

A Picture of Health Jersey 2010

Reflections on the health-related behaviour
of young people aged 10 to 15 years



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Introduction

The Health Related Behaviour Questionnaire provides a picture of the health beliefs, attitudes and self reported behaviours of young people in Jersey. The questionnaire was carried out with students in primary schools at ages 10-11 years, and in secondary schools at 12-13 years and 14-15 years. A total of 2,842 students completed the survey. The survey questions cover a range of health related topics including family background and home life through to specific health issues such as diet, physical activity, drugs and alcohol, smoking, and emotional health.

The questionnaire has been carried out since 1996 in secondary schools and 1998 in primary schools. This gives a picture of both trends over time in reported health behaviours as well as how the same group of young people change as they become older. Some of the survey questions are also asked in UK schools so we are able to make comparisons between reported health beliefs and behaviours in Jersey with young people in the UK.

This report is structured into subject sections that deal with relevant health issues including: emotional health, diet, obesity, alcohol, illegal drugs, sexual health, smoking and physical activity. Each of these sections gives information on the key findings; why that health issue is of importance and goes onto describe relevant findings, trends over previous surveys and comparisons between ages, gender and young people in the UK.

This survey has been funded by the Building a Safer Society Strategy and will continue to inform States Policy and Strategy such as the Children's and Young People Framework. The implementation, analysis and reporting of the survey has been managed by the Public Health Department. The survey could also not happen without the support of the Department for Education Sport and Culture, all of the islands schools and the young people that complete the survey. Our thanks also go to Jessica Hounsome, Sheena Renouf and Netta Norris of the Health Intelligence team, as well as Martin Knight and the team of Health Promotion Officers who helped administer the process, draft the report and re-check all the data.

The survey aims to give a comprehensive picture of young people's health in Jersey. We hope that you find the survey results interesting and informative in guiding your work with young people.

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Additional copies of this report can be downloaded from www.gov.je

Executive Summary

The 2010 survey shows a continuing trend of improving health related behaviours in young people. There are continued decreases in rates of smoking, drinking and drug taking. The consumption of less healthy foods has also decreased alongside increased rates in physical activity and consumption of fresh fruit and vegetables. As well as this self-esteem remains high with 80% recording medium to high scores.

The fact that an increasing majority of young people are choosing not to smoke, drink alcohol or take illegal drugs supports the continued preventative efforts of parents and services. These seem to be having a positive effect.

Despite the positive overall results over all the population of children there remain some areas of concern. For example, only 12% of children and young people are meeting the recommended hour a day of physical activity as illustrated by less children and young people now walking to school than in 2006. Travel to school by bicycle has remained consistently low since 1998 at around 4-5% despite high levels of bike ownership. Given that only a quarter of children report eating 5-a-day there is a risk that childhood obesity could rise.

The survey findings also show how certain health behaviours change as young people get older. This is particularly true in the case of tobacco and alcohol. As young people become older there are increases in reported drinking from 6% at 10-11 years to 12% at 12-13 years and up to 36% at 14-15 years. In addition reported smoking is similar where less than 1% report smoking at 10-11 years an increase to 2% at 12-13 years and a jump to 12% at 14-15 years. Unfortunately these young peoples behaviour will have a damaging affect on their health now and in the future. These higher risk behaviours require targeted interventions to provide additional preventative support.

The Health Related Behaviour Questionnaire findings represent the only whole island picture of young people's health. The data gained from the survey is a valuable source of information about what is happening within our local children's population. Gaining a clearer understanding of young people's health behaviours now will allow us to shape existing services and plan future provision as described in the Children's Strategy Framework.

The good news <i>For most young people in Jersey...</i>	The bad news <i>For some young people in Jersey...</i>
<ul style="list-style-type: none"> ❑ Are generally satisfied with their life ❑ Have medium to high self-esteem ❑ Feel in charge of their health ❑ Can say no to peer pressure ❑ Don't drink, smoke or use drugs ❑ Enjoy physical activity ❑ Eat fresh fruit and vegetables on most days and are physically more active than their counterparts in the UK ❑ Have realistically high expectations for good grades at GCSE 	<ul style="list-style-type: none"> ❑ Are afraid to go to school because of bullying ❑ Don't meet the recommended 5 a day or are not active for at least an hour a day ❑ Have nothing to eat or drink before school ❑ Are overweight or obese ❑ Will take up smoking between the ages of 12-13 and 14-15 years ❑ Females become less physically active with age

The 2010 Survey

Response rates

Responses from 2,842 pupils aged between 10-15 years in 40 local schools (30 primary and 10 secondary). This represents 89% of all pupils in these year groups on the island.

Year	Males	Females	Total	
6 (10-11years)	514	452	966	91% of year group
8 (12-13 years)	506	461	967	89% of year group
10 (14-15 years)	489	420	909	87% of year group

For the first time the questionnaire was completed online. More pupils took part in the survey (increased response rate) and most completed the survey in the time allocated. The online process made completion quicker for most as they were directed only to questions that applied and did not see questions that were not relevant to them (e.g. where did you buy alcohol, if they did not drink).

Sampling

In some UK schools who have completed this survey a sample of each year group is surveyed, most commonly about 50% of a school year group. In Jersey we do not sample the year groups as we are able to give the questionnaire to all pupils of the year groups targeted. The questionnaire was answered by a total of 2,842 young people in Years 6, 8 and 10, a response rate of 89% for those year groups. We therefore get responses from a much larger proportion of our population so our data should be more reliable than that of the UK.

Analysis

The 2010 data, along with previous HRBQ data, has been used in this report to give a picture of the health of the young people of Jersey in 2010. The data capture and initial processing of the completed online questionnaires was carried out by the Schools Health Education Unit in Exeter. Further summary, analysis and comparison were carried out at the Jersey Public Health Department by the Health Intelligence Unit team.

Quality of data

How reliable are these figures?

Ideally any difference between the answers given by two people about their behaviour should be due only to differences in their behaviour. However, in practice differences also arise because of:

- ▣ differences in recollection of their behaviour;
- ▣ differences in understanding the question;
- ▣ differences in willingness to report their behaviour accurately.

The trust we place on the data depends on the trustworthiness of the young people answering and whether they are likely to try to mislead us.

A number of the questions can be cross referenced with each other to check the validity of the answers given. This does show consistency i.e. most young people are giving the same answer more than once.

A snapshot of young peoples health in 2010

	Primary Year 6 10-11 year olds	Secondary Year 8 12-13 year olds	Secondary Year 10 14-15 year olds
Number completing questionnaire	966	967	909
Percentage of total school year	91%	89%	87%
3 or more bedrooms	82%	85%	86%
Live with mother and father	72%	64%	61%
Self-esteem - medium to high	79%	78%	82%
Can say no to peer pressure	44%	58%	63%
Satisfied with their life at the moment (at least quite a lot)	72%	66%	62%
Consider themselves to be "Jersey"	67%	61%	63%
Feel they are personally in charge of their health	76%	71%	75%
Go to school by car	66%	47%	49%
Go to school by bus	5%	25%	25%
Afraid to go to school because of bullying (sometimes or often)	27%	27%	17%
Bullied in last 12 months	21%	25%	15%
Overweight and obese	24%	14%	13%
Would like to lose weight	37%	48%	49%
Have nothing to eat or drink before school	6%	11%	16%
Eat "5-a-day"	29%	25%	23%
Drink a litre or more of water a day	33%	44%	43%
Have had an accident in the last month treated at hospital or by a doctor	29%	45%	43%
Clean teeth 2 or more times per day	86%	82%	81%
Enjoy physical activity (a lot or quite a lot)	86%	82%	79%
Physically active for at least an hour everyday	11%	11%	12%
Feel they know all they need to about sex	n/a	56%	66%
Occasional or regular smokers	<1%	5%	17%
Have a smoker in the household	37%	37%	39%
Drank alcohol in 7 days prior to the survey	6%	12%	36%
Have taken drugs	n/a	4%	16%
Mum and/or dad first option for sharing problems	55-80%	32-78%	23-68%
Paid work during term time (irregular, casual)	n/a	21%	27%
Expect to take several GCSE's and get mostly good grades	n/a	43%	61%

A Changing Picture

Changes in the same cohort of children

This table shows how the behaviours of the same group of children have changed since they were 10-11 in 2006 and who are now 14-15 in 2010.

	2006 Year 6 (10-11 years)	2010 Year 10 (14-15 years)	
Positive behaviour/attitudes			
Feels able to say no to peer pressure	38%	63%	increase
Have never smoked	93%	52%	decrease
Usually/always take measures to avoid sunburn	84%	55%	decrease
Enjoy physical activity (quite a lot or a lot)	89%	79%	decrease
Eat vegetables on most days	50%	60%	increase
Eat 5 a day	29%	23%	decrease
Drink the recommended amount of water each day	29%	43%	increase
Often consider their health when choosing what to eat	63%	42%	decrease
Negative behaviours/attitudes			
Bullied in the last 12 months	23%	15%	decrease
No breakfast	9%	16%	increase
Eat sweets/choc bars on most days	22%	33%	increase
Are overweight and obese	24%	13%	decrease
Smoke regularly/occasionally	0%	17%	increase
Drank alcohol in the last 7 days	9%	36%	increase
Have been offered cannabis	0%	28%	increase

Changes as students get older

As they get older...

More students...	Less students...
<ul style="list-style-type: none"> <input type="checkbox"/> Have tried smoking <input type="checkbox"/> Drink alcohol (occasionally and regularly) <input type="checkbox"/> Have been offered cannabis and other drugs <input type="checkbox"/> Do not have breakfast <input type="checkbox"/> Would like to lose weight <input type="checkbox"/> Travel to school by bus <input type="checkbox"/> Can say no when a friend wants them to do something they don't want to 	<ul style="list-style-type: none"> <input type="checkbox"/> Have never smoked <input type="checkbox"/> Eat fresh fruit on most days <input type="checkbox"/> Often consider health when choosing what to eat <input type="checkbox"/> Take part in most active sports <input type="checkbox"/> Feel at least quite a lot satisfied with their life <input type="checkbox"/> Feel afraid of going to school because of bullying

Differences between the sexes

Gender differences are apparent and many become more so as young people get older

More males...	More females...
<ul style="list-style-type: none"> <input type="checkbox"/> Who smoke buy their cigarettes from a garage <input type="checkbox"/> Drink on more than one day a week <input type="checkbox"/> Drink heavily <input type="checkbox"/> Have taken cannabis <input type="checkbox"/> Who have taken drugs have taken more than one type of drug on the same occasion <input type="checkbox"/> Have a canteen lunch <input type="checkbox"/> Take part in active sport at least once a week <input type="checkbox"/> Do 5 or more episodes of physical activity a week <input type="checkbox"/> Feel in positive control of their health 	<ul style="list-style-type: none"> <input type="checkbox"/> Who smoke get their cigarettes from friends and parents <input type="checkbox"/> Drink alcohol to feel confident <input type="checkbox"/> Eat fresh fruit, salad and vegetables on most days <input type="checkbox"/> Often consider their health when choosing what to eat <input type="checkbox"/> Would like to lose weight <input type="checkbox"/> Know where to get free condoms and are aware of local sexual health services <input type="checkbox"/> Want to continue in full time education

Overall trends

For young people in Jersey the overall trends are...

Increase in	Decrease in
<ul style="list-style-type: none"> <input type="checkbox"/> Percentage that have never smoked <input type="checkbox"/> Percentage that believe they will not smoke when older <input type="checkbox"/> Fruit and veg consumption on most days in primary pupils <input type="checkbox"/> Percentage that feel they are in positive control of their health 	<ul style="list-style-type: none"> <input type="checkbox"/> Regular smoking <input type="checkbox"/> Drinking during survey week <input type="checkbox"/> Exposure to drugs <input type="checkbox"/> Drug use (especially cannabis) <input type="checkbox"/> Overweight/obesity

Comparisons to the UK

Comparing Jersey to the UK proportionally Jersey has...

More	Less
<ul style="list-style-type: none"> <input type="checkbox"/> Believing most drugs to be always unsafe <input type="checkbox"/> 14-15 year olds consuming fresh fruit on most days <input type="checkbox"/> Travelling to school by car <input type="checkbox"/> Having high self-esteem scores 	<ul style="list-style-type: none"> <input type="checkbox"/> Living with a smoker in their household <input type="checkbox"/> Drinking alcohol <input type="checkbox"/> Knowing a drug user <input type="checkbox"/> Walking to school <input type="checkbox"/> 14-15 year olds having had a sexual relationship

Emotional Wellbeing



Main Findings

- ▣ The majority of young people (80%) reported medium to high self-esteem.
- ▣ Males have higher self-esteem than females.
- ▣ A total of 73% of 12-15 year olds reported feeling in positive control of their health.
- ▣ More 10-11 year olds girls report feeling afraid of going to school because of bullying than boys.
- ▣ Reporting of bullying incidents is highest amongst 14-15 year old males.



Why it is Important

Emotional wellbeing is about having the psychological strength and resilience to live a full and creative life. Young people will experience many challenges and life events and in response experience a range of thoughts and feelings. It is therefore important to foster self-esteem and personal effectiveness in children which will equip them to flourish emotionally. Self-esteem is one measure of emotional wellbeing and is based on confidence, social skills and relationships with family and friends.

Supportive familial relationships, having a good network of friends, and feeling part of a wider community are all important factors in fostering emotional resilience which can promote a young person's emotional wellbeing and self-esteem. Equally, factors such as loneliness, discrimination and bullying will undermine emotional wellbeing. Broader influences on a young person's health, such as family structure, type of household, personal safety and cultural identity, are also important to consider.

The States of Jersey takes the responsibility to counter bullying seriously and since the last survey in 2006 Jersey Education Department has implemented a zero tolerance Bullying Policy to support educational establishments in reducing the likelihood of incidents occurring.



Primary Schools

Family structure and households

The majority (72%) of 10-11 year olds reported they live with their mother and father together. Of those that live with just one parent, most live with their mother rather than their father. Just under half (47%) of children reported they live in a home with 4 people which, is most likely to correspond to two adults and two children. There has been little change in family size since the question was first asked in 1998.

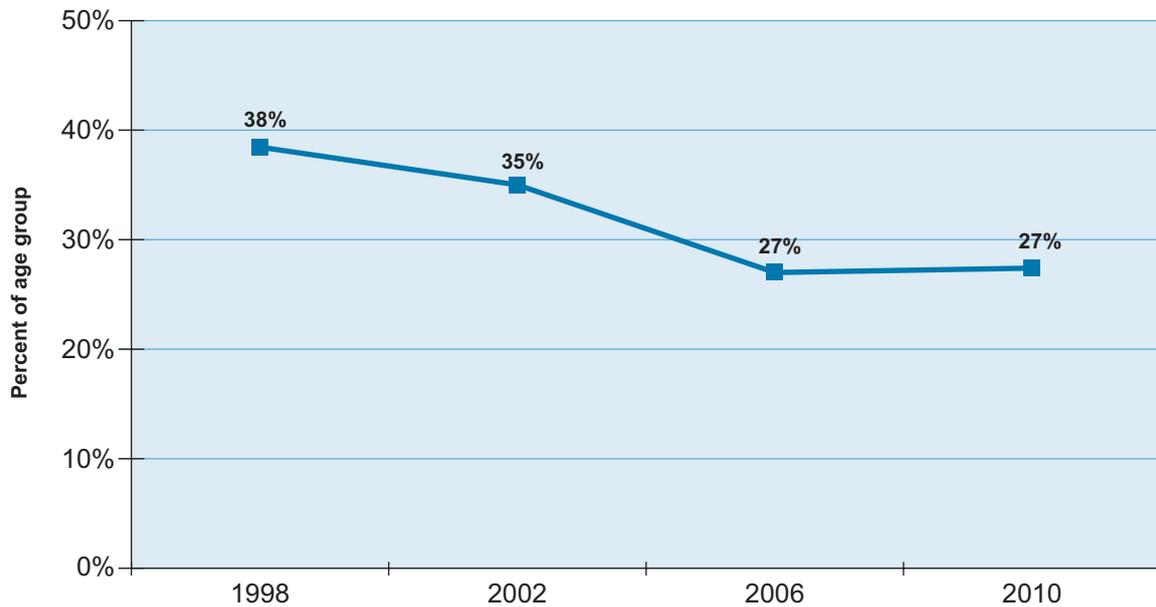
Self-esteem

The data revealed that most 10-11 year olds (79%) had medium to high self-esteem with little difference in self-esteem scores between boys and girls.

Bullying

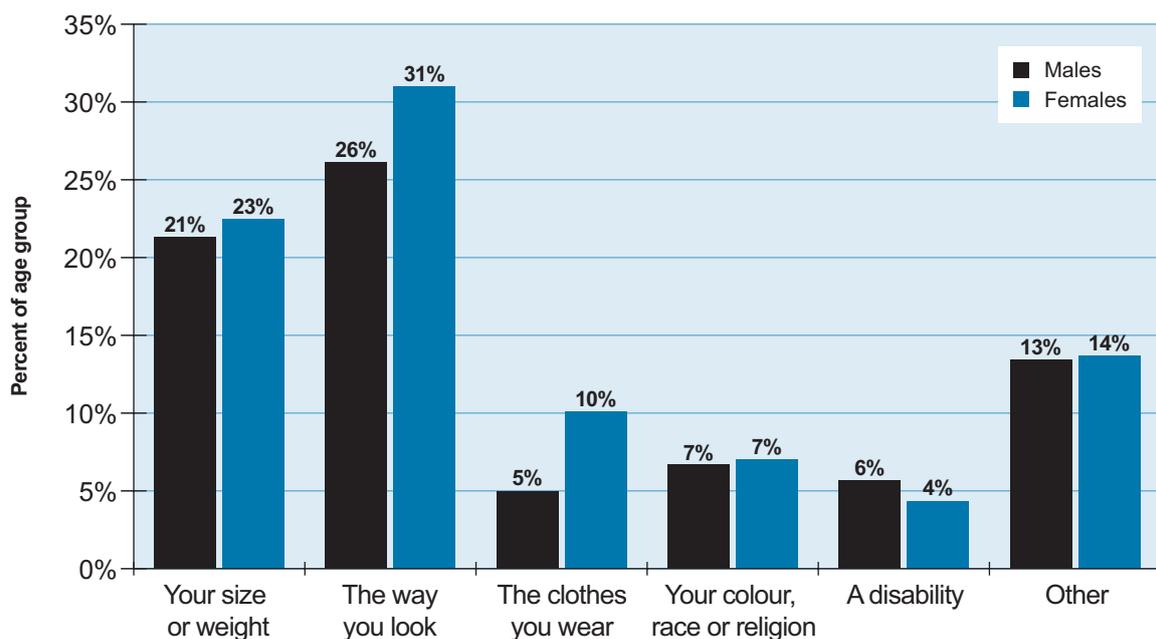
A total of 27% of 10-11 year olds reported that they are at least sometimes afraid of going to school because of bullying, with more girls reporting being afraid than boys (33% versus 23%). Since the survey first began there has been a decrease in children reporting fears of going to school because of bullying. Three quarters of 10-11 year olds said they think their school takes bullying seriously.

Percentage of 10-11 year olds who at least sometimes feel afraid of going to school because of bullying



Around one in five 10-11 year olds reported having been bullied at or near school in the last 12 months, with another 15% unsure whether or not they have been. Despite this when asked whether any of a list of bullying type incidents had happened to them in the last month 62% of children reported at least one of the incidents occurring at least once. Equal proportions of males and females reported incidents of bullying behaviour. Being called nasty names and being teased and made fun of is the type of bullying behaviour which occurred most, 10% of children reported this happening often or every day. The most frequently reported reason why children think they are being bullied or picked on is because of the way they look or their size or weight. Girls also considered the clothes they wear as a cause of bullying.

Reasons why 10-11 year olds who have been bullied in the last month believe they are bullied/picked on



Emotional Wellbeing

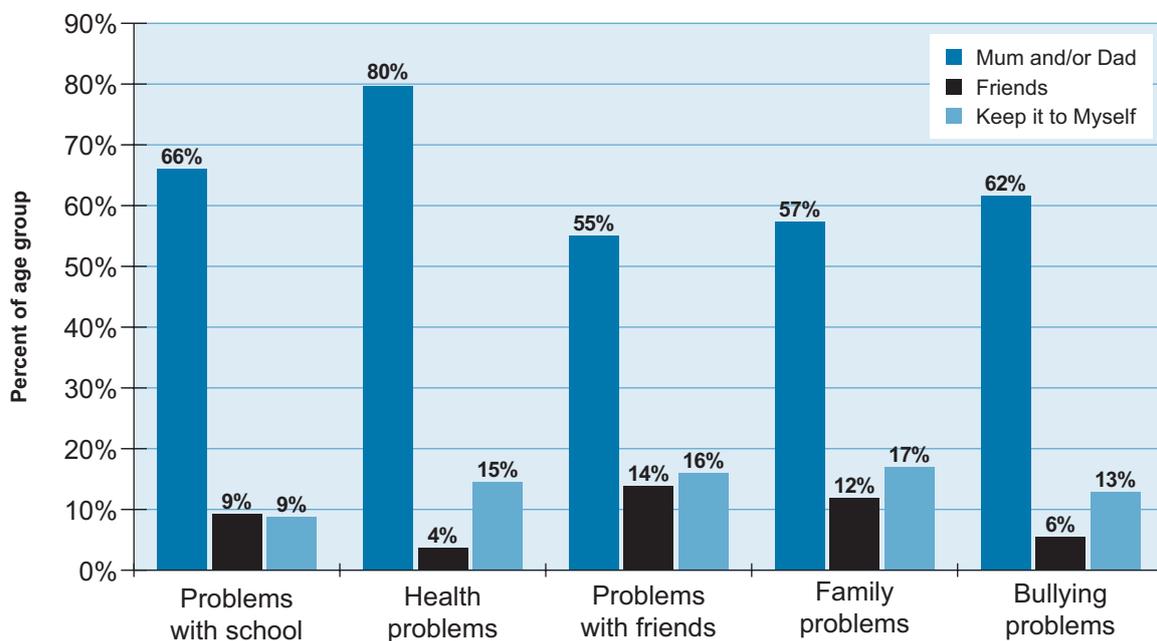
About half (46%) of those that reported bullying behaviour in the last month report it happening outside at school in break/lunchtime and 36% reported it happening in a classroom during break or lunchtime.

Worries and problem sharing

The number one reported worry for 10-11 year olds is the environment with nearly 1 in 5 worrying about it often/on most days. Other worries include what people think of them, school work/homework, and school tests. Just over a third of children reported believing their worries affect their school work at least a little.

For the majority of children, parents were the first choice to confide in with any problems, although some said they share concerns with their friends or choose to keep problems to themselves.

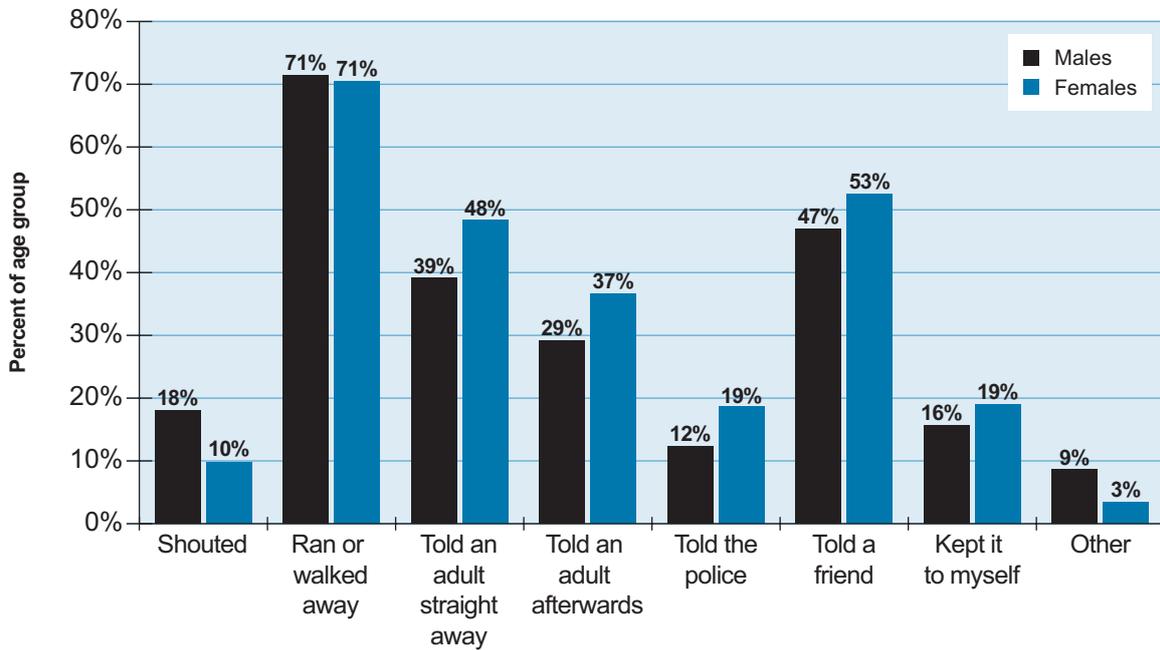
Who 10-11 year olds would go to first with their problems



Staying Safe

A total of 16% of 10-11 year olds reported that they had been approached by an adult who scared or upset them with a further 16% unsure whether they had. Since the last HRBQ survey in 2006 the percent of pupils reporting being approached by an adult who scared or upset them has decreased. Of those approached by an adult 20% reported knowing the person. Most children when approached by an adult stranger that scared or upset them reported that they ran or walked away, or told someone.

Responses of 10-11 year olds approached by an adult that scared or upset them



S Secondary Schools

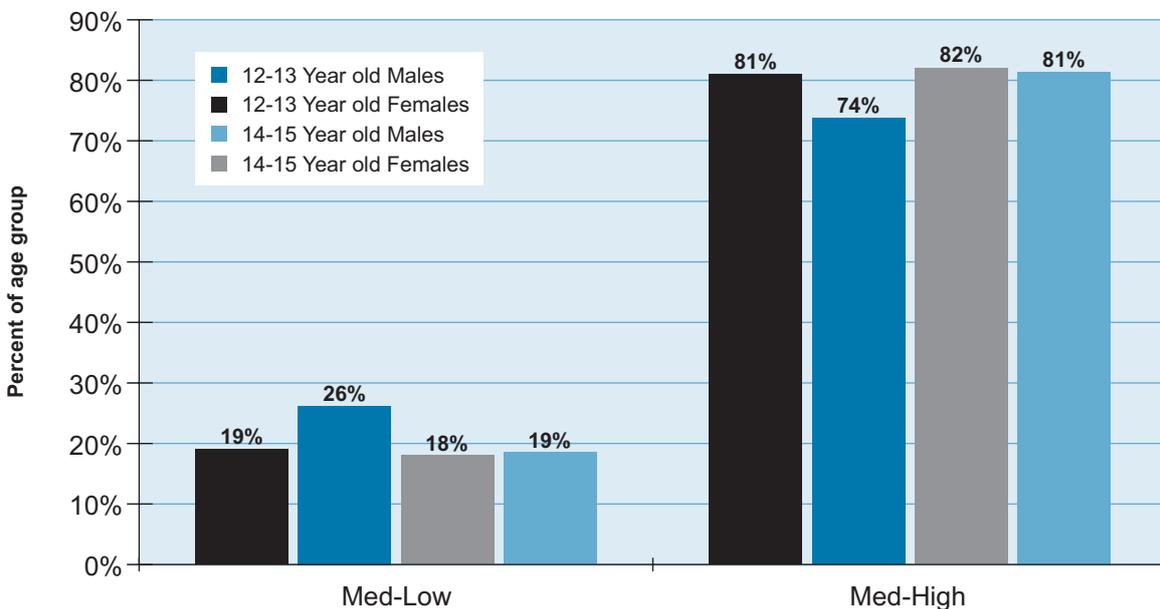
Family structure and households

The most common family structure reported by young people is living with both parents (63%). Of those that said they live with one parent most live with their mother rather than their father. Since the survey began in 1998 the percentage of young people living with their mother and father has decreased by 9 percentage points.

Self-esteem

The majority of young people (80%) reported medium to high self-esteem. More than a quarter of 12-13 year old females reported having medium to low self-esteem and had the lowest self-esteem across all groups.

Self-esteem of 12-15 year olds



Emotional Wellbeing

GCSE's

Most young people in Jersey said they expect to take several GCSE's and get mostly good grades (A-C). As students get older the percentage of students with this expectation increases. Since this question was first asked 4 years ago expectations among older females are lower with slightly less expecting to take several GCSE's and get mostly good grades.

Aspirations

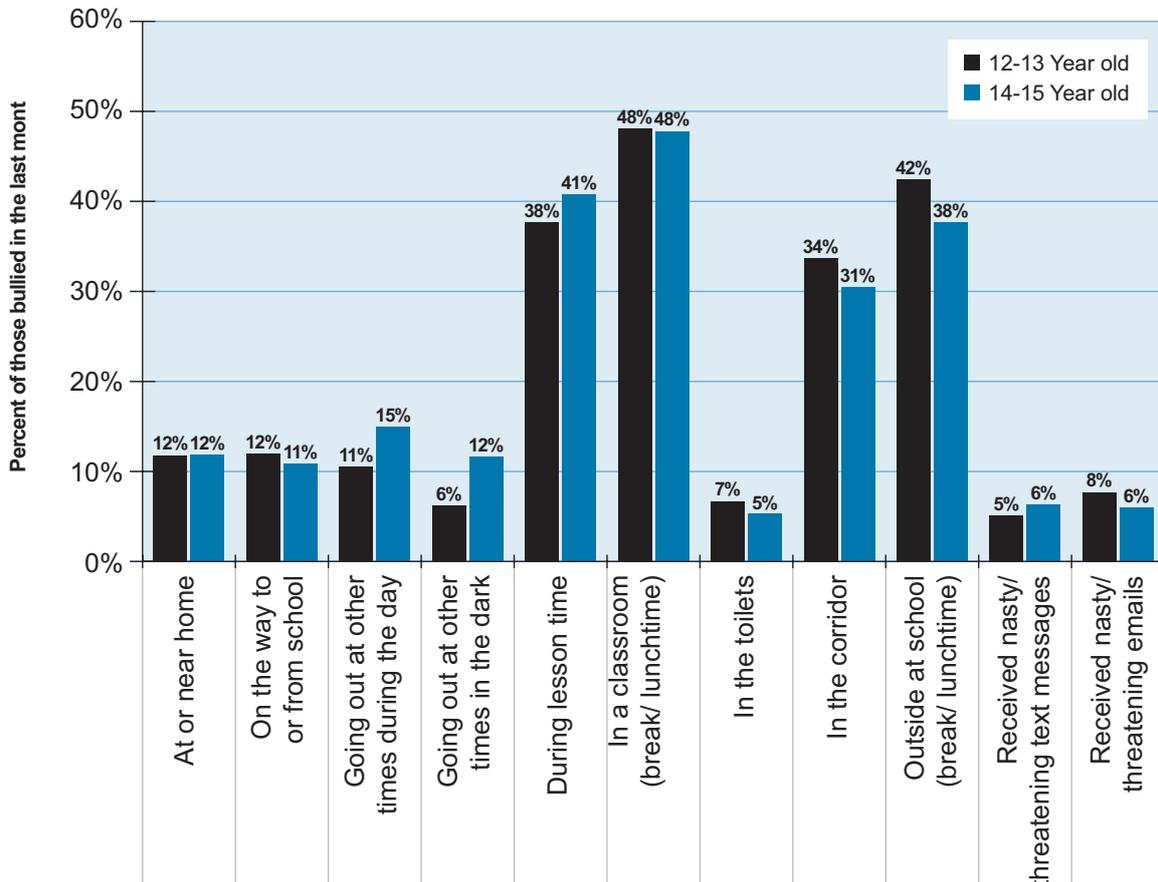
Just over half of young people (59%) reported that they want to continue in full time education after Year 11. Over a quarter of young people (29%) reported they want to find a job as soon as they can and 51% said they want to get training for a skilled job. Since the last survey when this question was first asked a greater number of young people aspire to remain in full time education.

Bullying

A total of 22% of young people reported they feel afraid of going to school because of bullying with the percentage decreasing as they get older from 27% of 12-13 year olds to 17% of 14-15 year olds. This corresponds to the percentage of young people who reported being bullied at or near school in the last 12 months (20%) which also decreases from 25% for 12-13 year olds to 15% for 14-15 year olds. Similar proportions of males and females are both afraid of going to school and report being bullied in the last 12 months.

As with the primary school respondents, when asked whether any of a list of bullying type incidents had occurred in the last month, 71% of 12-15 year olds reported at least one of the incidents occurring at least once in the last month. The most affected group was 14-15 year old males who report experiencing the most bullying on a frequent basis. The most commonly reported forms of bullying behaviour that occurred often/everyday are being teased or made fun of, called nasty names or asked for money. Of those that had experienced bullying behaviour in the last month 48% reported it happening in a classroom, at break or lunchtime.

Location of bullying in the last month for 12-15 year olds

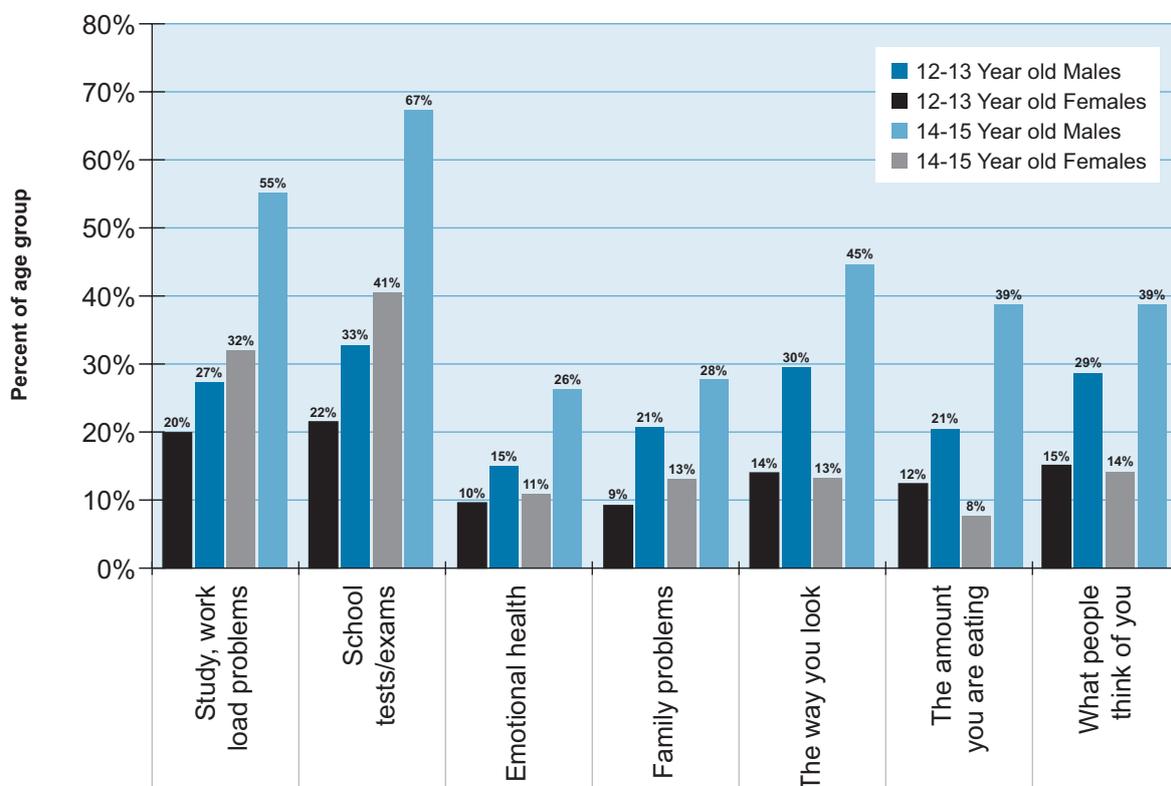


The most frequently reported reason why people think they are bullied or picked on is because of the way they look (33%) and their size or weight (22%). A greater percentage of 12-13 year old males (28%) report their size as a reason for bullying compared to females (20%) of the same age. A greater percentage of 14-15 year old males (13%) reported colour, race or religion as a reason for being bullied than females (7%).

Worries and problem sharing

The main worries reported by young people are school tests/exams, study/work load, what people think of you and the way you look. There is a greater percentage of 14-15 year olds who reported worrying about them often or most days than 12-13 year olds. More females worry more frequently than males. A total of 61% of young people believe worrying impacts on their school work to some extent.

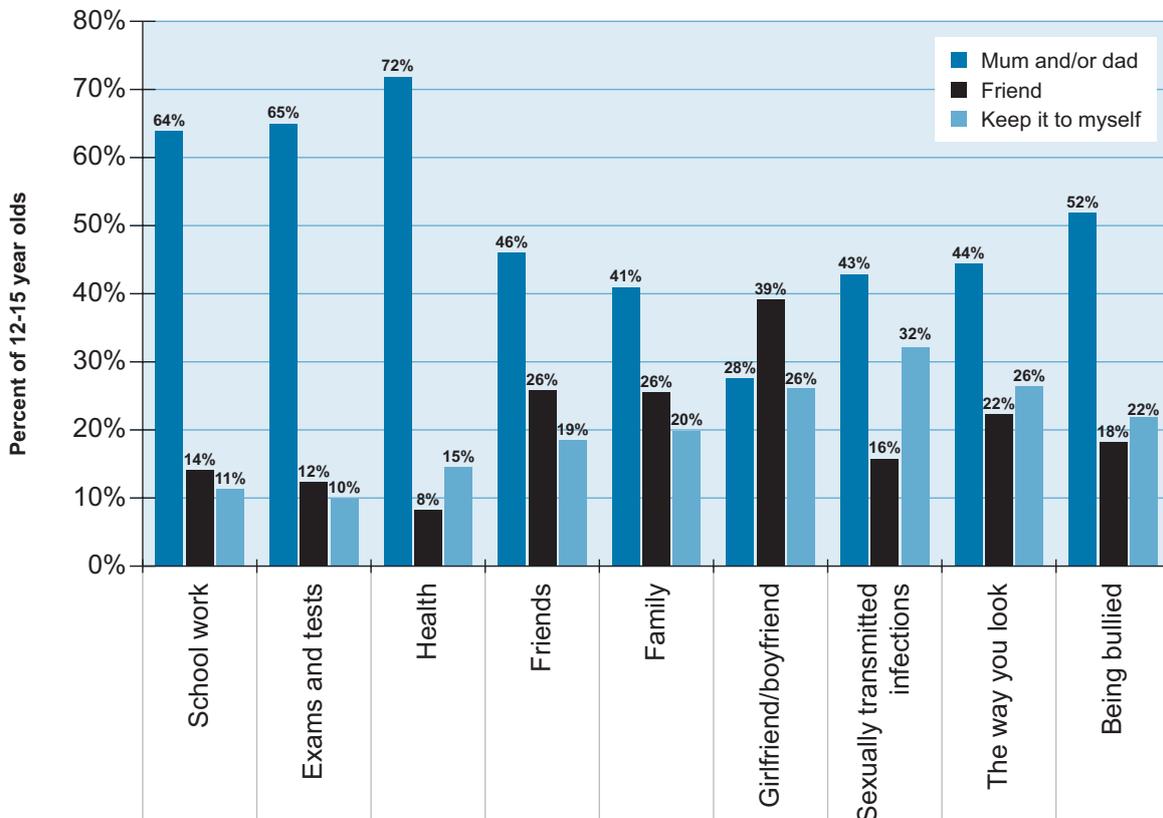
What young people report worrying about on most days



Parents are reported to be the main source of support for young people across all age groups for most problems. As young people get older less said they go first to their parents for support, more go to friends or keep it to themselves. Friends were a source of support for a greater number of females than males. A greater percentage of males than females reported that they will keep problems to themselves.

Emotional Wellbeing

Who 12-15 year olds would go to first with their problems



Life satisfaction

Just under two thirds of young people reported that they feel quite a lot of satisfaction with their life at the moment. For 12-13 year olds, fewer females said they feel quite a lot of satisfaction with their life compared to males. By 14-15 years levels of satisfaction of males and females are similar.

Control over health

A majority of young people (73%) reported they feel that they are in positive control of their health with a greater number of 14-15 year old males having a positive score for this than 14-15 year old females.

Community safety

Over half of young people in Jersey (59%) rated their safety when going out after dark as good or very good with a greater percentage of males reporting this than females. A greater proportion, 88% rated their safety as good during the day. The percentage of young people rating their safety after dark as good has decreased in the 10 year period since 2000 but not changed since the last survey in 2006.

Comparisons with UK HRBQ

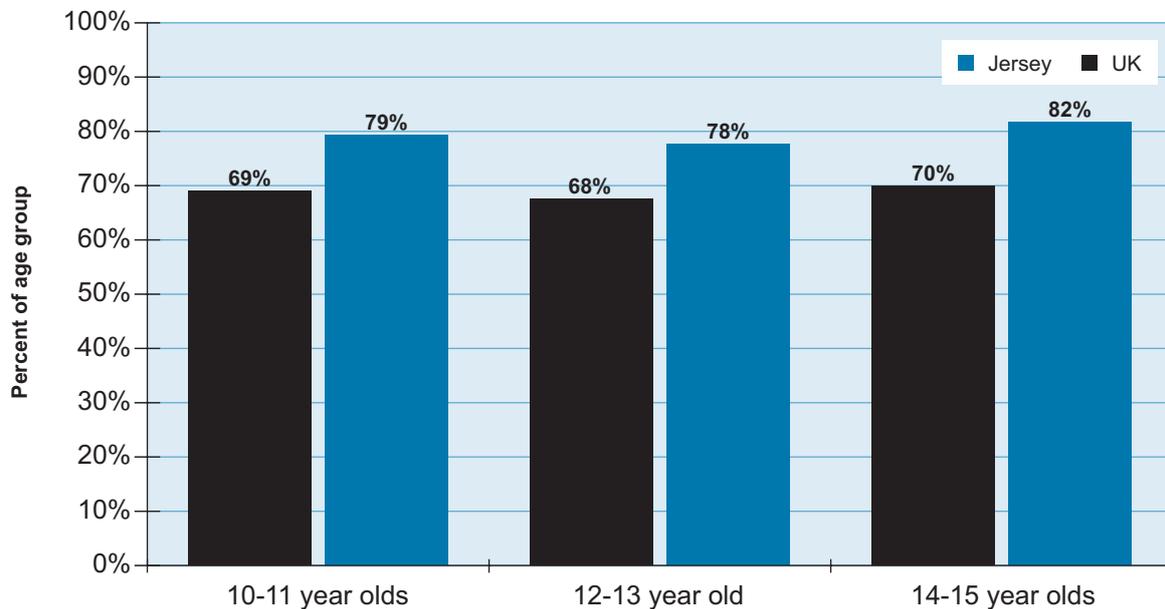
Family structure and households

A lower percentage of 12-15 year olds reported they live in a home with 5 or more people in Jersey compared to the UK (29% versus 36%). A lower percentage of young people in Jersey said they share a bedroom than in the UK.

Self-esteem

A greater percentage of young people in Jersey reported they have high self-esteem compared to their UK counterparts (80% versus 69%).

Percent of young people with med-High self-esteem



GCSE's

Expectations of how young people thought they will do in their GCSEs is similar for young people in Jersey to young people in the UK.

Bullying

The percentage of young people in Jersey reported they feel afraid of going to school because of bullying is similar to young people in the UK.

Control over health

Young people in Jersey are similar to young people in the UK with regard to feeling in control of their health.

Danger/ community safety

A lower percentage of 10-11 year olds in Jersey reported being approached by an adult that had scared or upset them than in the UK. There was also a lower percentage of 12-15 year olds in Jersey who rated their safety after dark as poor (13% versus 23%).

Sexual Health



Main Findings

- ❑ A lower percentage of 14-15 year olds reported having had sex compared to their peers in the UK (20% versus 27%).
- ❑ Knowledge of sexually transmitted infections has increased since the last survey in 2006
- ❑ Only 45% of males said they would refuse sex they didn't want compared to 80% of females
- ❑ Most students reported that sex education lessons are their main source of information and this has increased since 2002 (53% versus 36%).
- ❑ More males reported using the internet as their main source of information about sex than females.
- ❑ Condoms are still reported as the most popular method of contraception used by young people in Jersey, followed by the contraceptive pill.
- ❑ Reported use of the contraceptive pill amongst 14-15 year old females has doubled since 2006 from 6% to 12%.



Why it is Important

Positive sexual health is an important part of a young person's growth, development and personal identity. Poor sexual health can have a profound and long lasting effect on a young person's self-esteem and ability to form healthy relationships, as well as their physical health. Key sexual health issues for young people as they grow into adulthood include; feeling able to choose or delay sexual intercourse, understanding how to use contraception and avoid unintended pregnancy, and learning how to protect themselves from sexually transmitted infections including Chlamydia and HIV.

There are many different factors that influence the choices young people make regarding their sexual health such as family, friends, the internet, school and the media. Current research shows that young people growing up with parent/s who are able to talk about sexual health issues and receive effective school based sex and relationship education are more likely to delay first sexual intercourse. They are also more likely to use contraception when they do decide to have sex. Education and health initiatives that reinforce safer sex messages and support young people's knowledge and self-esteem help young people make positive healthy choices regarding how, when and with whom they have sex.

Since the last survey in 2006 a range of initiatives have been established which contribute to promoting young peoples sexual health. These include the Chlamydia Screening Programme, Jersey Condom Distribution Scheme, the 'Bitesize Brook' programme delivered within secondary schools and the Youth Enquiry Service (YES).



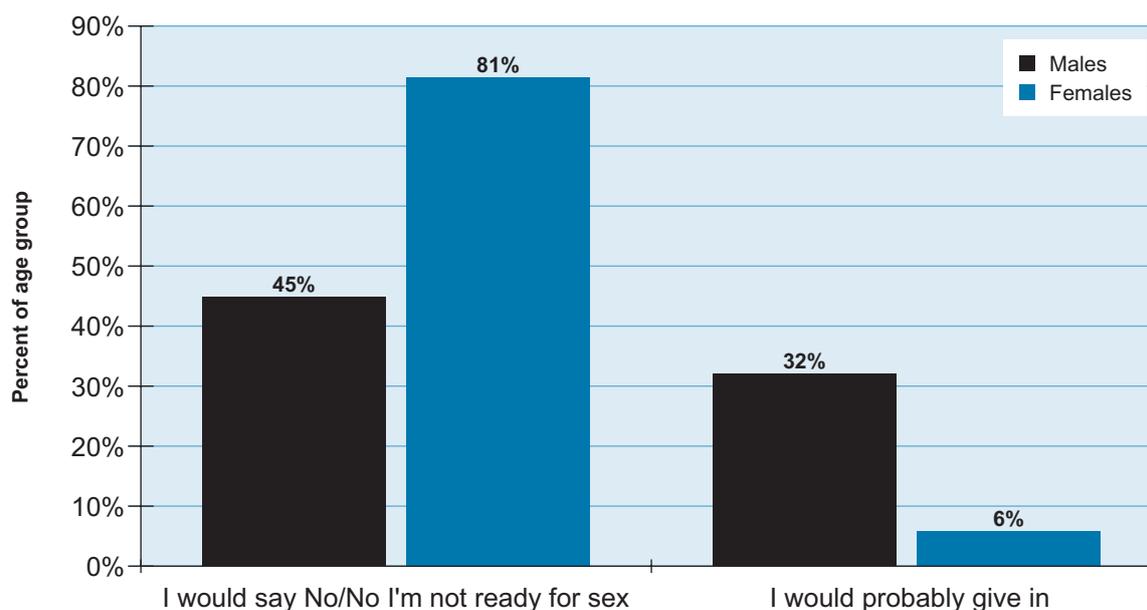
Primary Schools

Most 10-11 year olds have been talked to by their parents about how their body changes as they grow up and this has increased from 67% in 2006 to 78% in 2010. Teachers were cited as the next most common source of information for young people in this age group, followed by friends, which has also increased from 24% in 2006 to 36% in 2010. More children reported that they know enough about how their body changes as they grow older now compared to 2006 (63% versus 52%). Just over one in ten 10-11 year olds (12%) said they worry about puberty and growing up often or on most days. Twice the percentage of females than males said they worried about this.

Secondary Schools

A greater percentage of female students stated that they would have the confidence to say no to sex. Over 80% of females said they would refuse sex they didn't want compared to only 45% of males. Since 2006 results suggest that young people's confidence to say no has decreased slightly amongst male 14-15 year olds, and increased slightly amongst females of the same age.

Percent of 12-15 year olds who would have the confidence to say no to sex they didn't want.



Contraception

Condoms were cited as the most common method of contraception amongst sexually active 14-15 yr olds, followed by the contraceptive pill and then emergency contraception. Overall, 29% of students aged 14-15 years reported that they have used some form of contraception. Young people's reported use of the contraceptive pill has doubled since 2006 from 6% to 12% in 2010.

Nearly a third of 12-13 year olds reported that they know where to get free condoms, and more than three quarters of 14-15 year olds said they know where to get free condoms. Amongst the older age group, females' knowledge of where to get free condoms is slightly better; 83% of females stated that they know where to obtain free condoms compared to 71% of males.

At the time of the survey the oral contraceptive pill and condoms were the most well known methods of contraception. However, some incorrect beliefs are still reported. For example 20% of 14-15 year old students incorrectly believed that the diaphragm protects against infections such as HIV/AIDS, whilst approximately 10% to 12% of 14-15 year olds also believed both the contraceptive injection and the contraceptive pill can stop infections like HIV/AIDS.

Young people's reported awareness of a special contraception and advice services available locally has remained consistent. Students' knowledge of this service more than triples between 12-13 years and 14-15 years. More than two thirds of 14-15 year olds reported that they know about the local contraception and advice centre and more females than males are aware of this service in this age group.

Sexual Health

Sexually transmitted infections

Generally knowledge of sexually transmitted infections (STIs) has increased since the last survey in 2006. Gonorrhoea, genital warts and genital herpes were the STIs that most students said they knew nothing about. The data revealed that knowledge of STIs has increased with age; 70-87% of 12-13 year olds reported that they knew nothing about STIs compared to 33-54% of 14-15 year olds. HIV/AIDS is the one STI that most young people reported knowing something about. Reported knowledge of chlamydia has improved amongst males since 2006 however a third of females aged 14-15 reported they 'know nothing' about chlamydia or 'have never heard of it.'

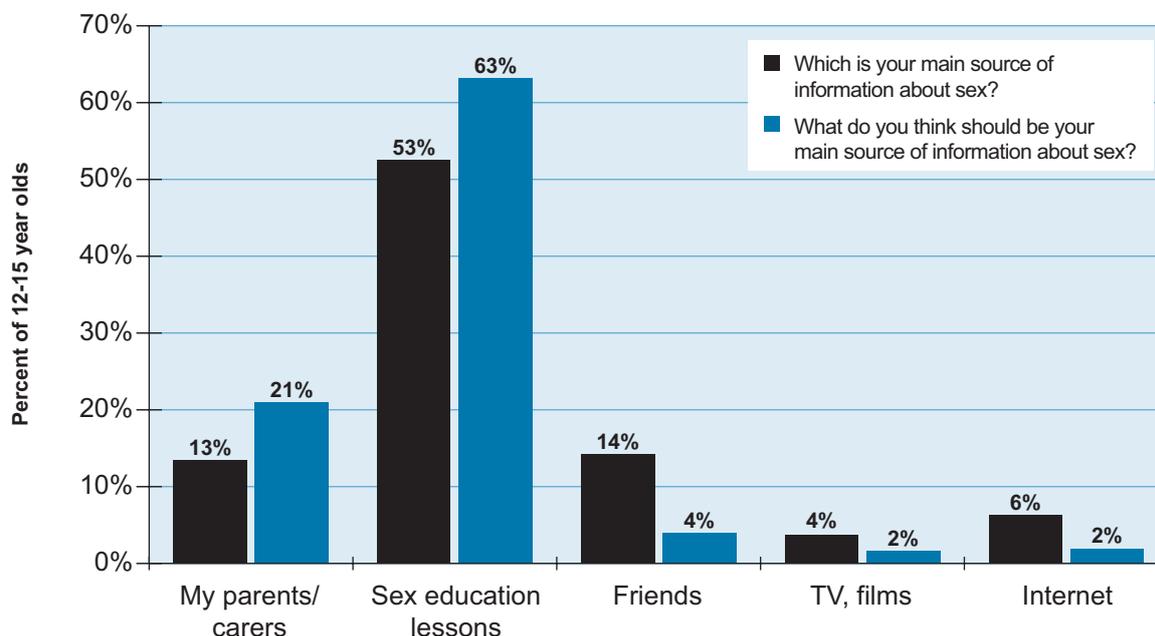
Knowledge of sex

Students' reported confidence in their knowledge about sex has changed very little since 2006 when this question was first asked. Knowledge about sex increases with age; two thirds of 14-15 year olds reported that they feel they know all they need to about sex and just under a third would like to know more.

Sources of information

Sex education lessons at school were reported by most students to be the main source of information about sex. Parents and friends were the next most common sources of information. The internet was also a popular choice amongst males; 14% of 14-15 year old males reported this was their main source of information about sex. Although 25% of 12-13 year olds said they thought their parents should be their main source of information about sex just 15% said this was actually the case.

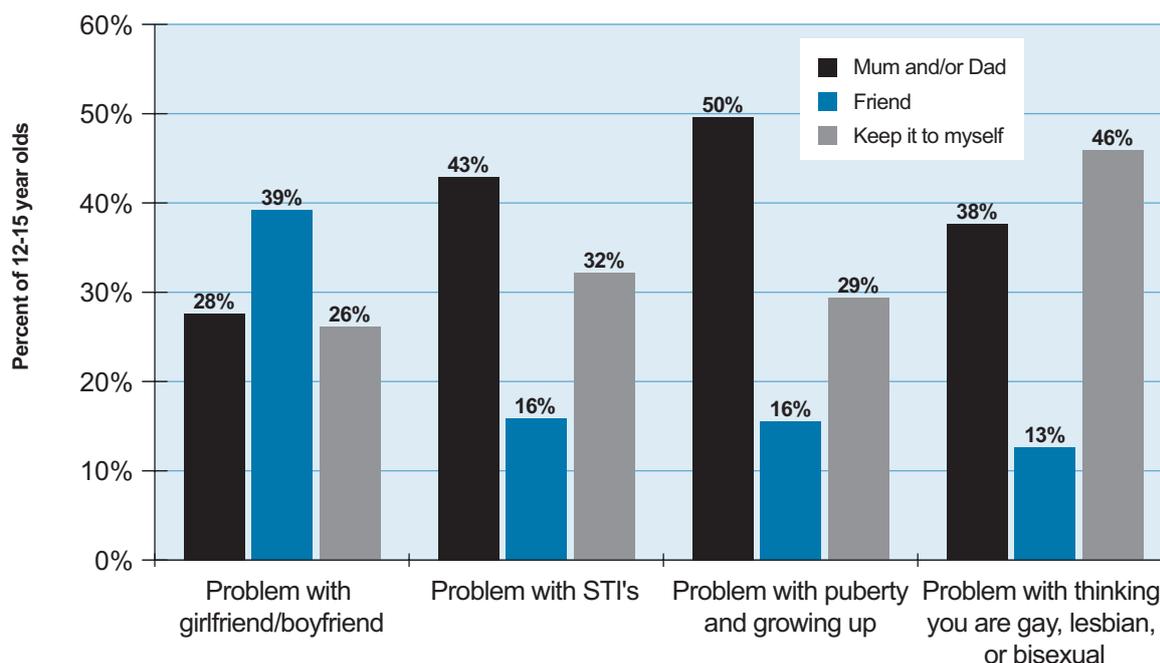
12-15 year olds main sources of information about sex compared to what young people think should be their main source of information about sex



Worries and problems

A total of 16% of 14-15 year olds reported that they worry about boyfriend/girlfriend problems either often or on most days. More females said they worry about this than males. Less than 6% of students said they worry about thinking they are gay, lesbian or bisexual, sex or sexually transmitted infections often or on most days. Parents are a source of support for students and over a third reported they would first share a sexual health problem with a parent. However, 46% of students said they would keep a problem with thinking they were gay, lesbian or bisexual to themselves.

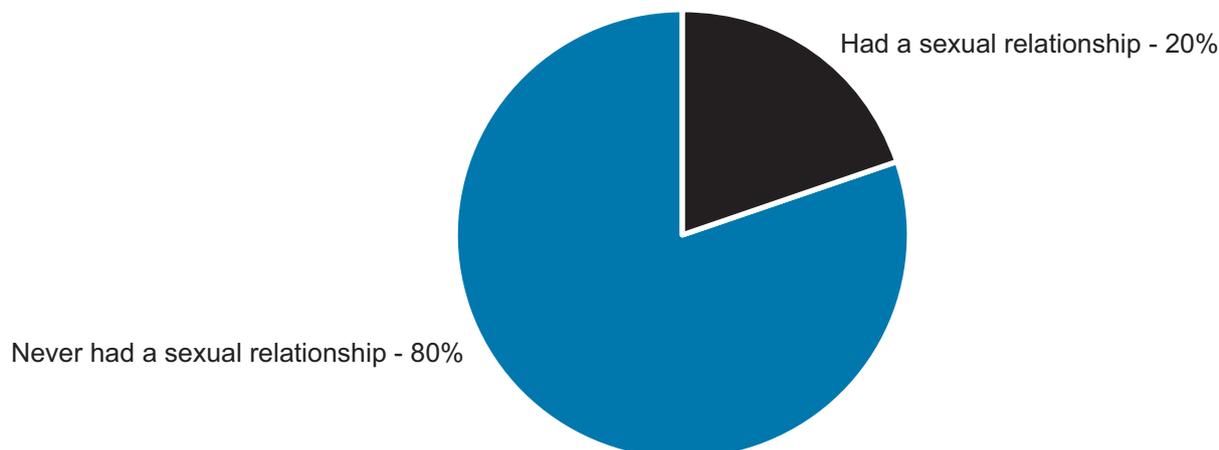
If you had a problem with whom would you share it with first?



Comparisons with UK HRBQ

A lower percentage of 14-15 year olds (20%) reported that they have had sex compared to their peers in the UK (27%). A slightly greater percentage of females than males reported that they have had sex (23% versus 17%). Most reported first having sex at age 14 or 15 years old.

Figure: Percentage of 14-15 year olds who have had a sexual relationship



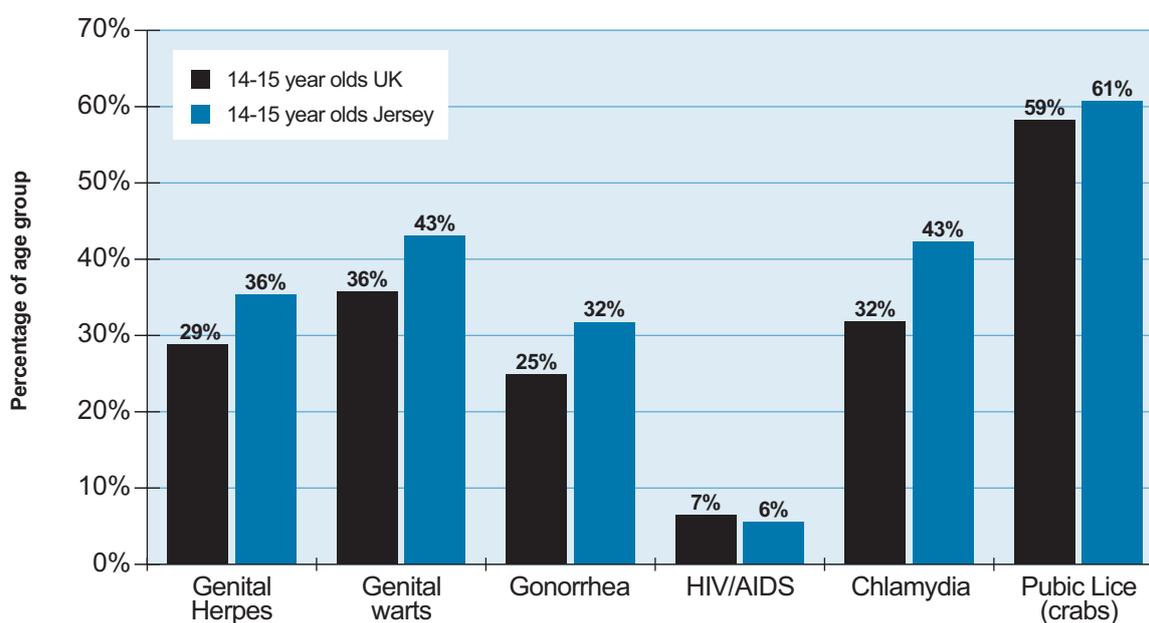
Sexual Health

Young people's reported knowledge of local sexual health services in Jersey is better than in the UK where 43% of 14-15 year olds know there is a local service for sexual health, compared to 67% locally.

A greater percentage of young people in Jersey were able to correctly identify methods of contraception which are reliable in preventing pregnancy compared to young people in the UK. When compared to young people in the UK, more young people in Jersey also correctly identified condoms, female condoms and sex without penetration as reliable methods to prevent infection.

Asked whether they know which STIs can be treated and cured, 12-13 year olds in Jersey showed a similar level of knowledge as their UK peers. However, 14-15 year olds in Jersey appeared to have slightly better knowledge of this than their UK peers; a greater percentage identified herpes, warts, gonorrhoea and chlamydia as infections that can be treated and cured.

Percentage of 14-15 year olds identifying STIs that 'can be treated and cured'



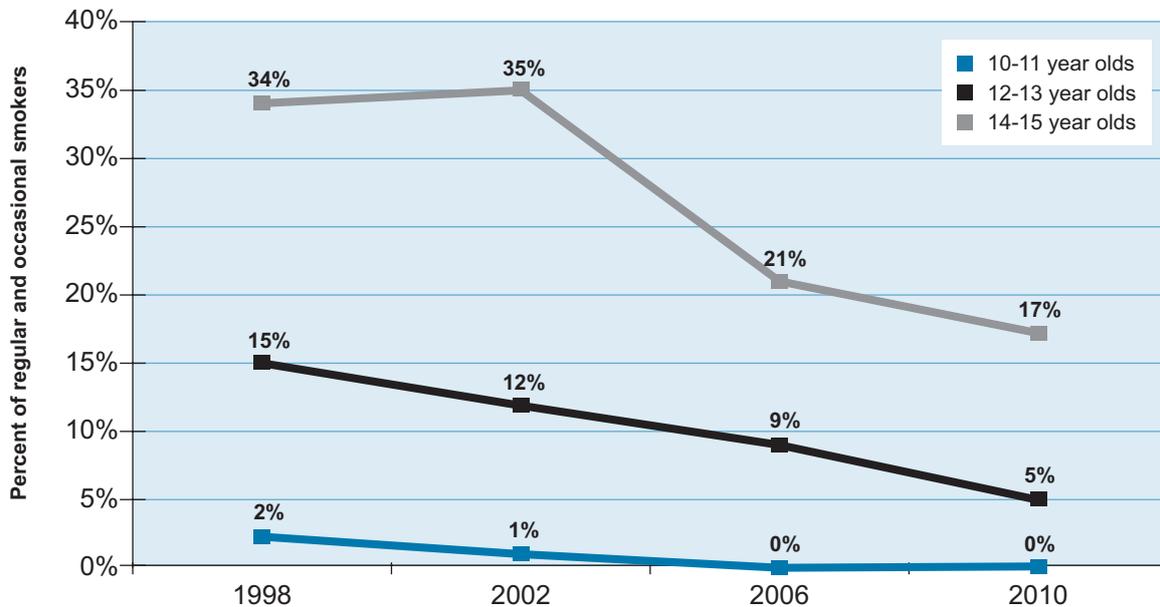
Smoking



Main Findings

- Fewer young people now smoke than before.

Regular and Occasional Smokers 1998 - 2010



- Over two thirds of 14-15 year olds (69%) who smoke regularly have tried to stop.
- A greater percent of young people smoke as they get older:
 - 48% of young people have tried smoking by the time they reach 14-15 years.
 - 17% of 14-15 year olds are occasional or regular smokers.
 - The number of regular smokers increases between the ages of 12-15 years.
- Young people with smokers in the home have an increased chance of taking up smoking.
- 'Heavy' smoking has decreased since 2006
- 83% of young people believed they will not smoke when they are older.



Why it is Important

Most adult smokers start young and once addicted often need specialist help to stop. Smoking is the biggest preventable cause of premature death. Second hand smoke poses a significant risk to health; Research has identified that children exposed to smoke are at increased risk from:

- Chest infections by 50%
- Wheezing by 65%
- Asthma by 50%
- Bacterial Meningitis by 50%
- Middle ear disease (glu ear) by 35%

One concern expressed about the 2007 workplace ban was that it might shift smoking into the home putting children at increased risk from second hand smoke. The findings of this survey suggest that this has not been the case, with a reduction from 48% to 38% of young people who indicated that they have a person in their home who smoke indoors on most days.

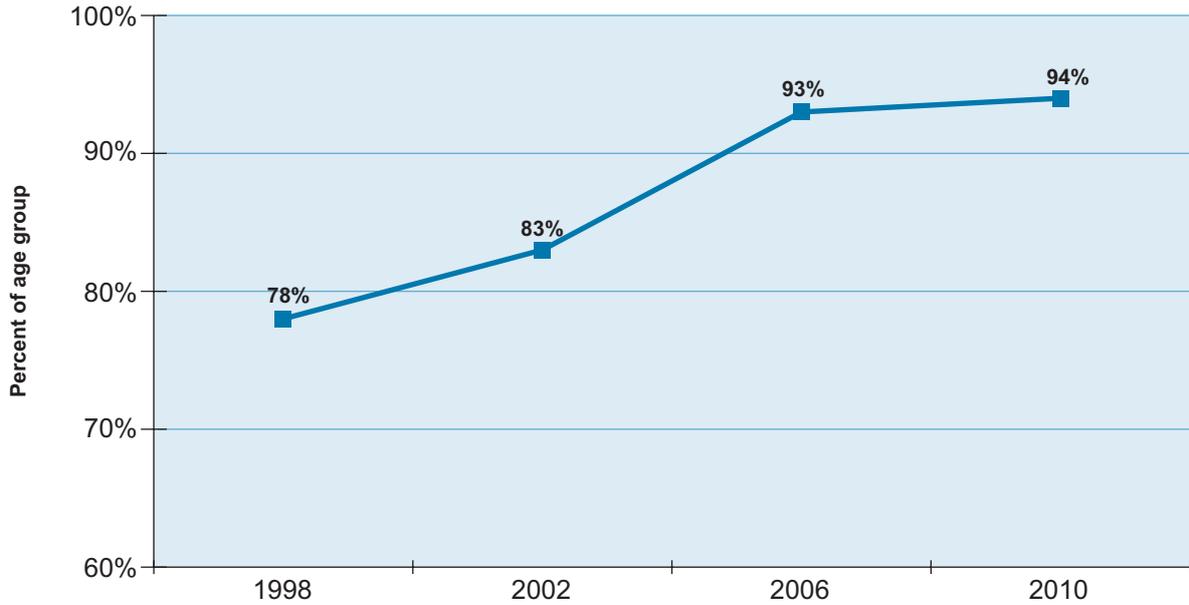
Smoking

P Primary Schools

Smoking habits

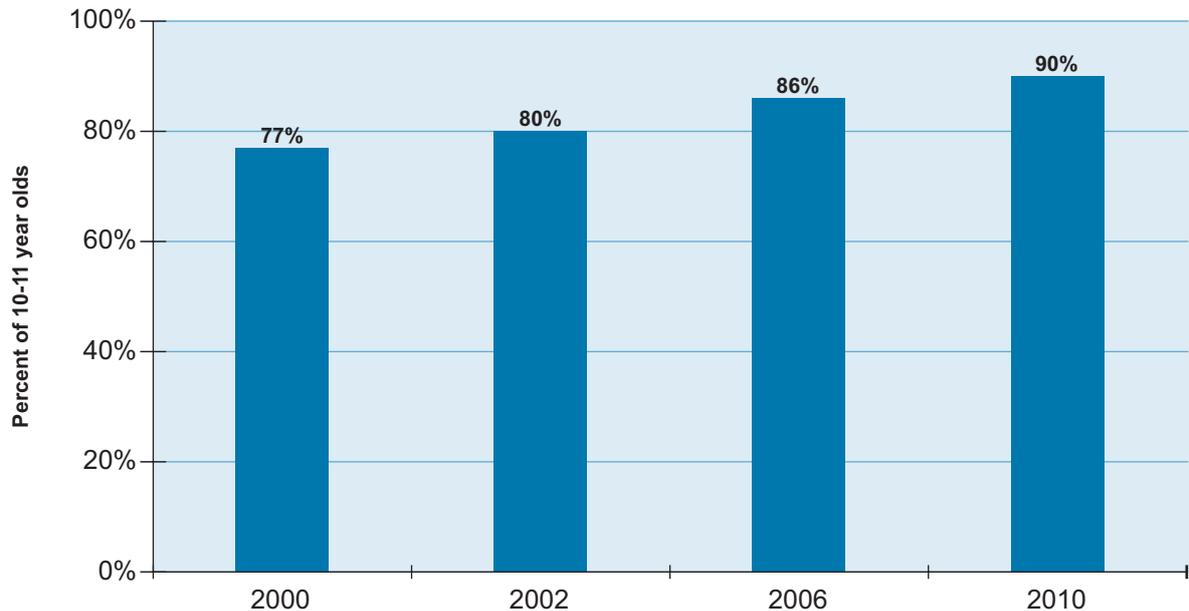
The percentage of 10-11 year olds who have never smoked has increased and is now up to 95% as compared to 78% in 1998. Less than 1% of 10-11 year olds had smoked in the week before the survey.

Percent of 10-11 year olds who have never smoked - 1998 to 2010



There has been an increase in the number of 10-11 year olds who think that they will not become a smoker when they are older with a 12 percentage point increase since the 2000 survey. Only 2% of this age group reported that they think they will smoke when they are older.

Do you think you will smoke when you are older? No



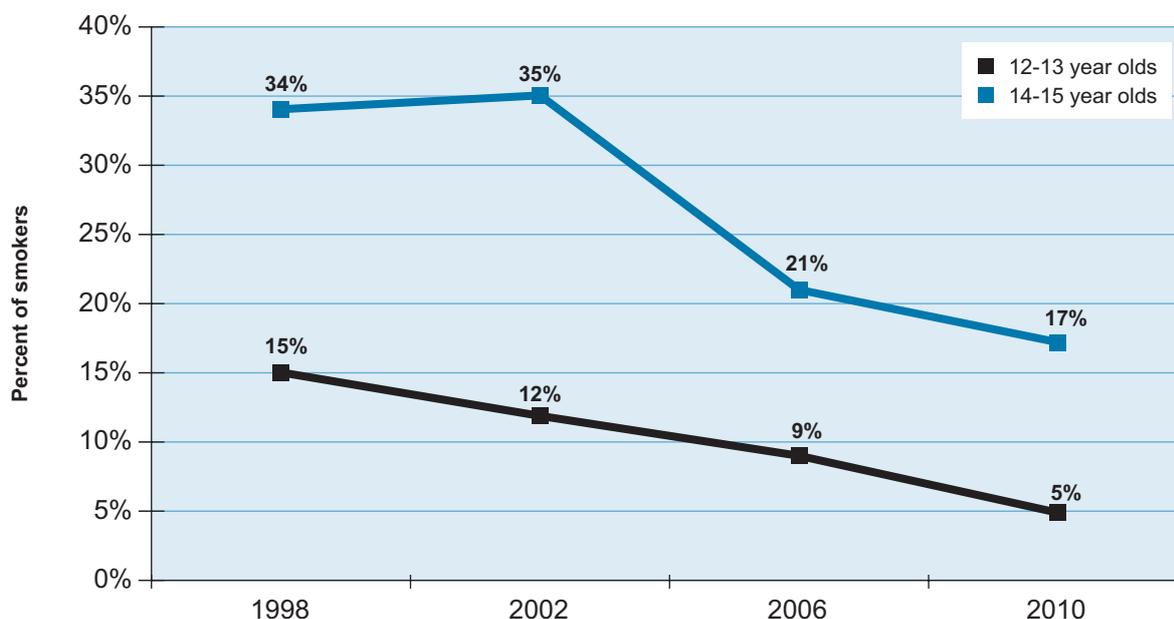
S Secondary Schools

Smoking habits

The overall trend in smoking amongst young people continues to be downward. This reduction is made up of fewer occasional or regular smokers and increasing numbers having never tried smoking.

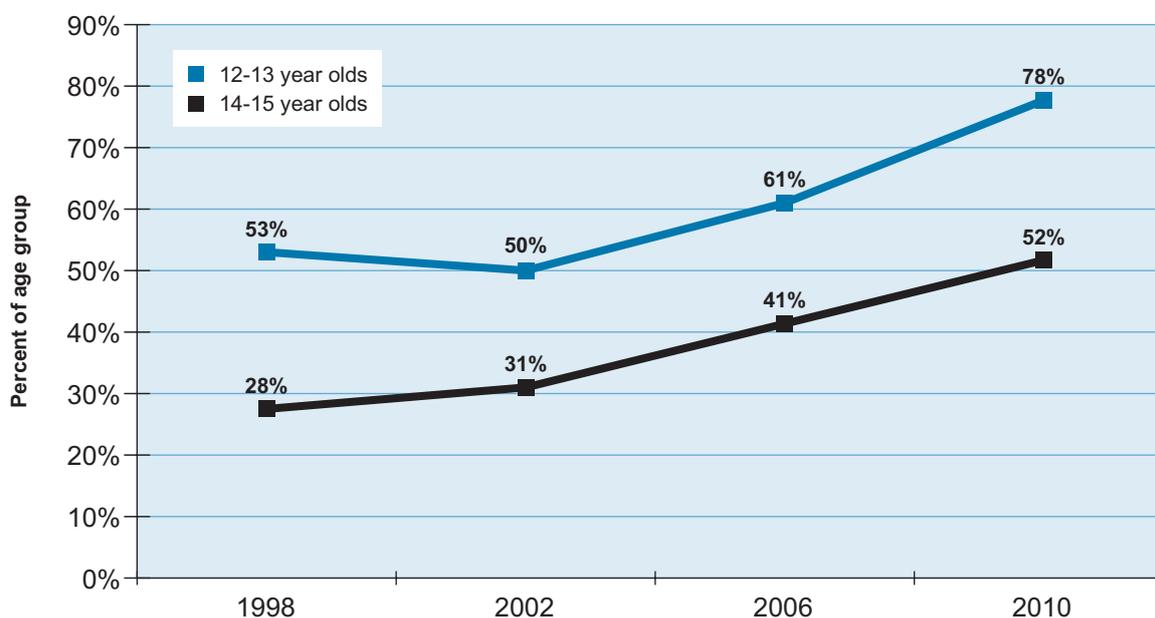
As in previous years the number of young people smoking increases substantially between 12-13 years and 14-15 years with 12% smoking regularly in the older age group compared to 2% of 12-13 year olds.

Regular and occasional smokers - 1998 to 2010



The percentage of students who have never smoked has increased year on year from 40% in 1998 to 65% in 2010.

Young people who have never smoked - 1998 to 2010

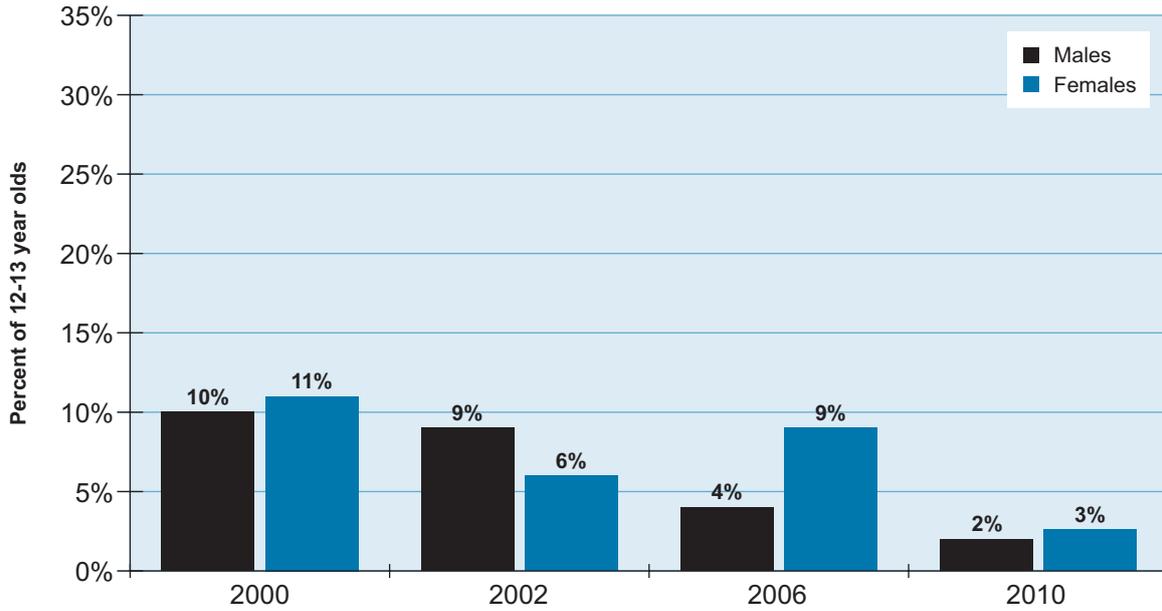


Smoking

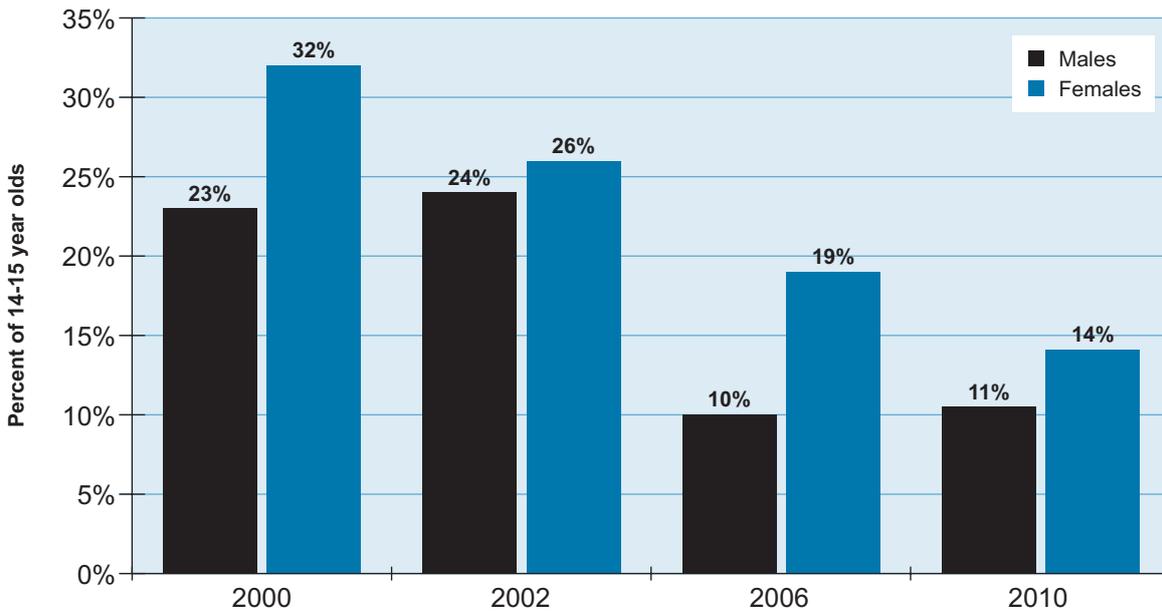
There has been a decrease in regular smoking amongst students since 2000 when 19% described themselves as regular smokers compared to 7% in 2010. Smoking has also reduced to very low levels amongst 12-13 year olds, with approximately only 26 students smoking regularly, 64% of whom would like to give up.

The proportion of female students who smoke regularly has decreased. In 2006 there were almost twice as many females smoking regularly as males, in 2010 there is little difference in the percentage of male and females smoking regularly.

12-13 year old regular smokers - 2000 to 2010

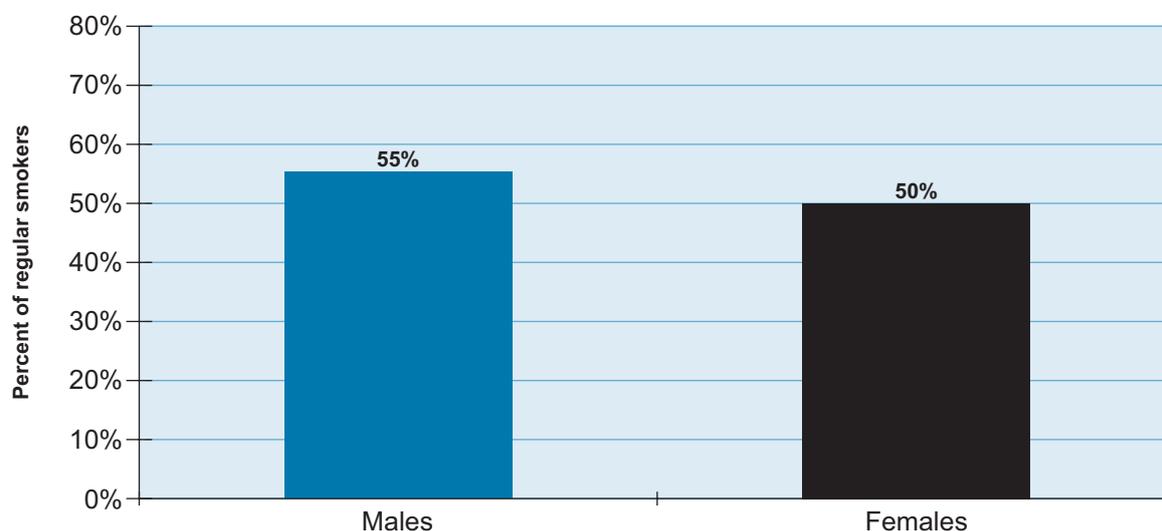


14-15 year old regular smokers - 2000 to 2010



The number of heavy smokers has decreased since 2006. Around half of regular smokers (52%) aged 14-15 years said they smoked more than 25 cigarettes a week compared to 68% who smoked the same amount a week in 2006.

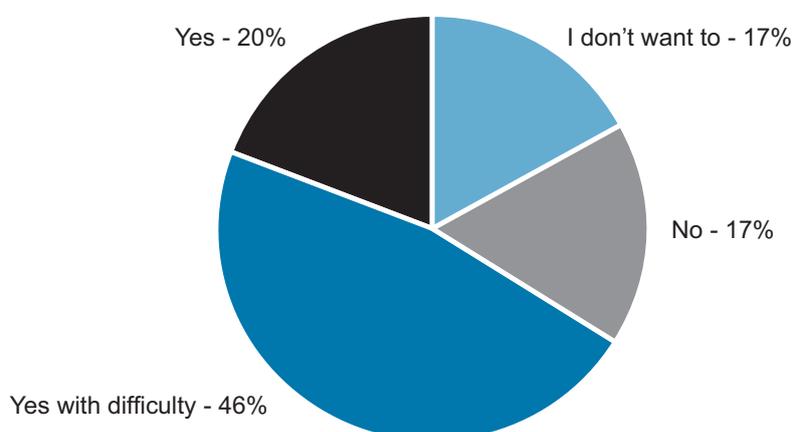
Regular smokers aged 14-15 years smoking more than 25 cigarettes per week



Giving up smoking

Two thirds of regular smokers aged 14-15 years stated that they think they could give up smoking if they tried, although most felt that this would be difficult. A total of 69% of regular smokers have tried to give up and 31% said they would like help to quit.

Percent of 14-15 year old Regular Smokers who think they could give up



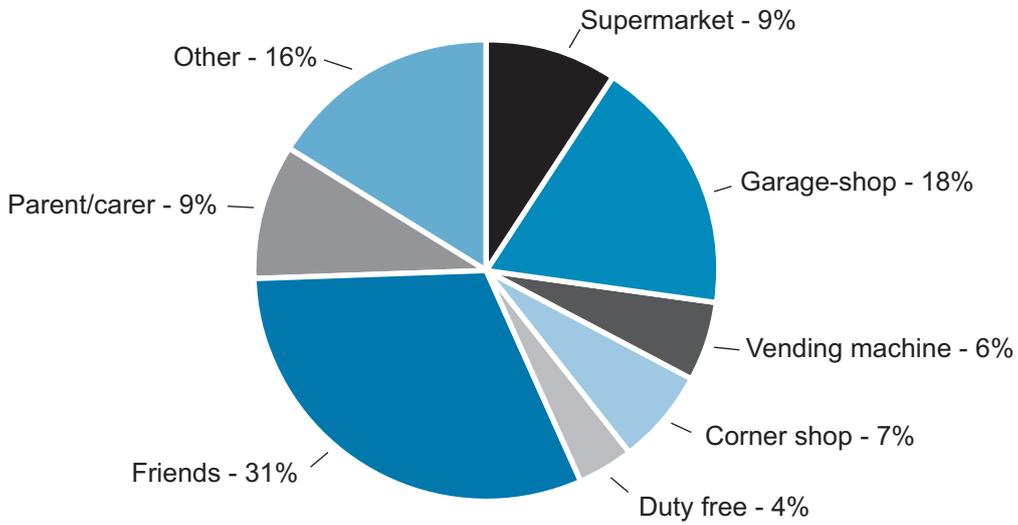
Sources of cigarettes

Less than half of regular smokers aged 14-15 years reported that they buy their own cigarettes rather than obtaining them from friends or parents or an other source. The garage shop was identified as the main source from which young people purchase cigarettes, this is particularly so for males, where a quarter of them said they bought their cigarettes. A greater proportion of females obtained their cigarettes from friends and parents. Half of young people cited older adults as an 'other' source of cigarettes.

There has been a change in the key sources of cigarettes for young people since the last survey. Fewer young people said they obtained their cigarettes from vending machines and corner shops. Previous surveys found that 14% sourced cigarettes from a vending machine and 31% sourced from a corner shop. In 2010 only 6% of young people obtained their cigarettes from vending machines and 7% from corner shops. However, the comparison between survey years should be treated with caution as previously 'parent/carer', 'friends' and 'duty free' were not options available for young people to select in the questionnaire.

Smoking

Sources of Cigarettes of 14-15 year old regular smokers

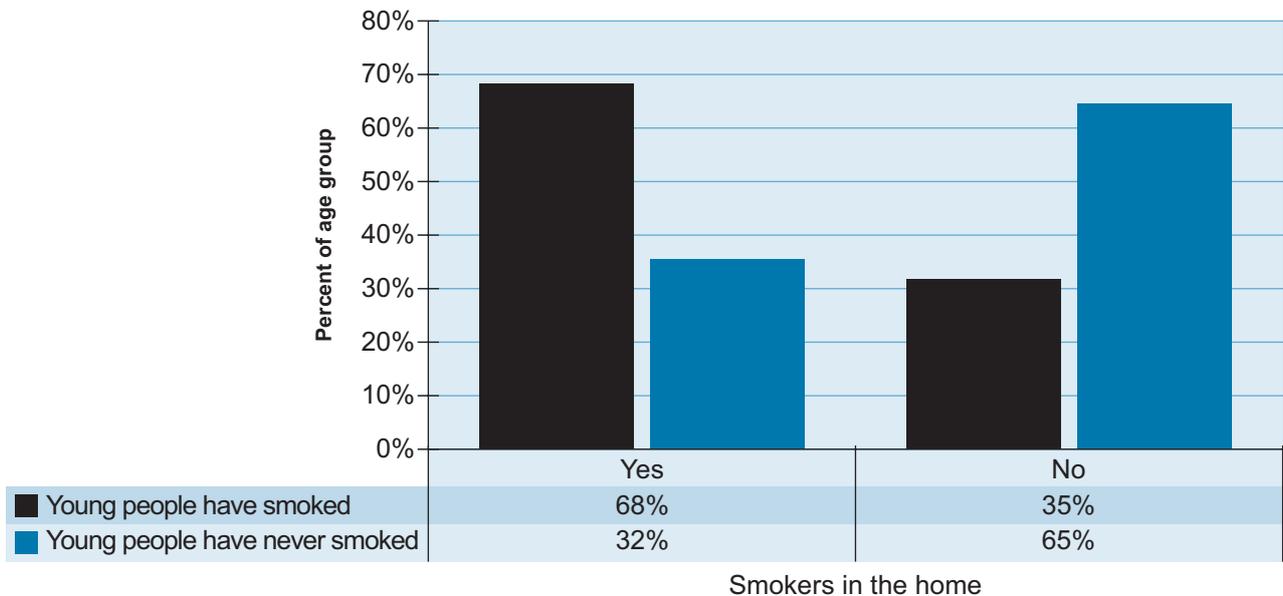


Smokers in the home

Previous surveys have shown very little change in the percentage of young people who stated they live with smokers in their home. This had remained at around 50% until this year's survey where the results show a reduction to 38%.

It is widely acknowledged that a child living in a household with an adult who smokes has an increased chance of taking up smoking themselves. This is true locally, where 68% of 14-15 year olds who stated they smoke said they have someone in their home who also smokes.

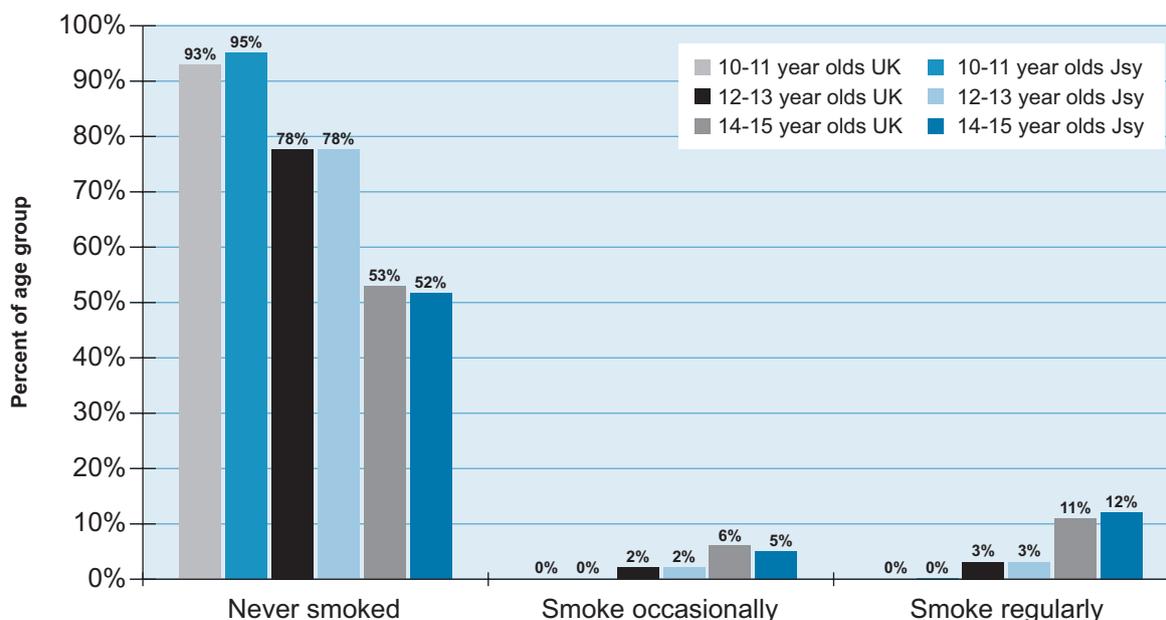
Influence of smoking in the home on 14-15 year olds smoking habits



Comparisons with UK HRBQ

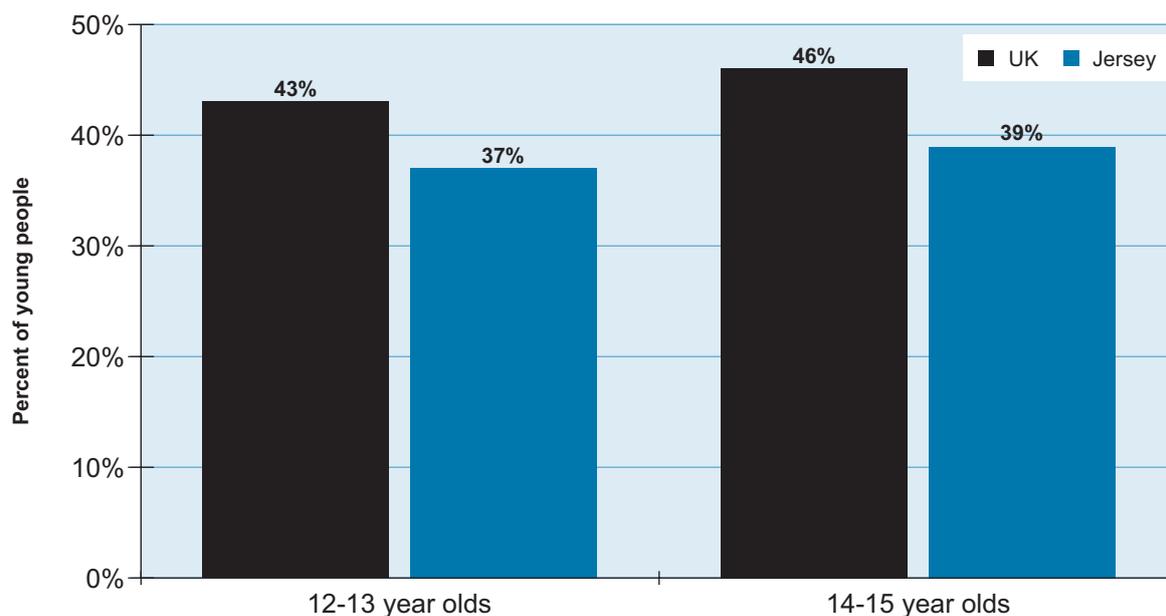
Smoking behaviour patterns for young people in Jersey were found to be similar to those in the UK. Across each age group, the proportion of young people in Jersey who reported that they have never smoked, occasionally smoke or regularly smoke was similar to the UK.

Smoking status of young people in Jersey and UK



One area where there was a small difference between UK and Jersey students relates to the percentage of young people living in a home where at least one person smokes. A total of 45% of young people in the UK said they live in a home with a smoker compared to 38% of young people in Jersey.

Young people living with smokers in household



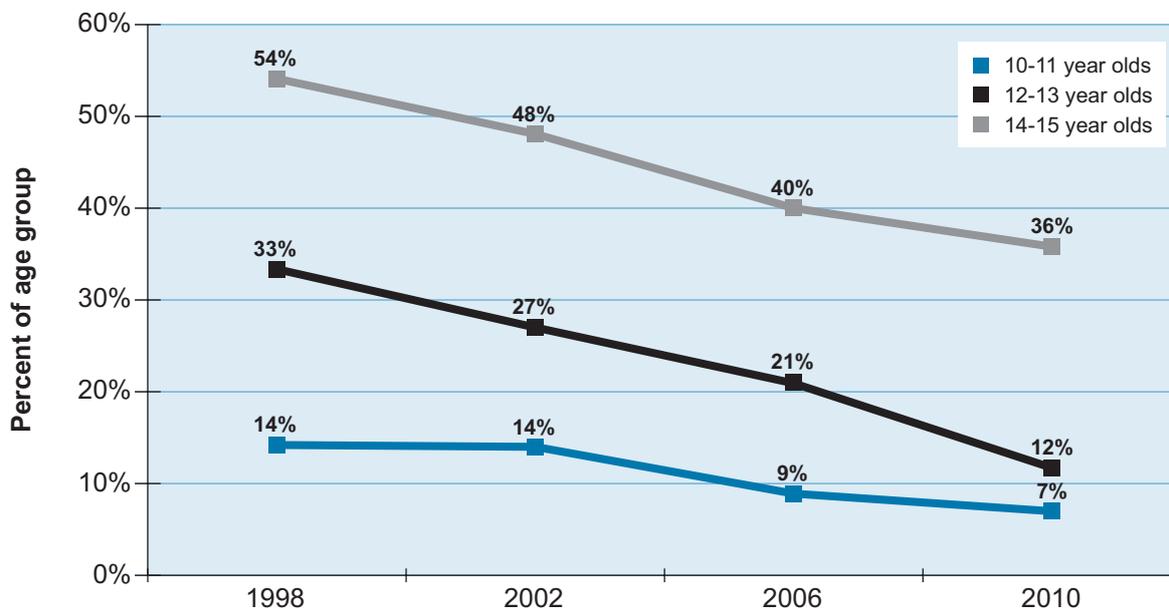
Alcohol



Main Findings

The number of young people who reported drinking alcohol continues to fall for all age groups.

Percentage drinking alcohol in the 7 days prior to the survey



- A greater proportion of 12-15 year olds in Jersey do not drink alcohol when compared to their UK counterparts.
- As children become older more reported drinking without parental knowledge.
- Just over half of 14-15 year olds who reported drinking alcohol do so excessively or heavily.
- Over a quarter of 14-15 year olds who drank alcohol reported drinking more than they intended at least once a month.
- 1 in 5 14-15 year olds 'got drunk' on at least one day in the week prior to the survey.
- The most common reasons given for drinking alcohol were to socialise and have fun.



Why it is Important

Children and young people risk their health and are particularly vulnerable to harm when they drink alcohol. Their smaller physical size and inexperience with alcohol makes them much more susceptible to its intoxicating effects. Even small amounts can impair their judgement and lead them to take undue risks, which can compromise their personal safety.

Parents and carers play a central role in how much and how frequently their children drink. There is a considerable amount of guidance to assist parents in making decisions about alcohol and their children.

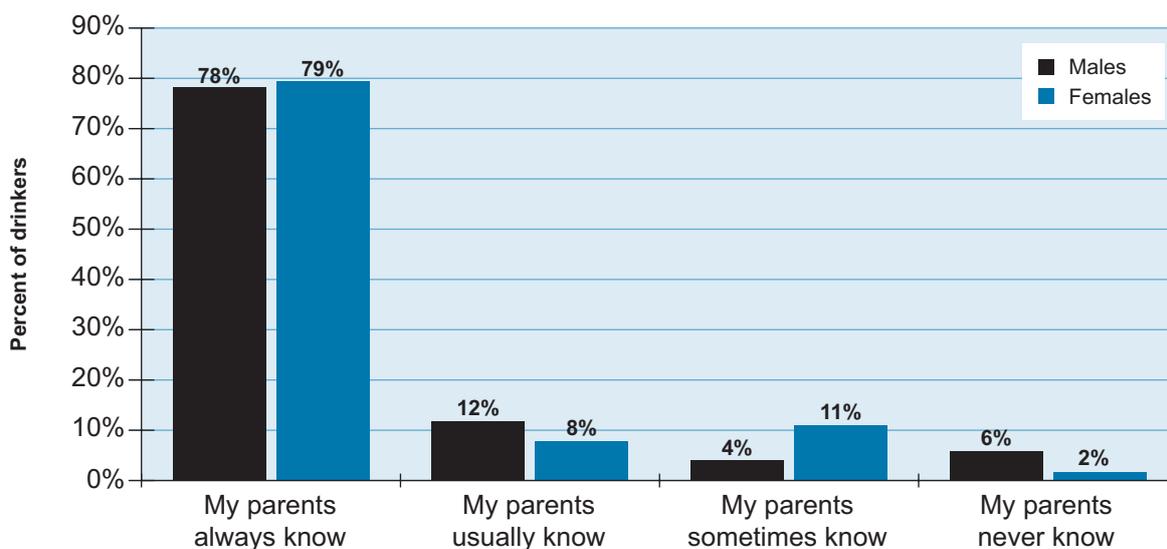
The Department of Health recommends an alcohol-free childhood is the healthiest option. Children who drink increase their risk of involvement in a wide range of health and social problems. These risks are reduced by delaying the age at which young people begin to drink. This means that for children under the age of 15 years, it is advised that children have no alcohol whilst those over 15 years are advised to consume a maximum of 1-2 units infrequently and certainly no on more than one day a week.

P Primary Schools

Consumption

The percentage of children who reported drinking alcohol in this age group continues to decrease. A total of 6% of 10-11 year olds reported drinking alcohol in the week prior to the survey. A greater percentage of males reported drinking alcohol when compared to females (10% versus 2%). The most commonly consumed type of alcoholic drink for this age group was wine and beer. In this age group 79% of the 10-11 year olds who claimed to drink, do so with their parents knowing.

Parental knowledge of drinking

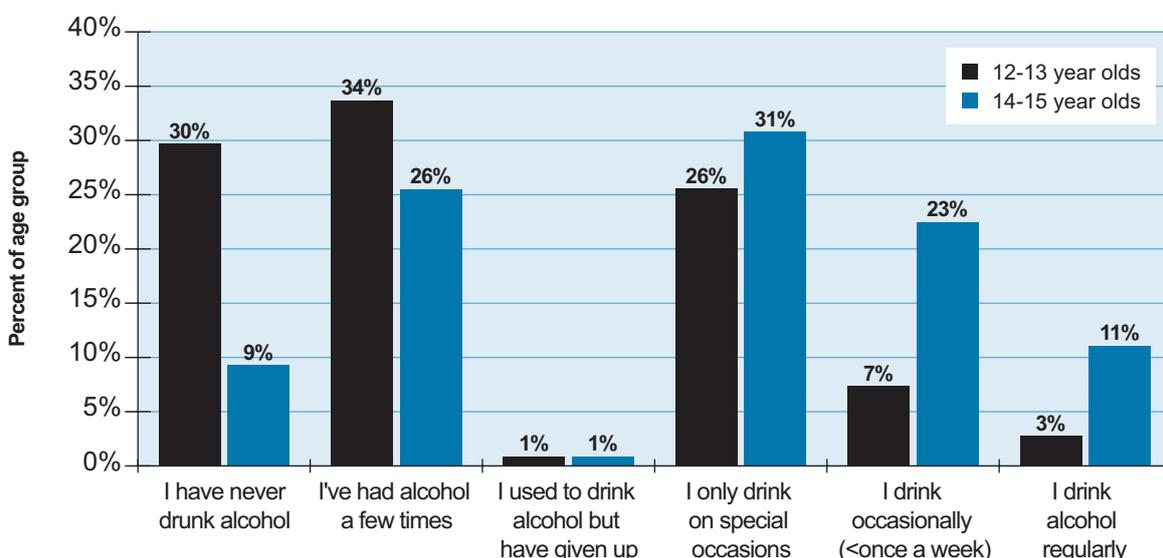


S Secondary Schools

Consumption

The survey shows that 70% of 12-13 year olds have tried alcohol, which has decreased from 83% in 2006. The majority said they drink just on special occasions. There are a small number of 12-13 year olds who stated they are drinking regularly. By the time young people reach 14-15 years, the percentage who have tried alcohol increases to 91%, again this is mostly on special occasions. The data revealed there are approximately 117 regular drinkers in Year 10 and this is less than in 2006.

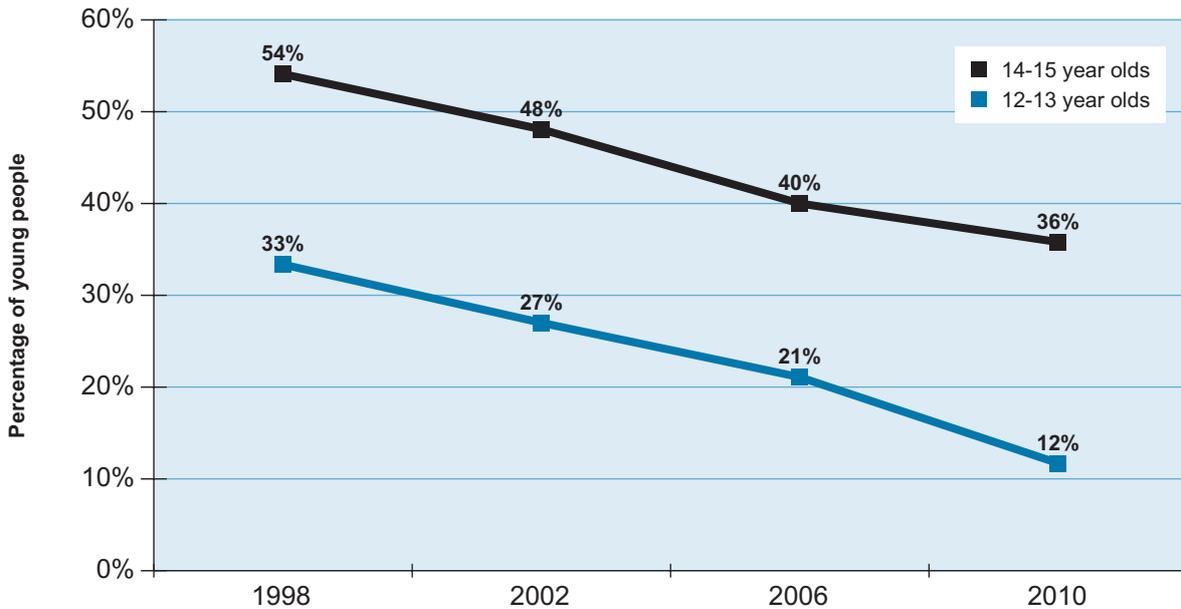
Drinking habits of young people in 2010



Alcohol

The percentage of young people who reported drinking alcohol in the seven days prior to the survey has continued to decrease since 1998. A total of 36% of 14-15 year olds had drunk alcohol in the 7 days prior to the survey. Most reported drinking on just one day in the week with Friday and Saturday being the most popular days. In total around a fifth of 14-15 year olds (22%) reported that they got drunk in this period. This means approximately 1 in 5 students classed themselves as being drunk on at least one day in the week. A larger percentage of female drinkers than male drinkers reported getting drunk in the seven days prior to the survey.

Percentage of young people drinking alcohol in the 7 days prior to the survey

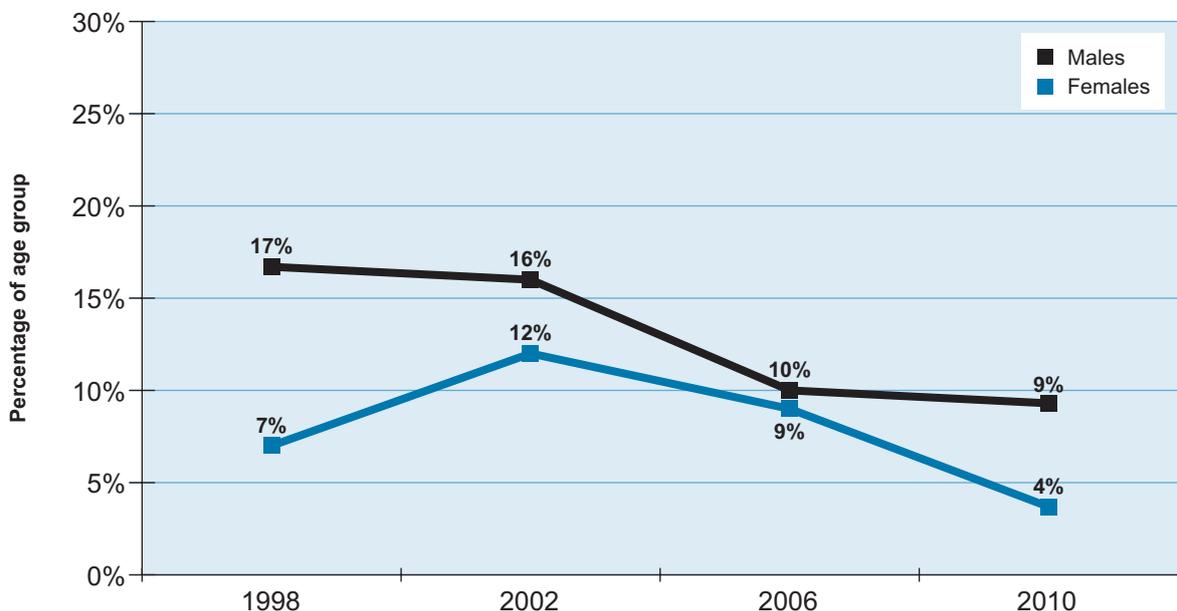


Drinking above sensible limits

The majority of young people who reported that they drink do so within nationally recommended adult weekly limits. A small number of young people (3%) reported drinking above adult recommended sensible weekly limits. The recommended limits are up to 14 units for females and 21 units for males.

By the time the students reach 14-15 years, males drink more heavily than females with the average weekly units consumed by male drinkers being 10 a week compared to 6 for female drinkers.

Percentage of 14-15 year olds drinking 15 units or more a week



Tracking those 14-15 year olds who reported they drink a lot shows that this behaviour has decreased over time. One in five 14-15 year olds who said they drink, reported binge drinking on at least one day during the week. This has changed little since 2006.

Types of drink

There is a gender preference for different types of alcohol which has remained largely unchanged since the first survey in 1996. The most popular drink for older females was spirits followed by premixed spirits and wine and for the older males the most popular drink choice was beer/lager followed by cider then spirits.

Reasons for drinking

The most common reason given for drinking alcohol was 'to socialise and have fun' (45% of drinkers). The other drivers for drinking were 'to feel good' (20%) and 'to feel confident' (19%). There was a slight preference for 14-15 year old females to drink alcohol 'to feel confident' over males. The least commonly chosen reason was 'because adults do'.

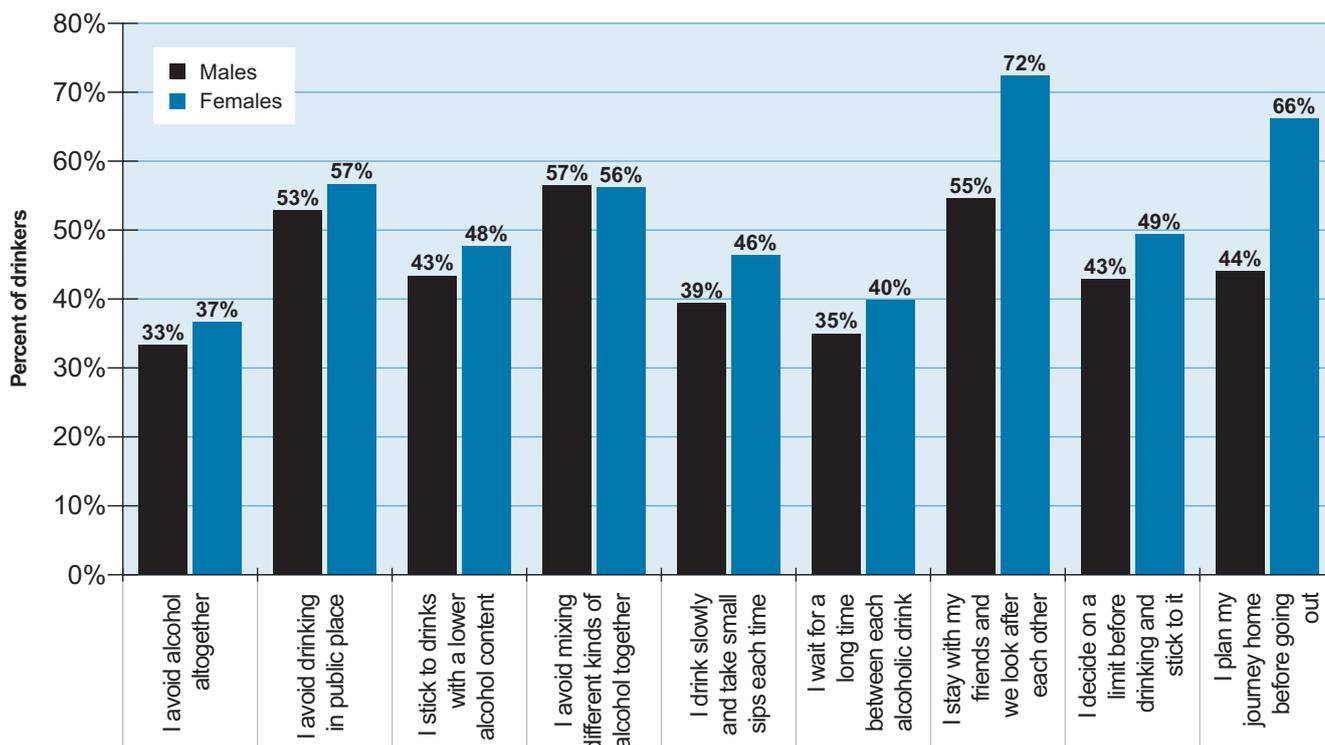
Problems caused by drinking

As young people become older a greater percentage reported that they drink more than they intend to. Over a quarter of 14-15 year old drinkers reported drinking more than they intend to at least once a month. This has reduced from a third reporting this in 2006. A small number of 14-15 year old drinkers (8%) reported that their use of alcohol has caused a problem for themselves or others at least once a month in the last 12 months - approximately 84 young people in this age group.

Strategies to avoid drinking too much

The results show that young people are using the same strategies to avoid drinking too much as they did in 2006. In general a greater percentage of females used the strategies than males.

Strategies often/always used by 12-15 year olds to avoid drinking too much alcohol

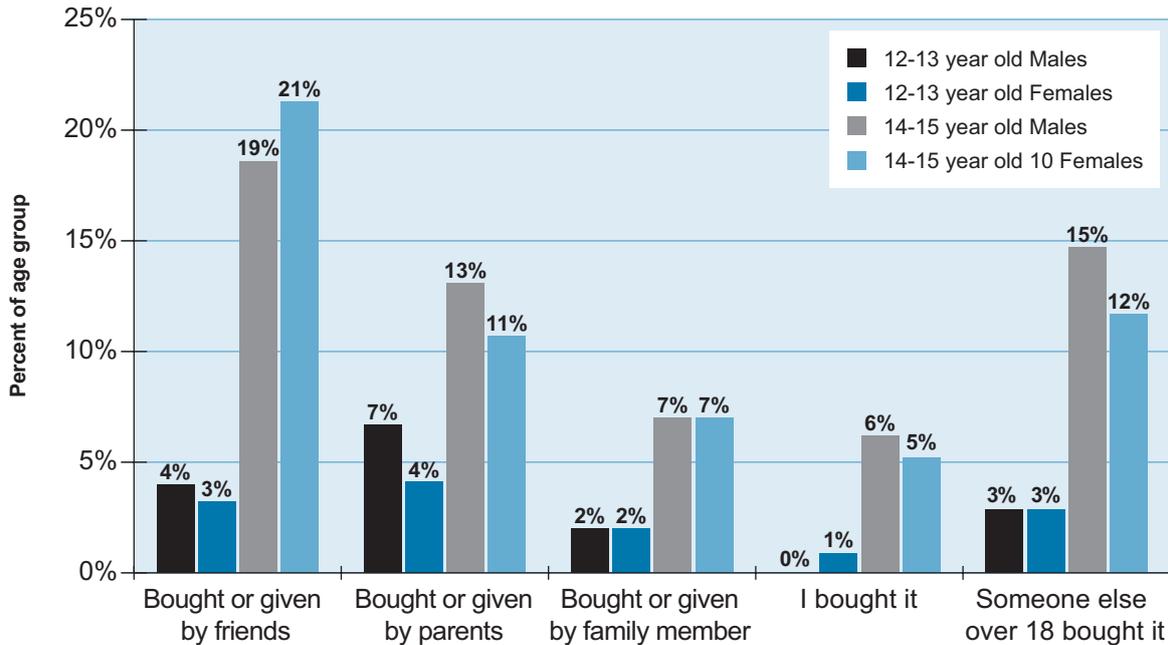


Alcohol

Sources of alcohol

A total of 50% of 12-13 year olds who stated that they drink obtained their alcohol from their parents. Most 14-15 year old drinkers obtain their alcohol from friends (56%). Less than 1% of 12-13 year olds and 6% of 14-15 year olds said they buy their alcohol themselves (approx 65 young people). Of those who bought alcohol in the seven days prior to the survey most bought it from a supermarket or off-licence.

Sources of alcohol for 12-15 year olds



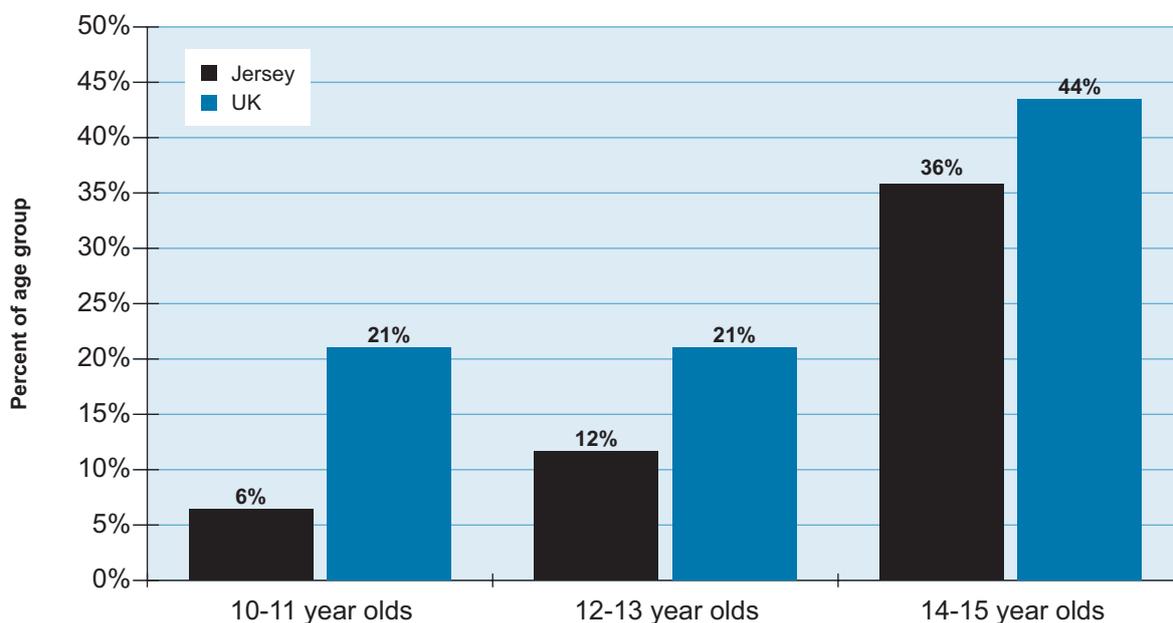
Parental knowledge

Overall 47% of 12-15 year old drinkers always drink with their parents' knowledge. As young people become older more drink alcohol without parents' knowledge. Only 9% of 12-13 year old drinkers reported that their parents never know when they drink alcohol and this increases to 17% of 14-15 year olds.

UK Comparison

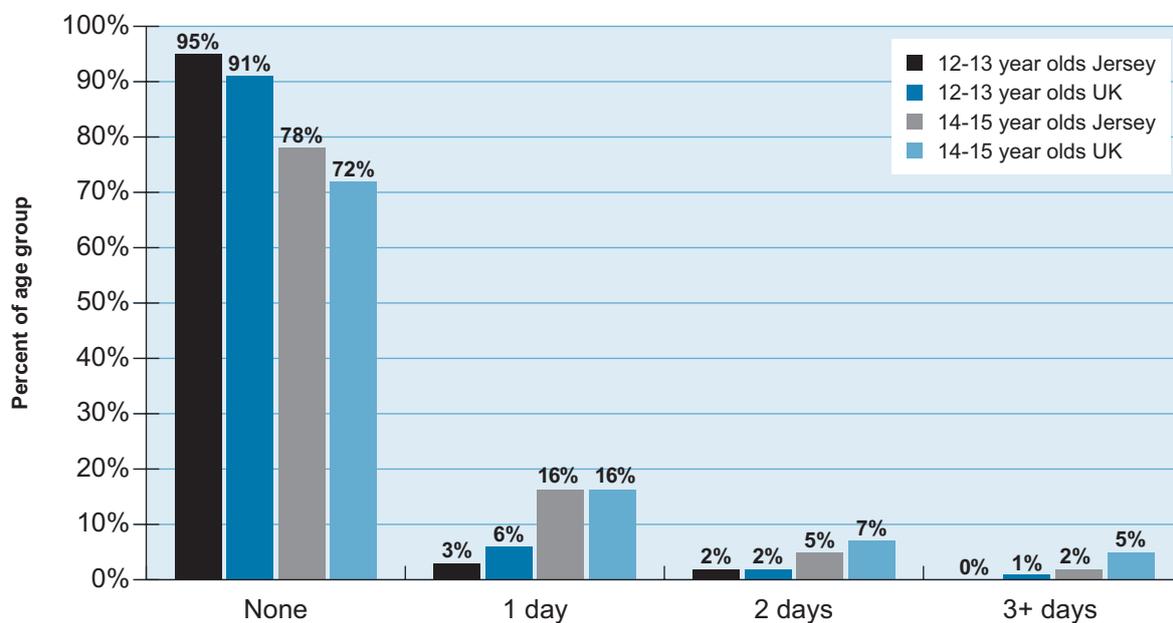
Jersey has a higher percentage of young people who stated they did not drink any alcohol in the seven days prior to the survey when compared to their UK peers (82% versus 72%).

Percentage reporting drinking at least one alcoholic drink in the last 7 days



In the seven days prior to the survey 22% of 14-15 year olds reported that they got drunk in this period. This is lower than the UK where 28% of 14-15 year olds reported getting drunk on at least one day in the week.

On how many days did you get drunk in the last 7 days?



Illegal Drugs



Main Findings

- ❑ Fewer young people reported being offered drugs than in previous years.
- ❑ Cannabis was the drug that most young people had tried, followed by legal highs.
- ❑ Teachers continue to be the primary source of information on drugs for most young people.
- ❑ A total of 16% of 14-15 year olds had tried an illegal drug.
- ❑ One in twenty 12-15 year olds had taken drugs and alcohol on the same occasion.
- ❑ In general 12-13 year old females knew less about drugs than males.
- ❑ The percentage of young people who know someone who takes drugs has continued to decrease.



Why it is Important

In recent years the threat to health from illegal drugs has risen dramatically with the advent of 'legal highs'. These are substances that are manufactured to produce the same or similar effects, to drugs such as cocaine and ecstasy controlled under the Misuse of Drugs (Jersey) Law. New substances are regularly developed to avoid legal controls. Manufacturers often refer to them as plant food, bath crystals or pond cleaner.

The effects of illegal drugs and substances designed to mimic them on young people are unpredictable and will vary from one person to another. The use of drugs by young people can, in some cases, be fatal whilst for others the damage to their health is more subtle and can be concerned with addiction, psychological problems and the transition from 'soft' drugs like cannabis to 'hard' drugs like cocaine.

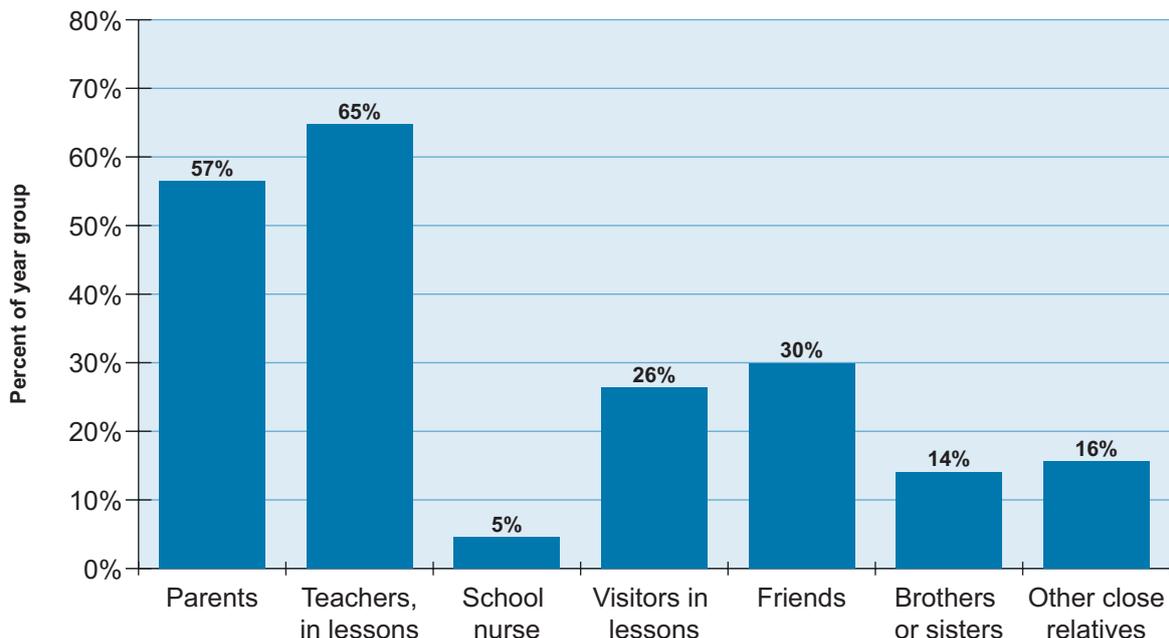


Primary Schools

Source of Information

Most children aged 10-11 have participated in lessons at school about drugs or talked about drugs with their parents. The percentage of children aged 10-11 who have received a talk about drugs by visitors in lessons has increased slightly since 2006.

Percentage of 10-11 year olds who have been talked to about drugs by various sources



Drug exposure

Only 1 % of children aged 10-11 said they had been offered cannabis, but 3% of children said they were 'unsure' if they had been offered cannabis. A small number of 10-11 year olds (11%) are fairly sure or certain that they know someone who uses non-medical drugs.



Secondary Schools

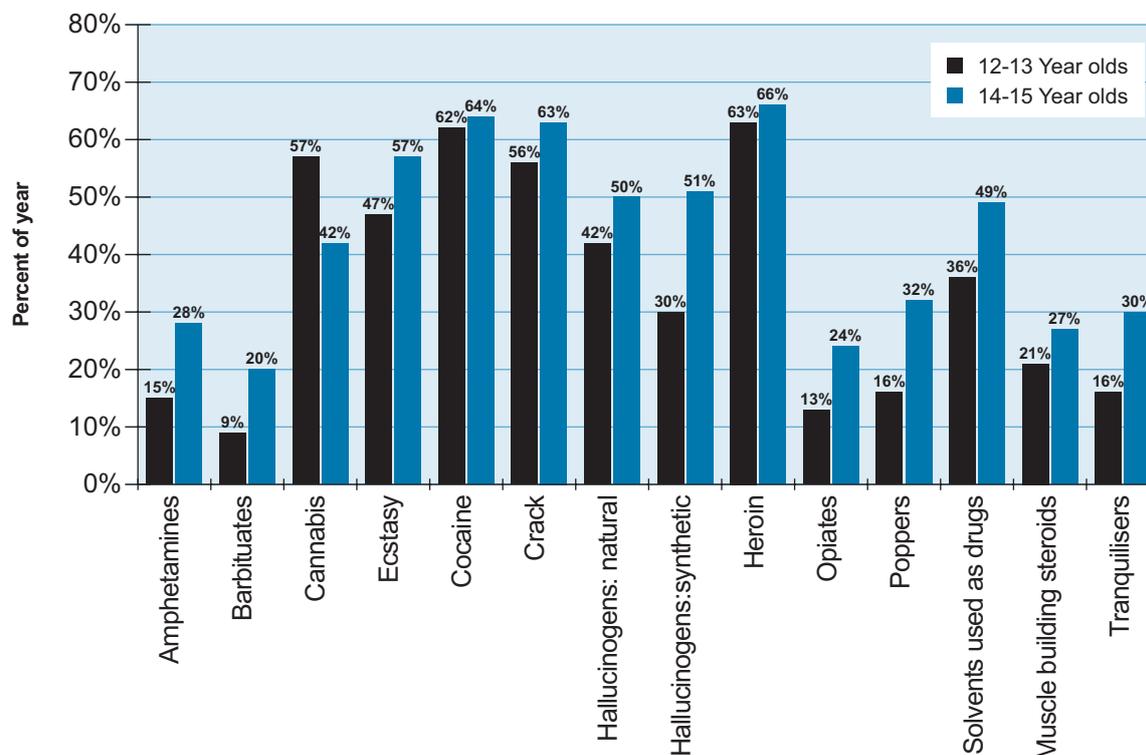
Source of Information

Drug education lessons were the main source of information about drugs for 47% of secondary school students and parents/carers were cited as the next main source. A greater percentage of older students reported friends as their main source of information about drugs, (10% of 14-15 year olds) compared to 4% amongst 12-13 year olds. Twice the percentage of males than females said TV/films were their main source of information about drugs (10% versus 5%). There is a good match between where young people obtained their information about drugs and where they think they should be getting their information. Young people's reported knowledge about drugs was found to increase with age. A greater percentage of 12-13 year olds than 14-15 year olds had never heard of each of the drugs asked about in the survey. More 12-13 year old females than males of the same age had never heard about many of the drugs.

Belief about drugs

In general, a greater percentage of older students considered most drugs to be 'unsafe' with the exception of cannabis which more 12-13 year olds believed to be 'unsafe'. Heroin, Cocaine and Crack were considered to be 'always unsafe' by the greatest percentage of young people. There was little change since 2006 but more young people believed cannabis to be 'always unsafe' in the 2010 survey. A lower percentage of young people believed solvents and ecstasy to be 'always unsafe' now than in 2006.

Percentage of 12- 15 year olds who believe drugs are 'always unsafe' in 2006 and 2010



Illegal Drugs

Drug use

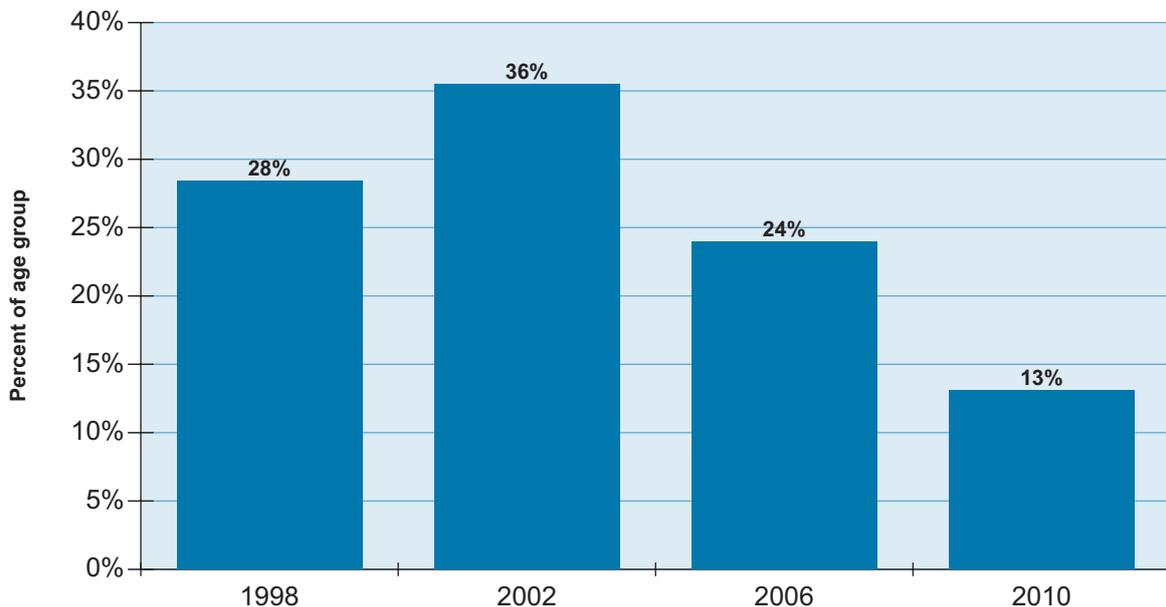
Cannabis was the most commonly used illegal drug among 14-15 year olds surveyed, followed by 'legal highs', ecstasy, solvents, natural hallucinogens and opiates. A total of 13% of 14-15 year olds reported that they had taken cannabis and more males than females in this age group had taken it. Of those that had taken cannabis, almost half (48%) reported that they had taken cannabis in the last month. In total this represents 6% of all 14-15 year olds. Reported use of all other drugs was considerably lower amongst young people. The average age for the 14-15 year old cohort first trying drugs was 13 years.

The most commonly tried/taken drugs by secondary school students in Jersey

	12-13 year olds	14-15 year olds
Cannabis	2%	13%
Legal highs	>1%	3%
Ecstasy	>1%	3%
Solvents (e.g. glue)	1%	3%
Opiates	>1%	3%
Hallucinogens Natural	>1%	3%

The percentage of 14-15 year olds who reported that they have taken cannabis has been decreasing since 2002.

Percentage of 14-15 year olds who have taken cannabis



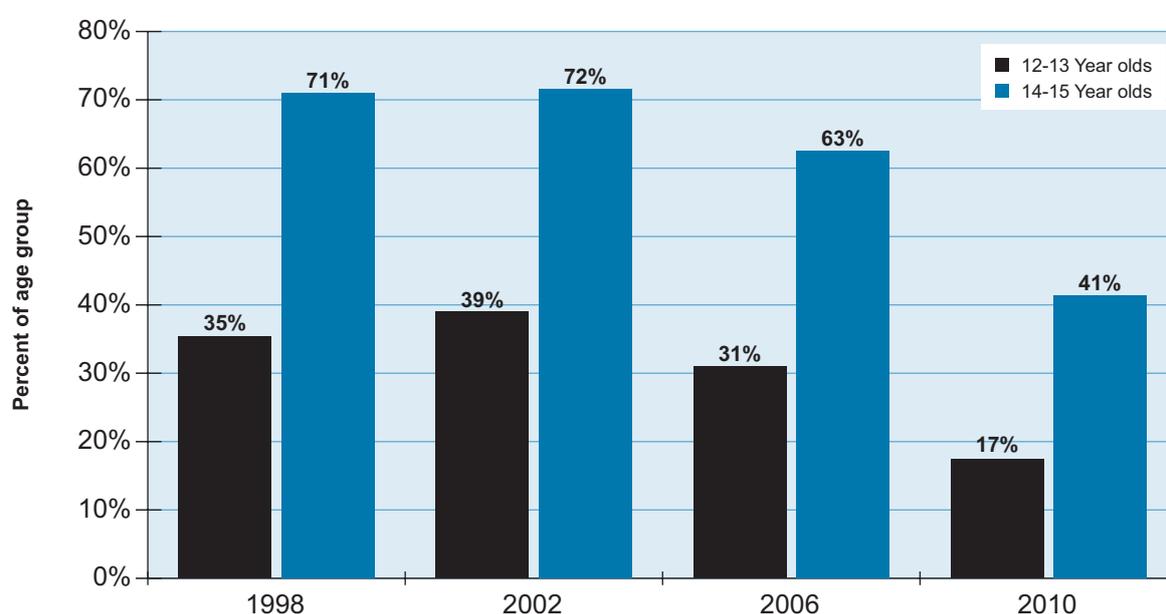
*prior to 2006 cannabis was cannabis leaf
 prior to 2006 includes non respondents so may be slight under estimate.

Drug exposure

Exposure to the supply of cannabis increased with age, very few students aged 12-13 reported that they had been offered cannabis whilst nearly a third of 14-15 year olds reported they had. A greater percentage of males than females indicated that they had been offered cannabis. However the percentage of 14-15 year olds who have been offered cannabis has decreased since the last survey from 43% to 28%.

As they become older more young people reported knowing someone who takes drugs, between the ages of 12-13 and 14-15 years the percentage of young people who reported they are certain they know someone who takes drugs triples. In total, just over a quarter of 14-15 year olds (27%) reported being 'certain' they know a drug user. It may be that young people in a school year may all know the same drug user but it gives an indication of how close they are to a possible source of drugs. However, the percentage of young people who knows someone who takes drugs has continued to decrease since 2002.

Percentage of young people who are 'fairly sure' or 'certain' they know a drug user



Mixing drugs and alcohol

Of those 14-15 year olds who had reported taking drugs, 14% had taken more than one type on the same occasion. Over 50% of 14-15 year olds who reported taking drugs had taken them on the same occasion as drinking alcohol.

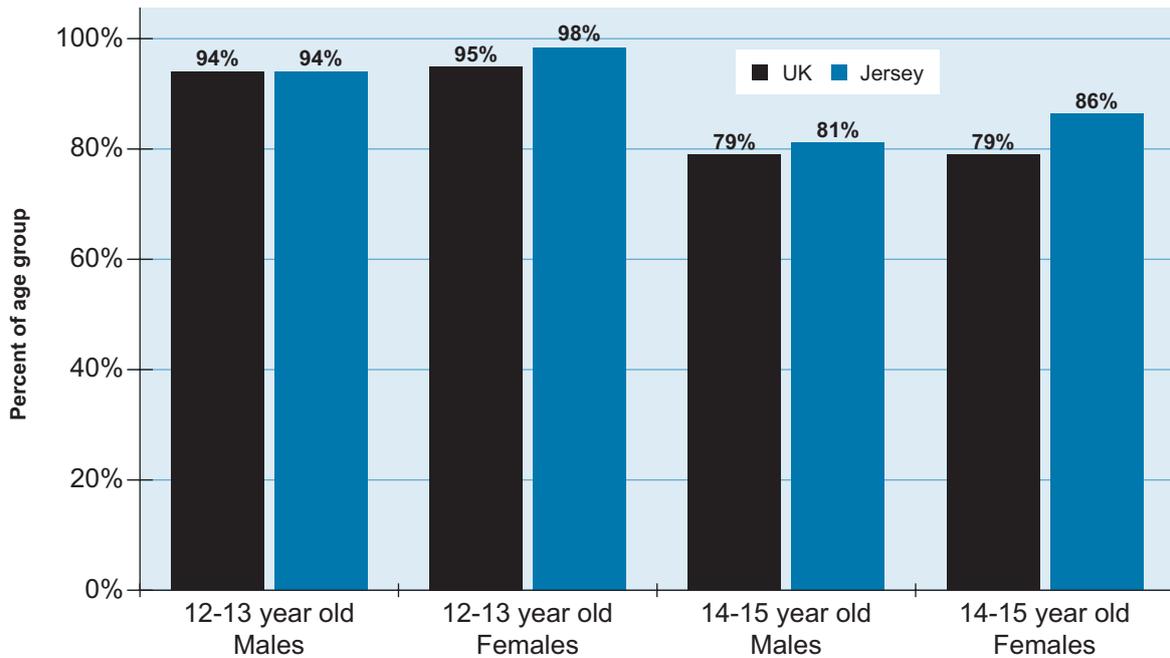
The percentage of 14-15 year olds that had taken drugs and alcohol on the same occasion has decreased from 26% in 2002, 19% in 2006 to 9% in 2010. It should be noted that rates of overall drinking and drug taking have also declined in this period.

Illegal Drugs

Comparisons with UK HRBQ

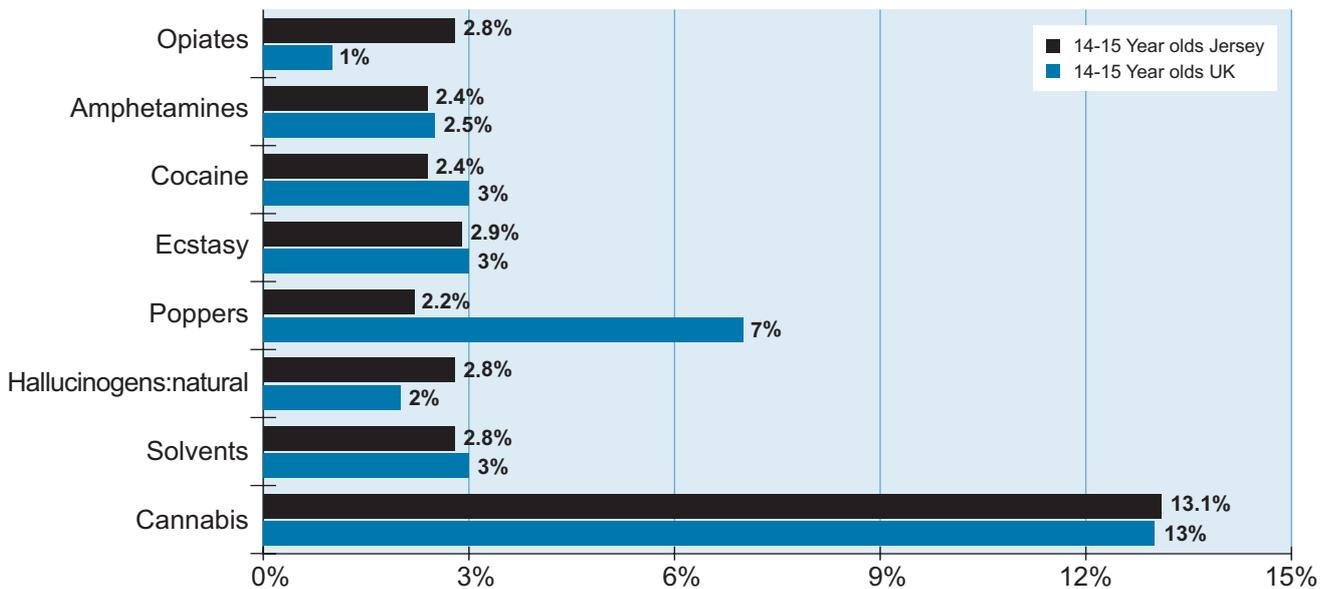
When compared to their UK peers, a greater percentage of 14-15 year olds in Jersey reported that they had never taken any drugs.

Percentage of young people who have never taken drugs in Jersey and the UK



In comparison to the UK, there is little difference in the percentage of 14-15 year olds in Jersey who have tried the most commonly used illegal drugs except for poppers which appeared to be more popular in the UK.

Percentage of 14-15 year olds who have tried illegal drugs in Jersey and the UK

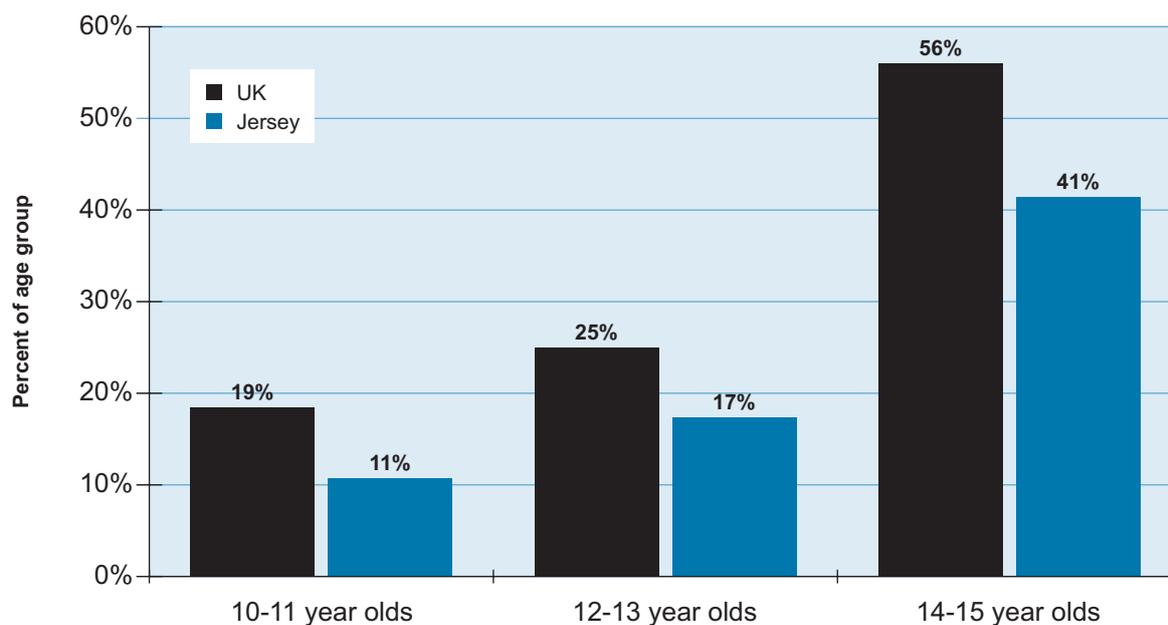


When compared to young people in the UK, a greater percentage of young people in Jersey believed most of the drugs to be 'always unsafe'.

A smaller percentage of 14-15 year olds in Jersey had taken drugs and alcohol on the same occasion when compared to their UK counterparts (15% versus 9%).

A smaller percentage of young people in Jersey reported that they know someone who takes drugs when compared to their UK peers.

Percentage of young people who are 'fairly sure' or 'certain' they know someone who takes drugs in Jersey and the UK



Physical Activity



Main Findings

- Most young people reported doing five or more episodes of physical activity in a week.
- Self reported enjoyment of physical activity and physical education was high but was seen to reduce with age in girls.
- More 14-15 year olds reported doing five or more occasions of physical activity in a week than in 2006.
- Only 12% of young people were active for one hour every day as recommended for health benefit.
- Nearly twice the percentage of young people in Jersey reported travelling to school by car compared to the UK.
- In general more young people in Jersey reported participating in a range of physical activities than their UK counterparts.



Why it is Important

Physical activity is known to be a protective factor against a range of diseases causing premature death and chronic disease into adulthood. Children and young people are recommended to achieve a total of at least 60 minutes of moderate intensity physical activity per day. Helping people to move from a sedentary lifestyle to a moderately active one produces the greatest reduction in risk of developing chronic disease. Physical activity has health benefits in the short term too for example in:

- Weight management
- Improving balance and motor skills
- Improving posture
- Developing social skills and teamwork
- Improving emotional health

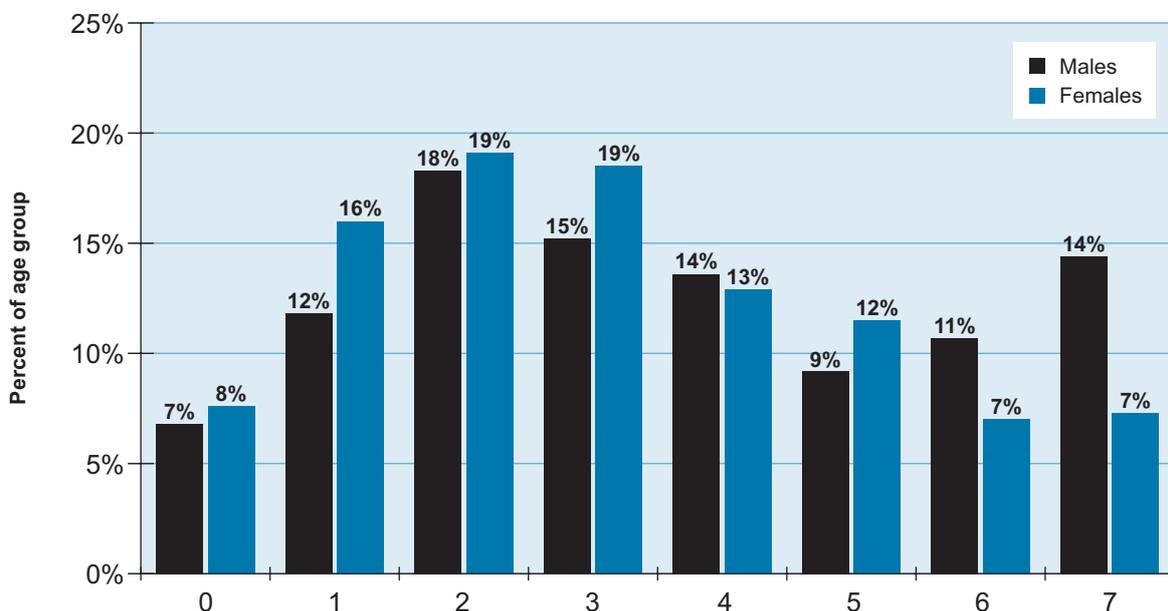


Primary Schools

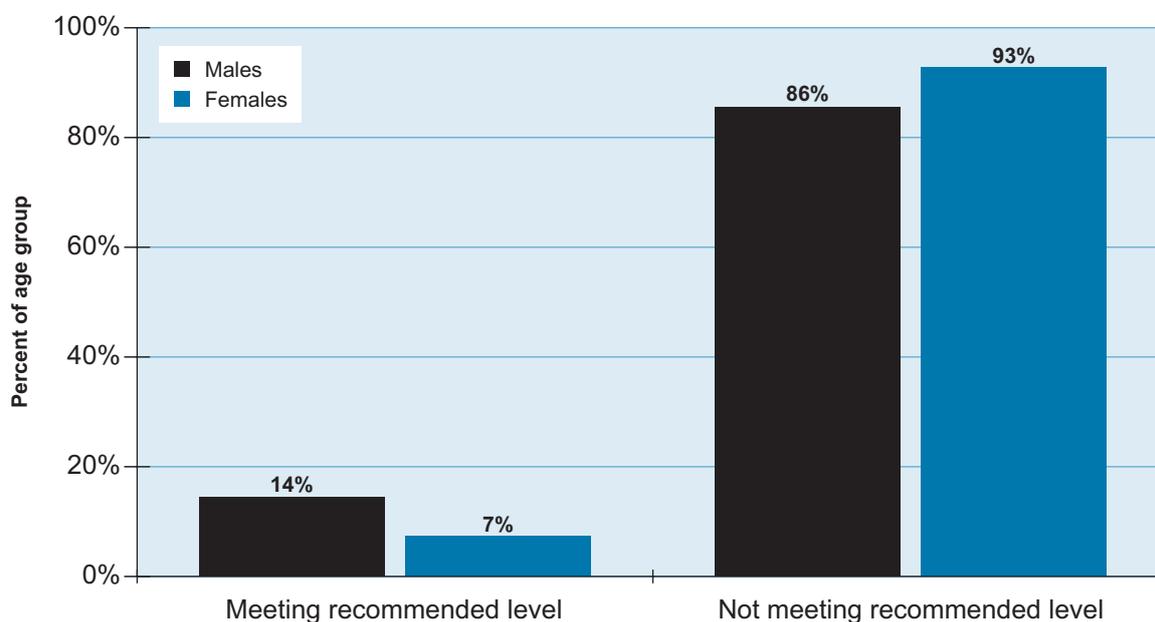
Levels of activity

More boys at 10-11 years reported being physically active on more occasions in a week than girls; 59% of boys were active 5 or more times a week compared to 45% of girls. Only 11% of 10-11 year olds were identified as meeting the recommended level of weekly physical activity.

Number of days 10-11 year olds were physically active for at least an hour, enough to make them feel out of breath and sweaty



Percentage of 10-11 year olds meeting recommended level of physical activity



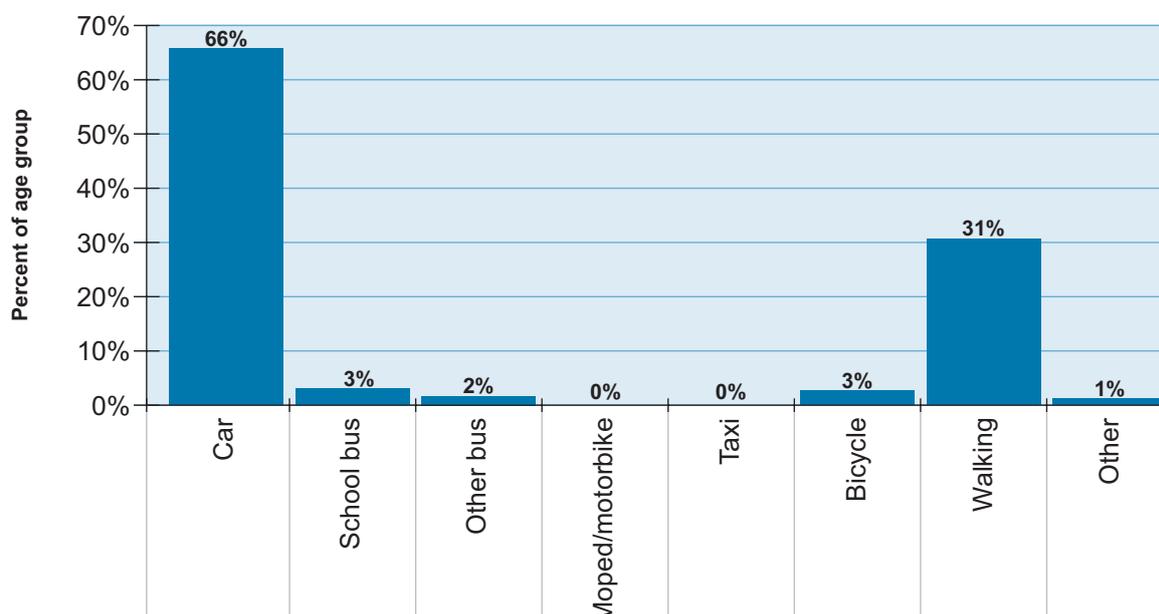
Enjoyment of physical activity

The majority of 10-11 year olds (88%) reported high levels of enjoyment from doing physical education and games in school as well as high levels of enjoyment of physical activity in general (86%). The physical activities that most 10-11 year olds participated in at least weekly were football (47%), Swimming (47%) and going for walks (46%).

Travel to school

Just under a third of 10-11 year olds reported walking to school, the remainder mostly travel to school by car (66%). A very small percentage of young people (3%) said they travel to school by bike despite over 90% having reported that they own a bike. These findings have changed very little since 2006.

Modes of transport used by 10-11 year olds travelling to school



Physical Activity

Barriers to physical activity

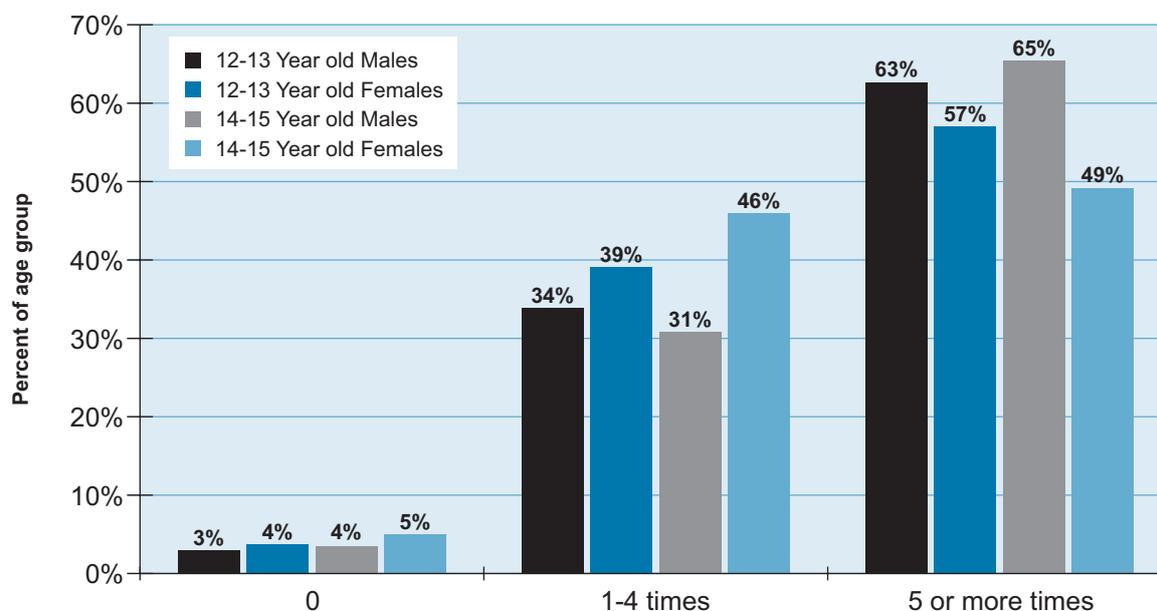
Around a third of 10-11 year olds (32%) indicated that lack of time was the factor that prevented them from being as physically active as they would like. Price (20%) and feeling awkward (18%) were the next two most selected reasons by this age group.

Secondary Schools

Levels of activity

Most students reported doing five or more separate occasions of physical activity in a week. The percentage of 14-15 year olds who reported that they do physical activity on five or more separate occasions a week has increased from 46% to 57% since 2006. The gender difference in the number of occasions young people did any physical activity in a week that exists in 10-11 year olds becomes more equal by the time they reach 12-13 years. However, this imbalance reappears again amongst 14-15 year olds where 65% of males are physically active between five or more times a week compared to 49% of females.

Number of separate occasions young people did any physical activity in a week

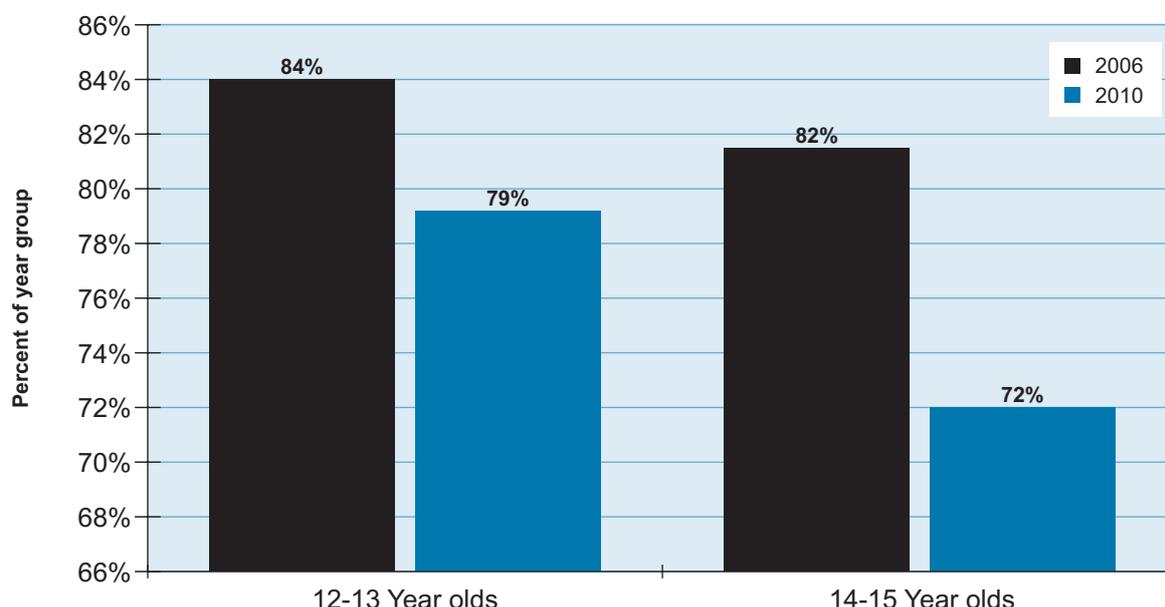


Only 12% of secondary school students reported being active for an hour a day seven days a week as recommended for good health. A greater percentage of males than females meet this recommended level (14% versus 9%).

Enjoyment of physical activity

Reported enjoyment of both physical activity and physical education remains high amongst secondary students (80% and 76% respectively). However, fewer females reported enjoyment of these activities as they become older; only 62% of 14-15 year old females reported to enjoy physical education at least quite a lot compared to 81% of males. There has been little change in young people's reported enjoyment of physical activity since 1998. However, enjoyment of physical education has reduced amongst 14-15 year old students since 2006 when this question was first asked.

Percentage of young people that enjoy PE and games at least quite a lot



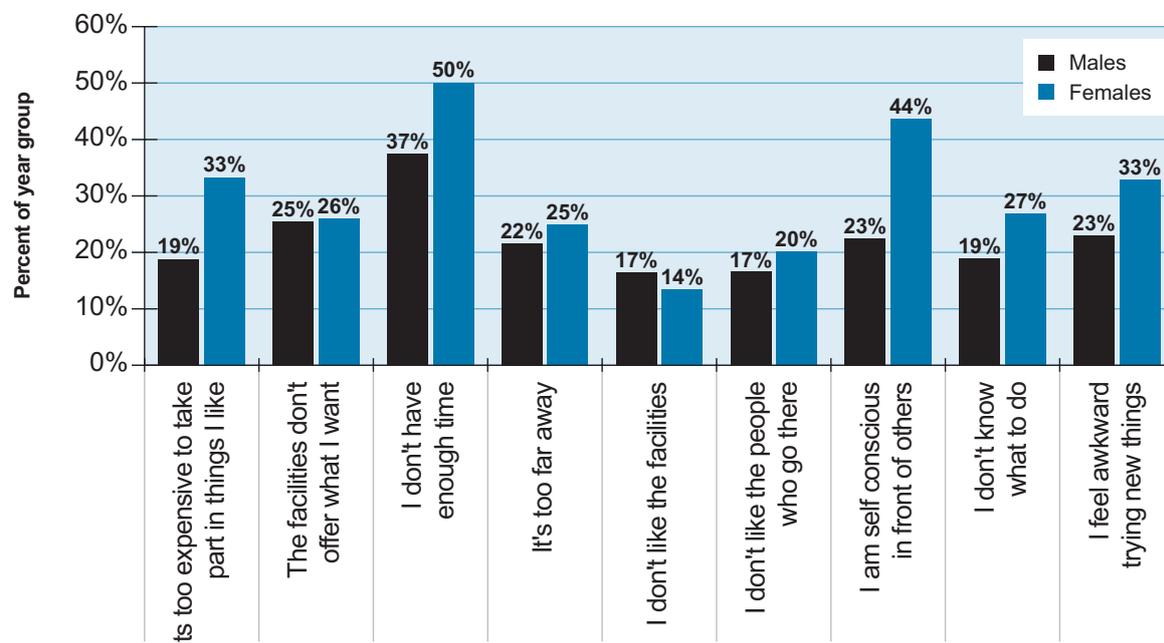
Types of activity

A greater percentage of males than females reported that they take part in activities at least once a week. Males are more likely to attend organised activities such as team sports and racket sports, females mostly participate in unorganised activities such as walking and jogging. The activities which most students said they did at least once a week were going for walks (59%), jogging (47%) riding a bike (44%) and swimming (35%). Reported participation in weekly activities decreases as students get older.

Barriers to physical activity

The greatest percentage of students (43%) reported (lack of) time as the main reason which prevented them from being as physically active as they would like. Feeling self conscious and feeling awkward were the next two most common reasons cited by students. There is a particularly large gender difference in the percentage of students who agreed that being self conscious in front of others stops them being as physically active as they would like. Nearly twice the percentage of 12-15 year old females agreed with this than males. After time the older secondary males cited that facilities not offering what they wanted as the next most selected reason that stopped them being as physically active as they like.

Percentage of 12-15 year olds who agree that the barriers listed stop them from being as physically active as they would like

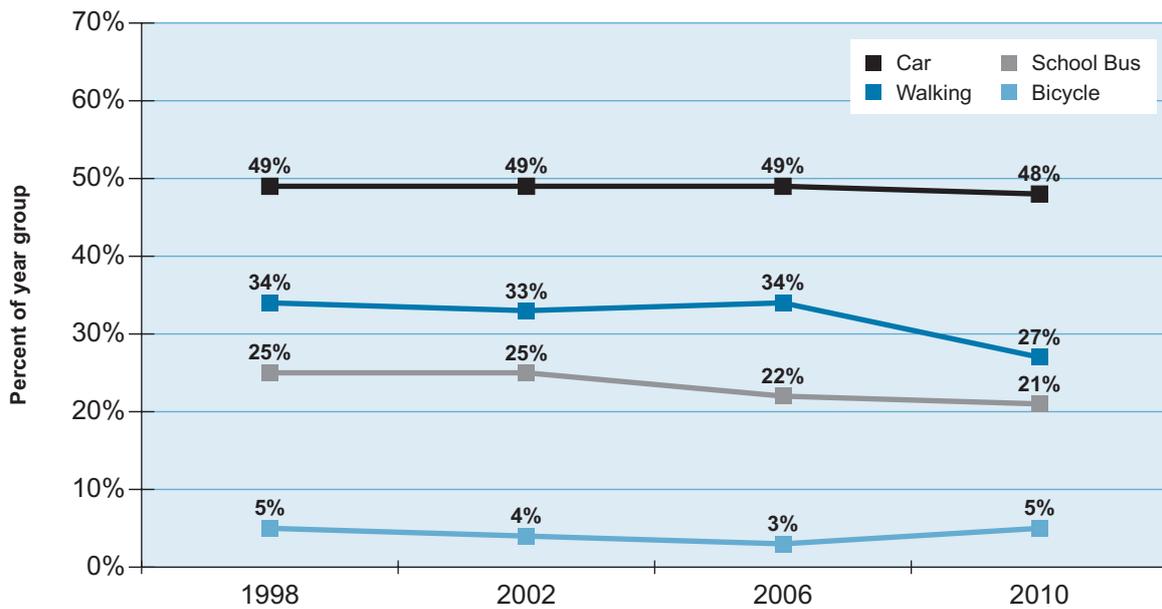


Physical Activity

Travel to school

Less young people in secondary school reported travelling to school by car than those in primary school (48% versus 66%) and more travel by the school bus (21% versus 3%). A greater percentage of females than males reported that they travel to school by car. After the car, walking is the most common mode of transport used by 12-15 year olds (27%). Only 5% of secondary students cycle to school and a much greater percentage of males than females reported cycling to school (9% versus 1%). Trends in the mode of transport used to travel to school have largely remained unchanged since 1998. The only change is a slight decrease in the percentage of young people reporting walking to school since the last survey in 2006 which has dropped from 34% to 27%.

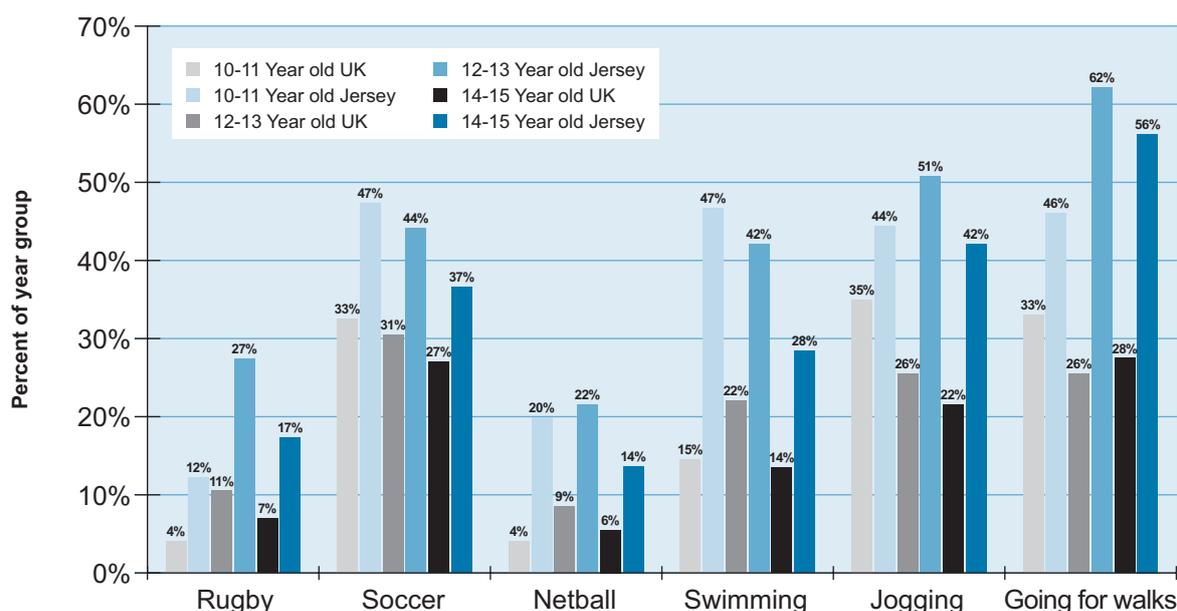
Modes of transport used by 12-15 year olds travelling to school 1998-2010



Comparisons with UK HRBQ

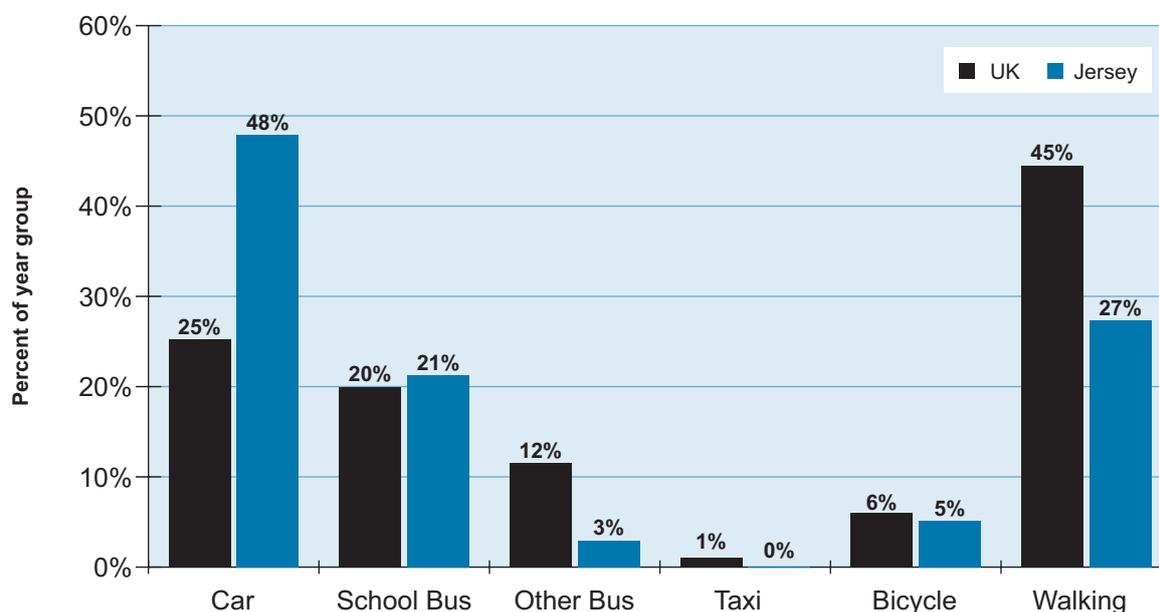
In general, a greater percentage of young people in Jersey reported participating in a range of physical activities on a weekly basis than their UK counterparts. More than twice the percentage of young people in Jersey said they go swimming at least weekly than young people in the UK. There is also a greater percentage of Jersey students who reported the following activities on a weekly basis; jogging, going for walks, football, netball, rugby, hockey, basketball, table tennis, badminton, dancing, riding a bike.

Percentage of young people in Jersey and the UK who participate in the activities listed once a week or more



In the UK a greater percentage of young people reported walking to school than in Jersey (45% versus 27%). Nearly twice the percentage of young people in Jersey travelled to school by car compared to the UK.

Modes of transport used by 12-15 year olds travelling to school in Jersey and the UK



Diet



Main Findings

- ❑ The majority of young people were aware of the '5-a-day' message but just over a quarter of young people actually reported eating 5-a-day.
- ❑ One in ten young people reported they do not have anything to eat before lessons start in the morning.
- ❑ Most young people claimed to eat a balanced diet, but many reported not eating healthy foods such as fish, wholemeal bread and high fibre cereals on most days.
- ❑ Over 60% of 10-15 year olds reported that they drink less than the recommended six cups of water per day.
- ❑ The percentage of young people eating crisps and sweets or chocolate on most days increased with age but this has reduced over the last 10 years. More older males ate these types of snacks than any other group.
- ❑ Jersey has a larger percentage of young people who said they ate vegetables on most days than in the UK across all age groups.



Why it is Important

Food is an important part of all children's health. Unhealthy diets at an early age can lead to future health problems, the most talked about and visible of which is obesity. As young people become older, they begin to make independent food choices. It is important that young people not only know what foods are healthy but they are encouraged to choose healthy foods, particularly when faced with the current food labelling initiatives and retail environment.

The Healthy Schools programme has made significant headway over the last four years. Seven primary schools have achieved National Healthy Schools Status since 2006 and a further 10 are currently working towards the award. As part of this programme schools are expected to develop a healthy food policy. In addition to Healthy Schools, the improvement of secondary school canteens across the island, along with the introduction of the Jersey School Food Standards has helped to ensure that healthy food is consistently on offer for young people. Food has never been so convenient and the wide availability of different food products means that young people have a great deal of choice.



Primary Schools

Breakfast

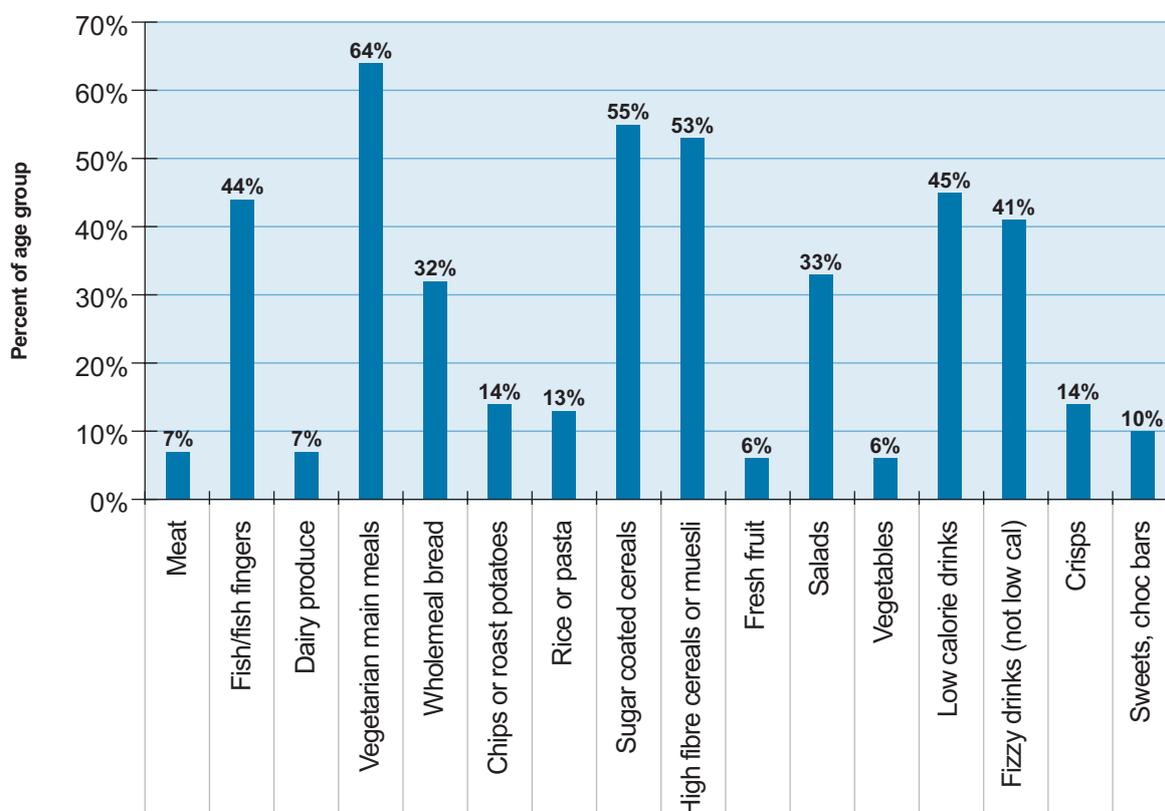
Nearly all 10-11 year olds reported that they ate or drank something before lessons on the day prior to the survey. Most pupils (88%) said they had their breakfast at home, while the remainder had it at school or on the way to school. Of those who ate breakfast, most had a drink, ate cereal, toast or fruit. A total of 6% of 10-11 year olds indicated that they did not have anything to eat or drink at all before school on the day of the survey.

Food Groups

Whilst vegetables, fresh fruit and dairy products were consumed by at least half of pupils on most days, less than a third ate wholemeal bread and only a sixth ate rice or pasta on most days. As with the findings from 2006, consumption of fish remained low and 44% did not eat this food at all in the seven days prior to the survey.

Around a fifth of pupils stated that they ate crisps and sweets or chocolate bars on most days. This means that these products are eaten by no more than 21% of pupils on most days. This has decreased since 2000 when over 50% of children ate crisps on most days and nearly 40% ate sweets or chocolate often. Very few pupils reported drinking fizzy drinks or 'diet' drinks on most days, up to 45% did not drink these types of drink at all in the seven days prior to the survey. This may be a reflection on the introduction of school food policies which prevents children from consuming these food items at school.

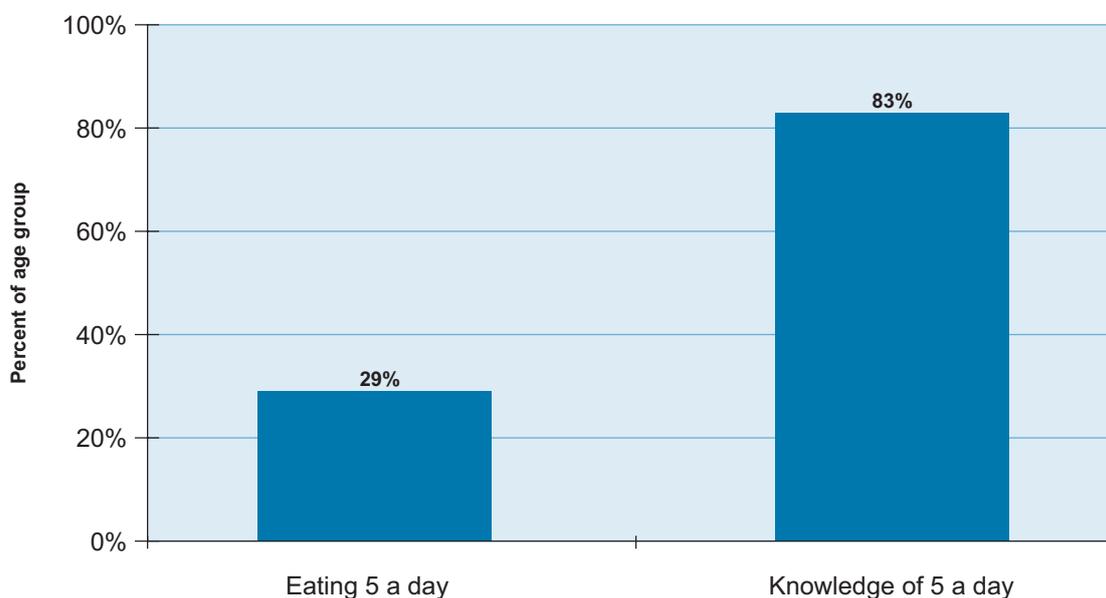
Percentage of 10-11 year olds who did not eat the listed foods in the 7 days prior to the survey



Fruit and vegetables

Around 60% of children indicated that they ate fresh fruit and vegetables on most days in the week prior to the survey. The proportion who said they eat these on most days has increased since 2000. Despite many children eating fruit and vegetables on most days, not as many are eating enough to meet the recommended '5 a day' guideline. More than 80% of 10-11 years olds were aware of the recommended number of portions of fruit and vegetables they need to eat a day to stay healthy. However, this knowledge does not always translate into behaviour. The majority ate less than the recommended amount and only just over a quarter (29%) ate at least five portions in the day prior to the survey.

Percentage of 10-11 year olds who eat 5 a day versus the percentage that know about the 5-a-day recommendation



Diet

Diet and Health

Over half of pupils stated that they consider their health at least often when choosing what to eat and one in ten always considered their health when making food choices.

Water

In the week prior to the survey around two thirds of pupils reported drinking less than the recommended six cups of water a day.

S Secondary Schools

Breakfast

On the day of the survey the majority of students had something to eat or drink in the morning before lessons began. Of those, most ate breakfast at home; the remainder had something at school or on the way to school. There was still nearly 15% of students who had nothing to eat or drink at all before school.

A drink, cereal, toast and fruit were the most common breakfast items consumed by students. In both year groups, twice the number of males than females ate sugar coated cereals on most days. Only one in twenty students had something unhealthy at breakfast comprising a crisp-type snack or chocolate bar/sweets in the morning before lessons.

Lunch

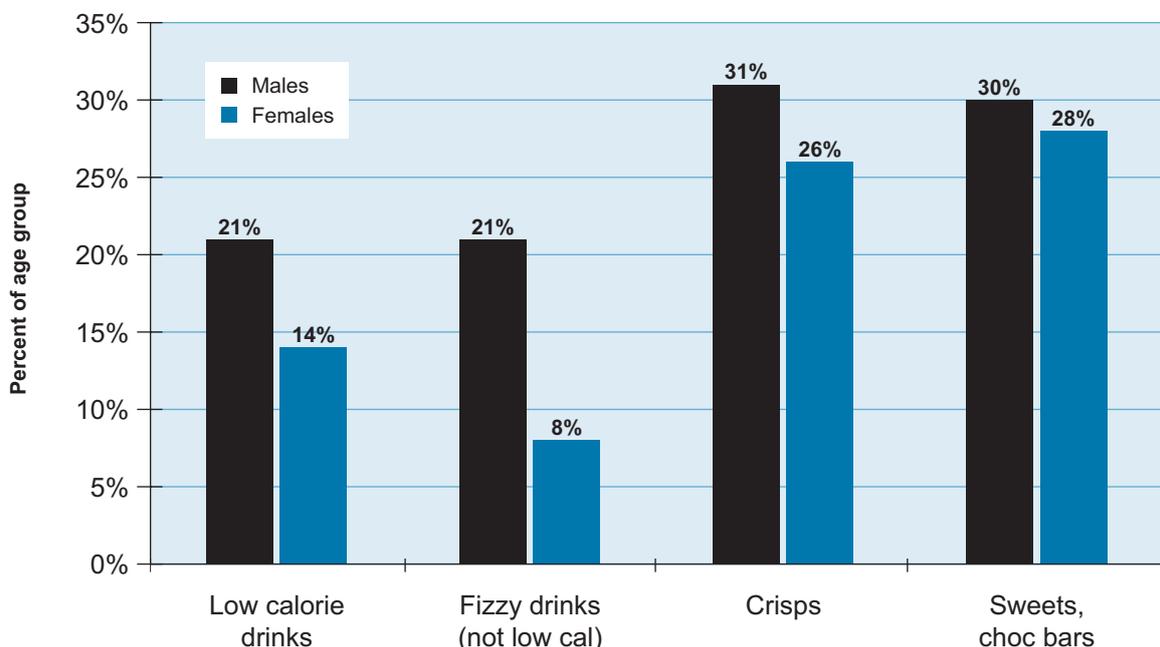
Most 12-15 year olds said they ate their lunch at school. Around three quarters ate a packed lunch and a fifth ate a canteen lunch, with more males than females eating a canteen lunch. A greater percentage of young people took a packed lunch than 10 years ago, 73% compared to 57% in 2000.

Diet

Looking at the key food groups from which students ate, many students ate meat and dairy products, fruit, and vegetables on most days. Few students had fish on most days and over a third did not have any fish in the seven days prior to the survey. Few students ate wholemeal bread, pasta or rice on most days. A higher proportion of females than males ate salads on most days in the week prior to the survey. In the ten year period since 2000, consumption of chips, roast potatoes and sugar coated cereals has decreased amongst 12-13 year olds.

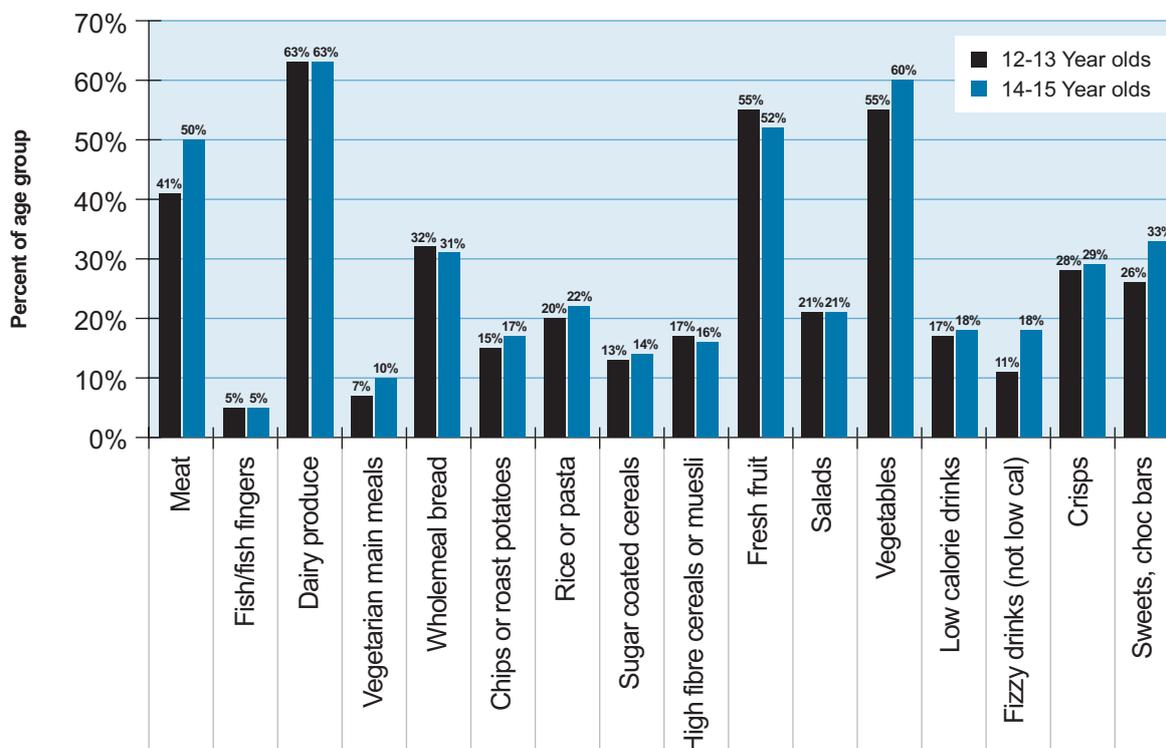
Over a quarter of students had crisps, sweets and chocolate on most days during the week prior to the survey. More than twice the number of males than females drank a fizzy drink on most days in the week prior to the survey. More 14-15 year old males than students in any other group consumed sweets, chocolate and a fizzy drink on most days during this week.

Percentage of 12-15 year olds who eat snacks on most days



In the ten year period since 2000 consumption of all drinks and snacks on most days has decreased across all age groups.

Percentage of young people who eat specified foods on most days



Water

In the week prior to the survey over half of secondary school students did not drink the recommended amount of water each day and one in ten drank no water at all. Over 40% of students drank at least the recommended amount of 6 cups of water a day.

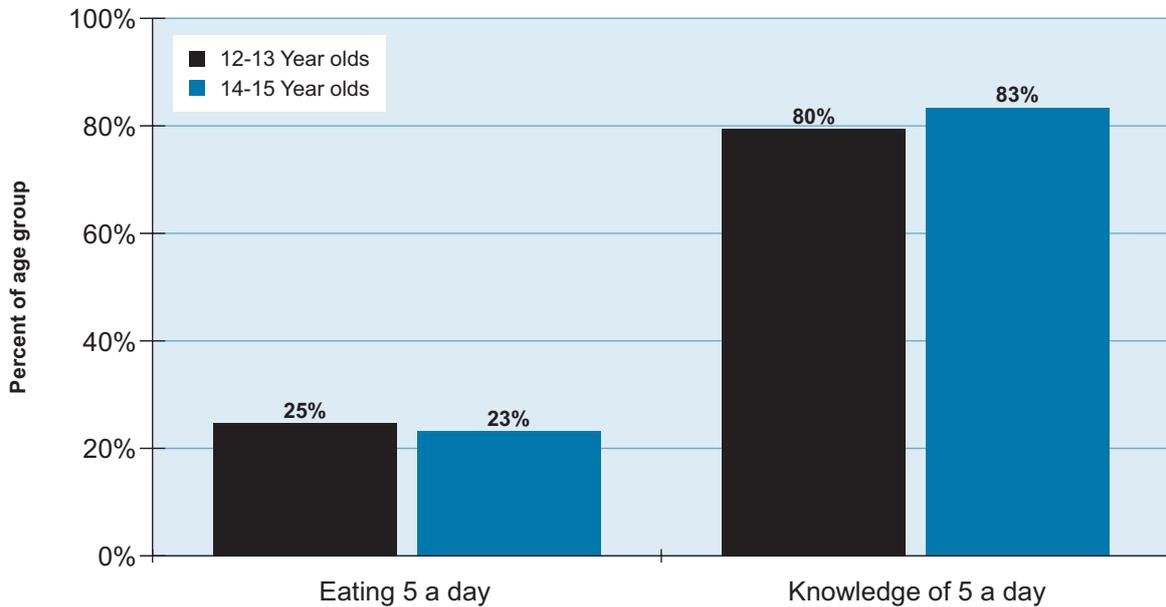
Fruit and Vegetables

Over 50% of secondary school students ate fresh fruit and vegetables on most days the week before the survey. More females consumed fresh fruit and vegetables on most days than males, 49% versus 58% ate fresh fruit and 53% versus 63% ate vegetables on most days.

The majority of students were aware of the current recommendations for daily intake of fruit and vegetables. However, during the day prior to the survey, just under a quarter of students ate at least five portions of fruit and vegetables and a third ate fewer than three portions.

Diet

Percentage of young people eating '5 a day' versus percentage knowing about 5 a day recommendation

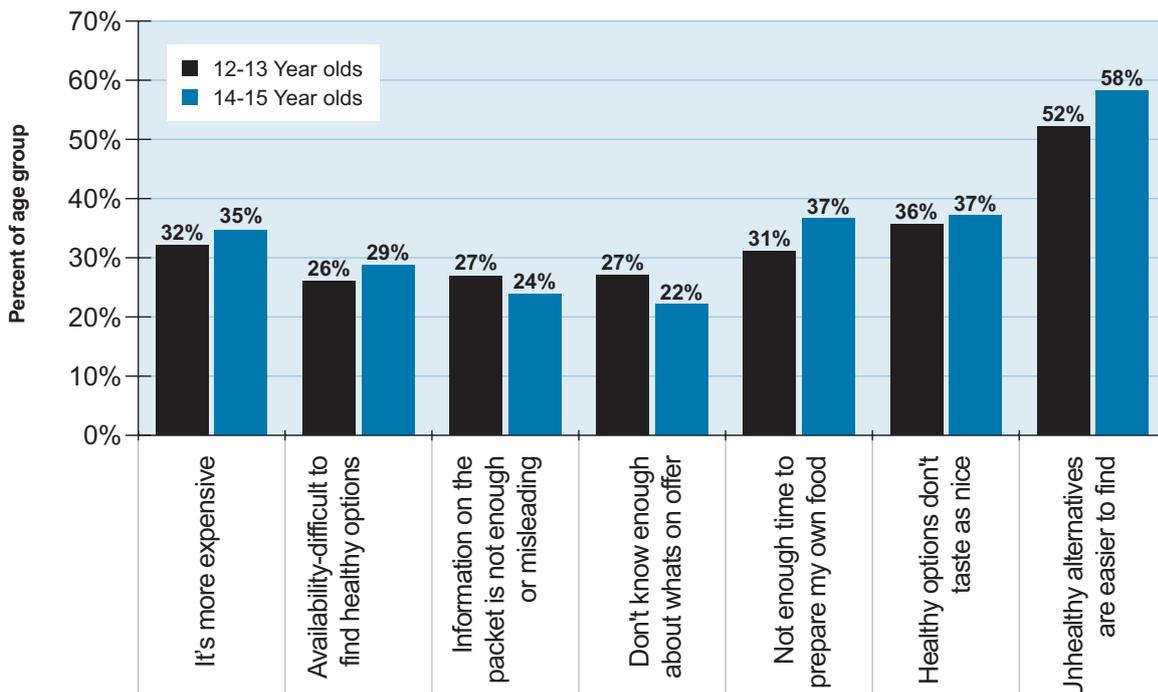


Health and diet

A total of 46% of students claimed to consider their health at least often when making food choices, with more females considering their health when making food choices than males. The percentage of young people who considered their health when choosing what to eat has decreased since the last survey in 2006.

Over half of secondary students agreed that it was difficult to make healthy food choices because unhealthy alternatives are easier to find. Over a third of young people agreed that healthy options don't taste as nice.

Percentage of young people who agree with the reasons why it is difficult to make healthy food choices?

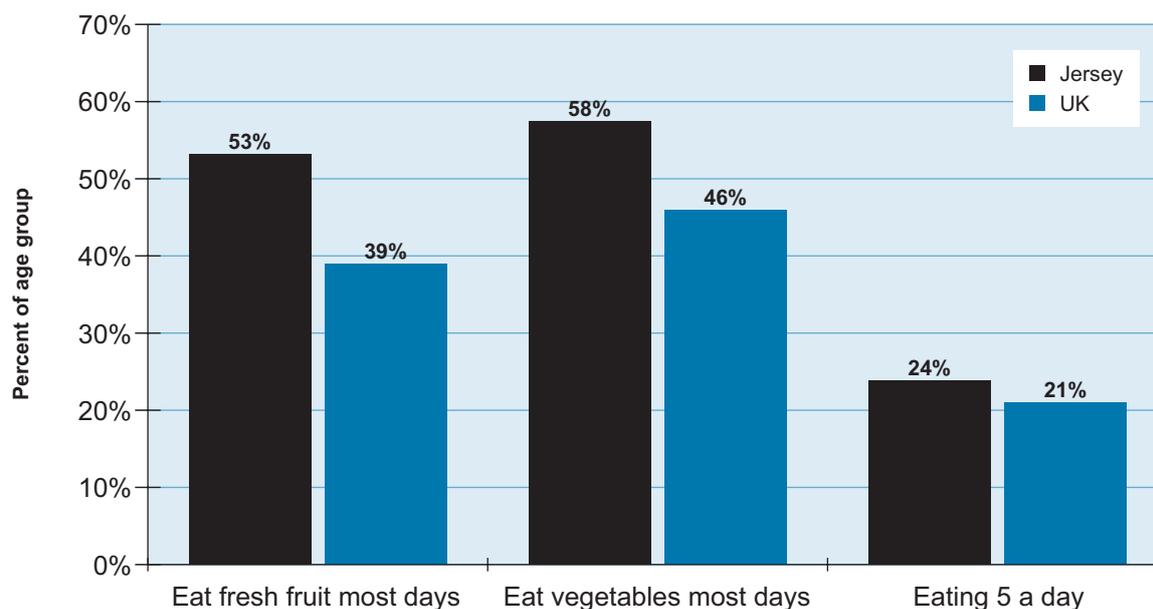


Comparisons with UK HRBQ

In the UK consumption of a litre or more of water a day does not increase with age as it does in Jersey so that by secondary school age there is a greater percentage of young people in Jersey who drank the recommended litre or more of water a day than in the UK.

Jersey has a larger percentage of secondary students who ate fresh fruit and vegetables on most days than the UK. However, the percentage of young people who said they ate five portions of fruit and vegetables a day in Jersey is similar to the UK.

Fruit and Vegetable Consumption of young people (12-15 years) in Jersey and the UK



More than twice the percentage of young people in the UK said they normally do not have any lunch compared to young people in Jersey. Young people in Jersey reported that they mostly eat a packed lunch whereas young people in the UK had lunch at a range of locations.

The evidence suggests that eating snacks starts at a later age in Jersey than in the UK. A greater percentage of 10-11 year olds in the UK eat snacks on most days than in Jersey but there is little difference in the percentage eating snacks on most days by 12-13 years.

Obesity



Main Findings

- ❑ The height and weight profiles for young people in Jersey are as expected (a normal distribution).
- ❑ Just over three quarters of 10-11 year olds were a normal weight for their height and age. Around a quarter were overweight or obese.
- ❑ The majority of 12-15 year olds (87%) were a normal weight for their height and age. More males were overweight or obese than females.
- ❑ The prevalence of overweight and obesity has decreased slightly for 12-15 year olds since 2006.
- ❑ As girls become older, the proportion who would like to lose weight increases.
- ❑ More females were unhappy with their weight than males and around one in six 12-15 year olds reported being bullied in the last month because of their size or weight.



Why it is Important

Being overweight or obese is a significant factor for poor health. Childhood obesity is a risk factor for the early development of a range of long-term adult conditions, in particular asthma and Type 2 diabetes. A child who is overweight or obese is more likely to experience health problems as well as low self-esteem and poor body image. Monitoring trends in overweight and obesity in children is key to understanding its prevalence and introducing strategies to reduce the prevalence of obesity is an important part of public health activity.

Calculation of Body Mass Index (BMI)

Body mass index (BMI) is a derived measurement calculated as the weight in kg divided by the square of the height in metres. This generally gives a figure between 10 and 40. In adults a BMI above 25 may indicate the adult is overweight and above 30, seriously overweight or obese.

For children the calculation is the same but the BMI levels indicating overweight or obesity vary according to the age and sex of the children. We have used a world wide definition from the International Obesity Taskforce in this report. This means we are unable to directly compare Jersey young people with the UK data from the same survey as they have used the national definition.

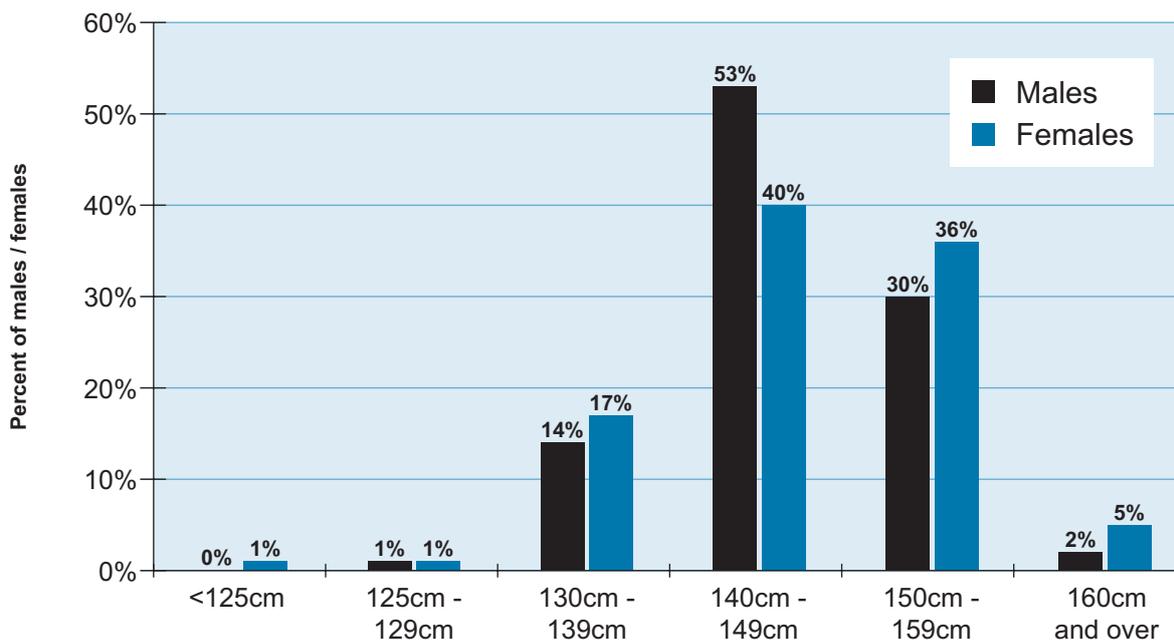
Therefore, the BMI values calculated in this report may be under estimated. The BMI data needs to be treated with some caution. Height and weight data is self reported and just over 60% of the young people who responded gave both valid height and weight data.

P Primary Schools

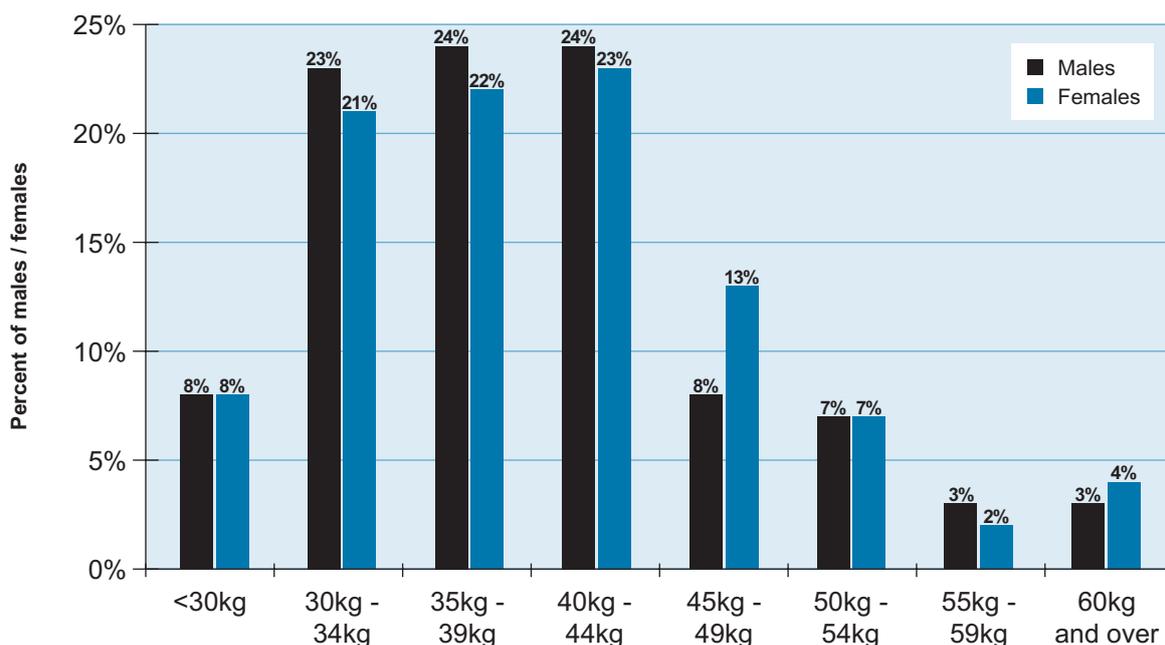
Height and weight distribution

The height and weight profiles of 10-11 year olds showed the expected normal distribution pattern. The majority of males in this age group were between 140-149 cm tall and 30-44 kg. The distribution of female height was greater. Most measured between 140-159 cm tall and weighed 30-44 kg.

Height profile of 10-11 year olds



Weight profile of 10-11 year olds

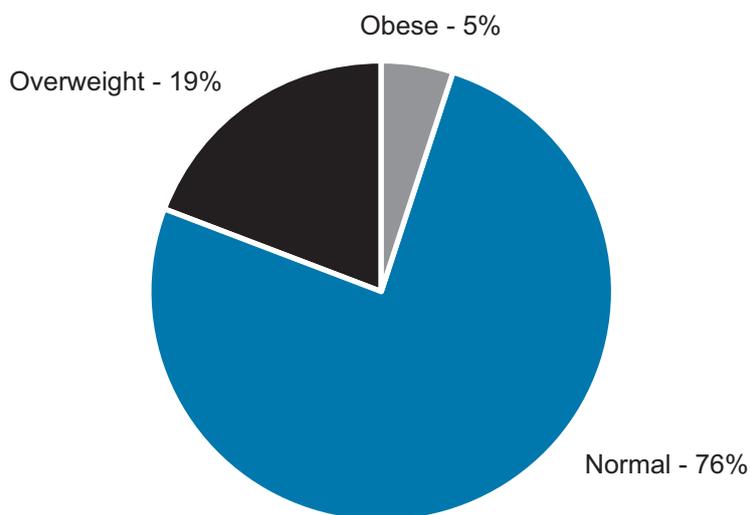


Obesity

Obesity

Just over three quarters of 10-11 year olds were a normal weight for their height and age. However, around one in five were overweight and 5% were obese. The percentage of 10-11 years olds who were overweight and obese had not changed since 2006 and percentages are similar for boys and girls.

Overweight and obesity in 10-11 year olds



These BMI values were calculated for 68% of Year 6 who provided a valid response for their height and weight.

Attitudes to personal weight

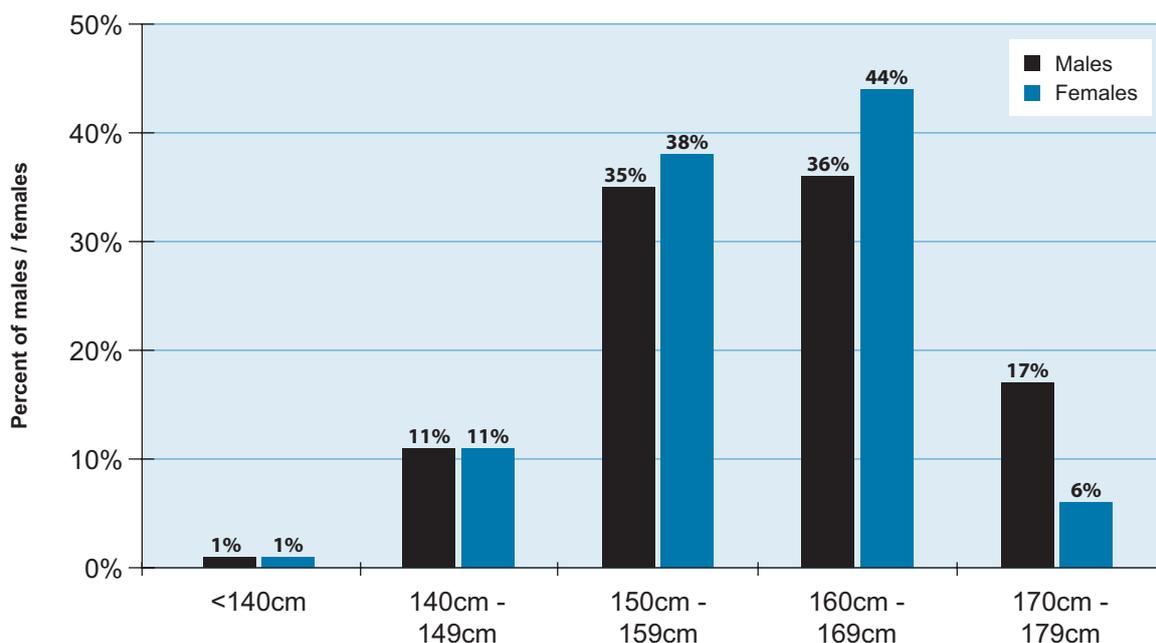
Over a third of 10-11 year olds indicated that would like to lose weight. Similar numbers of boys and girls would like to lose weight. Of females who were a normal weight, 29% would like to lose weight.

S Secondary Schools

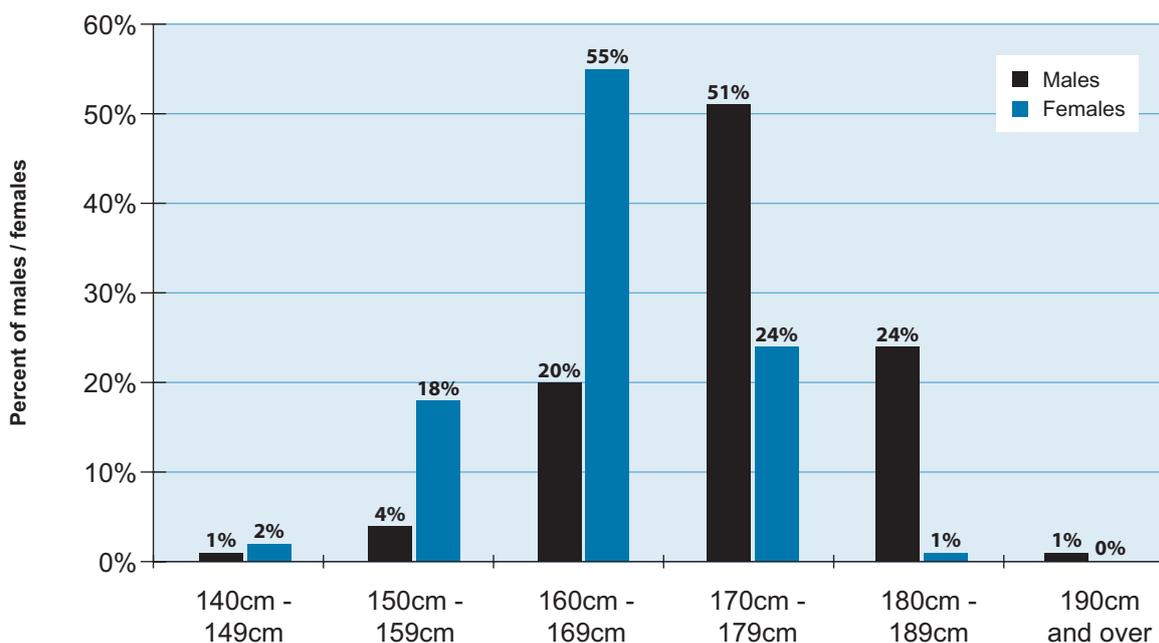
Height and weight distribution

The height and weight profiles for 12 to 15 year olds also show a normal distribution. Most 12-13 year olds measured between 150 and 169 cm and weighed 40-54kg and most 14-15 year olds were between 160 and 179 cm and 50-64kg.

Height profile for 12-13 year olds

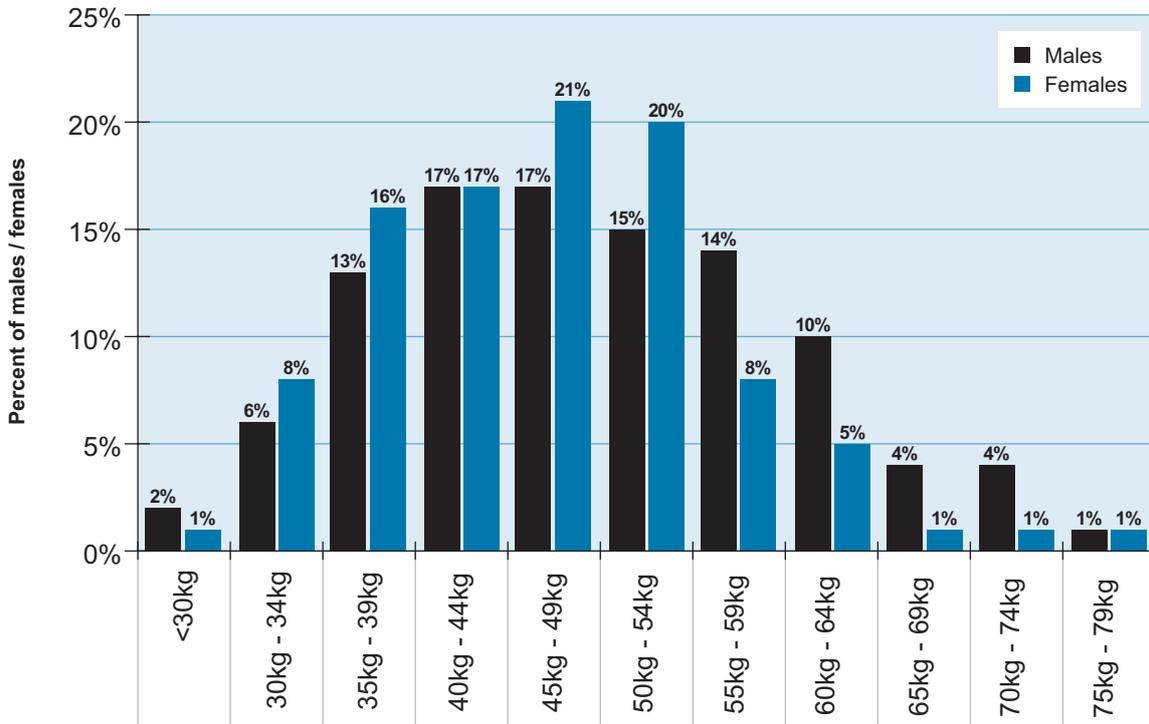


Height profile for 14-15 year olds

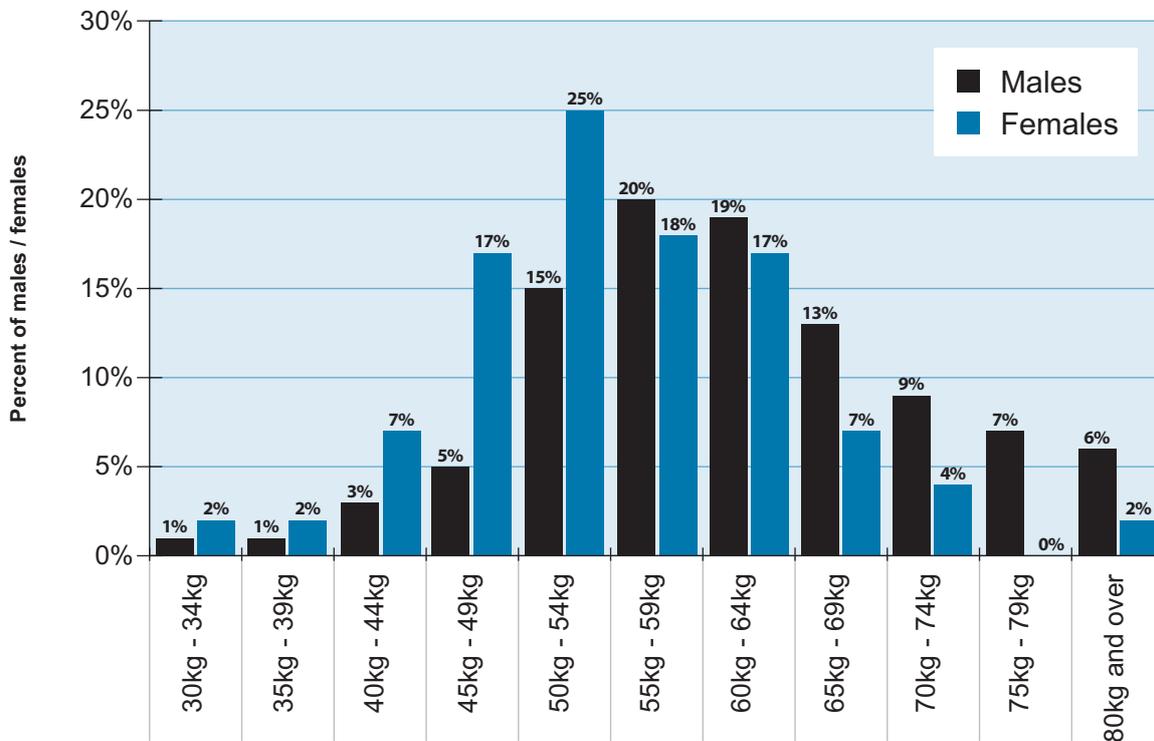


Obesity

Weight profile for 12-13 year olds



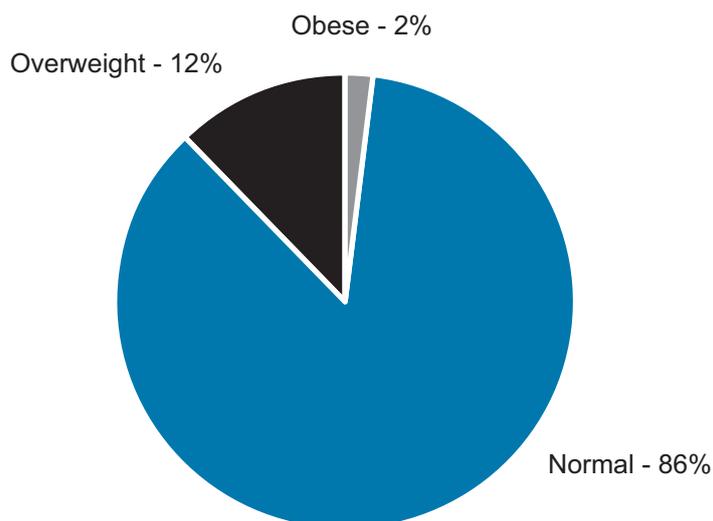
Weight profile for 14-15 year olds



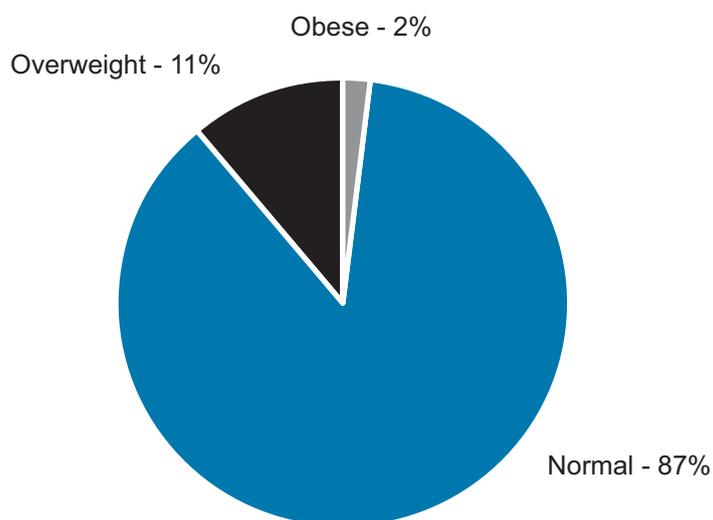
Obesity

The majority of students fell in to the healthy 'normal' weight category. However, for each age group just over one in ten could be classified as overweight or obese. In addition, a greater percentage of males aged 12-15 years could be classified as overweight and obese compared to females (17 versus 9%).

Overweight and obesity in 12-13 year olds



Overweight and obesity in 14-15 year olds



The percentage of students who were overweight and obese was shown to decrease and has also decreased slightly since 2006 when 19% of students were overweight and obese compared to 13% in 2010.

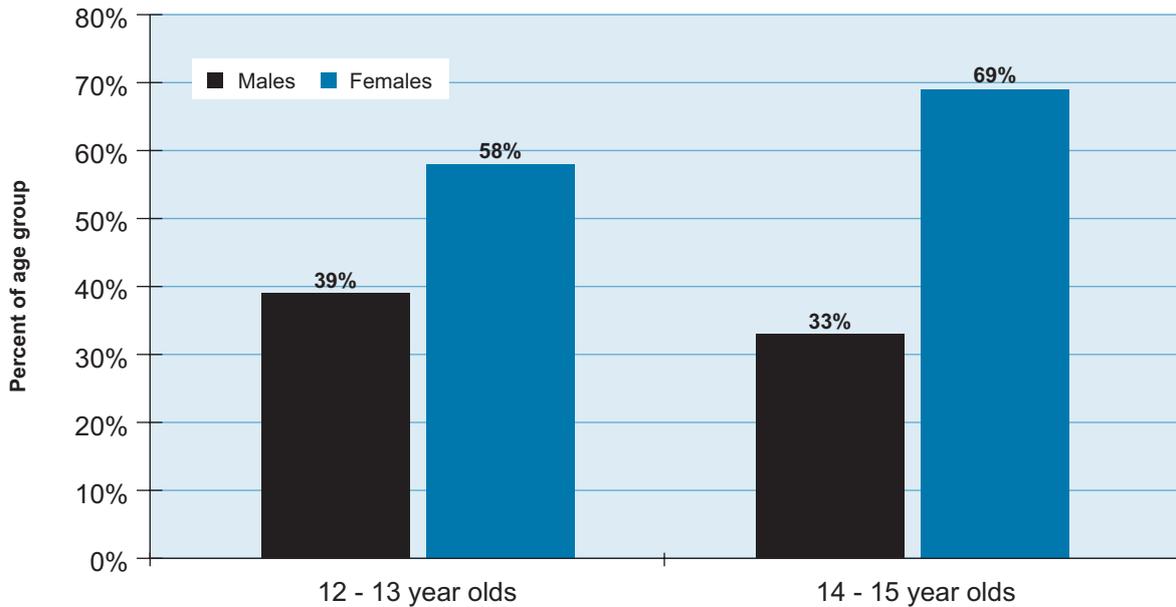
Note: Only half of students gave a valid response for height and weight which could be included in these BMI calculations.

Obesity

Attitude to weight

More than 50% of 14-15 males felt they were happy with their weight compared to under a third of females. The data shows that as females become older a greater percentage would like to lose weight. More than double the percentage of 14-15 year old females than males wanted to lose weight. Just over half of female students of a normal weight wanted to lose weight, compared to a quarter of males.

Percentage of young people in Jersey who would like to lose weight

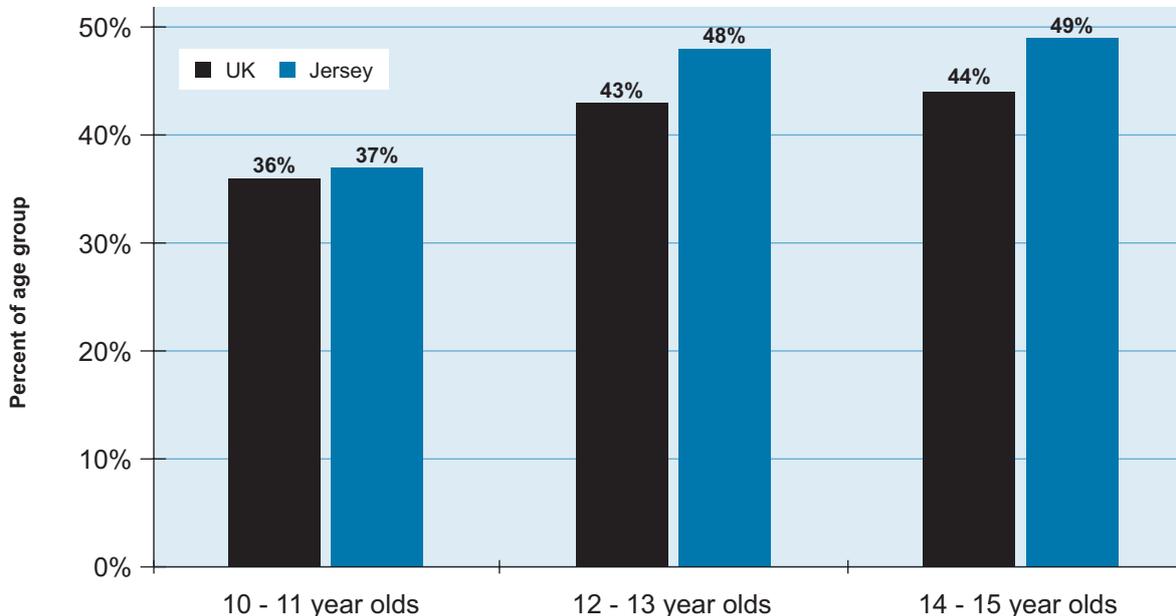


A total of 15% of students reported being bullied in the last month because of their size or weight. More males than females reported being bullied for this reason. In addition, 22% of 14-15 year olds indicated that they worry about the amount they are eating often or on most days. More than four times the proportion of females than males said they worried about this (39% versus 8%).

Comparisons with UK HRBQ

A slightly greater percentage of young people aged 12-15 years stated that they would like to lose weight compared to their UK peers.

Percentage of young people in Jersey and the UK who would like to lose weight



Notes

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Notes

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