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Item No: 15

Meeting Date: Wednesday 23rd June 2021

Glasgow City Integration Joint Board

Report By: Gary Dover, Assistant Chief Officer Primary Care and Early Intervention

Contact: Nicola Scott, Health Improvement Senior with Fiona Moss, Head of Health Improvement and Equalities

Phone: 0141 211 0317

Glasgow City Schools Health and Wellbeing Survey 2019/20

Purpose of Report:	To provide an overview of key findings from the Glasgow City Schools Health and Wellbeing Survey 2019/20, prior to publication of the full report.
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Background/Engagement:	NHSGGC and Glasgow City Education Services conducted the fourth Health and Wellbeing survey in Glasgow City secondary schools between December 2019 and March 2020. For the first time, the survey was administered electronically. Due to technical issues and the closure of schools for the COVID-19 pandemic, levels of participation varied across the participating schools. The sample size of complete surveys was 7,543 S1 to S4 pupils, around 75% of the previous survey response.
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Recommendations:	The Integration Joint Board is asked to: a) consider the outcomes of the Glasgow City Schools Health and Wellbeing Survey 2019/20 report; and b) invite further updates on any of the key themes identified.
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Relevance to Integration Joint Board Strategic Plan:

This work relates to the Integration Joint Board's strategic plan priority around prevention, early intervention and harm reduction.

Implications for Health and Social Care Partnership:

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Reference to National Health & Wellbeing Outcomes:	1. People are able to look after their own health and wellbeing and live for longer 5. Health and social care services contribute to reducing health inequalities 9. Resources are used effectively and efficiently in the provision of health and social care services.
Personnel:	None
Carers:	Caring responsibilities are discussed in the Vulnerability chapter of the City Report. The findings will be of relevance to considering the needs of young carers across the HSCP.
Provider Organisations:	The survey is completed through commission by GGC NHS Board. The survey will be a data source and planning support for multiple organisations in Glasgow city.
Equalities:	The survey contained questions on demographics including age, gender, ethnicity and deprivation. The City Report contains an Equalities chapter to support our understanding and responses.
Fairer Scotland Compliance:	The survey adds to the evidence base on the health and wellbeing needs of young people in Glasgow City and provides further insight into inequalities which can support planning for mitigation.
Financial:	None
Legal:	None
Economic Impact:	The survey data will support the effective targeting of resources to improve health for young people
Sustainability:	Survey is commissioned every 3 years where funding can be identified.
Sustainable Procurement and Article 19:	The survey was commissioned in full compliance with NHS procurement Standing Financial Instructions
Risk Implications:	None
Implications for Glasgow City Council:	The data will influence Children's Services Planning, Glasgow City Education Directorate objectives as well as individual school establishment improvement plans.

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Implications for NHS Greater Glasgow & Clyde:	The survey data will influence Health Improvement action plans, Primary Care Services, Youth Health Services, Alcohol & Drug Partnership, Sexual Health, Acute Services, and the Community Mental Health and Wellbeing Supports and Services Framework.
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Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input checked="" type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

1. Background

- 1.1. The Glasgow City Schools Health and Wellbeing Survey was first commissioned in 2006/7 by NHS Greater Glasgow and Clyde in order to establish a baseline of health and wellbeing data that could be used to determine priorities and measure progress. Further follow-up surveys were commissioned by Glasgow City HSCP (previously the Community Health Partnership) in 2010/11, 2014/15 and most recently 2019/20. This survey report serves as a key source of information on youth health in Glasgow City, providing key data and tracking over time which is highly valued by education, public health, children's services planners and wider partners.
- 1.2. For the first time, the questionnaire was administered digitally using Smart Survey™. Whilst based on previous waves of the survey, a number of new questions were introduced to reflect emerging trends and also to support the Scottish Government Education Directorate in the development of a national school census. In April 2019, the questionnaire was piloted in two secondary schools and cognitive testing took place for some specific questions. In November 2019, Health Improvement staff began to work closely with each school to offer support with the survey implementation, including providing information sheets for parents/carers and pupils.
- 1.3. The 2019/20 survey intended to include all pupils in S1 to S6, approximately 26,000 young people, by utilising improved access to digital devices as part of the rollout of Apple devices across Glasgow City. The survey was designed to be completed wholly online this time. This would have exceeded the previous surveys where approximately 10,000 pupils participated from only S1-4.
- 1.4. Unfortunately, the timescale for the full Apple rollout planned by education slipped. This meant access to IT suites in schools was required, which was challenging for many schools to accommodate. The survey also took longer to complete because of trialling national questions and the COVID19 closure of schools happened while data collection was live. Consequently, fewer completed surveys were received. Participation varied across the secondary schools and between year groups because of these issues. Six schools did not participate. Data from S5 and S6 pupils were removed as there were not

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enough for meaningful analysis. The number of ‘complete’ surveys was 7,543 out of a potential 19,958 S1 to S4 pupils, representing a survey response rate of 37.8%. This response total has been reviewed to ensure there is sufficient coverage across the survey fields. Although more responses were anticipated it remains one of the largest cohorts for a survey of its type and has yielded a rich dataset of insight into the lives of young people in Glasgow City.

- 1.5. The survey aimed to gather current demographic information on the pupil population, report trend data on key areas of health, and gain an understanding of individual pupil perceptions of their health and wellbeing. Examples of topics included were screen time, mental health and wellbeing, alcohol and drugs, sexual health, health behaviours, financial inclusion, and equalities. Scottish Index of Multiple Deprivation (SIMD) data were used for the data analysis which compared findings for pupils at the ‘most deprived’ and ‘least deprived’ schools. Free School Meal Entitlement had previously been used as a proxy for deprivation previously.
- 1.6. The dataset was weighted to ensure that the findings proportionately represented the known profile of all S1-S4 pupils across all Glasgow City Secondary Schools in terms of year group, locality and deprivation group. Weighting couldn’t be applied at a school level. Analysis of the data established whether there were significant differences between groups for four key independent variables, using the 99.9% confidence level. These variables were: gender, stage (lower school, middle school), deprivation, and locality. This confidence level enables us to report differences that are most likely to be real.

2. Demographic picture

This is a snapshot of significant findings from the Glasgow City Schools Health and Wellbeing Survey 2019/20.

Age in years as a percentage		Stage as a percentage	
11	2%	1 st Year	26.1%
12	25%	2 nd Year	25.3%
13	23%	3 rd Year	24.5%
14	26%	4 th Year	24.1%
15	23%	Because year group was one of the factors used in the weighting calculation applied to the data, the pupil profile by year group matches that of the S1-S4 school population in Glasgow schools.	
16	1%		
Gender/Transgender		Sexual Identity (of those who chose to say)	
Male	46%	Heterosexual	91%
Female	53%	Bisexual	6%
Prefer not to say	1%	Gay/lesbian	2%
Other term	1%	Other	1%
When asked whether they consider themselves to be a trans person, 2%		In total, 8% of pupils had a lesbian, gay, bisexual or ‘other’ sexual identity. Responses indicate that a total of 9% of	

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said they prefer not to say, 97% said no and 1% said yes.		pupils were LGBT (non-heterosexual sexual identity and/or identify as a trans person).		
Ethnic Group	% Glasgow	%NW	% NE	% S
White Scottish/British	70.6%	63.2%	79.7%	68.5%
Other White	5.4%	6.3%	5.2%	5.0%
Any Mixed	2.3%	3.7%	1.8%	1.8%
Any Asian	11.5%	12.1%	3.2%	17.3%
Any Chinese	1.1%	1.6%	1.1%	0.6%
Any African	5.7%	7.5%	6.7%	3.9%
Any Black	1.1%	1.6%	1.0%	0.9%
Other	2.3%	3.9%	1.3%	1.9%
TOTAL	100.0%	100.0%	100.0%	100.0%
Family Composition		Least deprived schools	Most deprived schools	
2 parents	63%	68%	56%	
1 parent	28%	26%	32%	
Repartnered Family	6%	4%	7%	
Other	3%	2%	5%	

- 2.1. The number of Black and Minority Ethnic (BAME) pupils differed depending on the area the school served. In the schools in the least deprived areas, 29.6% identify as BAME with this reducing to 15.3% in schools in the most deprived area.
- 2.2. 15% of pupils stated that a language other than English/Gaelic is the main language spoken at home. This increased to 19% in North West locality, with 19% of pupils indicating English was not the main language at home.
- 2.3. Family composition changed from 2014/15 to 2019/20 with a rise in the proportion of pupils who lived with both parents – from 58% to 63%. This finding is similar to national findings from the Health Behaviour in School Aged Children (HBSC) Survey 2018 which showed 65% of 11 and 15 year olds lived with both parents.
- 2.4. The proportion of pupils who were young carers has been difficult to establish from the survey data due to question wording and routing. No definition was given for ‘care for’, therefore pupils may have interpreted this in how they felt about the person (i.e. who they ‘care about’) rather than whether they were providing support or practical care for the person. They may have included duties such as babysitting younger siblings, which would not fall under the usual definition of caring. Indeed, 33% of pupils said they ever looked after or cared for someone in their household. This compares to 14% of pupils in the 2014/15 survey, which asked about caring responsibilities of pupils who said they lived with someone with a disability, long-term illness, drugs/alcohol problem or mental health problem. No difference has been reported in terms of deprivation.

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3. Key Behaviours

- 3.1. Self-perceived health has declined with 59% of pupils reporting a positive perception of their general health, a decrease from 66% in 2014/15. This was generally more positive for boys than girls with 68% of boys giving a positive rating of their health compared to 53% of girls.
- 3.2. Sleep is vital to young people's health, wellbeing, learning and development. While recommendations highlight that teenagers should aim for 9 or more hours of sleep, only 24% of pupils reported 9 or more hours of sleep, a decrease from 33% in 2014/15. This continues the downward trend observed since 2010/11.
- 3.3. Use of screens is a key aspect of modern life and a common sedentary activity linked with many negative health outcomes including weight gain. In 2019/20, 32% of pupils reported spending six hours or more on screen based activities during leisure time on school days. This increased to 49% on Saturdays and 46% on Sundays. There was no significant change from 2014/15 when 34% of pupils spent more than eight hours on screen based activities on school days which increased to 48% at the weekend. The HBSC Survey 2018 included several different screen-based questions and no accumulated total as is in the Glasgow City Schools Health and Wellbeing Survey. The report details responses for weekdays only. 68% of young people reported watching television for two or more hours a day. Boys were more likely than girls to report playing computer or video games for at least two hours a day (71% boys; 42% girls). Girls were more likely than boys to report using a computer for at least two hours a day for purposes other than playing games, for example chatting online, browsing the internet, emailing and homework (66% girls; 63% boys). Time spent playing computer games and on computers for purposes other than playing games has increased over time since 2006.
- 3.4. Positively, nearly all pupils (98.5%) said they had access to the internet at home or on a phone or another device. This is higher than the national figure for all households across Scotland, which is 88% (from the Scottish Household Survey 2019). In 2014/15 99% of pupils said they had access to the internet at home or on the phone, a similar figure to 2019/20.
- 3.5. Trends for smoking across the last four surveys are very encouraging, demonstrating a sharp decrease in smoking rates among pupils. In 2019/20, 3.1% of pupils were current smokers, a decrease from 4.5% in 2014/15. Detailed analysis of smokers was difficult due to the small number, however 45% of smokers said that managing stress/anxiety was a reason for smoking. For the first time, the 2019/20 survey does not show a majority of pupils being exposed to second-hand smoke: 48% of pupils reported being exposed to smoke indoors, a decrease from 65% in 2014/15.
- 3.6. Encouragingly, the trends for drug use showed a sharp decrease in levels between 2006/7 and 2010/11, and a constant decline since. Between 2014/15 and 2019/20, the proportion of S1 to S4 pupils in Glasgow who said they had ever taken drugs fell from 7% to 5%. This drop was statistically significant in

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Glasgow as a whole and in the North West and South, but not in the North East. 9% of pupils in S3/4 said they had ever taken drugs, compared to 2% of pupils in S1/2. These are slightly lower than the 2018 Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) which reported that 4% of 13 year olds (S2 pupils) and 12% of 15 year olds (S4 pupils) in Scotland had used drugs in the previous month.

- 3.7. The 2019/20 survey found a significant proportion of pupils in Glasgow started their school day on an empty stomach. 32% of pupils never ate breakfast on school days, which was much lower than the national data from the HBSC Survey 2018 (62%). 9% of pupils said that they had skipped lunch during their previous school lunchtime, an increase from 5% in 2014/15. More positively, there was a significant rise in the proportion of pupils who consumed five or more portions of fruit/vegetables per day (41% in 2019/20; 37% in 2014/15).
- 3.8. Only 12% of pupils met the national recommendation of 60 minutes or more of moderate physical activity each day. This is slightly lower than national data from the HBSC Survey 2018 which found that 17% of 11-15 year olds met the target. In Glasgow, boys were more likely than girls to meet the target for physical activity (15% boys; 9% girls). This gender difference is also clear in the HBSC Survey. When asked about how pupils travel to school, 45% reported using active travel methods (walking/cycling/skating), a decrease from 49% in 2014/15. This is consistent with data from the HBSC Survey 2018 which showed that 46% of 11-15 year olds across Scotland use active travel methods. Pupils in the most deprived schools were more likely than those in the least deprived schools to use active travel methods.

4. Mental Health and Well Being

- 4.1. Increasing mental health concerns, especially amongst girls, have been widely reported. The 2019/20 survey incorporated the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS), a validated tool for use for people aged 13 or over to measure mental wellbeing. 30% of pupils aged 13 or over had a score indicating probable depression. This was more likely for girls than boys (39% girls; 20% boys). LGBT pupils were twice as likely as others to have scores indicating depression (54% LGBT; 27% others). Compared to those in the least deprived schools, pupils in the most deprived schools were more likely to have scored indicating probable depression (33% most deprived; 26% least deprived). African and Asian pupils were less likely than pupils from other ethnic groups to have WEMWBS scores which indicate probable depression.
- 4.2. The survey also included the Strengths and Difficulties Questionnaire (SDQ), which is widely used across the education setting in Glasgow. 34% of pupils had a score indicating a high level of 'total difficulties', an increase from 25% in 2014/15. Girls were more likely than boys to have a high 'total difficulties' score (39% girls; 27% boys). Middle school pupils were more likely than lower school pupils to have a high 'total difficulties' score (36% compared to 31%). White Scottish/British pupils were more likely than those from other ethnic backgrounds to have an SDQ score indicating a high level of 'total difficulties'.

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65% of LGBT pupils had a high score for 'total difficulties' compared to 30% of other pupils.

- 4.3. Young people who lived with family members with an illness, disability, drug/alcohol problem or mental health problem were more likely to exhibit indicators of poor mental health and wellbeing compared to those who do not. This included a WEMWBS score indicating probable depression (41% compared to 26%) and a high 'total difficulties' (SDQ) (48% compared to 28%).
- 4.4. 94% of pupils had at least one person they found it easy to talk to about things that bothered them. This was a slight decrease from 2014/15 when 97% of pupils reported they had someone they found easy to talk to. The types of person with whom pupils were most likely to talk easily were friends and mum/female carer, which replicates responses in 2014/15.

5. Money

- 5.1. Financial inclusion and poverty related questions in the 2019/20 survey differed slightly from the 2014/15 survey and included savings, family life (family meal time), food insecurity and views of their local area.
- 5.2. Similarly to 2014/15, three in four pupils (76%) said they had savings. Those in the least deprived schools were more likely than those in the most deprived schools to have savings (81% least deprived; 71% most deprived).
- 5.3. In terms of food insecurity, 11% of pupils reported that they or their family had used a foodbank. Those who had used a foodbank were more likely to have poorer mental health and wellbeing indicators on a number of measures including WEMWBS scores indicating depression and SDQ scores indicating a high level of difficulties.

6. Summary

- 6.1. A summary of key findings and trends is provided in Appendix 1. The data is available for use by stakeholders and further analysis can be undertaken. A city report and locality reports are pending and will be shared widely.
- 6.2. Future rounds of this survey in educational establishments will benefit from the survey's digital platform which can be easily remobilised. This alongside the completed Apple roll out across all secondary schools will ensure all pupils have access to a digital device, minimising some of the resource challenges encountered with the 2019/20 survey completion.

7. Recommendations

- 7.1. The Integration Joint Board is asked to:
 - a) consider the outcomes of the Glasgow City Schools Health and Wellbeing Survey 2019/20 report and
 - b) invite further updates on any of the key themes identified.

	2014/15	2019/20	% change
Gender	Male: 49% Girls: 51%	Male: 46% Female: 53% Other: 1% Prefer not to say: 1%	
Sexual Identity	Heterosexual: 91% Bisexual: 3% Gay/lesbian: 2% Unsure: 4%	Heterosexual: 92% Bisexual: 6% Gay/lesbian: 2% LGBT: 9%	
Ethnicity (White Scottish or White British)	80%	71%	-9
Family composition (live with both parents)	58%	63%	+5
Young carers	14%	33%*	+19
Positive self-perceived health	66%	59%	-7
Sleep (9 or more hours)	33%	24%	-9
Screen time (6 or more hours on school day)	Different question asked	32%	n/a
Internet access (at home, phone or another device)	99%	98.5%	-0.5
Current smoker	4.5%	3.1%	-1.4
Second hand smoke exposure	65%	48%	-17
Ever taken drugs	7%	5%	-2
Consumed five or more portions of fruit/vegetables	37%	41%	+4
Active travel for school journey	49%	45%	-4
Probable depression (WEMWBS)	n/a	30% (of age 13 or over)	n/a
High 'total difficulties' (SDQ)	25%	34%	+9
At least one person to talk to about worries	97%	94%	-3
Savings	73% (S1-S6)	76%	+3
Use of foodbanks	n/a	11%	n/a

*Question wording and routing may have affected interpretation of this question.