



Leicester Children and Young People's Health and Wellbeing Survey 2016

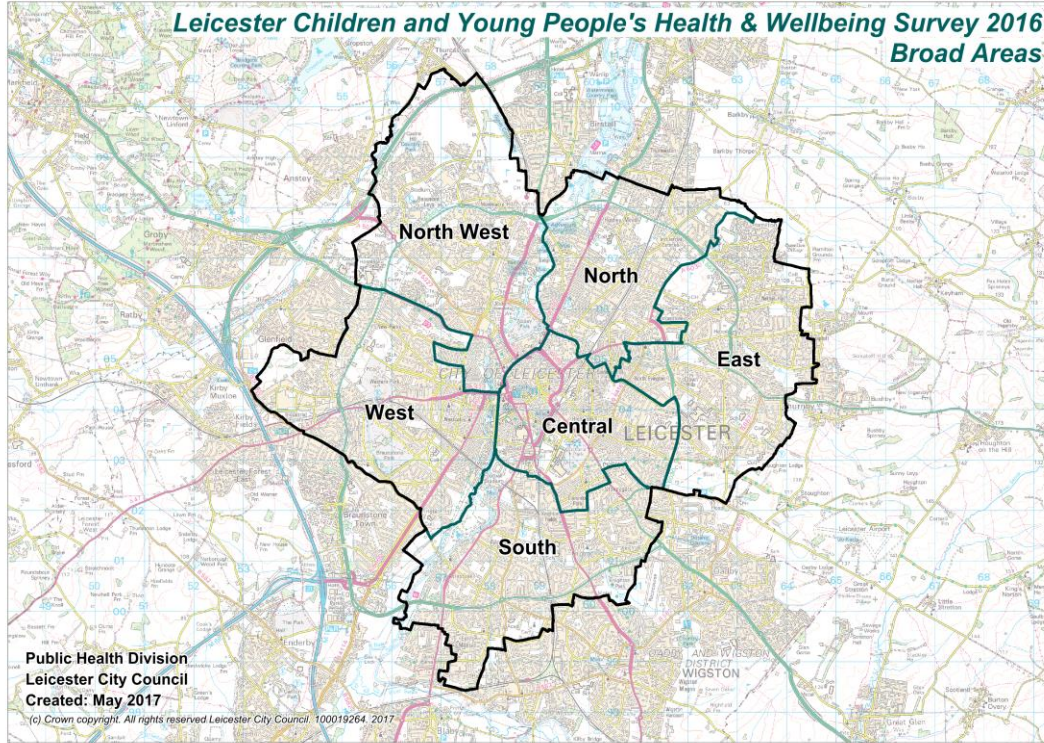
Report of Findings

Leicester City Council and Schools Health Education Unit

Version 1.0



**Leicester Children and Young People's Health & Wellbeing Survey 2016
Broad Areas**



Public Health Division
Leicester City Council
Created: May 2017

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- The Schools Health Education Unit was commissioned by Leicester City Council to undertake a survey of children and young people in Leicester.
- The survey was conducted between October 2015 and April 2017.
- The majority of questionnaires were completed on-line in schools. A small proportion of respondents completed paper questionnaires, and a number completed surveys outside of schools.
- 2,997 responses were included in the final sample. This represents 28% of the target group of children and young people in years 6, 8 and 10 in Leicester schools.

Survey at a glance...

The sample... 2,997 10-15 year olds (year groups 6, 8 and 10) drawn mainly from 30 primary schools and 8 secondary schools in Leicester. *Page 62.*

What we mean by risk?

Survey analysis highlights specific demographic groups as particularly vulnerable. *Page 65.*

Technical notes...

Including statistical reliability and lower geographies. *Page 69*

Where they live...

Nine out of ten children and young people think their area is a 'good' or 'ok' place to live. Most feel safe where they live and around a quarter want to live in the same area after leaving school. *Page 9*

Schools...

Many 10-15 year olds are positive about their school. It's the main source of information for many health and wellbeing topics. Some feel they are asked about their opinions but few think their opinion makes a difference. *Page 15*

Leisure...

The most common leisure activities are watching TV, playing electronic games, listening to music, and communicating by phone, text or messages on line. Nearly half belong to a group, such as a sports team or youth organisation outside of school. *Page 19*

Relationships...

Just less than half of 12-15 year olds say they are 'going out' or 'seeing someone', some of whom report at least some jealous, aggressive or controlling behaviour. Less than one in ten of all 14-15 year olds say they have had sex. Two-thirds of whom reported using contraception. *Page 24*

Emotional wellbeing and resilience...

Many children worry 'quite a lot' about at least one issue. Two-thirds say they have a trusted adult they can talk to when worried about something. When things go wrong two thirds say they learn from it for next time but, under a quarter say they get upset and feel bad for ages. *Page 29*

Diet...

Three quarters said they eat fewer than the recommended five portions of fruit and vegetables a day. Close to one in ten report they have a take-away meal on most days. *Page 40*

Physical activity...

Few children and young people report exercising at currently recommended levels for them. Seven in ten use active travel for at least some part of their journey to school. A quarter belong to a sports team outside of school. *Page 46*

Smoking...

Smoking at age 15 in Leicester is significantly lower than in England. This survey shows that a third of children and young people have a parent/carer who smokes and that these children are more likely to have tried smoking or be a smoker. *Page 54*

Bullying...

Half say they have been bullied ever, a quarter in the last 12 months. This was mostly in or near school, with bullying on-line or by text also reported. Not all think schools deal well with bullying. *Page 36*

Oral Health...

More than four-fifths clean their teeth at least twice a day. A similar proportion visit the dentist for a check-up. One in six say they do so only when they have trouble with their teeth. *Page 51*

Alcohol and drug use...

Reported alcohol and drug use at this age is lower than in England. Exposure to drugs appears to increase with age. One in five 14-15 year olds say they have been offered drugs. One in ten say that they have ever tried drugs. *Page 57*

Who's at risk?

The use of the term 'risk factor' in this report...

is to highlight selected associations found in the survey. The factors below can be viewed as risks, undesirable experiences or as indicators of potential issues with engagement in school or community. Judgement as to the extent to which these factors, either alone or in combination, are a risk to longer term wellbeing should be considered when reflecting on the survey results.

The factors considered...

whether respondents say they view their area as 'not a good place to live', 'hardly enjoy lessons', experience 'abusive or aggressive behaviour in a relationship', indicate 'poor resilience', 'have been bullied in the last 12 months', have 'not had something to eat for breakfast', 'do not enjoy physical activity', 'have a parent/carer who smokes', 'drink more than a sip of alcohol' and having 'ever been offered drugs'. Page 65.

Overall...

analysis by demographic group, deprivation and geography has highlighted White British, most deprived, and those living in the North West, South and West of the city as more likely to report 'risk factors' (as described above) than other groupings of children and young people in the city.

Boys and young men...

are more likely to report that they hardly enjoy any of their lessons, but less likely to say they do not enjoy physical activity or to respond in a way that shows poor resilience.

Girls and young women...

are more likely to show poor resilience or not to enjoy physical activity, but are less likely to say that they 'hardly enjoy any of their lessons' or that they have ever been offered drugs.

Experience of these factors increases with age...

14-15 year olds were more likely to say they do not live in a good place, or enjoy any of their lessons, that they have experienced abusive behaviour in a relationship, drink more than a sip of alcohol and have been offered drugs.

White British respondents...

are more likely to report that they do not think they live in a good place, hardly enjoy any of their lessons, have been bullied in the last 12 months, have a parent/carer who smokes, have drunk more than a sip of alcohol, and have ever been offered drugs. They are more likely to not enjoy physical activity. These respondents also show a greater likelihood of Free School Meals takeup, having a disability or illness, and reporting a Poor Wellbeing score.

Black respondents...

are less likely to report the issues highlighted by White British respondents. Responses are similar to Leicester overall, however they are more likely to not have had something to eat for breakfast. This group is more likely to report having Free School Meals and being a young carer. They report a lower likelihood of disability or illness and poor wellbeing.

By geography and deprivation...

there is a higher likelihood that those living in the North West, South and West of the city, and also those living in the most deprived areas, will report a risk factor.

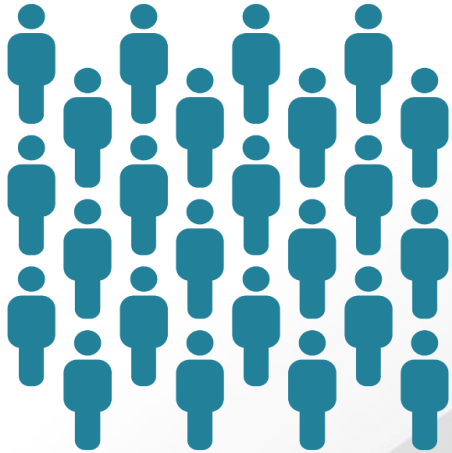
Asian ethnicity...

are less likely to report the issues highlighted by their White British counterparts. They are more likely to report where they live to be a good place, to enjoy lessons, to demonstrate resilience, and to enjoy physical activity. They are less likely to have been bullied in the last 12 months, to have a parent/carer who smokes and to have drunk more than a sip of alcohol. Asian respondents are also less likely to report having Free School Meals or a Poor Wellbeing score.

Mixed heritage...

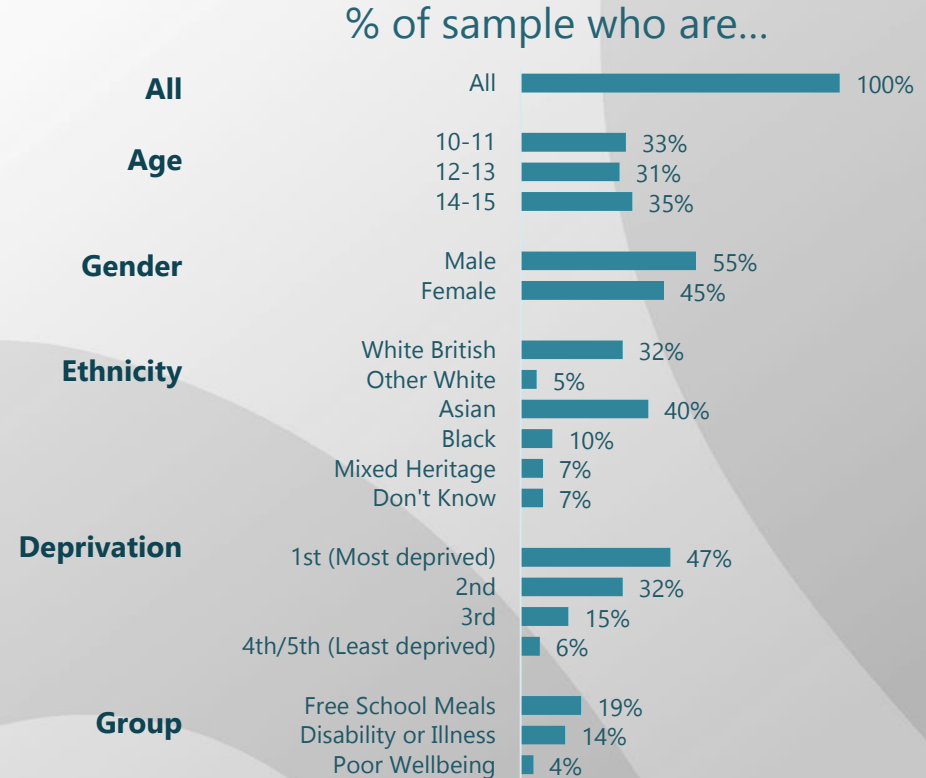
most responses are not significantly different from the overall sample, but are more likely to report having a parent or carer who smokes and that they have been offered drugs.

Analysis of the sample* focuses on age, gender, ethnicity and deprivation. As well as groups such as those in receipt of Free School Meals (FSM), those with a disability or illness (DOI), and those with a poor emotional wellbeing score (PWB).



Final Sample: 2,997 responses

Percentage breakdown by groups can be seen in the spine chart (on the right).



*Further sample information can be found on page 62

**Spine charts are used in the survey for group analysis.



- Over half of 10-15 year olds think their area is a good place to live and a further third think it's OK.
- 6% of 10-15 year olds did not think their area is good.
- The most common suggestions for improving their area were better parks, more things for young people to do, and cleaner streets.
- One in four children want to stay in their neighbourhood after leaving school.

How do you feel about where you live?

Most children and young people report that their area is either a good (58%) or OK (36%) place to live.

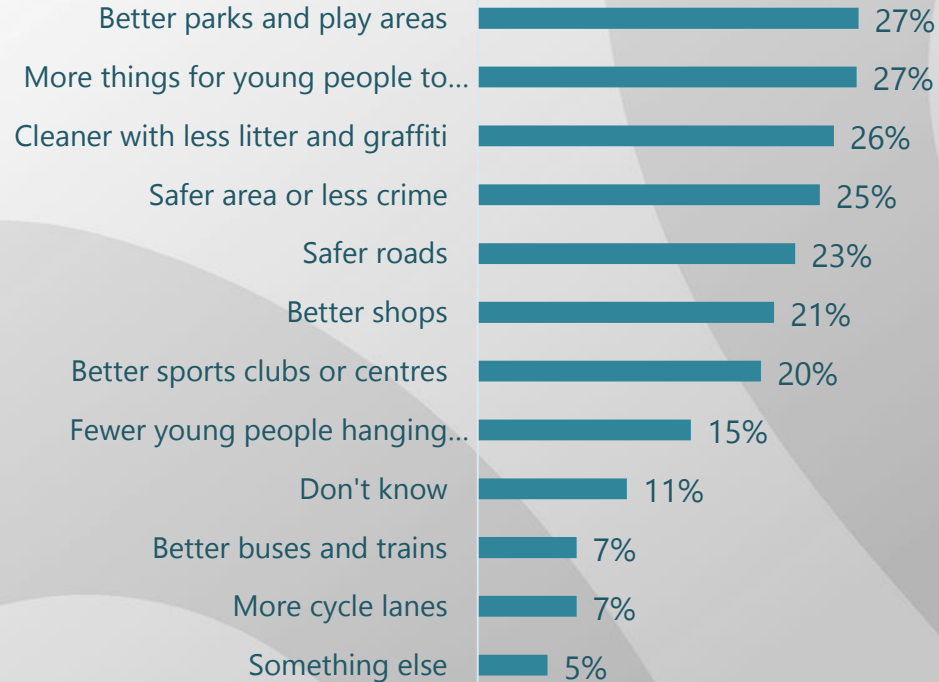


A range of issues were raised to help improve their local area.

Young people would like to see better parks, more things to do, and cleaner areas.

Safer areas/roads and better shops/sports clubs are also areas for improvement for one in five 10-15 year olds.

% improving your local area – all responses

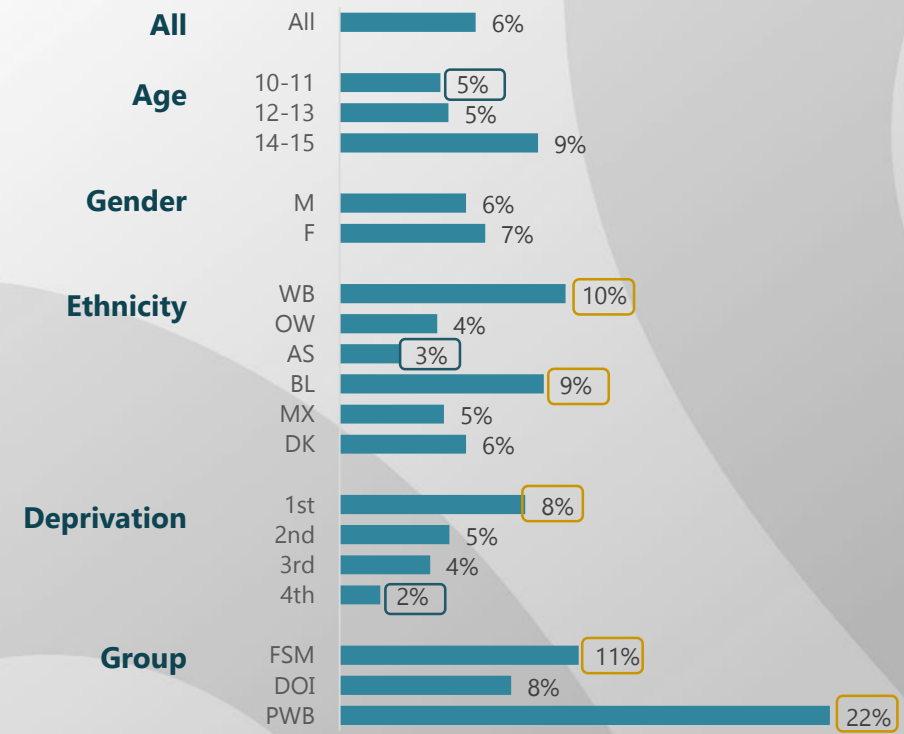


Few (6%) 10-15 year olds report that their area is 'not a good place to live'. They highlight issues such as safer roads, fewer young people hanging around, and more things to do for young people as areas for improvement.

% improving your local area – respondents 'not a good place to live'



% area is not a good place to live



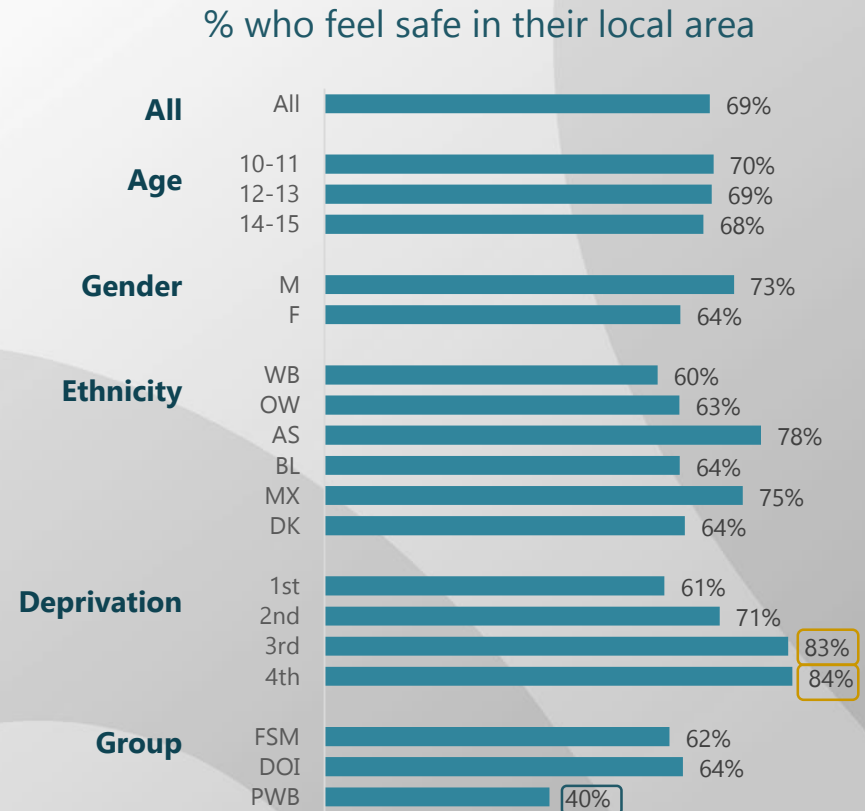
White British and Black ethnicity, most deprived, free school meals and poor wellbeing are significantly more likely to report their area as not a good place to live.

Nine out of ten (92%) 10-15 year olds feel safe in their home, eight out of ten (79%) feel safe in school and seven in ten (69%) feel safe in their local area.

71% report they feel safe on their journey to and from school.

Children and young people are significantly more likely to report feeling safe in their local area if they reside in less deprived areas.

Those with a poor wellbeing were significantly less likely to say they feel safe in their local area.



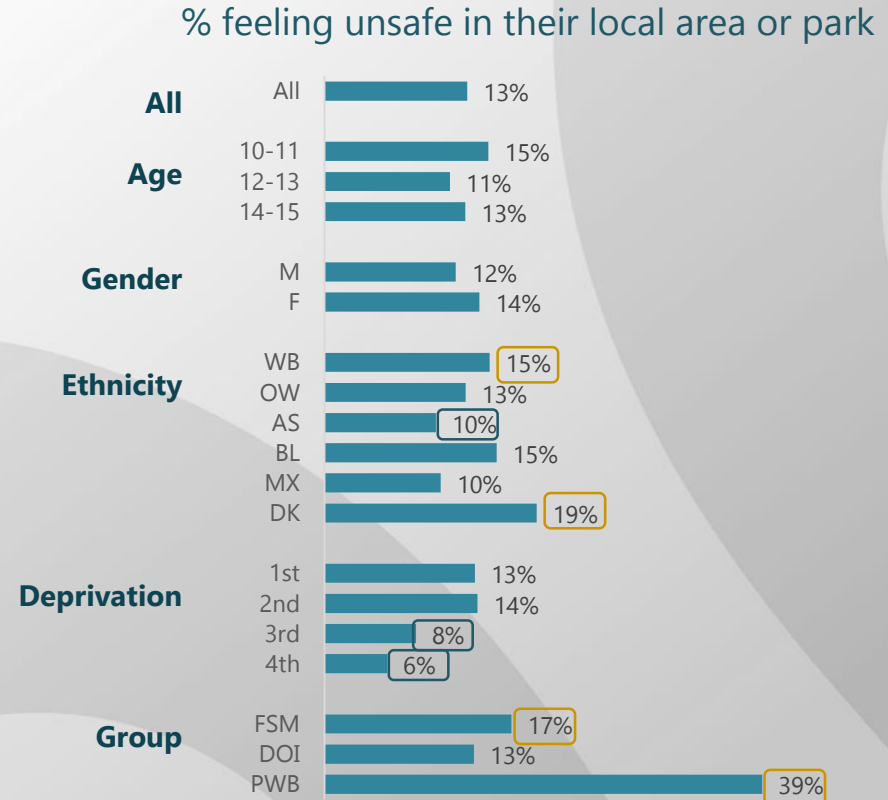
Significantly higher or lower

While few 10-15 year olds feel unsafe in their home (2%) or at school (6%). 13% feel unsafe in a public space (local area or park).

One in five 10-15 year olds reported feeling unsafe at either home, school, local area or their nearest park.

Those living in the least deprived areas are less likely to feel unsafe in public spaces.

White British, poor wellbeing and free school meals children and young people were significantly more likely to say they feel unsafe in their local area or park.



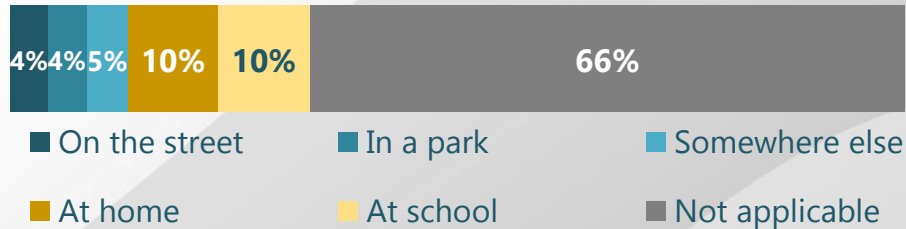
About a third (35%) of 10-15 year olds experienced an accident requiring medical attention in the last year. Most accidents took place in the home or at school.

Males were significantly more likely to have had an accident in the last year.

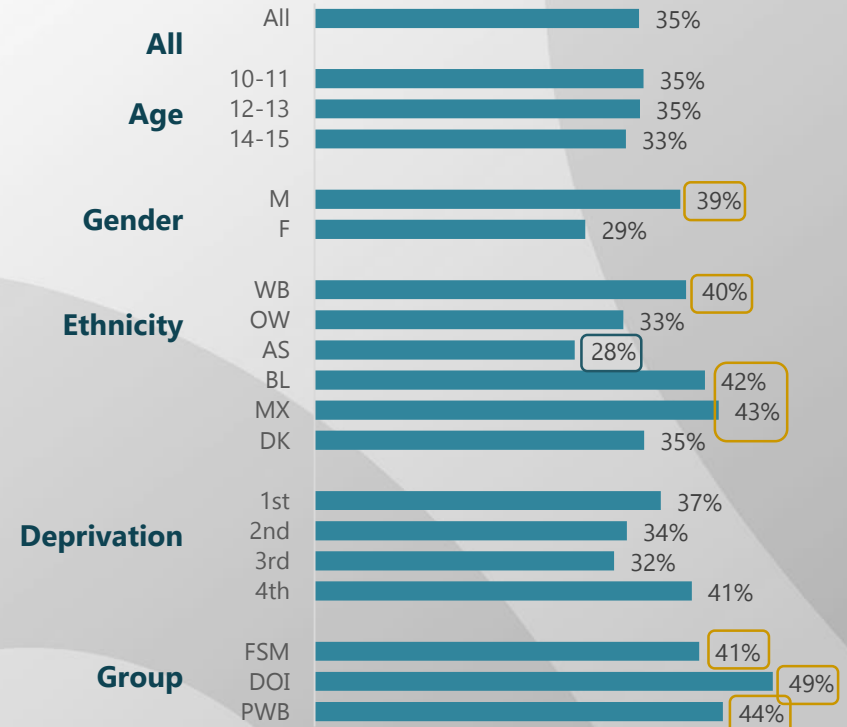
White British, Black and Mixed Heritage reported significantly higher rates of accidents.

Free school meals and poor wellbeing children were more likely to have had an accident in the last year.

% where accident took place



% who have had an accident in the last year



Significantly higher or lower



- Three-quarters of 10-15 year olds enjoy at least half their lessons.
- Six in every ten 12-15 year olds want to go to university.
- Six in every ten 12-15 year olds say their ideas and opinions are asked for at home, school or in the community.
- Half of 12-15 year olds think their opinions make a difference.

Over half (54%) of respondents enjoy most of their lessons. One in ten say they 'hardly enjoy any of their lessons'. Many 10-15 year olds agree with positive statements about their school.

% enjoying school lessons



■ Hardly any of them ■ Less than half of them
■ About half of them ■ Most of them

Younger respondents are more likely to agree with these statements compared to older respondents.

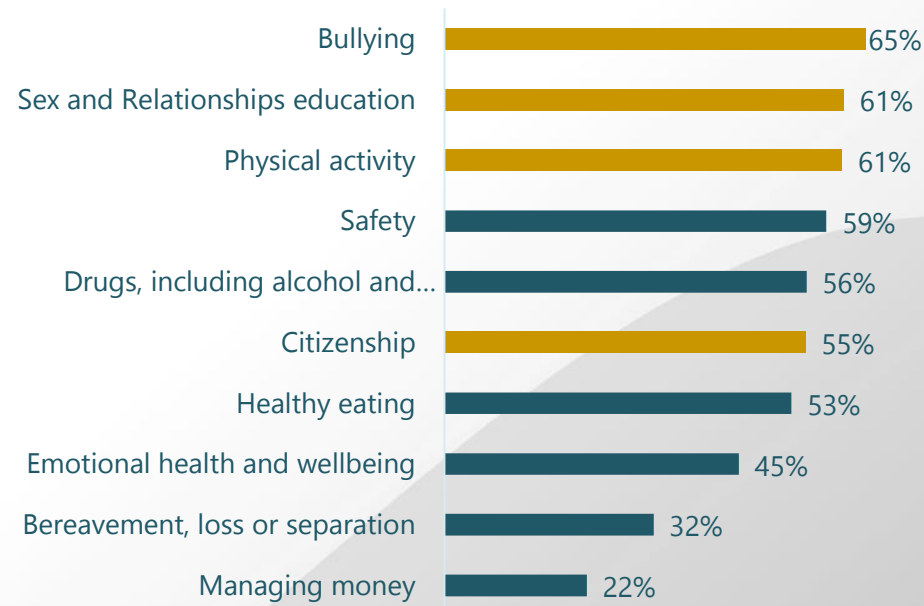
Seven out of ten 14 to 15 year olds say their work is marked and over half know their own targets.

% agreeing with statements about their school



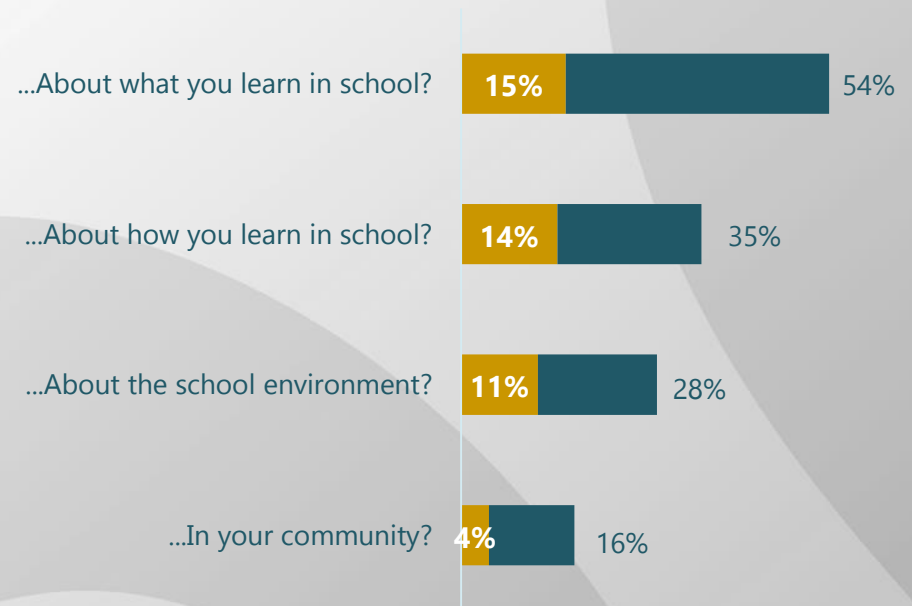
School is the main source of information on a range of health & wellbeing topics. Children and young people are more likely to report they are asked for their ideas in school compared to in the community. Fewer feel their opinions make a difference.

% get information from school on...



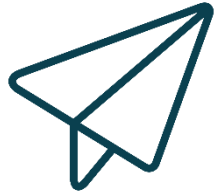
■ School is main source of information

% Shared ideas and opinions...



■ Opinions make a difference ■ Asked for opinions

Children and young people in Leicester have a range of aspirations.

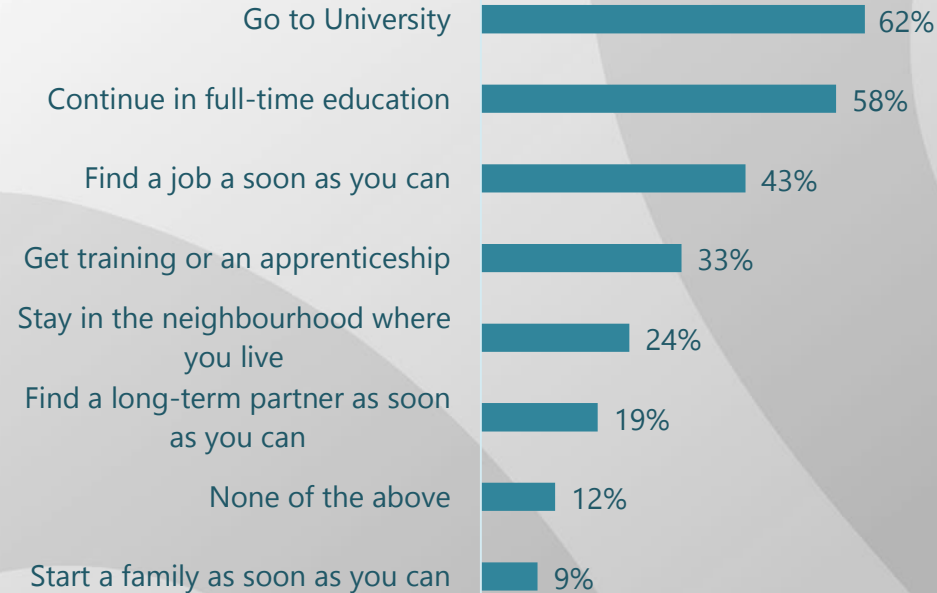


Six out of ten 10-15 year olds aspire to further education and university.

About half would like a job as soon as they can, while a third are seeking an apprenticeship or training.

One in five are seeking a long term partner as soon as possible and one in ten would like to start a family as soon as they can.

% want to do the following when they leave school...





- The most common leisure activities were watching TV, playing electronic games, listening to music, and communicating by 'phone, text or messages online.
- Two-thirds of children spent at least two hours looking at some sort of screen on the day before the survey.
- Nearly half of 10-15 year olds are part of a group such as a sports team out of school.
- Over a quarter of children say they do voluntary activities at least once a month.

Leisure Activities

The most common forms of activity in the evening before the survey were watching live or recorded TV or films, playing games, and listening to music.

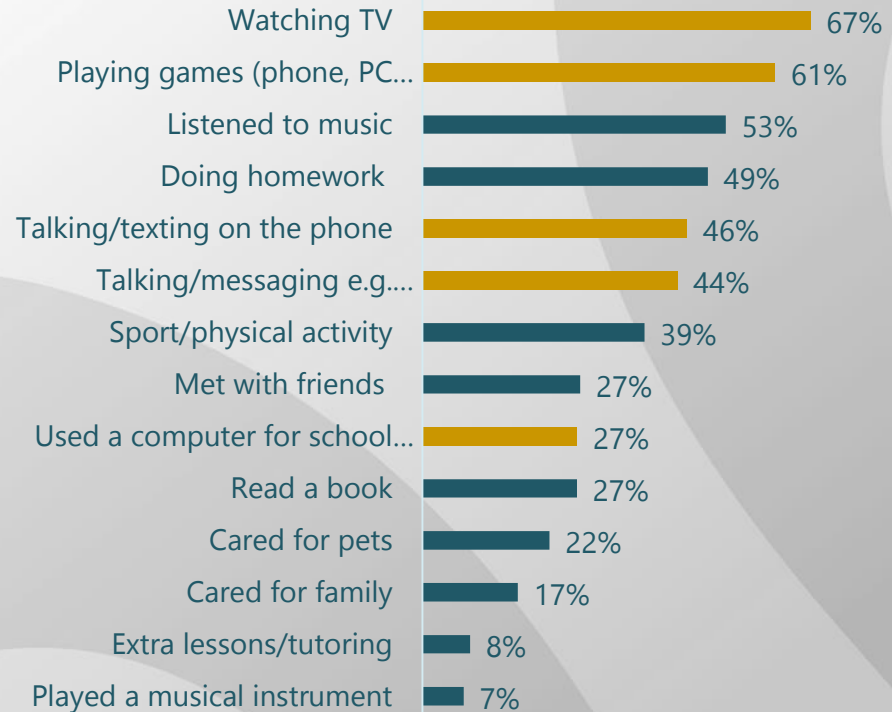


Screen based activities such as watching TV, playing computer games and texting all feature highly on the list.

Leicester children enjoy a variety of leisure activities.

Over a quarter of children read a book for pleasure. Less than one in ten played a musical instrument.

% activity* after school the day before the survey



Most children (66%) reported looking at a device screen for two hours or more on the day before the survey. One in five children reported looking at a screen for five hours or more.

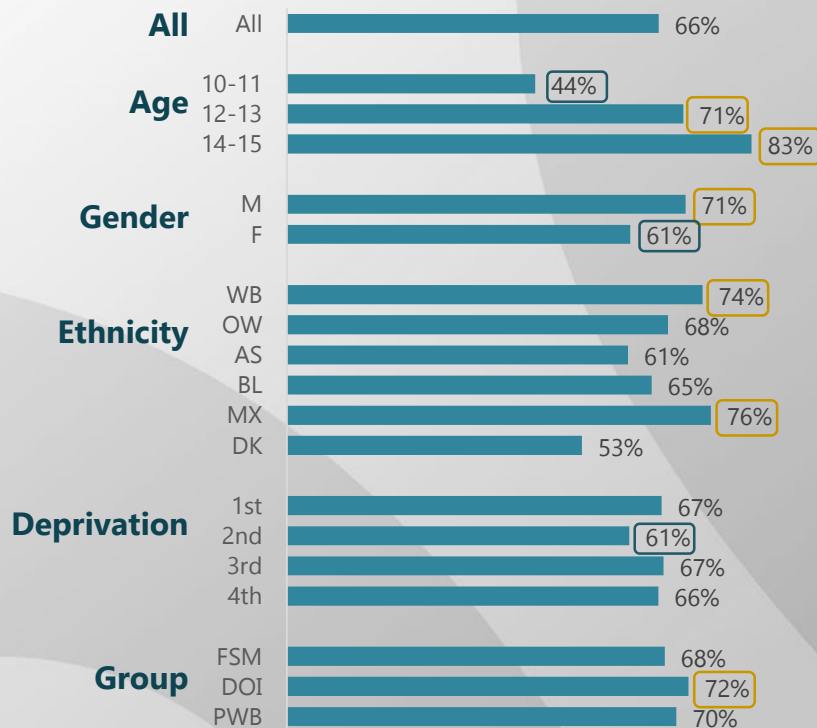


Increased screen time is linked to having a negative effect on children's wellbeing including anxiety, depression and low self-esteem.*

Older age groups are significantly more likely to look at a screen for two hours or more.

30% of 14-15 year olds looked at a screen for five hours or more the day before the survey.

% looking at a device screen for more than two hours

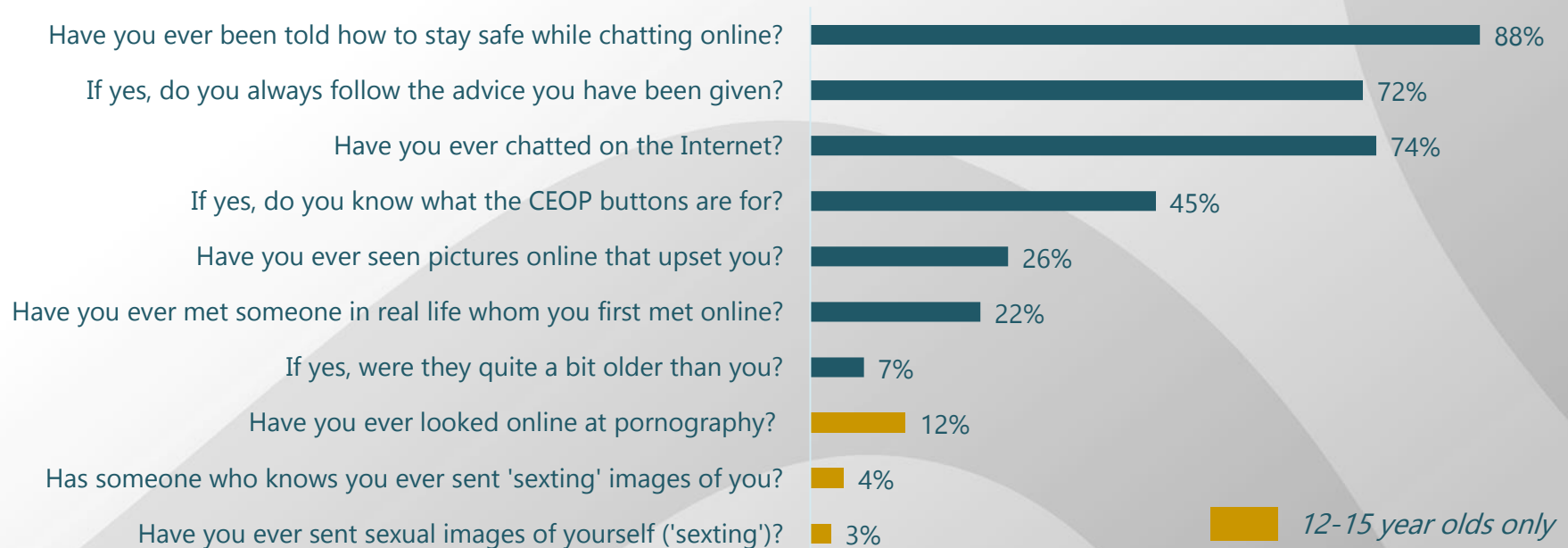


Significantly higher or lower

* Public Health England, How healthy behaviour supports children's wellbeing, 2013.

Nine out of ten 10-15 year olds said they had been told how to stay safe while chatting online and seven out of ten say they always follow internet safety advice. Significant minorities report seeing pictures that upset them, say they have met someone in real life first met on-line, or have looked on-line at pornography.

Being safe using computers and smartphones: % responding 'yes' to the questions below.



Close to half (45%) of 12-15 year olds say they volunteer outside of school (e.g. at a local organisation, raising funds, supporting a local or national issue, or other action to support the local community).



Older children were significantly more likely to volunteer at least once a month.

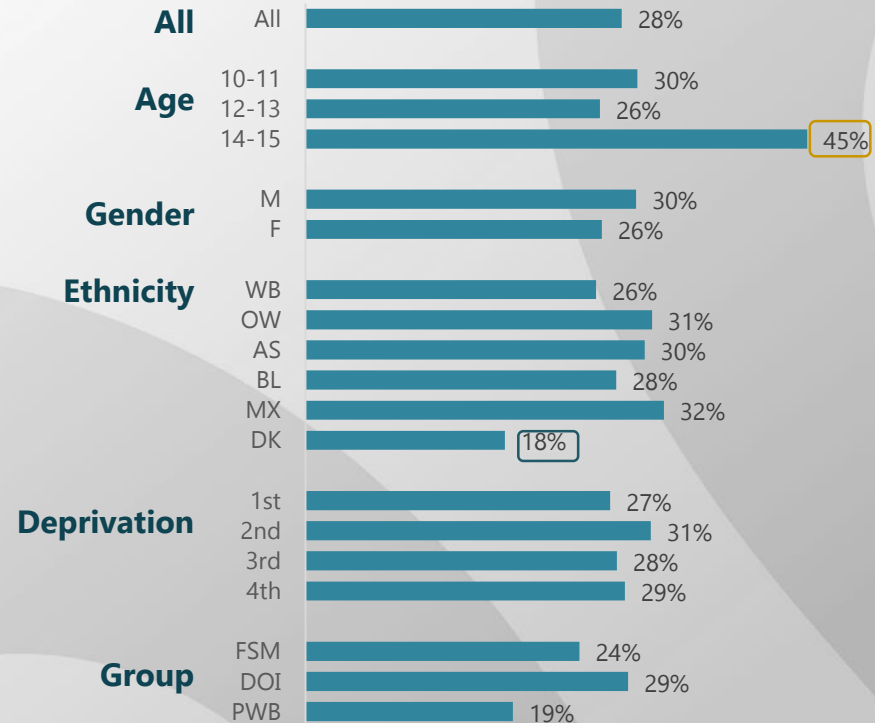
Half of children and young people do no voluntary activity.

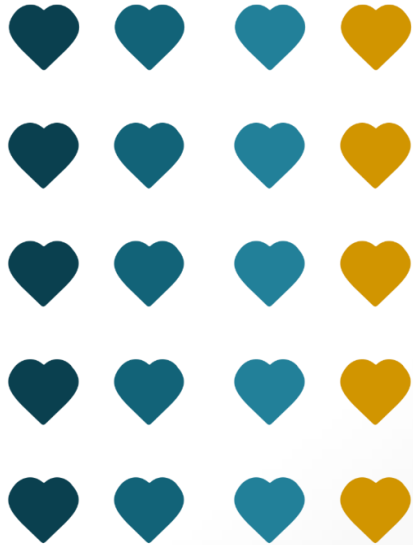
% reporting voluntary activity



- Never
- Less often than once a month
- At least once a month
- At least once a week

% undertaking voluntary activity at least once a month

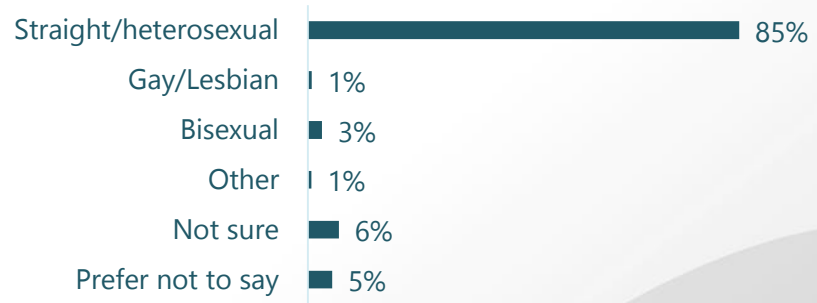




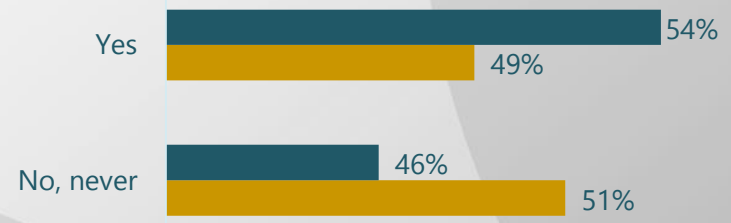
- Adolescence entails emotional, social and physical changes, including the exploration of closer relationships, and the development of gender and sexual identity.
- Just over half of 12-15 year olds say they have ever been in love and just less than half say they have ever been in a relationship.
- Four in ten who have ever been in a relationship report at least some jealous, aggressive or controlling behaviours.
- Less than one in ten 14-15 year olds report experience of sexual intercourse.

Children and young people reported a variety of sexualities. The main source of information for sex and relationships is school. Just over half of all 12-15 year olds said they had been in love, and just under half that they had been or are in a relationship.

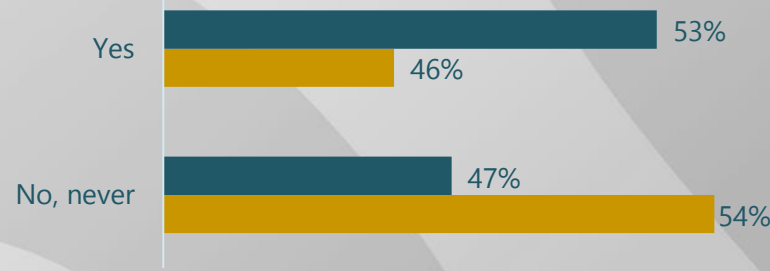
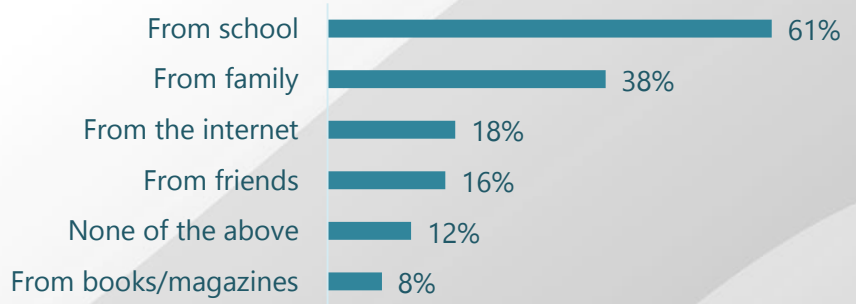
% reported sexuality of 12-15 year olds



% of males/females 'in love' and in a relationship



% sex and relationship advice of 12-15 year olds



■ In Love ■ In a relationship

Some young people also said they had experience of abusive or aggressive behaviour. Most, but not all said they knew where to get help.

One in five 12-15 year olds reported experience of aggressive or abusive behaviour in their relationship.

The most frequently reported was anger or jealousy about spending time with friends.

Four out of five 12-15 year olds in a relationship stated they knew where to go for help if they needed it.

% who have experienced abusive behaviour in their relationship

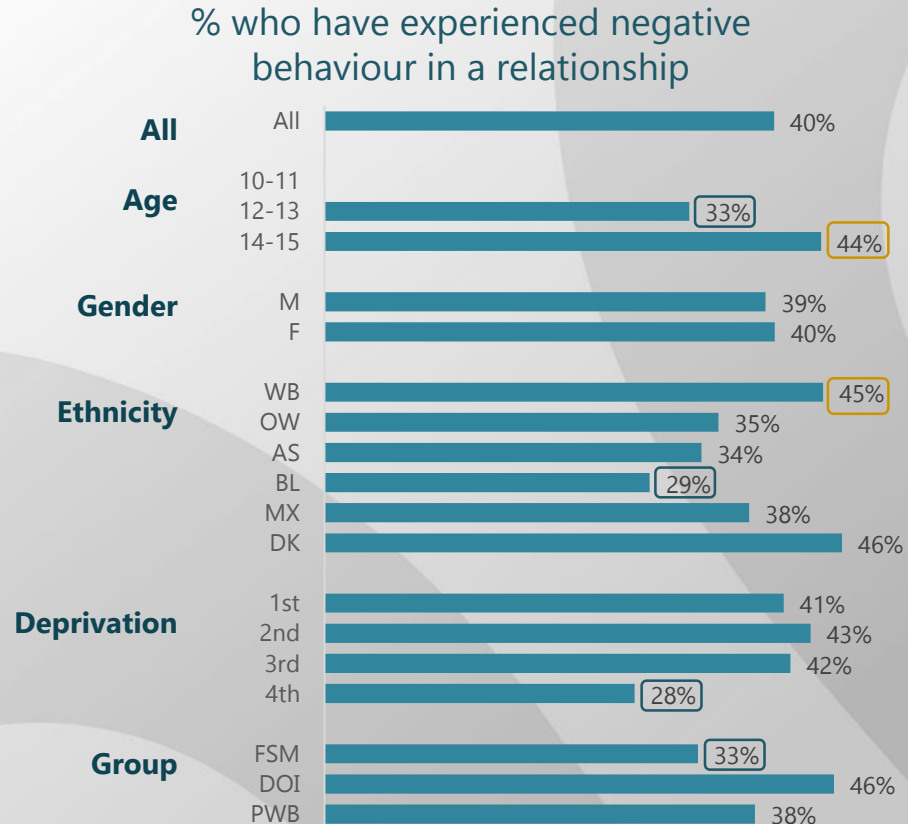


Overall, 40% of 12-15 year olds who had been in a relationship said that they have experienced at least one of the undesirable behaviours listed (on page 26).

There is no significant overall difference in experiences of abusive behaviour by gender.

Those aged 14-15 were significantly more likely to experience abusive behaviour in their relationship.

White British 12-15 year olds were more likely to say they have experienced abusive behaviour.



Less than one in ten 14 to 15 year olds (8%) reported ever having had sexual intercourse*, 5% stated they used some form of contraception.

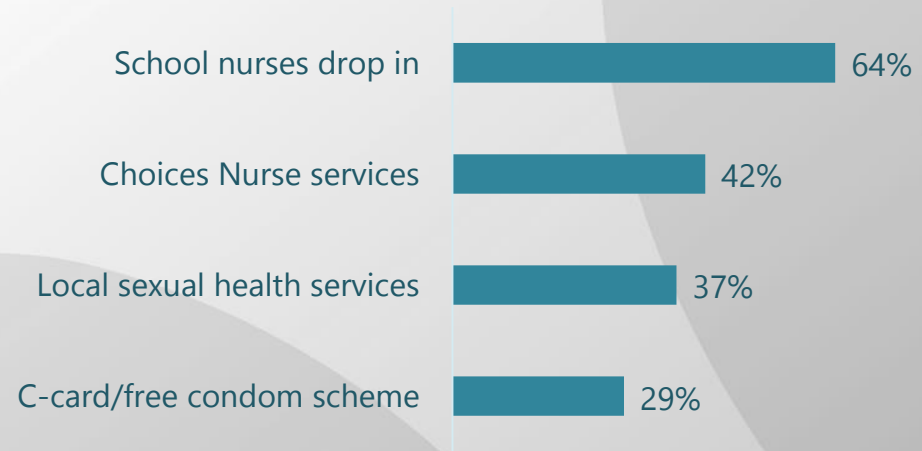
Groups more likely to report sexual intercourse include:



The mismatch in males may be due to over reporting.

Survey data indicates that of those who have had sexual intercourse 63% have used contraception.

% of 12-15 year olds aware of services



Knowledge and awareness of health and sexual health services is varied, fewer are aware of sexual health services.

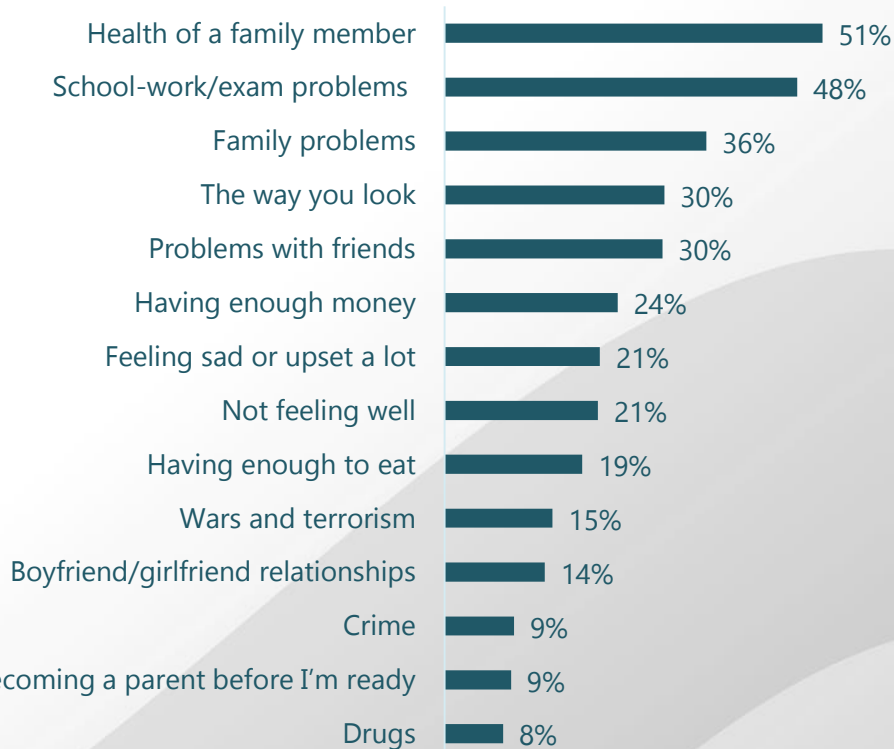
**labelled 'making love' or 'having sex' in the survey*



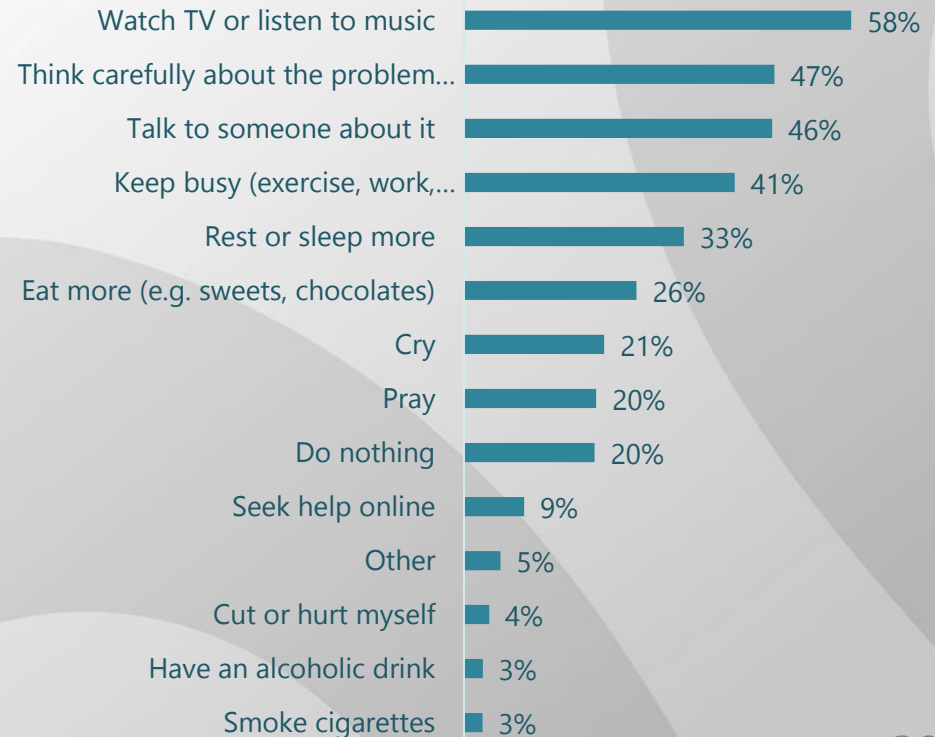
- More than four of every five children worry about at least one issue at least 'quite a lot'.
- Two thirds of children say they have a trusted adult they can talk to if worried about something.
- Three in every 10 children say they usually or always find it hard to trust people.
- 4% of 12-15 year olds say they usually or always cut or hurt themselves when stressed or worried.

Four of every five children (83%) worry about at least one issue at least 'quite a lot'. Children and young people react to these problems differently. Two out of every three (68%) children have an adult confidant, while one in ten (10%) state they know no adult they can trust.

% worry at least 'quite a lot' about...



% who at least 'usually' react by...



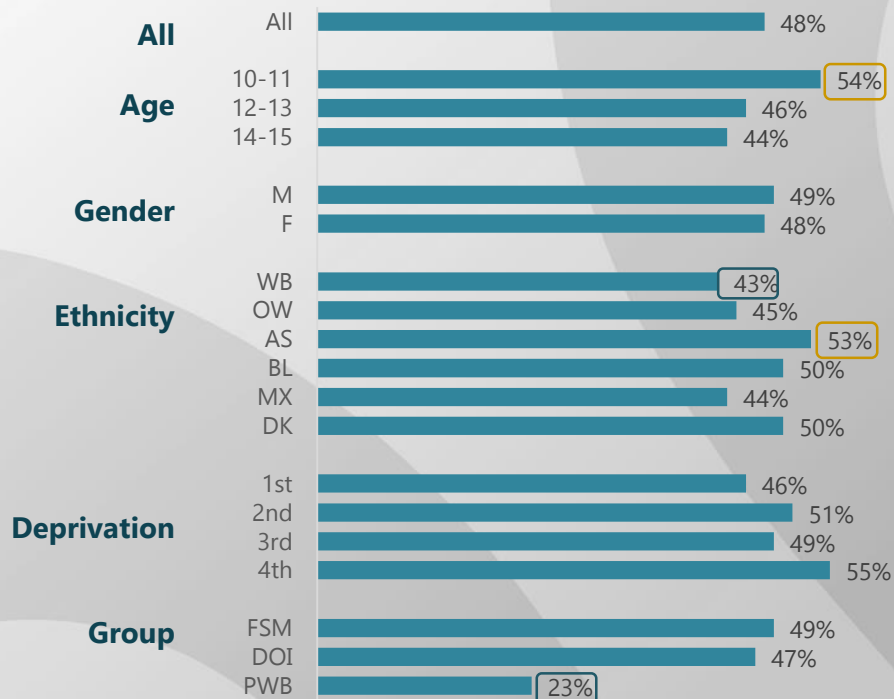
When asked about their reactions 'If something goes wrong...' a quarter of 10-15 year olds said that they usually or always 'get upset and feel bad for ages' while just under half said ' I might feel bad for a bit but soon forget it'. Two-thirds said they 'learn from it'.

Children were significantly more likely to soon forget a setback if they were younger compared to older children.

White British and Poor Wellbeing children were less likely to say they usually forget about something that goes wrong .

One in four children said they have become a 'peer supporter, buddy or mentor'.

% Usually or always 'might feel a bit bad but soon forget it when something goes wrong'



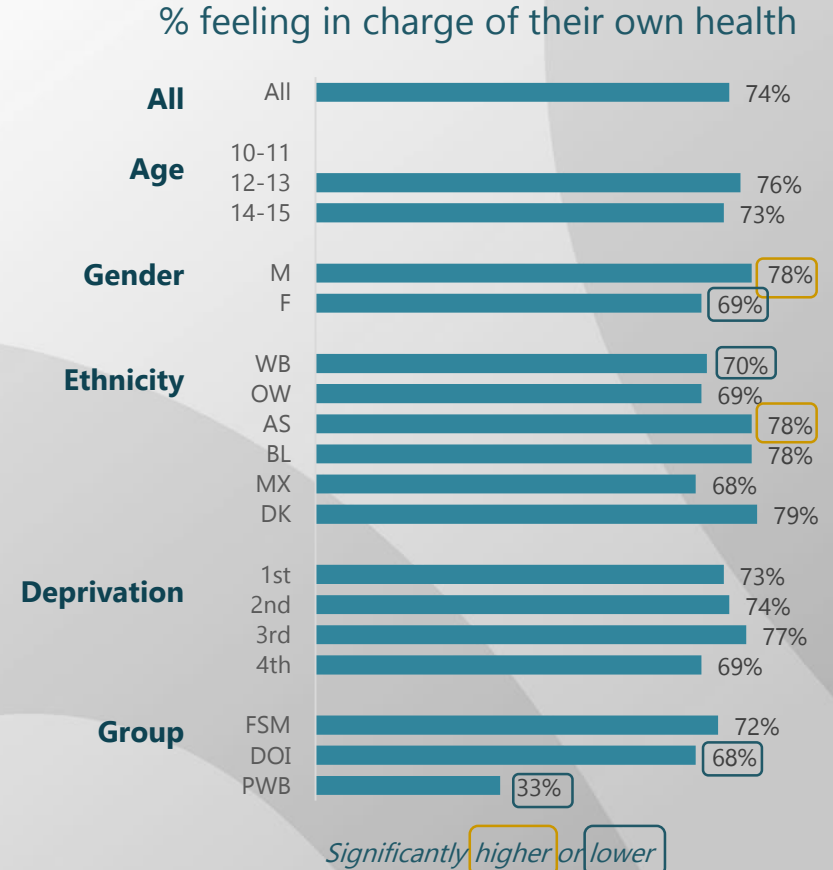
Significantly higher or lower

Three out of four (74%) 12-15 year olds agreed that *I am in charge of my health*.

Males are significantly more likely to agree that they are in charge of their health compared to females.

Asian children and young people are significantly more likely to agree they are in charge of their health whereas White British children are significantly less likely.

Those who disagree that they are in charge of their own health are more likely to have demonstrated risky behaviours such as having tried smoking.

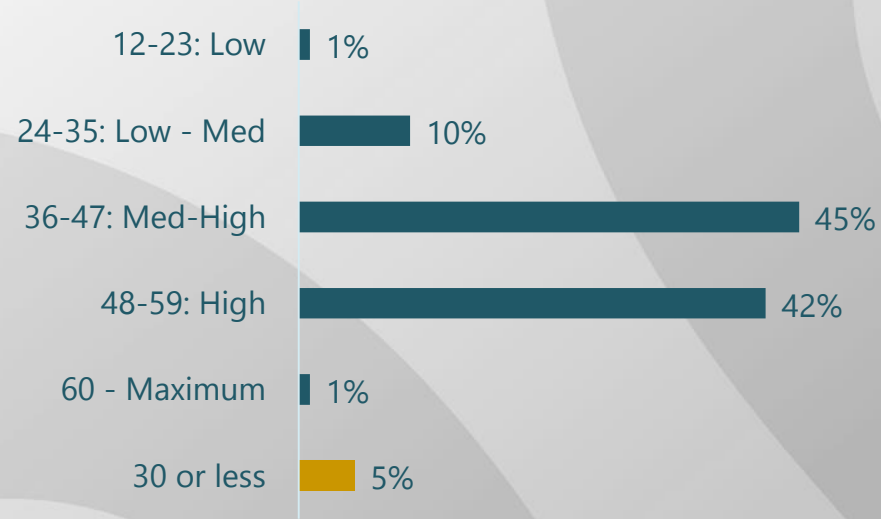


The responses of 5% of 10-11 year olds indicated a lack of positive mental health and potentially poor mental health - those who scored 30 or less on the Stirling Children's Wellbeing Scale (SCWBS).

Children were asked to respond to the following statements
I think good things will happen in my life
I have always told the truth*
I've been able to make choices easily
I can find lots of fun things to do
I feel that I am good at some things
I think lots of people care about me
I like everyone I have met*
I think there are many things I can be proud of
I've been feeling calm
I've been in a good mood
I enjoy what each new day brings
I've been getting on well with people
I always share my sweets*
I've been cheerful about things
I've been feeling relaxed

Answers to these items were combined to form an overall score where higher = better wellbeing

% Distribution of wellbeing scores



3% of 12-15 year olds scored at or below 27/70 on the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)

Children were asked to respond to the following statements

I've been feeling optimistic about the future

I've been feeling useful

I've been feeling relaxed

I've been feeling interested in other people

I've had energy to spare

I've been dealing with problems well

I've been thinking clearly

I've been feeling good about myself

I've been feeling close to other people

I've been feeling confident

I've been able to make up my own mind about things

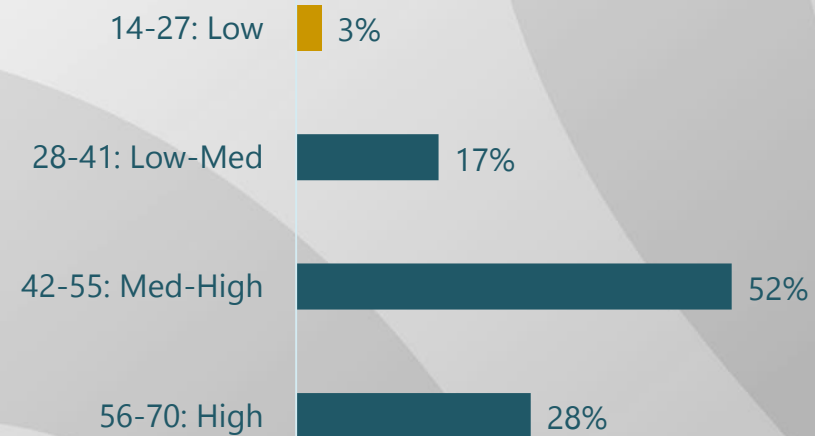
I've been feeling loved

I've been interested in new things

I've been feeling cheerful

Answers to these items were combined to form an overall score, where higher = better wellbeing

% Distribution of wellbeing scores

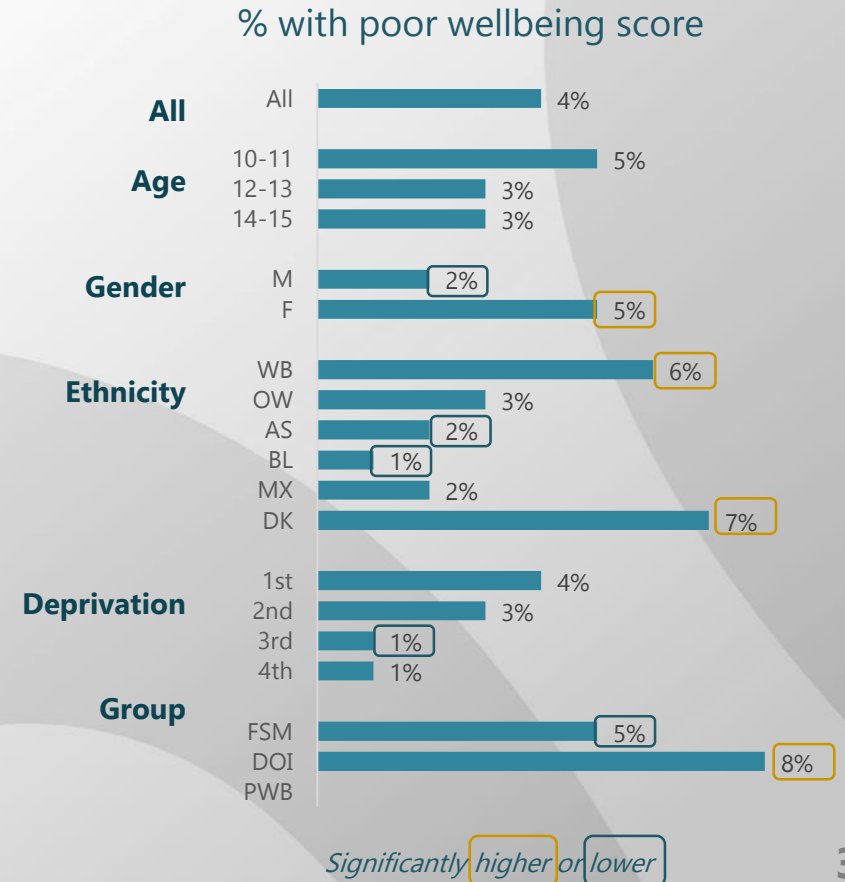


4% of children and young people had a poor score for wellbeing, but this was not even across the groups. *Poor wellbeing was defined as having a score either 30 or less on SCWBS or 27 or less on WEMWBS*

Females were more likely than males to report a poor wellbeing score.

Poor wellbeing scores were found significantly more often amongst White British children and those in the west area.

Those with a disability or illness were significantly more likely to report a poor wellbeing

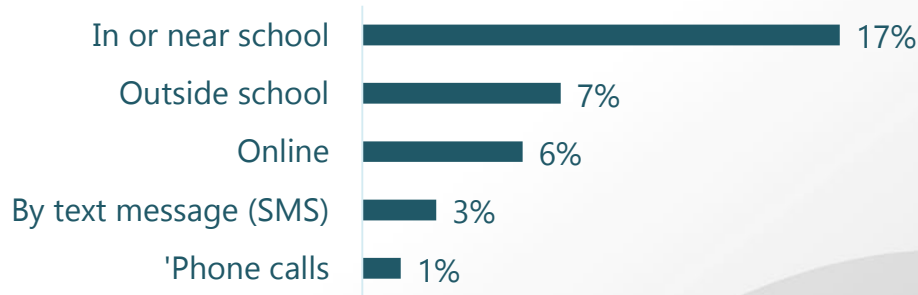




- Nearly half of children say they have been bullied, nearly a quarter in the last 12 months.
- Bullying was mostly in or near school, with online bullying or bullying by text also reported.
- Bullying was mostly being made fun of or being called names but pushing/hitting was also reported by one in ten.
- Nearly half of children say their school deals well with bullying, however a third said it dealt 'not very well' or 'badly'.

About half (46%) of 10-15 year olds reported ever having been bullied, about a quarter (23%) reported bullying in the last year. Most bullying was face-to-face in or near school.

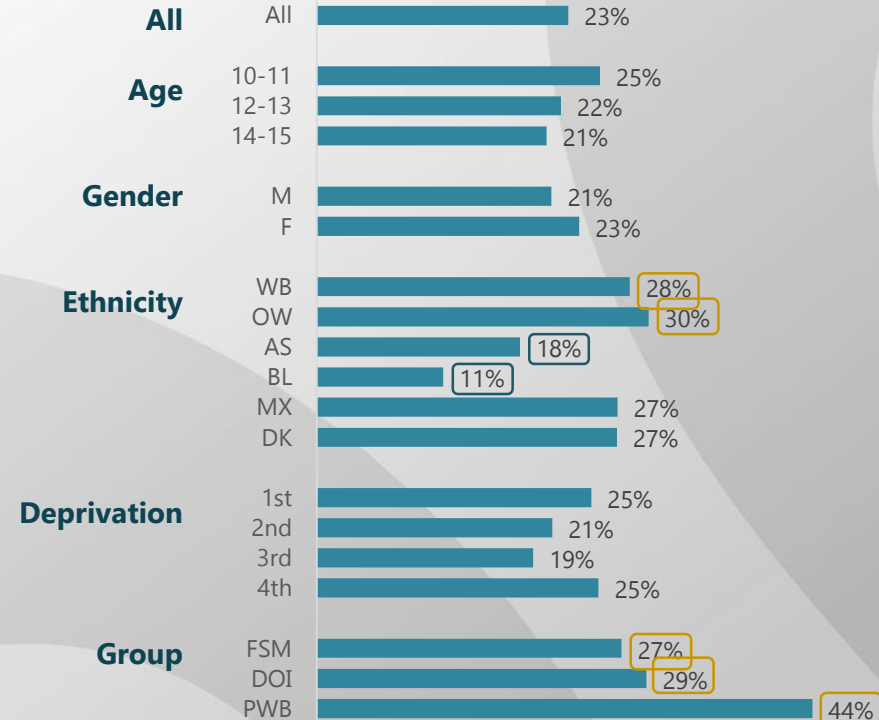
% where bullying took place in the last year



Those most likely to report being bullied in the last year were White British or Other White ethnicity, Asian and Black ethnicity were significantly less likely to report being bullied.

Those receiving Free School Meals, with a Long-term illness or disability, or Poor Wellbeing are more likely to report being bullied.

% ever bullied over the last 12 months

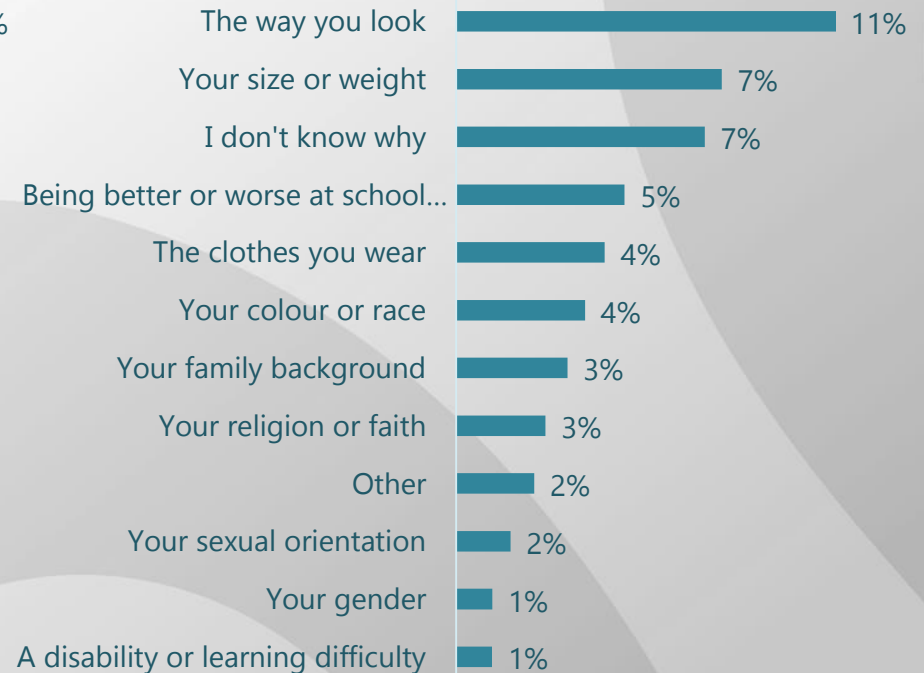


The most common types of bullying recorded were verbal, but nearly one in ten children reported pushing/hitting. The most common reason for bullying was 'the way you look', some reported bullying because of their race, religion or sexuality.

% experienced the following...



% picked on for the following issues

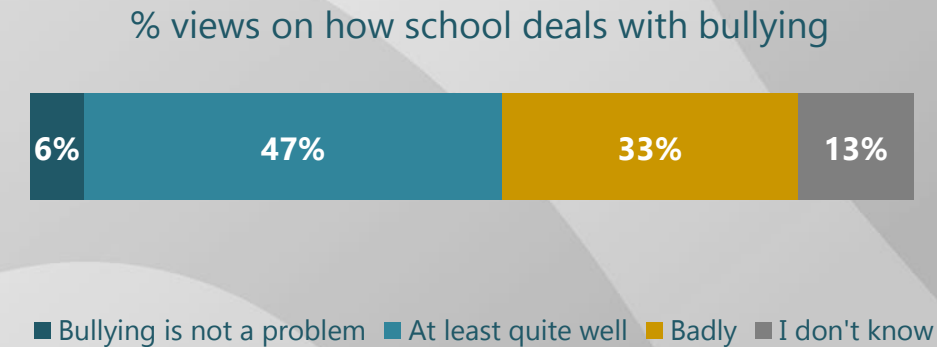
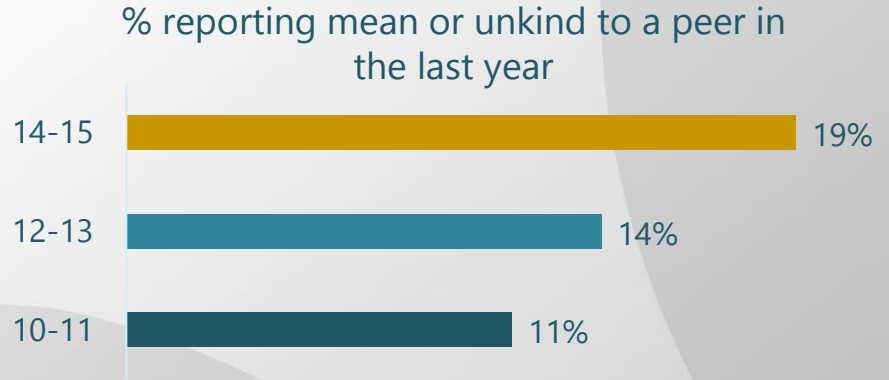


One in six (15%) 10-15 year olds said they had been mean or unkind to someone in the last 12 months because they wanted to upset them, a quarter (26%) were unsure if they had. There were a range of views about how schools responded to bullying.

Older children were more likely to say they have been mean or unkind to one of their peers.

Over half of 10-15 year olds said their school dealt with bullying at least quite well. However, a third said that bullying was dealt with 'badly'.

Three out of ten 10-15 year olds have given their views on the anti-bullying policy and contribute to anti-bullying activities.





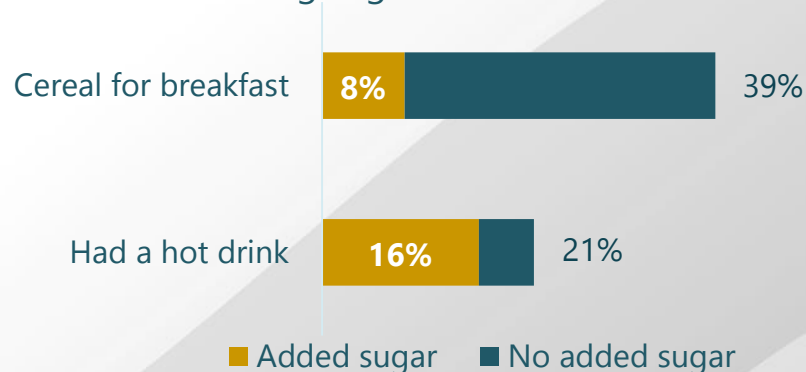
- One in six children had nothing to eat or drink before lessons.
- Nearly a quarter of children reported having five or more portions of fruit/vegetables on the day before the survey.
- 4 out of 5 children have a home cooked meal on most days. Close to one in ten have a take-away on most days.
- Foods eaten on most days included fruit/ vegetables, high-carbohydrate items like bread, dairy products, and sweet items like cakes and chocolate.
- One in five worry 'quite a lot' about having enough to eat.

Most children and young people (84%) had something to eat or drink before lessons on the morning of the survey. 16% had nothing at all, while 77% had something to eat.

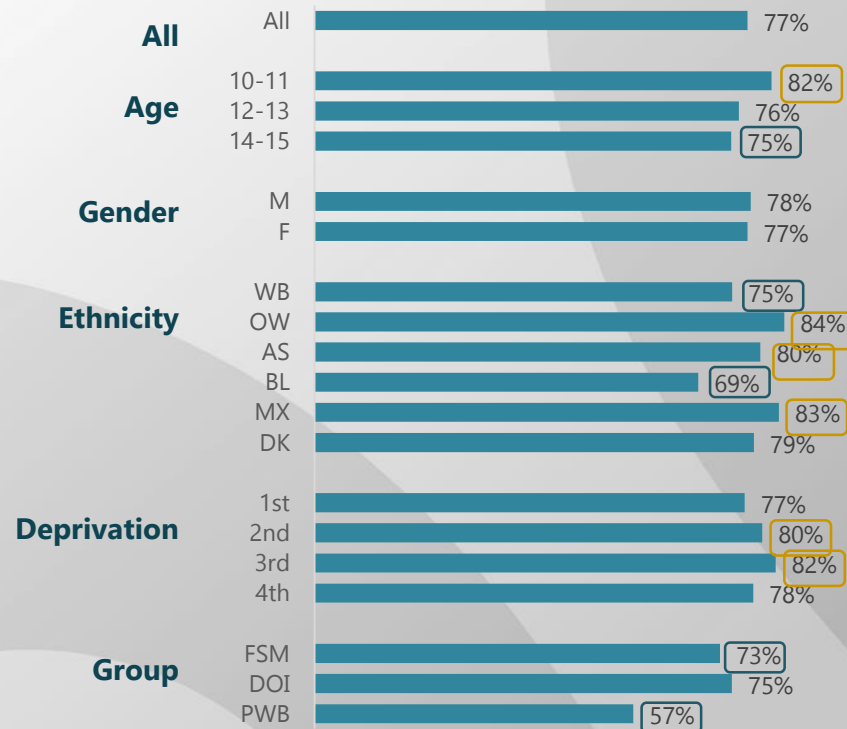
Most children (71%) had a conventional breakfast – that is, some non-snack food plus a drink.

2 out of 5 children had cereal for breakfast and 1 out of 5 had a hot drink, some children added sugar.

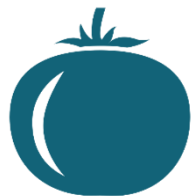
% adding sugar to cereal and hot drinks



% having something to eat for breakfast



Most children and young people have a home cooked meal on most days. One in ten (8%) have a take away on most days. 6% of children rarely or never have vegetables, fruit or salad.

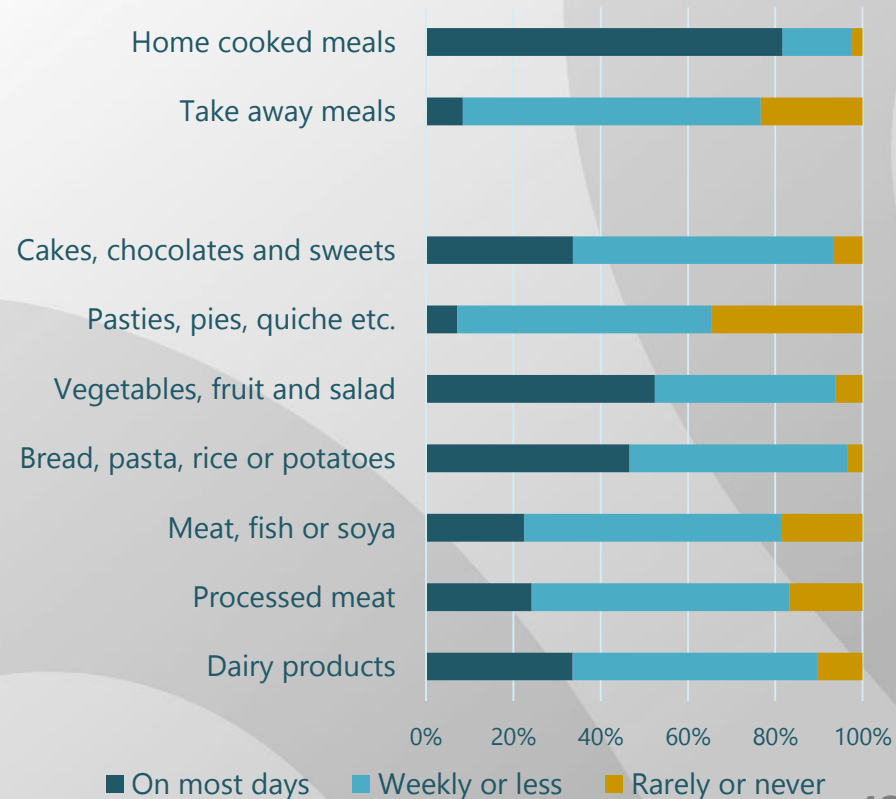


The diet of children in Leicester includes many different types of food.

Half of children eat vegetables, fruit and salad on most days.

93% of children have cakes, chocolates and sweets weekly.

% frequency of eating the following foods...



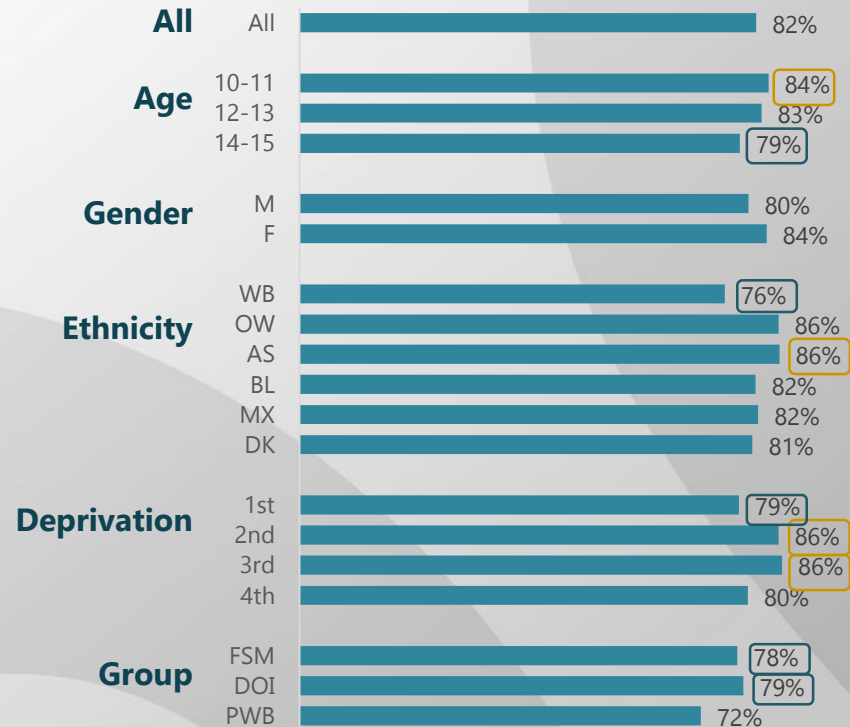
Four out of five (82%) 10-15 year olds eat home cooked food 'on most days'. 14-15 year olds are less likely to eat home cooked food 'on most days'.

Those residing in the Central or North areas are significantly more likely to eat home cooked food 'on most days', and those in the North west are significantly less likely.

Asian children and young people are significantly more likely to say they have a home cooked meal, whereas White British are significantly less likely.

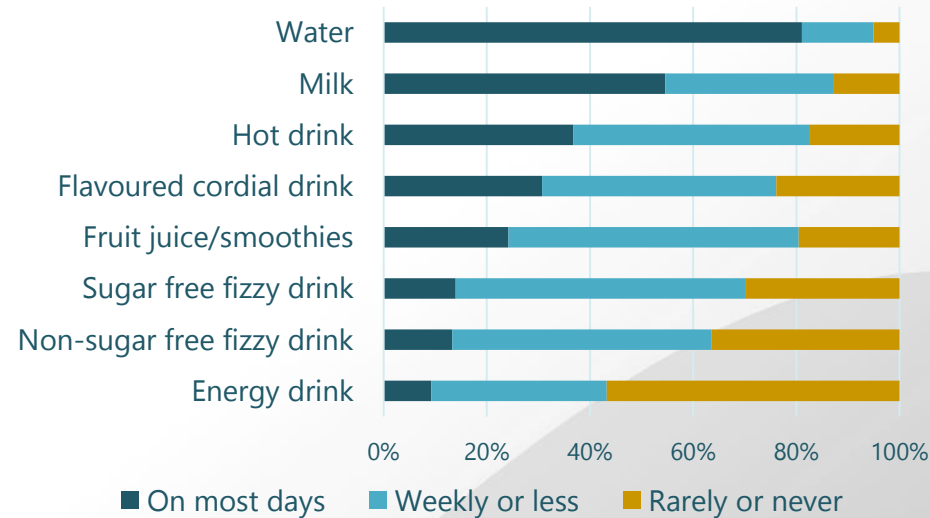
Children were significantly less likely to have home-cooked food 'on most days' if they were in the most deprived quintile, or in the Free School Meals or Poor Wellbeing groups.

% eaten home cooked food 'on most days'



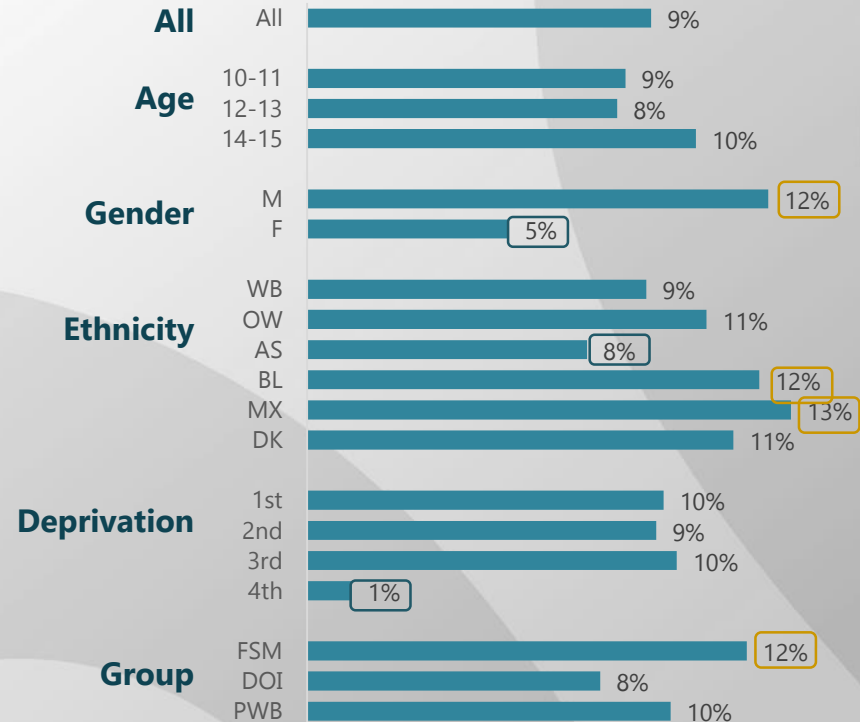
Most 10-15 year olds drink water on most days. Other popular drinks include milk, hot drinks, fruit juice and cordials. About one in ten drink energy drinks on most days.

% frequency of drinking the following...



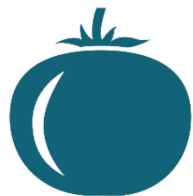
Groups more likely to have energy drinks 'on most days' include males, Mixed Heritage or Black, and Free School Meals children and young people.

% drinking energy drinks on most days



Significantly higher or lower

About a quarter of all children and young people (23%) reported that they ate at least five portions of fruit and/or vegetables yesterday, while 11% said they had none at all.

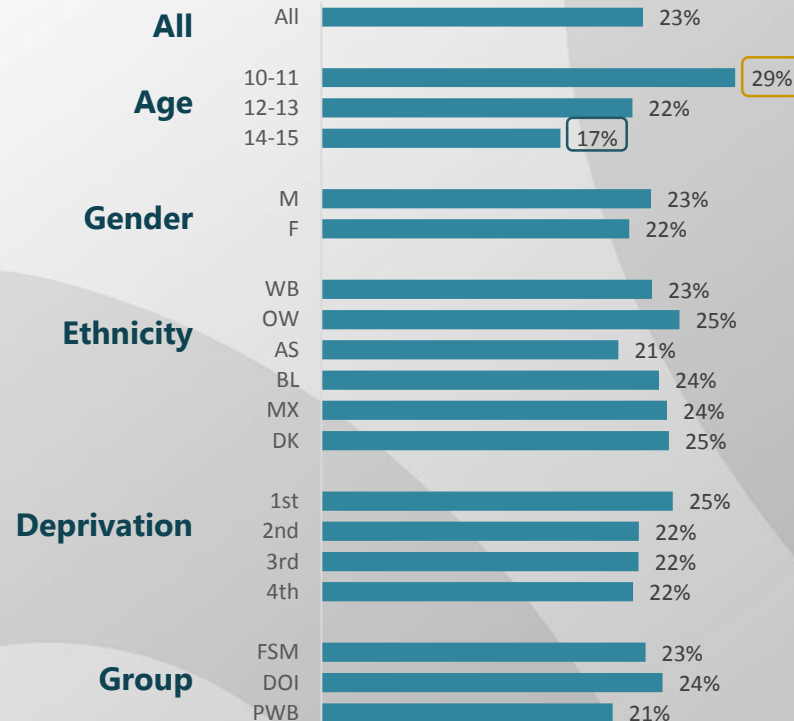


Younger children are more likely to eat 5-a-day compared to older groups.

Those from the South area are most likely to eat 5-a-day (36%).

Groups significantly more likely to say they had no portions of fruit & veg at all include males (12%), White British (12%), Black (17%), and those with a poor wellbeing (16%).

% eating 5 or more fruit & veg portions

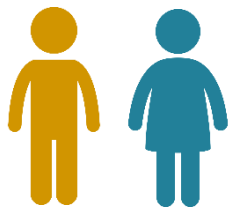


Significantly higher or lower



- Four out of five Leicester children enjoy physical education at school: boys more so than girls.
- However, only close to one in five participated in physical activity on all seven days of the week.
- 5% of children did no exercise at all, 35% did no vigorous exercise and 49% did no vigorous exercise that lasted more than an hour in the seven days before the survey.
- Seven in ten children used some form of active travel for at least part of the journey to school on the day of the survey.

Most 10-15 year olds (81%) reported that they enjoy PE and games at school at least 'quite a lot'. Three quarters reported that they enjoy other physical activities. A quarter are a member of a sports team outside of school.

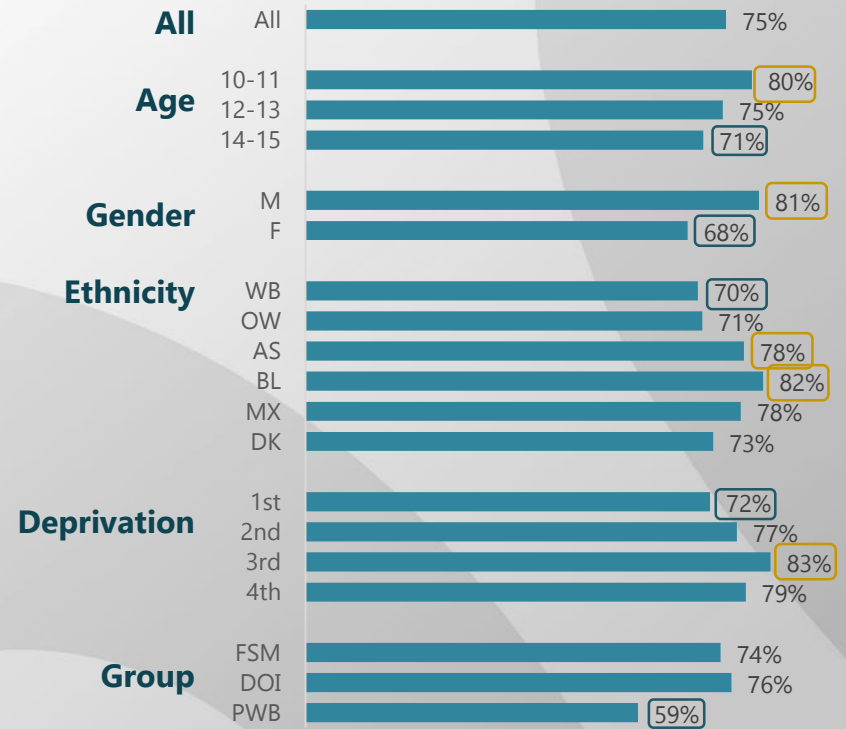


Males are significantly more likely than females to enjoy PE at school and other physical activities.

Those living in the most deprived areas are significantly less likely to say they enjoy physical activities.

Those recording a poor mental wellbeing score are significantly less likely to enjoy physical activities.

% enjoying physical activity at least 'quite a lot'



While games and physical activity appear to be enjoyed by 10-15 year olds, the extent of physical activity varied. 4% did no exercise at all in the 7 days before the survey, 35% did no vigorous exercise and 49% did no vigorous exercise that lasted more than an hour.

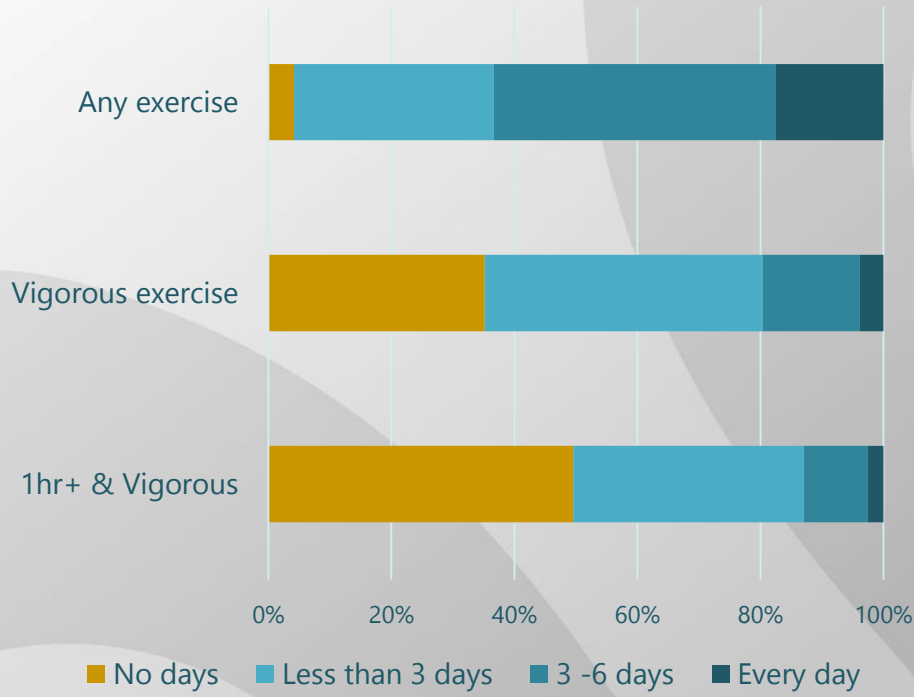


18% of 10-15 year olds exercised every day.

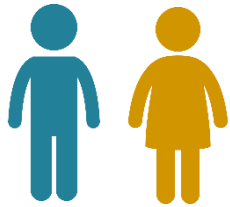
20% exercised vigorously and got out of breath and/or sweaty on at least three days in the week before the survey.

14% exercised vigorously and did so for at least an hour on at least three days in the week before the survey.

% of 10-15 year olds exercising during the week



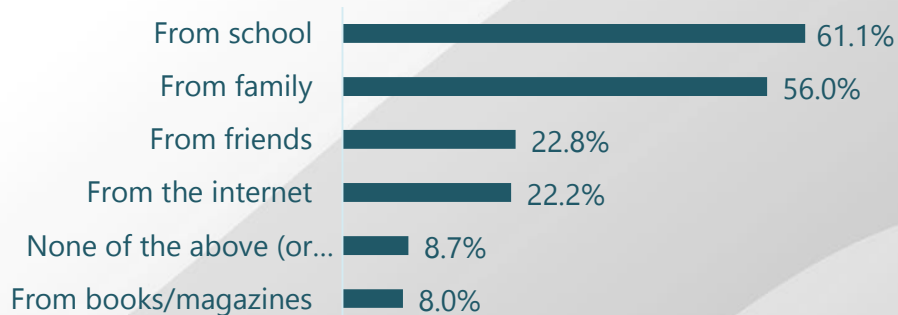
50% of 10-15 year olds did no vigorous exercise that lasted more than an hour all week. Most young people gain their advice about physical activity from school or their family.



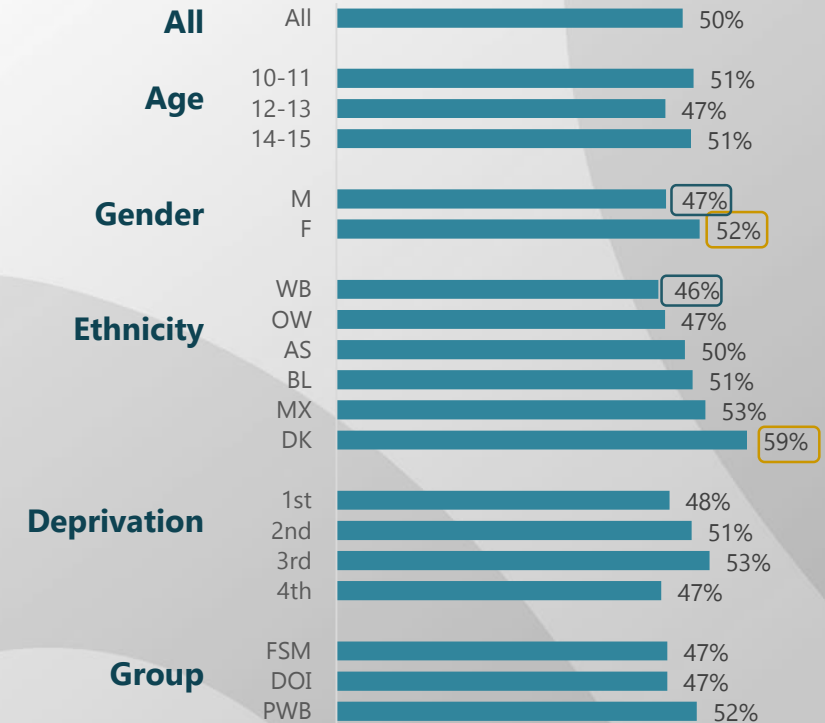
Females are significantly more likely to do no vigorous exercise that lasts an hour or more all week.

For all groups we are seeing that about half are not completing 1 hour or more of vigorous exercise.

% physical activity advice for 12-15 year olds



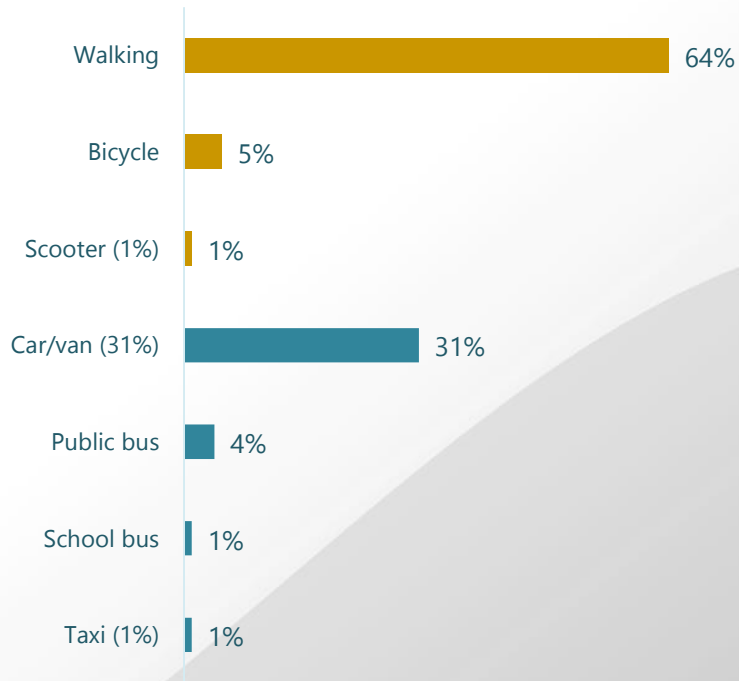
% who did no vigorous exercise that lasted 1 hour +



Significantly higher or lower

Seven in ten (70%) children used some form of active travel for at least part of the journey to school on the day of the survey.

% of children travelling to school by...



Children were more likely to have walked to school if they were from the most deprived quintiles, or were White British, and less likely if from the East area.



Children were more likely to have travelled by bicycle if Male, from the North area, or from the Other White or FSM groups.



Children were more likely to have travelled by car/van if from the East area or the least deprived quintiles, or were Asian.



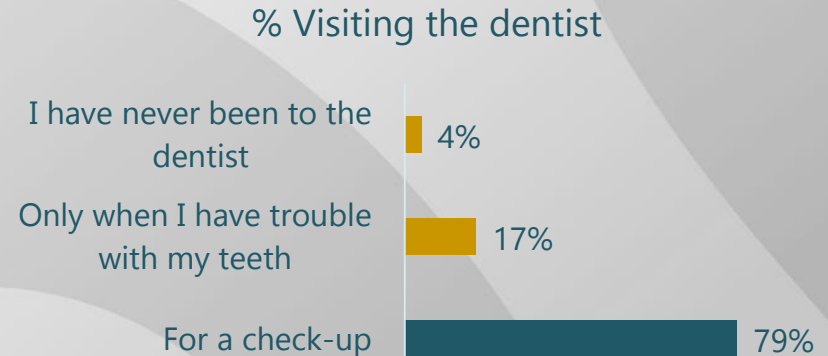
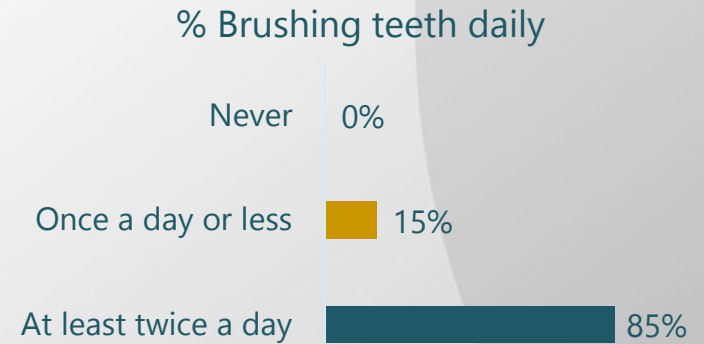
- Leicester children at age 5 have poor oral health, just under half have dental decay.
- More than four-fifths of children and young people in this survey say they clean their teeth at least twice a day.
- Nearly four-fifths say they usually visit the dentist for a check up.
- However a small number say they have never been to the dentist, and one in six say they usually go only when they have trouble with their teeth.

More than four-fifths (85%) of children and young people in this survey say they clean their teeth at least twice a day. Nearly four-fifths (79%) say they usually visit the dentist for a check up.

Those in the North area are more likely to clean their teeth just once a day.

Children and young people are more likely to say they have never been to the dentist if from the North or Asian.

The local context is that Leicester children at age 5 have poor oral health, with just under half (45%) showing signs of dental decay*.



*Public Health England, Oral health survey of five year old children (2015).

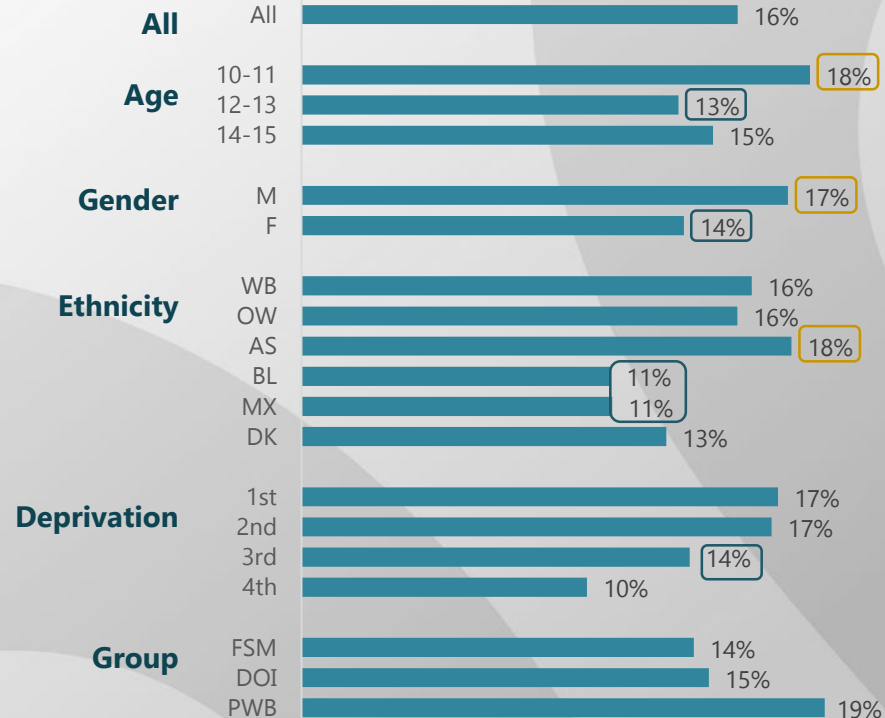
About one in seven (15%) of 10 to 15 year olds clean their teeth less frequently than the recommended twice a day.



Children and young people significantly more likely to brush their teeth less than twice a day include 10-11 year olds, Males and Asians.

Survey data shows that females, 12-13 year olds, Black and Mixed Heritage ethnicities are less likely to brush their teeth less than twice a day.

% brushing teeth less than twice a day





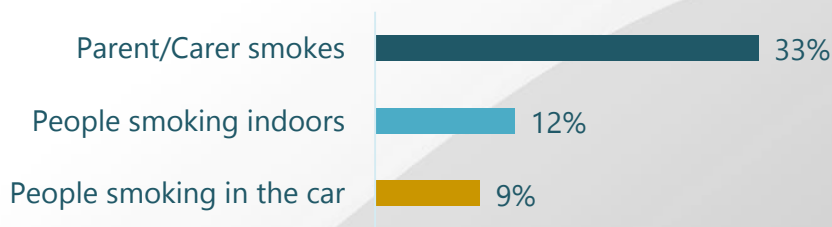
- Most 12-15 year olds in Leicester (73%) have not tried smoking cigarettes, using shisha or vaping e-cigarettes.
- A significant minority of children and young people live in an environment where smoking is common.
- The parents/carers of a third of children and young people smoke.
- Over a quarter of 12-15 year olds in Leicester say they have tried tobacco cigarettes, shisha or e-cigarettes. 4% of these are current users (using at least weekly).
- The national WAY survey shows that at age 15 smoking in Leicester is significantly lower than in England.

A key determinant of young people smoking is having a parent or carer who smokes. One in three children have a parent/carer who smokes. A significant minority of children and young people live in an environment where smoking is common.



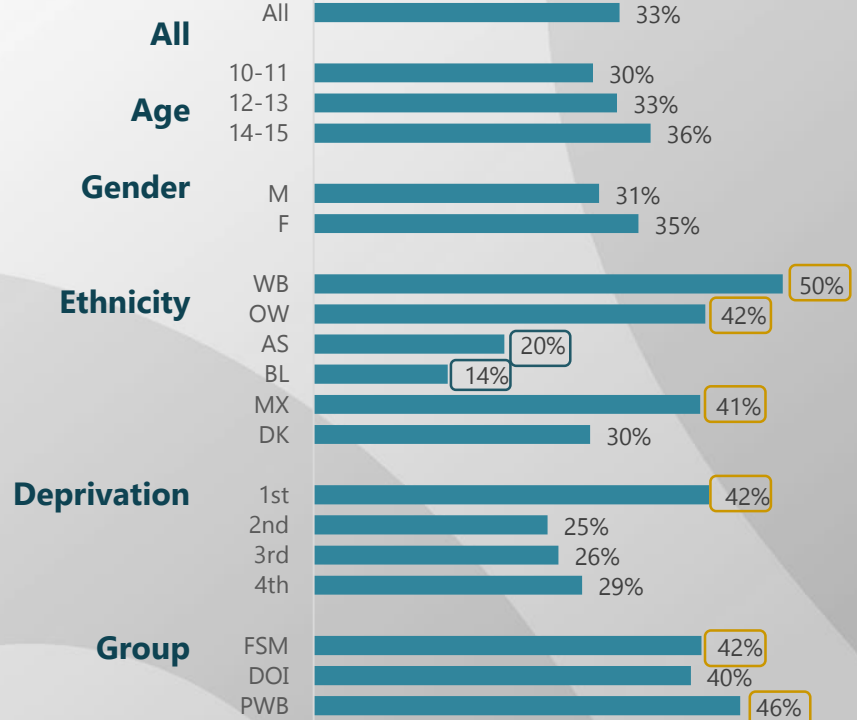
A significant proportion of children and young people in Leicester are exposed to smoking, and to unhealthy cigarette smoke.

% of children who experience...



White British, Other White and Mixed Heritage, those in our most deprived areas are significantly more likely to have a parent/carer who smokes.

% with parent/carer who smokes



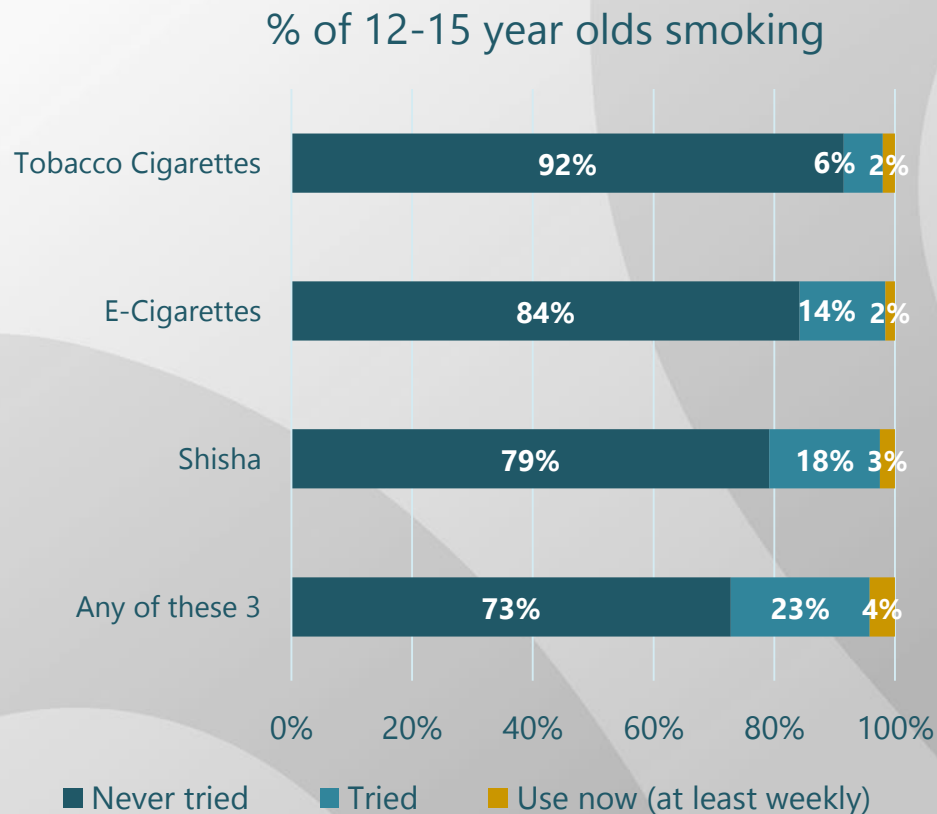
Significantly higher or lower

Over a quarter (27%) of 12-15 year olds in Leicester say they have tried tobacco cigarettes, shisha or e-cigarettes. 4% of these are current users (using at least weekly).

Most (73%) 12-15 year olds in Leicester have not tried any of these products.

12-15 year olds are more likely to have tried shisha or e – cigarettes rather than tobacco cigarettes.

16% of 12-15 year olds with a parent/carer who smokes have tried tobacco cigarettes and 4% currently smoke. This is twice the rate found in that age group overall.





- Reported drinking at this age is lower in Leicester than in England as a whole.
- About a third of Leicester 14-15 year olds said that they have ever drunk alcohol, and less than 5% did so in the week before the survey.
- Just under a fifth of 10-15 year olds say they are 'certain' or 'fairly sure' they know a drug user.
- About one in ten say they have been offered a drug.

Alcohol and drug use

A significant minority of children (15%) reported drinking more than a sip of an alcoholic drink. This figure rises to 30% for 14-15 year olds.

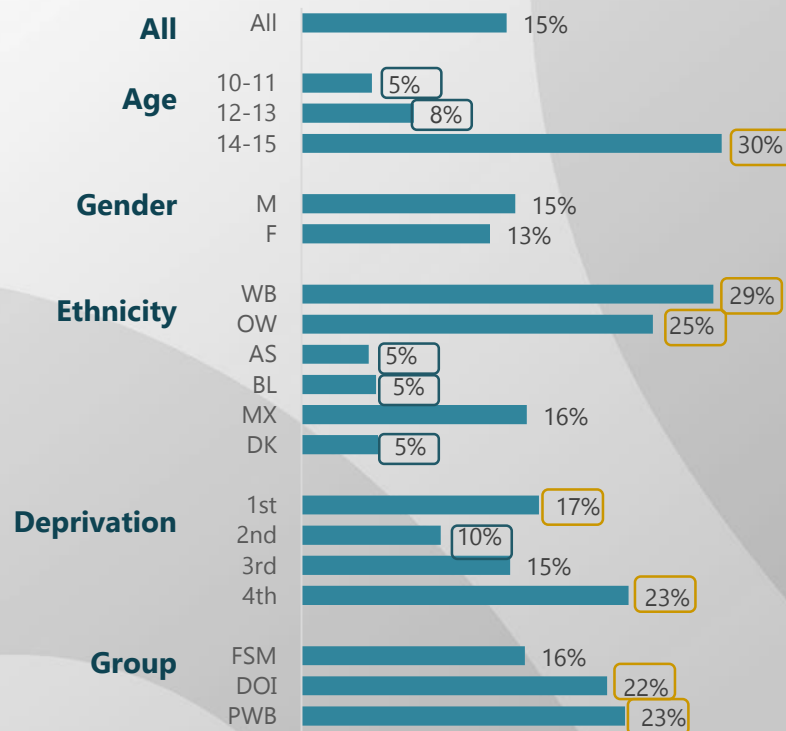


Consumption and experimentation with alcohol at earlier ages is rare.

White British and Other White were more likely than Asian or Black children and young people to have tried alcohol.

The most deprived and least deprived communities were more likely to have drunk alcohol.

% having drunk more than a sip of alcohol



Significantly higher or lower

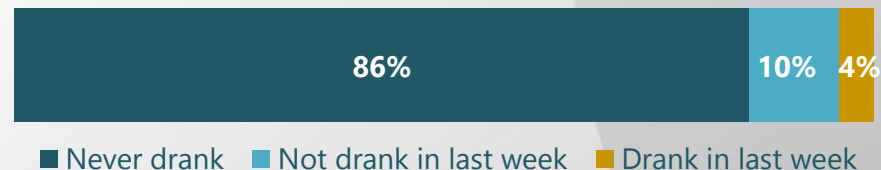
A small minority of children (4%) had an alcoholic drink in the last week. 3% of 12-15 year olds reported getting drunk in the last month, this figure rises to 5% for 14-15 year olds.

The WAY survey* reported that 6% of 15 year olds in Leicester drank once a week.

This local survey reports a similar percentage for those who drank in the last week.

The most common source of alcohol was to be given it by family members.

% had an alcoholic drink in the last week



% of 12-15 year olds drunk in the last month



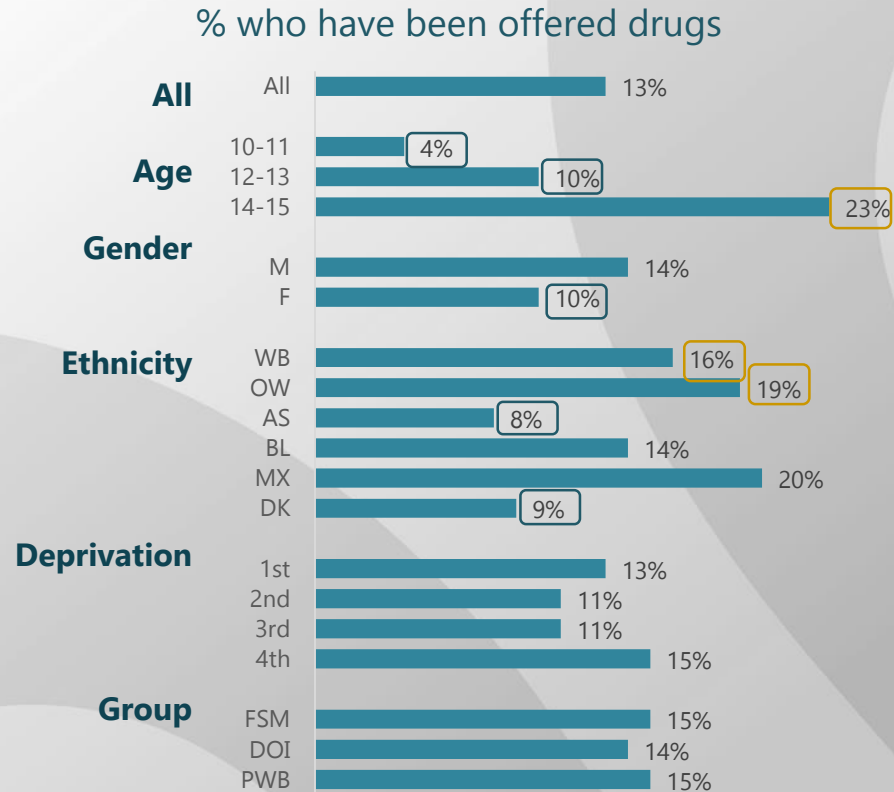
*What About Youth survey of 15 year olds (2014/15).

Just under a fifth (19%) of 10-15 year olds say they are 'certain' or 'fairly sure' they know a drug user. About one in ten say they have been offered a drug.

The most common drug to have been offered is cannabis (10%), but new psychoactive substances (incorrectly known as 'legal highs') (9%) and other drugs (7%) have also been offered.

A fifth of 14-15 year olds have been offered drugs, significantly higher than younger groups.

White British and Other White are significantly more likely to say they have been offered drugs compared to Asian children and young people.



5% of 12-15 year olds say they have taken drugs (not tobacco, alcohol or medicine prescribed by doctor) to change the way they feel (e.g. to get high/chill or to increase energy/motivation).

The WAY survey* reports that 7% of Leicester children have tried cannabis compared to 11% in England.

This survey reports that 8% of 14-15 year olds have tried drugs.

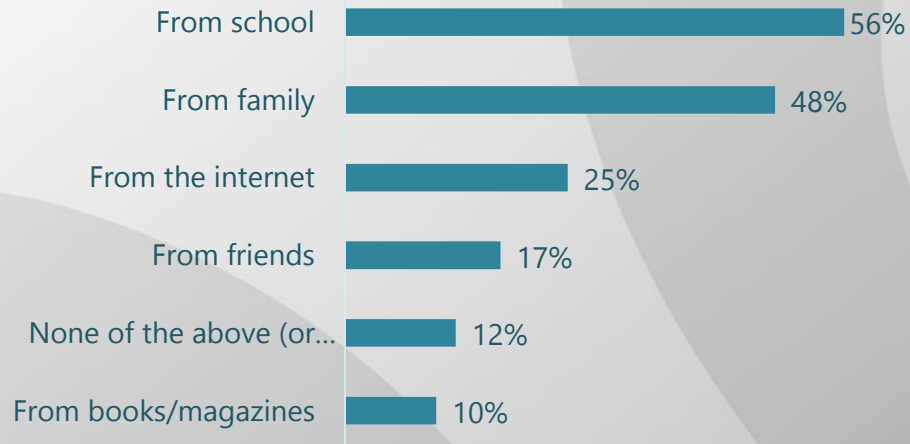
Groups more likely to have tried drugs include:

White British and Mixed Heritage

Disability or illness and Poor Wellbeing

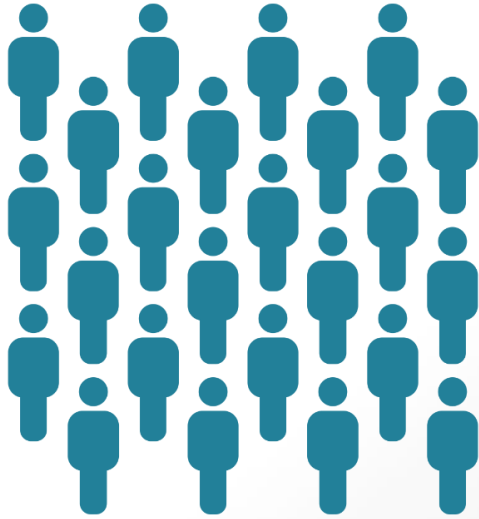
Least deprived quintile

% alcohol, drug and smoking advice for 12-15 year olds



Most 12-15 year olds get their advice about alcohol, drugs and smoking from school or family, with less using the internet or friends.

*What About Youth survey of 15 year olds (2014/15).



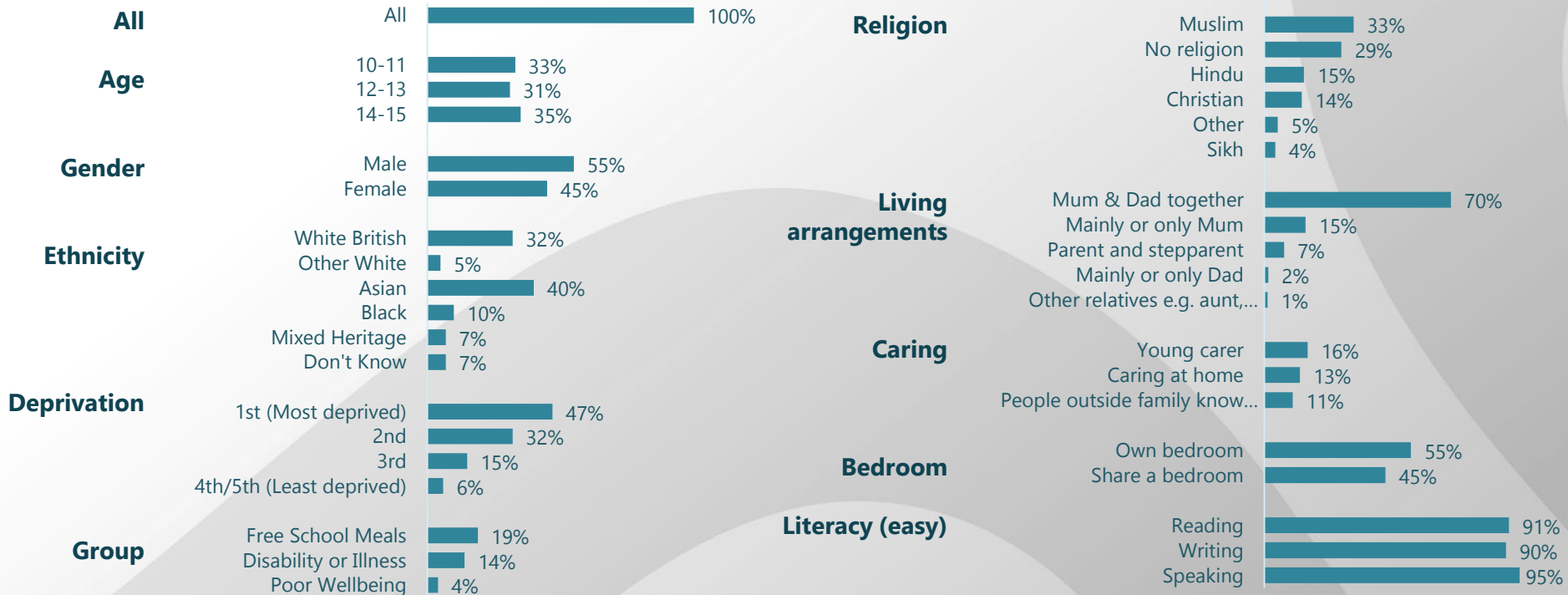
Final Sample:	2,997 responses
10-11 year olds:	1,399 responses
12-15 year olds:	1,598 responses

- The target group includes children and young people in years 6, 8 and 10 attending Leicester schools.
- 28% of the target group were included in the final sample.
- The sample was weighted to match the ethnicity and deprivation profile of the city, and remove age bias.
- Central, North and North West areas are well represented while the East, South and West have lower response rates.

Who are our sample?

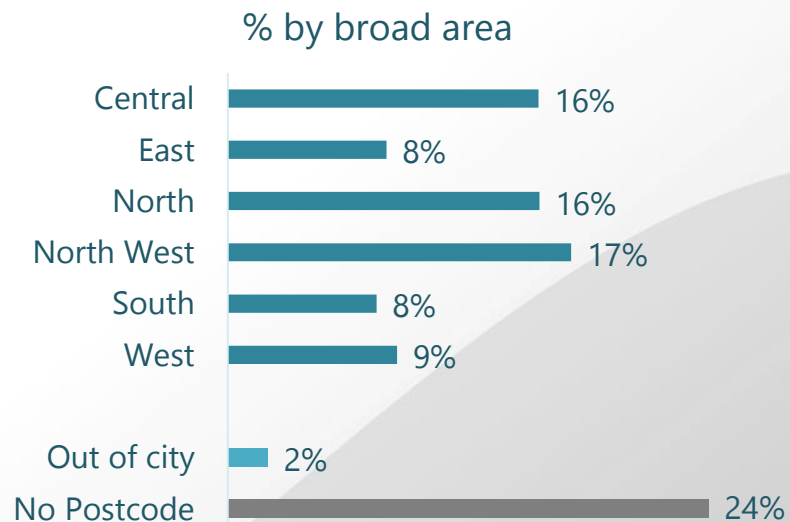
There are slightly more males than females and a mix of different ages from 10 -15 years old. Many (71%) identify with a religion and over two thirds (68%) are from a BME background. One in six identify as a young carer.

% of sample who are...

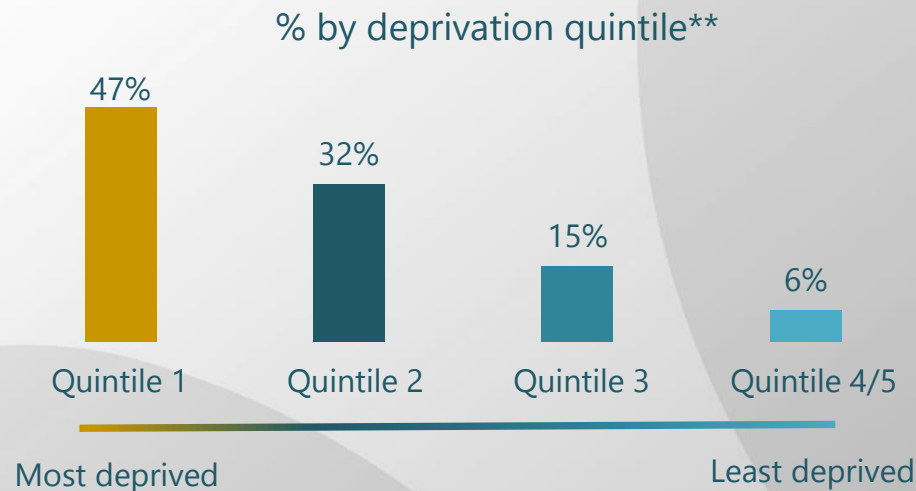


76% of the sample provided a valid postcode allowing for some geographic and deprivation analysis. More responses came from those in the Central, North and North West areas.

For the purposes of analysing the findings, the city has been split into six geographical areas*.



*These areas have no significance other than showing how the findings vary across the city.



**2260 respondents are included in the deprivation analysis (76% of the entire sample). The above percentages are the % in each quintile of those who gave a valid postcode. The Indices of Multiple Deprivation 2015 has been used to assign the postcode of the child to a deprivation quintile (where quintile 1 is the 20% most deprived nationally and quintile 5 is the 20% least deprived nationally). The sample has few children in quintile 5 and for analysis these have been combined with quintile 4.



The use of the term 'risk factor' here is to highlight selected associations found in the survey as shown in table 1. These factors can be viewed:

- as risks (e.g., children whose parents/carers smoke have twice the rate of current smoking than the sample overall) and/or
- as undesirable experiences (e.g., not having something to eat for breakfast) and/or
- as indicators of potential issues with engagement in school or community (e.g. hardly enjoying any of their lessons).

Table 2 shows the association between groups used in the analysis of the survey and demographics.

Survey data shows the experience of a risk factor may be associated with a range of other issues as shown in table 3.

Judgement as to the extent to which these factors are a risk to longer term wellbeing should be considered by those working with children and young people when reflecting on the survey results.

What we mean by risk?

Table 1: Risk factors by demographic group.

	Not a good Place to live	Hardly enjoy any of their lessons	Experienced abusive behaviour in relationship (12-15 year olds)	Poor resilience	Been bullied in the last 12 months	Not having something to eat for breakfast	Do not enjoy physical activity	Parent/ carer smokes	Drinking more than a sip of alcohol	Ever been offered drugs
Male		Significantly higher likelihood		Significantly lower likelihood			Significantly lower likelihood			
Female		Significantly lower likelihood		Significantly higher likelihood			Significantly higher likelihood			Significantly lower likelihood
10-11 year olds		Significantly lower likelihood				Significantly lower likelihood			Significantly lower likelihood	
12-13 year olds			Significantly lower likelihood						Significantly lower likelihood	
14-15 year olds	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood				Significantly higher likelihood		Significantly higher likelihood	Significantly higher likelihood
White British	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood		Significantly higher likelihood		Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood
Other White										
Asian	Significantly lower likelihood	Significantly lower likelihood	Significantly lower likelihood				Significantly lower likelihood			Significantly lower likelihood
Black				Significantly lower likelihood	Significantly lower likelihood	Significantly higher likelihood	Significantly lower likelihood		Significantly lower likelihood	
Mixed Heritage								Significantly higher likelihood		Significantly higher likelihood
Most deprived*	Significantly higher likelihood		Significantly higher likelihood					Significantly higher likelihood		
Central			Significantly lower likelihood		Significantly lower likelihood			Significantly lower likelihood		
East	Significantly lower likelihood									
North		Significantly lower likelihood	Significantly lower likelihood		Significantly lower likelihood		Significantly lower likelihood		Significantly lower likelihood	
North West	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood		Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood
South			Significantly higher likelihood			Significantly lower likelihood				Significantly higher likelihood
West	Significantly higher likelihood				Significantly higher likelihood			Significantly higher likelihood		

Significantly higher likelihood	Significantly higher likelihood
Significantly lower likelihood	Significantly lower likelihood
No significant difference	No significant difference

*Living in most deprived 20% areas nationally (Index of Multiple Deprivation 2015) **66**

Table 2: Highlighting 'vulnerable' demographic groups based on specified factors.

	Free School Meals	Disability or illness	Poor Wellbeing	Young carer	Find it 'OK'/'Hard' to write, read or speak English
Male					
Female					
10-11 year olds					
12-13 year olds					
14-15 year olds					
White British					
Other White					
Asian					
Black					
Mixed Heritage					
Most deprived*					
Central					
East					
North					
North West					
South					
West					

<i>Significantly higher likelihood</i>	
<i>Significantly lower likelihood</i>	
<i>No significant difference</i>	

*Living in most deprived 20% areas nationally (Index of Multiple Deprivation 2015)

Table 3: Correlations between risk factor groups.

	Not a good Place to live	Hardly enjoy any of their lessons	Experienced abusive behaviour in relationship (12-15 year olds)	Poor resilience	Been bullied in the last 12 months	Not having something to eat for breakfast	Do not enjoy physical activity	Parent/ carer smokes	Drinking more than a sip of alcohol	Ever been offered drugs
Parent/carers smokes	Significantly higher likelihood	No significant difference	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	No significant difference	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood
Do no vigorous exercise	No significant difference	No significant difference	Significantly higher likelihood	No significant difference	No significant difference	Significantly higher likelihood	Significantly higher likelihood	No significant difference	No significant difference	No significant difference
Not having something to eat for breakfast	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	No significant difference	Significantly higher likelihood
Drinking more than a sip of alcohol	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	No significant difference	No significant difference	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood
Ever been offered drugs	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	No significant difference	Significantly higher likelihood	Significantly higher likelihood	No significant difference	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood
Been bullied in the last 12 months	Significantly higher likelihood	No significant difference	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	Significantly higher likelihood	No significant difference	Significantly higher likelihood	No significant difference	Significantly higher likelihood

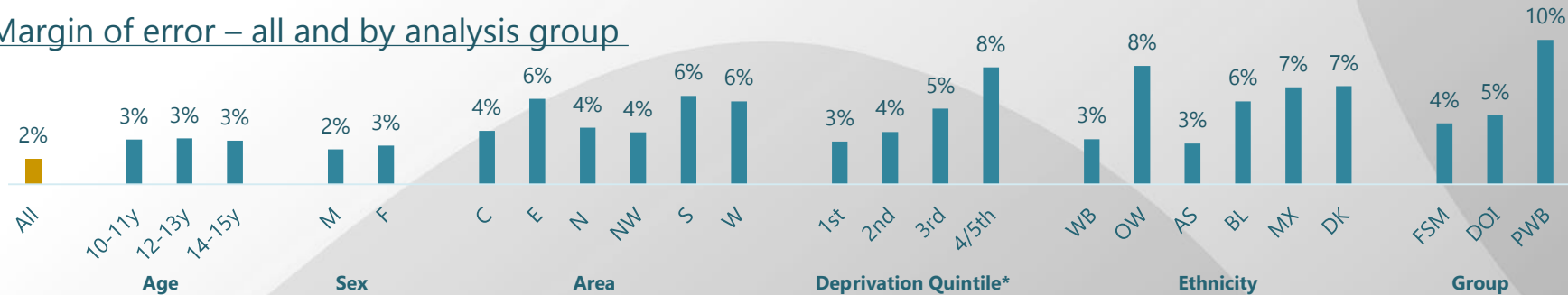
<i>Significantly higher likelihood</i>	Significantly higher likelihood
<i>Significantly lower likelihood</i>	Significantly lower likelihood
<i>No significant difference</i>	No significant difference



- Where results do not sum to 100, this may be due to multiple responses, computer rounding or the exclusion of don't knows/not stated.
- A number of questions were only asked of children 12 -15, where this is the case the text will highlight that these figures apply to the older sample.
- Significant differences are highlighted, this denotes a significant difference to the Leicester overall figure.
- Charts show percentage for all and by the following analysis groups; age, sex, geographical area, deprivation quintile (where 1 is the most deprived 20% nationally), ethnicity, free school meals, disability or illness, and poor well-being.

- The sample has been broken down to look at differences between groups.
- To determine whether these differences are due to random variation or a real underlying issue a margin of error has been calculated at the 95% confidence level.
- A margin of error must be exceeded to determine a statistically significant difference. Figures (chart below) for the overall sample are at most $\pm 2\%$ of the 'true' value, while for the smaller poor wellbeing (PWB) group we can expect $\pm 10\%$.

Margin of error – all and by analysis group



* There were few respondents from the least deprived quintile 5 therefore these were combined with quintile 4 (and labelled 4th)

Respondents to the survey are not evenly distributed across the city.

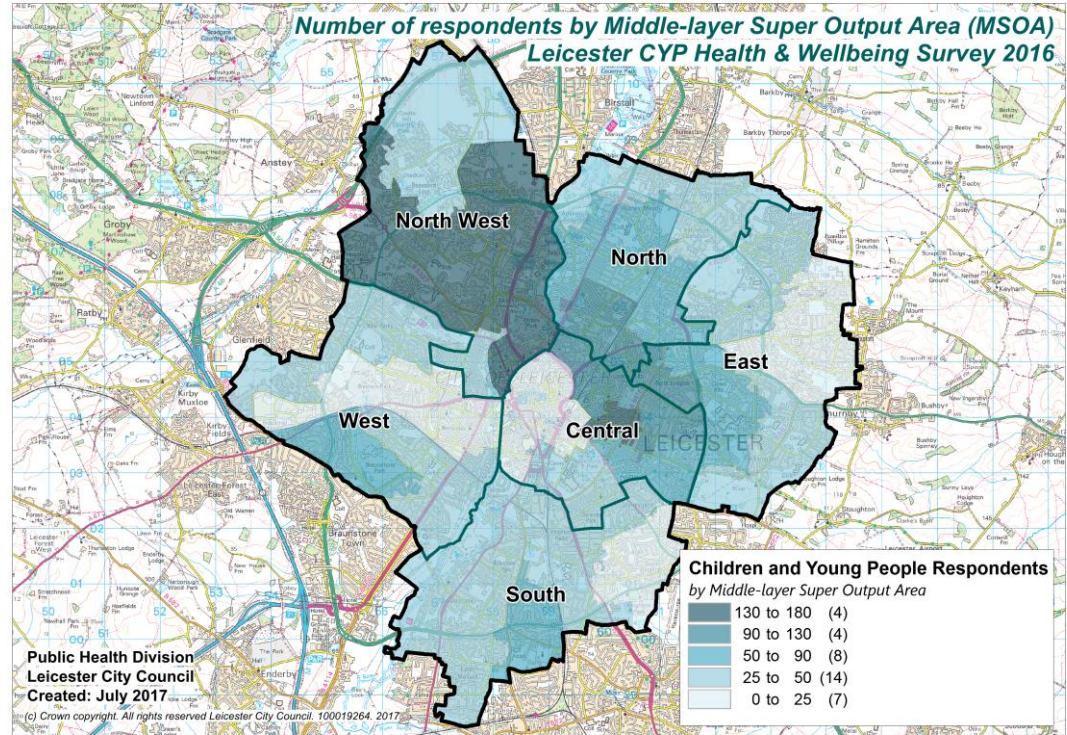
Overall findings can be provided at a broad area geography.

There are fewer responses (particularly at a secondary level) in the East, West and South.

Lower geography analysis is difficult and representation is uneven.

Some wards/Middle Super Output Areas have a very high sample while others are too low to report.

Few in the sample reside out of the city.



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