North East Lincolnshire Adolescent Lifestyle Survey 2015

School Years 7-11 (Ages 11-16)

Public Health Intelligence Unit

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1 Key Findings

This report presents the key findings from the 2015 Adolescent Lifestyle Survey for North East Lincolnshire. The 2015 survey was the fourth locally conducted Adolescent Lifestyle Survey in North East Lincolnshire, following the 2004, 2007 and 2011 surveys, and was offered to all young people of secondary school age (years 7 to 11; ages 11 to 16). Eight out of the ten mainstream secondary academies in North East Lincolnshire took part in the survey with a total of 4266 responses (51.6% of registered pupils) included in the final analyses. The key points are presented in the following pages with more in depth analysis available in the main body of the report.

General Characteristics

- The majority of young people speak English and a small proportion said they spoke Polish.
- Most young people identified themselves at White British but this proportion has reduced with each successive survey.
- Males were more likely to say they had a health problem than females with approximately 9% of all young people stating they have a health problem. Asthma was the most commonly reported health problem followed by mental health.
- More than 1 in 10 young people said they spent time caring for someone at home but this has reduced in comparison to the 2011 survey.

Food and Exercise

- Half of all young people eat breakfast everyday (a slight increase on 2011) and younger people are more likely to eat breakfast everyday than older children.
- 14% of young people receive Free School Meals, a lower proportion than in 2011 (20%).
- Most young people have a packed lunch or a school meal. Older children, especially females, are more likely to say they don't eat anything for lunch.
- Just over a tenth of young people eat the recommended 5 portions of fruit and vegetables a day with an overall average consumption of 2.6 portions per child and over half of all young people said they would like to eat more healthily.
- Only a fifth of young people meet the recommended amount of physical activity of a minimum of 1 hour every day.
- Males were more likely to take part in more physical activity and sport than females, both in school and outside of school.
- Almost half of young people were happy with their weight. There were a higher proportion of females who would like to lose weight than males.
- Over 90% of young people had been to the dentist in the past year which was higher than in 2011 (80%).

Happiness and Home Life

- Most young people feel happy about their life.
- Females were more likely to report poor emotional wellbeing than males with females more likely to report feeling sad or tearful, anxious or depressed, to worry and wishing they had a different kind of life.

- Females scored lower on the Short Warwick Edinburgh Mental Wellbeing Scale than males.
 This score dropped for females as age increased whereas males scored similarly across all ages.
- Most young people would deal with problems by talking to someone. Small proportions of young people said they would smoke cigarettes, drink alcohol or cut/ hurt themselves to deal with a problem.
- Females were more likely to worry about problems than males. Two fifths of females said they worry a lot about the way they look, their weight, and school work. Males were most likely to worry about the future and job prospects and school work.

Smoking

- Most young people don't smoke.
- Regular smoking prevalence has reduced by over a quarter amongst young people since 2011. The proportion of 15 year old smokers has reduced by almost half in recent years from 15.6% in 2011 to 7.6% in 2015.
- Smoking prevalence for 15 year olds in North East Lincolnshire is still higher than the national (5.5%) and regional (6.2%) prevalence with 7.6% of 15 year olds smoking regularly locally.
- Females are more likely to be regular smokers than males.
- The majority of young people who smoke said they get cigarettes from friends or relatives and most have never tried to buy cigarettes.
- If someone smokes in their home, young people are almost 3 times as likely to be a smoker than those who say that no one smokes at home.
- Young people who smoke are considerably more likely to report worse emotional health than those who have never smoked
- Young people overestimate how many people their age smoke and most young people do not think its ok for people their age to smoke.
- Less than 5% of young people regularly smoke e-cigarettes. More males smoke e-cigarettes than females.
- 6.5% of all young people reported smoking cigarettes and/ or e-cigarettes.
- 40% of 15 year olds had tried e-cigarettes.

Alcohol

- The proportion of young people who have consumed a whole alcoholic drink has continued to decrease with less than half of young people saying they have had a whole alcoholic drink.
- The proportion of 15 year olds reporting having tried a whole alcoholic drink is still considerably higher than the national and regional percentages.
- The proportion of 15 year olds who report being drunk in the last four weeks is higher than both the national and regional percentages.
- Most young people only drink alcohol on special occasions.
- Females are more likely to have been really drunk in the last four weeks than males.
- Young people who have been really drunk in the last four weeks are more likely to report lower emotional health than those who have not.

- Of those who have drunk alcohol most said that their parents give alcohol to them
- Young people who drink alcohol say that they usually drink alcohol at a friend's house or at home.
- A lower proportion of young people thought that people their age drink alcohol in 2015 compared to 2011.

Drugs

- Most young people have never tried drugs.
- A slightly higher proportion of young people had been offered drugs in 2015 than in 2011.
- A tenth of young people had been offered legal highs.
- The most commonly used drug amongst young people was cannabis (8%) followed by legal highs (4%). Two fifths of young people said they had seen others use cannabis and a fifth said they knew where to get cannabis.
- A tenth of 15 year olds said they had tried cannabis, considerably lower than in 2011.
- Young people who reported having tried drugs had significantly worse emotional health than those who had not tried drugs.

Relationships

- A tenth of all young people said they have had sex.
- The proportion of children who have had sex has reduced considerably since the last survey across all age groups.
- Females are more likely to have had sex than males.
- The main method of contraception used was a condom.
- Almost a quarter of those who have had sex said they used nothing last time they had sex; up from 5% in 2011.
- The proportion of young people using LARC methods has increased slightly.
- Knowledge of STI's has dropped amongst young people since 2011.
- Less than half of young people thought that young people should wait until they are 16 before they have sex.

Feeling Safe

Most young people said they feel safe in the area they live.

Internet Safety

- A third of young people said they had seen images on the internet which made them feel uncomfortable.
- Over half of young people said they had received messages from someone they don't know while online.
- A small proportion of young people said they had met up with someone who they had initially met online with older children being considerably more likely to do so.
- A small percentage of young people said they had been pressured to do something they were not comfortable with while online.

Bullying

- Most young people have not been bullied in the last year.
- Young people who say they have been bullied in the last year are more likely to report poorer emotional health.
- The majority of bullying reported was in the form of verbal/ mental followed by cyber bullying. The proportion of young people reporting cyber bullying has almost doubled since 2007 whereas physical bullying has dropped.
- Most bullying takes place at school and half of those who said they had been bullied in the last year said they felt afraid to go to school.
- Religion, disability, race and sexuality were the least likely reasons for bullying whereas the
 way you look, weight, being good at something and social group were the most common
 reasons for being bullied.
- Less than half of young people felt their school takes bullying seriously.

Domestic Violence

- Most young people understand the government definition of domestic violence. Younger children however, were considerably less likely to understand the definition than older children.
- Most young people said they have never seen or witnessed domestic violence in their family
 with a higher proportion of young people saying this with each successive survey from 2007
 onwards.
- Nearly all young people said they felt safe in their own home.
- Over half of young people said they would call the police if someone in their family was physically hurting them or another family member.

Living, Learning and the Future

- Over half of young people thought that North East Lincolnshire was a good place to live.
- Young people felt that there are lots of places to be social in North East Lincolnshire but less than a tenth thought that North East Lincolnshire was a place with good job prospects for their future.
- The majority of young people want to do well at school. More young people now consider achieving good results in school work as very important than in 2011.
- Over half said they would like to go to college/ university at the end of year 11.
- A greater proportion of children are now saying that they think they will be living in the local area in 5 and 10 years' time when compared with 2011.

2 Introduction

2.1 Background

This report provides an analysis of all data collated in the fourth locally conducted Adolescent Lifestyle Survey in North East Lincolnshire. The Adolescent Lifestyle Survey is a health and lifestyle themed survey offered to young people at secondary school in North East Lincolnshire. The survey gathers localised intelligence pertinent to identifying the health and social needs of young people in the area. The survey was completed previously in 2004, 2007 and 2011 with a wider demographic of young people being offered the survey in each successive survey. The 2004 survey was offered to school years 7 to 10 with the 2007 extended to year 11 and the 2011 survey offered to young people in further education (aged 16-18 years). The 2011 survey was also the first time the survey was conducted completely electronically using the online survey software Survey Monkey®.

2.2 Methodology

Following the success of the online version of the survey in 2011 it was decided to use the online format again in 2015. Running the survey online significantly increases survey completion time at the point of entry for the young people as well as removes the risk of human input error associated with manual data entry from physical paper-based surveys. The electronic surveys also speed up the analysis time and ensures reporting is available in a more timely manner.

Prior to offering the 2015 survey to young people, a process of development was undertaken to improve survey delivery, increase survey question engagement (and subsequently improve response rates) and to identify new and emerging themes. This process involved the following steps:

1. Evaluation of 2011 survey questions

- 135 questions from previous surveys were evaluated and response rates were calculated.
- For poorly responded to or inappropriately answered questions alternative question format/ wordings were considered and if necessary questions were removed.
- Response rates for free text questions were found to be particular low and as a result it
 was decided to create tick box questions to replace these based on responses to the
 relevant questions in the 2011 survey.

2. New question development

- Liaised with local service providers and stakeholders to identify new themes and amend existing questions to capture relevant data.
- Liaised with other LA's to understand how other areas had approached identifying new themes.
- New/ amended themes include emotional health (e.g. use of validated tools to measure emotional health), e-cigarettes, child sexual exploitation, internet/social media safety, social norms and aspirations.

3. Survey process appraisal

• Improved question/ page filtering and logic to remove non-applicable questions based on responses on proceeding questions.

From the original 134 questions a total 64 questions were removed and an additional 22 questions were included. A further 37 questions from the original question set were slightly amended to include additional response options or to simplify wording etc. The 2015 survey consisted of 92 questions in total.

Preliminary investigations suggested that the total survey completion time was reduced from approximately 30 to 35 minutes in 2011 to approximately 15 to 20 minutes in 2015. It was anticipated that response rates to questions later in the survey would significantly improve as a result of the reduced survey completion time and improved filtering and question logic.

Once a first draft of the survey had been developed and uploaded onto Survey Monkey[®], it was piloted with a group of young people who were identified through the Young Reporters scheme in North East Lincolnshire. Any survey or software issues identified by the Young Reporters were then rectified and this also gave them the opportunity to comment on question wording etc. which was later discussed by the project team.

The Children and Young People's Partnership Board acted as a sponsor for the survey and offered a direct link to secondary school head teachers. Representatives from the Public Health team attended the secondary heads meeting to promote the survey, showcase findings from previous Adolescent Lifestyle Survey reports and encourage their schools to participate in the survey. This also offered the opportunity for any concerns and questions from the head teachers regarding the survey process to be immediately addressed. As a result of the meeting, all 10 local secondary academies agreed to run the survey within their schools and provided contact details for a nominated lead. The nominated leads were then able to highlight any potential technical issues as well as plan accordingly to schedule the delivery of the survey in the Autumn Winter school term of 2015.

Young people who are not currently enrolled with main stream education, such as those in alternative provision or are home schooled, were also offered the survey by contacting service providers directly.

The survey was open for completion between 3rd September to 18th December 2015. Following a request from a number of schools for a short extension, the deadline was extended until the 22nd January 2016 to obtain additional responses.

It was recommended, as with the surveys in previous years, that the survey should be completed in exam type conditions. All information that was collated from young people was anonymous (no identifiable information was obtained), treated confidentially and stored securely.

During the period in which the survey was open to completion it was possible to check the progress each school was making by comparing the number of young people that had completed the survey against the number of young people registered on the North East Lincolnshire school census. This enabled the project team to prompt the relevant schools with low participation rates accordingly during the school term.

The aggregated dataset was analysed using Microsoft Excel and IBM SPSS. Trend analysis with the previous locally conducted surveys was undertaken using the relevant age groups and comparisons with national data where appropriate.

It should also be acknowledged that although this report is for North East Lincolnshire as a whole, considerable geographical differences in the lifestyle behaviours of adolescents are likely to exist. Furthermore, variations between the different schools who took part in the survey are also expected to be found. Therefore, a separate schools report is also being prepared and shared directly with the schools.

2.3 Response Rates

As of October 2015 there were a total of 8220 young people registered in school years 7 to 11 in North East Lincolnshire. This also includes those in alternative provision. Once the survey was closed there were 4804 responses received with 538 spoiled responses removed from the final analyses. The remaining 4266 responses gave an overall response rate for the 2015 Adolescent Lifestyle Survey of 51.6%. Table 1 shows the response rates for each year group and gender based on the North East Lincolnshire school census completed in October 2015. It should be noted that not all children responded to all questions in the survey and as such individual analyses of questions will not include the total number of responses received. Furthermore the total number of responses in Table 1 is slightly lower than the figure presented above due to a number of children not answering either the gender or year group question.

Table 1 Calculated response rates from October 2015 school census

		Female			Male			Total	
	Total Pupils	ALS Responses	Response Rate	Total Pupils	ALS Responses	Response Rate	Total Pupils	ALS Responses	Response Rate
Year 7	850	285	33.5%	888	327	36.8%	1738	612	35.2%
Year 8	858	458	53.4%	826	425	51.5%	1684	883	52.4%
Year 9	786	449	57.1%	835	490	58.7%	1621	939	57.9%
Year 10	776	458	59.0%	789	507	64.3%	1565	965	61.7%
Year 11	801	444	55.4%	811	392	48.3%	1612	836	51.9%
Total	4071	2094	51.4%	4149	2141	51.6%	8220	4235	51.5%

3 General Characteristics

3.1 Year and Gender

Table 2 shows the distribution of responses for year group and gender. Overall a slightly higher proportion of males (50.6%) than females (49.4%) completed the survey which was very similar to the 2015 school census male female distribution of 50.5% to 49.5%. The gender splits for each year group were relatively equal and within the expected range. There were a slightly lower proportion of responses received form children in year 7 compared to the other year groups.

Table 2 Number and distribution of responses by age and gender

Gender	Year 7	Year 8	Year 9	Year 10	Year 11	Total
	No. % split					
Male	327 53.4%	425 48.1%	490 52.2%	507 52.5%	392 46.9%	2141 50.6%
Female	285 46.6%	458 51.9%	449 47.8%	458 47.5%	444 53.1%	2094 49.4%
Total	612	883	939	965	836	4235
% of all ages	14.5%	20.9%	22.2%	22.8%	19.7%	100%

3.2 Language

The main language spoken at home by the majority of young people is English (98.4%) an increase from 95.7% who spoke English in the 2011 survey; Table 3. The second most common language was Polish (1.1%) which, proportionally, did not change from the last survey (1.1%). Other languages (2.4%) which children said their parents speak to them at home included Chinese, French, German, Spanish and Thai.

Table 3 What language do your parents speak at home, years 7 to 11*

Language	Year 7	Year 8	Year 9	Year 10	Year 11	Year7-11
English	97.6%	99.0%	98.4%	97.7%	99.0%	98.4%
Polish	1.5%	0.8%	1.4%	0.7%	1.1%	1.1%
Russian	0.2%	0.0%	0.8%	0.5%	0.6%	0.4%
Latvian	0.3%	0.3%	0.1%	0.9%	0.4%	0.4%
Punjabi	0.5%	0.0%	0.3%	0.5%	0.7%	0.4%
Arabic	0.0%	0.1%	0.1%	0.7%	0.6%	0.3%
Bengali	0.2%	0.1%	0.3%	0.3%	0.2%	0.2%
Pakistani	0.2%	0.1%	0.2%	0.3%	0.2%	0.2%
Lithuanian	0.3%	0.0%	0.3%	0.3%	0.0%	0.2%
Portuguese	0.0%	0.0%	0.1%	0.1%	0.2%	0.1%
Kurdish	0.3%	0.1%	0.1%	0.0%	0.0%	0.1%
Romanian	0.0%	0.0%	0.1%	0.1%	0.2%	0.1%
Urdu	0.2%	0.0%	0.0%	0.1%	0.1%	0.1%
Other	3.1%	1.1%	2.7%	1.8%	3.7%	2.4%

^{*}Total may exceed 100% as young people were able to give more than one answer.

3.3 Ethnicity

The majority of young people identified their ethnicity as White British (93.9%). There has been a gradual reduction in the proportion of young people who identify themselves as White British since the 2007 ALS; 96.9% categorised themselves as White British in 2007 and 94.1% in 2011. A slightly higher proportion of respondents were identified as White Other (1.7%) than in the 2011 survey (1.3%) and as White Asian (0.5%) than in the 2011 survey (0.2%); see Table 4.

Table 4 Ethnicity by year group

	Year 7	Year 8	Year 9	Year 10	Year 11	Years 7-11
White British	93.3%	95.4%	94.9%	93.1%	92.7%	93.9%
White Irish	0.3%	0.3%	0.3%	0.7%	0.7%	0.5%
White Traveller/ Gypsy	0.2%	0.2%	0.4%	0.3%	0.5%	0.3%
White Other	2.2%	1.4%	1.9%	2.2%	1.1%	1.7%
Black Caribbean	0.2%	0.1%	0.0%	0.3%	0.0%	0.1%
Black African	0.3%	0.1%	0.1%	0.0%	0.4%	0.2%
Black Other	0.2%	0.0%	0.2%	0.2%	0.2%	0.2%
Bangladeshi	0.2%	0.1%	0.2%	0.3%	0.0%	0.2%
Indian	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%
Pakistani	0.2%	0.0%	0.0%	0.1%	0.4%	0.1%
Asian Other	0.0%	0.2%	0.2%	0.2%	0.5%	0.2%
Chinese	0.2%	0.0%	0.1%	0.0%	0.4%	0.1%
Arab	0.0%	0.3%	0.0%	0.6%	0.5%	0.3%
White and Black African	0.3%	0.1%	0.3%	0.1%	0.4%	0.2%
White and Asian	0.2%	0.6%	0.5%	0.3%	0.6%	0.5%
White and Black Caribbean	0.5%	0.0%	0.0%	0.1%	0.4%	0.2%
Any Other Mixed Background	0.3%	0.6%	0.1%	0.5%	0.7%	0.5%
Other	1.5%	0.3%	0.6%	0.8%	0.6%	0.7%

3.4 Limiting illness and disability

The proportion of young people who said that they had a long term illness or disability which limits daily activities decreased with age from 11.4% in year 7's to 7.9% in year 11's; with an overall rate of 8.7%. Males were also much more likely to say they have a long term illness or disability than females; 10.2% compared to 7.24%.

The most common type of health condition which young people said limited them in daily activities was asthma which accounted for approximately 12% of all conditions. Mental health issues (10.5%) such as depression and anxiety were the second most common, followed by dyslexia (10%), musculoskeletal issues (8.5%), behavioural problems (6.5%), hearing (5.2%) and visual impairments (4.8%) and autism (4.8%). A small number of young people also identified their disability as dyspraxia, diabetes, respiratory, speech and epilepsy.

3.5 Young people as carers

Most young people don't spend time caring for someone (88.8%). A greater proportion of young people care for someone if they are in year 7 (15.3%) compared to if they are in year 11 (7.8%). The overall proportion of young people who spend time caring for someone has reduced across all year groups when compared to the 2011 survey results; this was despite the latest survey question being broader in its wording and therefore more inclusive (see Figure 1).

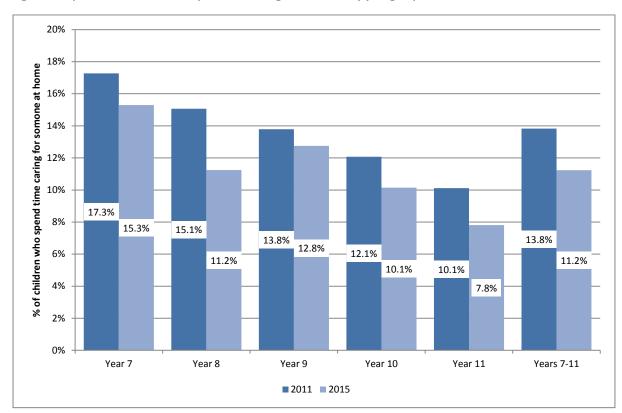


Figure 1 Proportion of children who spend time caring for someone by year group

4 Food and Exercise

A healthy diet is important throughout life to help maintain good health and is particularly important for development in adolescence. A balanced diet can help prevent future health problems such as obesity and heart disease. Obesity is a major public health issue and healthy behaviours should be established early so these can be taken forward into adulthood. Exercise is also important for a healthy lifestyle, and there are significant health benefits of exercise including reduced body fat, enhanced bone and cardio-metabolic health as well as improved well-being (Department of Health, 2011). The Department of Health recommends that children aged 5-18 participate in at least one hour of moderate to vigorous exercise per day (Department of Health, 2011).

4.1 Eating Habits

Half of all young people eat breakfast everyday (50.2%) this is a slight increase from the previous survey in 2011 (47.8%). From Table 5 it is evident that more young people in year 7 are eating breakfast everyday than any other year group, with young people in year 9 eating breakfast every day the least. The proportion of males who eat breakfast every day (57%) is greater than females (43%).

Table 5 Breakfast consumption by year group

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
Every day	62.4%	50.7%	45.2%	49.2%	47.3%	50.2%
Sometimes	29.1%	31.0%	33.7%	32.9%	32.1%	32.0%
Never	8.5%	18.2%	21.1%	17.9%	20.6%	17.9%

The most common reasons for not eating breakfast for all year groups were not having enough time (31.3%) and eating breakfast makes me feel sick (30.8%). A quarter of young people (24.2%) also said they do not like eating breakfast. The most common responses given in the other category were "not being hungry" or being "too lazy to eat breakfast".

The majority of young people do not receive free school meals (85.9%). The proportion who receive free school meals has fallen from 20.8% in 2011 to 14.1% in 2015 (see Figure 2). There are a greater proportion of young people in year 7 who receive free school meals compared to any other year group and the proportion of children who receive free school meals decreases as age increases.

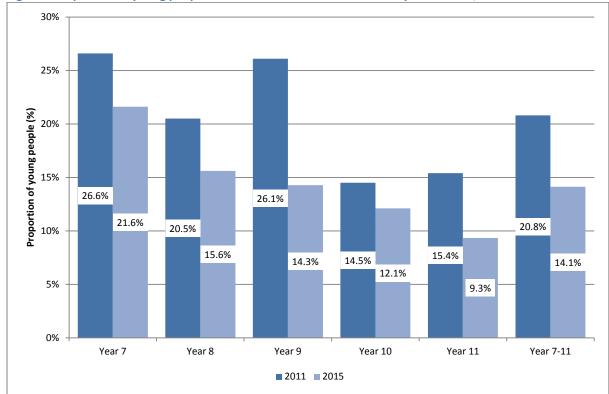


Figure 2 Proportion of young people who receive Free School Meals for years 7 to 11, 2011 and 2015

Of those young people who receive free school meals, 72.4% said that they eat a school meal. The majority of those who are eligible to receive free school meals but do not eat a school meal will alternatively have a packed lunch (10%) or not eating anything for lunch (7.1%).

For all young people surveyed, the most popular options for midday meals were a packed lunch (44.2%) or a school meal (38.8%). There were 7.7% of young people who reported that they did not eat anything for lunch, with the highest proportion of those not eating lunch being in year 10 (see Table 6). The proportion of young people who have a school meal reduces by half between year 7's (55.4%) and those in year 11 (27.9%).

Table 6 What young people usually do for the midday meal on a school day, year 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
I have a packed lunch	30.8%	35.0%	45.4%	51.5%	54.0%	44.2%
I have a school meal	55.4%	48.7%	36.7%	30.7%	27.9%	38.8%
I don't usually eat anything for lunch	2.5%	7.0%	8.9%	9.7%	8.6%	7.7%
I get lunch from a shop, cafe or take away	3.5%	2.7%	3.9%	3.2%	4.4%	3.6%
I have a meal at home	1.2%	1.5%	1.7%	1.1%	1.2%	1.3%
Other	6.7%	5.1%	3.3%	3.8%	3.9%	4.4%

Across all years, a higher proportion of females reported that they did not eat lunch (9%) compared to males (6.4%). However, Figure 3 shows a higher proportion of males in year 7, 8 and 9 do not eat lunch when compared to females in the same year group.

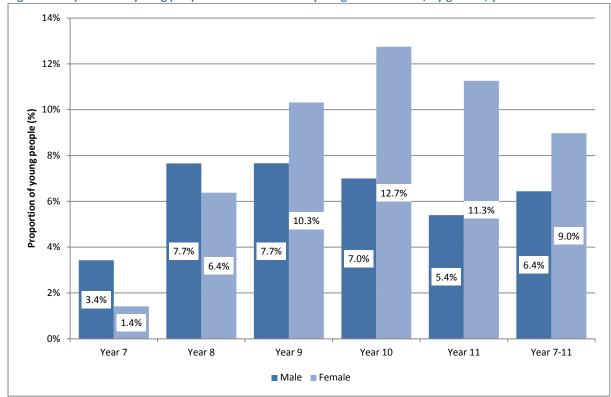


Figure 3 Proportion of young people who do not eat anything at lunch time, by gender, years 7 to 11

Of the young people who said that they do not eat anything for lunch, the most common reason given was that they were not hungry at lunch time (52.1%); this was the most common reason on the 2011 ALS too. 12.9% of young people reported that they did not like the school food and 8.9% found school food too expensive. The least reported reason for not eating lunch was that none of their friends eat lunch (2.8%) (Table 7).

Table 7 Reasons young people gave for not eating anything at lunch, year 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
I am not hungry at lunch	66.7%	60.7%	51.8%	46.2%	50.0%	52.1%
I don't like school food	13.3%	16.4%	15.3%	12.1%	8.1%	12.9%
School dinner arrangements are not good	0.0%	1.6%	7.1%	5.5%	6.8%	5.2%
School food is too expensive	6.7%	8.2%	9.4%	11.0%	6.8%	8.9%
I'm too busy doing other activities	13.3%	0.0%	7.1%	2.2%	5.4%	4.3%
None of my friends eat lunch	0.0%	1.6%	2.4%	4.4%	2.7%	2.8%
Other	0.0%	11.5%	7.1%	18.7%	20.3%	13.8%

Just over three quarters of young people stated that their lunch was not their biggest meal on a school day (76.9%), whereas, only 23.1% said it was their biggest meal on a school day. The proportion of young people whose lunch is their biggest meal decreases the older they get, although, lunch is consistently not the biggest meal on a school day across year groups.

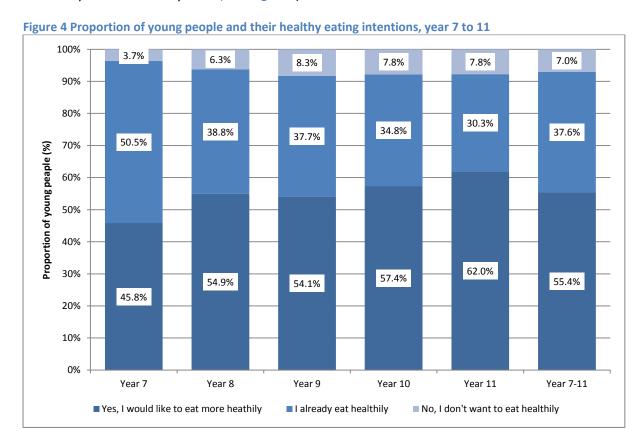
The majority of young people (35.6%) reported that school dinners had stayed the same; this is an increase on the previous survey in 2011 where only 26.4% reported that school dinners had stayed

the same. The proportion of young people reporting that school dinners have got worse has decreased from 30.9% in 2011 to 24.3% on the 2015 survey. A slightly smaller proportion reported that school dinners have got better reducing from 20.7% to 17.9% in 2015.

4.2 Healthy Eating

It is recommended that at least 5 portions of fruit and vegetables are consumed each day (Public Health England, 2016). Only 12.7% of young people reported meeting this recommendation, which is little variation from the proportion reporting eating 5 or more in the 2011 survey (12%). On average, young people consume at least 2.6 portions of fruit and vegetables per day; this is a slight increase on the previous survey in 2011 which found that young people consumed at least 2.5 portions per day. The 2014 WAY survey reported that 52.4% of 15 year olds in England consumed 5 or more fruit and vegetables a day which is slightly higher than the North East Lincolnshire proportion of 50.8% as reported in the 2014 WAY survey. The WAY proportions are a stark difference to the ALS with only 10.3% of 15 year olds consuming 5 or more fruit or vegetables a day (Public Health England, 2015).

Over half (55.4%) of all young people said they would like to eat more healthily than they already do, with more females (62.5%) than males (48.4%) stating this. Just over a quarter (27.6%) of all young people reported that they already eat healthily and 7% said that they did not want to eat healthily. As children get older, the proportion of who already eat healthily decreases (from 50.5% in year 7 to 30.3% in year 11) and the proportion who state they would like to eat more healthy increases (from 45.8% in year 7 to 62% in year 11; see Figure 4).



The majority of young people (77.1%) thought that less than half of people their age ate healthily and just over a fifth (22.9%) thought that most or all of people their age did.

4.3 Physical Activity Participation

The majority young people had done an hour or more of physical activity in the past week (87.2%); this is a slight increase on the previous 2011 ALS (84%). Table 8 shows that the proportion of young people who said they did not take part in physical activity in the past seven days increases as age increases. A lower proportion of females (85.1%) compared to males (89.1%) said they do one hour or more a week of physical activity.

Table 8 Proportion of young people who had done one hour or more of physical activity in the last week, year 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
Yes	88.4%	88.6%	87.0%	86.7%	85.5%	87.2%
No	5.3%	5.5%	7.7%	9.0%	10.6%	7.7%
Don't know	6.3%	5.9%	5.3%	4.3%	4.0%	5.1%

It was reported in the 2014 WAY survey that 12.9% of 15 year olds in North East Lincolnshire exercised for at least an hour every day for the previous seven days compared to 13.9% of 15 year olds nationally (Public Health England, 2015). The 2015 ALS found that 14.3% of 15 year olds in North East Lincolnshire exercised for at least an hour every day.

Of those who completed at least one hour or more of physical exercise in the past seven days, over half (55.9%) said that they completed this on at least 4 days (Table 9). However, only 18.8% of all young people met the government recommended amount of physical activity of at least 60 minutes every day (Department of Health, 2011). More males (22.7%) than females (14.7%) met this recommendation.

Table 9 Number of day's young people reported doing at least an hour of exercise, by year group

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
1 day	11.2%	12.8%	10.2%	14.0%	12.0%	12.1%
2 days	14.1%	15.9%	15.1%	16.9%	13.1%	15.1%
3 days	15.6%	17.1%	18.5%	15.4%	17.6%	16.9%
4 days	14.4%	12.4%	15.9%	14.1%	14.9%	14.4%
5 days	15.4%	15.2%	16.3%	16.5%	18.6%	16.4%
6 days	5.3%	6.5%	5.9%	7.0%	6.3%	6.3%
7 days	24.0%	20.1%	18.0%	16.1%	17.5%	18.8%
At least 4 days	59.1%	54.2%	56.1%	<i>53.7%</i>	57.3%	55.9%

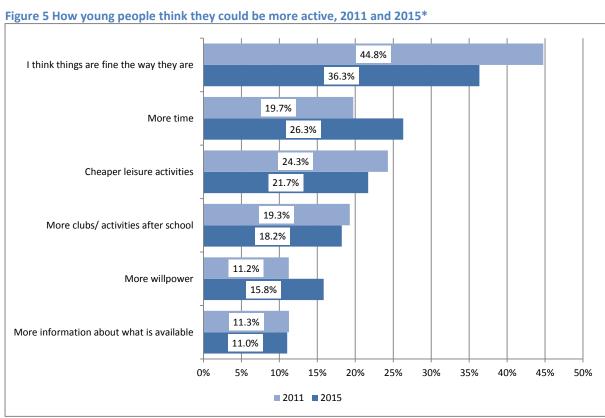
Over a third of young people reported that things were fine the way they were with regard to how active they were (36.3%). Over a quarter of young people (26.3%) thought that more time would help them be more active, and as shown in Table 10, this increases with age from 23.2% in year 7 to 31.5% in year 11. Similarly, the proportion of young people who reported that more willpower would help them be more active also increased with age, from 6.4% in year 7 to 28.6% in year 11.

Table 10 How young people think they could be more active, year 7 to 11*

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
I think things are fine the way they are	41.3%	38.3%	38.9%	34.6%	29.9%	36.3%
More clubs/ activities after school	27.1%	22.1%	19.7%	14.6%	10.4%	18.2%
More information about what is available	11.0%	9.9%	10.0%	11.6%	12.7%	11.0%
More time	23.2%	23.1%	25.6%	27.3%	31.5%	26.3%
More willpower	6.4%	10.0%	14.5%	17.1%	28.6%	15.8%
Cheaper leisure activities	16.6%	22.3%	17.0%	24.4%	26.9%	21.7%
Other	7.9%	5.9%	4.6%	5.5%	4.5%	5.5%

^{*}Total may exceed 100% as young people were able to give more than one answer.

Figure 5 shows that since the 2011 survey, a lower proportion of young people reported that things are fine the way they are in relation to helping them be more active, however, this response still had the greatest response. The proportion of young people who thought that cheaper leisure activities and more clubs/activities would help them be more active has also decreased since the 2011 ALS. Although, a higher proportion of young people reported that more time and more willpower would help them be more active compared to the 2011 survey.



*Total may exceed 100% as young people were able to give more than one answer.

The majority of young people spent between 1 and 2 hours taking part in PE each week at school (70.5%), which is an increase on the 2011 ALS (51%). The proportion of young people who are participating in more than 2 hours of PE each week has decreased from 27% in 2011 to 15.7% in

2015. Furthermore, Table 11 highlights that across all the year groups year 11 females had the highest proportion who did not take part in PE (10%) whereas only 5% of year 11 males did not take part in PE at school.

Table 11 PE participation for young people by gender, years 7 to 11

	Yea	ar 7	Yea	ar 8	Yea	ar 9	Yea	r 10	Yea	r 11	Year	7-11
	Male	Female										
Less than an hour	6.6%	7.6%	8.3%	8.1%	8.9%	8.4%	14.7%	18.0%	11.6%	14.4%	10.3%	11.6%
Between 1 and 2 hours	71.5%	69.1%	72.8%	75.3%	69.0%	69.5%	69.1%	70.7%	71.6%	65.5%	70.7%	70.1%
More than 2 hours	20.9%	21.6%	17.9%	15.2%	20.8%	19.3%	14.3%	8.6%	11.6%	10.0%	17.0%	14.4%
None, I don't do any	0.9%	1.8%	1.0%	1.4%	1.3%	2.8%	1.9%	2.7%	5.2%	10.0%	2.0%	3.9%

The proportion of children who thought that PE lessons were good or very good has increased since the 2011 survey from 64.6% to just over two thirds (67.7%). However, the proportion of young people thinking that PE lessons are very good decreases with age, with over half (58.9%) of those in year 7, whereas not even a quarter (22.2%) think so in year 11. More males (41.6%) than females (27.2%) thought that they were very good.

Just over a third of all young people said they take part in a school sports clubs (36.5%), leaving two thirds (63.5%) who do not. However, from Figure 6 it is apparent that the participation in school sports clubs declines with age, with almost half of those in year 7 taking part in school sports clubs (45.5%), compared to under a third in year 11 (27.1%). Overall more males take part in a school sports clubs (41.1%) compared to females (32%).

Figure 6 Proportion of young people who take part in a schools sports club by gender, years 7 to 11 60% 50% Arobortion of young People (%) 30% 20% 50.5% 46.6% 44.3% 40.9% 41.1% 40.1% 34.6% 33.2% 32.0% 28.4% 26.8% 25.9% 10% 0% Year 7 Year 8 Year 9 Year 10 Year 11 Year 7-11 ■ Male ■ Female

A greater proportion of young people took part in organised activity outside of school (50%) than inside of school (36.5%). However, there is a decline in the proportion of young people taking part in organised sport outside of school between years 7 and 11 (see Figure 7) and a lower proportion of young people take part in a school sports club than in 2011 (63.9%). Males are also more likely to take part in sport outside of school compared to females (53.8% compared to 46.3%).

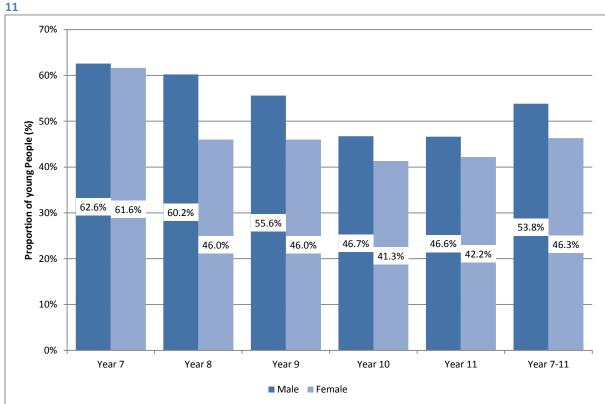


Figure 7 Proportion of young people who take part in organised sport outside of school by gender, years 7 to

Over half (56.2%) of young thought that they did enough physical activity to keep themselves healthy. This proportion decreased as age increased.

4.4 Weight Perception

Nearly half of all young people (47.8%) were happy with their weight; however, there were 45% of young people said they would like to lose weight. A small proportion of young people reported that they would like to put on weight (7.5%). Over half of males were happy with their weight (54.7%) however, only two fifths of females (40.7%) said that they were happy with their weight. A higher proportion of females reported that they would like to lose weight (55%) compared to males (34.6%). Only a small proportion of females would like to put weight on (4.3%) compared to males where 10.6% of males reported wanting to put on weight (Figure 8).

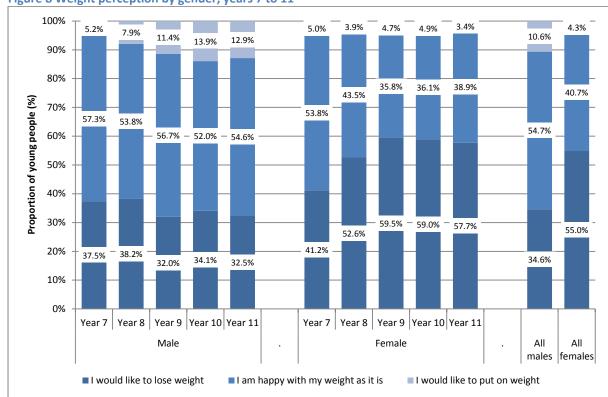


Figure 8 Weight perception by gender, years 7 to 11

45% of 15 year olds reported being happy with their weight, however, the 2014 WAY survey found that 50.1% of 15 year olds in North East Lincolnshire reported being "about the right size". This is slightly lower than the England average of 52.4% and the regional average of 52.5% (Public Health England, 2016).

Young people who said they would like to lose weight are more likely to not usually eat breakfast or lunch and are more likely to say they would like to eat more healthily than those who say they are happy with their weight. However, there were no considerable differences between the proportion of young people who want to lose weight and who did less than an hour of physical activity in the last week compared to those who are happy with their weight and who did less than an hour of physical activity in the last week (Table 12).

Table 12 Weight perception compared to eating habits and physical activity participation

	I would like to put on weight	I would like to lose weight	I am happy with my weight as it is
% who do not usually eat breakfast	16.6%	23.9%	12.4%
% who do not usually eat lunch	8.8%	10.8%	4.5%
% who would like to eat more healthily	49.5%	71.3%	41.8%
% who have done less than 1 hour of physical activity per week	11.7%	7.3%	7.2%

4.5 Oral Health

Over 90% of young people had been to the dentist within the past year (90.3%), this is an increase on the 2011 ALS where only 80% of young people reported having been to the dentist in the previous year. Overall there are a greater proportion of females than males that have been to the dentist in the past year. It is evident from Figure 9 that a lower proportion of younger children have been to the dentist in the last year than older children.

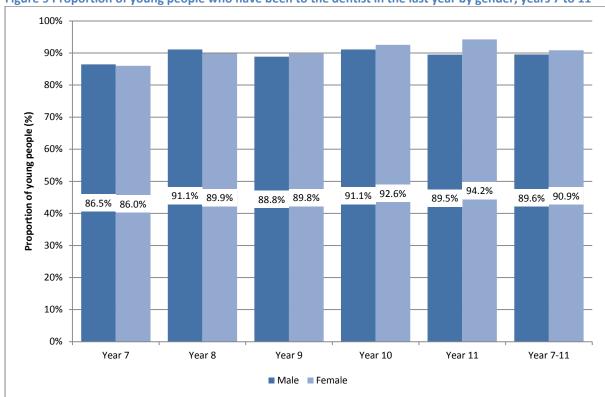


Figure 9 Proportion of young people who have been to the dentist in the last year by gender, years 7 to 11

5 Emotional Health

Maintaining positive emotional health and wellbeing for young people is important due to the potential impact poor emotional health can have on life chances. Positive emotional health can influence physical health, cognitive development, ability to learn as well as future prospects (Department of Health, 2015).

5.1 Happiness and Home Life

The majority of young people said that they usually felt happy about their life (84.3%), which is similar to what was reported in the 2011 survey (85%). This proportion declines as young people got older, with a greater decline in females (see Figure 10). Across all years more males felt happy about their life (88.5%) than females (80.1%). However, fewer year 7 males said they were not happy about their life (86.8%) compared to females (90.8%).

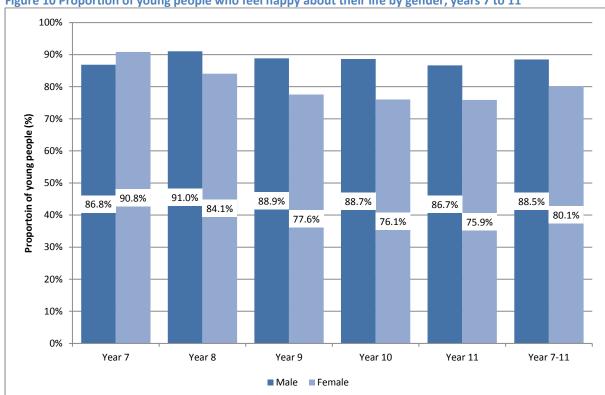


Figure 10 Proportion of young people who feel happy about their life by gender, years 7 to 11

Nearly all young people reported that they had one or more good friends (96.7%) and over a quarter (27.2%) stated that they often felt sad or tearful. Since the 2011 ALS the proportion of females stating they often felt sad or tearful has increased (from 28% to 38.9%), and remains higher than the number of males who said they often feel sad or tearful (15.6%). Males and females were equally likely to report that they often feel bad tempered or get angry (39.7%). The proportion of males saying they often felt bad tempered or angry has reduced since the previous 2011 ALS (46%). Over a quarter of all young people said they often felt anxious or depressed (26.7%), with the proportion increasing with age; this was also reported on the 2011 ALS. Since the 2011 survey, the proportion of young people reporting that they worry a lot of the time has increased from 40.8% to 47%. Again this increases with age, and more females worried a lot of the time (60.6%) than males (32.6%). The

majority of young people said they like to try new things (76.3%). Most young people thought they had a lot to be proud of (66.6%). A higher proportion of females wished that they had a different kind of life (27%) than males (19%); Table 13.

Table 13 Emotional health by gender

	Proportion of those who answer 'yes				
	Male	Female	Year 7-11		
I usually feel happy about life	88.5%	80.1%	84.3%		
I often feel sad or tearful	15.6%	38.9%	27.2%		
I have one or more good friends	97.0%	96.3%	96.6%		
My parent(s) and family look out for me	96.6%	96.2%	96.4%		
I am often bad tempered or get angry	39.8%	39.7%	39.7%		
I often feel anxious or depressed	19.2%	34.1%	26.7%		
I seem to worry a lot of the time	32.6%	60.6%	46.6%		
I feel I have a lot to be proud of	72.9%	60.5%	66.7%		
I like trying new things	79.5%	72.9%	76.2%		
I wish I had a different kind of life	19.4%	27.0%	23.2%		

Overall, despite Figure 11 showing a slight decline in emotional health, there are only small differences in emotional health measured between 2007 and 2015.

Figure 11 Emotional health trend, 2007 to 2015 Worry a lot of the time 46.6% 41.7% Often bad tempered/angry 45.6% 39.7% 31.0% Not a lot to be proud of 32.3% 33.4% Often sad or tearful 26.3% 27.2% Often anxious/ depressed 14.5% Don't like trying new things 16.9% I wish I had a different kind of life 28.2% 12.9% Don't usually feel happy about life 15.2% 15.7% 3.5% Parents don't look look out for me 3.6% No good friends 33% 0% 5% 10% 15% 20% 25% 30% 35% 40% 45% 50% ■ 2007 ■ 2011 ■ 2015

5.2 Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS)

The short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS) is a seven item scale, and is a shortened version of the 14 item scale Warwick Edinburgh Mental Wellbeing Scale. The SWEMWBS

has had more thorough testing for internal consistency, and questions offer a different perspective which relates more to functioning rather than to feeling to the 14 item scale WEMWBS (NHS Health Scotland, 2016). The maximum score that can be achieved on the seven item SWEMWBS is 35 points with a higher score associated with better mental wellbeing.

The average 7 point SWEMWBS for all year groups is 21.8. Males scored greater than the average (22.8) than females (20.8) and females scored lower than males across all year groups. Table 14 shows that the average SWEMWBS score reduces as age increases; from 22.7 in year 7, to 21.4 in year 11. However, the average score for males stays relatively similar across all year groups whereas, the score for females drops and stays lower from year 9 onwards.

Table 14 Average SWEMWBS by gender, years 7 to 11

70 //	Average SWEMWBS						
	Male	Male Female					
Year 7	22.9	22.5	22.7				
Year 8	23.1	21.5	22.3				
Year 9	22.8	20.3	21.6				
Year 10	22.5	20.2	21.4				
Year 11	22.8	20.1	21.4				
Year 7-11	22.8	20.8	21.8				

5.3 Dealing with Problems

Most young people (80.6%) said that they would talk to someone, think carefully (86.5%), watch TV (81.4%) or listen to music (90.5%) if they had a problem. Small proportions of young people said they would smoke cigarettes (8.4%) or drink alcohol (16.1%) if they had a problem. Perhaps the most concerning finding is that almost 15% of young people said that they would cut or hurt themselves if they had a problem; see Table 15.

Table 15 How young people say they usually deal with a problem

	Always	Usually	Sometimes	Never
Talk to someone about it	11.1%	22.4%	47.1%	19.4%
Rest or sleep more	14.0%	21.3%	36.0%	28.7%
Smoke cigarettes	2.5%	1.7%	4.2%	91.6%
Think carefully about the problem by yourself	16.2%	30.5%	39.8%	13.5%
Have a drink of something alcoholic	2.0%	2.8%	11.4%	83.9%
Do physical activity	14.8%	18.6%	36.8%	29.8%
Keep busy socialising	20.5%	31.2%	32.8%	15.6%
Watch more TV/play computer games	21.3%	22.7%	37.4%	18.6%
Seek help with the problem online	2.5%	3.9%	14.4%	79.2%
Eat or drink more	12.6%	14.2%	39.1%	34.1%
Cut or hurt myself	2.1%	2.8%	9.8%	85.3%
Listen to music	39.2%	26.4%	24.9%	9.5%

Figure 12 shows that a higher proportion of young people said that they would talk to someone they trust about problems with school (69%) and bullying problems (69.3%) compared to any other problems. Problems with body changes and growing up had the highest proportion of young people who said that they would keep the problems to themselves (62%).

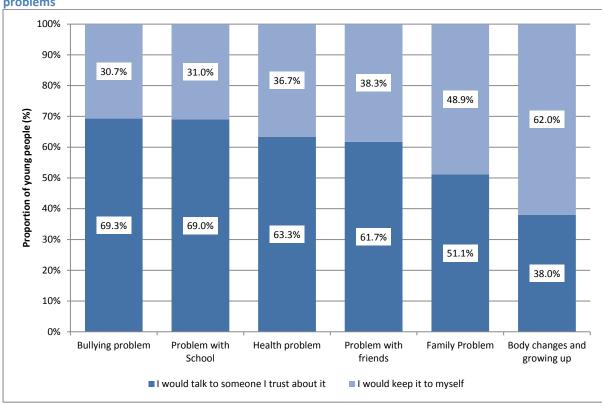


Figure 12 Proportion of young people who would talk to someone or keep to themselves when dealing with problems

Young people were most likely to worry a lot about school work/ exams, with 30.2% saying they worried a lot and 48% saying they worried a little. Young people were least likely to worry about sexual health, with only 4.1% saying they worried a lot and 9.5% worried a little. It is evident from Table 16 that the proportion of young people who worry a lot about problems increases with age (from year 7 to 11); particularly on issues such as school work, the future, weight and the way they look.

Table 16 Proportion of young people who worried a lot about problems, years 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
School work/ exams	19.1%	19.6%	27.3%	33.1%	48.3%	30.2%
The way you look	17.1%	28.3%	31.4%	31.3%	28.5%	28.1%
Your weight	15.6%	25.7%	29.3%	28.9%	28.3%	26.2%
Friendships	22.1%	20.6%	22.5%	20.4%	19.6%	21.0%
Girlfriends/boyfriends	12.0%	13.1%	13.4%	17.3%	16.1%	14.6%
Being bullied	14.3%	11.9%	12.5%	8.3%	5.9%	10.3%
Problems at home/ family	11.1%	13.5%	14.4%	14.4%	11.5%	13.2%
Sexual health	2.6%	3.7%	3.7%	5.7%	4.3%	4.1%
Your future/ getting a job	19.4%	21.9%	26.3%	30.2%	42.5%	28.6%

As shown in Figure 13, more females than males reported worrying a lot about all the problems apart from sexual health (4.4% compared to 3.8%). 40.5% of females said that they worried a lot about the way they look, whereas only 15.8% of males worried about the way they look. This was a similar picture for young people worrying about their weight with 38.4% of females worrying about their weight compared to only 14.3% of males.

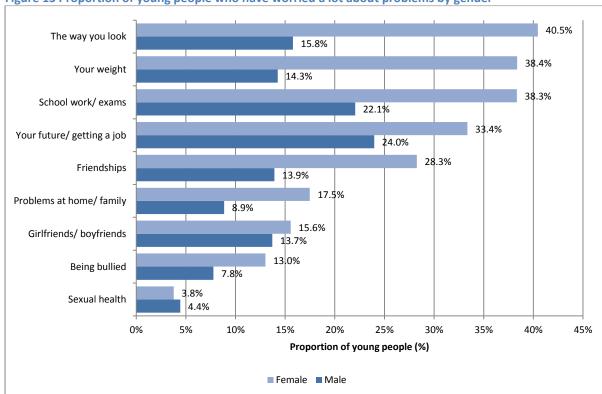


Figure 13 Proportion of young people who have worried a lot about problems by gender

6 Tobacco

Smoking is a major cause of preventable morbidity and premature death. The national Tobacco Control Plan (Department of Health, 2013) highlights the importance of reducing the number of young people taking up smoking due to the fact that smoking is largely an addiction which is started during childhood and adolescence. The plan set out an ambition to reduce rates of 15 year old regular smokers to 12% by the end of 2015. Although this ambition has largely been achieved there is still work to be done to continue this reduction as well as the need to consider the longer term impact of e-cigarette use amongst young people.

6.1 Smoking prevalence

Only a small proportion of young people in years 7 to 11 are regular smokers (4.8%) and over 80% have never tried smoking. Smoking prevalence increases with age with less than 1% of year 7's categorised as regular smokers compared to those in year 11 (8.6%). It appears from Table 17 that smoking prevalence increases most significantly between school years 9 and 10, suggesting that the majority who take up smoking do so at the end of year 9. Overall the proportion of young people who have never smoked has increased from 68.7% in 2011 to 80.5% in 2015 which equates to over four fifths of all young people in years 7 to 11 who have never tried a cigarette. A higher proportion of females are regular smokers (5.3%) than males (4.2%).

Table 17 Smoking status by year group

	Year 7	Year 8	Year 9	Year 10	Year 11	Years 7-11
Never Smoked	95.0%	90.1%	81.0%	73.8%	67.8%	80.5%
Tried smoking	5.0%	9.9%	19.0%	26.2%	32.3%	19.5%
Occasional Smoker*	0.0%	0.4%	1.2%	2.6%	4.9%	1.9%
Current Smoker**	0.9%	2.2%	5.5%	9.5%	13.5%	6.7%
Regular Smoker***	0.9%	1.8%	4.3%	7.0%	8.6%	4.8%

^{*} Those who smoke but not as many as one a week

Smoking prevalence has decreased amongst all year groups for each successive ALS, as shown in Figure 14. The proportion of regular smokers has decreased considerably since the last ALS in 2011 from 6.7% to 4.8% and from 7.9% in the 2007 ALS. Since the 2011 ALS smoking prevalence has decreased by 28%. Smoking prevalence has dropped most significantly amongst young people in year 11 from 16.6% in 2011 to 8.6% in 2015; a reduction of almost 50%. However, smoking prevalence has only decreased modestly amongst year 10's; from 7.3% to 7% in 2015. For year 9's regular smoking has decreased most systematically by approximately 2% points with each successive survey.

^{**} The aggregation of those who smoke occasionally and regularly

^{***} Those who smoke a minimum of once a week

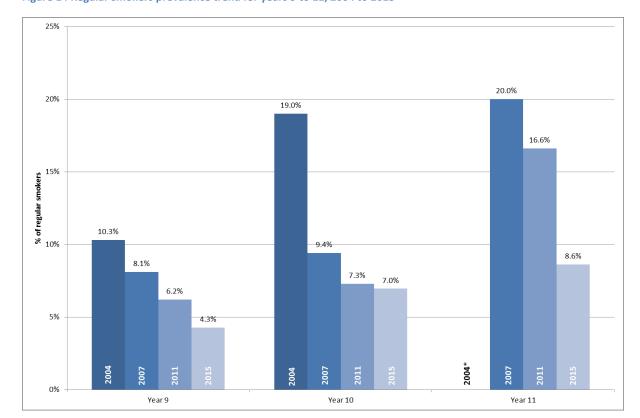


Figure 14 Regular smokers prevalence trend for years 9 to 11, 2004 to 2015

6.2 15 year old smoking prevalence

Latest data from the national WAY survey (2014) suggested that 5.5% of 15 year old's are regular smokers in England (Public Health England, 2015) and 6.2% in the Yorkshire and Humber region. Local data from the WAY survey indicates that 7.7% of 15 year olds are regular smokers; the 2015 ALS identified a similar figure of 7.6% (Figure 15). However, the proportion of occasional smokers in the ALS is over double of that which were identified as occasional smokers in the WAY survey (4.4% compared to 2.1%). The ALS data suggests that the proportion of occasional smokers is potentially underestimated in the WAY survey.

Figure 16 shows that 15 year old females are significantly more likely to be smokers than males. The proportion of 15 year old male regular smokers is 5.6% compared to 9.3% for females. In comparison to the 2011 ALS, smoking prevalence has dropped by almost 59% for males and by 46% for females with an overall reduction of 51% for all 15 year olds. These smoking prevalence's also far exceeded the locally set targets to be achieved by 2015 of 10% for males and 15% for females (North East Lincolnshire Council, 2012).

^{*2004} ALS did not collect data for year 11 pupils

Figure 15 Regular, occasional and current smoker prevalence for 15 year olds by gender, 2015

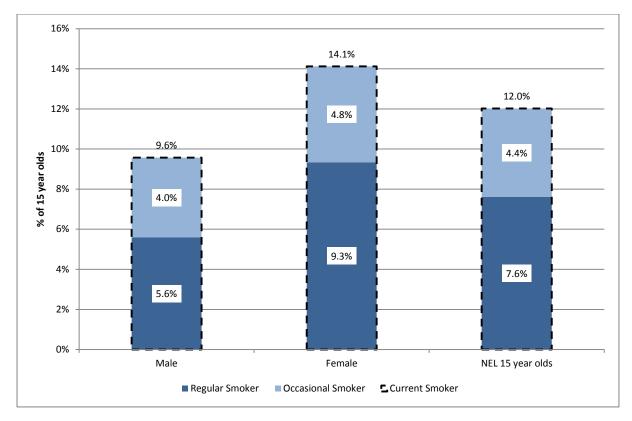
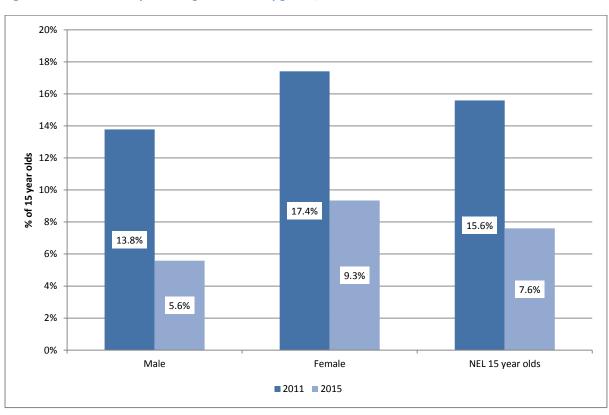


Figure 16 Prevalence of 15 year old regular smokers by gender, 2011 and 2015



6.3 Where young people get tobacco

Most young people who smoke have never tried to buy cigarettes from a shop (83.9%) and of those who said they had successfully bought cigarettes (16.1% of all young people), 22.5% had used a fake ID. Females were more likely to be sold cigarettes (11.6%) than males (5.1%). Most young people who smoke get cigarettes from friends or family (44.3%) ask someone to buy them on their behalf (17.5%) or buy them from their friends or relatives (14.8%); see Figure 17. A small proportion said that they buy cigarettes from fag houses (5.4%) which was considerably lower than in the 2011 survey where almost a quarter (23.9%) of young people said they bought cigarettes from fag houses; the second highest response in 2011.

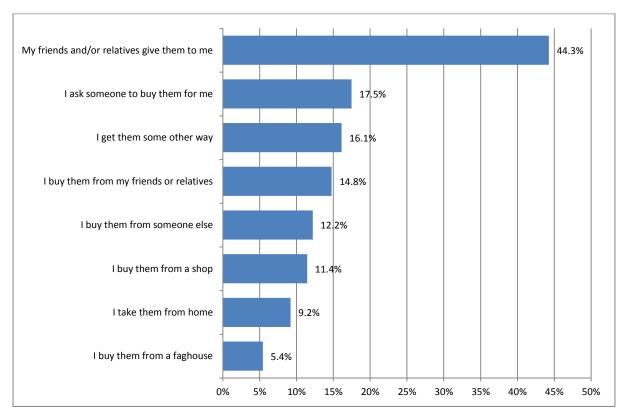


Figure 17 Where young people get their cigarettes from, year 7-11*

6.4 Smoking Risk Factors

40.7% of young people said that someone at home smokes, with younger people more likely to say that someone smokes at home than older young people; 45.7% of year 7's said someone smokes at home compared to 35.9% of year 11's. Table 18 shows that young people who live in a house where someone smokes are 3 times more likely to be a regular smoker compared to if no one smokes at home (7.6% compared to 2.6%).

^{*}Total may exceed 100% as young people were able to give more than one answer. Analysis only includes those who were identified as current smokers.

Table 18 Smoking status in comparison to if someone smokes at home

Does anyone	Year 7 -11*	Smoking status	of young person
smoke at home?	Year 7 -11	Never Smoked	Regular Smoker
Yes	40.7%	73.6%	7.6%
No	56.6%	85.7%	2.6%

^{*}Total does not equal 100% due to children being offered the option to respond with "Don't know"

Regular smokers are almost twice as likely to be eligible for free school meals (8.2%) compared to those who are not eligible for free school meals (4.2%); Table 19. Young people who are eligible for free school meals are considerably more likely to have someone at home that smokes (63.6%) compared to those who are not eligible for free school meals (37%); Table 20.

Table 19 Comparison of FSM eligibility with smoking status

Smoking status of	FSM eligible	Not FSM eligible	Total	
young person	No. %	No. %	No. %	
Never smoked	393 72.9%	2716 81.6%	3109 80.4%	
Tried smoking	90 16.7%	407 12.2%	497 12.9%	
Regular smoker	44 8.2%	140 4.2%	184 4.8%	

Table 20 Comparison of FSM eligibility with those who report someone smokes at home

Does anyone smoke in	FSM e	FSM eligible		Not FSM eligible		Total	
your home?	No.	%	No.	%	No.	%	
Yes	346	63.3%	1227	37.0%	1573	40.7%	
No	186	34.0%	2003	60.4%	2189	56.7%	
Don't know	15	2.7%	87	2.6%	102	2.6%	
Total	547	100.0%	3317	100.0%	3864	100.0%	

Table 21 shows the comparison in emotional health between those who have never smoked and those who are regular smokers. Regular smokers are less likely to say they are happy about life, are far more likely to feel sad or tearful, more likely to feel bad tempered and more likely to say they wish they had a different kind of life. In comparison, those who have never smoked say they worry less, feel they have a lot to be proud of and more likely to say their parents and family look out for them. Overall, regular smokers scored lower on the short WEMWBS (18.79) compared to those who had never smoked (22.24).

Table 21 Emotional well-being and smoking status

	Proportion of those who answer 'yes			
	Never Smoked	Regular Smoker		
I usually feel happy about life	87.6%	68.6%		
I often feel sad or tearful	23.7%	45.7%		
I have one or more good friends	97.4%	95.1%		
My parent(s) and family look out for me	97.7%	86.4%		
I am often bad tempered or get angry	33.0%	75.0%		
I seem to worry a lot of the time	44.3%	56.2%		
I feel I have a lot to be proud of	70.5%	44.0%		
I like trying new things	76.6%	69.8%		
I wish I had a different kind of life	18.7%	52.4%		
Overall short WEMWBS score	22.24	18.79		

6.5 Tobacco social norms

The proportion of young people who think at least half of people their age smoke increases with age (Table 22) with an average of 44.3% of all young people perceiving that at least half of people their age smoke. Overall this proportion has decreased from 48.6% since the 2011 ALS and has dropped considerably amongst all year groups (approximately 10 per cent points for each year group) except those in year 8 where there was an increase in smoking perception from 33.7% in 2011 to 35.3% in 2015.

Table 22 How many people your age do you think smoke?

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
None of them	33.4%	13.2%	5.6%	3.3%	1.4%	9.8%
Only a few	53.3%	51.5%	49.8%	43.4%	33.5%	45.9%
About half	9.1%	23.4%	30.4%	33.8%	41.9%	29.0%
Most, but not all	3.5%	11.3%	13.2%	18.6%	21.3%	14.3%
All of them	0.7%	0.6%	1.0%	0.9%	2.0%	1.1%
At least half	13.4%	35.3%	44.6%	53.3%	65.1%	44.3%

Most young people (80.4%) do not think it is ok for people their age to smoke. Year 7's were least likely to say they think its ok for people their age to smoke (1.9%) whereas those in year 11 where most likely (13.1%).

6.6 E-cigarettes

Regular e-cigarette use amongst young people in year 7 to 11 is currently at 4.2% with an increasing proportion of regular use with increasing age (Table 23). A small proportion of young people stated that they used to use e-cigarettes but now smoke normal cigarettes instead (1.2%). However, daily use of e-cigarettes was lower in contrast to normal cigarette daily use; with a higher proportion of

young people more likely to smoke e-cigarettes less frequently than every day. Males were more likely to be regular e-cigarette smokers (4.7%) than females (3.6%).

Table 23 E-cigarette smoking status by year group

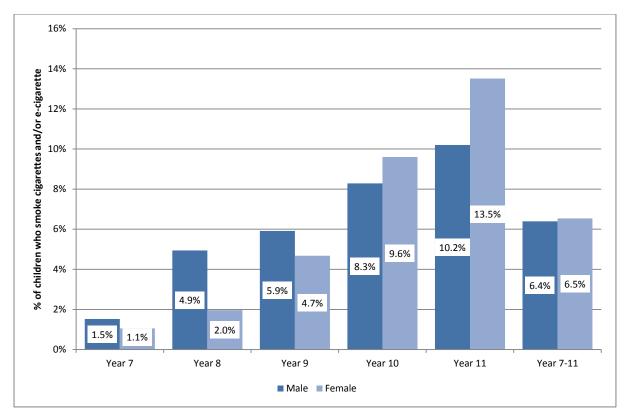
E-cigarette smoking status	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
I have never smoked an e-cigarette	92.3%	84.1%	72.0%	65.4%	60.4%	73.5%
I used to use e-cigarettes but now smoke normal cigarettes	0.2%	0.9%	0.8%	1.7%	1.9%	1.2%
I have tried an e-cigarette once or twice	5.6%	10.2%	17.9%	21.4%	23.6%	16.5%
I used to use e-cigarettes, but not anymore	1.1%	2.0%	5.6%	5.9%	7.4%	4.7%
I smoke e-cigarettes at least once a week	0.0%	1.7%	2.4%	3.5%	4.4%	2.6%
I smoke e-cigarettes everyday	0.9%	1.1%	1.3%	2.1%	2.4%	1.6%
Regular e-cigarette user	0.9%	2.8%	3.7%	5.7%	6.8%	4.2%

The WAY survey suggested that 20.2% of 15 year olds in North East Lincolnshire had used/tried ecigarettes (2014) (Public Health England, 2015) whereas the 2015 ALS found that 40% of 15 years olds had tried or were current users of e-cigarettes. 15 year old females were more likely to be regular e-cigarette users (7.5%) than males (6.1%) which was a contrast to the overall proportion for all ages discussed above.

Of those who were identified as regular e-cigarette users, 14.9% said they had never smoked cigarettes but now use e-cigarettes and 39.1% said they now smoke e-cigarettes instead of normal cigarettes.

In total the proportion of young people who smoke either cigarettes and/ or use e-cigarettes is 6.4% for males and 6.5% for females (Figure 18). This suggests that despite cigarette smoking prevalence decreasing considerably since the last ALS in 2011, a proportion of those who no longer smoke cigarettes are likely to have replaced traditional tobacco cigarettes with e-cigarettes. It also suggests that the proportion of young people addicted to nicotine products may not have dropped as significantly as previously thought due to a cohort of young people switching to or starting to use e-cigarettes since the 2011 survey.

Figure 18 Proportion of young people who are regular users of cigarettes and/or e-cigarettes by year group



7 Alcohol

Excessive alcohol consumption is a major health concern in England. In order to tackle the problems of excessive drinking the government published their Alcohol Strategy in 2012 (HM Government, 2012). The strategy set out proposals aimed at tackling the 'binge drinking' culture and its associated impacts, as well as to reduce the number of people who drink to damaging levels. Research has highlighted the fact that young people who start drinking alcohol at an early age tend to drink more frequently and more in total than those who start drinking later in their life; as a result, they are more likely to develop alcohol problems in adolescence and adulthood. As a result, in 2009 the Chief Medical Officer for England issued guidance that young people under 15 should not drink alcohol at all (Department of Health, 2009).

7.1 Alcohol consumption and frequency

The proportion of young people who have consumed a whole alcoholic drink has decreased for all year groups for each consecutive survey since 2004; see Figure 19. Less than half of young people (47.7%) surveyed said they had never had a whole alcoholic drink. The latest ALS data shows that the proportion of young people who have never drunk a whole alcoholic drink has decreased most significantly in comparison to the differences to all previous surveys. The proportion who have consumed a whole alcoholic drink increases with age from 14.5% in year 7's to 78.1% in year 11's. Just under half (47.7%) of all young people who completed the survey said they had consumed a whole alcoholic drink; a reduction of 22% from 61.1% of all young people in the 2011 survey. Males were more likely to say they had consumed a whole alcoholic drink (49.6%) than females (45.7%).

The 2014 WAY survey found that 70.2% of 15 year olds in North East Lincolnshire had consumed a whole alcohol drink (Public Health England, 2015) whereas the 2015 ALS suggested that this proportion was slightly higher at 76.8%. This is considerably higher than the national percentage of 62.4% and the Yorkshire and Humber regional percentage of 66.2% reported by the WAY survey.

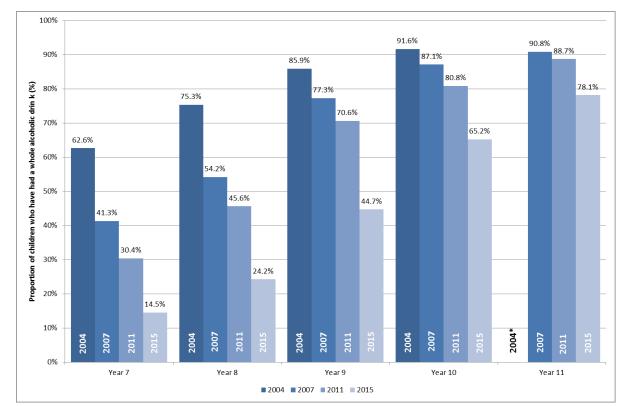


Figure 19 Proportion of young people who have had a whole alcoholic drink by year group

*2004 ALS did not collect data for year 11 pupils

Most young people who told us they have had a whole alcoholic drink, only drink alcohol a few times a year (on special occasions) (60.7%) and of those in years 9 to 11, 13.6% drink alcohol at least once a week; a slight increase from 12.5% in 2011. Overall, 26.3% of all those in years 9 to 11 drink at least once a month compared to 37.4% in 2011; a reduction of almost 30%.

Of the young people who drink alcohol more regularly than a few times a year (special occasions), females are more likely to have been drunk in the last four weeks (70.6%) than males (56%); see Table 24. Those who drink alcohol in year 10 are the most likely to have been really drunk in the last four weeks out of all year groups (65.5%).

The WAY survey found that 14.6% of 15 year olds in England, 16.2% in the Yorkshire and Humber region and 17.4% in North East Lincolnshire report being drunk in the last four weeks (Public Health England, 2015). The 2015 ALS found that 30.6% of all 15 year olds surveyed reported being drunk in the last four weeks; considerably higher than that of the figure reported by the WAY survey for North East Lincolnshire. It appears that the proportion of local 15 year olds who have been drunk in the last four weeks is higher than both the national and regional percentages.

Table 24 Proportion of young people who drink alcohol on more than just special occasions and who have been drunk in the last 4 weeks by year group and gender

	Yea	ar 7	Yea	ar 8	Yea	ar 9	Yea	r 10	Yea	r 11	Year	7-11
	Male	Female										
None	57.1%	50.0%	42.9%	45.0%	51.5%	25.5%	43.1%	25.7%	41.1%	31.2%	44.0%	29.4%
Once	14.3%	0.0%	19.0%	30.0%	21.2%	39.2%	28.4%	31.0%	31.8%	28.6%	27.7%	30.9%
Twice	0.0%	50.0%	23.8%	15.0%	19.7%	19.6%	18.1%	30.1%	18.5%	24.7%	18.6%	25.3%
Three or more times	28.6%	0.0%	14.3%	10.0%	7.6%	15.7%	10.3%	13.3%	8.6%	15.6%	9.7%	14.4%
Drunk at least once by gender	42.9%	50.0%	57.1%	55.0%	48.5%	74.5%	56.9%	74.3%	58.9%	68.8%	56.0%	70.6%
Drunk at least once	44.	.4%	56.	1%	59.	8%	65.	5%	63.	9%	63.	1%

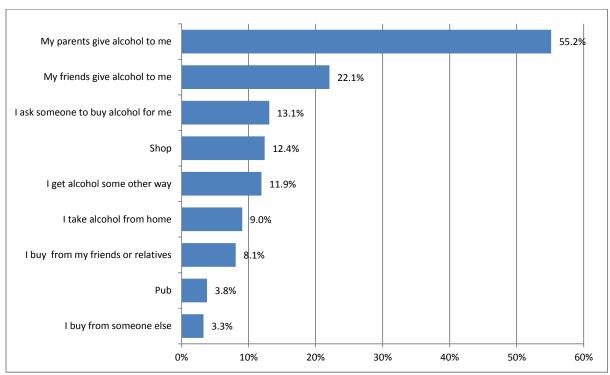
^{*}Does not include those who have never tried alcohol or only drink alcohol on special occasions

Young people who said that they had tried alcohol and had been really drunk at least once in the last four weeks had a lower SWEMWBS score (20.5) than those who said that they had not been really drunk in the last four weeks (21.52).

7.2 Where young people get alcohol

Of the young people who have drunk alcohol, the majority (55.2%) said that their parents gave them alcohol. The second most likely source of alcohol was from their friends (22.1%). 15.1% said that they ask someone to buy alcohol on their behalf, 12.1% bought it themselves from a shop, 9% take it from home and 3.8% said they get alcohol from a pub (see Figure 20).

Figure 20 Where young people usually get alcohol from, year 7 - 11*



^{*}Total may exceed 100% as young people were able to give more than one answer. Analysis only includes those who were identified as consuming alcohol at least once a month

Of the young people who drink alcohol frequently (at least once a month), the majority said they drink at a friend's home (64.6%) or at their own home (56.6%). 14.8% drank at a park/ street/ beach and 7.8% said they drank alcohol at a pub/ club (see Figure 21). Younger children were more likely to say that they drank alcohol at home whereas older children were more likely to drink alcohol at a friend's home. A large proportion of children commented stating that they drink alcohol at parties.

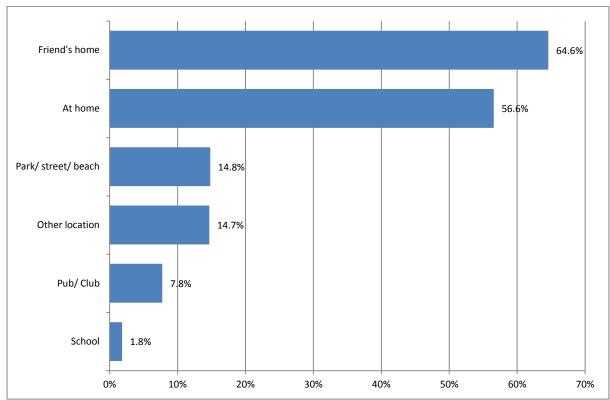


Figure 21 Where young people usually drink, year 7 to 11*

7.3 Alcohol risk factors

Of those who have never had an alcoholic drink less than 1% (0.7%) were classed as regular smokers. However, of the young people who reported being drunk at least once in the last four weeks, almost a fifth (19.4%) where classed as regular smokers; see Table 25

Table 25 Proportion of those who have never had an alcoholic drink and those who have been drunk in the last four weeks by regular smoker status

	Never had a whole alcoholic drink	Been drunk in the last four weeks
Regular smoker*	0.7%	19.4%

^{*}Those who smoke at least one cigarette a week

7.4 Alcohol social norms

Over half (56.5%) of all young people in year 9 to 11 who said that they frequently drink alcohol (at least once a month) also said that their parents always know when they drink alcohol; a higher

^{*}Total may exceed 100% as young people were able to give more than one answer. Analysis only includes those who were identified as consuming alcohol at least once a month

proportion than in 2011 (44.8%). However, a lower proportion (7.2%) of young people in 2015 said that their parents don't know when they drink alcohol than in the 2011 ALS (9.2%).

As an average across all year groups, 60% thought that at least half young people their age drank alcohol, a reduction from 66.3% in 2011. A smaller proportion of young people now think that all or most young people their age drink alcohol compared to the last survey; see Figure 22.

A fifth (19.4%) of all young people thought it was acceptable for people their age to drink alcohol. Older children were more likely to say they thought it was acceptable compared to younger children (3% in year 7 compared to 40.1% in year 11). However, approximately a quarter of those in year 9 to 11 were unsure if it was acceptable for young people to drink.

40% 35% 30% (%) 25% 25% 20% 15% 34.9% 30.1% 29.8% 25.8% 24.1% 22.3% 10% 5% 9.8% 9.6% 9.1% 4.5% 0% All of them None of them Only a few About half Most, but not all ■2011 ■ 2015

Figure 22 Proportion of young people who think that people their age drink alcohol

8 Drugs

Illegal drug use is a major public health issue for all ages; however, it is of particular concern among young people. Drug use amongst young people is associated with many health risks including mental health. Young people who misuse substances are at greater risk of poorer life outcomes. The increase in use of New Psychoactive substances (NPS) or 'legal highs' particularly amongst young people in the UK is of particular concern (HSCIC, 2014).

8.1 Exposure to drugs and drug use prevalence

Most young people say that they have never taken drugs and a lower proportion have taken drugs in 2015 (7.4%) compared to 2011 (8.3%).

The proportion of young people who have been offered illegal drugs increases with age, from 4% in year 7 to 27% in year 11. The proportion of all young people who have been offered drugs has slightly increased since the 2011 survey from 15.2% in 2011, to 16% in 2015. More males reported being offered illegal drugs (18.8%) compared to females (12%). Similarly to illegal drugs, the proportion of young people who have been offered legal highs also increases with age, from 4% in year 7, to 17% in year 11. There were a lower proportion of all young people who had been offered legal highs (10%) than those who have been offered illegal drugs (16%).

Table 26 shows that 8% of young people in years 9 to 11 have tried cannabis and 3.6% have tried legal highs. The proportion of those in years 9 to 11 who have tried MCAT, ecstasy and cocaine is very low. 41.7% had seen others use cannabis and a quarter (25.1%) had seen others use legal highs. A fifth (19.2%) of young people in years 8 to 11 said that they know where to get cannabis and 15.3% said they know where to get MCAT. A relatively high proportion of young people knew where to get legal highs (13.3%) and cocaine (11.2%). The least accessible drug was ecstasy (8.9%). The proportion of children who say they have seen others use drugs or know where to get drugs is surprisingly high.

Table 26 Proportion of young people who have tried, seen others use and know where to get drugs, years 9 to 11

	I've tried/ used it myself	I've seen others use it	I know where to get it
Cannabis	8.0%	41.7%	19.2%
Legal Highs	3.6%	25.1%	13.3%
MCAT	1.4%	16.4%	15.3%
Ecstasy	1.1%	11.2%	8.9%
Cocaine	1.1%	15.3%	11.2%

The proportion of young people in years 9 to 11 who have tried the five drugs shown in Table 27 has decreased since 2011. Cannabis use has dropped from 10.7% in 2011 to 8% in 2015 and legal high use has dropped form 5% in 2011 to 3.6% in 2015.

Table 27 Proportion of young people who have tried drugs, years 9 to 11

	2011	2015
Cannabis	10.7%	8.0%
Legal Highs	5.0%	3.6%
MCAT	1.9%	1.4%
Ecstasy	1.1%	1.1%
Cocaine	1.9%	1.1%

8.2 15 year old Cannabis Use

The 2014 WAY survey reported that in England 10.7% of 15 year olds have tried cannabis; this is higher than the Yorkshire and Humber regional proportion 9.8%. Local figures from the WAY survey found that 9.9% of 15 year olds in North East Lincolnshire have tried cannabis; lower than reported from the ALS, with 10.4% of 15 year olds reporting that they have tried cannabis. More 15 year old males had tried cannabis (12.8%) than females (8.2%), however, the 2014 WAY survey identified that more females had tried cannabis (10.7%) compared to males (9%) (Public Health England, 2015).

8.3 Drug Use Risk Factors

The comparison in emotional well-being between those who have never tried drugs against those who have tried or used drugs is presented in Table 28. Young people who have never tried drugs are more likely to feel happy about life, have one or more good friends, have parents or family that look out for them and feel like they have a lot to be proud of compared to those who have tried drugs. Whereas those who have tried/used drugs are more likely to feel sad or tearful, be bad tempered or get angry, feel anxious or depressed, worry a lot of the time and wish that they had a different kind of life than those who have never tried drugs. The overall SWEMWBS is lower in those that have tried or used drugs (19.88) compared to those that have never tried drugs (22.04).

Table 28 Emotional health and drug use

	Proportion of those who answer 'yes				
	Never tried drugs	Tried/used drugs			
I usually feel happy about life	85.7%	67.2%			
I often feel sad or tearful	25.9%	37.7%			
I have one or more good friends	97.1%	93.4%			
My parent(s) and family look out for me	97.2%	91.4%			
I am often bad tempered or get angry	36.6%	68.4%			
I often feel anxious or depressed	25.1%	43.9%			
I seem to worry a lot of the time	45.8%	53.1%			
I feel I have a lot to be proud of	68.5%	50.0%			
I like trying new things	76.4%	72.2%			
I wish I had a different kind of life	20.7%	44.3%			
Overall SWEMWBS score	22.04	19.88			

Young people who are eligible for FSM are also considerably more likely (21.5%) to have tried drugs than those who are not FSM eligible (13%).

Young people who have never tried drugs are less likely to be a regular smoker. Only 1.2% of young people who have never smoked have tried drugs whereas almost two thirds (63.4%) of young people who are classed as regular smokers report having tried drugs. Similarly, young people who have never had an alcoholic drink are considerably less likely to have tried drugs than those who have been drunk in the last four weeks (1.2% compared to 29.2%).

8.4 Where Young People get Drugs

Of those who said that they have tried drugs Figure 23 shows where they get their drugs from, with most getting them from their friends (54.6%) or a dealer (30.8%). Nearly a fifth (19.4%) reported they get them from other sources which included drug houses and from friends of people they know. 7.6% got drugs from a family member and 5.7% from a stranger. A small proportion said they get drugs from the internet (1.9%) or a shop (2.9%).

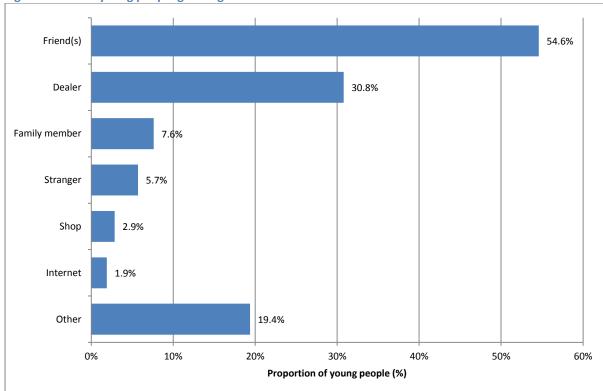


Figure 23 Where young people get drugs from*

8.5 Advice for Drug and Alcohol Problems

Nearly two thirds (61%) of young people across all year groups knew where to go for advice if they or someone they knew had a drug or alcohol problem; a slight decrease on the 2011 survey (62.5%). Awareness appears to increase with age, with 47% of those in year 7 knowing where to go for advice, increasing to 71.2% in year 11.

^{*}Total may exceed 100% as young people were able to give more than one answer. Analysis includes those who did not report that they had not tried drugs.

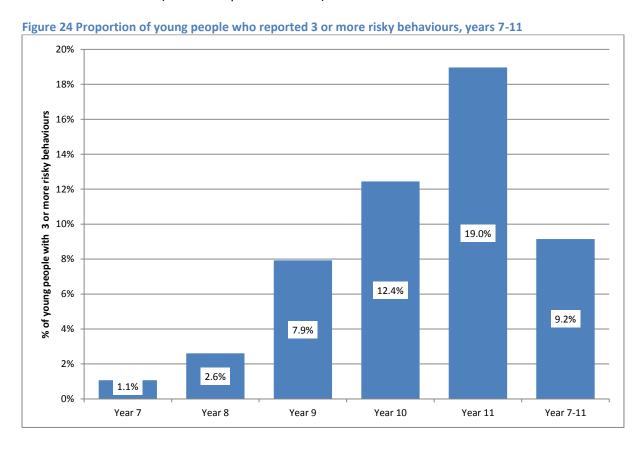
9 Risky Behaviours

Individual lifestyle behaviours, such as diet, exercise and smoking can have a significant impact on health and mortality. Previous analysis undertaken by the WAY survey (Public Health England, 2015) and the Kings Fund (2012) have attempted to quantify the proportion of the population who partake in risky lifestyle behaviours. Although the analysis that is presented below is not directly comparable with the work presented in the WAY survey, since it was not possible to directly replicate the WAY methodology, it does potential identify a cohort of young people who have risky behaviours.

Using the ALS dataset risky lifestyle behaviours are determined as those who:

- eat less than five portions of fruit and vegetables per day;
- undertake less than 1 hour of physical activity per week;
- are current smokers;
- drink alcohol at least once a month;
- have tried drugs.

Overall, 9.2% of young people in North East Lincolnshire reported 3 or more risky behaviours, with the proportion increasing significantly with age from 1.1% in year 7 to 19% amongst year 11's (Figure 24) and females being more likely to report risky behaviours than males (9.4% compared to 8.7%). Furthermore, amongst 15 year olds, females were considerably more likely to report risky behaviours than males (19.8% compared to 13.6%).



10 Sexual Health

Appropriate sex education is the cornerstone of equipping young people with the information they need to make responsible decisions about the sexual behaviours they engage in and what precautions they take (NHS Networks, 2016). Research evidence, particularly from longitudinal studies, shows that teenage pregnancy is associated with poorer outcomes for both young parents and their children. Teenage mothers are less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of poor mental health than older mothers (Public Health England, 2015).

10.1 Sexual Experience

Overall, a tenth (10.1%) of all young people in years 7 to 11 said that they have had sex and, unsurprisingly, those in year 11 were the most likely to say they have had sex (23.4%); see Figure 25. With all data aggregated for all ages there were no differences between the proportion of females (10%) and males (10.2%) who said that they have had sex. However amongst year 11's, a quarter of females (25.6%) compared to a fifth of males (21%) said they have had sex.

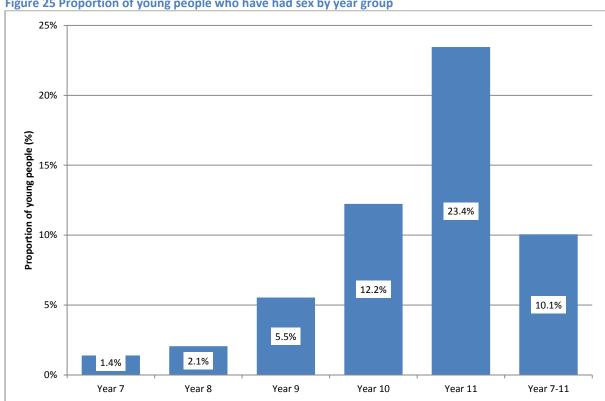


Figure 25 Proportion of young people who have had sex by year group

The proportion of young people who report that they have had sex has decreased across all year groups but has dropped most considerably for the latest ALS, see Figure 26. In 2015 the proportion of young people in years 9, 10 and 11 report having had sex dropped by approximately half compared to young people of the same year group in the 2011 survey.

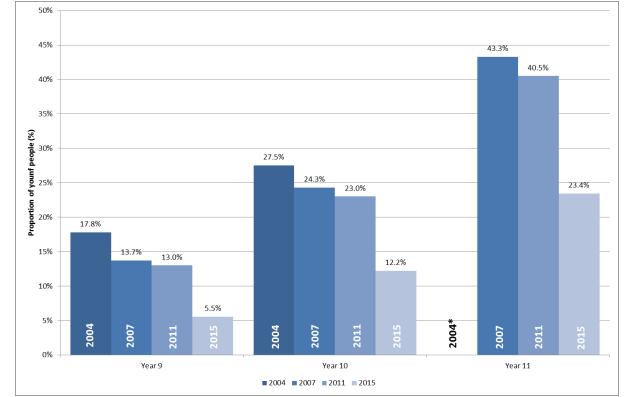


Figure 26 Proportion of young people who have had sexual intercourse, years 9 to 11 for 2004 to 2015

*2004 ALS did not collect data for year 11 pupils

10.2 Safe Sex and Contraception

Overall, two thirds (66.9%) of young people said a condom was the method of contraception last time they had sex, a quarter (24.6%) used the pill and 9.2% used the implant. Almost a quarter (23.5%) said that they used nothing the last time they had sex to prevent pregnancy. In comparison to the 2011 survey, contraception and safe sex practices have reduced considerably. Condom use has dropped by almost 10%, emergency contraception use has increased by 76.3% and the proportion using nothing has increased significantly from 5.3% in 2011 to 23.5% in 2015; an increase of 342% despite an overall reduction in young people who say they have had sex when comparing 2011 and 2015 proportions (see Section 10.1). Overall, the proportion of young people using LARC methods has increased from 10.8% in 2011 to 12.3% in 2015. There has been a small increase in the use of the pill (+5.2%) and the implant (+9.9%) and the proportion of those using more than one method of contraception has increased slightly by 1.3% since 2011; see Table 29.

Table 29 Last method(s) of contraception amongst those who reporting having sex, year 7 to 11, 2011 and 2015*

Contraception Method	2011	2015	% change
A condom	73.9%	66.9%	-9.4%
The pill	23.4%	24.6%	+5.2%
Implant	8.4%	9.2%	+9.9%
Emergency contraception	2.4%	4.2%	+76.3%
Injection	15.3%	3.1%	-79.9%
Other method	2.1%	5.8%	+174.7%
Nothing	5.3%	23.5%	+342.7%
LARC methods	10.8%	12.3%	+14.1%
More than one method	23.8%	24.2%	+1.3%

^{*}Total may exceed 100% as young people were able to give more than one answer.

Of those who have had sex, the majority (79.5%) said that they knew where to go if they or their partner was pregnant and wanted a termination.

10.3 Sex amongst 15 year olds

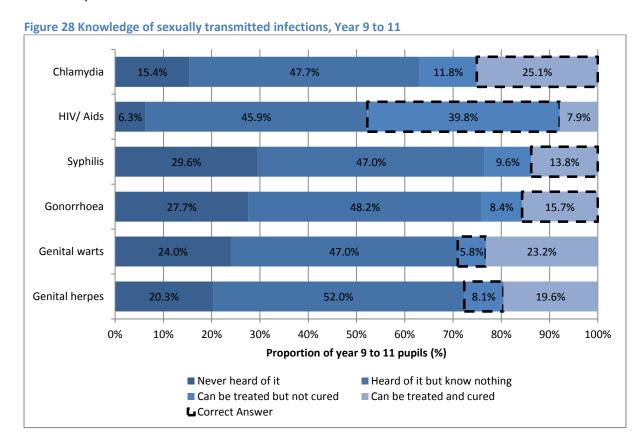
In 2014, the Health Behaviour in School-aged Children (HBSC) England National Report found that overall 21% of 15 year olds reported having had sexual intercourse (HBSC England, 2015). The 2015 ALS found that 20.9% of 15 year olds in North East Lincolnshire reported having had sexual intercourse; very similar to that of the HBSC figure reported in 2014. Figure 27 shows the trend in the proportion of 15 year old males and females who reported having sex with each successive ALS. Females have consistently been more likely to say they have had sex than males although the difference has dramatically reduced with the most recent 2015 survey; the difference no longer being statistically significantly different. The proportion of males reporting having had sex has remained below that of HBSC England trend for all survey years whereas females in NEL have been higher than the HBSC trend up until the latest 2015 ALS where the proportion in NEL is now lower.

Figure 27 Proportion of 15 year olds who have had sex, 2007 to 2015 60% 50% 44.9% 43.7% Proportion of 15 year olds (%) 40% 30% 23.3% 29.2% 25.9% 20% 18.3% 10% 0% 2007 2011 2015 ■ Male ■ Female

The most common method of contraception amongst 15 year olds was a condom (males 59.6%, females 63.9%) followed by the pill (males 21.2%, females 29.2%). The proportion of 15 year old females reporting using a condom was higher in North East Lincolnshire than that of those analysed in the HBSC 2014 survey (63.9% compared to 57%) and the proportion of 15 year old males who said their partner used the contraceptive pill last time they had sex was lower than that which was reported in the HBSC (21.2% compared to 28%). A quarter (25%) of 15 year olds reported using more than one form of contraception method, slightly lower than the 27% of young people who reported using more than one method in the HBSC 2014 (HBSC England, 2015). A quarter of males (25%) and a fifth of females (19.4%) aged 15 years reported not using any method of contraception the last time they had sex.

10.4 Sexual health education

Figure 28 shows the knowledge of sexually transmitted infections for those in years 9 to 11. Young people were most likely to not have heard of syphilis (29.6%) and gonorrhoea (27.7%) and overall, most young people had heard of HIV/AIDS (93.7%). Similarly, 39.8% correctly answered that HIV/AIDS is an infection which can be treated but not cured; the most correctly answered question amongst all the other sexually transmitted infections. The STI's with the lowest proportion of young people answered correctly were genital warts (5.8%) and genital herpes (8.1%). Year 7's were far more likely to have never heard of the STI's than older children.



Overall knowledge of STI's has dropped considerably since the 2011 survey, most notably for HIV/AIDS and chlamydia, and a higher proportion of young people in years 9 to 11 have never heard of the STI's with the exception of HIV/AIDS; see Table 30.

Table 30 Knowledge of sexually transmitted infections, year 9 to 11, trend 2007 to 2015*

	Neve	Never Heard of it		Heard of it but know nothing		Can be treated but not cured			Can be treated and cured			
	2007	2011	2015	2007	2011	2015	2007	2011	2015	2007	2011	2015
Genital herpes	20.3%	20.1%	20.3%	48.9%	45.6%	52.0%	8.4%	12.4%	8.1%	22.4%	21.9%	19.6%
Genital warts	16.4%	15.3%	24.0%	41.4%	45.5%	47.0%	7.5%	9.2%	5.8%	34.7%	30.0%	23.2%
Gonorrhoea	23.6%	20.6%	27.7%	47.6%	47.8%	48.2%	8.3%	10.3%	8.4%	20.4%	21.3%	<i>15.7%</i>
Syphilis	28.3%	25.4%	29.6%	47.7%	47.0%	47.0%	9.1%	11.6%	9.6%	14.9%	16.0%	13.8%
HIV/AIDS	4.7%	8.2%	6.3%	24.4%	32.7%	45.9%	63.4%	50.0%	<i>39.8%</i>	7.5%	9.2%	7.9%
Chlamydia	13.8%	9.7%	15.4%	37.2%	38.2%	47.7%	13.0%	14.5%	11.8%	35.9%	37.7%	25.1%

^{*}Correct answers are highlighted in green bold italics

10.5 Sexual Relationships and Social Norms

Just under a half (45.5%) of young people agreed that people should wait until they are 16 before they have sexual intercourse but only 23.1% disagreed, whereas, approximately a third (31.3%) did not have an opinion on the matter. The proportion who agreed decreased from 65.2% in year 7 to 29.3% in year 11's. Females were more likely to agree that young people should wait until they are 16 than males (49.5% compared to 41.7%).

Almost 80% of young people in year 11 thought that at least half of people their age had had sex. The proportion of young people who thought that at least half of people their age had had sex decreased to 5.2% in year 7 (Table 31). The proportion of children who thought that half of young people their age have had sex was considerably higher than the actual proportion who had reported having had sex (e.g. 79.2% of year 11's thought that at least half have had sex whereas only 23.4% reported having had sex).

Table 31 Proportion of young people who think young people their age have had sex, years 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
None of them	62.2%	35.2%	12.2%	5.8%	1.5%	18.0%
Only a few	32.6%	52.8%	64.9%	49.6%	19.2%	45.1%
About half	3.4%	9.1%	14.9%	29.9%	42.7%	22.5%
Most, but not all	0.7%	2.1%	7.1%	12.8%	32.1%	12.5%
All of them	1.0%	0.8%	1.0%	1.9%	4.5%	2.0%
At least half	5.2%	12.0%	23.0%	44.6%	<i>79.2%</i>	36.9%

11 Feeling Safe

11.1 Neighbourhood safety

Children's social and cognitive development, confidence and personal resilience and well-being are all affected by a wide range of influences throughout life, including the environment they live in and their local community (Department of Health, 2011). Recognition of the importance for children to feel safe in their local community is gaining more interest (Faculty of Public Health, 2011).

Most young people said that they felt safe in the area they live in (69.9%) with no considerable differences between age groups and gender. However, younger children were slightly less likely to say they felt unsafe than older children.

11.2 Internet safety

The internet is an integral part of young people's every days lives but while the internet and the associated technology provides plenty of opportunities it can also be source of risks which can potentially lead to harm (Department of Education, 2012).

A third of young people (34.1%) said that they had seen images/ pictures online which made them feel uncomfortable, with those in year 11 (45.9%) more than twice as likely to say they had seen images that made them feel uncomfortable than those in year 7 (19.8%); see Figure 29. Females were also much more likely to say they had seen images which made them feel uncomfortable than males (39.1% compared to 29.1%).

Over half (55.6%) of children said that they had received messages from someone they don't know while online and just over a quarter (26.1%) said that they believe they have interacted with someone online who was lying about who they are; see Figure 29.

Older children were considerably more likely to say they had met up with someone they first met online than younger children and males were marginally more likely to do so than females (9.5% compared to 8.8%); Figure 29.

Only a small proportion of young people (6.8%) said that they had been pressured to do something they were not comfortable doing when online and those in year 11 are more likely to say they felt pressured to so something (8.5%) than those in year 7 (3.8%) (Figure 29). Females were also more likely (8.8%) to say they felt pressured to do something they did not want to do than males (4.7%). Further analysis revealed that females in year 11 were twice as likely to have felt pressured to do something online than males (8.1% for females compared to 3.3% for males).

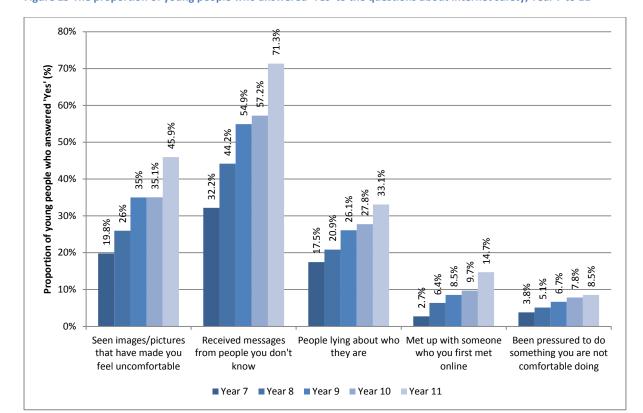


Figure 29 The proportion of young people who answered 'Yes' to the questions about internet safety, Year 7 to 11

11.3 Bullying

Bullying is detrimental to physical and mental health with research suggesting that it is a problem for many young people, particularly within schools. Legislation means that by law, every school must have measures in place to prevent all forms of bullying. It is acknowledged that bullying in schools can negatively impact health, educational attainment and can pose a suicide risk. A number of initiatives are in place to prevent and reduce bullying particularly among young people. Bullying can take several forms, including physical bullying and psychological/emotional bullying. Bullying can also take place virtually using technology such as social media websites and text messages (Public Health England, 2015).

Most young people report that they have not been bullied in the last year (62.5%). Over a third of those in years 8 (35.3%) and 9 (35%) stated that they have been bullied at least once in the last year (Table 24). Year 7's were more likely to say they are bullied most days (8.1%) in comparison to the other year groups. A decreasing proportion of young people say they are bullied most days as age increases.

Table 32 Proportion of young people reporting they have been bullied, year 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Y7-11
Never	67.1%	59.1%	56.4%	61.3%	67.8%	62.0%
Once or more in the last year	11.8%	22.6%	23.4%	21.4%	14.4%	19.1%
Once or more in the last 4 weeks	5.2%	3.4%	3.4%	3.8%	3.2%	3.7%
About once a week	1.8%	2.9%	2.9%	2.0%	1.9%	2.3%
Most days	8.1%	6.4%	5.4%	5.0%	3.9%	5.6%
Don't know	6.1%	5.6%	8.6%	6.5%	8.8%	7.2%
Bullied at least once in the last year	26.8%	35.3%	35.0%	32.1%	23.4%	30.8%

Table 33 shows the emotional well-being of young people who have never been bullied compared to those who report they have been bullied at least once in the last year. Young people who have been bullied are more than twice as likely to feel sad or tearful, feel anxious or depressed and wish they had a different kind of life. Of the young people who said they have never been bullied 90.6% said they usually feel happy about life compared to only 74% of young people who have been bullied in the last year. Similarly, young people who have never been bullied have a higher average SWEMWBS score, 22.8, than the average score of those who have been bullied (20.41).

Table 33 Emotional well-being of those who have been bullied in the last year compared to those who have not, year 7 to 11

Emotional health	Never bullied	Bullied at least once in the last year
I usually feel happy about life	90.6%	74.0%
I often feel sad or tearful	18.1%	42.1%
I often feel anxious or depressed	17.2%	41.2%
I wish I had a different kind of life	15.2%	35.4%
Reported cutting or hurting themselves*	8.2%	26.3%
SWEMWBS score	22.8	20.41

^{*}Those who answered they would "sometimes", "usually" or "always" to "When you have a problem that worries you or you are feeling stressed, what do you do about it?"

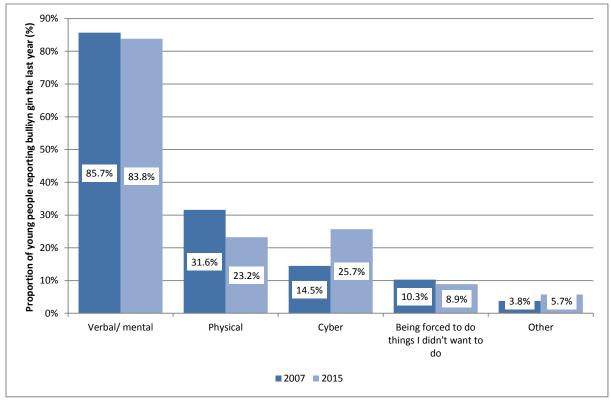
Of those who have been the victim of bullying in the last year the, the majority (83.8%) said that it was verbal/ mental bullying. The second most common type of bullying was cyber (25.7%) followed by physical bullying (23.2%) and being forced to do things (8.9%). Verbal/ mental and cyber bullying were more common amongst older children whereas physical bullying was greater amongst younger children (Table 34). Males were twice as likely (32.2%) to be physically bullied than females (15.8%) whereas females were twice as likely (34.7%) to be cyber bullied than males (15.1%). Figure 30 shows the comparison in type of bullying between the 2007 and 2015 surveys. Verbal and mental bullying has dropped marginally since 2007 and physical bullying has dropped from 31.6% in 2007 to 23.2% in 2011. However, the proportion of young people reporting that they have been cyber bullied has increased from 14.5% in 2007 to 25.7%.

Table 34 Type of bullying reported by those who had been bullied at least once in the last year, year 7 to 11*

Type of bullying	Year 7	Year 8	Year 9	Year 10	Year 11	Y7-11
Verbal/ mental	69.4%	82.9%	82.7%	88.4%	91.1%	83.8%
Physical	30.6%	24.1%	25.2%	19.0%	19.4%	23.2%
Cyber	15.0%	24.5%	25.8%	25.8%	34.6%	25.7%
Being forced to do things I didn't want to do	6.9%	10.5%	8.8%	9.4%	8.0%	8.9%
Other	15.0%	5.9%	4.4%	3.2%	3.8%	5.7%

^{*}Total may exceed 100% as young people were able to give more than one answer. Analysis only includes those who were identified as being bullied in the last year.

Figure 30 Type of bullying of those who reported bullying the last year, 2007 and 2015*



^{*}Total may exceed 100% as young people were able to give more than one answer.

The vast majority of bullying is reported to have taken place in school (86.9%). Almost a third (31%) said they had been bullied out of school and a quarter (25.4%) said that it was over the internet or via social media. 9.7% said they have been bullied by texts or phone calls. Females were far more likely to report being bullied on the internet/ social media or by text/ phone calls than males.

Table 35 shows how bullying has affected those who have been the victim of bullying in the last year as well as the differences between males and females. Females were considerably more likely to say that bullying has adversely affected them than males. Over a fifth (22.1%) of females said that they had cut or hurt themselves as a result of being bullied whereas, males were half as likely (10.5%) to cut or hurt themselves. Almost a half of females (47.5%) said that being bullied keeps them awake at night and a fifth (20%) said they would miss school or lessons.

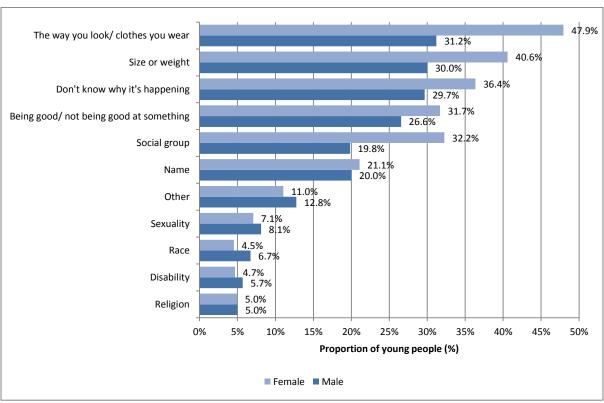
Table 35 How being bullied has affect young people by gender, year 7 to 11

How bullying affects young people	Male	Female	Year7-11
Keeps me awake at night	20.7%	47.5%	35.5%
I hurt/cut myself because of bullying	10.5%	22.1%	16.9%
I have stopped going to school/ miss lessons	10.3%	20.0%	15.6%
I have changed school	7.4%	9.9%	8.7%
I don't see my friends anymore	10.9%	17.5%	14.5%

Over half of young people (51.5%) who said they had been bullied also said that they felt afraid to go to school because of bullying. Of the young people who had been bullied, 5.2% said they felt afraid to go to school "very often". Young people in year 11 were less likely to say they felt afraid of going to school because of bullying than in all other year groups. The majority of bullied females (62%) said they felt afraid to go to school whereas just over a third (38.5%) of males said they felt afraid.

The most common reason for bullying was "The way you look/clothes you wear", with almost half of all bullied females (47.9%) stating this as the reason for bullying and a third of males (31.2%). This was followed by "size or weight" with females again being more likely (40.6%) to give this as a reason for being bullied than males (30%) and approximately a third of young people were unsure as to why they were being bullied. Figure 31 also shows the least common reasons for bullying across both sexes were sexuality, race, disability and religion. Other reasons young people stated for being bullied included their hair style/colour, their personality and their relationships (boyfriends/girlfriends).

Figure 31 The suspected reason for why young people think they are being bullied, year7 to 11*



^{*}Total may exceed 100% as young people were able to give more than one answer.

Overall, less than half (48.7%) of all children felt that their school takes bullying seriously (Table 36) although males (52.6%) were more likely to think their school takes bullying seriously than females (44.6%). Year 7's (74.2%) were twice as likely to say bullying is taken seriously at their school than those in year 11 (37.3%). There is a considerable drop in the proportion of females who think school bullying is taken seriously between year 7 (71.1%) and year 9 (38.7%) especially in comparison to the drop shown amongst males in the same year groups.

Table 36 Proportion of young people who think bullying is taken seriously within their school, Year 7 to 11

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
Male	77.1%	55.3%	48.7%	47.1%	41.0%	52.6%
Female	71.1%	55.2%	38.7%	33.4%	33.8%	44.6%
Total	74.2%	55.2%	43.9%	40.8%	37.3%	48.7%

11.4 Domestic Violence

Tackling domestic abuse as a public health issue is vital for ensuring that some of the most vulnerable people in our society receive the support, understanding and treatment they deserve. A greater focus on interventions that are effective ensures that victims can be treated and more can be done to prevent future re-victimisation. It is also the government's strategic ambition, as set out in 'Call to end violence against women and females 2010' and successive action plans, to do what it can to contribute to a cohesive and comprehensive response (Home Office, 2010). The governments definition of domestic violence, updated in 2013, is now inclusive of those aged 16 (Home Office, 2013) and should therefore be more appropriate to those in adolescence.

Since 2007, the proportion of young people who understand the definition of domestic violence has reduced from 81.5% to 71.7% in 2015 with a marginal rise from 2011 (69.4%) (see Figure 32). Older children are considerably more likely to understand the definition of domestic violence in 2015 than younger children. In comparison, a much higher proportion of those in year 7 in 2007 (72.3%) understood the domestic violence definition than year 7's in 2015 (47.8%) whereas, older children were more likely to understand the definition now than compared to when surveyed in previous years; the recent change to the domestic violence definition may be the cause for this. There were no differences noted between the proportion of males and females who said they understand the definition of domestic violence (males 71.2%, females 71.9%).

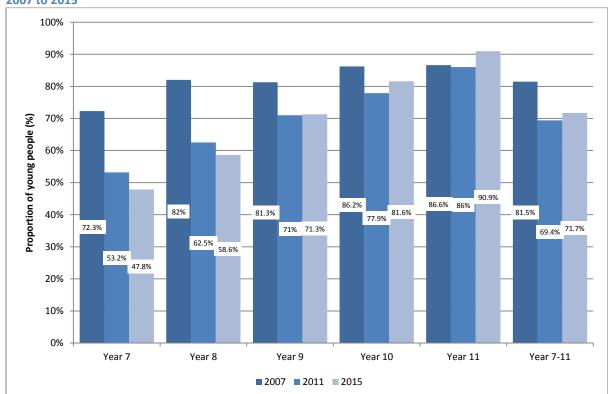


Figure 32 Proportion of young people who say the understand what domestic violence is, by year group, 2007 to 2015

Most young people (86.7%) said they had never seen or witnessed domestic violence in their family. There has been a gradual reduction in the proportion of young people who say they have seen or witnessed domestic violence within their family with each successive survey; 25% in 2007, 18% in 2011 and 13.3% in 2015. Most young people (94.6%) said that they feel safe in their own home although females (6.2%) were marginally more likely to say they don't feel safe than males (4.4%); a similar finding in previous surveys.

Table 37 shows the proportion of males and females by year group who said they would like help and advice about domestic violence. Overall, males (9.2%) were more likely to want advice than females (6.6%) and a higher proportion of males than females said they would like advice except for year 9's. 12.5% of young people in year 7 said they would like advice and this proportion reduces for each year group through to year 11 where 4.6% said they would like advice.

Table 37 Proportion of young people who say they would like help and advice about domestic violence, by gender and year group

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
Male	17.3%	9.9%	7.8%	7.3%	5.5%	9.2%
Female	7.1%	7.8%	9.3%	5.4%	3.9%	6.6%
Total	12.5%	8.8%	8.5%	6.4%	4.6%	7.9%

Over half of young people (57.1%) said they would call the police if someone in their family was physically hurting them or another family member, 13.5% said they would not call the police and almost a third (29.4%) said they don't know what they would do. Older children were most likely to say they would call the police.

12 Living, Learning and the Future

12.1 Living

When asked why their local area is a good place to live, the majority of young people reported that there are lots of places to meet up with friends (55.9%) although younger children were more likely to say this than older children (67.2% in year 7 compared to 44.6% in year 11). Less than 10% of young people felt that their local area offered good job prospects (9.6%); see Figure 33.

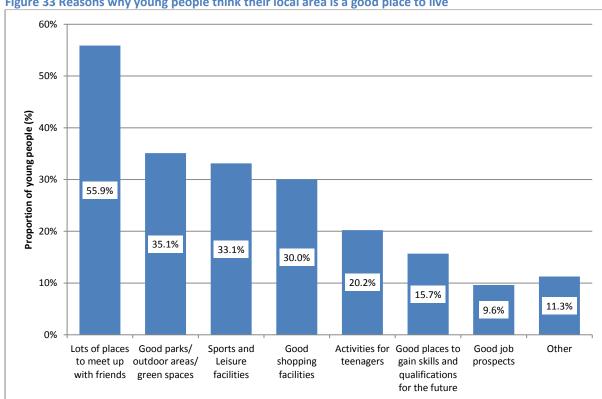


Figure 33 Reasons why young people think their local area is a good place to live

A quarter of young people (24.2%) thought that the parks and play areas in their local area were good or very good; a considerable decrease on the 2011 survey where almost a third (31.5%) of young people thought parks and play areas were good.

Half of young people reported that their local area is a good place for young people to live (52.1%), however, the proportion who thought this reduced as age increased (65.4% in year 7's reducing to 42.8% in year 11's).

12.2 Learning

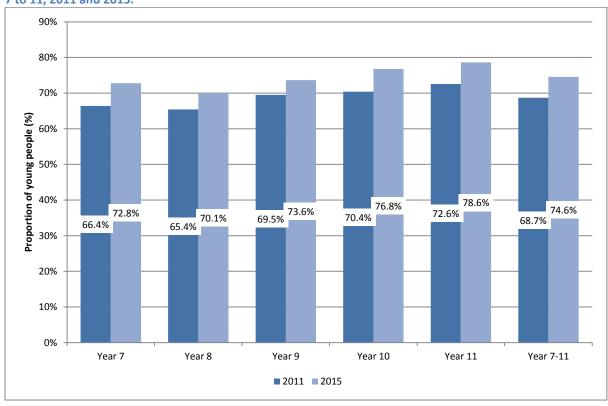
Three quarters of all young people reported that it was very important for them to get good marks/ results in school work (74.6%); an increase on the 2011 ALS where, overall, 68.7% said that it was very important to for them to get good results. Females were more likely to say that getting good marks/results is very important to them (76.9%) when compared to males (72.2%). This gender difference was found across all year groups apart from year 8's. The proportion of young people who say that achieving good marks is important also increases with age from 70.2% amongst year 8's to 78.6% in year 11's (Table 38).

Table 38 Proportion of young people who say it's very important to get good results in school work/ exams by gender, years 7 to 11

	Male	Female	Total
Year 7	69.8%	76.0%	72.8%
Year 8	72.4%	68.4%	70.2%
Year 9	71.2%	76.0%	73.5%
Year 10	72.3%	81.6%	76.8%
Year 11	74.9%	81.8%	78.6%
Year 7-11	72.2%	76.9%	74.6%

The proportion of young people who say achieving good results is very important have increased when compared to the previous 2011 survey; from 68.7% in 2011 to 74.6% in 2015. Figure 34 shows that the proportion of young people reporting that it is very important to get good marks/results in school work has increased across all year groups since the 2011 ALS.

Figure 34 Proportion of young people who say it's important to get good results in school work/ exams years 7 to 11, 2011 and 2015.



12.3 The future

The majority of young people (52%) say that they would like to go to college/ university at the end of year 11; the same proportion as in the 2011 ALS. However, a much greater proportion of females (62.9%) than males said they would like to go to college/ university. Whereas, females were more likely to say they want to go to college/ university, males were considerably more likely to want to get a job at 16 (16.3% compared to 8.7%) or do an apprenticeship (18.3% compared to 5.8%). Almost a tenth (9.4%) of young people said that they weren't sure what they wanted to do at the end of

year 11; Table 39. There were no considerable differences in what young people said they would like to do when they leave school when compared with the 2011 survey.

Table 39 What young people would like to do at the end of year 11 by gender

	Male	Female	Total
Study and go to College/ University	41.1%	62.9%	52.0%
Get a job at 16	16.3%	8.7%	12.5%
Do an apprenticeship	18.3%	5.8%	12.1%
Study and get a job at 18	10.2%	11.5%	10.8%
Start a family	2.3%	1.2%	1.8%
Training	2.0%	1.0%	1.5%
Don't know yet	9.9%	8.9%	9.4%

The proportion of young people who would like to go to college/ university increases as children get older from 46.3% in year 7 to 63.2% in year 11. Similarly, the proportion who say they would like to do an apprenticeship increases from 5.2% in year 7 to 17.2% in year 11. On the other hand, a greater proportion of younger children (19%) say they would like to get a job at 16 reducing to 6% in year 11's and the proportion of children who don't know yet what they want to do at the end of year 11 decreases from 10.3% in year 7 to 4.1% in year 11; see Table 40.

Table 40 What young people would like to do at the end of year 11 by year group

	Year 7	Year 8	Year 9	Year 10	Year 11	Year 7-11
Study and go to College/ University	46.3%	48.5%	46.4%	53.9%	63.2%	52.0%
Get a job at 16	19.0%	15.6%	13.1%	10.8%	6.0%	12.5%
Do an apprenticeship	5.2%	7.5%	14.3%	13.8%	17.2%	12.1%
Study and get a job at 18	12.0%	11.8%	12.2%	10.6%	7.9%	10.8%
Start a family	4.1%	1.4%	1.7%	1.1%	1.1%	1.8%
Training	3.1%	1.6%	1.7%	0.9%	0.5%	1.5%
Don't know yet	10.3%	13.6%	10.6%	8.9%	4.1%	9.4%

Overall 43% of young people thought that they would be living in the area in five years' time with a lower proportion thinking they would be living in the area in ten years' time. Figure 35 shows that the year 7's were much more likely to think they would be living in the area in the future than year 11's.

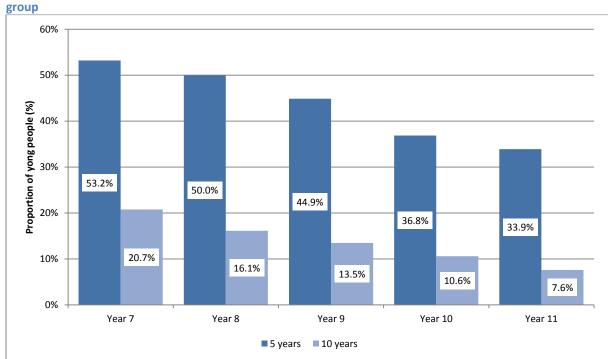


Figure 35 Proportion of young people who think they will be living in the area in 5 and 10 years' time by year

When compared with 2011 a greater proportion of young people thought they would stay in the local area in the future. For those in year 11, just less than a quarter (24.3%) thought they would be living in the local area in 5 years' time when surveyed in 2011, whereas just over a third (33.9%) of year 11's thought they would be living in the area in 5 years' time in the latest survey (see Figure 36).

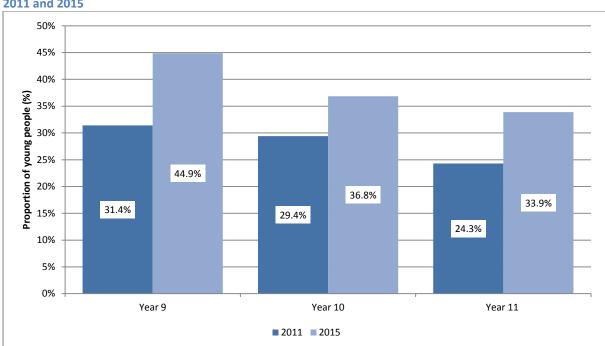


Figure 36 Proportion of young people who think they will be living in the area in 5 years' time, years 9 to 11, 2011 and 2015

13 Conclusion

The 2015 North East Lincolnshire Adolescent Lifestyle Survey is the most inclusive and comprehensive survey undertaken with young people of secondary school age locally in the last decade. An overall sample size of 4,266 young people represented 51.6% of the 11 to 16 year old secondary school population. Responses were received from eight of the ten mainstream secondary school academies along with a small representation from young people who were home schooled and those in alternative provision.

13.1 Summary of Findings

Analysis of the 2015 Adolescent Lifestyle Survey has shown that there are a lot of positives to be taken regarding the health, lifestyles and behaviours of young people in North East Lincolnshire. However there is still considerable work to be done to reduce the inequality gap for particular outcomes between North East Lincolnshire and the regional and national outcomes.

The proportion of young people who are eating more healthily has marginally increased since 2011. A higher proportion eat breakfast and average fruit and vegetable portion consumption per child has increased slightly. However, there are still a worrying proportion of young people who do not consume fruits and vegetables or who skip meals (particularly amongst females in middle adolescence).

Emotional health and wellbeing amongst females appears to be declining with higher proportions of females than males reporting negative emotional health and scoring, on average, 2 points lower on the SWEMWBS than males. The proportion of young people who report cutting or hurting themselves as a coping mechanism when dealing with a problem is of particular concern. National evidence appears to show higher rates of mental disorders amongst males which is contrary to the findings of this survey. The fact that this survey showed poorer emotional health for females perhaps suggests that males have a higher propensity for more serious mental disorders that require services or possibly that, for a self-reported survey, males are less likely to realise or acknowledge that they have emotional issues.

One of the biggest headlines from the survey is that cigarette smoking prevalence amongst young people has decreased dramatically since 2011. However, e-cigarette usage appears to be greater than perhaps anticipated amongst young people and also the proportion of those using nicotine products is not too dissimilar to the overall smoking prevalence recorded in 2011.

The proportion of young people who have tried alcohol has decreased compared to previous years although the proportion still appears to be higher than national and regional percentages. Risky drinking behaviours amongst those who regularly drink also appears to be an issue in North East Lincolnshire with a high proportion of young people reporting being drunk in the last four weeks.

Drugs consumption appears to have decreased amongst young people in North East Lincolnshire in recent years and legal high usage was not perhaps as high as anticipated. The proportion of young people who say they know where to get particular drugs or have seen others use drugs appears to be relatively high and shows that the exposure young people have to drugs in North East Lincolnshire is perhaps higher than ideal.

A much smaller proportion of young people are having sex in North East Lincolnshire than recorded in previous surveys although there is a concerning increase in the proportion of those who do have sex not practising safe sex or using contraception. Knowledge of STI's amongst young people is also lower than in previous surveys.

The internet habits of young people have been documented for the first time in North East Lincolnshire. It is not yet clear if these habits are comparable with other areas but it was surprising to note that a considerable proportion of young people had met up with someone who they first met online and there were also substantial number of young people who had felt pressurised to do something while online that they did not feel comfortable doing.

The majority of young people reported not being bullied in the last year and the proportion reporting physical bullying has dropped notably since 2007. However, cyber bullying appears to be increasing. Most worryingly though, almost a fifth of females who say they have been bullied said that they have cut/ hurt themselves as a result of being bullied.

Fewer young people say they have witnessed domestic violence than in previous surveys and a lower proportion of young people said they would like advice about domestic violence than in the 2011.

The proportion of children who want to do well at school appears to have increased in recent years. Furthermore, those who say they would like to go on to further and higher education has remained the same as in 2011, despite an increase in tuition fees in recent years. The proportion of young people who think that North East Lincolnshire offers good job prospects for their future is low. However, a greater proportion of young people now think they will be living in North East Lincolnshire in the future than in 2011; suggesting that more young people think they potentially have a future in the local area than before.

13.2 Survey Process

The use of an electronic survey has again proven successful with a much improved data analysis process. However, recent changes to the software used in the latest survey may inhibit further development for future Adolescent Lifestyle Surveys so other products should be evaluated for feasibility prior to any future survey development.

Ensuring increased school participation was a main priority of the 2015 survey. The process for achieving a greater participation rate, which commenced with direct engagement with head teachers (full process detailed in section 2.2 methodology), was certainly beneficial in increasing response rates and should be considered as best practice process for future surveys.

14 References

Department of Education (2012) Advice on child internet safety 1.0: universal guidelines for providers. [online] Last accessed April 2016 at

https://www.gov.uk/government/publications/advice-on-child-internet-safety-10-universal-guidelines-for-providers

Department of Health (2009) *Guidance on the consumption of alcohol by children and young people*. Department of Health.

Department of Health (2011) *UK Physical Activity Guidelines*. [online] Last accessed April 2016 at https://www.gov.uk/government/publications/uk-physical-activity-guidelines

Department of Health (2013) *Health Lives, Healthy People: A Tobacco Control Plan for England*. London: HM Government.

Department of Health (2015) *Improving mental health services for young people*. [online] Last accessed April 2016 at https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people

Faculty of Public Health (2011) *Thinking ahead – Why we need to improve children's mental health and wellbeing.* London: Faculty of Public Health.

HBSC England (2015) *Health Behaviour in School-aged Children (HBSC): World Health Organisation Collaborative Cross National Study 2014.* [online] Last accessed April 2016 at http://www.hbscengland.com/wp-content/uploads/2015/10/National-Report-2015.pdf

HM Government (2012) The Government's Alcohol Strategy. London: Home Office.

Home Office (2010) *Call to End Violence against Women and Females, Taking Action – the next chapter.* London: HM Government.

HSCIC (2014) *Smoking, drinking and drug use among young people in England in 2014*. [online] Last accessed April 2016 at http://www.hscic.gov.uk/catalogue/PUB17879/smok-drin-drug-youn-peopeng-2014-rep.pdf

NHS Health Scotland (2016) *Measuring mental health*. [online] Last accessed April 2016 at http://www.healthscotland.com/scotlands-health/population/Measuring-positive-mental-health.aspx

NHS Networks (2016) Sexual Health – Helping Teenagers and Young People Minimize Some of the Risks Associated with Sex. [online] Last accessed April 2016 at https://www.networks.nhs.uk/nhs-networks/sexual-rehabilitation-after-cancer/documents/Sexual%20Health%20minimizing%20risk. doc

North East Lincolnshire Council (2012) *A Tobacco Control Plan for North East Lincolnshire 2012-2015*. North East Lincolnshire: North East Lincolnshire Council/ North East Lincolnshire Care Trust Plus.

Public Health England (2015) *Health behaviours in young people – What About YOUth?* [online] Last accessed March 2016 at http://fingertips.phe.org.uk/profile/what-about-youth

Public Health England (2016) *The Eatwell guide – Helping you eat a healthy, balanced diet*. [online] Last accessed April 2016 at https://www.gov.uk/government/publications/the-eatwell-guide

Public Health England (2016) *Teenage conceptions*. [online] Last accessed April 2016 at http://fingertips.phe.org.uk/search/teenage#page/6/gid/1/pat/6/par/E12000004/ati/102/are/E060 00015/iid/20401/age/173/sex/2

The Kings Fund (2012) Clustering of unhealthy behaviours over time — Implications for policy and practice. [online] Last accessed May 2016 at http://www.kingsfund.org.uk/sites/files/kf/field_publication_file/clustering-of-unhealthy-behaviours-over-time-aug-2012.pdf