

Gloucestershire Online Pupil Survey

2018

Contents

Foreword	3
Introduction to the Online Pupil Survey (OPS)	4
Headline findings from the 2018 OPS	6
Healthy lifestyles and behaviours	8
Healthy eating and body weight	8
Physical activity	10
Smoking	12
Drugs and alcohol	14
Emotional wellbeing and relationships	16
Wellbeing and mental health	16
Sleep	18
Relationships and sex	20
Feeling safe and staying safe	22
School life	24
What happens to the results?	26

Gloucestershire Online Pupil Survey 2018 Acknowledgements

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Foreword

Welcome to the Online Pupil Survey report for 2018.

I am pleased to be sharing with you the findings of the 2018 Online Pupil Survey. Since it started in 2006, the survey has provided a unique and invaluable insight into the experiences and lives of the county's children and young people both in and out of school.

The 2018 survey is the largest yet, with the voices of over 32,000 pupils and students captured across 96% of Gloucestershire's schools and colleges. The survey covers a number of key aspects of young people's health and wellbeing, from their lifestyle choices and engagement with school through to their emotional wellbeing and aspirations for the future. Do they enjoy school? Have they experienced bullying? Do they have someone to turn to for help?

As well as helping us to understand how young people's experiences have changed over time, the survey also provides an opportunity to explore the impact of emerging issues on our young people. The 2018 survey includes new questions on online safety, and for our older participants, questions on Adverse Childhood Experiences, also known as ACEs. ACEs, traumatic events occurring in childhood, can be an indicator of poorer health and social outcomes in later life. We are currently carrying out further analysis of the ACEs' findings.

Positively, the 2018 survey found that the majority of pupils are happy and feel safe at home and at school. However this isn't true for all pupils, and we must continue to work together to ensure that everyone has the best start in life. The survey shows that wellbeing tends to decline as children get older and move through the school system; and there is an ongoing need to build young people's resilience and support system.

This report only presents a summary of the key findings from the OPS, and over the next two years the county council will be taking an in-depth look at the results.

The 2018 results have already been shared with schools and colleges to help them identify areas for improvement and action. The findings will also be used by colleagues in the council and our partners to inform our work with children and young people going forward.

I hope you enjoy this report and find its content insightful and useful. It is a unique opportunity to hear from Gloucestershire's young people and I'd like to thank all the participants for sharing their experiences with us.



A handwritten signature in blue ink that reads "Sarah Scott".

Sarah Scott
Director of Public Health

Introduction

The Gloucestershire Online Pupil Survey (OPS) was first carried out in 2006, and has been repeated every two years, with the latest survey conducted in the Spring Term of 2018.

The OPS is commissioned by Gloucestershire County Council (GCC) and run by an independent research company.

The purpose of the OPS is to provide information on the health and wellbeing of children and young people attending schools and colleges in Gloucestershire, with the aim of informing work, both in and outside of school, to improve the lives and outcomes of the county's young people.

The OPS uses age appropriate questions and is carried out in specific year groups in primary (Years 4, 5¹ and 6), secondary (Years 8 and 10), and post 16

(Year 12/Further Education) settings. There is also a version of the survey for children and young people with learning difficulties.

The survey covers a range of areas, including young people's lifestyle choices and behaviours, emotional wellbeing, relationships, school experience, and safety.

The survey has grown over time and participation by schools and individual pupils remains voluntary. Gloucestershire's Further Education colleges (FE) took part for the first time in 2012 and independent schools joined in 2014.



Snapshot of the 2018 survey sample

33,000

children and young people aged between 8 and 18 years participated, resulting in:

32,117

complete records once the data had been 'cleaned'.

This is the largest response rate yet, and is equivalent to

88%

of pupils in the selected year groups.

The pupils came from a total of

311

schools, colleges and other educational establishments across the county; representing:

97%

of primary schools

98%

of secondary schools

74%

of FE providers

94%

of the county's special schools and 'Alternative Provision'² Schools.

Of the sample of 32,117 young people:

49% were male 51% were female

Where stated, 81% of students gave their ethnicity as 'white British'
16% identified themselves as being from another ethnic group

49% were attending primary schools (Years 4, 5 and 6)

33% were attending secondary schools (Years 8 and 10)

18% were in post 16 education (Year 12/FE)

6% of participants self-identified as having a disability

8% reported that they had Special Educational Needs (SEN) or an educational health care plan



Headline findings from the 2018 OPS

7 out of 10 pupils (71%) said they were happy and three quarters (75%) were satisfied or quite satisfied with their lives. However, wellbeing tends to decrease as pupils get older (particularly in girls) and there has been a gradual decline in overall life satisfaction since the 2010 survey.

Stress from school work increases as pupils get older, and girls are more likely to feel stressed than boys. Overall, 1 in 5 pupils (21%) frequently woke or couldn't sleep because they were worried about something.

Although the vast majority of pupils feel safe at home (92%) and at school (82%), 3.5% of pupils don't feel safe at home and 7% feel unsafe at school.

While 7 out of 10 primary school pupils (71%) enjoy school, only half of secondary schools pupils (50%) feel the same. However overall, 76% of pupils felt that school gave them useful skills and knowledge.

Almost 9 out of 10 (86%) pupils said the food provided at home enabled them to eat healthily most of the time. However, over a third of pupils (36%) have three or more unhealthy snacks a day and boys eat more unhealthy snacks than girls.

72% of pupils are doing at least four hours of physical activity a week, but only 45% of pupils are doing 6 hours or more. The recommended level of physical activity for young people is at least 7 hours a week.

91% of secondary school and Year 12/FE pupils have never smoked or only tried it once or twice, and only 3% are regular vapers.

Fewer young people are drinking alcohol. In 2006, 46% of secondary school pupils had never tried alcohol, or only tried it once or twice. In 2018, the figure was 77%.

97% of secondary pupils have never tried illegal drugs or have only tried them once or twice.

What is Gloucestershire Healthy Living and Learning (GHLL)?

The GHLL programme was launched in 2012 to support and promote health and wellbeing in schools and colleges across Gloucestershire. It aims to help children and young people to achieve their full potential and lead healthy and happy lives.

GHLL, developed by Gloucestershire County Council, provides schools with free resources and training to enable teachers to support their students on issues relating to their physical, emotional, and mental wellbeing.

Schools are also supported to work toward the GHLL 'Healthy School' or 'Healthy Further Education' accreditation, which requires schools to demonstrate that they have made a measurable difference to the health and wellbeing of their students. Currently, 56% of schools/colleges in the county have received the award (which is valid for three years); and a further 40% are actively working on their review.

GHLL's work with schools and other partners is informed by the findings of the OPS, and the GHLL team play a key role in engaging schools and colleges in the survey.



Healthy lifestyles and behaviours

Healthy eating and body weight. Eating habits are formed in early life, so it is important that children and young people eat a healthy balanced diet, which includes the essential nutrients they need for healthy growth and development, and to maintain a healthy weight.

Research shows children who stay a healthy weight tend to be fitter, healthier, better able to learn, and more self-confident.

What does the OPS data tell us?

Research suggests that children who eat breakfast tend to eat more healthily overall. 76% of pupils reported eating breakfast regularly, i.e. every morning or most mornings. This number has remained fairly constant since the 2010 survey (except for Year 10 girls). However, as pupils get older they are less likely to eat breakfast regularly. Generally girls eat breakfast less frequently than boys. Overall, 15% of boys reported that they never, or did not often, eat breakfast, compared to 20% of girls.

It is recommended that children limit their intake of sugary or high fat snacks and fizzy drinks, which tend to be high in calories and low in nutrients. In 2018, 36%

Did you know?

In Gloucestershire 10% of reception aged children are living with obesity compared to 9.5% in England.

of pupils reported having three or more snacks every day (for example sweets, chocolate, biscuits, and crisps). This is similar to previous years. Boys consistently reported eating more unhealthy snacks than girls. Nearly a third (29%) of pupils consumed fizzy drinks at least once a day. This increases with age and boys consume more than girls. However, the trend for consumption of fizzy drinks has declined since 2014.

Positively, 86% of pupils stated that the food provided at home enables them to eat healthily most of the time. This figure has remained stable since 2012 across all age groups and has risen from the 2006 figure of 82%.

When asked about any support they might need from school, 21% of pupils felt they needed more support and knowledge about healthy eating, 23% wanted more knowledge about losing weight, and 32% wanted more cooking skills.

What are we doing?

It is estimated that the food a child eats at school accounts for a third of their nutritional intake in a day, so it is important that what is provided in school, or is brought in, is nutritious and balanced. Schools in Gloucestershire support this ethos. Most primary schools will have a healthy eating policy and guidelines on preparing a healthy lunchbox.

Schools are supported to promote healthy eating through staff training, the provision of teaching resources and sessions for students and parents.

Schools can choose to focus on healthy eating as part of their GHLL accreditation. Examples of projects which have been introduced include cooking and tasting sessions with a focus on fruit and vegetables.

Outside of the school setting, the county council and NHS Gloucestershire Clinical Commissioning Group (CCG) are working together to introduce healthy weight support for children and young people experiencing obesity and living in areas of highest need. The service will be developed with input from children and young people.

'Jumpstart' was developed by GHLL in conjunction with Gloucester Rugby Club. It aims to encourage children to think beyond the '5 a day' message and consider the effect of food on both their bodies and brains.



Physical activity. Children need to be active every day to promote their healthy growth and development. Keeping active can also help improve young people's quality of sleep, concentration, and confidence.

The Government recommend that 5-18 year olds undertake at least one hour of physical activity every day for their health and wellbeing.

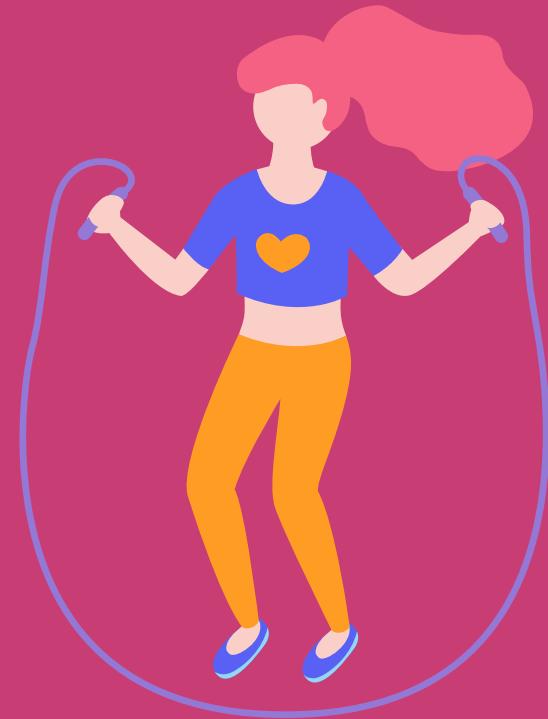
What does the OPS data tell us?

In the 2018 survey fewer than half (45%) of pupils reported doing 6 or more hours of physical activity a week, and boys were more likely to meet this level than girls.

While the majority of pupils aren't meeting the recommended levels of physical activity, 72% of pupils did report doing at least 4 hours of physical activity (including active play) each week. This is an increase from the 2016 level of 67% and is mainly due to the increase in physical activity levels in girls and in the primary phase.

Overall, 66% of pupils felt they did enough exercise to keep themselves healthy (62% of girls and 71% of boys). Of the pupils who said they were active for only two hours or less a week, only 37% recognised that this was not enough to keep themselves healthy. Girls who were less active were more aware than boys that they were not active enough.

The most important reasons that secondary pupils gave for their decision to be more physically active were getting fit, feeling physically good, and enjoyment. Pupils who were less active cited lack of time, lack of ability, and lack of enjoyment.



What are we doing?

GHLL have worked in partnership with Active Gloucestershire during 2017/18 on a dedicated programme of work to support schools to boost the physical activity levels of their pupils.



The Daily Mile

Funding from the county council and the NHS in Gloucestershire is supporting The Daily Mile initiative in primary schools across the county. The initiative gets children walking, jogging or running for 15 minutes each day. 127 schools in Gloucestershire signed up to the summer 2018 campaign. This is just over 50% of all primary schools and 22,500 pupils. Active Gloucestershire is working with more schools across the county to increase participation.

Smoking. Child and adolescent smoking is a serious risk to lifelong health. The earlier people become regular smokers the harder it is to quit and the greater the risk of developing respiratory problems, cancers and heart disease.

What does the OPS data tell us?

Positively, most secondary school pupils do not smoke. 95% of secondary pupils reported that they had never smoked or had only tried it once or twice.

Young people are more likely to try smoking as they get older. By the time they reach Year 12/FE, only 69% of pupils reported never having tried smoking compared to 93% in Year 8 and 80% in Year 10.

Vaping is increasingly popular in the UK and there are concerns that this increase may result in young people taking up vaping, which could then lead to smoking. However, 83% of young people (secondary and Year 12/FE) said they had never vaped, 11% had tried it once or twice, and only 3% are regular vapers (weekly to daily).

Overall of those secondary pupils who did smoke, 45% would like to stop smoking.



What are we doing?

The county council commissions a Healthy Lifestyles Service which supports people to quit smoking. This service is available to children and young people and has held health promotion events in Cheltenham College, Gloucestershire College, and the University of Gloucestershire.

The service is also developing a peer support programme which has been piloted in 2018/19. The aim of the programme is to work with Year 8 and Year 10 pupils around risk taking behaviours with a specific focus on smoking.



Drugs and alcohol. It is important that young people have the knowledge and resilience to make informed decisions about alcohol and drugs. Alcohol and drug use during the teenage years is related to a wide range of health and social problems. It can lead to young people taking risks and putting themselves in harmful situations.



What does the OPS data tell us?

Positively, the OPS data indicates that the majority of the county's students are not taking drugs or drinking alcohol.

Between the Online Pupil Surveys carried out in 2006 and 2018:

- Fewer young people in Gloucestershire are drinking alcohol. The proportion of secondary school pupils reporting that they have never tried alcohol, or have only tried it once or twice, has risen from 46% to 77%.
- Fewer young people are taking illegal drugs. The proportion of secondary school pupils reporting that they have never tried illegal drugs, or have only tried them once or twice, has risen from 95% to 97%.

For the minority of secondary pupils (Years 8 and 10) who do drink alcohol regularly, frequency of alcohol consumption has remained broadly unchanged since 2014, with 16% drinking alcohol monthly and 7% drinking it weekly or daily. The most commonly reported source of alcohol for pupils who drink in Years 8 and 10 is 'home with their parents' permission'.

Since the survey started in 2006, there had been a steady decline in the percentage of secondary school pupils reporting that they had been offered illegal drugs. However, this has now started to rise. In the 2014 survey, 17% of Year 8 and 10 pupils reported that they had been offered illegal drugs compared to 22% in 2018. There has also been an increase in secondary pupils who have tried illegal drugs from 6.7% in 2014 to 8.1% in 2018. However, the proportion using drugs regularly remains low at around 3%.

The OPS also includes questions about New Psychoactive Substances (NPS) (formerly known as legal highs). Positively, there has been a reduction in the percentage of students who were offered NPS between the 2016 and 2018 surveys. In the 2016 survey, 10% of secondary school pupils and 29% of Year 12/FE students had been offered NPS. In the 2018 survey, this fell to 8.3% and 22% respectively. The proportion of students who have tried NPS has also fallen over the same period. Only 1.1% of secondary pupils and 2% of Year 12/FE students report using NPS regularly.

What are we doing?

GHLL produces a range of resources to support teachers to talk to students about alcohol and drugs. These cover issues such as the risks and harms to their health and safety, tackling peer pressure, and the link with emotional wellbeing.

The Gloucestershire Safeguarding Children's Board also provides training for schools and other professionals to help them identify young people who may be engaged in substance misuse and put them in touch with local sources of support.



The social norms approach

GHLL encourages schools to focus on the 'social norms approach' to health education, particularly around teaching on substance misuse and other risky behaviours.

The social norms approach works on the principle that humans are group oriented. We tend to look to others to determine our own behaviours and decisions. At the same time we also tend to overestimate the risky behaviours our peers are engaged in.

The social norms approach aims to correct young people's misperceptions by emphasising the proportion of their peer group who engage in positive and protective behaviours. This is an evidence based approach to health education which is proving to be effective in reducing a range of risky behaviours.

Emotional wellbeing and relationships

Wellbeing and mental health. A young person's emotional health and wellbeing has an impact across all other aspects of their life, including educational attainment, their ability to make friends, sleep, eat healthily, and keep active. It can also impact on their emotional health and wellbeing as an adult and their opportunities later in life.

What does the OPS data tell us?

Overall, 71% of pupils said they were happy, while 14% said they were unhappy. OPS data indicates that self-reported happiness tends to decrease as young people get older, and this is most noticeable in girls. 81% of boys in Year 4 reported that they were happy, compared to 69% of boys in Year 10. For girls, 81% in Year 4 were happy, compared to only 50% in Year 10.

The proportion of pupils reporting that they were satisfied with their lives follows a similar pattern. Overall, 75% of pupils reported that they were 'quite satisfied or satisfied' with their lives. However, life satisfaction was highest at primary level, and declined at secondary level and again at Year 12/FE. While 82% of primary pupils reported that they were satisfied with their lives, this fell to 64% by Year 12/FE. Again girls were less likely to be satisfied with their lives than boys, particularly at secondary level. There has been a gradual decline in overall life satisfaction among secondary pupils since the 2010 survey.

The OPS also asks pupils to score themselves against the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). WEMWBS is a validated tool used nationally, which can provide an insight into emotional wellbeing. Based on their WEMWBS scores, 81% of girls and 89% of boys had high or average levels of emotional and mental wellbeing.

However, 21% of secondary pupils and 25% of Year 12/FE students had scores indicating poor mental health. Again, the WEMWBS scores suggest that poor mental wellbeing tends to increase as pupils get older. Notably, a third of pupils in the 2018 survey (34%) said that they found it 'pretty tough to be me' often or all the time.

Some young people use self-harm as a coping mechanism for emotional distress and the OPS asks secondary school pupils and Year12/FE students whether they have ever self-harmed. In the 2018 survey, 81% of pupils had never self-harmed; 5.2% were self-harming weekly or daily.

Did you know?

Over half of mental health problems in adulthood begin by the age of 14 and 75% by the age of 18.³

What are we doing?

There is a range of initiatives and services in place both in and outside of schools to support young people with their emotional health and wellbeing. You can read more in the Director of Public Health's 2017/18 Annual Report 'Leading the way to wellbeing' which focuses on mental wellbeing in Gloucestershire.

GHLL provides resources and training to enable teachers to have a wider understanding of mental health issues affecting children and young people. Courses include Mental Health First Aid, which helps teachers to spot signs of mental health problems, and courses on self-harm. Resources are also provided to help teachers support pupils to understand their feelings and improve their resilience.

The GHLL Mental Health Champions Award, which was launched in 2016, has been created to acknowledge the commitment Gloucestershire schools have invested in supporting the mental health and wellbeing of their school community. This award gives schools the opportunity to showcase good practice and identify areas for further development. Currently, 35 schools have gained the award and around 260 schools and colleges are working toward it.



Beyond Fed Up

The teaching pack 'Beyond Fed Up' has been written by teachers for teachers, to enable them to tackle the sensitive subjects of emotional wellbeing, self-harm, and suicide.

It is designed for young people aged 11-16 years, and aims to help them understand their own mental health, build emotional resilience, and be aware of the needs of the young people around them. It also helps them have the confidence to seek help if they are concerned about their own feelings or the emotional health of their peers.

MenTalk and GirlTalk

MenTalk and GirlTalk are a series of eight sessions delivered to all Year 8 and 10 pupils in secondary schools across the county. The programme, commissioned by Gloucestershire County Council, is delivered by a sports coach combining physical activity with emotional health. 91% of pupils participating in the most recent GirlTalk programme said they found the programme useful and 88% would recommend it to a friend. Participants reported feeling more relaxed, confident, and better able to handle stress.

Sleep. A good night's sleep is important for a child's physical and mental wellbeing and their development. It is recommended that teenagers get around nine hours sleep a night; increasing to 10 hours for children aged 8 to 10 years. Anxiety and 'screen time' before bed can impact on how well children sleep, and the NHS recommend that young people stop using screens an hour before bed time.

What does the OPS data tell us?

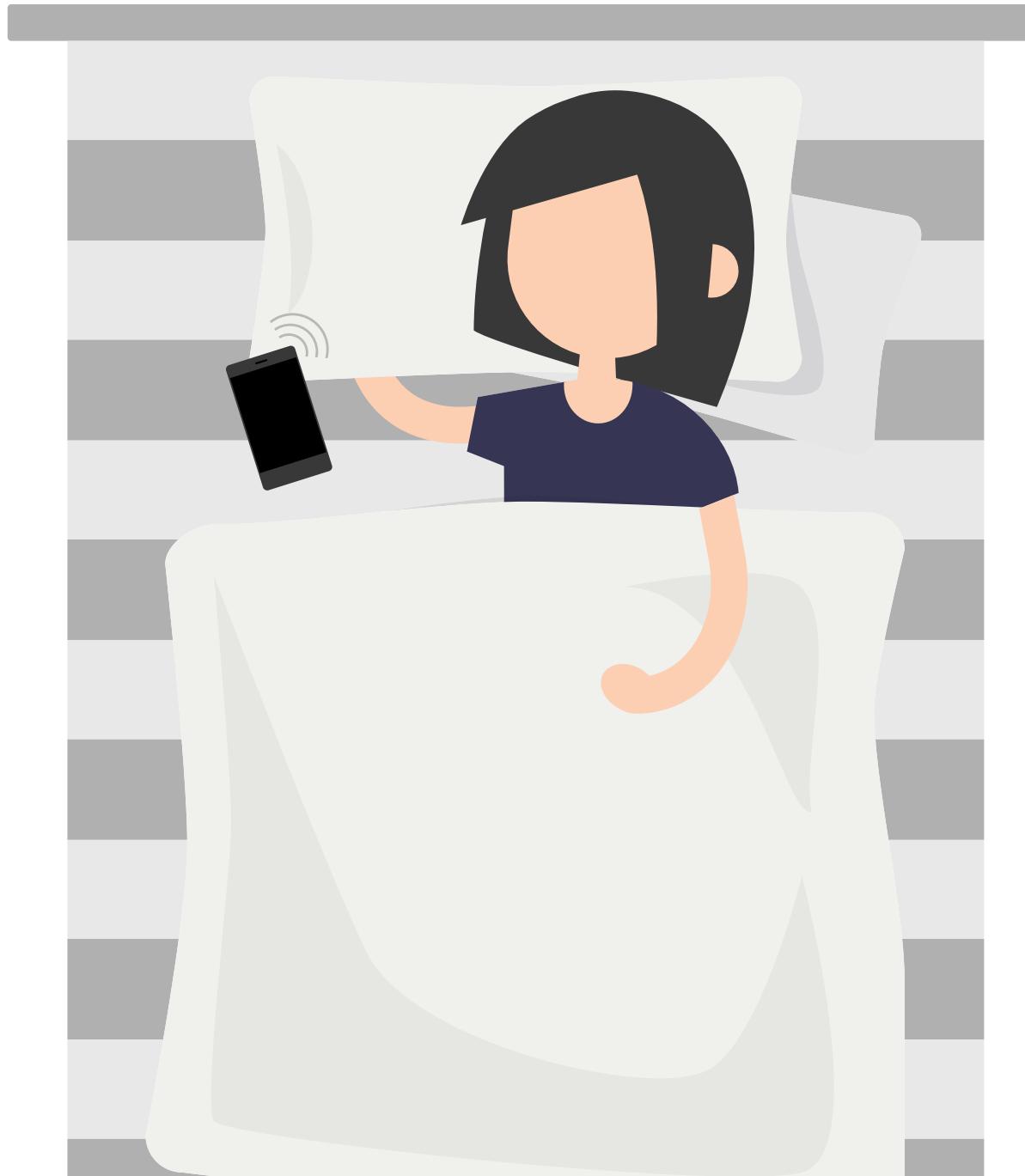
The average time that primary children were in bed the night before the survey was 9 hours and 15 minutes. This is below the recommended 10 hours. Secondary pupils were in bed for on average 7 hours and 20 minutes; again below the recommended amount of sleep for teenagers.

Overall, 21% of young people reported that they frequently woke or couldn't sleep because they were worried about something. In secondary school, this

was more common among girls and highest for girls in Year 12/FE, a third of whom (32%) frequently were woken or couldn't sleep due to worrying.

62% of secondary school pupils and 65% of primary school pupils reported taking an hour or longer to fall asleep. While the majority reported just lying there, relaxing, or listening to music, 44% of secondary pupils and 19% of primary pupils said that they were using social networks, the internet, or computer games between going to bed and falling asleep.





Relationships and sex. It is important that young people have the understanding and emotional skills they need to form healthy and safe relationships, and make informed decisions about sex when the time is right.

Lack of knowledge and information about sex and relationships may mean that young people find themselves in harmful situations. It can also lead to unplanned pregnancies and Sexually Transmitted Infections (STIs).



What does the OPS data tell us?

Positively, 81% of secondary school pupils and 76% of Year 12/FE students said that the teaching they'd had on healthy relationships and sex had been helpful; however, 21% of Year 10s and 11% of Year 12/FE students wanted more support with and knowledge about safer sex.

18% of Year 12/FE students reported that they didn't feel confident about using a condom, and of the

Year 12/FE students who had had sex, 14% did not use any contraception when they last had sexual intercourse.

17% of secondary students wanted more knowledge about or support with sexual identity, an increase on the 2016 survey. Notably, 15% of secondary pupils and 15% of Year 12/FE students said that they'd been bullied in the last year because their peers thought they were gay, lesbian, or bisexual.

What are we doing?

In September 2020, it will become a statutory requirement for all schools in England to provide age appropriate Relationships and Sex Education (RSE) to their students (RSE for secondary schools and Relationships Education for primary schools). GHLL have provided all schools in the county with up to date resources and training to support this.

Schools in Gloucestershire are also able to access free training, provided by the charity Stonewall, to help staff learn practical techniques for tackling homophobic, bi-phobic, and transphobic bullying, and promote diversity and inclusivity.



The Gloucestershire school nursing team

Gloucestershire's school nurses are qualified public health nurses who work with children and young people aged 5 to 19 years, and their families, both in and outside of school.

The school nurse team can offer support and advice on a range of health issues, including relationships and sexual health, emotional wellbeing, anxiety, bullying, and healthy lifestyles. Support is offered face to face through school based 'drop-ins', in groups or one to one, and digitally via confidential text messaging.

School nurses play a vital role in supporting pupil's health and wellbeing, and also work closely with social care to keep children and young people safe from harm.

School nurses aim to provide a service that is visible, accessible and confidential. One young person described the school nurse as 'someone you know you can trust'.



Feeling safe and staying safe

Feeling unsafe has a significant impact on a child's wellbeing, with knock on effects for their mental and physical health in both the short and long term.

What does the OPS data tell us?

The vast majority of pupils in Gloucestershire feel safe at school and at home, with 92% saying they felt safe at home and 82% feeling safe at school. A total of 3.5% of pupils said they felt unsafe at home and 7% reported feeling unsafe at school.

National data tells us that one in five children are exposed to domestic abuse and that children exposed to domestic abuse are more likely to have behavioural and emotional problems.

Secondary and Year 12/FE students were asked if they or anyone in their immediate family had ever been a victim of domestic abuse; 81% had not, but

5% had frequently been abused or witnessed abuse. In the majority of cases, the abuse had taken place in the past, but for some pupils (just over 300 of the Year 8s, 10s and 12/FE students surveyed) the abuse was reported as ongoing.

While the internet and social media have introduced new opportunities for young people, they also come with new risks. 18% of secondary pupils reported that they had met a stranger in the real world that they had first got to know online. Of these, a quarter (26%) said that they went on to meet the stranger on their own. In the vast majority of cases the stranger was about the same age, but in a small number of cases (2.5%) the stranger was an adult.



What are we doing?

Keeping children and young people safe is a core part of the curriculum. Anybody who works in an education setting has a duty both to protect the welfare of children who attend, and create an environment in which children feel safe and able to come forward if they are having problems.

Schools must have a Designated Safeguarding Lead and all staff have a responsibility for identifying safeguarding concerns and taking appropriate action.

Schools and colleges are required to carry out an annual audit of their safeguarding policies and procedures which is submitted to Gloucestershire's Safeguarding Children Board (GSCB). The audit asks schools about their engagement with their pupils on issues such as healthy relationships, domestic abuse, and grooming.

GHLL have also worked with the Gloucestershire Safeguarding Children Board and professionals working in domestic abuse to create two new training resources for secondary schools focused on teenage relationship abuse and understanding consent.

Outside of the classroom, there are a number of organisations in the county working to provide support to young people affected by domestic abuse and harmful relationships, including the Gloucestershire Domestic Abuse Support Service (GDASS) and the Hollie Gazzard Trust.

'Keeping Myself Safe' is a school-based resource designed to teach children and young people that they have the right to be safe at all times, and how to recognise and manage unsafe situations.



School life

The OPS includes questions about pupils' experiences at school.

What does the OPS data tell us?

Overall, 63% of pupils reported that they enjoyed school. The proportion of pupils enjoying school was highest amongst primary school pupils (71%), and lowest amongst those at secondary school, where only half of pupils (50%) reported that they enjoyed school.

Positively, overall 76% of pupils felt that school gave them useful skills and knowledge.

Bullying has a significant impact on children's emotional wellbeing and their engagement with school. In the 2018 survey, 15% of pupils reported being 'seriously bullied' on a regular basis (monthly, weekly or daily) in the past year, with verbal bullying remaining the most common form. The proportion of pupils reporting that they had been seriously bullied decreased as pupils got older. While 19% of pupils at primary level reported being bullied, this reduced to 8% of students in Year 12/FE.

All pupils were also asked how well their school dealt with bullying. Between the 2006 and 2016 surveys there was an increase from 55% to 61% in the

proportion of pupils who felt their school dealt with bullying well. However, in 2018 this dropped back to 58%.

The proportion of pupils who were stressed by school work increased as pupils got older. While a third of primary school pupils (33%) reported being stressed, this rose to 56% of secondary school pupils and 64% of students at Year 12/FE. Girls were notably more likely to feel stressed from school work than boys at both secondary and Year 12/FE levels.

While not solely related to school life, school can play a role in helping students feel confident about their futures. Overall, just under two-thirds of pupils (65%) reported feeling confident or extremely confident about their future; however, confidence declined between primary and secondary school pupils, and again at Year 12/FE. Only half of Year 12/FE pupils (51%) felt confident about their futures compared to 77% of primary school pupils. Confidence among secondary school pupils (currently at 55%) has also fallen since the 2010 survey.



What are we doing?

The results of the OPS play a role in helping schools understand their pupils' school experiences and identify areas for improvement. A number of schools have used the findings to inform anti-bullying initiatives and activities aimed at improving young people's welfare and wellbeing at school.

One of the ways that schools have been promoting positive mental wellbeing is through the 'Five Ways to Wellbeing' (connect, be active, take notice, keep learning, give).⁴ The OAKS challenge (One Act of Kindness Shared) encourages pupils to complete each of the Five Ways to Wellbeing as alternative homework, while the Positive Playground Practice initiative encourages them to adopt the Five Ways to Wellbeing during break and lunch times.

What is restorative practice?

We are happier, more cooperative and more likely to make positive changes when people in authority do things with us, rather than to us or for us. Restorative practice is based on this principle. It seeks to build and maintain healthy relationships, a sense of community, and a shared sense of accountability by inspiring people and communities to feel able to resolve their problems and shape their own futures.

Restorative Practice can play a role in building young people's resilience and the approach is being piloted in a number of schools in the county. Initial results from the pilots indicate that the approach has had a positive impact on reducing disruptive behaviour, increasing emotional literacy, and strengthening a sense of community.



⁴The 'Five Ways to Wellbeing' was developed by the New Economics Foundation. They are evidence based everyday activities that people can do to improve and maintain their mental wellbeing.

What happens to the results?

This report only presents a summary of some of the main findings from the OPS and over the next two years we will be taking an in-depth look at the results. This will include the publication of a number of 'deep dive' reports focusing on specific topic areas.

The 2018 results have already been shared with participating schools and colleges across the county. Schools are able to use the findings to help them identify areas for improvement and action; and work toward their 'Healthy School' or 'Healthy FE' accreditation, or Mental Health Champion Award through the GHLL programme.

The findings are also used by the county council and its partners to inform their wider work with children and young people.

You can read more about the health and wellbeing of children and families in Gloucestershire in the **2016/17 Report of the Director of Public Health 'Securing the Health of Our Future'**. You can also find out more about the GHLL programme on the **GHLL website**.



