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HBSC is the Health Behaviour in School-Aged Children: WHO Collaborative Cross-National Study

Perceptions of school and the health of schoolchildren

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Introduction

Experiences and exposures that happen early on in life can have long-term implications for health (Morgan, 2004). School is an important context for young people's health due to the amount of time they spend within the school setting. Experiences at school are known to have a strong influence on young people's social and emotional health and development (Weare, 2000; Wells, 2000), as well as their academic achievement (Moon & Callaghan, 1999). Young people who enjoy school are more likely to feel good about themselves and report high levels of well-being (Samdal et al, 2004). Conversely, adolescents who report negative views of school report poorer health outcomes (Anderman, 1999; Torsheim and Wold, 2001) and higher levels of risk behaviour such as smoking (Samdal et al, 2000). School can therefore be seen as a resource or a risk for young people's health.

This briefing paper describes the health and well-being of young people in Scotland in relation to their school experience. It presents research findings for 11, 13 and 15-year-olds from the 2002 Health Behaviour in School-Aged Children: WHO Collaborative Cross-National Study (HBSC) and compares findings from Europe and North America. The survey methodology is described in the Technical Appendix.

School systems and the social and academic expectations and pressures presented by school vary between countries. The HBSC study gives a unique opportunity to examine the impact of perceptions of school on young people's health across Europe and North America. This *thirteenth* briefing paper in the series examines associations between school experience and aspects of adolescent mental health, physical health and well-being. It features life satisfaction, confidence, happiness, and smoking and drinking behaviour.

Perceptions of school in Scotland compared with other European and North American countries

Young people's perceptions of school were assessed using four key indicators: liking school, self-rated academic achievement relative to classmates, classmate support and school pressure. Details of the questions are provided in the Technical Appendix.

Summary of main findings

- ~ Young people with positive perceptions of school are more likely to report being happy and confident as well as having higher overall life satisfaction
- ~ Young people with positive perceptions of school are less likely to smoke, drink regularly and to have been drunk at least twice
- ~ A quarter of pupils in Scotland report that they like school a lot. This is similar to the average proportion across all 35 European and North American countries included in the HBSC study
- ~ Scottish pupils feel less pressurised by schoolwork than their English and Welsh counterparts
- ~ Pupils in Scotland are more likely to report that they find their classmates kind and helpful than in Wales and England

Liking school

On average 23% of young people across all HBSC countries reported liking school 'a lot' but there was considerable variation, ranging from 8% in Finland to 67% in Macedonia. Figure 1.1 shows findings for Scotland, England and Wales and selected other countries in the range. The proportion of Scottish young people liking school a lot (25%) was similar to that in Wales and in the HBSC countries as a whole, while the proportion in England was significantly lower (19%). In all countries, girls were more likely than boys to report that they like school a lot and liking school declined with increasing age; for example in Scotland 33% of 11-year olds, 24% of 13 year olds and 14% of 15-year olds reported liking school 'a lot'.

Perceived academic performance

Figure 1.2 shows a range of country responses on how young people rated their school performance relative to their classmates. On average across all HBSC countries around 60% of young people rated their academic performance highly, ranging from 42% in the Ukraine to 90% in Macedonia. In Scotland, as in most HBSC countries, girls were more likely to report high academic performance relative to

Figure 1.1: Young people liking school a lot

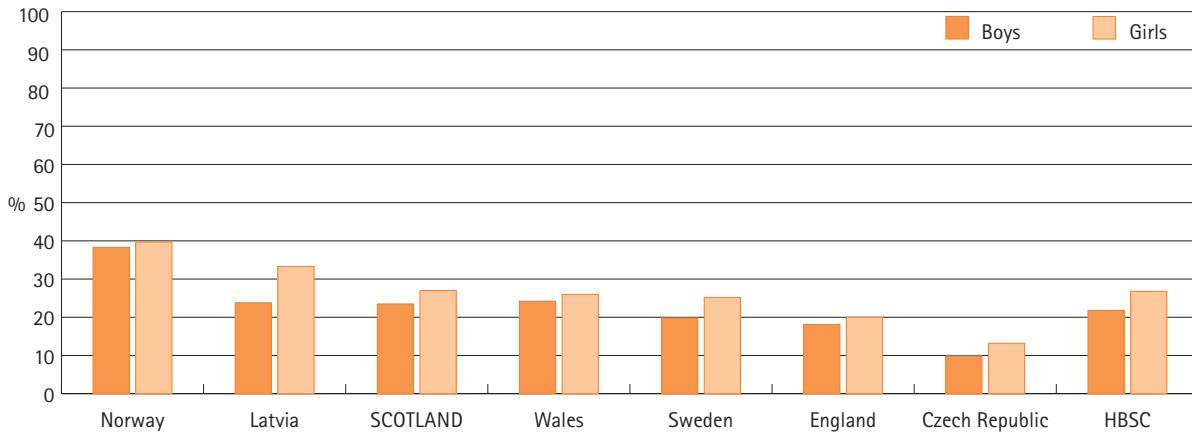
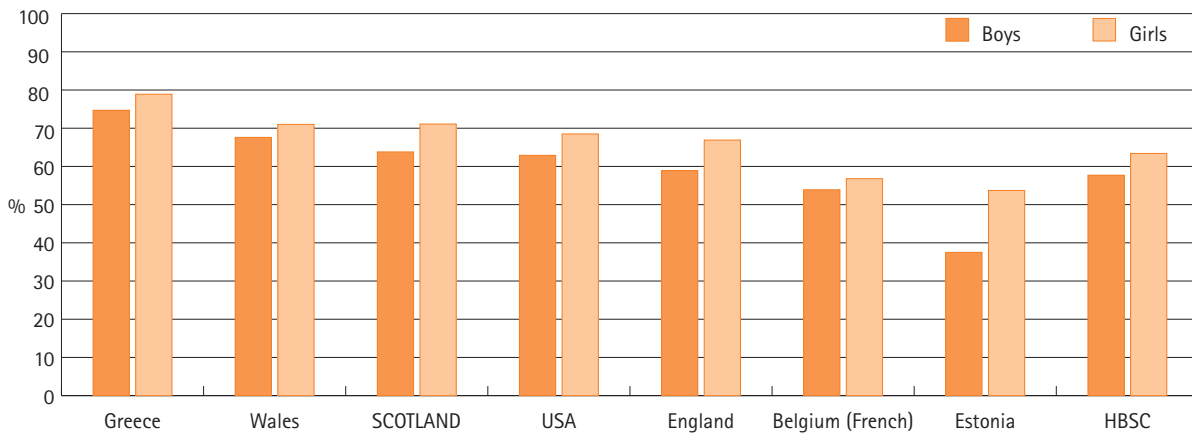


Figure 1.2: Young people with good/very good school performance



their classmates than boys; 64% of boys and 71% of girls rated their school performance highly. In all countries older adolescents were less likely to rate their academic performance highly.

Peer support

Young people were asked whether most of their classmates were kind and helpful. On average across all HBSC countries 64% of young people agreed with this, ranging from 43% in the Czech Republic to 81% in Macedonia. Scottish and Welsh pupils (70% and 65% respectively) were more likely to describe their classmates as kind and helpful than young people in England (44%) (Figure 1.3). Across most countries a higher proportion of 11-year-olds reported well of their classmates compared with 13- and 15-year-olds. Gender differences were not generally very pronounced.

School pressure

Young people were asked how pressured they felt by the schoolwork they have to do. On average across the HBSC countries 34% of young people reported feeling pressured some/a lot by schoolwork, varying from 13% in the Netherlands to 59% in Lithuania. Feelings of pressure increased with age. While there was no apparent gender

difference among 11- and 13-year-olds, at age 15, girls reported feeling more pressure than boys. The proportion of boys and girls who felt pressured by schoolwork in England and Wales (both 47%) was high compared with their peers in other countries, while in Scotland the proportion (35%) was close to the HBSC average (Figure 1.4).

School experience and health

In this section the relationships between school experience and various health outcomes are described. Responses to the four items about school (liking school, academic achievement, peer support and pressure of schoolwork) were combined to produce a 'school experience' score. Young people with scores in the bottom 25% constitute a 'negative school experience' group, those with scores in the top 25% comprise a 'positive school experience' group and those in the middle 50% are a 'middle school experience' group.

The relationship between overall school experience and aspects of Scottish adolescent mental and physical health and well-being are presented, including life satisfaction, confidence, happiness, and smoking and drinking behaviour. Details of the health measures are presented in the Technical Appendix.

Figure 1.3: Young people finding their classmates kind and helpful

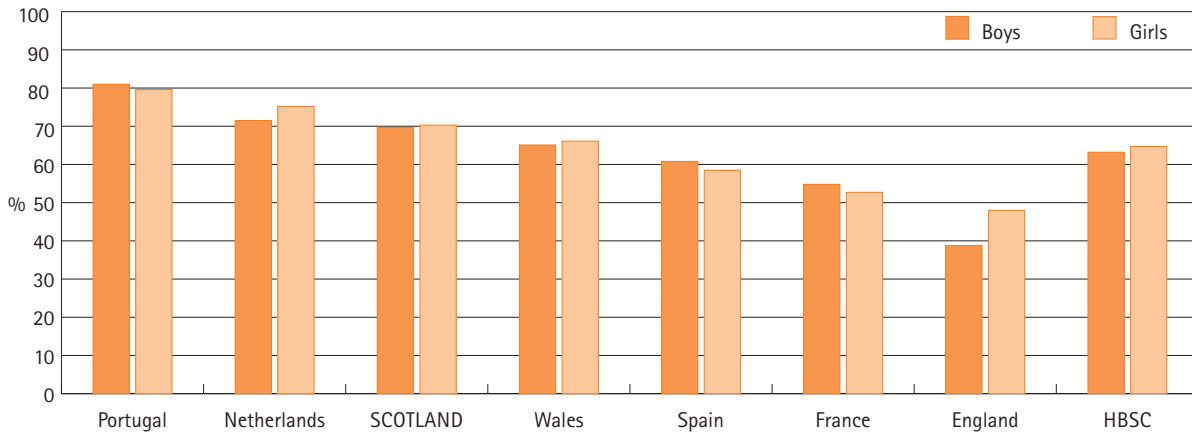
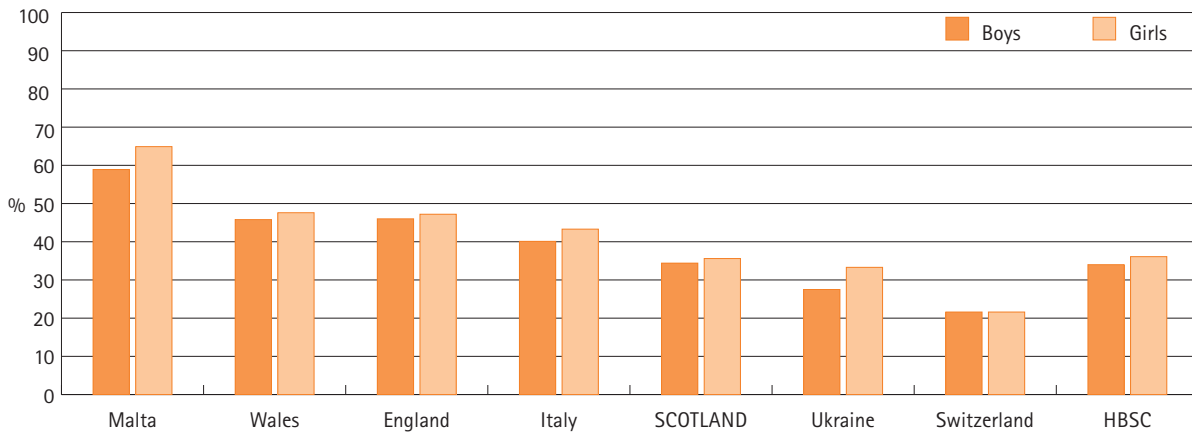


Figure 1.4: Young people feeling pressured some/a lot by schoolwork



School experience and life satisfaction

Young people in Scotland were asked to rate their own life satisfaction. Although most young people were satisfied with their lives, there was variation according to gender and school experience. A higher proportion of girls (18%) than boys (11%) reported low life satisfaction, and this gender difference was seen within each school experience group (Figure 2.1). Young people whose experience of school was negative were significantly more likely to report low satisfaction with their lives.

Boys and girls in the negative school experience group were more than twice as likely to report low life satisfaction than their peers in the middle group and more than five times as likely to report low life satisfaction than their peers in the positive school experience group. A similar pattern was seen across all HBSC countries (Ravens-Sieberer et al, 2004).

School experience and confidence

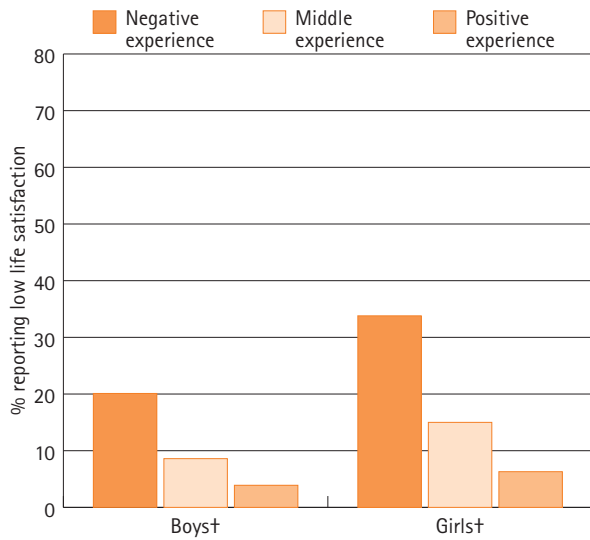
In general in Scotland, 27% of boys and 15% of girls reported always feeling confident. Young people in Scotland with a positive experience of school were much more likely to report always feeling

confident than those with a negative school experience (Figure 2.2). This relationship was stronger among girls than boys: girls reporting a positive experience of school were nearly 3 times as likely to report always feeling confident as their peers who report a negative school experience, while boys with a positive school experience were twice as likely to report always feeling confident as those with a negative experience. The proportion of boys who always feel confident was almost double that of girls but this gender difference was smaller among those with a positive experience of school.

School experience and happiness

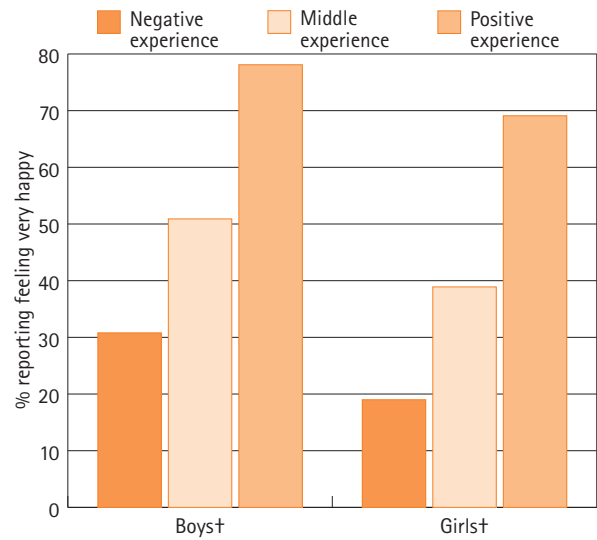
Approximately half of boys and 40% of girls in Scotland reported feeling very happy. Young people who viewed school positively were more likely to report feeling very happy than those with a negative view of school (Figure 2.3). This relationship was strong for both genders. Girls with a positive view of school were over 3 times more likely to report feeling very happy than girls who viewed school negatively, whilst boys with a positive view of school were more than twice as likely to report feeling very happy than boys who viewed school negatively.

Figure 2.1: Low life satisfaction and school experience



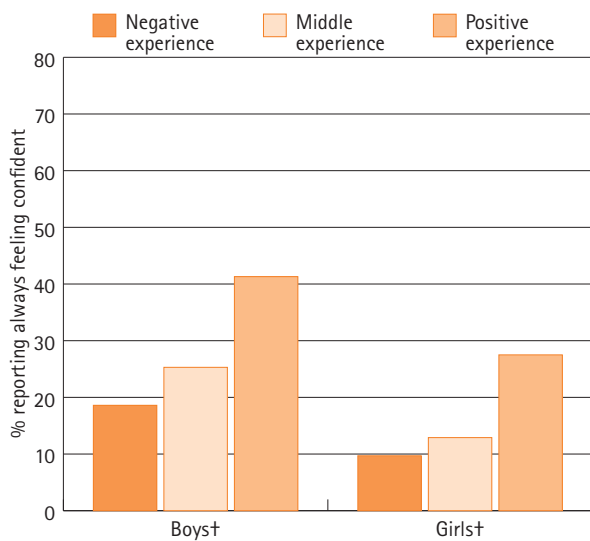
†Significant differences between school experience groups (p<0.01)

Figure 2.3: Happiness and school experience



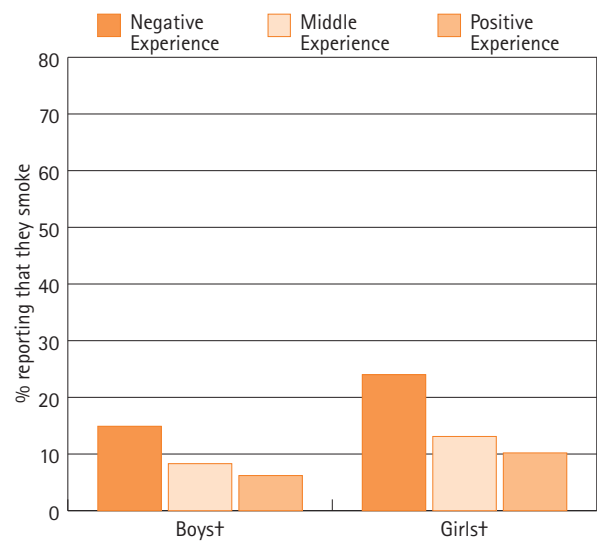
†Significant differences between school experience groups (p<0.01)

Figure 2.2: Confidence and school experience



†Significant differences between school experience groups (p<0.01)

Figure 2.4: Smoking and school experience



†Significant differences between school experience groups (p<0.01)

School experience and smoking

For both boys and girls, smoking was more common among those who reported a negative school experience compared with those who reported a middle or positive experience (Figure 2.4). Overall, the highest rate of smoking was found among girls with a negative experience of school. For all groups, smoking was higher among girls than boys.

School experience and drunkenness

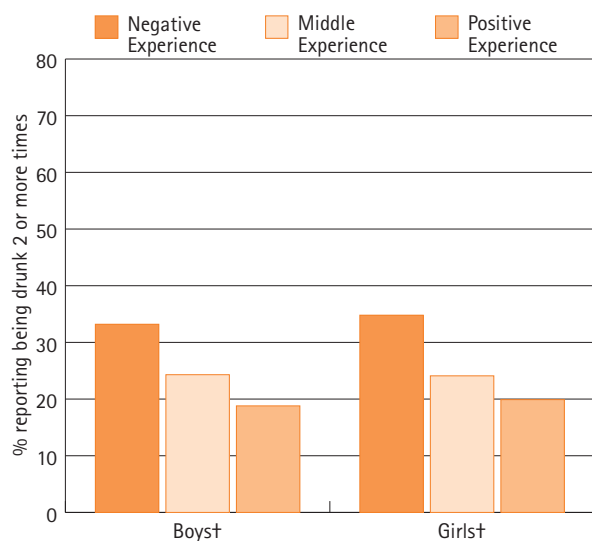
Negative school experience was associated with increased frequency of alcohol consumption and drunkenness. Young people with a negative experience of school were 1.7 times more likely to be weekly drinkers than those with a positive experience of school (not shown). Overall, frequency of alcohol consumption was similar

among boys and girls in Scotland. Figure 2.5 shows that young people with a negative experience of school were almost twice as likely to report having been drunk on at least two occasions than their peers with a positive experience of school. The association between reported drunkenness and school experience is very similar for both boys and girls.

Conclusions

The data presented show clear associations between school experience and health among young people in Scotland. Positive school experience is associated with higher life satisfaction, confidence and happiness. Conversely, negative school experience is associated with higher frequency of smoking, drinking and drunkenness. The findings suggest that how young people feel about

Figure 2.5: Drunkenness and school experience



†Significant differences between school experience groups ($p < 0.01$)

school is closely linked to their health behaviour and psychosocial wellbeing. For girls, the relationships between school experience and confidence and between school experience and life satisfaction are more pronounced than for boys.

Current education and health policy in Scotland highlights the important role that schools play in promoting and supporting young people's health and wellbeing. Research has shown that pupils learn more effectively if they are happy in their work, believe in themselves, like their teachers and feel supported at school (Weare, 2000). Similarly, academic achievement can contribute towards development of a positive self-concept; in a previous study in Scotland, a third of adolescents said that doing well at school made them feel good about themselves (Gordon & Grant, 1997). Such findings are consistent with the health promoting school approach which recognises the importance of a positive school ethos, caring relationships, and a safe and supportive environment to enable young people to fulfil their potential.

TECHNICAL APPENDIX

Scotland, along with 34 other countries in Europe and North America, participated in the 2001/2002 Health Behaviour in School-Aged Children (HBSC): WHO Collaborative Cross-National Survey (Currie, Todd and Smith, 2003: HBSC Briefing Paper 1). Previous surveys were conducted in 1989/90, 1993/94 and 1997/98 and findings from these have been published in a series of international and Scottish reports and briefing papers listed at the end of this document which can be found at www.education.ed.ac.uk/cahru/publications/hbhc.html. Key findings from the 2001/2 cross-national survey have been published in an international report *Young People's Health in Context* (Currie et al, 2004).

The 2002 HBSC survey in Scotland

The 2002 HBSC survey was carried out in 198 schools across Scotland. Pupils from mixed ability classes anonymously completed questionnaires in the classroom. The sample was nationally representative and included pupils from Primary 7 (11-year-olds, $n=1743$), Secondary 2 (13-year-olds, $n=1512$) and Secondary 4 (15-year-olds, $n=1149$) giving a total sample of 4,404. On completion of fieldwork, national data files were prepared using the standard documentation procedures of the HBSC International Protocol and submitted to the HBSC International Data Bank at the University of Bergen, Norway. Data files were checked, cleaned and returned to countries for approval prior to their placement in the international file. Results from the 2001/02 HBSC international survey represent more than 160,000 young people in 34 countries. Further details can be found in *Young People's Health in Context* (Currie et al, 2004).

HBSC items reported in this briefing paper:

Liking school was measured using a single item: How do you feel about school at present? (*I like it a lot / I like it a bit / I don't like it very much / I don't like it at all*).

Academic performance was measured using a single item: In your opinion, what does your class teacher(s) think about your school performance compared to your classmates? (*Very good / Good / Average / Below average*).

Support from peers was measured using three items in the form of statements, with which respondents were asked to agree or disagree.

- The students in my class(es) enjoy being together.
- Most of the students in my class(es) are kind and helpful.
- Other students accept me as I am.

(*Strongly agree / Agree / Neither agree nor disagree / Disagree / Strongly disagree*)

School Pressure was measured by the following item: How pressured do you feel by the schoolwork you have to do? (*Not at all / A little / Some / A lot*).

Life satisfaction was measured using this question accompanying a picture of a ladder: Here is a picture of a ladder – the top of the ladder (10) is the best possible life for you and the bottom (0) is the worst possible life – in general where on the ladder do you feel you stand at the moment? A score of five or less was defined as a low life satisfaction.

Confidence was measured using the item: How often do you feel confident in yourself? (*Never / Hardly ever / Sometimes / Often / Always*).

Happiness was measured by the following item: In general, how do you feel about your life at present? (*I feel very happy / I feel quite happy / I don't feel very happy / I'm not happy at all*).

Smoking was measured using a single item: How often do you smoke tobacco at present? (*Every day / At least once a week, but not every day / Less than once a week / I do not smoke*).

Drinking was measured using an item which listed different types of alcoholic drinks and the question: At present, how often do you drink anything alcoholic, such as beer, wine or spirits? Try to include even those times when you only drink a small amount. (*Every day/ Every week/ Every month/ Hardly ever/ Never*).

Drunkness was measured using the following item: Have you ever had so much alcohol that you were really drunk? (*Never/ once / 2-3 times / 4-10 times / more than ten times*).

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HBSC publications and HBSC Information

Further information on the international report from the 2001/02 survey can be obtained from the International Study website www.hbsc.org. The International Coordinating Centre of the HBSC Study is the Child and Adolescent Health Research Unit (CAHRU), The University of Edinburgh.

HBSC Briefing Papers from this and earlier surveys include:

Briefing Paper 1: Introduction, background and dissemination of the 2002 HBSC survey in Scotland.

Briefing Paper 2: Mental well-being among schoolchildren in Scotland: age and gender patterns, trends and cross-national comparisons.

Briefing Paper 3: Gender Matters: Physical activity patterns of schoolchildren in Scotland.

Briefing Paper 4: Mental-health and well-being in the context of school: Young people in Scotland.

Briefing Paper 5: How are Scotland's young people doing? A cross-national perspective on physical and emotional well-being.

Briefing Paper 6: How are Scotland's young people doing? A cross-national perspective on health-related risk.

Briefing Paper 7: How are Scotland's young people doing? A cross-national perspective on physical activity, TV viewing, eating habits, body image and oral hygiene.

Briefing Paper 8: Bullying and fighting among schoolchildren in Scotland: age and gender patterns, trends and cross-national comparisons.

Briefing Paper 9: Social Context of Bullying Behaviours.

Briefing Paper 10: Bullying: Health, Well-being and Risk Behaviours.

Briefing Paper 11: Family affluence and health among schoolchildren.

Briefing Paper 12: Family structure and relationships and health among schoolchildren.

References

- Anderman E.M. (1999) School effects on psychological outcomes during adolescence. *Journal of Educational Psychology*, 94 (4), 795 – 809.
- Gordon J & Grant G (1997). *How We Feel. An Insight into the Emotional World of Teenagers*. Jessica Kingsley Publishers, London.
- Moon T.R. & Callaghan C.M. (1999) Middle school students' attitudes towards school. *Research in middle level. Education Quarterly* 22, 59-72.
- Morgan A (2004) Discussion and implications. In: Currie et al. (eds) *Young People's Health in Context; Health Behaviour in School-Aged Children: WHO Cross-National Study (HBSC), International Report from the 2001/02 survey*. WHO, Copenhagen.
- Ravens-Sieberer U, Gyongyi K and Thomas C (2004). *School and Health*. In: Currie et al. (eds) *Young People's Health in Context; Health Behaviour in School-Aged Children: WHO Cross-National Study (HBSC), International Report from the 2001/02 survey*. WHO, Copenhagen.
- Samdal O, Dur W and Freeman J (2004). *School*. In: Currie et al. (eds) *Young People's Health in Context; Health Behaviour in School-Aged Children: WHO Cross-National Study (HBSC), International Report from the 2001/02 survey*. WHO, Copenhagen.
- Samdal O, Wold B, Klepp KI, Kannas L (2000). Students' perceptions of school and their smoking and alcohol use: a cross-national study. *Addiction Research*, 8; 141-167.
- Torsheim, T. & B. Wold (2001). School-related stress, school support, and somatic complaints: A general population study. *Journal of Adolescent Research*, 16:293-303.
- Weare K (2000) *Promoting mental, emotional and social health: a whole school approach*. Routledge, London.
- Wells, J. (2000). Promoting emotional well-being in schools. In A. Buchanan & B. Hudson (eds) *Promoting children's emotional well-being*, pp161-192. Oxford University Press, London.

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