



Young Persons' Behaviour and Attitudes Survey 2019

Mental Health & Wellbeing modules



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Mental Health & Wellbeing modules

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https://www.health-ni.gov.uk/articles/young-persons-behaviour-attitudes-survey

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Key Findings

Loneliness

- Around three-fifths of respondents (58%) reported hardly ever or never feeling lonely;
 36% reported feeling lonely occasionally or some of the time, whilst 6% reported feeling lonely often or always.
- Girls were more likely than boys to report feeling left out, alone, and having no-one to talk to.
- Feelings of loneliness increase as year group increases.

Mental Health concerns

- When asked whether they ever had concerns or worries about their mental health, 15% of respondents indicated they definitely have had concerns and a further 27% indicated to some extent. The corresponding findings from the previous survey in 2016 were 11% and 24%.
- Over half (57%) of those who had concerns did not seek help with them.
- The most common reason noted for not seeking help was that they felt they could handle things on their own.

Stirling Children's Wellbeing Scale (school years 8-12)

The Stirling Scale was developed to measure wellbeing in children; the higher an individual scores, the better their level of wellbeing.

- Girls have a lower mean wellbeing score than boys.
- Mean wellbeing score decreases as you go up the year groups.

Warwick Edinburgh Mental Wellbeing Scale (school years 10-12)

The Warwick-Edinburgh Scale assigns scores that indicate level of mental wellbeing; higher scores suggest better mental wellbeing.

- Girls have a lower mean wellbeing score than boys.
- Mean wellbeing score decreases as you go up the year groups.
- The mean score in 2019 is 23; this compares with a mean score of 24 in previous surveys in 2016 and 2013.

Social Support

The majority of respondents (95%) have family/friends who make them feel an
important part of their lives. Similarly high proportions were found across the social
support questions relating to having people to rely on, people to take care of them,
people who make them feel loved and people who provide support and
encouragement.

Social Media

- The majority of respondents (96%) used at least one social media site
 - Of these, 97% have their own profile
 - 85% use social media daily or most days
- Girls are more likely than boys to compare themselves to others on social media, to monitor the number of likes/comments/shares their posts get, and to feel that their mood is impacted by this.

Loneliness

YPBAS included four questions relating to feelings of loneliness, in line with the GSS harmonised standard.

The first three questions are from the University of California, Los Angeles (UCLA) three-item loneliness scale. The fourth question directly asks how often the respondent feels that they experience loneliness.

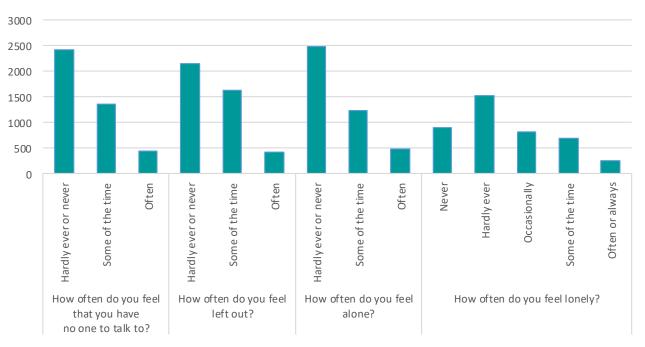
This approach allows both a direct measure to be obtained of the individual's feelings of loneliness as well as assessing other emotions/experiences that can indirectly point to loneliness.

58% of respondents reported hardly ever or never feeling lonely

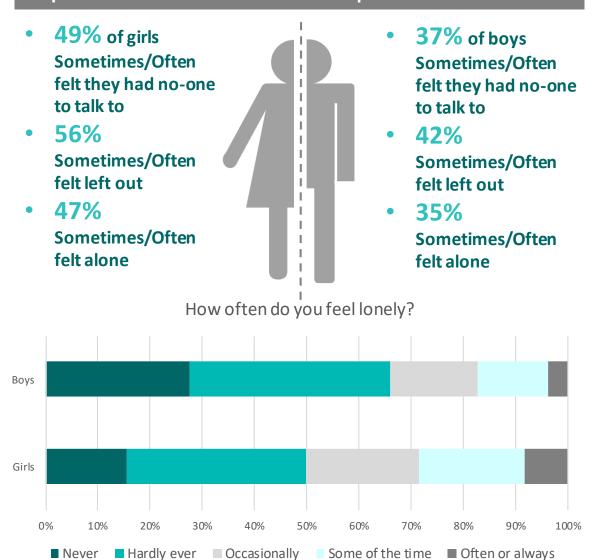
36% reported feeling lonely occasionally or some of the time

6% reported feeling lonely often or always

Number of respondents choosing each answer option in the four loneliness questions How often do you feel....



Girls were more likely than boys to give a more negative response to all four of the loneliness questions



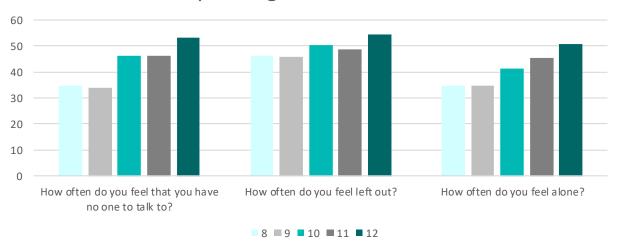
Feelings of loneliness increase as year group increases

Direct measure of loneliness

18% of respondents from Year 8 reported that they were Always, Often, or Sometimes Lonely. This figure gradually increases as you move up the year groups rising to 28% of Year 12 respondents.

UCLA loneliness questions

% responding Sometimes or Often



UCLA scale

The three UCLA questions can be combined, giving each respondent a score between 3 and 9.

| Response | Score |
|----------------------|-------|
| Hardly ever or never | 1 |
| Some of the time | 2 |
| Often | 3 |





The scores for each response to the first 3 loneliness questions are shown above. The greater the score the more it suggests feelings of loneliness.

Girls Mean score of 4.9

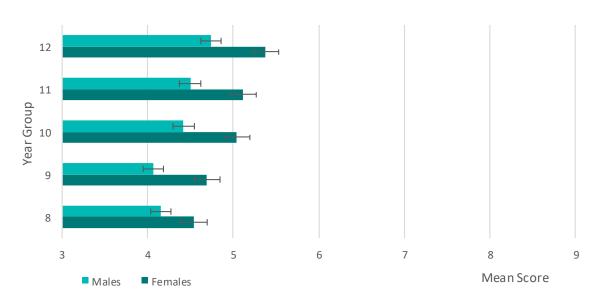
Year 8 Mean score of 4.3

Boys

Mean score of 4.4

Year 12 Mean score of 5.1

The mean Score for the 3 UCLA Loneliness questions gradually increases as you go up the year groups with respondents in Year 12 showing the highest levels of loneliness



Mental Health concerns

This section is looking at those respondents who report having had concerns about their mental health. When asked 'Have you ever had any concerns or worries about your mental health?', 15% indicated they definitely have had concerns and a further 27% indicated to some extent.

It should be noted that some of the follow-up questions regarding seeking help are only asked of those respondents who indicated they have had concerns.

47% of girls and 37% of boys were concerned about their mental health to at least some extent

Of those who had concerns about their mental health, **57%** did not seek any help. This was similar for both girls and boys

42% of respondents

were concerned about their mental health to at least some extent



Year 8 were the only year group that were more likely to ask for help with their mental health concerns than not, with 55% having sought help

Year 12 were the most likely year group to report at least some concerns about their mental health, with 56% stating this was the case

The most common reason given for not getting help was that they felt they could handle it on their own

Family members

were the people that respondents turned to for help with their mental health concerns

Stirling Children's Wellbeing Scale

The Stirling Children's Wellbeing Scale Score consists of 15 questions designed to assess the wellbeing of survey respondents aged between 8 and 15 years. In YPBAS it is asked of all respondents even though some may be just past the age of 15.

All 15 questions are worded positively, e.g. 'I think good things will happen in my life', and have 5 answer options each with a corresponding score, as shown to the right.

core Response

Never

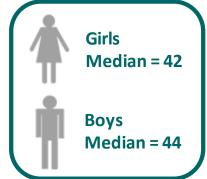
2 Not much of the time

3 Some of the time

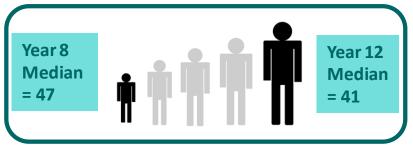
Quite a lot of the time

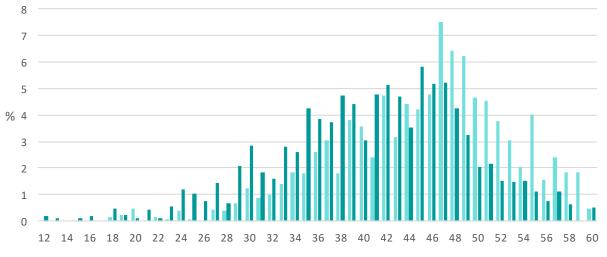
5 All of the time





Boys had higher average wellbeing scores than girls and those in Year 8 had higher average wellbeing scores than those in Year 12





Short Warwick Edinburgh Mental Wellbeing Scale

Only for years 10, 11 & 12 7 questions 5 answer options Scores range from 7 - 35Mean = 23

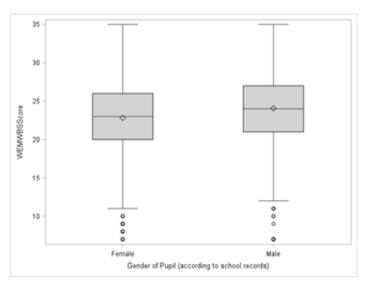
None of the time 1 **Rarely** 2 Some of the time 3 Often 4 All of the time

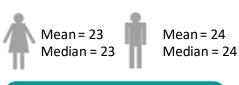
Response



Median = 24

Higher scores suggest higher wellbeing





Score



Mean = 23Median = 23

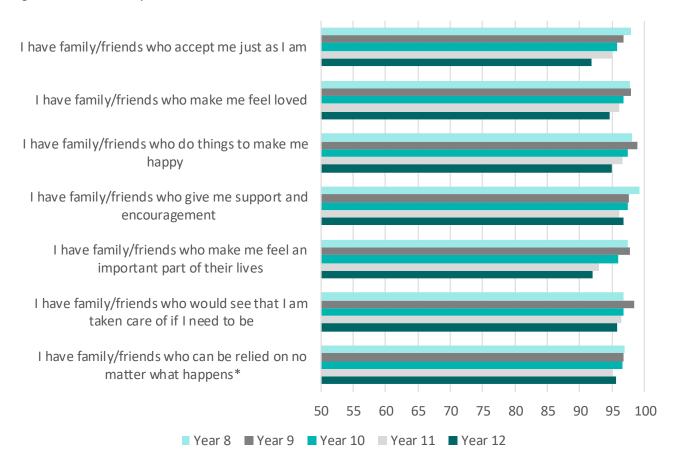


Support

Social support

The social support questions aim to assess the support network that the respondents have to fall back on if they need help or support. They look at whether there are people that make them fell loved and good about themselves, and if there are people that they can turn to or talk to if they need to.

On the whole responses to these questions were positive with only a small percentage indicating that they lacked certain aspects of support. There was little difference between the genders for most questions



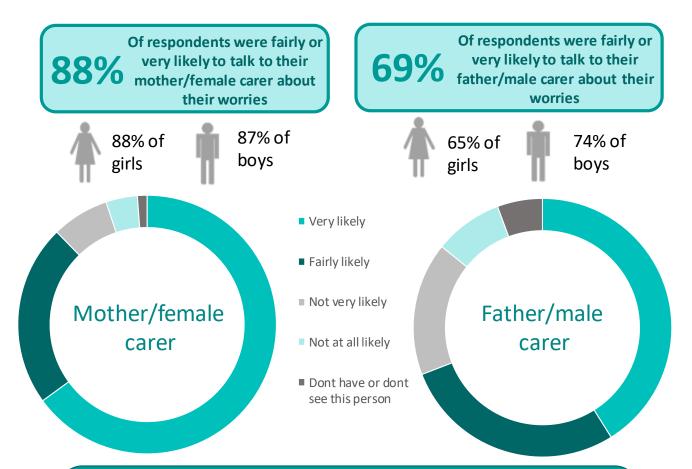
^{*} There was no significant difference across the year groups for this question

95% of respondents had friends or family that made them feel an important part of their lives.

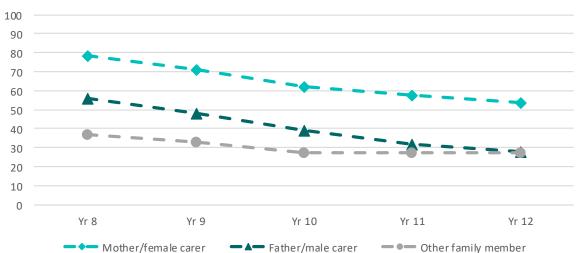
97% of respondents had friends or family who gave them support and encouragement

Family support

Respondents were asked how likely they would be to talk to their parents, or another member of their family if they were really worried about something.

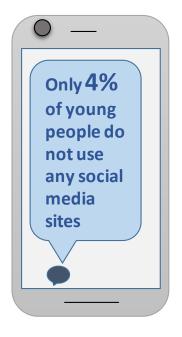


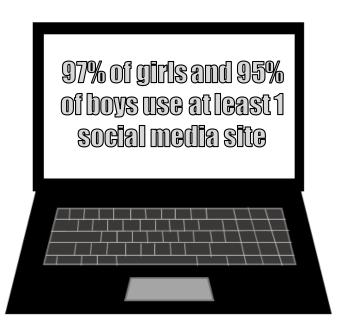
As year group increased there was a drop in the percentage of pupils that said they would be 'Very likely' to speak to their mother/female carer about something that was worrying them. A drop from 78% of Year 8's to 54% of Year 12's. The same pattern was found when asked if they would speak to their father/male carer, with the percentage dropping from 56% to 28% in this case.



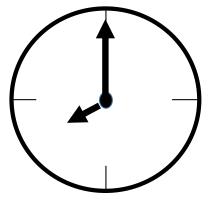
Social media

This module is concerned with assessing levels of social media use among young people, and how much this use impacts overall wellbeing. It includes questions on when social media sites are used, and for how long. It also looks at the importance that respondents place on receiving comments or likes on these sites. Social media sites such as Facebook, Instagram, SnapChat, Twitter and WhatsApp.





Of those young people who do use social media 85% use it daily or most days



- On a typical school day 53% of girls and
 45% of boys use social media for more
 than 2hrs
- 62% of boys and 72% of girls use social media for more than 2 hours on a typical weekend/school holiday day



44%

of girls feel that they **compare themselves** to others on social media

13%

of boys feel the same

40%

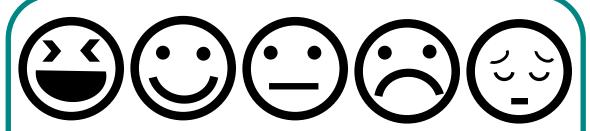
of young people monitor likes, comments and shares of their posts on social media



47% of girls



34% of boys



17% said that they thought that the number of likes, comments or shares they received impacted their mood 23% of girls and 12% of boys

Additional analysis

A logistic regression was undertaken to examine the factors associated with respondents' concerns or worries about their mental health. By controlling for various independent factors simultaneously, we could examine the association of each factor.

It should be noted that this analysis is limited to those demographic and health variables that are captured in the survey and is reflective of a single point in time.

- Respondents in Year 12 were about twice as likely to state that they definitely have mental health concerns compared with those in Year 8.
- Respondents scoring highly on the UCLA loneliness scale were 3 and a half times as likely to report having mental health concerns compared with those with a low score.
- Respondents with higher wellbeing scores on the Stirling Scale were less likely to report definite mental health concerns than those with lower wellbeing scores.
- When asked if their social media profile was a true reflection of themselves, those who agreed a lot with this statement were one and a half times as likely to report mental health concerns, compared with those who neither agreed nor disagreed.
- The same pattern was true for the question 'Do you compare yourself to others on Social Media'. Those who agreed a lot were about two and a half times as likely to report mental health concerns as those who neither agreed nor disagreed.

^{*} In this analysis, respondents with mental health concerns relates to respondents who indicated they definitely have had concerns or worries about their mental health.

- As the regularity of drinking increases so does the likelihood of reporting mental health concerns. Those who reported drinking occasionally were around 70% more likely to report mental health concerns compared with respondents who state they never drank. While respondents who reported drinking very regularly were around 3 times as likely to fall into this group.
- Respondents who reported having tried drugs at least once were around two and a half times as likely to report definitely having mental health concerns compared with those who had never tried drugs.
- Respondents who considered their body size to be much too thin were around four and a half times as likely to report mental health concerns compared with those who felt their body size was about right.
- The chance of Secondary School respondents reporting mental health concerns was found to be around a quarter lower than Grammar School respondents.

- In this analysis, respondents with mental health concerns relates to respondents who indicated they definitely have had concerns or worries about their mental health.
- Drinking alcohol very regularly refers to those who reported drinking daily or a few times a week.
- Drinking alcohol occasionally refers to those who reported drinking a few times a month or a few times a year.





Information Analysis Directorate (IAD) sits within the Department of Health (DoH) and carries out various statistical work and research on behalf of the department. It comprises four statistical areas: Hospital Information, Community Information, Public Health Information & Research and Project Support Analysis.

IAD is responsible for compiling, processing, analysing, interpreting and disseminating a wide range of statistics covering health and social care.

The statisticians within IAD are out-posted from the Northern Ireland Statistics & Research Agency (NISRA) and our statistics are produced in accordance with the principles and protocols set out in the UK Code of Practice for Official Statistics.

About Public Health Information and Research Branch

The role of Public Health Information and Research Branch (PHIRB) is to support public health policy development through managing the public health survey function while also providing analysis and monitoring data. The head of the branch is the Principal Statistician, Mr. Bill Stewart.

In support of the public health survey function, PHIRB is involved in the commissioning, managing and publishing of results from departmental funded surveys, such as the Health Survey Northern Ireland, All Ireland Drug Prevalence Survey, Young Persons Behaviour & Attitudes Survey, Patient Experience Surveys and the Adult Drinking Patterns Survey.

The branch also houses the NI Health and Social Care Inequalities Monitoring System which covers a range of different health inequality/equality based projects conducted for both the region as well as for more localised area levels. In addition, PHIRB is responsible for the production of official life expectancy estimates for NI, and areas within the region.

PHIRB provides support to a range of key DoH NI strategies including Making Life Better, a 10 year cross-departmental public health strategic framework as well as a range of other departmental strategies such as those dealing with suicide, sexual health, breastfeeding, tobacco control and obesity prevention. It also has a key role in supporting the Departmental Alcohol and Drug Strategy, by maintaining and developing key departmental databases such as, the Substance Misuse Database, Impact Measurement Tool and the Census of Drug & Alcohol Treatment Services, which are all used to monitor drug misuse and treatments across Northern Ireland. In addition to Departmental functions, PHIRB also support the executive level Programme for Government and its strategic outcomes through a series of performance indicators.