



North Lincolnshire College Students' Lifestyle Survey 2017/18

North Lincolnshire Council

Public Health Intelligence Team

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Summary of key issues

- Adolescence is a critical time of development as well as being a window of opportunity, a time when there is potential for the development of new skills. It is also a time of transition which can bring additional academic, social, and emotional pressures. Young people who are not resilient may respond to these pressures with stress, anxiety and depression. The more their coping skills are developed, the greater the chance of healthy development and transition to adulthood.
- Adolescence is also a time when long term health behaviours are set in place and when many physical and mental health problems emerge for the first time. Half of all lifetime cases of psychiatric disorders start by age 14 and three quarters by age 24.
- Vulnerable groups of young people may have poorer health outcomes than their peers, including looked after children, young carers, those from ethnic minorities, those with learning disabilities, young people who identify as LGBT and those who have experienced four or more adverse childhood experiences. Inequalities in access to help and support can make their health outcomes significantly worse as they move into adulthood, making early identification and prevention key.

The overlap between physical and emotional wellbeing

- Overall, the findings of this local survey are consistent with national and local trend data on health outcomes for young people and provide additional evidence of continuing improvements in many areas of young people's physical health and wellbeing in North Lincolnshire.
- The number of young people who report smoking, alcohol and drug misuse, and/or engaging in sexual activity continue to decline and are at their lowest level since these surveys began. This is good news and reflects national and local improvements in young people's health literacy.
- On the other hand, levels of healthy weight, (as measured by the National Child Measurement Programme) and physical activity, have not improved, and, for some groups, have worsened¹, with significantly lower levels of healthy weight and physical activity reported than nationally.
- Yet all the research evidence suggests that physical activity has a positive impact on both physical and emotional wellbeing, leading to overall improvements in educational attainment. Our survey results confirm the strong association between emotional wellbeing, physical activity and positive body image, especially amongst older teenage girls, who, overall, are less active than boys.

Increasing resilience amongst vulnerable groups

- The association between physical and mental wellbeing is also evidenced by lower emotional wellbeing amongst students with long term conditions. National research evidence shows that this group is at much greater risk of poor mental health as adults²,

¹ Statistics on Obesity, Physical Activity and Diet, England, 2016, NHS Digital, 2017

² <http://www.phoutcomes.info/>

suggesting opportunities to intervene earlier with this group to increase their resilience and reduce longer term vulnerability.

- Other vulnerable groups in our survey who presented with lower emotional wellbeing, and who are at risk of poorer mental, include young people who identify as LGBT, those who are Young Carers, and Looked After Children.
- Young people with SEND who are also caring for someone at home, are particularly vulnerable. Not only are they more likely to be living with a lone parent and be dependent on low incomes, they tend to worry more, about themselves, the future, and are less likely to say they can discuss these worries with a parent or carer at home.
- Many LGBT students also say they find it difficult to open up to adults about their emotions. Less than half said they would be comfortable talking to either parent or carer about their feelings, whilst less than a third said they would feel comfortable talking to a member of college staff. Access to LGBT groups and to openly LGBT adult role models within college settings can play a crucial role in helping students to become more resilient and open about their gender identity and sexual orientation.

Health literacy

- All of the evidence from our student surveys including the most recent secondary school reports, suggest that more and more young people are making positive choices about their physical health and that the vast majority of young people this age know how to stay well, value the information they receive at school about this and do not engage in behaviours that could put their long term health at risk.
- Young people's experimentation with tobacco and alcohol have both declined in North Lincolnshire since these surveys began, although nowhere near as fast as they have nationally, whilst both national and local surveys suggest a halt in the downward trend in drug misuse in this age group. Although rates of alcohol misuse are no higher in North Lincolnshire than elsewhere, young people in North Lincolnshire tend to start drinking at a younger age than their national peers, suggesting a continued need for evidence-based drug and alcohol education within school and college settings, which focus on strengthening young people's resilience. This is underlined in the Government's recent refresh of the National Drugs Strategy, (2017).
- The proportion of young people who say they are sexually active at this age has also declined, especially amongst girls. Yet whilst most say they use some form of contraception to prevent unwanted pregnancy, the use of barrier methods has not changed in the last 10 years, with more than half of those who are sexually active continuing to expose themselves to STIs, suggesting the need for a renewed emphasis in SRE on the importance of condom use.

Mental health literacy

- Whilst this survey provides evidence of rising physical health literacy amongst our young people, 16-18 year olds appear to be less aware of how to promote their own mental health, and the impact of staying physically well on mental wellbeing, including the importance of regular meals, sufficient sleep and physical activity. Enabling students to make healthy choices in their use of social media, including both the positive and

potentially negative impacts on their physical and mental health and wellbeing, may also be helpful.

- Almost two thirds of students this age said they would know where to get to get help and advice if they felt a friend urgently needed help with a serious mental health problem, and a similar proportion said they would know where to go for help outside college. However, timely access to trained staff was generally regarded as a key barrier to getting help, with waiting times for counsellors being a common complaint.
- These findings reflect national survey results on this issue. In the recently published Omnibus Survey, (2018)³, both college students and their parents felt that improving access to counselling support or other dedicated staff member within the college setting would be most beneficial, as well as more signposting on where to get help outside the organisation.
- When asked how their college dealt with mental health issues young women, as well as LGBT students were more critical, compared with how their college dealt with other issues, such as bullying, and were less likely to say they would open up about their emotional wellbeing to staff.
- Nevertheless, a significant proportion, between a third and a half of students in our survey, said that they would approach teaching staff in their college, most notably personal tutors, for help and support if they had a serious concern about a friend's mental wellbeing.
- This reinforces the importance of having suitably trained staff within the college setting, especially those who work with vulnerable groups, in order to improve young people's timely access to help and to enable staff to support students facing work related anxiety. Mental Health First Aid training for all college staff is a starting point for this.
- Young people are clearly in support of this and between a quarter and a third of all year groups said they wanted emotional wellbeing and mental health issues to be given greater coverage in PSHE.
- Female students were much more likely than males to express lower emotional wellbeing and to ask for more coverage of this issue in PSHE. And yet we know from national and local research evidence that males are much more likely to develop serious and enduring mental illness, are less likely than women to express concerns about their mental wellbeing or to seek help with mental health issues, and are 3 times more likely to take their own lives in adulthood. This reinforces the need for more targeted work aimed at developing the mental health literacy of boys and young men, as well as equipping female students with the coping mechanisms to enable them to handle anxiety and stress at key transition points.
- Looked after children, children with long term conditions and disabilities, LGBT students and those caring for others at home with chronic conditions, were more likely to express poorer emotional wellbeing, highlighting the continued need to target support at these more vulnerable groups.

³ 'Omnibus Survey of Pupils and their Parents/Carers. Research report wave 4'. September 2018' DfE

Trends in Feeling Safe and Being Safe

- The vast majority of students say they feel safe at college and in their neighbourhood in North Lincolnshire. Fear of bullying is low and continues to fall year on year, and in all age groups. In this most recent survey, the proportion of students in Years 12-13 who reported worrying a lot about being bullied in the last 4 weeks was less than 3%, which is less than half that reported by Year 11s in 2016/17.
- Although proportions are small, students with a long term condition or disability, worried most about bullying and were more likely to say they had experienced this in their current college.
- Reassuringly, more than half of those affected had sought help from someone in college and for the vast majority this had helped. Indeed, most of this age group thought their college dealt with bullying well.

Sex and Relationships Education (SRE)

- Young people repeatedly identify schools and colleges as their preferred source of information about sex and relationships when growing up, in both local and national surveys, followed by their parents. And there is a significant body of evidence to show that good quality sex and relationship education in schools and colleges can have a significant impact on the future sexual health and wellbeing of young people.
- Almost three quarters of students this age (73%) could recall having SRE in schools and more than half, 57%, found it useful. LGBT students were least likely to find this useful, 46%, with this falling to 39% amongst those who were already sexually active.
- This group were also most likely to say they would welcome more information about sexual health, 22%, suggesting the need for more inclusive SRE.

Aspirations for the future

- Attainment rates amongst 11-18 year olds continue to rise each year in North Lincolnshire and are above national levels. A greater proportion of young people, are aspiring to go on to higher education than in previous years, the largest proportion being amongst girls and BME communities (of both sexes).
- In contrast, the proportion of this age group who say they are considering apprenticeships as an option has fallen, with significant differences between the sexes, with young males being three times more likely than young women to aspire to this. More work may need to be done in schools and colleges to promote the opportunities available for young women in apprenticeship roles.
- Overall, 43% said they would welcome more advice and guidance about careers.

Introduction

1.1 Introduction

- This report presents the summary findings of the College Lifestyle Survey, 2017/18. This latest survey was completed between October 2017 and February 2018 and was led by individual colleges and sixth forms, with the support of public health intelligence staff in North Lincolnshire Council.
- This is the 2nd lifestyle survey of college students completed in North Lincolnshire. The previous 'pilot' survey was carried out in the autumn term of 2013/14.
- Each college received a detailed report of their students' responses as soon as their college survey was completed. This report summarises the results of *aggregated* authority wide data for North Lincolnshire.
- The survey generated responses from 1905 students aged 16-20 years. This report focuses on the responses from students in Years 12 and 13, ie 16-18 year olds working towards A levels, and technical and vocational qualifications. A small number of young people on apprenticeships also took part.
- All colleges and sixth forms in North Lincolnshire expressed an interest in taking part in the survey. We also approached a number of smaller education providers, of which one took part. Unfortunately, one sixth form was unable to complete the survey. In total, 5 out of 6 potential providers participated. A small number of students attending alternative education provision also took part this year and are included in the overall results. Students attending the special college in North Lincolnshire did not participate.
- Many of the questions employed have been used in national surveys to monitor trends in young people's health and wellbeing. Where possible we have retained the original format and wording of these questions over time to enable local trend analysis and comparison with younger age groups.
- Another change this year is the definition of 'long term health problem, disability or condition', which was adopted from the recent national 'What Youth Survey' (<https://fingertips.phe.org.uk/profile-group/child-health/profile/child-health-young-people/>). This is a broader definition than the one we have previously used, and means we cannot compare, robustly, the results about this group of pupils with those in earlier surveys.
- Whilst steps were taken to ensure that the survey was accessible as possible to pupils with lower reading ability, it is possible that a significant number of young people with special educational needs may not have participated because of the potential need for additional teaching assistant support.
- Where possible, we have undertaken detailed analysis by age, sex, ethnic group, disability and free school meal status and compared with national data. Looked After Children (LAC) are represented in the sample. However, the numbers are too small to enable any specific comparative analysis within this report.
- Overall, and in line with our previous school and college surveys, the results are very positive with continuing improvements in young peoples' health and wellbeing

compared with previous years, and across all age groups compared with previous surveys. This is good news for young people, their families, schools and local agencies and represents the outcome of local agencies' joint efforts to improve students' health and well-being over the last ten years. The report also identifies some opportunities for improvement and priorities to be taken forward by the Council, colleges and partners. These are summarised in the final chapter of this report.

- Individual college reports will also help providers gauge how well they are meeting their own health and wellbeing objectives and to develop local plans for improvement.

1.2 Sample characteristics

- The survey was completed anonymously and was administered and completed online via a web based tool. Students were selected by the education providers and 1799 students between 16-18 years took part, representing 44% of students of this age attending colleges in North Lincolnshire.

Table 1: Total survey responses by year group

NCY group	Yr 7	Yr 8	Yr 9	Yr 10	Yr 11	16 year olds	17 year olds	18 year olds	19 years +
No of participating schools/academies	12	12	11	12	9	4	4	4	2
No of other providers that took part	1	1	1	3	3	1	1		
Total survey responses	1144	1118	994	986	795	816	770	213	106
% all North Lincolnshire students	60%	59%	59%	57%	47%	44%	44%		

- This was a higher rate of participation than in 2013/14, which in that year was our first 'pilot' survey with this age group.

Table 2: Trends in survey responses

Responses	Yr 7	Yr 8	Yr 9	Yr 10	Yr 11	16-18 years	19 yrs & over	Total
2010/11	915	990	1007	907	1011	-	-	4830
2013/14	1165	1193	1070	1004	1257	487	90	6266
2016/17	1144	1118	994	986	795	1799	106	6942

- Table 3 below shows the differences in student profile between colleges, with John Leggott college having a larger intake of students from BME communities and from out of area, whilst North Lindsey College has a higher proportion of students with self reported SEND, and who were eligible for free school meals.

Table 3: Student characteristics (based on all responses from 16-18 year olds n=1799)

	John Leggott	North Lindsey	Other
Live out of area	14%	8%	15%
English as an additional language (EAL)	9%	6%	0%
BME	21%	9%	2%
Sexual orientation LBGTQ+	11%	11%	4%
Live in lone or reconstituted families	44%	49%	38%
Grandparents live with them	4%	4%	2%
Live in 'host families'	3%	-	-
Self-reported long term chronic illness, condition or disability (SEND)	12%	21%	17%
Eligible for Free School Meals at last secondary school	10%	22%	7%
'Looked After' by a local authority	<1%	<1%	1%
Provide care for a parent or sibling with a serious illness/disability	5%	9%	4%

Living circumstances

- At this age most young people are in full time education and are still living with their parents/carers at home. Most college students (94%) said they lived with at least one birth parent and more than half said they lived with both (54%).
- The proportion of young people living in lone or reconstituted families has risen since these surveys first began to more than a third, (46%), especially amongst older teenagers, of which almost half live apart from one birth parent. There was little difference between the college cohorts in this respect.
- Of those living with just one birth parent, most (88%) lived with their Mum, although many continue to have regular contact with both parents, spending time living in both parents' homes.
- Six young people in the survey said they were living in a hostel or supported lodgings, whilst 16 said they were living temporarily with friends.
- Less than 1% were 'looked after' ie: living with foster carers or in a children's homes.
- 4% of young people said that a grandparent lived with them.
- 3% of John Leggott respondents (40) were citizens of other countries and at the time of the survey were living with 'host families' for the duration of their studies. More than half of these students were from China or Hong Kong. The remainder were from eastern European countries.

Ethnic group

- More than 17% of the survey population identified themselves as being from Black and Minority Ethnic groups; the largest BME groups were young people of Bangladeshi, Polish and Chinese heritage. This is significantly higher than in 2013/14, when the figure was 6%.
- For 8% of students this age, English was not their first language. This is in line with the average for all secondary school pupils in North Lincolnshire.

Young carers

- 6% of this age group said they spent time caring for a sick or disabled relative at home. This is slightly lower than reported by 11-15 year olds, in the last secondary school survey, although it is slightly higher amongst North Lindsey students. According to the Carers' Trust about 1 in 12, (8%), 11-15 year olds are young carers, (Carers' Trust, 2017).

- Of these young carers, more than half (52%), said they were caring for a parent, and a quarter for a brother or sister.
- 23% of those who identified themselves as 'carers' had been eligible for free school meals, confirming the strong association between family disability, ill health and low income seen in previous surveys.

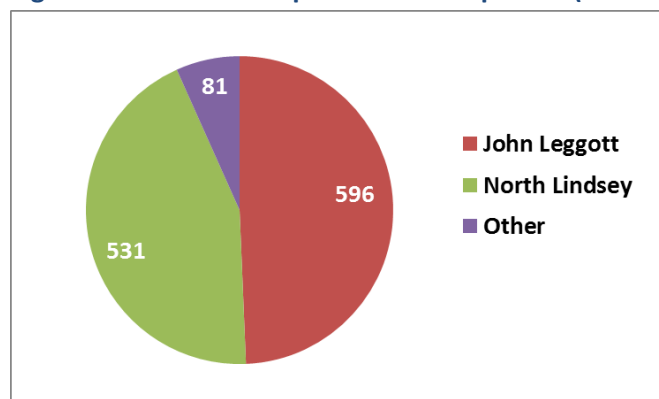
Sexual orientation

- Overall, 10% of students in this survey identified as lesbian, gay, bisexual or transsexual, (LGBT). National surveys return a figure of 3% amongst 16-24 year olds, although this proportion is generally regarded as a significant underestimate. However, the last guidance produced by the PSHE Association and Brooks, also quoted a figure of 10% of the pupil population who are likely to be LGBT⁴.
- Of the 10% in our survey who identified as LGBT, 3% identified as gay or lesbian, and 7% as bi sexual. More females in our survey identified as bi sexual, 11% females, compared with 4% males.

1.3 Stratified sample

- Because John Leggott College surveyed more students than the other colleges, (two thirds of responses were John Leggott students), to avoid bias in the results, this LA wide report is based on a stratified sample of the 1799 responses. This has the effect of reducing the sample to roughly a quarter of each college's 16-18 student population, a total of 1208 responses.
- This is the baseline used throughout this report. (All colleges have received a report based on their full set of responses).
- We remain confident that this smaller sample is representative in terms of age, gender, ethnicity, geography, looked after status, and family income, enabling analysis of gaps in outcomes between different population groups to be analysed, and trends monitored over time.

Figure 2: Stratified sample of 16-18 responses (n = 1208)



⁴ Sex and Relationships Education for the 21st Century.' (2014) PSHE Association

2. Summary of data

2.1 Health and wellbeing

Physical wellbeing

- Although these adolescent years tend to be a time of good physical health, (90% of this age group report their health as good), young people do experience a range of physical health problems. In this survey, about 16% 16-18s reported having a long-term chronic illness or disability; a rate similar to the national average and in line with the figure reported by 11-15 year olds in North Lincolnshire.
- Students who were eligible for free school meals were more likely than others to report a disability or long term health problem, 24%, compared with 16% overall.
- No details were sought on the nature of their illness or disability, although the definition encompasses children with long term medical conditions such as asthma, eczema, epilepsy and diabetes, as well as children with significant and long term disabilities and/or special educational needs.

Physical activity

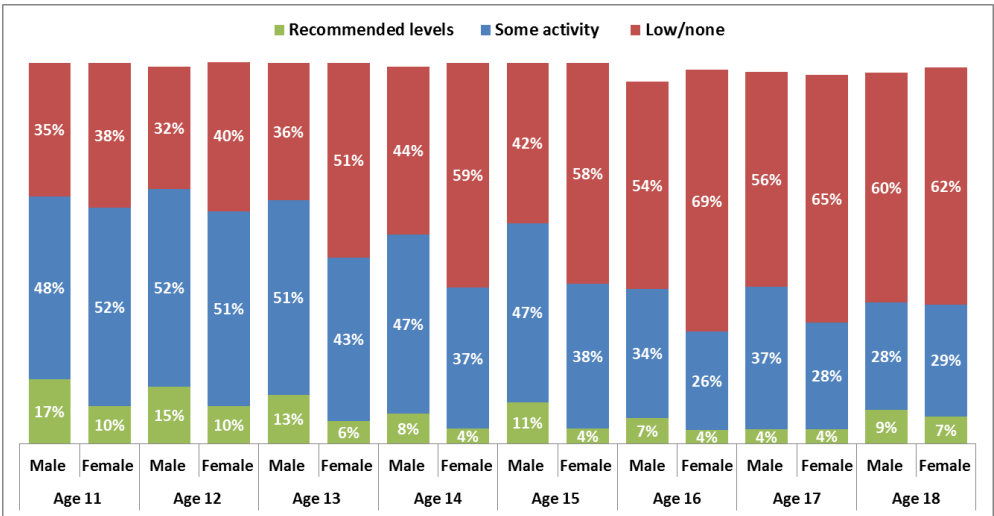
- Young people's physical activity levels are critical to their overall health. Current UK guidelines for children and young people recommend at least one hour of moderate⁵ to vigorous⁶ intensity activity a day. However, we know that only 26% of five to 10 year olds meet this level, with this dropping as they move through secondary school.
- The Public Health England report 'Everybody Active, Every Day' emphasises the importance of the school and college setting in expanding young people's opportunities to be active. This is confirmed in local data on children's physical activity levels, with only 14% of 11-15 year olds in North Lincolnshire currently meeting national recommendations for physical activity outside school⁷.
- By the age of 16-18 years the proportion meeting these guidelines outside the college setting falls to just 7%, with more than half of this age group reporting doing little or no activity at all outside college. Young women continue to be less physically active than men, with this gender gap widening as they progress from primary to secondary school.

⁵ Moderate activity would include walking to school, skateboarding, cycling or playground activities

⁶ Vigorous activity would include running, football, netball, martial arts, gymnastics, etc

⁷ 'Health Survey for England 2015, Children's Physical Activity', NHS Digital, 2016

Figure 3: Self-reported physical activity (outside college) by age group, 2017/18



- This gender gap is confirmed in national surveys⁸, with most of this difference being accounted for by girls’ lower rates of participation in formal organised sport.
- Public transport and walking play a big role in daily physical activity for this age group, with much of the walking that young people undertake at this age usually generated by the journey to college. Yet national data suggest the proportion of young people this age walking to college or school has fallen over the last decade.

Food and drink

- Nearly half of 16-18 year olds (49%) said they eat breakfast ‘every or most’ days, with over 80% having lunch or evening meal. Girls were more likely than boys to say they skipped lunch on college days, 19% compared with 14% boys.
- Energy drinks are soft drinks that contain higher levels of caffeine than other soft drinks. They may also contain a lot of sugar (though low- or zero-calorie energy drinks are available). Evidence suggests that excessive consumption of energy drinks by children and young people is linked to negative health outcomes such as headaches, sleeping problems, irritation and tiredness.
- Some of these energy drinks are now subject to the recently implemented sugar tax. However, there is nothing to prevent children from purchasing these drinks, although some retailers have voluntarily imposed a ban on sales to under 16s.
- National studies show that more than two thirds of UK children aged 10-17, and nearly a quarter of those aged 6-9 years of age, are energy drink consumers.
- By the age of 16 about half say they consume these drinks, with this being more common amongst young men than women. In our survey, just over a fifth of males said they consume these drinks at least weekly, with 10% saying they have at least one every day.

⁸ Health Survey for England results reported in ‘Key Data on Adolescence, 2017’

Perceptions of body weight

- Just under half, (45%), of young people in our survey thought they were an ideal weight, a finding in line with national self perception surveys⁹. Almost a third, (32%), of 16-18 year olds thought they were overweight, including 4% who considered themselves to be very overweight. One in 7 students, 15%, thought they were underweight.
- Males were more likely to self-assess as underweight and females were more likely to assess as overweight. This is a similar result to that reported by 11-15 year olds in North Lincolnshire.

Table 4: Do you consider yourself to be....

	Very thin/ underweight	A bit underweight	Ideal weight/just right	A bit overweight	Very overweight	Don't know
Males 16-18 yrs	4%	15%	45%	27%	2%	4%
Females 16-18 yrs	2%	9%	46%	31%	6%	5%
<i>Males* 11-15 yrs</i>	<i>4%</i>	<i>12%</i>	<i>54%</i>	<i>20%</i>	<i>2%</i>	<i>9%</i>
<i>Females* 11-15 yrs</i>	<i>1%</i>	<i>9%</i>	<i>54%</i>	<i>22%</i>	<i>3%</i>	<i>9%</i>

*ALS – Adolescent Lifestyle Survey of secondary school pupils 2016/17

- In terms of objective measures of health, the Health Survey for England reports that around 39% of young people aged 16 to 24 years are overweight or obese, suggesting that young people (particularly young men) probably underestimate their own weight, or are at least unclear about the definition of a healthy weight.

Body image

- Although around half of young people in our survey reported being happy with their weight, a significant proportion of young people admit to worrying about their appearance/body image. By the age of 16-18 years, 1 in 3 (35%) girls and 15% boys say they worry a lot about this.
- The 4% who self assessed as very overweight were much more likely to say they worried about this, with almost half of this group (49%), saying they had worried a lot about their body image in the last month. They were also more likely to report lower self-esteem, with almost three quarters (72%) of this group reporting that they rarely or never felt good about themselves, with most of these responses coming from young women.

Dental Health

- Whilst levels of dental decay in 5 year olds are significantly below average in North Lincolnshire, access to NHS dentists is also lower.
- In our survey, 80% of 16-17 year olds who responded to the survey and who lived locally, said they were registered with a dentist, with this falling to 66% amongst 18 year olds.

⁹ 'Health Survey for England, 2015'

- Of these, the majority (93%) said they had at least annual check-ups. Getting an appointment and finding time to attend were the most common reasons given for not attending regularly.
- Of the 20% who were not registered, most said their last visit had been within the last two years, although a third said they could not remember when this was.
- The most common reasons for not being registered was lack of time, (33%), not being able to find a dentist close to home, (25%) and not being able to get an appointment.
- Overall 20% of those not registered said they could not afford to go to a dentist, although this applied mainly to the 18 year olds who responded.

Antibiotic Use

- Antibiotic resistance is a complex global public health issue, which requires an international and whole system response. In 2013, the Department of Health published the UK's first Five Year Antimicrobial Resistance Strategy, the goal being to slow the development of resistance and to preserve the long term effectiveness of antibiotics in the population.
- Amongst other things, the report highlighted the need for more public awareness campaigns. The main message being that antibiotics don't work for everything and should be reserved for treating bacterial infections and only when prescribed by a certified health professional.
- In our survey, 30% of young people said they had been prescribed an antibiotic in the last 12 months, rising to 43% in those with a long term health problem/disability.
- Overall, this age group demonstrated low knowledge of the difference between viral and bacterial infections, with over a quarter (28%) believing that antibiotics kill viruses, work on most coughs/colds or can be used to treat flu, whilst a further 20% said they did not know whether they were effective in treating these conditions or not.

2.2 Emotional wellbeing

- There is much debate and concern about whether today's generation of young people is more anxious, depressed and stressed than previous generations. However, in the absence of a large scale national survey, (the last psychiatric morbidity of children was completed in 2004), the evidence to support this is conflicting, with some studies suggesting no significant increase since 2000, whilst others suggest an increasing prevalence of mental illness amongst low income children, (Millenium Cohort Study).
- Where the more recent studies appear to agree is on the apparent increasing burden of emotional problems amongst young women, with some evidence of a fall in overall difficulties amongst teenage males. The national Good Childhood Survey (2015) reported evidence of increasing gender inequalities in levels of distress and anxiety).
- A cross-sectional survey of young people aged 11-13 in 2014 also concluded that emotional problems (a high score on the Strengths and Difficulties Questionnaire, not a

clinical diagnosis) were more common in teenage girls; 20% compared to 7% in the boys (Fink et al, 2015).

- These findings were also confirmed by our own local lifestyle surveys of 11-15 year olds, with girls being much more likely to report very low emotional wellbeing scores compared with boys.
- National data also suggests that this trend continues into early adulthood. The most recent national Adult (16+) survey of psychiatric morbidity undertaken in 2014/15, found that 25% of women aged 16-24 years and 15% of young men this age showed signs of depression or anxiety, with the authors identifying young women as a high-risk group for poor mental health in the population (McManus et al, 2016).
- In contrast with mental illness, there has been a considerable amount of work done nationally on the measurement of emotional wellbeing in children and young people, with the result that several large surveys use the same measures with different age groups.
- Wellbeing is not the opposite of poor mental health, for example, it is possible to have a mental illness and high wellbeing. However emotional wellbeing is a part of a general mental state, with low wellbeing potentially contributing to the development of later mental health problems.
- The Warwick Edinburgh Emotional Wellbeing Scale, (WEMWBS¹⁰) is one such measure of wellbeing which has been used with age groups of young people across the country. It consists of a scale of positively worded items and asks respondents to describe their feelings over the previous two weeks.
- The scale is designed to measure positive mental wellbeing in a population, as opposed to mental illness and disorder, its main use being to compare wellbeing scores between populations, or within populations over time. The minimum score possible is 14 and the maximum is 70. The higher the score, the better the emotional wellbeing. Whilst the scale is not designed for use as a screening tool to detect mental illness, very low average scores may indicate the need for clinical support.
- All students were asked to complete this scale in our survey, with a mean score across all 16-18 year olds of 44.6, a slightly lower score than that reported by 13-15 year olds in our last Adolescent Lifestyle Survey . It is also lower than the national average for 16-24 year olds, which is currently reported to be an average of 51.
- Overall, and in line with the younger cohort, girls scored lower than boys in our survey, with young women accounting for almost two thirds of the low and very low wellbeing scores in our survey, (ie with an average score below 34). Conversely, males accounted for almost two thirds of those with above average scores, (ie with a score above 55).

¹⁰ Warwick-Edinburgh Mental Well-being Scale (WEMWBS) © NHS Health Scotland, University of Warwick and University of Edinburgh, 2006, all rights reserved

- There was little difference in average EMWB scores between colleges, ethnic group, or between those on low incomes and others although those on free school meals were less likely than other pupils to score highly on this measure.
- However there were differences by disability and caring status, with those reporting a long term condition or disability or having a caring responsibility at home having the lowest average scores.
- Table 5 summarises the range of scores, with relatively low/high scores referring to those which were more than one standard deviation above or below the overall mean for all 16-18 year olds. 'Very low' and 'very high' scores refer to the range of scores which are *at least* 2 standard deviations from the average, (mean). Table 6 shows what elements of the scale contribute most to the low scores.

Table 5: Distribution of wellbeing scores by group (% 16-18 year olds)

	Very low wellbeing score (14-22)	Relatively low wellbeing score (23-33)	Average wellbeing score (34-55)	Relatively 'high' wellbeing score (56-66)	Very high wellbeing score (67-70)
All 16-18 yr olds	3%	12%	70%	12%	3%
Boys	2%	8%	69%	17%	4%
Girls	4%	16%	70%	9%	1%
FSM	1%	17%	72%	10%	1%
Disability/LTC	5%	19%	65%	11%	1%
Young Carers	10%	19%	55%	12%	3%
LGBTQ	7%	22%	64%	7%	0%
BME	3%	7%	70%	16%	4%

*LAC – numbers too small to include

- These results are also in line with our secondary school survey and reflect national trends. For example, a recently published Omnibus Survey of school and college students and their parents and carers, (DFE, 2018¹¹) reported low self reported wellbeing amongst young people with SEND, Young Carers and those who identified as LGBTQ. The Good Childhood Survey (2015)¹² also identified LGBT young people as a high risk group for poor wellbeing.
- Table 6 overleaf presents the results for each component part of the Wellbeing Scale. Reassuringly, most young people say they feel loved, confident and optimistic about the future, at least some of the time.
- Amongst those with a low wellbeing score, the most common items which contributed to this were low scores on, feeling good about themselves, feeling confident and having energy to spare.

¹¹ Omnibus Survey of Pupils and their parents and carers, (DFE), 2018)

¹² Children's Society, 2015

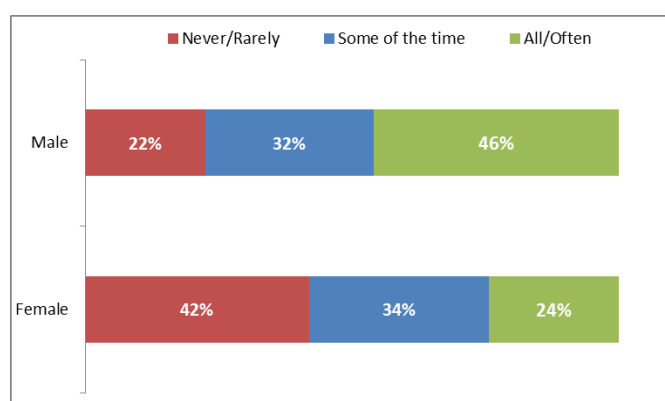
Table 6: How often in the last two weeks have you felt (Age 16-18 years)

	All of the time/Often	Some of the time	Rarely/Never
I've been feeling optimistic about the future	39%	37%	24%
I've been feeling useful	33%	40%	27%
I've been feeling relaxed	31%	33%	36%
I've been feeling interested in other people	43%	32%	25%
I've had energy to spare	43%	20%	37%
I've been dealing with problems well	39%	34%	27%
I've been thinking clearly	42%	34%	24%
I've been feeling good about myself	35%	32%	33%
I've been feeling close to other people	48%	30%	22%
I've been feeling confident	37%	32%	31%
I've been able to make up my own mind	58%	27%	15%
I've been feeling loved	59%	27%	14%
I've been interested in new things	45%	29%	26%
I've been feeling cheerful	40%	36%	24%

Source: Warwick-Edinburgh Mental Well-being Scale (WEMWBS) © NHS Health Scotland, University of Warwick and University of Edinburgh, 2006, all rights reserved

Feeling good about themselves

- On average, 35% of 16-18 year olds said they always or often felt good about themselves, with rates ranging between colleges from 36% to 27%.
- Young males consistently scored higher than young women on this measure, a finding reflected in national surveys of wellbeing amongst teenagers. By Year 12, 42% females and 22% males said they rarely or never feel good about themselves. This gender gap was evident in all college settings and in all ethnic groups.

Figure 4: % 16-18 year olds who say they feel good about themselves by gender

- This gender difference in wellbeing was also evident within the LGBTQ group, with lesbian and bisexual females scoring lower on this indicator than gay and bisexual men.

- It is not clear what is accounting for this widening gender gap. It may be that girls are more willing than boys to talk about and seek help for emotional distress, indicating lower levels of mental health literacy amongst young men. Alternatively it could indicate poorer resilience amongst young women, with females having lower tolerance thresholds than men¹³.
- The Good Childhood Survey (2015)¹⁴ has highlighted a range of factors impacting on children and young people's emotional wellbeing. Those groups at greatest risk of poor emotional and mental health include children and young people who:
 - bully or are bullied
 - from BME communities and refugees
 - of parents with mental health or drug/alcohol problems
 - are affected by neglect, violence and maltreatment & Looked After Children
 - LGBT young people
 - Are young carers
 - Run away
 - have disabilities and/or long term illness/condition
 - are experiencing family conflict
 - have witnessed domestic abuse
 - have experienced bereavement, separation or loss
 - are in the lowest socio-economic group
 - are part of gangs
 - offend
- In our survey, students who self assessed as having a disability or long term illness, were more likely than others to report low self-esteem¹⁵, 42%, compared with 31% of other students this age.
- The number of looked after young people who participated in the survey was too small to complete a robust comparative analysis.

Physical activity and emotional wellbeing

- The link between subjective wellbeing and physical activity is well known, and all the research evidence suggests that the '5 ways to wellbeing' are as relevant to children and young people as they are to adults¹⁶.
- A national survey of 11-15 year olds published by the Children's Society¹⁷ also found that the strongest predictor of wellbeing amongst this older age group was non-team sports/exercise, with the association being stronger for teenage girls than for boys.

¹³ 'Missed Opportunities. A Review of recent evidence into children and young people's mental health' Centre for Mental Health, 2016

¹⁴ Children's Society, 2015

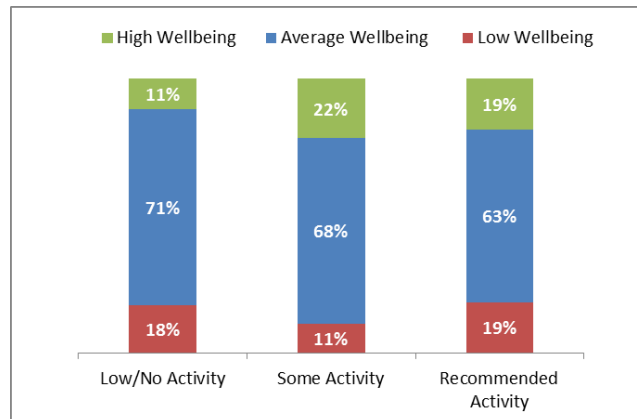
¹⁵ Defined in this survey as reporting 'never or rarely feeling good about themselves'

¹⁶ 'Longitudinal Study of Young People in England, Health and Wellbeing at Wave2. Research report', July 2016. Department for Education

¹⁷ 'Ways to Wellbeing: Exploring the links between children's activities and children's subjective wellbeing.' Research Report. Children's Society. December 2014

- In our survey engaging in physical activity outside college was positively associated with self-esteem, especially amongst older teenage girls, who, overall, were less physically active than boys. The same association was seen in secondary school pupils.

Figure 5: Wellbeing and physical activity (16-18 year olds)

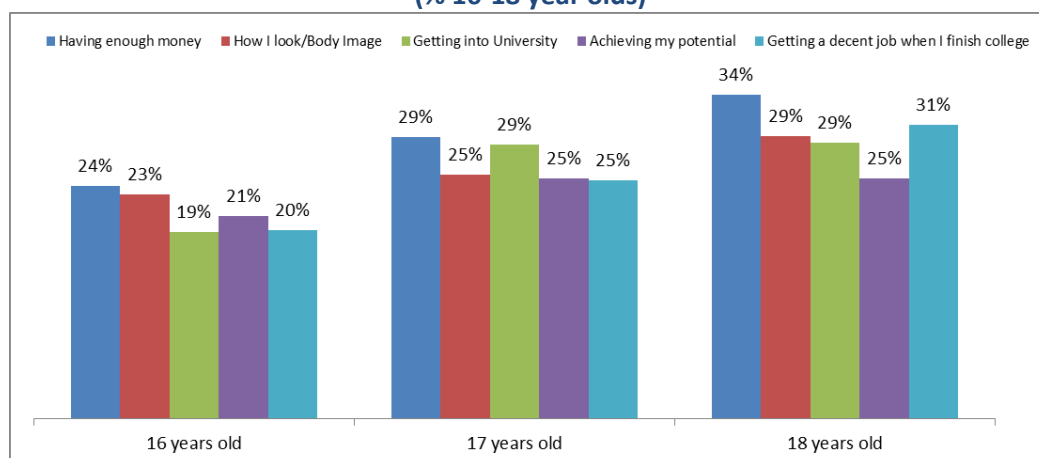


- Young people who said they engaged in exercise at least 4 times a week were also more likely to report having energy to spare.

Young people's worries

- Whilst most young people worry about things from time to time, a significant number of students in our survey expressed money worries, with just over a third of 18 year olds saying they had worried a lot about this in the last month.
- Concerns about body image, and worries about future college and job prospects, were the next most frequently mentioned; raised by a quarter of students this age.
- Worries about exams and course work were also common, mentioned by 1 in 10 students, whilst 13% said they had worried a lot about relationship problems, at home, with friends or with their partner.

Figure 6: What young people say they have worried about a lot in the last 4 weeks (% 16-18 year olds)



Worries about being bullied

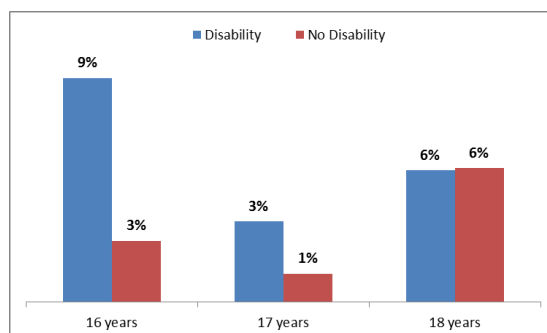
- In comparison with other concerns, worries about bullying are relatively low and have fallen considerably in all age groups during the last decade. Overall, 3% 16-18 year olds reported worrying a lot about bullying in the last month, compared with 8% of 11-15 year olds (2016). Young women were more likely to say they worried about this.

Table 7: % Year groups who say they worry a lot about being bullied

	Year 7	Year 8	Year 9	Year 10	Year 11	16-18 year olds
2013	11%	12%	10%	7%	7%	-
2016	13%	10%	7%	6%	6%	3%

- Young people with a disability/long term illness, and young people who identified as LGBT were most likely to worry about bullying, with 6% of both groups saying they had worried a lot about this in the last month, compared with 2% of the rest.

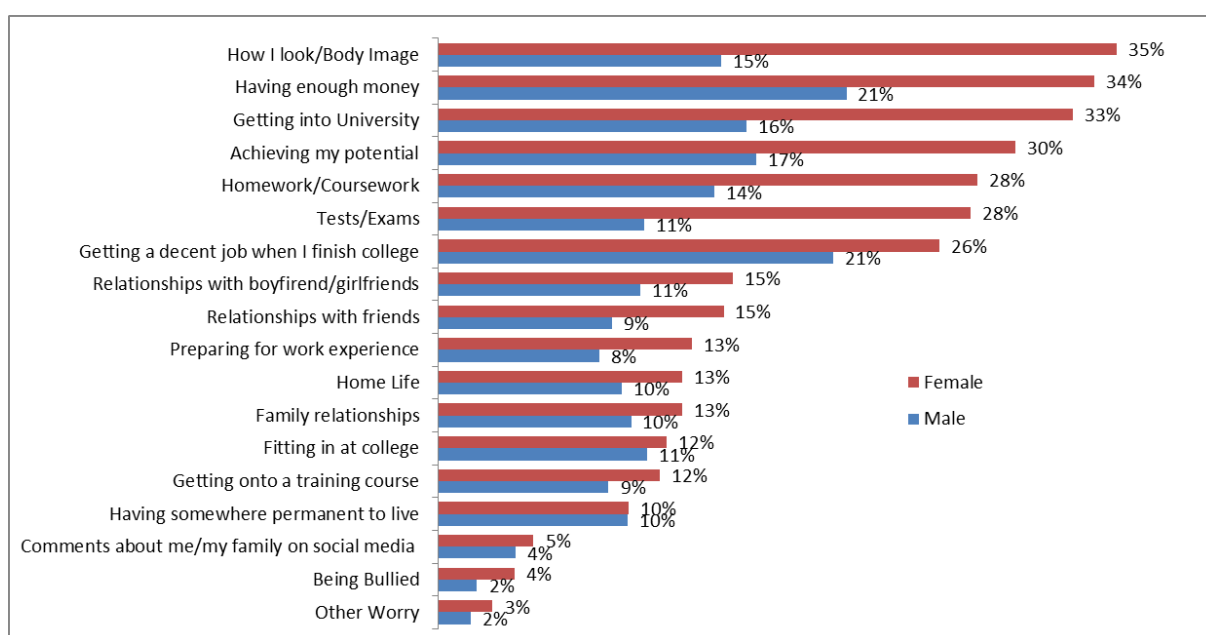
Figure 7: 16-18 year olds who reported worrying a lot in the last month about being bullied, 2017/18



Gender differences

- In line with other findings, young women were more likely than men to say they worried a lot about most things, with the focus of their anxieties being largely on body image, having enough money and getting into University.
- 1 in 20 females, (5%), said they worried a lot about what people were saying about them on Facebook, and other social media.
- 'Other' issues highlighted by young people included, family illness, mental health and gender issues.

Figure 8: What 16-18 year olds say they worry about most, by gender, % 2017/18



Who young people talk to

- Reassuringly, more than 80% of this age group said they had close friends they could turn to for support if they were in some sort of trouble, and nearly three quarters said they found it easy to talk to their friends about things that bothered them.
- In addition, almost two thirds of this age group, (64%), said they found it easy to talk to their parents/carers. Just over a third (39%) also said they would find it easy to talk to their personal tutor and 30% felt they could turn to other adult staff in college.
- Overall, 17% 16-18 year olds said they had neither close friends they could turn to if they were in trouble **and** found it difficult to talk to either parents/carers or other adults about their worries. This response was more common amongst young women and LGBT students and was consistent across all colleges.
- When asked how comfortable they felt about 'opening up' about their emotional wellbeing to others; 68% students said they were comfortable sharing this with close friends, 64% with their Mum, 44% their Dad and 29% with their personal tutor. Just 4% said they found it difficult to open up to anyone.
- Girls were more likely than boys to say they felt comfortable talking to their friends about emotional issues, although boys were just as likely to confide in other adults as girls.
- Young people who self-identified as LGBT were least likely to say they would feel comfortable opening up to adults. Almost half of this group (48%) said they would feel *uncomfortable* opening up to their Mum, and 60% to their Dad, and were less inclined than other young people to say they would feel comfortable discussing this with a member of college staff, (70% said they would feel uncomfortable). For this group of young people, peers were their main source of emotional support.

2.3 Seeking help on mental health issues

- Adolescence and young adult years are considered a peak age for the first onset of adult mental illness. Three quarters of adults with a diagnosable mental health problem will have experienced first symptoms of poor mental health by the age of 24,¹⁸.
- Diagnosable conditions which occur at this age produce high levels of enduring impairment which can, if left untreated, persist over time and increase the odds of suffering life course disadvantage – including, unstable employment, and poor family and social functioning.
- National research¹⁹ suggests that at any one time, in a secondary school of 1,000 pupils, an estimated
 - 15% will be at risk of poor mental health and need some extra help
 - 7% will have a common diagnosable condition
 - 1.7% will have a more serious condition
 - 0.1% will have a very serious condition potentially requiring inpatient care
- Although we know that prevalence of poor mental health rises with age, there are no age specific estimates for 16-18 year olds. Applying the above estimates to this cohort, we would expect in the North Lincolnshire population of this age, *at least*
 - 850 (15%) at risk of poor mental health and needing extra help
 - 400 (7%) with a common diagnosable condition, such as depression or anxiety, (although national surveys suggest this could be as high as 16% for under 25s)
 - 96 (1.7%) with a serious condition
 - 6 (0.1%) with a serious condition requiring inpatient care
- Whilst there is strong evidence that getting help early on could limit the length and recurrence of episodes of mental illness, and reduce the risk of problems extending into adult years, national reports show that only a minority of children and young people with early signs of a diagnosable mental illness get the timely help they need²⁰.
- Some of the likely reasons for this are summarised in a recent review of research evidence on children and young people's mental health and include:
 - stigma
 - willingness and energy to seek help (often undermined by symptoms of their condition, eg depression)
 - poor mental health literacy (ie not recognising poor mental health, not knowing there is help available and not believing that help will make a difference)
 - perceptions that timely help is unavailable (as well as actual delays)
 - poor personal experiences or experiences of others of receiving help

¹⁸ Kessler, et al., 2005; McGorry, et al., (2007).

¹⁹ 'Missed Opportunities. A Review of recent evidence into children's and young people's mental health'. Centre for Mental Health. 2016

²⁰ 'Missed Opportunities' Centre for Mental Health 2016

- National research evidence also suggests that young people this age are not always aware that their mental health is deteriorating, and tend to favour informal sources of support for mental health difficulties, such as friends or family. Yet as we have seen, a significant minority of young people do not find it easy to open up to any adults about their feelings.
- These findings illustrate the importance of raising awareness and mental health literacy among families, schools, colleges and young people themselves. As the authors of a recent research review commented,

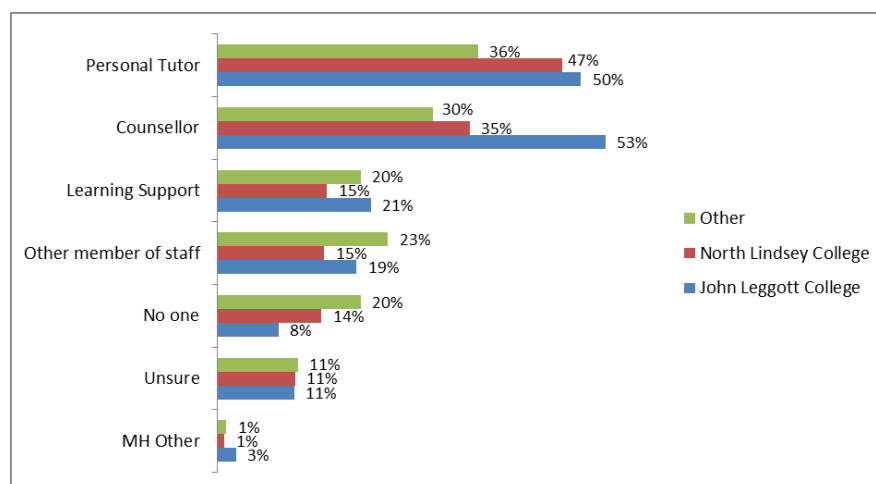
'If young people, families, teachers and other non-specialist professionals recognise mental health problems and have relevant knowledge about risks, causes and effects of treatment, young people are more likely to seek early appropriate help.' Centre for Mental Health, 'Missed Opportunities' (2016) p12

- In response to this and other evidence, the Department for Education took a number of steps to improve mental health support in schools, including
 - new guidance for school counselling services.
 - updated guidance on mental health and behaviour, and children with physical and mental health conditions.
 - appointment of a mental health champion for schools, to help raise awareness and reduce the stigma around young people's mental health.
 - Joint investment with NHS England to pilot joint training for designated leads in CAMHS services and schools; £5m in 'character education' including peer mentoring; and £5m for grants for organisations that work with vulnerable children and young people, including funding for a comprehensive directory of all mental health services for schools.
 - Funding the PSHE Association to produce guidance and lesson plans to support teachers to deliver age-appropriate lessons on mental health in PSHE education.
- Public Health England has also provided briefings for head teachers and governors which include a summary of research evidence showing the links between positive mental wellbeing and good educational outcomes²¹.
- North Lincolnshire was successful in bidding for some of this national funding, in particular, funding to train all mental health champions in youth mental health first aid, (YMHFA). Currently, there are 2 in every school/college and alternative provision. In addition, all school nurses have been trained in YMHFA, and more than 8 local instructors of the YMHFA course have been trained, so that in house training will be available every year in all educational settings.
- In order to inform further development work locally, we asked 16-18 year olds for their views on how mental illness was dealt with in their college. Students were also asked about where they would go for help and advice if 'a friend had a serious mental health issue that they were concerned about'.

²¹ 'The link between pupil health and wellbeing and attainment A briefing for head teachers, governors and staff in education settings' PHE 2014

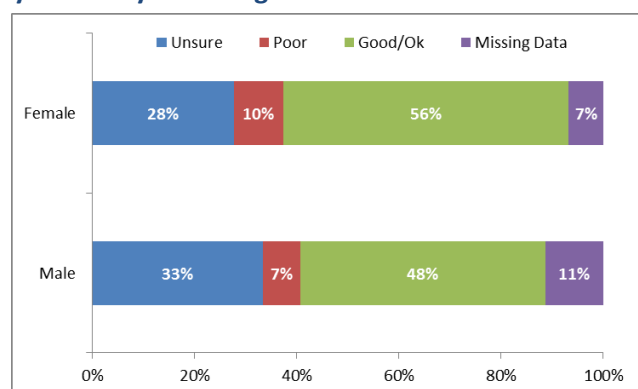
- In our survey, almost two thirds, 64%, students said they were aware of where to go in college for help. Awareness was highest amongst young women. Slightly fewer young people were aware of where to go for advice *outside* college.
- When asked where they would go for help within college, about half identified their personal tutor as the first port of call for advice. Just over half of students in John Leggott College, 53%, mentioned their counselling service as the source of help, compared with just over a third (35%) North Lindsey College students.

Figure 9: Which adults in college would you go to for help about this? % 16-18 yr olds



- Students were also asked how they thought mental health issues were dealt with by their college. Just over half of 16-18 year olds thought their college response was good or OK, whilst nearly a third did not feel able to comment as they had no or little experience to base a judgment on. Girls were more likely than boys to say their college response to this issue was poor, although boys were more likely to report being unsure.

Figure 10: How do you think your college deals with mental health issues? % 16-18 yr olds



- When asked what they would recommend colleges do differently, the common themes raised by students were tackling waiting lists with counsellors, better alignment of subject timetables, and better signposting within colleges about where to go for confidential advice and support, both within and outside college.

- Timely access to trained staff was generally regarded as a key barrier to getting help, as well as lack of awareness about where to go.

'Make it more known to all students that they can see someone confidentially if they need to talk. We should have an email telling us where to go and at what times'.

'There is a long waiting period for counselling which puts people off who need urgent help or just need someone to talk to.'

- These findings reflect national survey results on this issue. In the recently published Omnibus Survey, (2018). In that survey, both college students and their parents felt that improving access to help within the college setting would be most beneficial, including access to a dedicated member of staff as well more signposting on where to get help outside the organisation. In that national survey, almost two thirds of 16-18 year olds said they access to a trained counsellor onsite, whilst most of the remainder were not sure.
- When asked later in our survey what PHSE topics they would like more information on, local students were most likely to identify emotional wellbeing, suggested by 1 in 5 overall, with this being ranked higher by young women.

Table 8: What topics would you like more information on ...

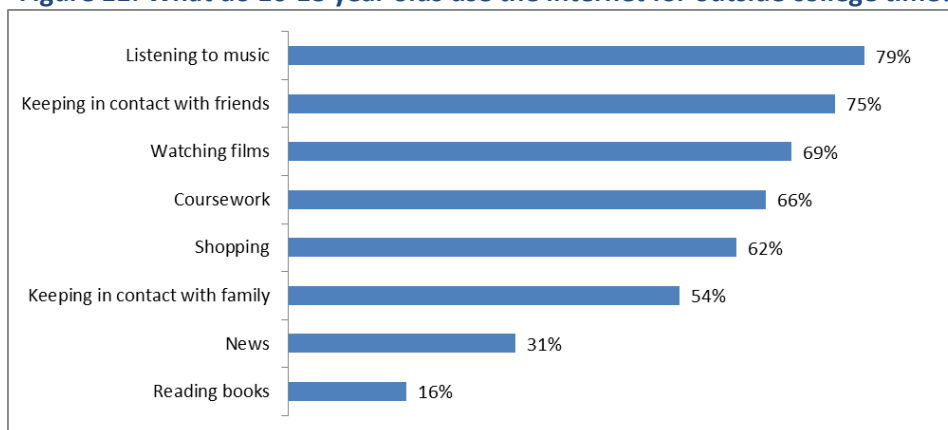
	College X	College Y	Other	Total
Emotional Wellbeing	25%	15%	20%	20%
Healthy Relationships	13%	12%	9%	12%
Sexual Health	13%	10%	9%	12%
Domestic/Partner Abuse	10%	9%	7%	10%
Drugs	6%	8%	5%	7%
Alcohol	5%	8%	6%	6%
Bullying	4%	7%	5%	5%
Online Safety	5%	6%	5%	5%
Smoking	4%	7%	4%	5%

2.4 Internet use

- One of the biggest shifts in young people's behaviour over recent decades, and certainly during the length of time we have been conducting lifestyle surveys in North Lincolnshire relates to the use of information and communication technologies. Traditional television viewing has been in decline among young people for some time, and the latest statistics suggest that they watch less television than other age groups, with the amount of time spent in front of the TV declining year on year.
- With most young people having access to a smartphone and/or tablet, much teenage viewing behaviour now centres around streamed and downloaded programmes from providers such as YouTube and Netflix.

- This was reflected in our survey results. Virtually all of the students who responded to our survey said they had access to the internet and that they used it in their leisure time, most commonly to watch films, and listen to music, and for social networking. For example, 79% said they had an active Facebook account, with a similar proportion reporting having a Snapchat or Instagram account.

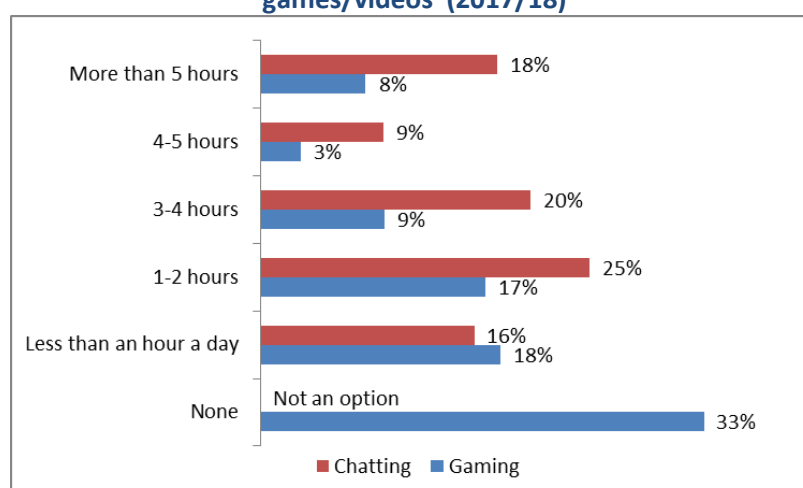
Figure 11: What do 16-18 year olds use the internet for outside college time?



- Whilst enabling young people to be more connected with family and friends, share common interests and creativity, and have better access to information and support networks, is clearly a good thing, further research is required to understand the possible negative impact of social media use on young people's physical and mental health.
- Indeed, what national research there is on children and young people's internet use suggests that 'moderate' use of technology can have a significant positive impact on young people's mental wellbeing, with some groups, such as LGBT students, identifying the internet as a key source of advice and emotional support, providing a crucial link to role models who can help support them to be themselves.²²
- Although there is a lack of robust research on this, heavy internet use has been associated with a range of negative outcomes, including a heightened risk of sleeping disorders, obesity, lower academic attainment, low self esteem, anxiety and depression, an increased risk of 'cyberbullying' and an inability to develop real-life relationships.
- In our survey, almost half, (48%), of 16-18 year olds said they spent 4 or more hours a day outside college time 'chatting online', with this being the same for both sexes.
- A third, said they chat online with people they had never met, and of those that had, a fifth, 21%, said they sometimes worried that the person they were talking to, was not who they said they were.
- Another common use of the internet is for online gaming, although this is more common amongst young men. In our survey, 20% males said they spent 4 or more hours a day after college, gaming online, compared with 3% women.

²² 'Social Media Use and Children's Wellbeing. (2016) McDool et al, Institute of Economic Affairs

Figure 12: No of hours a day 16-18 year olds say they spend online chatting or playing games/videos (2017/18)



- Using the internet to make new friends has been linked in national reports to lower levels of wellbeing. This may be because people who feel isolated in their everyday lives are attempting to use the internet to counteract this²³.
- The Mental Health Foundation argue that, *'It is too early to say whether technology is changing our core ability to relate to others, but soon enough to conclude that while it facilitates relationships, real and virtual, technology is no substitute for the human interaction that is a buffer against loneliness'*²⁴. In other words, social media use may boost the strength of existing relationships but it is less likely to help with those for whom those relationships are already lacking.
- We were not able to investigate these issues in any depth, and so cannot comment on the direction of causality. However, we did observe a relationship between heavier internet use, (ie more than 4 hours a day) and low emotional wellbeing, with expressions of low self-esteem amongst heavier users being more common, especially amongst girls.
- Those who spent more than 4 hours a day time chatting online were also more likely to say they had experienced cyberbullying in the last 4 weeks.
- Not surprisingly frequent late night use of the internet was associated with 'low energy levels', especially amongst females. Overall, three quarters of 16-18 year olds said they had been online after midnight on a college night, with 45% of young males and 31% of young females reporting being online after midnight most nights of the week.

²³ 'Social Media Use and Children's Wellbeing. (2016) McDool et al, Institute of Economic Affairs

²⁴ 'Surviving or Thriving? Mental Health Foundation, (2017)

2.5 Feeling Safe

In college

- The vast majority of pupils said they felt safe in college. Although young people were not asked why they did not feel safe, of the 5% who said they did not, a quarter said they had been bullied in the last 4 weeks. There were slightly more boys than girls in this cohort.

Travelling about

- More than 85% students said they like living in their neighbourhood, and 4 out of 5 said they felt safe walking in their local area during the day, with this falling to 60% at night.

Online safety

- The vast majority (85%) also said they felt safe online, with two thirds saying they would know what to do if they felt unsafe.

Victim of Crime

- 1 in 5 worry that they might be a victim of crime, with girls saying they worry more about this than boys.

Safe Space Scheme

- Just over 10% students said they had heard of the 'Safe Place' scheme, with awareness being slightly higher amongst females this age, and about 2% of this age group said they had used it.

2.6 Being Safe

'Sexting'

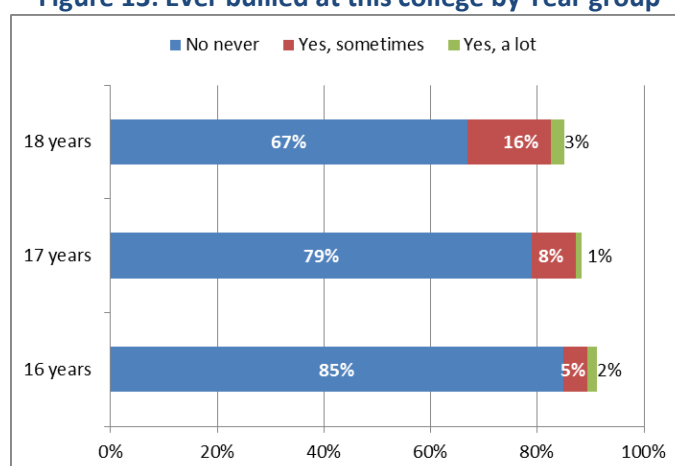
- Recent national surveys have put rates of participation in 'sexting' by young people at between 15 and 40 per cent, depending on the age of respondents and the definition employed.²⁵ In our survey, 16-18 year olds were asked '*Would you say 'sexting' (that is sending or receiving of a sexual message or image) happens amongst your age group?*'. (This matches the question asked in previous local surveys).
- Just under three quarters, 72%, think 'sexting' is common amongst their peers, whilst 11% were unsure. This varied by gender, with perceptions being higher amongst girls than boys. This compares with 73% in the previous college survey, and with 61% of 13-15 year olds who responded to the 2016/17 secondary school survey.
- When asked what they would do if they received a sexual message or image, half said they would either block/delete the person from contacts (44%), and/or delete messages from that person (34%). 14% said they would report this to an adult or CEOP. Girls were twice as likely as boys to say they would take action.

²⁵ 'A Qualitative Study of Children and Young People & Sexting' Ringrose et al 2012, NSPCC The NSPCC defines sexting as the 'exchange of sexual messages or images and creating sharing and forwarding of sexually suggestive nude or nearly nude images through mobile phones or the internet'.

Experience of Bullying

- Students were given the Ofsted definition of bullying²⁶ to read and then asked a number of questions about their own experience, whether they felt this had *ever happened to them* in *this college*, *never, sometimes, or a lot*, as well as whether this had occurred in the *last 4 weeks*. (A number of published surveys of bullying, including the What About Youth Surveys, ask about the last two months, and so are not comparable).
- Overall, less than 1 in 10, (9%), of students in our college survey felt they had been bullied at some time in their current college, with 1.6% of this age group reporting being bullied a lot. This rose slightly for students eligible for FSM, (11%), but was highest amongst those with a long term illness or disability, (20%).
- In spite of greater fears of being bullied, few LGBT students reported any experience of bullying in their current college, 14% compared with 9% in the rest. Reports of recent bullying were similar to the rest of the student population at 3%.

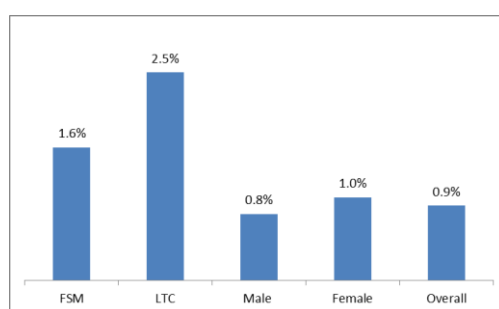
Figure 13: Ever bullied at this college by Year group



- Of those who said they had been bullied at their current college, over two thirds (68%) said this happened in person face to face and 3% reported this occurring in the previous 4 weeks.
- Perceptions of more *recent* bullying (ie in the last 4 weeks) were highest amongst students with a long term illness or disability, although these reports were relatively low, 3%, compared with less than 1% of all 16-18 year olds.

²⁶ 'When we talk about bullying we mean when one or more people have intentionally caused you harm or picked on you regularly over a number of days, weeks, months or even a year or more. This could be physically hurting you, calling you names, being rude or using phone/social media against you.' Ofsted

Figure 14: % who perceive they have been 'bullied a lot' in this college in the last 4 weeks



- A third of students had discussed their experience with an adult staff member, and of those that had, 76% said it had helped. Girls were nearly twice as likely as boys to report this and were more likely to say it helped.
- Overall, half of students thought their college dealt with bullying well, although a third were unable to comment as they had no personal experience on which to base a judgement. Students with disabilities and LGBT students were no different in this respect.

Cyberbullying

- Whilst there is no evidence available to suggest that online bullying has greater impacts than offline bullying, or that technology use has increased the prevalence of bullying, there is considerable concern about the impact of cyberbullying on young people.
- Findings from the English What About Youth survey reported that 10% of boys and 19% of girls aged 15 years reported cyberbullying in the previous couple of months in 2014. Of these, 37% reported trolling, 22% being excluded from social groups, and 18% violent behaviour. This same study also found that cyberbullying, on its own, was relatively rare, with face-to-face bullying remaining more common amongst teenagers,²⁷.
- In our survey, a third of students who said they had been being bullied at their current college said they had been bullied on social media, with this being twice as common amongst females than males.
- Compared with other forms, students were less positive about their colleges' response to cyberbullying. 43% of students thought their college dealt with this well, whilst 7% thought this was poor. A much larger proportion, 37%, said they did not know, a similar response to the 2013/14 survey. There were few differences between colleges in this respect

Healthy relationships

- Around 70% of students of all ages could correctly identify characteristics of healthy and unhealthy relationships presented in this section of the survey, as well as signs of domestic abuse.

²⁷ Cyberbullying and adolescent well-being in England: a population-based cross-sectional study. *The Lancet Child & Adolescent Health*. Published online 12 July 2017 Przybylski and Bowes, (2017). <http://www.sciencedirect.com/science/article/pii/S2352464217300111>

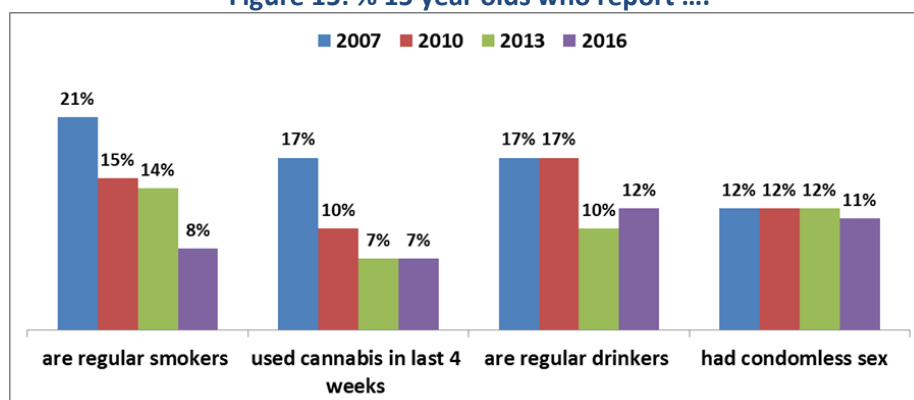
- Where some young people were less sure, was on the use of Facebook to 'check up' on someone (13%), or 'constant texts to find out what they are doing' (12%). Young men were less sure about this than young women.
- 60% students said they would know how to get help and advice for someone affected by this, whilst 1 in 10 said they would like more information.

2.7 Staying healthy

Smoking, drinking and drug use

- Our secondary school surveys show that self-reported levels of smoking, alcohol and drug use amongst 11-15 year olds in North Lincolnshire have all declined in line with national trends, and are at their lowest level since these surveys began, although the decline in drug use has slowed down compared with previous years.
- The percentage of 14-15 year olds who say they are sexually active has also fallen significantly since 2004, although condom use has not improved.

Figure 15: % 15 year olds who report



- Whilst behaviours that could be regarded as 'risky' are in decline, we also know that these behaviours tend to 'cluster' amongst the most vulnerable, with multiple risks leading to negative outcomes for some groups of young people²⁸.
- In our survey, young people who identified as LGBT were more likely to smoke, drink and to have unprotected sex. They were also more likely to report lower emotional wellbeing.

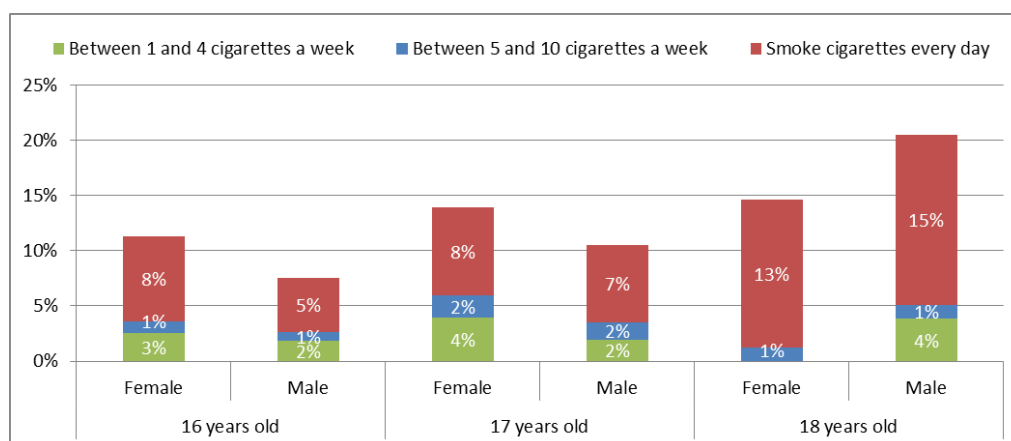
Smoking

- These downward trends are also apparent in the older age groups. In 2017, 12% of 16-18 year olds in our survey reported being regular smokers, rising from 9% of 16 year olds to 18% of 18 year olds. Even so, the fact that almost a fifth of 18 year olds are regular smokers is still a cause for concern, especially as all of the research evidence suggests that by this age, most regular smokers are addicted to tobacco and will find it hard to quit.

²⁸ 'Current trends in health, wellbeing, and risky behaviours amongst children and young people: a synthesis of recent evidence'. PSHE Association, 2015

- Regular smoking at this age was highest amongst young women, although this varied by year group, and by college. Rates were highest amongst those who had previously been eligible for free school meals and those who self identified as LGBT.
- Overall, 8% of 16-18 year olds said they smoked every day. The proportion of regular smokers varied by college from 6% to 16% and was highest amongst LGBT students at 20%.

Figure 16: % students who are regular smokers and how much they smoke



E-cigarettes

- The current national public health advice is that e-cigarettes are significantly less harmful to health than tobacco and are the best available and less harmful alternative for those heavy smokers who find it hard to quit. However, it is an offence to sell e-cigarettes to children in this country or to purchase them on behalf of under-18s.
- Nationally we know that vaping by young people is relatively low, with weekly use estimated to be about 2% of 15 year olds. Rates of use locally, were similar to national trends, although older teenagers in North Lincolnshire were slightly more likely to have tried e-cigs than their national peers.
- In our recent surveys, the proportion of young people who had tried e-cigarettes exceeded those who had tried tobacco, although few of those who had tried vaping were weekly, let alone, daily users.

Table 9: % pupils who have ever tried e-cigarettes or tobacco, 2016/17

	Yr 7	Yr 8	Yr 9	Yr 10	Yr 11	16-18 year olds
E-cigs	5%	12%	24%	34%	39%	40%
Cigarettes	3%	7%	14%	24%	33%	38%
Other tobacco products eg water pipe	-	3%	7%	9%	16%	14%

- Some health experts (for example in other countries) have expressed concerns that e-cigarettes may be a gateway to tobacco use, especially in young people, who are more

vulnerable to the addictive impact of nicotine. In this country the current national evidence suggests that regular e-cigarette use by young people is almost exclusively confined to those who smoke, and that youth smoking continues to fall²⁹.

- In our local survey, 89% of current vapers had tried tobacco, and almost half (43%) were also regular cigarette smokers. Overall, just 11% of young people had used e –cigarettes, before trying tobacco, a rate similar to national trends.³⁰
- When asked what led them to try vaping, the most common response was curiosity, or because they had been offered one by a friend. Few of them mentioned their use as a less harmful alternative to tobacco or as a way of helping them to give up smoking.
- Use of other tobacco products by this age group in North Lincolnshire was below national rates, and was highest amongst regular cigarette smokers.

Cannabis use

- While drug use amongst young people continues to fall, both locally and nationally, the rate of decline seen over the last decade now appears to be slowing.
- In 2017, 18% of 16-18 year olds in North Lincolnshire said they tried cannabis, 7% in the last month. These rates compare with 17% and 7% in 15 year olds in the 2016/17 survey. And are below the national average for 2014 of 24% and 12%, respectively.
- After cannabis, the most common drugs tried by young people were MDMA, cocaine and ecstasy. 3% said they had used drugs one of these in the previous 4 weeks, a figure similar to national rates.
- In contrast, the number of young people who say they have been offered drugs remains unchanged, with a third saying they had been offered drugs in the past. Exposure to drugs was consistent across all areas of North Lincolnshire and there were no differences in exposure by gender, disability or free school meals status.
- 60% of 16- 18 year olds, said they knew where to get help/advice about drugs and how to stop if needed.

Alcohol

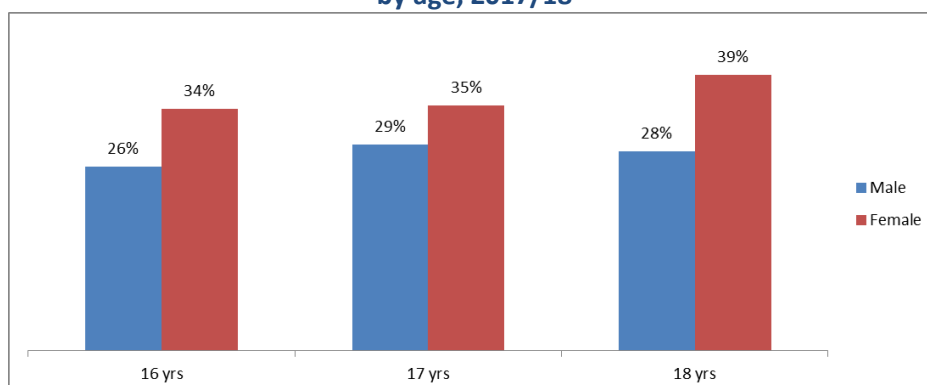
- Although most young people this age say they have tried alcohol, (70% of 16-18 year olds in our survey said they had had a whole alcoholic drink to themselves), far fewer report drinking as much as weekly, with 15% of young people saying they drink alcohol every week. Whilst this is a higher figure than reported nationally, local data suggests that regular alcohol use amongst young people is falling.
- However, drinking to excess amongst this age group in North Lincolnshire has remained unchanged, with just under a third, 31%, of 16-18 year olds reporting being drunk at least once in the previous 4 weeks, compared with 24% nationally. Young women continue to outnumber young males in this respect, with rates of excess drinking rising to 39% amongst 18 year old girls.

²⁹ 'Smoking Drinking, Drug Use amongst young people in England, 2014', NHS Digital 2016

³⁰ As above

- In other words, whilst fewer young people are regularly drinking alcohol at this age, of those that are, they are just as likely to drink to excess.

Figure 17: % Students who say they have been drunk at least once in the last 4 weeks by age, 2017/18



2.8 Sexual identity and sexual health

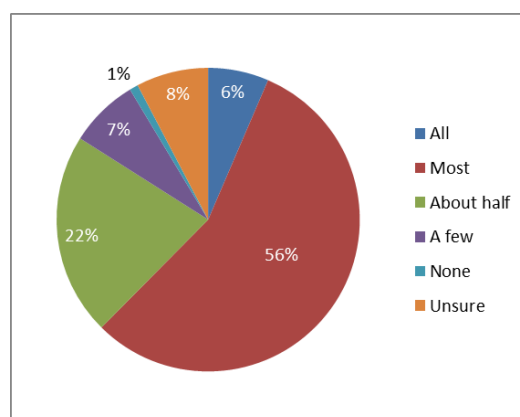
- The sexual health and behaviour of young people is a priority topic in adolescent public health, with implications for mental and physical wellbeing, as well as education and service provision.
- According to national research about 1.7% of the UK population identify themselves as lesbian, gay or bisexual, with this rising to 3.3% amongst 16-24 year olds, although most researchers agree that this is likely to be a significant underestimate. The national campaign group, Stonewall, for example, suggests an estimate of 6% of the UK adult population, with higher figures in some of the larger urban areas in the south of England.³¹
- Applying this 6% figure to the 16-18 student population suggests that there will be at least two lesbian, gay or bi sexual students per tutor group and at least one trans person per year group, with many more still questioning their sexual identity at this age.
- In our survey, a much higher proportion, just over 10%, identified as gay, lesbian, trans or bisexual, with a further 3% preferring not to disclose their identify. Of these, the largest group, 7%, identified as bisexual, with this being far more common amongst girls, (10%), compared with boys, (3%). Equal numbers of both genders, (3%) identified as either gay or lesbian.

³¹ 'An Introduction to supporting LGBT young people. A guide for schools,' Stonewall, 2015

Table 10: Which of the following best describes you....(% 16-18 year olds)

	Female	Male	Total
Heterosexual or Straight	66%	67%	66%
LGBT	14%	6%	10%
Prefer not to say	3%	3%	3%
Other	2%	1%	1%
Missing Data	15%	23%	19%
Grand Total	100%	100%	100%

- Whilst most young people this age, including those who identify as LGBT, are not sexually active, most said they were sure of their sexual identity before the end of secondary school, with the majority saying they were sure by the time they reached puberty. This finding is in line with national research on this issue.
- According to the National Survey of Sexual Attitudes and Lifestyle (Natsal)³² the average age of sexual debut has not changed significantly in a decade, and remains at between 16-19 years of age. In our survey, 39% young people this age said they had had sex, compared with 42% in 2013.
- In spite of this, young people who are not yet sexually active continue to perceive themselves to be in the minority, with 84% of students believing that more than half their age group are already having sex.

Figure 18:**16-18 year olds perceptions of how many young people their age are sexually active, 2017/18**

- The highest rates of sexual experience were reported by LGBT young people. More than half, 61% of this group said they had had sex, this being highest amongst lesbian and bi sexual young women, 70%. In contrast, 41% of gay men this age said they had had sex.
- Young people have repeatedly identified schools and colleges as their preferred source of information about sex and relationships when growing up, in both local and national surveys, followed by parents. And there is a significant body of evidence to show that

³² The National Survey of Sexual Attitudes and Lifestyles is a population based sample of 15,000 men and women resident in Britain and is the largest survey of its kind in the world. The surveys began in 1992 and take place every 10 years.

good quality sex and relationship education in schools and colleges can have a significant impact on the future sexual health and wellbeing of young people. Lack of quality sex and relationships education, (SRE), also leaves pupils vulnerable to abuse and exploitation (Ofsted, 2013).

- Students were asked to look back at the sex and relationships education, (SRE), they had received in school and make a judgment about how useful they had found this. Overall, nearly three quarters (73%) remembered having SRE lessons, with more than half (57%) saying they had found this useful. Rates were lower amongst those who reported having some sexual experience, 53% compared with 62% of the rest. There was little difference between the sexes in this respect.
- LGBT students were least likely to say they had found these lessons useful, 46%, with this declining to 39% amongst those who were already sexually active.
- Overall, 12% of 16-18 year olds said they would like more information on sexual health, with this rising to 22% amongst LGBT students.

Contraception

- Research has shown that young people receiving good quality sex and relationships education at school are more likely to use condoms and other forms of contraception when they first have sex.
- Use of contraception is important both for preventing conception and also for protecting against sexually transmitted infections (STIs). Nationally, we know that the majority of young people use some form of contraception during heterosexual sexual intercourse. However, use of contraception amongst sexually active under 18s is still not as high as it is amongst 20-24 year olds.
- In our survey, 84% of students who claimed to be sexually active said they or their partner had used some form of contraception the last time they had sex; the most common method being a condom. Overall, 14% said they had not used anything, a similar result to 2013/14, and in line with national findings.

Table 11: When you last had sex, what forms of contraception did you/your partner use?
(baseline - 39% of all 16-18 year olds who claimed to be sexually active)

Condom	Condom & other contraception	Implant/ LARC	Injection	Pill	Nothing
27%	15%	16%	2%	25%	14%

- Only 42% had used some form of barrier method either in combination with other contraceptives, or alone, the last time they had sex, which means that at least half of those young people who are sexually active are potentially exposed to and at risk of contracting a STI.

- This is particularly important as all of the national and local evidence shows that condom use declines with age, with under 25s remaining the highest risk group for STIs, accounting for more than 60% of all cases of chlamydia.

Sexual health services

- Whilst most young people this age are not sexually active, it is important that they know in advance where to go should they need advice and help, so that they can access this in a timely way.
- Overall, just over 1 in 5 (21%) of 16-18 year olds said they had used a sexual health service previously, rising to 37% of those who were sexually active. Of these the majority had either used the walk in service at the Ironstone Centre or had visited their GP. Boys were more likely to use college or school based clinics. Reports of service use were only marginally higher amongst those who identified as LGBT in spite of higher self reports of sexual activity.
 - 41% Ironstone Centre
 - 31% at their GP
 - 25% a school based clinic
 - 12% a college based clinic

2.9 Students' views of PSHE

- In a recent review of the National Curriculum, the government made it clear that all state schools 'should make provision for personal, social, health and economic education (PSHE), drawing on good practice'. (*National Curriculum in England*, DfE, 2013) and that 'sex and relationship education (SRE) is an important part of PSHE education'.
- This is clearly supported by young people in North Lincolnshire. At least a fifth of this age group said they like more information on sexual health, healthy relationships and emotional wellbeing, with these topics scoring highest for students in each of the college sites.

Table 12: Which topics would you like more information on?...

	John Leggott College	North Lindsey College	Other	Overall
Emotional Wellbeing	25%	15%	20%	20%
Healthy Relationships	13%	12%	9%	12%
Sexual Health	13%	10%	9%	12%
Domestic/Partner Abuse	10%	9%	7%	10%
Drugs	6%	8%	5%	7%
Alcohol	5%	8%	6%	6%
Bullying	4%	7%	5%	5%
Online Safety	5%	6%	5%	5%
Smoking	4%	7%	4%	5%

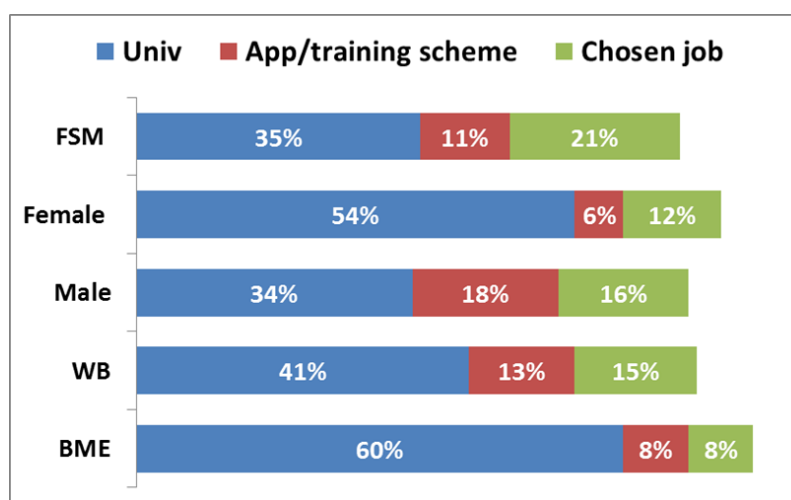
- LGBT students were most likely to say they would welcome more information on these key topics, with almost half saying they would welcome more information on emotional wellbeing.

Table 13: Which topics would you like more information on by sexual identity...

	LGBT	Other Students	Overall
Emotional Wellbeing	45%	17%	20%
Sexual Health	29%	10%	12%
Healthy Relationships	22%	11%	12%
Partner Abuse	20%	9%	10%

2.10 Aspirations for the future

- When asked what they thought they hoped to be doing when they had finished their current course of study at college, just under half of this age group, 44%, said they hoped to continue their studies at University or college. This is a lower proportion than reported by secondary school pupils.
- As in previous years, girls were more likely to aspire to higher education than boys. Girls and boys from BME communities are more aspirational than their white British peers, with little difference between genders in this respect. In contrast, young men were far more likely to consider an apprenticeship once they finished college, 18%, compared with just 6% young women. Young people eligible for free school meals were more likely to say they would be in employment.

Figure 19: What do you hope to be doing when you finish college? 2017/18

- 12% said they were not sure yet what they wanted to do.

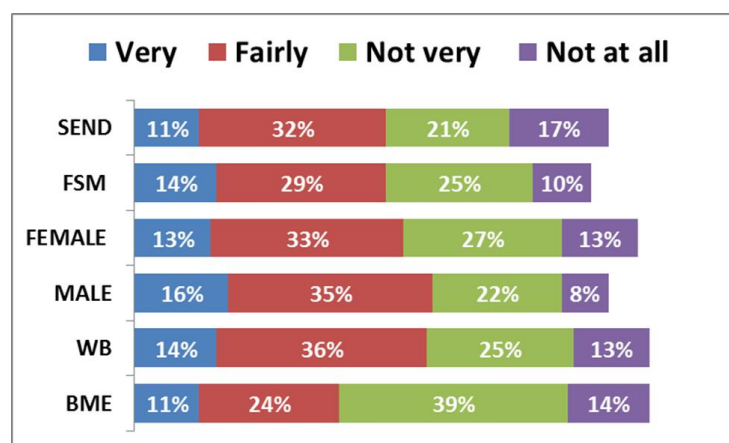
Table 14: What do you hope to be doing at 18?

	University/college	Apprenticeship	Employment	Unsure/MD
Boys Age 16-18 years	34%	18%	16%	32%
Girls Age 16-18 years	54%	6%	12%	28%
FSM status Age 16-18 years	35%	11%	21%	33%
Non FSM status Age 16-18 years	46%	12%	12%	30%
BME Age 16-18 years	60%	8%	8%	24%
White British Age 16-18 years	41%	13%	15%	31%
Boys Yrs 9–11	41%	14%	22%	23%
Girls Yrs 9-11	63%	6%	12%	19%
FSM status Yrs 9-11	42%	9%	21%	28%
Non FSM status Yrs 9-11	54%	11%	16%	19%
BME Yrs 9-11	64%	7%	9%	20%
White Yrs 9-11	50%	11%	18%	21%

2.11 Advice and guidance

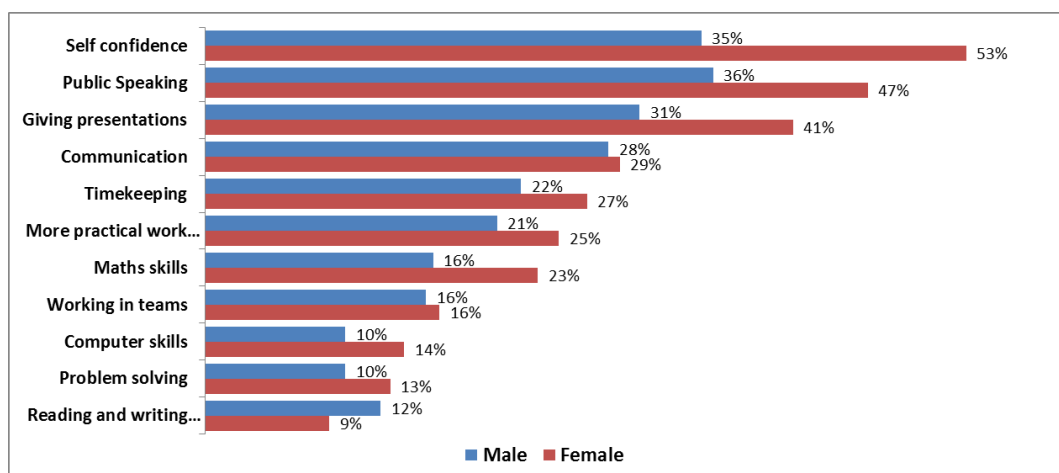
- Most 16-18 year olds said they had received some information on careers and advice in their last school, although fewer than half 46% felt this was good enough (a much lower figure than the 66% reported by Year 11s in the 2016/17 survey). 27% felt it had been unhelpful and 15% said they had not had any.
- Overall, 43% said they would welcome more advice and guidance about careers. There were significant differences between the two larger colleges in this respect, with students from low income families being more likely to say they needed more help.
- Reassuringly, 60% said they were confident they would get the right advice at their current college, 24% were not confident/unsure. A similar proportion, 60%, were confident they would get the right advice and support from family.
- Low income and SEND students were least confident in their family as source of careers advice and support.
- About half of students this age said they felt at least a little prepared for employment, whilst 10% said they felt 'very unprepared'. White males were more likely to say they felt prepared for work, BME and SEND less so.

Figure 20: How prepared do you feel for employment?



- When asked what they would like more help with, the most commonly mentioned topics involved helping them develop some of the 'softer' life and social skills, such as self-confidence, public speaking and communication skills, as well as opportunities to present to others. Young women were slightly more likely than young men to say they would welcome more practical hands on work experience.
- Maths was mentioned more often by females with both literacy and numeracy skills mentioned more often by students with SEND.

Figure 21: Would welcome more help with ...



2.12 Survey feedback

- More than 90% of each year group said they found the survey 'easy' to complete, and a third said they would like to see a copy of the results.

3. Methodology

3.1 Method

This was the second survey to be completed electronically via a web based survey tool across all North Lincolnshire colleges and sixth forms. Colleges organised this themselves, although they each used the same anonymous self-completion questionnaire, which was developed in consultation with local agencies. Colleges were asked to complete the survey within a specific timeframe, so that the age cohorts were consistent across colleges and could be compared with previous surveys. Colleges were also asked to involve a representative sample of young people in their surveys and where possible to include a cross section of students, with a range of abilities.

3.2 Timescales

As in each previous survey, the plan was to gather data in the second half of the first term of the academic year. That is, between early November and mid-December, 2017. Most colleges were able to complete this in good time. One college began their data collection in January 2018. This slight delay is unlikely to have any impact on the comparability of results.

3.3 Sample size

Each college was invited to sample as many students of each year group to participate in the survey to achieve a representative sample of students in each year group and from a range of abilities. The overall sample achieved of 16-18 year olds was 1799 or 44% of the college population in North Lincolnshire. A further 106 college students aged 19-20 years also took part.

At the end of the survey period, John Leggott college has received responses from 66% of their 16-18 students, compared with 34% of those attending North Lindsey college. This meant that JLC students overall made up two thirds of our respondents.

In order to ensure that the North Lincolnshire results were representative of the 16-18 age group a smaller stratified sample was extracted from the survey results, so that each college was equally represented in the sample. This weighted sample of 16-18 year olds totalled 1208 respondents.

3.4 National and Local Comparisons

Where possible, the results are compared with the most recently available national data (2016) and with the results of previous local surveys (the 2013/14 College Survey and the 2016 Adolescent Lifestyle Survey).

3.5 Missing data

For the most part, the questionnaire was completed well. However, towards the end of the survey there was obvious evidence of respondent fatigue, with missing data rising above in some places. The results presented in this report include missing data.