



Representation, diversity & inequalities

Pupil
Wellbeing
Survey
2024

Gloucestershire County Council

Contents

Introduction	3	Accessing health services	17
The Pupil Wellbeing Survey	3	Getting help for self-harm	17
Limitations and caveats of the survey	3	Getting help for mental wellbeing	17
Analysis of deprivation	3		
Representation of characteristics	5		
Protected characteristics	5		
Age	5		
Gender reassignment	5		
Disability.....	6		
Race including colour, nationality, ethnic or national origin	6		
Religion or belief.....	7		
Sex.....	7		
Sexual orientation	7		
Representation of socio-economic groups.....	7		
Inequalities	9		
Healthy living	9		
Healthy eating.....	9		
Exercise	9		
Mental health and wellbeing.....	10		
The Warwick & Edinburgh Wellbeing Scale (WEMWBS).....	10		
Other wellbeing measures	11		
Bullying	12		
Self-harm	12		
Health harming behaviours	12		
Smoking and vaping.....	12		
Alcohol	13		
Drugs	13		
Behaviour.....	13		
Absenteeism.....	14		
Criminal activity	14		
Relationships and healthy sexual behaviour....	15		
Living situation	15		
Sexual behaviour	15		
Sexual abuse.....	15		
ACEs	15		
Accessing health services and getting help	17		
Having someone to turn to	17		



Introduction

The Pupil Wellbeing Survey (PWS) is used to give pupils a voice in schools, commissioning decisions, and strategic planning. It is also used to help monitor progress of Public Health initiatives and programmes and to identify new areas of concern. The survey results can also be used to identify cohorts that may be experiencing a different childhood experience based on their protected characteristics, that we can hope to influence by responding to any inequalities.

The first part of this report aims to understand how representative the survey sample is in 2024 of the Gloucestershire pupil population and how different this is to the resident population.

The second part of the report looks at how pupils with different characteristics may have different childhood experiences and be subject to inequalities.

The Pupil Wellbeing Survey

The Pupil Wellbeing Survey (PWS) and Online Pupil Survey™(OPS) is a biennial survey that has been undertaken with Gloucestershire school children since 2006. Children and young people participate in years 4, 5 and 6 in Primary schools; years 8 and 10 in Secondary schools; and year 12 in Post 16/Further Education (FE) settings such as Sixth Forms and Colleges. A large proportion of mainstream, special and independent schools, colleges and educational establishments take part – representing 57.2% of pupils in participating year groups in 2024. The PWS asks a wide variety of questions about children’s characteristics, behaviours and lived experience that could have an impact on their overall wellbeing. The 2024 PWS was undertaken between January and April 2024.

Limitations and caveats of the survey

Not all children and young people who are resident in Gloucestershire attend educational establishments in the county and similarly not all children and young people attending educational establishments in Gloucestershire are residents in the county. It is therefore important to remember this analysis is based on the pupil population not the resident population.

Gloucestershire is a grammar authority, the county has a number of notable independent schools and several mainstream schools very close to the county’s boundary that attract young people from out of county. This results in the school population (particularly at secondary phase) having slightly different characteristics, especially ethnicity, to the resident young people’s population. 12.3% of Gloucestershire’s resident population (2021 Census) were estimated to be from minority ethnic groups however 21.0% of Gloucestershire’s school population were pupils from minority ethnic groups in January 2024 and 21.7% of the PWS cohort were pupils from minority ethnic groups in the 2024 survey.

Although a large proportion of the county’s educational establishments took part in the survey some only had low numbers of students completing the survey, in contrast others had high numbers. Although this doesn’t impact the overall county analysis as demographics are represented as expected at this geography, analysis by district and education phase might only have certain demographic groups represented due to numbers of pupil take up (for example low numbers completing the survey in Tewkesbury at FE level), where FE provision is situated also impacts the survey as older students travel further to access FE provision.

Analysis of deprivation

Schools can be categorised into statistical neighbour groups which cluster schools with pupils of a similar social profile within the same type of school (a similar level of deprivation, affluence or personal/family characteristics).

We use Ministry of Housing, Communities and Local Government (MHCLG) Indices of Multiple Deprivation (IMD) to determine the relative deprivation of pupils. The IMD is based on the home postcode of pupils (collected in the school census). This is aggregated to give an overall IMD

score for the school, reflecting the deprivation levels experienced by pupils. The schools are then split into quintiles based on their scores: quintile 1 is the most deprived and quintile 5 is the least deprived in Gloucestershire.

In addition:

- Grammar/selective schools are compared to other grammar/selective schools in their phase without reference to the IMD.
- Independent schools are compared to other independent schools in their phase without reference to the IMD.
- Post-16 only/Further Education (FE) colleges are compared to all other Post-16 only colleges without reference to the IMD.
- Special and alternative schools are compared to all other schools of this type in the same phase without reference to the IMD.



Representation of characteristics



In 2024 just over 24,600 pupils, from 258 schools and colleges undertook the Pupil Wellbeing Survey (PWS).

This represents approximately 57.2% of pupils in participating year groups.

The current estimate suggests there are 105,365 children and young people aged 4-17 years living in Gloucestershire¹. The January 2024 School Census recorded 92,300 pupils in Gloucestershire mainstream primary, secondary and special schools aged 4-17 years.

Protected characteristics

There are 9 protected characteristics identified by the UK government²

- age
- gender reassignment
- being married or in a civil partnership
- being pregnant or on maternity leave
- disability
- race including colour, nationality, ethnic or national origin
- religion or belief
- sex
- sexual orientation

Some of these are less relevant to children & young people (being married or in a civil partnership, being pregnant or on maternity leave) and as such data about these are not collected in the PWS and therefore will not be reviewed here.

Age

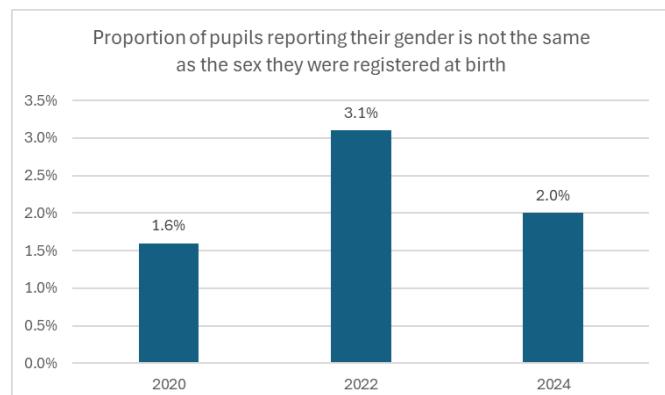
Pupils in Early Years Foundation Stage and KS1 are not included in the survey, this decision was made as the survey does not cater to the youngest pupils

we therefore have no representation from our youngest pupils or their parents.

Due to the year groups included in the survey, a higher proportion of the survey represents primary pupils (55.3%) compared to the School Census population where 52.0% are primary age. Only 32.0% of the survey represents secondary pupils compared to 40.9% of the School Census population. 12.6% of survey responses are from post-16 pupils, this is higher than the proportion in the School Census (7.1%) which doesn't apply to post-16 only colleges. This therefore may not be as reflective of the overall pupil population in Gloucestershire and as such overall survey results may be slightly skewed in responses that are age related.

Gender reassignment

Pupils in the secondary and post-16 phases were asked if they identified as the same gender as the biological sex they were assigned at birth. In 2024 2.0% of pupils said they did not identify as the same gender as the biological sex they were assigned at birth, this rose significantly between 2020 (1.6%) and 2022 (3.1%).



Pupils who gave their biological sex as female were significantly more likely to say their gender was not the same as the biological sex they were assigned at birth.

Since 2022 the survey has asked pupils more specifically about their gender identity, in 2024 1.1% reported they identified as transgender (1.6% of biological females and 0.9% of biological males).

In the 2021 Census 0.5% of persons aged 16+ reported their gender identity was different to the sex they were registered at birth, however younger populations are more likely to identify as transgender.

¹ MYE 2023 – derived estimate

² <https://www.gov.uk/discrimination-your-rights>

Research suggests among youths aged 13 to 17 in the U.S., 1.4% identify as transgender. This would suggest the representation in the survey of transgender pupils is reflective.

In the 2024 PWS a further 0.6% of pupils identified as Gender-fluid, and 0.9% identified as Non-binary.

Biological females were more likely to report being non gender-conforming than biological males.

Gender identity by biological sex, secondary/post-16 pupils - PWS 2024			
Gender identified	Biological sex		
	Female	Male	All
(not answered)	3.0%	3.8%	10.5%
Cis gender	85.3%	86.0%	79.3%
Don't know	5.9%	5.9%	5.5%
Gender fluid	0.9%	0.4%	0.6%
Non-binary	1.4%	0.4%	0.9%
Transgender	1.6%	0.9%	1.1%
Would rather not say	1.8%	2.6%	2.1%

Disability

In the 2024 survey 8.5% of pupils said they had a disability (2,088 pupils). Older pupils in secondary and post-16 settings are asked what type of disability they have. Since 2020 the proportion of pupils specifying they had a physical disability has remained stable at 3.0% of all pupils. 7.8% of all secondary and post-16 pupils reported a learning disability in 2024, this has been increasing since 2020 when it was 5.2%.

In the January 2024 Pupil Census 0.7% of pupils had a recorded³ physical disability (including *Visual impairment* and *Hearing impairment*) as their primary need, however many children have learning disabilities that severely impact their physical health (*Profound & Multiple Learning Difficulty* and *Severe Learning Difficulty*), when these are included, it suggests 1.4% of pupils are likely to have a physical disability, this is in line with the proportion in the survey. However, these pupils are unlikely to have completed the survey.



In the January 2024 Pupil Census 11.9% have a non-physical special educational need identified as their primary need (excluding *Social Emotional and Mental Health*). This is higher than those reporting a Learning disability in the 2024 PWS (7.8%).

In the survey 11.1% reported they had *Special Educational Needs or an Educational Health Care Plan* (SEN/EHCP). In the January 2024 Pupil Census 18.9% of pupils have recorded SEN support or an EHCP. This suggests pupils with special educational needs are under-represented in the survey, although some pupils, especially younger pupils, may not be aware of their special educational needs and the support they receive. Pupils with severe physical or learning disabilities may not be capable of completing the survey in its current form.

Race including colour, nationality, ethnic or national origin

In the January 2024 Pupil Census 21.0% of pupils were identified as from minority ethnic groups, 21.7% of the survey respondents self-identified as being from minority ethnic groups. This suggests the survey is reflective of the broad ethnic groupings of pupils in Gloucestershire schools.

When looking at more detailed ethnic groups, these also appear to be representative of the pupil population.

Ethnicity	Census 24	PWS 24
Asian/Asian British	5.3%	5.2%
Black/Black British	2.5%	2.9%
Mixed ethnicity	5.4%	5.2%
White Other	6.7%	7.1%
White British	76.8%	74.0%
Other ethnicity	1.0%	1.3%
Refused/not given	2.2%	4.3%
Sample size	93,153	24,631

³ Special needs are categorised in the School Census into 12 primary needs <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england>

Nationality is not collected in the PWS or Pupil Census, however first language is collected in the census. 10.1% of pupils were recorded as having a first language other than English. Language and nationality are often, but not always similar. For example, someone may have a nationality of British by birth but may have non-British parents who speak a different first language at home to them.

Religion or belief

The religion of pupils has not been collected in the PWS since 2012, neither is it collected in the Pupil Census. This means we cannot assess if religious populations are represented equally in the survey, there is therefore no way to assess if they have equal opportunities or if they face inequalities.

Sex

In the January 2024 Pupil Census 50.9% of pupils were recorded as male and 49.1% as female, this was similar to the PWS cohort where answered, 50.5% self-reported as being biologically male and 49.5% as biologically female. It is important to note 3.8% of the PWS cohort didn't give their biological sex, in contrast all pupils in the Pupil Census had a sex allocated to them.

Sexual orientation

The proportion of pupils reporting they are heterosexual in 2024 (71.5%) has remained similar to 2022 (70.1%). Between 2020 and 2022 there was a reduction in the proportion identifying as heterosexual, almost entirely driven by a decrease in females identifying as heterosexual. Since 2020 there has been an increase in females reporting they are Bisexual and Lesbian in the period.

The Office for National Statistics reported from the 2021 Census 89.4% of persons aged 16+ identified as heterosexual or straight in England and Wales⁴ and 90.4% of Gloucestershire's population over 16.



In the 2024 survey there is little correlation between sexuality and socio-economic background that was previously observed. However, pupils at independent schools were the most likely to identify as heterosexual which may indicate a perceived or real stigma or prejudice of non-heterosexual sexuality in these settings.

Pupils at Special schools were less likely to report identifying as heterosexual than any other group. International research⁵ suggests that a larger proportion of disabled than non-disabled people are sexual minorities.

Pupils in quintile 5 schools were the least likely to report they identify as heterosexual of pupils in mainstream schools.

In the 2021 Census approximately 2.8% of the England and Wales and 2.5% of the Gloucestershire population identified as Lesbian, Gay or Bisexual (LGB)⁶, 8.4% of pupils in the survey self-identified as LGB. ONS⁷ notes that younger people are more likely to identify as LGB+ than older groups, an estimated 6.9% of people aged 16 to 24 years (9.38% females and 4.50% of males). Given the ages of pupils in the survey cohort it is likely LGB pupils are broadly representative of the population figure.

Representation of socio-economic groups
Schools can be separated into Statistical Neighbour groups, these group together schools with pupils with a similar social profile in the same type of school (a similar level of deprivation, affluence or personal/family characteristics).

⁴<https://www.goucestershire.gov.uk/inform/population/census-of-population/census-2021/>

⁵ <https://www.hrc.org/resources/understanding-disabled-lgbtq-people>

⁶ ibid

⁷

[https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/articles/sexualorientationageandsexenglandandwales/census2021#:~:text=1.-,Main%20points,an%2034%20years%20\(57.88%25\).](https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/articles/sexualorientationageandsexenglandandwales/census2021#:~:text=1.-,Main%20points,an%2034%20years%20(57.88%25).)

It is difficult to compare directly pupils resident IMD quintile as the survey is anonymous and we don't ask for their individual postcodes. Instead, we use the postcodes recorded in the most aligned Pupil Census to create a school level IMD quintile.

In the 2024 survey, there appears to be an over-representation of pupils (in mainstream primary and secondary schools, excluding special, alternative provision and selective schools) attending schools categorised as quintile 1 most deprived. This may be an effect of the methodology used to determine IMD in the survey and the 'smoothing' of IMD to produce a school socio-economic group.

IMD quintiles		
	PWS 2024	Census Jan 24
Quintile 1	21.3%	9.3%
Quintile 2	16.9%	11.4%
Quintile 3	19.0%	23.2%
Quintile 4	19.1%	25.4%
Quintile 5	23.7%	30.7%

8.3% of pupils in the January 2024 Pupil Census attended selective schools, this was in line with the PWS where 8.1% of the cohort attended selective schools.



A further 3.9% of the survey cohort attended independent schools, whilst there is no comparison in the Pupil Census it can be estimated from independent school published POR figures that 8.3% of the Gloucestershire population aged 4-17 years attend independent schools. This suggests pupils attending independent schools are under-represented in the survey. Although independent schools are likely to attract pupils from outside Gloucestershire as well as international pupils, so the proportion of *resident* children and young people attending independent schools is likely to be lower.

Inequalities

Whilst we hope every child has equal opportunities and positive experiences during their childhood and into adolescence, some pupils are more likely to experience particular issues and sometimes find it harder to access support.

This section is separated into broad themes and looks at evidence for inequalities reported by pupils belonging to vulnerable or protected characteristic groups.

Healthy living

Healthy eating

In 2024 Black African (17.3%) and Pakistani (12.1%) pupils were significantly less likely to report eating '5 a day' compared to their White British peers (22.6%), all other ethnic groups were in line.



Pupils from the following vulnerable groups were significantly less likely to report eating '5 a day' than their counterparts:

- Eligible for Free School Meals (FSM) (19.8%)
- Low Mental Wellbeing (LMW) (17.7%)
- Disability (16.7%)
- SEN/EHCP (17.5%)
- Known to social care (13.9%)
- 4+ ACEs (10.7%)

Pupils eligible for Free School Meals were significantly less likely to report eating breakfast regularly, than those not eligible. Pupils eligible for FSM in 2022 were significantly less likely to report eating breakfast than those eligible for FSM pre-pandemic in 2020. The level of FSM pupils reporting eating breakfast regularly has remained in line between 2022 and 2024 (58.2%).

There is a clear link between deprivation and having healthy food available. Pupils at Independent and Selective schools were significantly more likely to have healthy food at home than most other groups.

There appears to be little link to deprivation and eating unhealthy snacks, however likelihood of drinking sugary drinks appears to be strongly linked to deprivation.

This suggests there is an inequality in access to healthy food and eating healthily for pupils from deprived neighbourhoods, those with low mental wellbeing and those who have disability/SEN.

Exercise

Girls and young women are less likely to report doing the recommended amount of exercise than boys and young men. Girls and young women were significantly more likely to say they didn't exercise much because; they felt embarrassed exercising, they didn't like exercising in tight/clingy clothing, felt they weren't good at exercising, difficulties with their period, they didn't have time to exercise and they had no one to exercise with.

There appears to be a link between doing the recommended exercise and deprivation. In 2024 pupils in independent schools reported a significantly higher level of exercise than any other group (66.2% doing the recommended amount). This may be attributed to having better accessibility to active pursuits in terms of time, location and financial accessibility.

Schools where the majority of pupils live in IMD quintile 1 report significantly lower levels of exercise than all other mainstream groups. This could be attributable to lack of affordability of sports equipment/exercise clothing, subs/fees for classes or sports clubs, cultural social constraints, or schools putting more focus on improving academic achievement in the most deprived areas.

Pupils at Special schools reported the lowest level of exercise (25.5% did the recommended amount). The proportion of pupils at special schools reporting doing the recommended exercise was lower in 2024 than 2022. Research suggests children and young people with a disability are less likely to report doing the recommended level of exercise and to find it harder to access appropriate activity and exercise.

Reported participation levels in children with vulnerable characteristics was also lower than the overall participation levels; significantly lower in children:

- reporting a disability
- identifying as minority ethnicity

- known to Social Care
- identifying as LGBTQ+
- young carers
- who are eligible for FSM
- who have LMW
- reporting 4+ ACEs

Young people who identified as non-heterosexual or transgender reported the lowest activity levels (32.2%), significantly lower not just than the average but than all other vulnerable groups.

Reported exercise levels varies across different ethnic groups, broadly children and young people from Black or Asian ethnic groups were significantly less likely to report doing the recommended amount of exercise. Children and young people significantly less likely to report doing the recommended amount of exercise if they identify as:

- South Asian (Pakistani, Bangladeshi or Indian)
- Other Asian background
- Black African

Cultural norms in specific communities such as modest female clothing in some religious communities may create or be perceived to create a barrier to exercise.

Lack of affordability being given as a reason for doing little or no exercise seems to increase with age – this may be due to less timetabled sports/activity time in secondary schools leading to older young people needing to access sports through independent clubs and leisure centres.

Accessibility to appropriate clothing such as sports bras or sanitary products may also create a barrier to exercise. A significantly higher proportion of girls and young women from Gypsy/Roma (16.7%) and Mixed – White & Black Caribbean (9.1%) reported not going to school because they didn't have sanitary products available than their White British peers (2.9%).

Mental health and wellbeing

All vulnerable groups⁸ consistently report lower happiness levels than the overall level, however pupils who identify as LGBTQ+ and pupils known to

social care had the lowest levels of happiness. Historically pupils from minority ethnic groups have consistently reported lower levels of happiness than their white British peers, however, in 2024 the gap had reduced to 0.9 percentage points.

In 2012 the proportion of females reporting they were confident in their future was the same as males (72%), however since then there has been a widening gap between the sexes. In 2024 males were significantly more likely to report they were confident about their future than females, with a gap of 5.6 percentage points (83.2% vs. 77.6%). Pupils from ethnic minority groups reported less confidence about their future than their white British peers.

The proportion of pupils from ethnic minority groups reporting feeling proud of their achievements is consistently below their white British peers, although the gap has been narrowing.



Neuro-diverse children such as those with Autistic Spectrum Disorder (ASD) and those with other learning and physical disabilities can find it particularly hard to make and keep friends. Only 39.7% of pupils with SEN/EHCP said they found it easy to make and keep friends, significantly lower than those with no SEN (54.6%). The difference between pupils with a disability and their non-disabled peers was equally concerning, in 2024 only 39.2% reporting finding it easy to make and keep friends vs. 54.6%.

The Warwick & Edinburgh Wellbeing Scale (WEMWBS)

The Warwick-Edinburgh Mental Wellbeing Scales were developed to enable the measuring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. The 14-

⁸ Children and young people who are; carers, known to social care, eligible for FSM, bullied, disabled, have EHCP/SEN support, identify as LGBTQ+

item scale WEMWBS has 5 response categories, summed to provide a single score. The items are all worded positively and cover both feeling and functioning aspects of mental wellbeing, thereby making the concept more accessible. The scale has been widely used nationally and internationally for monitoring, evaluating projects and programmes and investigating the determinants of mental wellbeing.⁹

The mean WEMWBS score of all pupils had been reducing between 2016 and 2022, however, in 2024 there was a slight increase to 49.4. There is a distinct difference between the mean scores of males and females and by year group as pupils age. The mean WEMWBS score of young people identifying as non-heterosexual and trans was the lowest of all vulnerable groups (40.9) in 2024 suggesting this group is experiencing very poor wellbeing.

Although pupils at selective schools have consistently reported lower mean scores, 70.3% of the reduction in the period 2016-2022 occurred during the pandemic. This may be due to the reduced/impaired teaching during the lockdown periods and the pressure they feel to still achieve high grades. There appears to be some link between affluence and higher wellbeing scores in females, and to a lesser extent in males.

It is interesting to note how the effect of the pandemic and subsequent recovery appears to be different in different statistical neighbour groups. For all groups except quintile 1 pupils, there has been an increase in mean WEMWBS score in 2024. However, whilst those in the less deprived groups appear to have returned to the pre-pandemic score, those in quintile 2 have not recovered as well and pupils in the quintile 1 group have seen a further decline in mean WEMWBS.

In 2024 1 in 4 (23.1%) of all pupils reported LMW, this is statistically significantly lower than in 2022 and in line with the pre-pandemic level.

This reduction appears to be influenced most by the proportion of secondary pupils reporting LMW, as the proportion in primary pupils has been stable since 2020 and since 2018 in post-16 pupils.

The wellbeing of vulnerable groups has historically been lower than that of less-vulnerable children

and young people. The biggest increase in LMW during the pandemic period was seen in pupils who identify as LGBTQ+ (6.5 percentage points). Between 2022 and 2024 most vulnerable groups have had a reduction in reported LMW, similar to the general population. However, pupils with a disability, those known to children's social care (CSC) and pupils with SEN/EHCP all saw an increase in reported LMW between 2022 and 2024.

There is no significant difference between reported LMW of pupils from white British or ethnic minority group backgrounds (23.1% vs. 23.0% in 2024). However, pupils from *Eastern European* and *White Irish* backgrounds were significantly more likely to report LMW than their white British peers.



Other wellbeing measures

Females were significantly more likely to say they felt worried about going to school than males (1 in 3 vs. 1 in 5).

Pupils with all vulnerable characteristics were significantly more likely to say they felt worried about going to school than their non-vulnerable peers. Pupils identifying as LGBTQ+ (43.2%), and pupils who were seriously bullied (48.3%) were the most likely to say they felt worried about going to school.

⁹<https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/>

Bullying



Younger pupils are most likely to report being bullied regularly and the proportion reduces as they age. In 2024 9.4% of primary pupils reported being bullied regularly compared to only 2.6% of post-16 pupils. There has been little change in the proportion of pupils regularly bullied in any phase since 2014. Previously, the highest proportion of pupils reporting regular bullying was seen in the most deprived schools, as deprivation levels reduced so did the proportion of pupils reporting regular bullying. However, in 2024 this is less clear. Pupils at selective schools were significantly less likely to report regular bullying than all other groups except post-16 only colleges (where age of pupils is the most significant factor). In 2024 females were significantly more likely to say they were victims of verbal, cyber and isolating bullying than males. Males were significantly more likely to report being a victim of physical bullying.

Whilst around 1 in 7 secondary and post-16 pupils who had ever been seriously bullied perceived it as homophonic bullying, almost half (47.0%) of those LGBTQ+ who had been seriously bullied and 15.4% of all LGBTQ+ pupils reported experiencing homophobic bullying.

A quarter (25.9%) of minority ethnicity pupils who were bullied reported experiencing racist bullying, 6.9% of all minority ethnicity pupils.

A third of pupils with a disability who were bullied and 1 in 10 of all pupils with a disability perceived it was due to their disability.

Self-harm

Between 2016 and 2022 pupils in Y10 saw the biggest increase in self-harming behaviour; in 2024 they also had the steeper reduction in pupils reporting self-harming. Between 2016 and 2024 the proportion of post-16 pupils reporting ever self-harming remained around 1 in 4.

The proportion of young people reporting ever self-harming in 2024 was highest in pupils at post-16 only colleges (27.4%). There was little significant difference in reported self-harm between mainstream school groups apart from in quintile 5 (least deprived) that reported a significantly lower proportion of pupils self-harming.

The proportion of young people from ethnic minority groups who report self-harm or overdose is significantly lower than white British young people (18.8% vs. 22.5%). Asian, Black and Other ethnicity pupils were significantly less likely to report self-harm or overdose than white British young people. Particularly Black African, Indian and White Western European had significantly lower reported self-harm than white British pupils.

Pupils with vulnerable characteristics are more likely to report self-harm than their peers:

- Non-heterosexual and transgender CYP 1 in 2 vs. 1 in 6
- Seriously bullied CYP 1 in 2 vs. 1 in 5
- Young carers CYP 1 in 2 vs. 1 in 5
- CYP with 4+ ACEs 1 in 3 vs. 1 in 10
- CYP eligible for FSM 1 in 3 vs. 1 in 5
- CYP with a disability 1 in 3 vs. 1 in 5
- CYP with SEN/EHCP 1 in 4 vs. 1 in 5

Health harming behaviours

Smoking and vaping

Whilst there is a visual decline in trying smoking as deprivation decreases, there is no significant difference in the proportion of pupils trying smoking between pupils at IMD quintiles 1-5 schools. However, there is a significant difference between those at selective schools (6.0%) and mainstream schools. The proportion of pupils who reported they had tried smoking was highest at Independent schools (18.5%) who are likely to be the most affluent pupils.

There doesn't appear to be any significant difference in the proportion of male and female pupils regularly smoking. Although slightly higher there is no significant difference in pupils from minority ethnic groups regularly smoking to their white British peers (1.8% vs. 1.5%). There are however, some individual ethnic groups that do have a significantly higher proportion of pupils reporting regular smoking; Gypsy/Roma (12.6%), Traveller of Irish heritage (7.3%), Bangladeshi (3.8%) and White Eastern European (2.9%).

Females were significantly more likely to have ever tried vaping and to report vaping regularly (15.1% and 4.4%) than males (13.0% and 3.3%).



Alcohol

Pupils identifying as bisexual, lesbian/ gay and other sexuality e.g. pansexual were significantly less likely to report never drinking alcohol than heterosexual pupils, pupils reporting 'don't know' sexuality or 'rather not say' were significantly more likely to say they had never drunk alcohol than heterosexual pupils all other sexualities were in line.

There was no significant difference between pupils with different gender identities when looking at reporting never drinking alcohol.

Pupils from some vulnerable groups were less likely to say they had never drunk alcohol than their comparative less-vulnerable peers; those with a disability, those with SEN/EHCP, LGBTQ+ students, those with Low Mental Wellbeing (LMW) and young carers were all less likely to say they had never drunk alcohol.



Pupils in primary and secondary schools where the majority of pupils live in IMD quintile 5 (least deprived) are significantly less likely to say they are drunk regularly than pupils at schools where the majority of pupils live in quintile 1 (most deprived). It's important to note this is counter to the finding in 2022.

This trend is counter to that in Post 16 phase where pupils at schools where the majority of pupils lived in IMD quintile 4 or 5 (least deprived) were more likely to report being drunk regularly than IMD quintile 1 schools.

It is interesting to note pupils at selective (who often come from more affluent backgrounds) and IMD quintile 5 schools are significantly less likely to report being regularly drunk than those in independent schools.

Drugs

When looking across all survey years it is clear the proportion of young people in mainstream secondary schools reporting having tried drugs was highest in schools where the majority of pupils lived in quintile 5 (least deprived) and lowest in schools where the majority of pupils lived in quintile 1 (most deprived). This is likely to be linked to access to means. Pupils in special schools (this includes alternative provision, hospital education and SEN special schools) were consistently the most likely to say they had tried drugs.

There was no significant difference in drug usage between white British and pupils from minority ethnic groups, however, at a more granular level pupils from a Gypsy/Roma background, White and White and Black Caribbean mixed background were significantly more likely to report trying drugs than white British pupils. Pupils from Chinese, Black African and Indian backgrounds were significantly less likely to report trying drugs than white British pupils.

Pupils from vulnerable groups were significantly more likely to have taken illegal drugs than their less vulnerable peers. Pupils known to children's social care (CSC) were the most likely to have tried drugs and were twice as likely to have tried drugs vs. those not known to CSC.

Behaviour

The proportion of pupils reporting they are often in trouble appears in line between 2014 and 2024 (10.3% to 10.0%) although there has been slight fluctuations. Pupils in Y4 and Y8 are the most likely to report often being in trouble. Pupils with LMW were significantly more likely to report often being in trouble (13.6%) than those with A/HMW (8.9%). In 2024 pupils from minority ethnicity backgrounds (10.9%) were significantly more likely to say they were often in trouble than their white British peers

(9.6%), this is a change to 2022 when there was no significant difference observed.

Pupils in special schools were the most likely to report being often in trouble (11.5%) and those in selective schools were the least likely (5.3%). Being in trouble appears to be linked to deprivation, with the proportion reducing as deprivation decreases.

Experience of an isolation, suspension or exclusion appears to be linked to deprivation. In mainstream schools pupils in quintiles 1 to 4 schools were significantly more likely to have an isolation, suspension or exclusion than those in quintile 5 and selective schools.

A significantly higher proportion of pupils from the following groups reported experiencing an isolation, suspension or exclusion:

- Those bullied regularly (27.8%)
- Those known to social care (30.1%)
- Those with a disability (24.5%)
- Those receiving SEN support (23.8%)
- Young carers (24.9%)
- Those eligible for FSM (25.4%)
- Those with low mental wellbeing (19.5%)

Absenteeism

For the first time there was no difference in the proportion of pupils from minority ethnic group backgrounds being absent for 10% or more of school sessions in the previous term compared to their white British peers, however pupils from Gypsy/Roma (62.1%), Traveller of Irish heritage (48.4%), Black Caribbean (41.6%) and Mixed – white and Black Caribbean (42.2%) backgrounds were significantly more likely to report being absent for 10% or more of school sessions. Conversely pupils from Chinese (20.0%), Black African (17.1%) and Indian (26.9%) backgrounds were least likely to report missing 10% or more of school sessions.



Criminal activity

Pupils known to social care were over 4 times as likely to report being in a gang than those not known to social care.

There was little difference in the proportion of pupils reporting gang membership by socio-economic school group although pupils at selective grammar schools and special schools were less likely to report gang membership.

The highest reported level of carrying a weapon was in independent schools (14.2%), weapon carrying in mainstream schools was in line but lowest in selective schools (4.9%). Pupils at special schools were the least likely to report carrying a weapon (2.9%).

Males¹⁰ were more than twice as likely to report carrying a weapon than females. Pupils from minority ethnic groups were not significantly more likely to report carrying a weapon than their White British peers. However, pupils from Gypsy/Roma (16.4%), Traveller of Irish heritage (27.6) and White Irish (12.2%) ethnic groups were significantly more likely to report carrying a weapon. Pupils from Black, Asian, and Mixed backgrounds weren't significantly more likely to report carrying a weapon than white British pupils.

Pupils from the following groups were more likely to say they had been in serious trouble with the Police:

- Those known to social care
- Those with low mental wellbeing
- Those who were young carers
- Those identifying as LGBTQ+
- Those eligible of FSM

¹⁰ Pupils are asked to enter the biological sex they were born; they are subsequently asked if their gender aligns with this. Unless stated 'male' and 'female' refers to those reporting it is their biological sex.

- Those reporting 4+ ACEs

In 2024 3.9% of pupils said they had run away from home in the last 6 months, this is in line with the proportion in 2016, 2018 and 2022. Pupils from Traveller of Irish heritage (10.9%) and Gypsy/Roma (12.6%) ethnicities were more likely to report running away from home. Pupils known to social care were 4 times more likely to say they had run away from home in the past 6 months than those not known to social care.

Relationships and healthy sexual behaviour

Living situation

Pupils from minority ethnic group backgrounds were significantly more likely to report living somewhere other than with parents than their White British peers.

Females and vulnerable pupils such as pupils identifying as LGBTQ+, pupils with a disability, young carers, those known to social care, those eligible for FSM, those seriously bullied and those from minority ethnic group backgrounds were all significantly less likely to say they felt safe at home than their less vulnerable counterpart peers.

In a change to previous observations, there was little difference in the proportion of pupils reporting regularly witnessing domestic abuse by statistical neighbour group (based on deprivation of pupils). The proportion reporting regularly witnessing domestic abuse increased slightly as deprivation decreased, peaking in pupils in quintile 4, but was lowest in quintile 5 pupils.

Female pupils were almost two and a half times more likely to report being the victim of domestic abuse regularly than male pupils (3.9% vs. 1.7%). Vulnerable pupils were also more likely to report being a victim of domestic abuse regularly than their less-vulnerable peers and was highest in pupils experiencing bullying and those known to social care.

Sexual behaviour

Males are less likely to report understanding consent than females at all ages.

Understanding consent appears to be higher in pupils from the least deprived backgrounds, at 97.1% in pupils from selective schools and 95.1% in pupils living in Q5 neighbourhoods.

Pupils from black backgrounds (Black Caribbean, Black African, Black other) were significantly less

likely to say they understood consent than their white British peers. This was also the case with pupils from Gypsy/Roma backgrounds.



Engaging in sexual activity increases with age from 3.1% in Y8 to 10.0% in Y10 and 25.7% in Y12. Males were slightly more likely to say they had engaged in sexual activity than females although not significantly, this trend has been observed since 2020.

Pupils from Black Caribbean (24.4%), Mixed – white and Black Caribbean (22.4%), Gypsy/Roma (29.5%) and Irish Traveller (29.2%) backgrounds were significantly more likely to report being sexually active than their white British peers (12.7%).

Pupils from more deprived backgrounds appear to be slightly more likely to engage in sexual behaviour although they are only significantly different to those in the least deprived (quintile 5) and selective schools.

Sexual abuse

Females were more likely to have received a message or picture of a sexual nature than males (23.4% vs. 15.2%).

In most forms of sexual harassment/abuse females were around twice as likely to report experiencing it regularly (Quite often (e.g. weekly)/Most days) than males, except Unwanted touching which was reported by a higher proportion of males.

ACEs

Data from 2024 shows whilst not a linear association, the 3 establishment types likely to

have the least deprived pupils¹¹ have significantly lower proportion of pupils reporting 4+ ACEs than their relatively more deprived peers.

Whilst not able to be joined to 2024 data due to the methodology change, the aggregate of previous surveys results shows experiencing 4+ ACEs does appear to have a linear link to deprivation, 1 in 3 pupils in IMD quintile 1 schools reported 4+ ACEs compared to 1 in 5 pupils in quintile 5 schools and 1 in 8 pupils in independent schools.

Females¹² were significantly more likely to report 4+ACEs than males. In 2024 17.2% of females reported experiencing 4+ACEs compared to 7.2% of males. Cis gendered pupils were significantly less likely to report they had experienced 4+ ACEs than those who are Transgender, gender fluid or non-binary.

Pupils identifying as LGB were significantly more likely to report 4+ ACEs than heterosexual pupils.

The proportion of pupils with a disability, known to social care, young carers, seriously bullied, eligible for FSM reporting 4+ ACEs was significantly higher than their less vulnerable peers.

Pupils reporting 4+ ACEs were:

- twice as likely to report having at least one **exclusion** (29.8% vs. 15.1%)
- around three time as likely to have been in **trouble with the Police** (8.4% vs. 2.7%)
- more than twice as likely to say they were **regular¹³ cigarette smokers** (10.2% vs. 3.6%)
- more than twice as likely to **vape regularly** (41.8% vs. 24.4%)
- more than twice as likely to report being **drunk regularly** (10.5% vs. 4.9%)
- significantly more likely to report **trying illegal drugs** (35.8% vs. 14.9%)
- significantly less likely to report eating '5 a day' (10.7% vs. 16.5%)
- significantly less likely to report doing the recommended hours exercise per week¹⁴ (38.2% vs. 47.6%)
- significantly less likely to report getting the recommended hours sleep¹⁵ the previous night (35.3% vs. 50.2%)

These were also observed in the aggregate of previous surveys 2018, 2020 and 2022.



¹¹ IMD quintile 5 schools, selective schools and independent schools

¹² Where given as biological sex

¹³ Defined as - *Quite often (e.g. weekly)/Most days*

¹⁴ NHS recommends 1 hour per day = 7+hrs per week

¹⁵ NHS recommends 7+ hours per night for adults

Accessing health services and getting help

Having someone to turn to

Pupils with LMW were significantly less likely to report having someone to turn to for help than those with average and high mental wellbeing (75.3% LMW vs. 95.4% HMW). There was no difference between biological sex with having someone to go to for help; however, pupils who reported identifying as gender fluid (58.7%), non-binary (75.3%) or transgender (71.0%) were significantly less likely to have someone to turn to for help than cis gendered pupils (85.3%).

Pupils from minority ethnic groups were significantly less likely to say they seek help from parents (70.6%) than White British peers (76.1%). Just over half (56.3%) of LGBTQ+ pupils said they would go to their parents for help, significantly lower than heterosexual/cis pupils (76.0%).

Accessing health services

Questions about dental health are asked to pupils at primary school. Likelihood of brushing their teeth twice a day or more increased as deprivation decreased.

Pupils from Pakistani (66.2%), Black African (67.7%) and White Eastern European (70.8%) ethnic groups were significantly less likely to say they brushed their teeth twice a day than their White British peers (78.2%).

Pupils known to social care and those eligible for FSM were significantly less likely to report brushing their teeth twice a day than their less vulnerable peers.

Visiting the dentist was also linked to deprivation and was lowest in pupils in quintile 1 schools where just over half had visited the dentist (57.1%) compared to pupils at independent schools where almost three quarters (73.6%) of pupils had been to the dentist. Likelihood of visiting the dentist was also low in pupils at special schools, 58.3% had visited in the previous 12 months.

Pupils from minority ethnicity groups (62.3%) were significantly less likely to report they had visited the dentist in the previous 12 months than their White British peers (67.0%). Specifically, pupils from Black African (40.2%), Indian (54.6%), and Pakistani (47.7%) backgrounds were significantly less likely to report visiting the dentist in the previous 12 months.



Again, pupils eligible for FSM (59.6%) and those known to social care (56.1%) were significantly less likely to have visited a dentist than their less vulnerable peers.

Pupils in schools in Cotswold and Stroud districts were significantly more likely to have visited the dentist than those in Gloucester and Forest of Dean district schools. This may be due to NHS dental deserts in these areas.

Questions around sexual health services were asked to pupils in secondary and post-16 phases. Pupils from selective schools were less likely to say they didn't have anyone to go to for help or advice about sexual health or contraception.

Getting help for self-harm

A fifth of pupils who reported self-harming behaviour said they had not told anyone about it.

In terms of receiving help, a third of pupils who self-harmed said they received help from no-one. Friends and parents/carers were again the most likely to provide help around self-harm.

Pupils who reported self-harm were significantly more likely to have received support from a health professional for their mental health and emotional wellbeing (45.0% vs. 14.7%) than those with no reported self-harm history. Although they were also more likely to report they found accessing support difficult/very difficult than those with no reported self-harm history (28.7% vs. 11.7%).

Getting help for mental wellbeing

One in six secondary and post 16 pupils in 2024 said they wanted more help with feeling positive about their appearance. This was higher in females (26.1%) than males (10.8%).

In 2024, 1 in 4 pupils said they would like more information about Coping with feelings/Stress management this has remained a similar

proportion since 2012. Females (26.9%) were almost twice as likely to want more information about Coping with feelings/Stress management than males (14.6%).

84.3% of pupils said they had a trusted adult to go to when they were worried about something (similar to 2022, 84.0%). Pupils with LMW were significantly less likely to report having someone to turn to for help than those with average and high mental wellbeing (75.3% LMW vs. 95.4% HMW). There was no difference between biological sex with having someone to go to for help; however, pupils who reported identifying as gender fluid (58.7%), non-binary (75.3%) or transgender (71.0%) were significantly less likely to have someone to turn to for help than cis gendered pupils (85.3%).

Around 1 in 6 secondary and post 16 pupils report ever having support for their mental wellbeing from a health professional.

Overall, pupils from minority ethnicity backgrounds were significantly less likely to have received support from a professional than their White British peers. This was mainly driven by pupils with a south Asian background (Bangladeshi, Indian or Pakistani) who had significantly lower proportions of pupils reporting accessing professional mental health support. This could be due to factors such as stronger support systems in these communities or increased stigma around mental health issues.

Pupils from all vulnerable groups were significantly more likely to have received mental health support from a professional than their less vulnerable peers. Those known to Children's Social Care and those identifying as LGBTQ+ were the most likely to have received mental health support from a professional (37.0% and 41.3% respectively).

2,154 (16.4%) pupils who were not receiving professional mental health support reported they felt they would have benefitted from it. This increased as pupils aged, 1 in 5 post-16 pupils who had not received support felt they would have benefitted from it.

Pupils with SEN/EHCP were more likely to say they didn't receive professional mental health support because; *Still on waiting list* and *It was too difficult to get an appointment* prevented them from accessing support.

Pupils known to social care were more likely to say they didn't receive professional mental health support because; *My appointment was cancelled*.

LGBTQ+ pupils were more likely to say that they didn't receive support because; *Didn't know who to ask*, *Didn't want parents to know* and *Didn't want teachers/school to know*.

Of all the vulnerable groups pupils who were young carers and those from the LGBTQ+ community were significantly more likely to report *I tried but adults didn't take me seriously or understand* compared to their less-vulnerable counterparts (not young carers and Cis-gendered/heterosexual pupils respectively).

