxiety and 'screen time' before bed can impact on how well children sleep, and the NHS recommend that young people stop using screens an hour before bed time.

What does the data tell us?

The average time that primary children were in bed the night before the survey was 9 hours and 50 minutes; just below the recommended 10 hours. Secondary pupils were in bed for on average 8 hours and 20 minutes; again below the recommended amount of sleep for teenagers.

Overall, 21.7% of young people reported that they frequently woke

or couldn't sleep because they were worried about something. This was more common among girls and highest for girls in Secondary and Year 12/FE; just under a third of whom (28.4 and 28.6% respectively) frequently were woken, or couldn't sleep due to worrying.

55.2% of secondary school pupils and 59.2% of primary school pupils reported taking an hour or longer to fall asleep. The majority reported just lying there, relaxing or reading.



21.7%

said they found it hard to sleep because they were worried about something



40.5%

of secondary pupils and

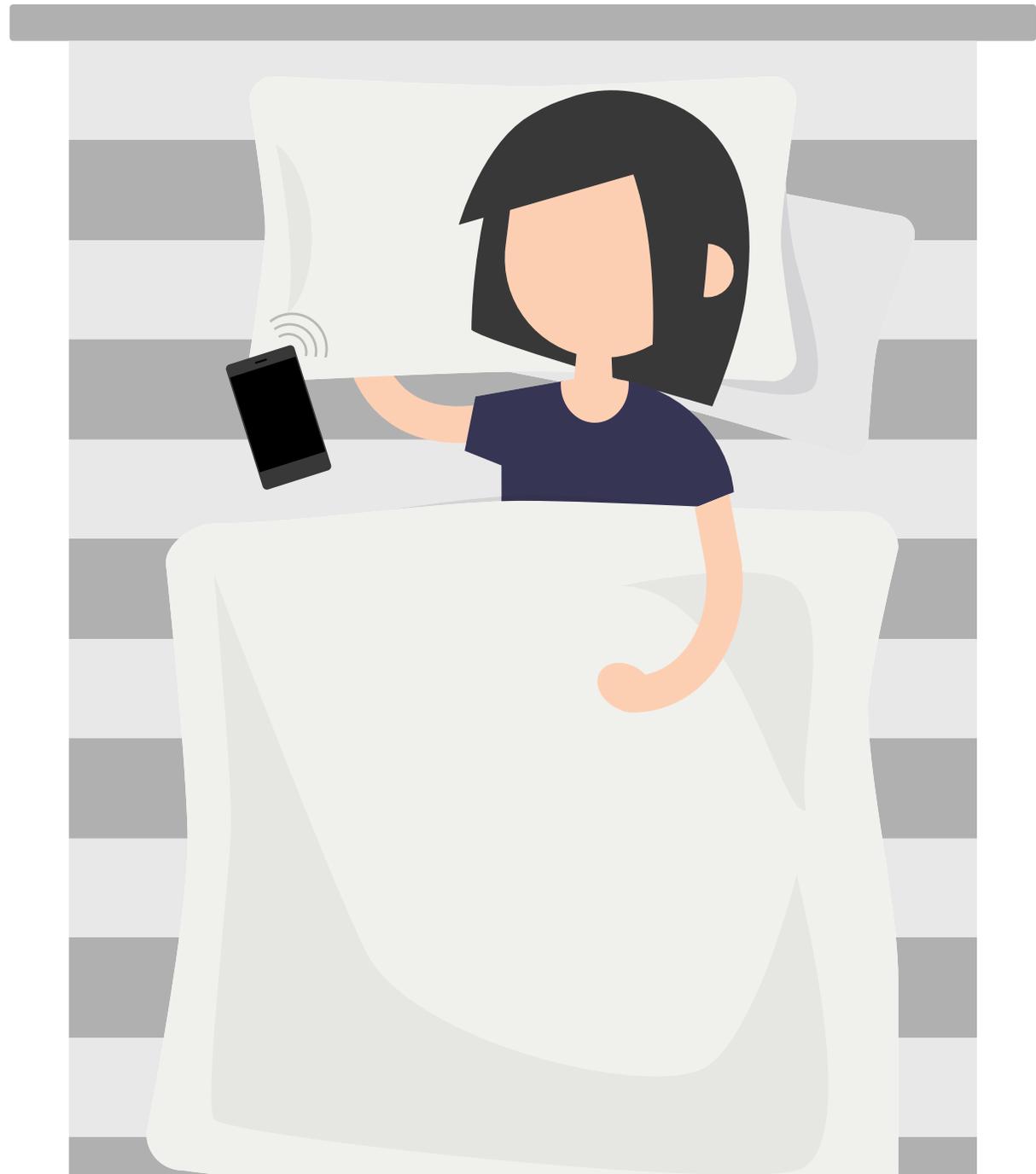
22.3%

of primary pupils said that they were using social networks, the internet or computer games between going to bed and falling asleep



What are we doing?

GHLL have a web page ('Counting Sleep') dedicated to offering advice about sleep for Pupils. There is a downloadable resource pack with a range of hints and tips to achieve good sleep hygiene, and to enable children and young people to get a better night's sleep. Some schools have also used this as an intervention for their Healthy Schools Award where they have found their pupils are coming into school very tired (going to bed very late at night/and or falling asleep/ arriving late at school). This has also required parental support.



Relationships and sex.

It is important that young people have the understanding and emotional skills they need to form healthy and safe relationships; and make informed decisions about sex when the time is right.

Lack of knowledge and information about sex and relationships may mean that young people find themselves in harmful situations. It can also lead to unplanned pregnancies and Sexually Transmitted Infections (STIs).

What does the data tell us?

Positively, 83% of secondary school pupils and 79% of Year 12/FE students said that the teaching they'd had on healthy relationships and sex had been helpful; however 11.6% of secondary students and 5.7% of Year 12/FE students wanted more support with and knowledge about safer sex.

11.9% of Year 12/FE students reported that they didn't feel confident about using a condom; and of

the Year 12/FE students who had had sex, 11.2% did not use any contraception when they last had sexual intercourse.

8.7% of secondary students wanted more knowledge about or support with sexual identity; a decrease on the 2018 survey. Notably, 18.6% of secondary pupils and 13% of Year 12/FE students said that they'd been bullied in the last year because their peers thought they were gay, lesbian or bisexual.



83%

of secondary school pupils found the teaching that they'd had on healthy relationships and sex helpful



79%

of Year 12/FE students found the teaching that they'd had on healthy relationships and sex helpful

What are we doing?

In September 2020, it became a statutory requirement for all schools in England to provide age appropriate Relationships and Sex Education (RSE) to their students (RSE for secondary schools and Relationships Education for primary schools). GHLL have provided all schools in the county with up to date resources and training to support this.

Schools in Gloucestershire are also able to access free training provided by the charity Stonewall to help staff learn practical techniques for tackling homophobic, bi-phobic and transphobic bullying; and promote diversity and inclusivity. GHLL also provide an online training session for schools around Equalities and Transgender awareness.



The Gloucestershire school nursing team

Gloucestershire's school nurses are qualified public health nurses who work with children and young people aged 5 to 19 years, and their families, both in and outside of school. The school nurse team can offer support and advice on a range of health issues, including relationships and sexual health, emotional wellbeing, anxiety, bullying, and healthy lifestyles. Support is offered face to face through school based 'drop-ins', in groups or one to one, and digitally via a video platform and confidential text messaging.

School Nurses are trained to educate young people and enable them to make healthy choices to suit their individual needs. Young people will seek advice from school nurses about relationships and sexual health including; safer sex and use of condoms; contraception and pregnancy; sexually transmitted infections; sexual identity and gender identity. School nurses play a vital role in supporting pupil's health and wellbeing, and also work closely with partner agencies to keep children and young people safe from harm and exploitation. School nurses aim to provide a service that is visible, accessible and confidential. One young person described the school nurse as 'someone you know you can trust'.

C-Card

Young people in Gloucestershire can access free condoms and sexual health advice via the C-Card scheme. Once registered for the scheme by a trained worker or school nurse, young people can access condoms from a range of accessible locations across the county. The majority of schools, colleges, universities and GP surgeries across Gloucestershire take part in the scheme. Condoms can help to reduce infection risks and prevent unplanned pregnancy.

Feeling safe and staying safe

Feeling unsafe has a significant impact on a child's wellbeing, with knock on effects for their mental and physical health in the short and long term.

What does the data tell us?

The vast majority of pupils in Gloucestershire feel safe at school and at home; with 89.9% saying they felt safe at home and 78% feeling safe at school. Unfortunately this is not true for all our young people. A total of 2.7% of pupils said they felt unsafe at home, and 5.9% reported feeling unsafe at school.

National data tells us that 1 in 5 children are exposed to domestic abuse and that children exposed to domestic abuse are more likely to have behavioural and emotional problems.

Secondary and Year 12/FE students were asked if they or anyone in their immediate family had ever been a victim of domestic abuse; 84.2% had not,

but 4.5% had frequently been abused or witnessed abuse. A further 9.7% said they had sometimes witnessed domestic abuse. In the majority of cases, the abuse had taken place in the past, but for some pupils the abuse was ongoing.

While the internet and social media have introduced new opportunities for young people, they also come with new risks. 20.5% of secondary pupils reported that they had met a stranger in the real world that they had first got to know online (a higher proportion of girls than boys). Of these, a quarter (26.3%) said that they went on to meet the stranger on their own. In the vast majority of cases the stranger was about the same age, but in a small number of cases (4.4%) the stranger was an adult.



89.9%

said they felt safe at home



What are we doing?

Keeping children and young people safe is a core part of the curriculum.

All schools and colleges in Gloucestershire are required to carry out an annual audit of their safeguarding policies and procedures which is submitted to Gloucestershire's Safeguarding Children's Board (GSCB). The section 175 audit asks schools about their engagement with their pupils on issues such as healthy relationships, domestic abuse and grooming.

GHLL also work closely with the Gloucestershire Safeguarding Children Partnership (GSCP) and professionals working in domestic abuse to create two new training resources for secondary schools focused on teenage relationship abuse and understanding consent ('Give and Get').

Chelsea's Story covering Child Sexual Exploitation (CSE) is a theatre-based production which is used in conjunction with the safeguarding curriculum for secondary schools. Along with, 'In the Net' for primary schools on safe internet use.

For primary schools there is also the GHLL developed programme 'Keeping Myself Safe' which is based on Protective Behaviours and is a school-based resource designed to teach children:

- that they all have the right to be safe all the time
- how to recognise situations where they do not feel safe
- how to manage unsafe situations
- how to recognise their network of support

'Keeping myself safe' is a GHLL school-based resource designed to teach children and young people that they have the right to be safe at all times, and how to recognise and manage unsafe situations. Bullying, name-calling and playground squabbles may be perceived by some adults and parents as trivial problems, but how children deal with them is the learning material that will form their attitudes towards conflict in later life.

Gloucestershire County Council commissions 'STREET' (Safe Teenage Relationship Education & Empowerment Team) Gloucestershire. STREET is a county wide service for young people aged 13-19 who have experienced or are experiencing teenage relationship abuse, affected by domestic abuse in the home or are displaying harmful behaviour in their relationships. Support is provided through accredited group work programmes and one to one where there is a higher level of risk. Referrals are accepted from professionals on behalf of young people. In addition, TiC (Teens in Crisis), Gloucestershire Counselling service and the Nelson Trust are local charities which work to address Domestic Abuse and the impact it has.





Adverse Childhood Experiences

What are ACEs and why are they important?

Adverse Childhood Experiences (ACEs) are traumatic events that occur before the age of 18. Different people find different things traumatic, but there are some things that almost everyone will find distressing if they happen to them.

The ten most commonly identified ACEs include direct experiences such as sexual, physical or verbal abuse, and emotional and physical neglect; and indirect experiences such as parental separation, parental or carer substance misuse, family member with a mental illness, family member in prison and witnessing domestic violence. In this year's PWS, young people in Year 12/FE were asked to identify how many ACEs they had experienced in their lives.

ACEs in childhood can continue to have an impact on the rest of a person's life. They can change the way the brain develops and increase the risk of developing behaviours which can harm the individual and others. This increases the risk of poor physical and mental health later in life; and poorer social outcomes, such as low levels of education, poor employment prospects and involvement in criminal activity.

Developing resilience through access to a trusted adult in childhood, supportive friends, positive attachments and being engaged in community activities has been shown to improve outcomes, even in those who experience high levels of ACEs ².

What does the data tell us?

Approximately 40% of year 12s responded to the survey, of that 88% answered the ACEs question. Of those who answered the ACEs question 22% reported they had four or more ACEs (this is not statistically different from those reporting four or more ACEs in 2018). This equates to 560 young people; if extrapolated this would be equal to 1600 17 year olds across the county.

Of those who answered the ACEs question, 39.2% have not experienced any ACEs in their lifetime

(34.6% of all Y12+ in the survey). 25.0% of girls reported experiencing four or more ACEs compared to 19.2% of boys. This is slightly higher than in the 2018 Survey.

There was no significant difference in the proportion of young people reporting four or more ACEs when the data is broken down by district of education setting. However it ranged from 14% in Stroud to 21% in the Cotswolds.

Resilience can trump ACEs. Around 6% of young people with 4 or more ACEs recorded high emotional wellbeing scores. Despite the adversity these young people report experiencing, their current levels of

emotional wellbeing are strong, which is likely to suggest that they have other supportive factors in their lives.

Positively, a significant number of primary, secondary and Year 12/FE pupils who participated in the PWS suggested that they had access to a trusted adult; 78.2% of pupils said that if they were worried about something, they would go to a parent, family member or carer for help; while 34.8% said they would go to an adult in school including a teacher or teaching assistant. Feeling safe and secure is also important. 89.9% of pupils said that they feel safe at home, and 78.1% feel safe at school.

What are we currently doing around ACEs

The PWS results provide an insight into the extent to which young people in Gloucestershire have experienced ACEs. Further analysis will help us understand how this may be impacting on other aspects of their wellbeing.

Work is already underway to tackle ACEs. The Gloucestershire Health and Wellbeing Board have formed a multiagency Advisory Panel on ACEs and a local ACEs strategy was launched in November 2018. The Education sub-group feeds into the Panel and works to drive forward the priorities within the strategy.

Having an awareness of ACEs can help schools to support their more vulnerable pupils; intervene early, and help build resilience and emotional wellbeing throughout the school community. We are raising awareness and understanding of ACEs within schools and other organisations, and sharing knowledge on how to embed the skills and behaviours needed to take action on ACEs through the delivery of coordinated communications, including two conferences: More than ACEs (2018) and From ACEs to Resilience (2021).

We are implementing training to equip schools and other organisations to respond appropriately to ACEs and trauma, for example, the Educational Psychology Service in collaboration with Gloucestershire Healthy Living and Learning (GHLL)

offer a range of training sessions for Mental Health Trailblazer schools, that aim to give schools an understanding of ACEs, trauma and attachment, and what can be done in schools to build and support resilience. There are a number of other training packages and webinars available to Gloucestershire schools that help staff support the mental health and wellbeing of their pupils, and develop targeted interventions to ensure that they are having the optimum impact on their pupils' developmental needs.

We have been implementing a Restorative Approach in Gloucestershire Schools since 2016. Restorative Practice is a term used to describe principles, behaviours and approaches which build and maintain healthy relationships and a sense of community, and can resolve difficulties and repair harm where there has been conflict. It has become increasingly important to link Restorative Practice with a Trauma Informed Approach and an awareness of ACEs. When Schools understand the impact of trauma and ACEs on the developing brain of the child, they can better support the learning environment to enable them to fully engage in their Education. Using Restorative approaches, we build resilience and create strong and safe relationships.

You can find out more about what is happening in Gloucestershire around ACEs [here](#).



Of those who answered the ACEs question

39.2%

have not experienced any ACEs in their lifetime (34.6% of all Y12+ in the survey)



78.2%

of pupils would go to a parent/carer/family member if they were worried about something



34.8%

said they would go to an adult in school including a teacher or teaching assistant

Case study

The ACEs strategy acknowledges the importance of organisations and communities working in partnership to take action on ACEs. Cheltenham Borough Council established its No Child Left Behind Community Agreement, which is a commitment between Cheltenham schools, organisations and residents that they will support one another in a way that reflects kindness, empathy and understanding of the impact of childhood adversity.

School life

The PWS includes questions about pupils' school experience.

What does the data tell us?

Overall, 63.5% of pupils reported that they enjoyed school. The proportion of pupils enjoying school was highest amongst primary school pupils (70.3%); and lowest amongst those at secondary school where only half of pupils (51%) reported that they enjoyed school.

Bullying has a significant impact on children's emotional wellbeing and their engagement with school. In the 2020 survey, 7.3% of pupils reported being 'seriously bullied' on a regular basis (monthly, weekly or daily) in the past year; with verbal bullying remaining the most common form. The proportion of pupils reporting that they had been seriously bullied decreased as pupils got older. While 9.5% of pupils at primary level reported being bullied; this reduced to 3.3% of students in Year 12/FE. All pupils were also asked how well their school dealt with bullying. Between the 2006 and 2018 surveys there was an increase from 55% to 58% in the proportion of pupils who felt their school dealt with bullying well, however in 2018 this dropped back to 53.6%.

The proportion of pupils who were stressed by school work increased as pupils got older. While a third of primary school pupils (32.5%) reported being stressed; this rose to 54.5% of secondary school pupils and 53.4% of students at Year 12/FE. Girls were notably more likely to feel stressed from school work than boys at both secondary and Year 12/FE levels.

Positively, overall 73.4% of pupils felt that school gave them useful skills and knowledge.

Schools play a role in helping students feel confident about their futures. Overall just under two-thirds of pupils (60.2%) reported feeling confident or extremely confident about their future; however confidence declined between primary and secondary school pupils; and again at Year 12/FE. Only half of Year 12/FE pupils (51%) felt confident about their future compared to 69% of primary school pupils; and confidence among secondary school pupils has fallen since the 2010 survey.



63.5%

of pupils reported they enjoyed school



Positively, overall

73.4%

of pupils felt that school gave them useful skills and knowledge



What are we doing?

The results of the PWS help schools understand their pupils' experiences and identify areas for improvement. A number of schools have used the findings to inform anti-bullying initiatives; and activities aimed at improving young people's welfare and wellbeing at school.

One of the ways that schools have been promoting positive mental wellbeing is through the 'Five Ways to Wellbeing' (connect, be active, take notice, keep learning, give).³The OAKS challenge (One Act of Kindness Shared) encourages pupils to complete each of the Five Ways to Wellbeing as alternative homework; while the Positive Playground Practice initiative encourages them to adopt the Five Ways to Wellbeing during break and lunch times.

Positive Playtimes

- To share with the students, and teachers, research-based behaviours (5 Ways to Wellbeing) that if undertaken within a healthy lifestyle can help combat the stresses and strains of every-day life and improve low mood
- Kick start a positive mental wellbeing culture focussing on knowledge and behaviour change
- To leave students and teachers with a toolkit to be able to plan and boost activities linked to the '5 ways to wellbeing'
- To set up key staff to place an emphasis on target students, those who would need more help than others, those who present low mood more often, than not
- To give the school an intervention that can fit annually into their PSHE curriculum and can be written and presented as evidence towards any local Healthy School awards.



³The 'Five Ways to Wellbeing' was developed by the New Economics Foundation. They are evidence based everyday activities that people can do to improve and maintain their mental wellbeing.

What happens to the results?

This report only presents a summary of some of the main findings from the PWS and we will be taking an in-depth look at the results. The 2020 results have already been shared with participating schools and colleges across the county. Schools are able to use the findings to help them identify areas for improvement and action; and work toward their 'Healthy School' or 'Healthy FE' accreditation or Mental Health Champion Award through the GHLL programme.

The findings are also used by the county council and its partners to inform their wider work with children and young people.

This has included;

- the council being able to investigate inequalities in access to services for pupils by characteristics such as mental health support for BAME children and young people and children and young people with disabilities,
- identifying schools to be included in Trailblazer Mental Health programmes,
- and helping to evaluate commissioned services such as Restorative Practice and the Active Gloucestershire Daily Mile.







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