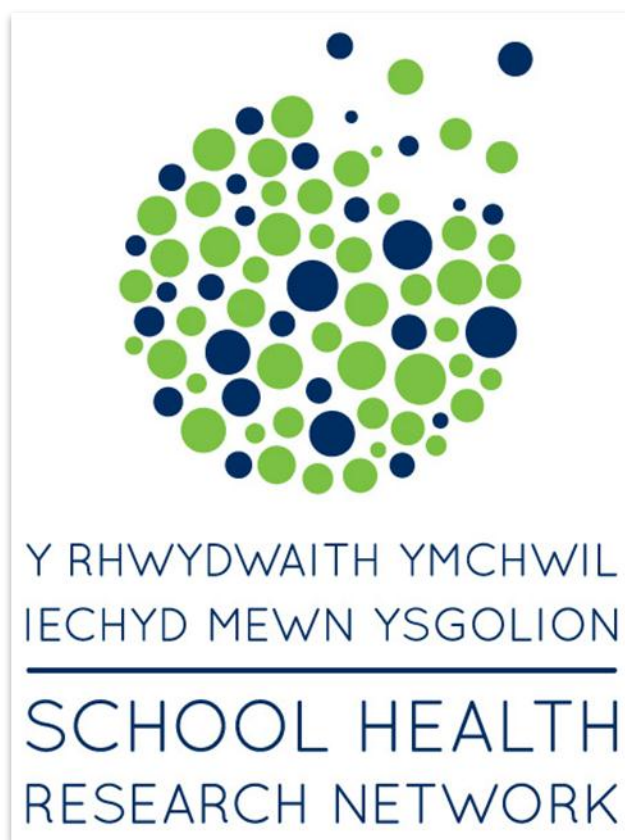


Archbishop McGrath Catholic High School

Students' Health and Wellbeing



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Your School's Annual Feedback Report

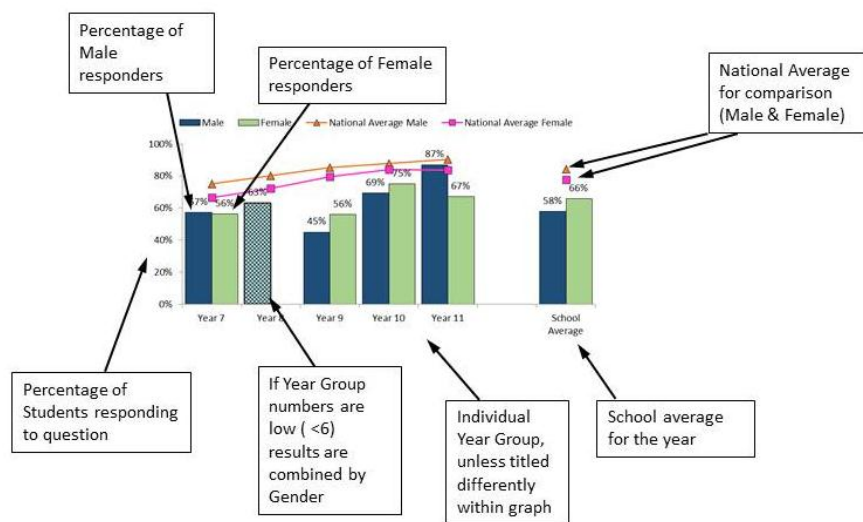
As a member of the School Health Research Network in Wales, we are delighted to provide you with this tailored report of student health and wellbeing at Archbishop McGrath Catholic High School in 2013-2014. The report is based on your students' responses to the Health Behaviour in school-aged Children (HBSC) survey. The survey asked students about a range of health behaviours and outcomes as well as their age, gender and how they feel about school.

This report uses the survey to report on the following health topics:

- Food, fitness and physical activity
- Mental health and emotional wellbeing
- Smoking and alcohol use

Its format has been inspired by the reports developed by staff at the University of Waterloo, Canada for the School Health Action, Planning and Evaluation System (SHAPES). It is intended that the report will help identify health issues relevant to young people in your school. Some ideas of what your school might want to do with the information contained in this report are incorporated into each section.

This report is confidential and we only provide a copy to the headteacher at your school. However, you are strongly encouraged to share this information with all your students, staff, parents and governors. You might like to share this report with your local Healthy Schools team as they can provide valuable help.



Reading the graphs

Data is shown for your school in bar charts, usually by age and gender with national averages for girls and boys shown as lines, for comparison. Differences can be accounted for by different school contexts across Wales. If a particularly low number of respondents is represented in a chart, the table on the next page indicates where this occurs. **Please note that not all students will have answered all the questions in the survey.**

For any queries relating to this report please contact Joan Roberts, Manager for the School Health Research Network on 029 2087 0099 or SHRN@cardiff.ac.uk

Interpreting your health data – caution!

Total no. boys responding	65
Total no. girls responding	65
School total	130

Who completed the questionnaire at Archbishop McGrath Catholic High School

The table below highlights in red any groups where the number of students represented within a 'bar' is less than 6. Where this is the case it is important to treat these data with caution.

School	Archbishop McGrath Catholic School	Year Group										Key		< 6	
		Year 7		Year 8		Year 9		Year 10		Year 11					
		M	F	M	F	M	F	M	F	M	F	M	F	M	F
Fig. 1	Breakfast weekdays														
Fig. 2	Fruit & Vegetables														
Fig. 3	Energy drinks														
Fig. 4	Sugary soft drinks														
Fig. 6	Active travel to and from school														
Fig. 7	Screen Time														
Fig. 8	Exercise 4+ days a week														
Fig. 9	Life satisfaction														
Fig. 10	Teacher cares														
Fig. 11	Ideas treated seriously														
Fig. 12	Pressured by schoolwork														
Fig. 13	Can count on friends														
Fig. 14	Bullying others														
Fig. 15	Bullied past month														
Fig. 16	Cyberbullied by messages														
Fig. 17	Go to bed schooldays														
Fig. 18	Been able to pay attention														
Fig. 21	Current smoking														
Fig. 23	Used ecigs														
Fig. 5	General physical activity	1 day		2 days		3 days		4 days		5 days		6 days		7 days	
Fig. 19	Body image	Too thin		Bit thin		About right		Bit fat		Too fat					
Fig. 20	Age when smoked first time	11 years or younger		12 years		13 years		14 years		15 years		16 years or older			
Fig. 22	Where cigarettes are obtained	Supermarket		Newsagent/Other Shop		Friends		Someone Else		Family		Other			
Fig. 24	Age drank alcohol first time	11 years or younger		12 years		13 years		14 years		15 years		16 years or older			
Fig. 25	Alcohol consumption on typical day	Less than one		1 drink		2 drinks		3 drinks		4 drinks		5 or more			
Fig. 26	Age when first got drunk	11 years or younger		12 years		13 years		14 years		15 years		16 years or older			

Model for School Health

There are many influences on the health and wellbeing of young people such as government policies, media influences, their friends, families and where they live and go to school. However, schools are uniquely positioned to influence the health and wellbeing of young people in a positive way, including through partnerships with families and the local community. The Welsh Government's Welsh Network of Healthy School Schemes recognises both the wide range of factors influencing health and also the multiple options for addressing these. These are described in the table below.

<i>Attention to each of these aspects will ensure a greater influence on the health and wellbeing of all members of the school community</i>	
Leadership & Communication	Health related policies Training for staff Involvement in local/national initiatives
Curriculum	Schemes of work across the curriculum Resourcing of curriculum Out of school hours provision
Ethos and Environment	Student participation Staff participation School environment, ethos and informal curriculum
Family & Community Involvement	Involvement of parents and families Involvement of local community Collaboration with appropriate statutory and voluntary external agencies

It is envisaged that the data presented in this feedback report and the actions that the school chooses to put in place in response to them, could support the following school priorities:

- Welsh Network of Healthy School Schemes National Quality Award¹
- Self-evaluation of wellbeing²
- The United Nations Convention on the Rights of the Child (UNCRC)³
- Reducing the impact of poverty⁴
- National Literacy and Numeracy framework⁵
- The Schools Challenge Cymru programme

There is general guidance at the back of this report (page 34) on how all members of the school community can contribute to improving student health. There are also specific suggestions for food and fitness (page 15), mental and emotional health and wellbeing (page 24), and smoking and alcohol (page 32).

Food and Fitness

The association between healthy eating and physical activity should be stressed wherever possible as an important aspect of a healthy lifestyle and to support healthy body weight.

Why is healthy eating an important agenda in schools?

What children eat and drink before and during school will affect their behaviour and attainment at school. Being overweight or obese during childhood and youth is also associated with a wide range of serious health conditions including type-2 diabetes and depression⁶. It is also now commonly associated with adverse emotional health outcomes such as lower self-esteem⁷.

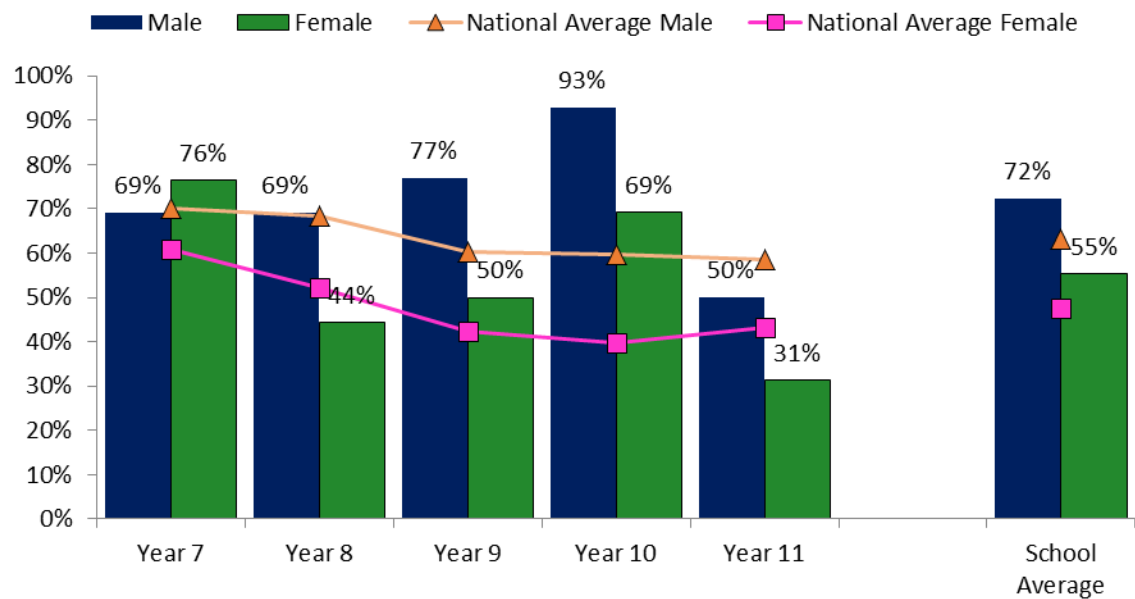
Young people's eating habits stay with them into adult life, so establishing healthy habits in childhood and adolescence could have long term benefits. Studies in the UK and elsewhere have measured young people's diets and then followed them for up to 24 years, finding that dietary habits 'track' into adulthood^{8,9}. Research from America has also found that eating breakfast 'tracks' in the same way¹⁰.

Well-nourished students are better prepared to learn. Young people's diets are linked to their academic performance in a number of ways. For example, their ability to concentrate, classroom behaviour and the impact of specific nutrients on brain functioning. It is not only the quality and quantity of foods eaten, but also the patterning of meals through the day, for example eating breakfast, that are important.

The number of actions secondary schools put in place to promote healthy eating is positively associated with the number of healthy food choices made by students. In a previous HBSC survey in Wales, schools gave detailed information on how they encouraged healthy eating. This included education, policies, healthy eating schemes (e.g. breakfast clubs), food provision and their food environment (e.g. the canteen). Compared to students in schools with least actions in place, students in schools with most actions were more likely to eat fruit and less likely to eat sweets at lunch and more likely to eat fruits and vegetables daily¹¹.

Breakfasts

Fig. 1 Archbishop McGrath Catholic High School: Students responding “Yes” to “Do you eat breakfast every weekday”

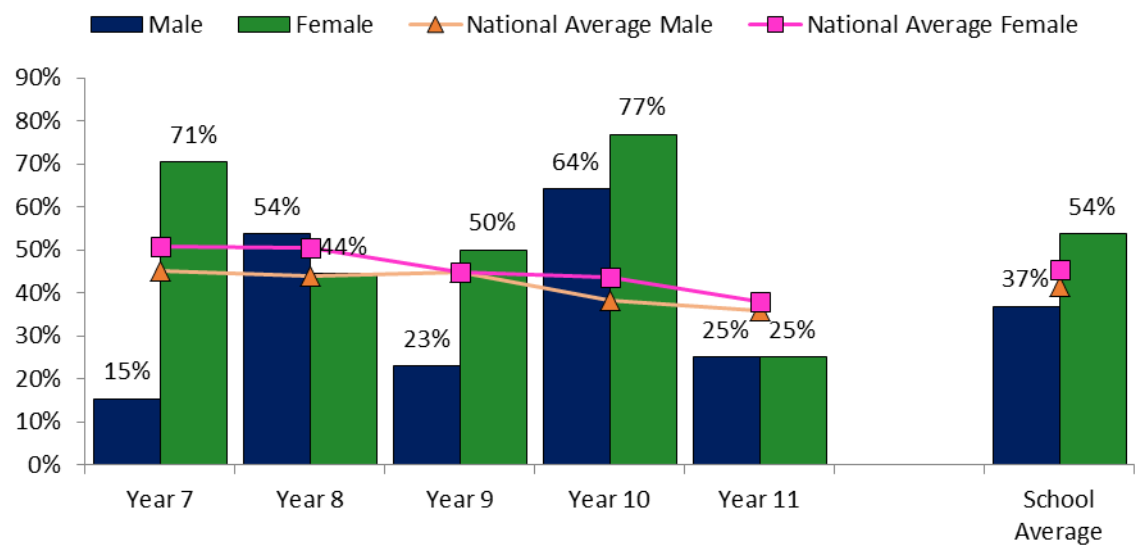


Did you know?

Breakfast provided to pupils of maintained schools should contain the following foods only: milk-based drinks or yoghurts; cereals – not sugar/chocolate/cocoa powder coated or flavoured; fruit and breads.

Fruit and vegetables

Fig.2 Archbishop McGrath Catholic High School: Students who usually eat one or more portions of fruit and vegetables a day



Guidance from the World Health Organization is to eat a **minimum of 5 portions of fruit or vegetables a day** as this lowers the risk of serious health problems. Suggestions to encourage this at:

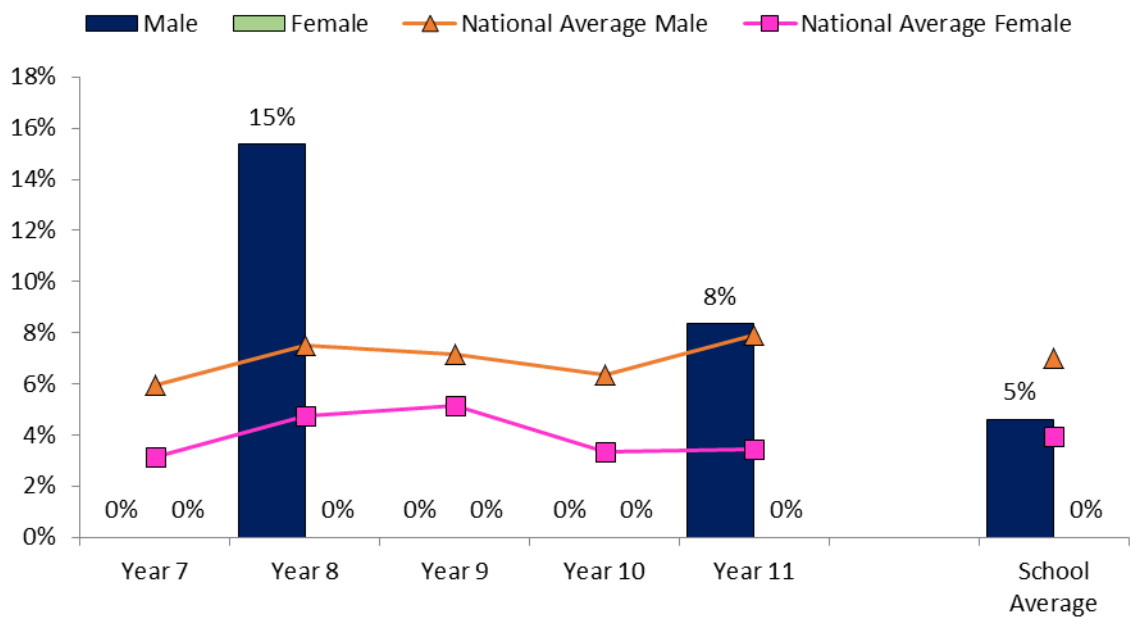
<http://change4lifewales.org.uk/families/5day>

Did you know?

Recent UK research has found that older adolescents' consumption of fruits and vegetables is strongly related to how much they perceive their school friends eat. They substantially underestimate how much fruit and vegetables their peers eat¹².

Energy drinks

Fig.3 Archbishop McGrath Catholic High School: Students who drink one or more energy drinks a day

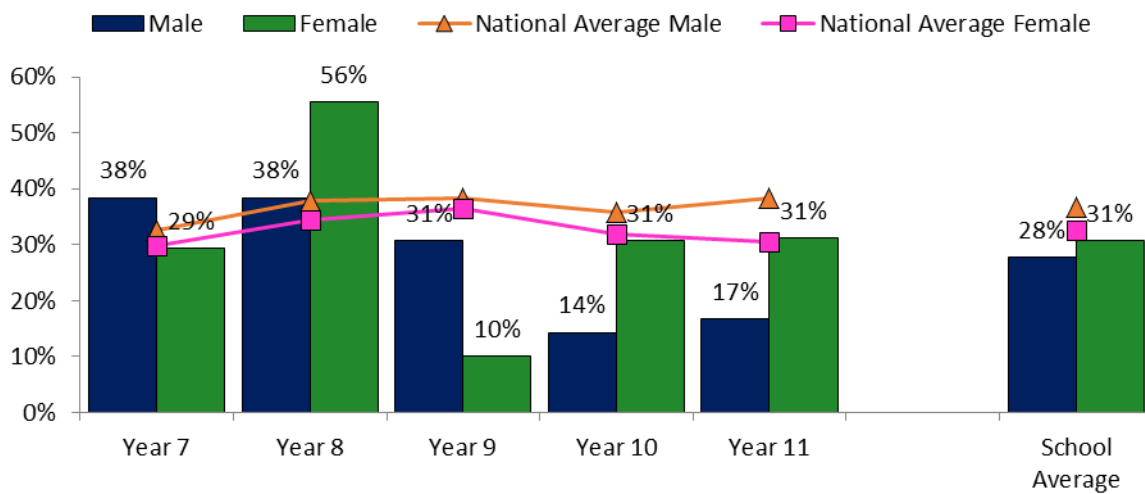


Did you know?

*Sales of **energy drinks** have doubled in the UK in the last six years. Energy drinks contain high levels of caffeine and contain many ingredients with poorly understood effects on the human body. The combined use of energy drinks and alcohol is increasing and there are concerns that energy drinks may be a 'gateway' to use of other harmful substances¹³.*

Sugary soft drinks

Fig.4 Archbishop McGrath Catholic High School: Students who drink sugary soft drinks once a day or more



Did you know?

A snack of a 500 ml bottle of a sugary soft drink and a chocolate bar provides over 20 teaspoons of sugar; the World Health Organization recommends that young people should eat less than 6 teaspoons a day.

Your school can make a difference...

Secondary schools in England made changes to the foods they offered, how they offered them, and their dining environments. After 15 weeks, independent observers found that year 7 and 9 students showed significantly more 'on task' behaviour in the classroom¹⁴.

Quick Facts

Research in America has found that adolescents who perceive themselves to be overweight are more than twice as likely to be overweight or obese six years later than their peers who perceive themselves to be an average weight. This was the case even if they were actually a healthy weight at baseline¹⁵.

The Healthy Eating and Drinking in Schools Measure 2009¹⁶ embeds “Appetite for Life” guidance into law in Wales. This came into force in September 2013 for all maintained schools. It sets out the strategic direction and actions required to improve the nutritional standards of food and drink served and sold in schools across Wales. There is a duty on the governing bodies of maintained schools in Wales to include in their annual reports information on actions to promote healthy eating and drinking.



Estyn now report on the arrangements made in schools to promote healthy eating and drinking¹⁷. Simple guidance on a healthy diet for school students should be based on the Eatwell Plate¹⁸. This emphasises the importance of eating five portions of fruit and vegetables a day, plenty of starchy foods (wholegrain where possible), some protein such as meat, fish and pulses, some dairy foods and just a small amount of foods that are high in fat, sugar and salt.

Fitness/Physical Activity

Why is physical activity an important agenda in schools?

International standard guidelines on physical activity recommend that all young people undertake moderate to vigorous physical activity for at least 60 minutes every day.

Whatever your age, being physically active has substantial benefits for health. The World Health Organization estimates that each year over 3 million deaths worldwide are attributable to being inactive. But it's not just physical health. Being active also has benefits for mental health: sports participation, for example, has been linked to self-esteem in young people¹⁹.

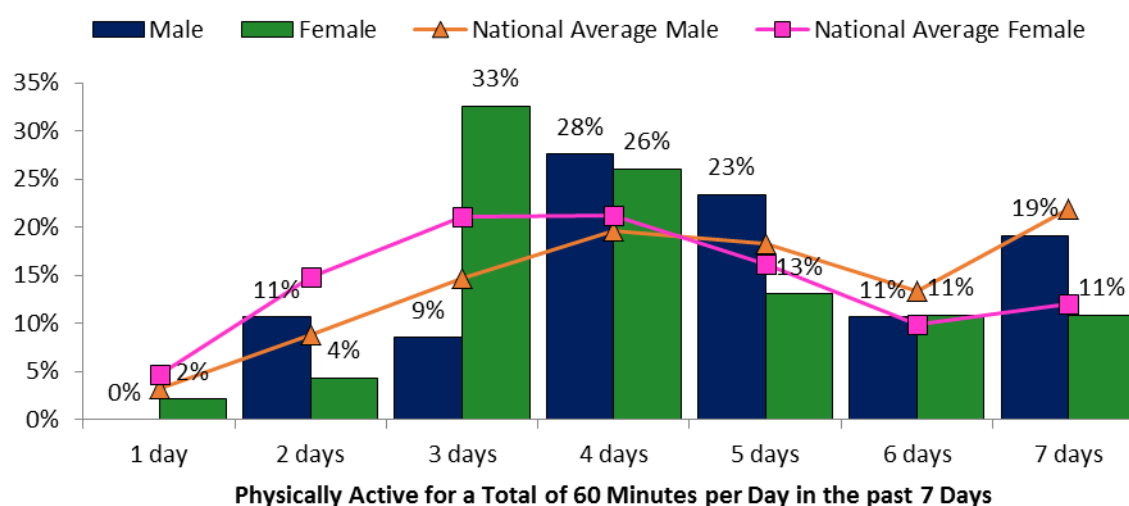
Being more active is associated with better academic attainment. Over 4,500 children in Bristol had their moderate to vigorous physical activity levels measured at age 11 and their academic attainment recorded at ages 11, 13 and 16 (GCSE grades). Higher levels of physical activity at age 11 were associated with higher subsequent attainment and this was true for English, Maths and Science, regardless of other factors²⁰.

Physical activity levels tend to decline during adolescence. Recent research in Norfolk has found that between the ages of 9 and 14, children replaced over 40 minutes of physical activity a day with sedentary time. The greatest declines were seen in boys, in activity that occurred at the weekend and in children living in rural areas²¹.

School-based physical activity programmes can help young people be active. Multi-component programmes (i.e. those that include education, the curriculum and the school environment) show most promise and family involvement in the programme also appears to be important, more so for adolescents than for younger children. Research shows, however, that programmes with a PE component that targets boys and girls together, tend to favour the boys, whereas girls benefit when the PE component targets them separately²².

General physical activity

Fig.5 Archbishop McGrath Catholic High School: Number of days in the week before the survey students were physically active for more than 60 minutes.

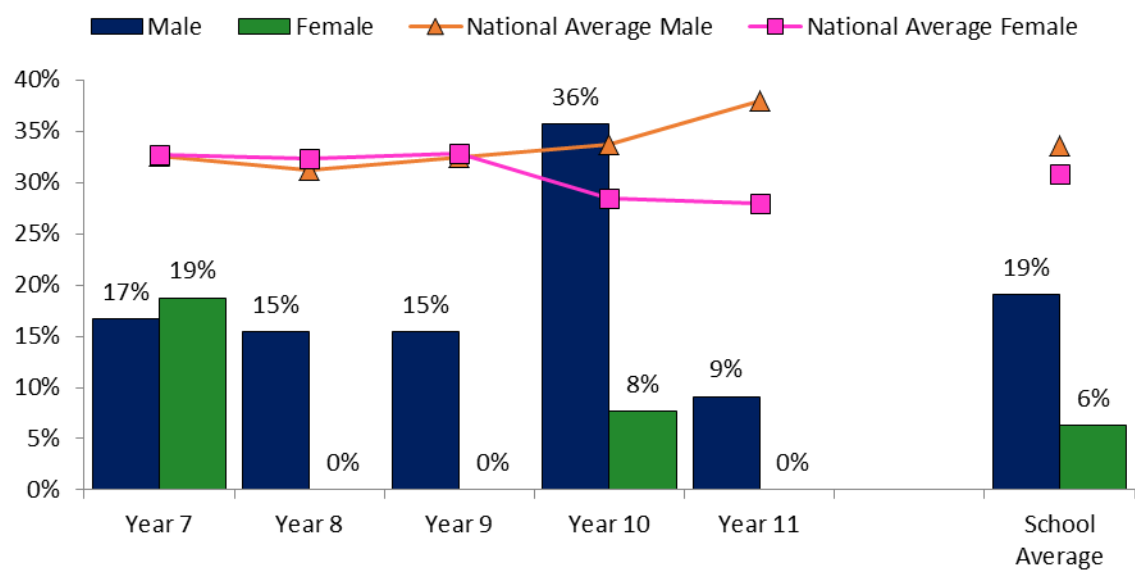


Did you know?

Friendship networks are associated with physical activity levels, particularly for boys. Young people who become friends with more physically active peers, increase their own activity levels to match those of their new friends²³.

Active travel to and from school

Fig.6 Archbishop McGrath Catholic High School: Students whose main part of their journey to school is walking or cycling



Did you know?

Walking to school can contribute as much as a third of the total amount of physical activity children get in a day²⁴.

Transition to secondary school can mean a change in mode of transport to school. In Bristol, physical activity levels fell by 15% in children who changed from walking to primary school to being driven to secondary school²⁵.

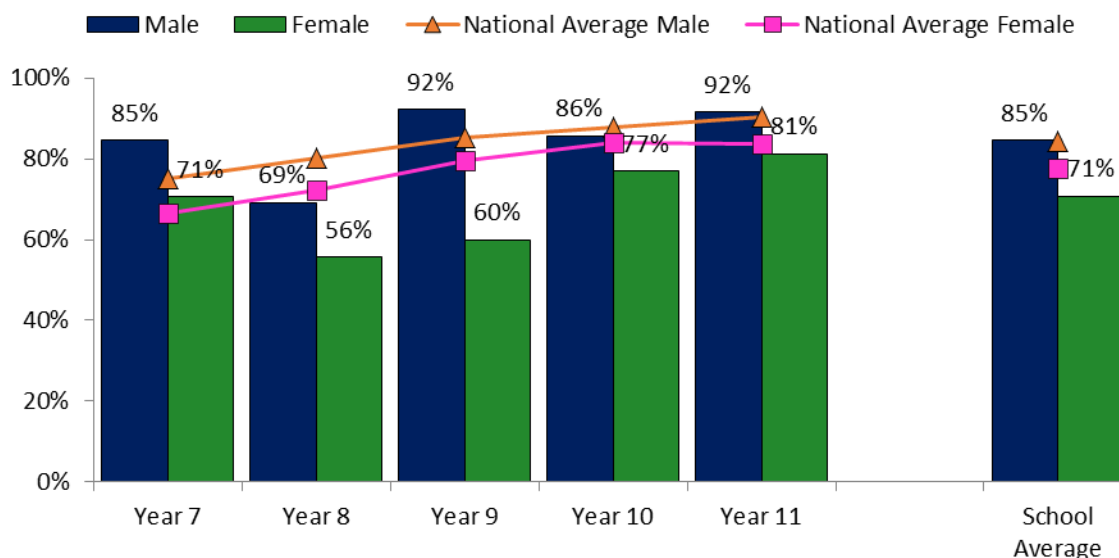
Your school can make a difference

NICE, the National Institute for Health and Clinical Excellence recommends that all schools develop a school travel plan which has physical activity as a key aim and is integrated with the travel plans of other local schools. Sustrans Cymru can help schools to develop travel plans to promote walking, cycling and use of public transport. It can also offer a range of support to secondary schools in Wales. These include an activity pack to run a cycling focused week of activities, subject related resources including a Geography WJEC coursework option and Welsh Baccalaureate resources.

<http://www.sustrans.org.uk/wales>

Screen Time

Fig.7 Archbishop McGrath Catholic High School: Students viewing an electronic screen* in their free time for 7 or more hours on



*Includes TV, DVDs, computer games, smart phones, computer use other than homework such as emailing, tweeting, chatting, surfing the internet.

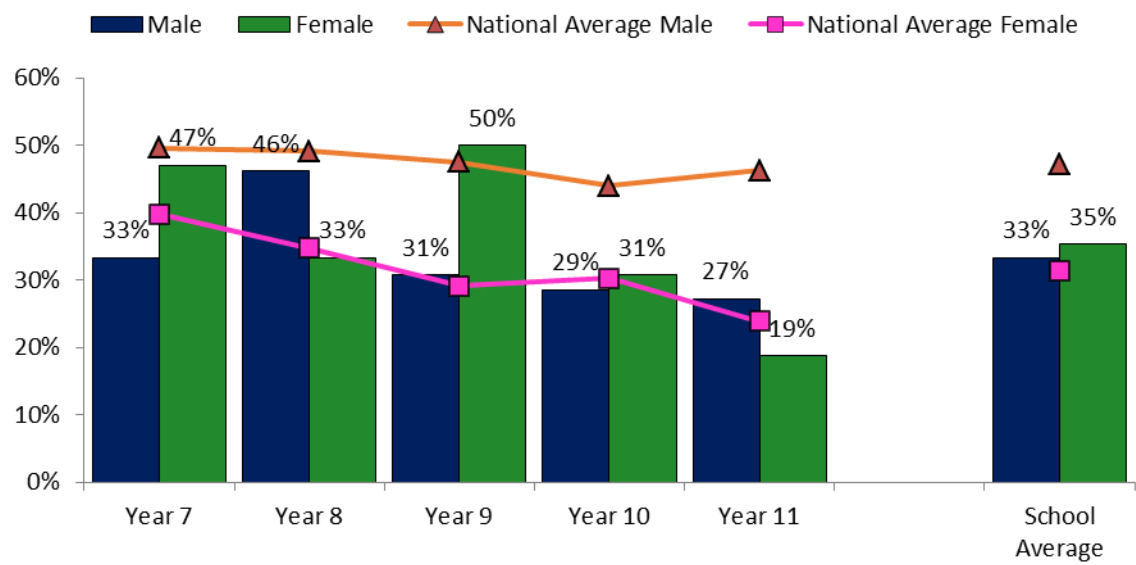
Did you know?

Screen time is significantly associated with food choices in American adolescents. Young people who spent more time watching television or playing computer games consumed fewer fruits and vegetables and more fast food²⁶.

Boys aged 10 to 16 who report less than 2 hours of screen time a day are more than twice as likely to show cardio-respiratory fitness as those boys reporting four hours or more²⁷.

Outside school hours

Fig.8 Archbishop McGrath Catholic High School: Students who exercise vigorously outside of school time at least four times a week



Who can help?

Contact your local Healthy Schools team for advice on all aspects of healthy eating and physical activity and recommended local support and resources.

Sport Wales
Sport Wales is the national organisation responsible for developing and promoting sport and physical activity in Wales. It runs a range of educational programmes to support this.
www.sportswales.org.uk

Health Challenge Wales
Resources that are aimed at individuals and organisations to encourage healthy eating and physical activity as part of daily life.
www.healthchallengewales.org/home

British Heart Foundation
A range of resources to encourage increased physical activity in English for teachers and students.
www.bhf.org.uk
www.yheart.net – young people’s resources

Food a Fact of Life
Developed by the British Nutrition Foundation, with lots of supporting materials for secondary schools, particularly related to cooking. Only available through the medium of English.
www.foodfactoflife.org.uk

Food Standards Agency in Wales
The Agency’s role is to improve food safety and standards in Wales and protect the health of the population in relation to food. They produce resources that could be used in schools.
www.food.gov.uk/wales

How can your school support healthy eating and physical activity for students?

Senior Leadership Team and Governors can	
Ensure the school has an up to date Food and Fitness policy developed by a representative working party from all sectors of the school community.	Governors are asked by Estyn to report to parents on what the school is doing to encourage healthy eating and exercise.
Make sure that all food provision is "Appetite for Life" compliant – there is local authority help available to support this. Training is available from local dieticians and Appetite for Life staff on delivering key messages in terms of healthy eating.	Provide facilities in the school that encourage physical activity such as bike racks, climbing walls, measured running/walking tracks. Provide the recommended 2 hours Physical Education a week.
School staff can	
Ensure there is a strong focus on healthy eating within food technology and physical education lessons are active and contain supportive messages on the importance of physical activity in a healthy lifestyle.	Support teaching and learning on the issue of healthy eating and physical activity across the curriculum (e.g. in Science, Maths, English/Welsh, Design Technology, etc.)
Offer a variety of sports and activity clubs to appeal to a range of students, both staff led and through the 5x60 initiative; run a cooking club offering healthy recipes.	Be healthy role models during the school day in terms of food and fitness.
With the support of staff, students can	
Set up student voice groups such as a School Nutrition Action Group and utilise Young Ambassadors, (the Sport Wales initiative) to review the curriculum and school environment in relation to food and fitness.	Offer assemblies or plan peer education sessions to encourage healthy eating and physical activity among students.
Family and Community Involvement	
Ensure that the Parent Teacher Association is aware of the school's drive to encourage healthy eating and physical activity so this can be mirrored in any fund raising events. Ask for funds to be spent to support student healthy lifestyles.	Encourage families and members of the local community to join in any food and fitness events such as a school Race for Life, a healthy eating fair.
Work with representatives from local agencies to support this agenda in school.	Consider inviting local chefs to teach healthy recipes to students/staff/parents and representatives from local sports clubs so that students know about opportunities to be physically active in their free time.

Mental and emotional health

Why is mental and emotional health of students an important agenda in schools?

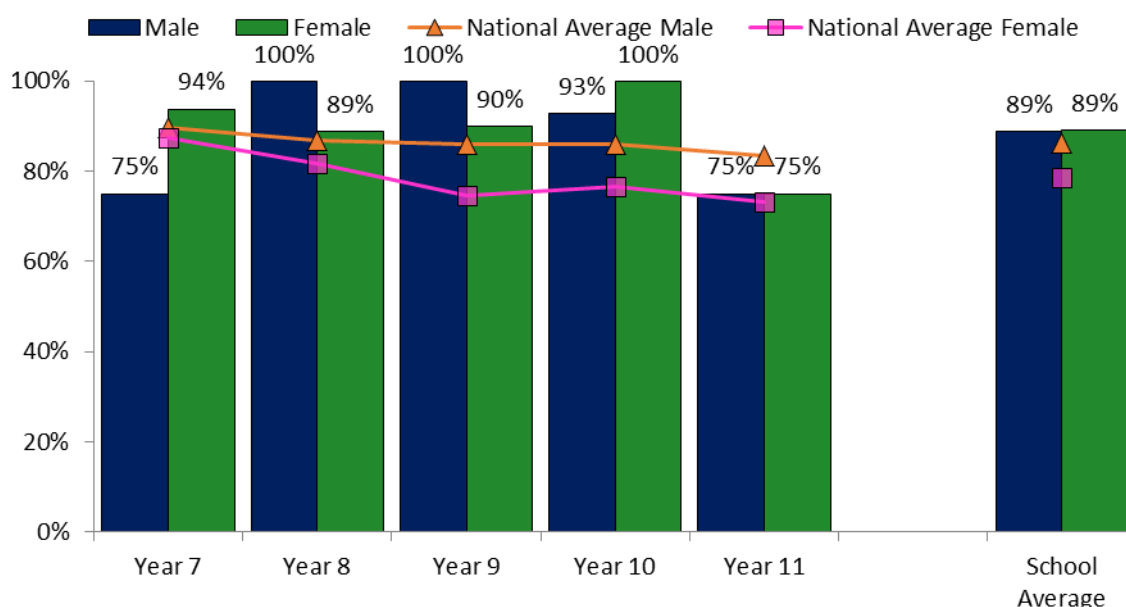
Mental health plays a crucial part in our overall health. Most mental illness begins before adulthood so fostering mental health and wellbeing in young people is vital. Improving mental health early in life will have a range of benefits for individuals and society, including improved physical health, fewer risky health behaviours, increased life expectancy, and reduced health inequalities²⁸.

Wellbeing of young people in the UK lags behind their contemporaries in other countries. In 2013 UNICEF ranked the UK 16th out of 29 countries across Europe, Australasia and North America for child wellbeing²⁹. There were several dimensions to 'wellbeing' including health, safety, education, housing and poverty.

Schools are an important source of support and guidance for young people. Year 9 and 11 students in England were asked who they would seek help from for a range of problems. The majority indicated that they would seek help from a 'school' source, such as a form tutor, rather than a 'health' source (a doctor or school nurse) for most of the problems described, including being worried about using drugs and alcohol³⁰.

Schools have an impact on young people's mental and emotional health. Research findings from France indicate that students at schools with better social climate, learning opportunities, fairness, clarity of rules and safety are at lower risk of developing a range of depressive symptoms, such as feeling sad or lonely, having a poor appetite, and feeling fearful³¹.

Fig. 9 Archbishop McGrath Catholic High School: Students who report being satisfied with their life*



*Students were given a picture of a ladder where the top of the ladder '10' is the best possible life and the bottom is '0', the worst possible life. They were asked to tick the number that best describes where they stand. This is a widely used measure. This chart shows those students who opted for 6 and above.

School Connectedness

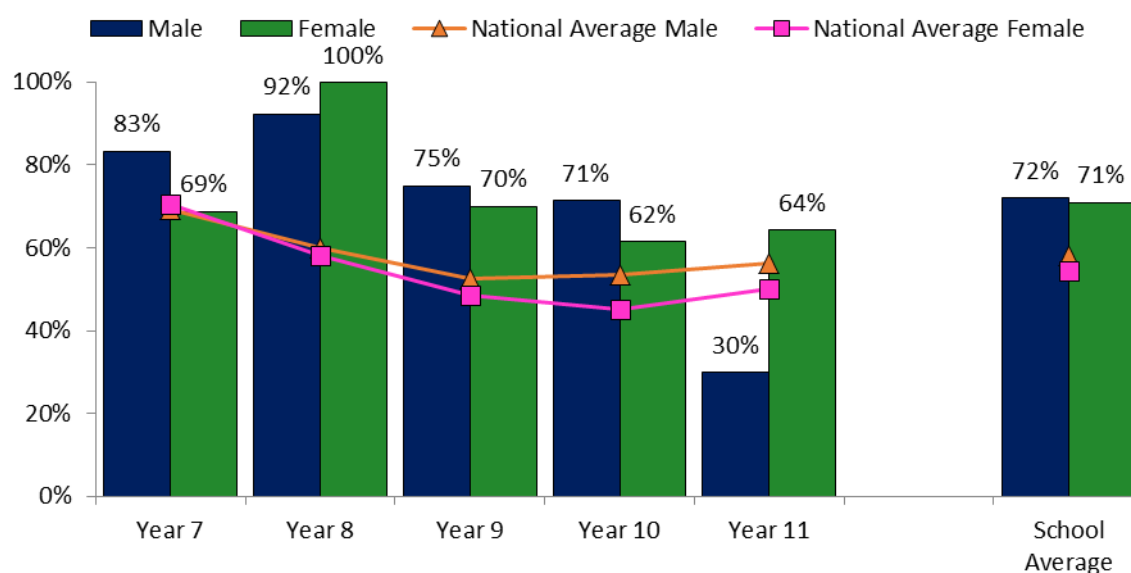
Did you know?

Young people who feel an attachment to their school or 'school connectedness' and who consider that their teachers are supportive are less likely to engage in unhealthy behaviours.

Your school can make a difference

Positive teacher-student relationships are likely to be crucial in establishing healthy school environments, but students feel those relationships are impeded when teachers do not understand the realities of their daily lives, when they are not consulted on school rules about discipline, and when they feel school rules are applied inconsistently³².

Fig. 10 Archbishop McGrath Catholic High School: Students who "agree" or "strongly agree" that teachers care about them as a person



Your school can make a difference

HBSC data from Ireland show that participation in school life is lower amongst older secondary school students and amongst boys. Participating in making school rules was associated with higher life satisfaction in girls, and organising school events and expressing views in class were associated with higher life satisfaction in both girls and boys³³.

Fig. 11 Archbishop McGrath Catholic High School: Students who “agree” or “strongly agree” that their ideas are treated seriously in school

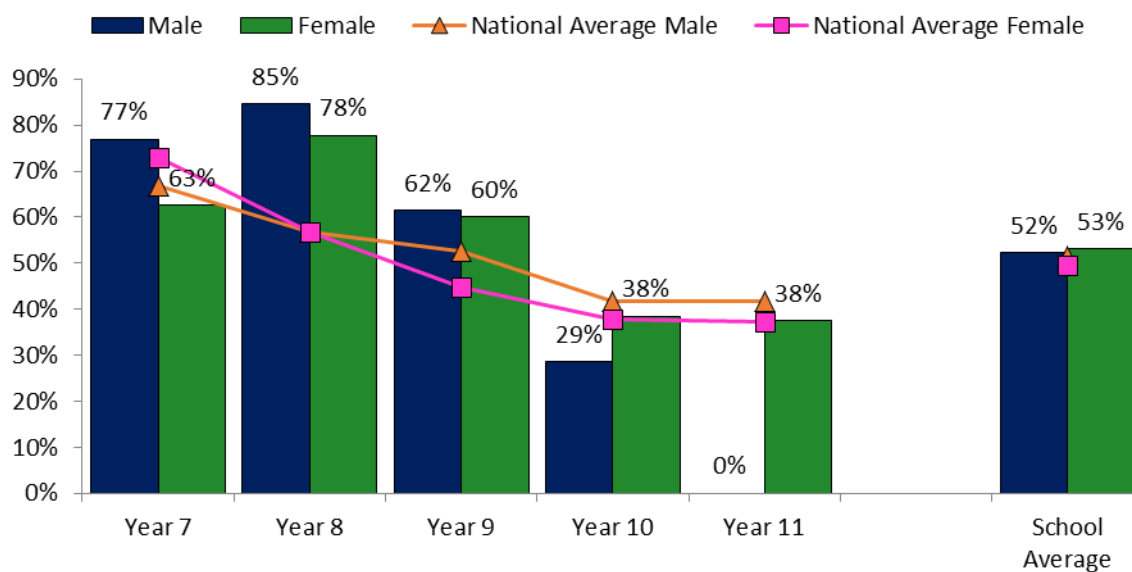
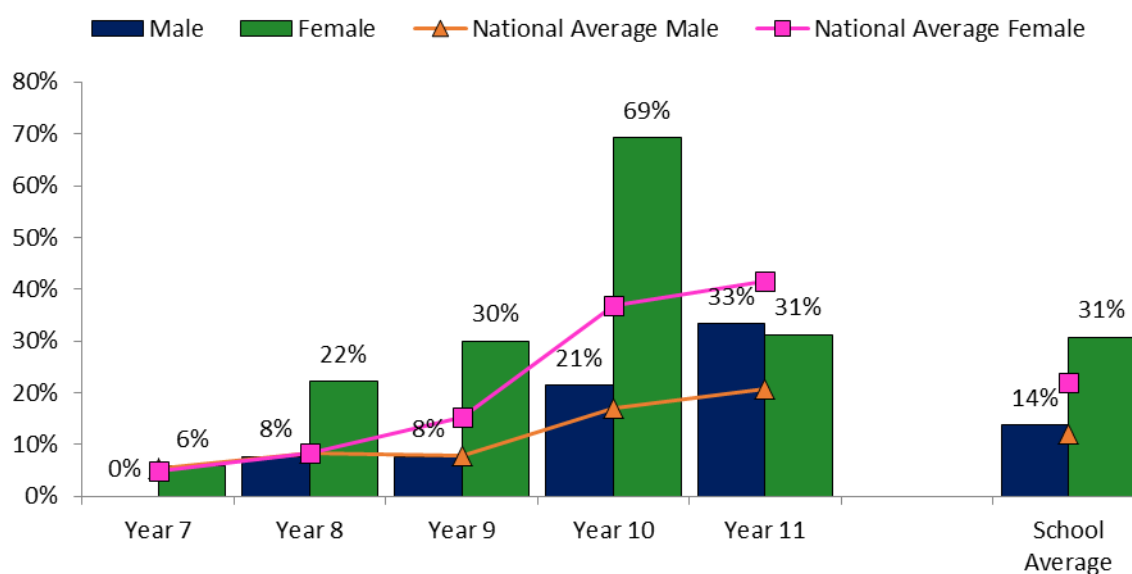
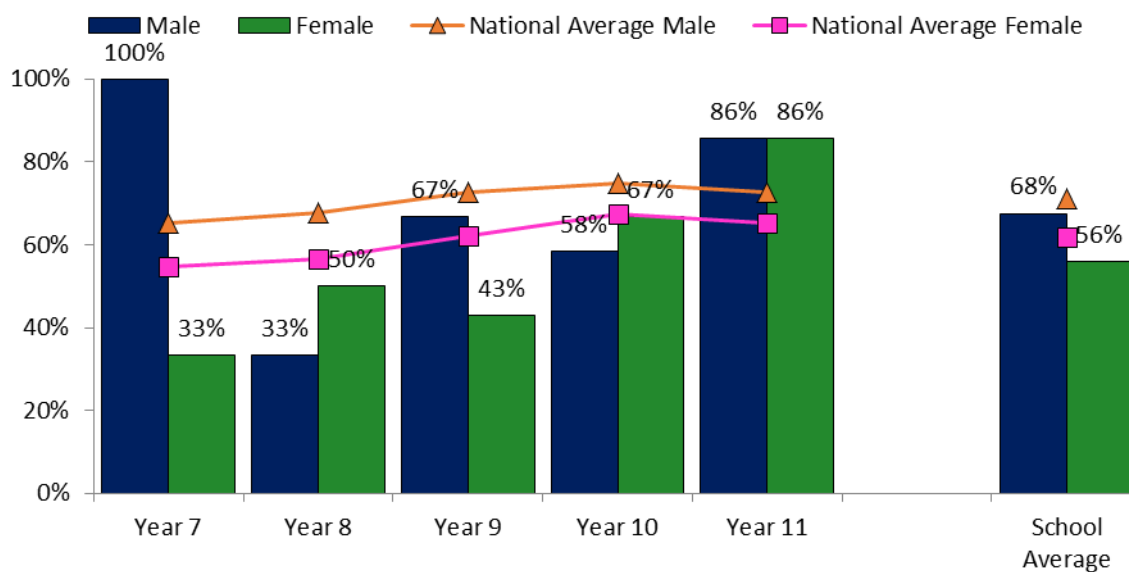


Fig. 12 Archbishop McGrath Catholic High School: Students who feel a lot of pressure from the schoolwork they have to do



Friendship and bullying

Fig. 13 Archbishop McGrath Catholic High School: Students who feel that they can count on friends when things go wrong



Did you know?

A UK study 'Children of the 90s' has shown that students who have greater wellbeing at age 13, including being more engaged with school and having positive friendships, achieve more academically at Key Stage 3 and 4³⁴.

Most secondary school students in Wales that have used the School-based Counselling Service did so because of issues with their family, anger, behaviour or bullying. Once with a counsellor, however, the topics talked about most were family issues, anger, self-worth and relationships. The service was used most often by students in years 9 and 10 and girls made greater use of it than boys³⁵.

Fig. 14 Archbishop McGrath Catholic High School: Students who have taken part in bullying another pupil(s) at school in the past couple of months

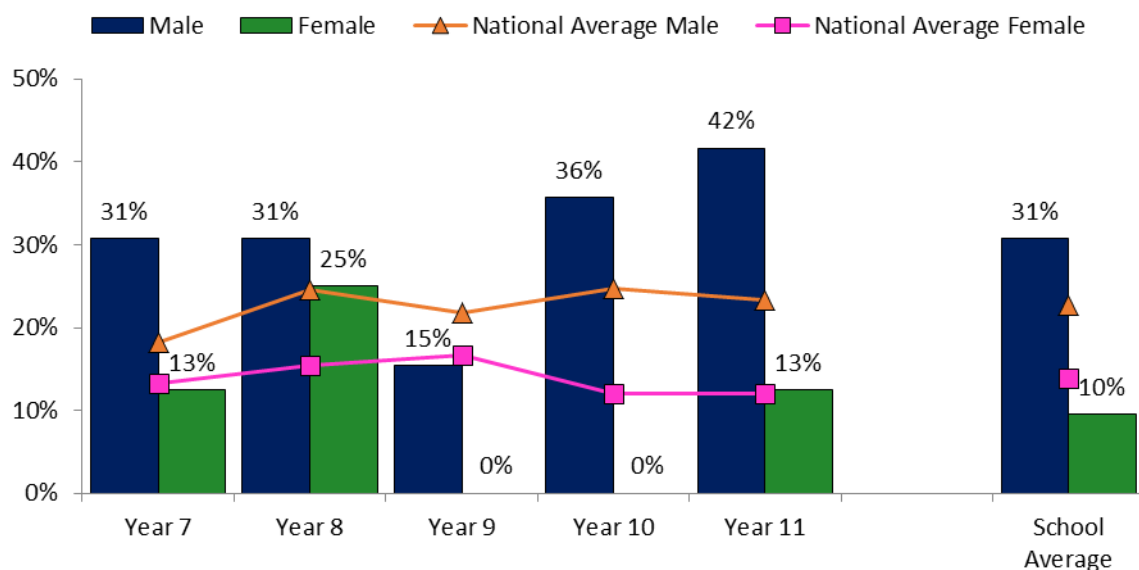
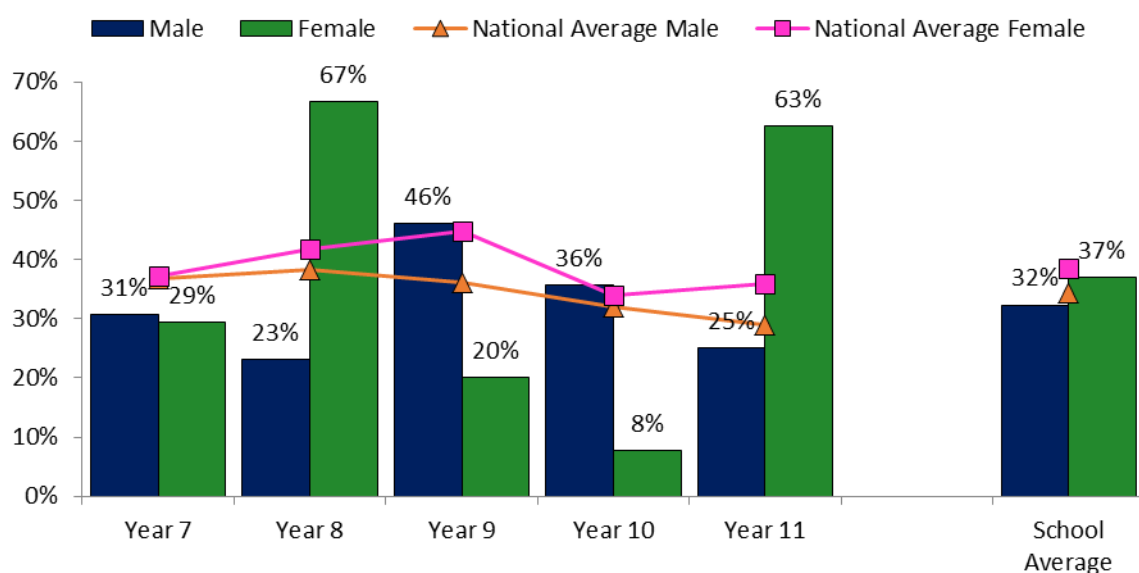


Fig. 15 Archbishop McGrath Catholic High School: Students who have been bullied at school in the past couple of months



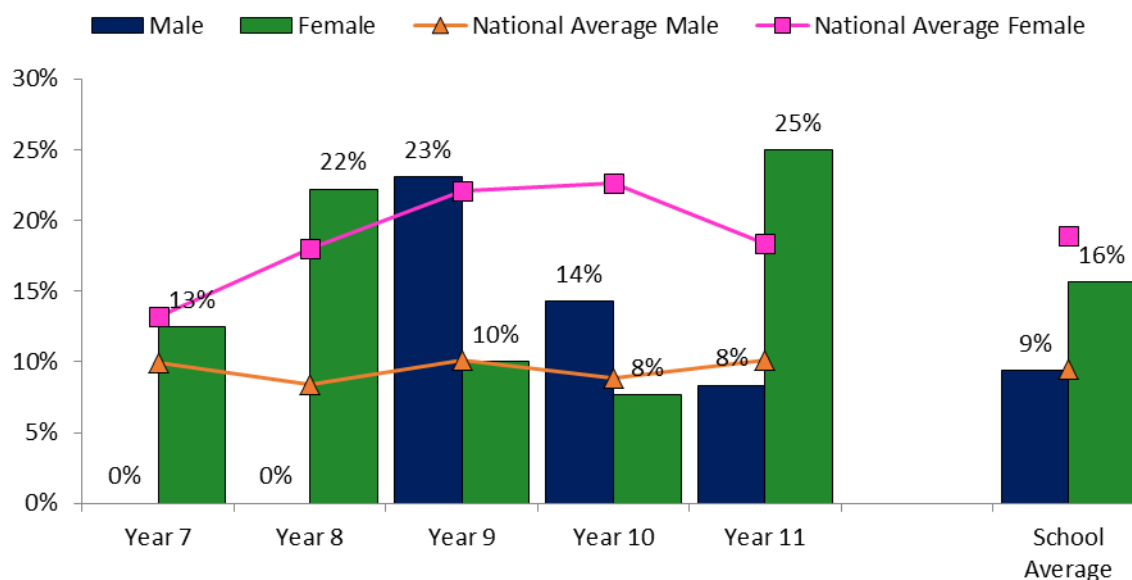
Did you know?

Students in the UK who report being bullied at age 14 have significantly lower educational achievement at age 16. They are also more likely to again report being bullied at age 16³⁶.

Your school can make a difference

School-based anti-bullying programmes can be effective in reducing bullying and victimisation, reducing each by around 20%. Programmes vary widely, but common features include having a whole-school anti-bullying policy, coverage of the issue in the curriculum, and information provided for teachers and parents³⁷.

Fig. 16 Archbishop McGrath Catholic High School: Students who have been cyberbullied with messages in the past couple of months



Did you know?

Research in Canada has found that young people rarely tell their parents or teachers about being 'cyberbullied' and this may be because they fear losing access to their mobile phone or computer. Most young people who reported being cyber bullied said they knew the identity of the perpetrator and in many cases the perpetrator was someone they considered a friend³⁸.

Sleep

Fig. 17 Archbishop McGrath Catholic High School: Students who usually go to bed after 11 pm when they have school the next day

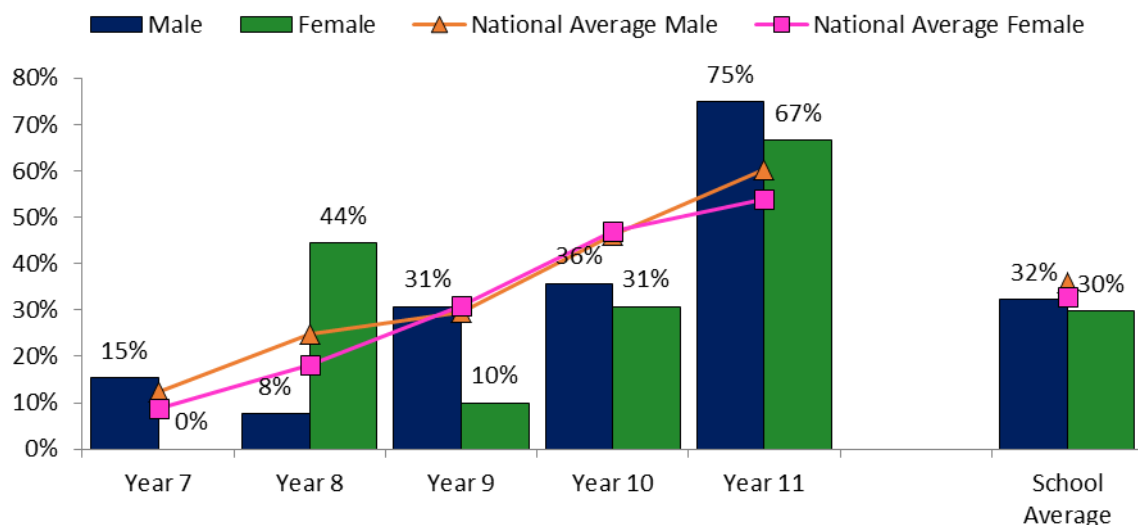
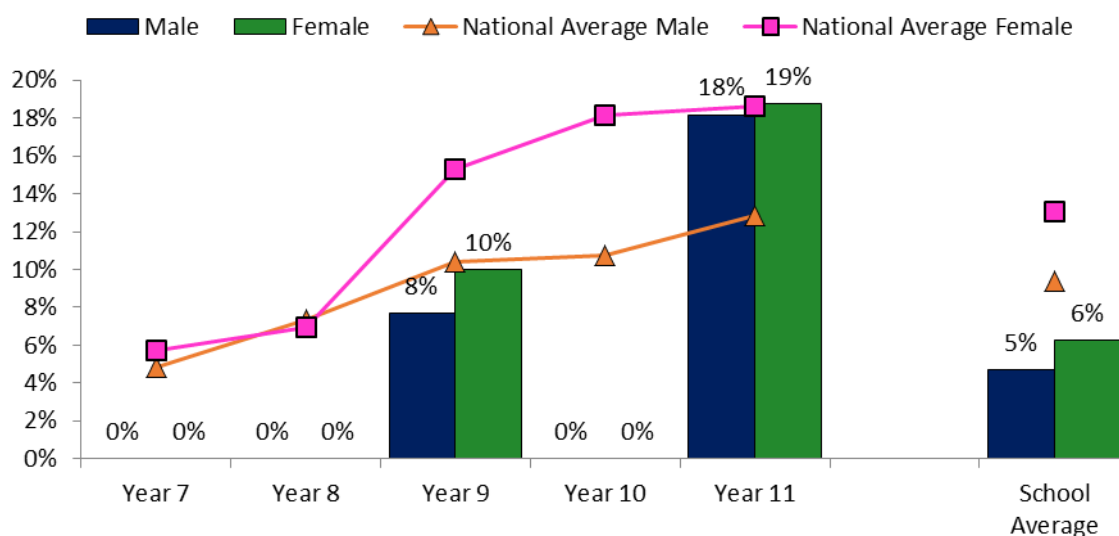


Fig. 18 Archbishop McGrath Catholic High School: Students who feel that they are never, or hardly ever, able to pay attention

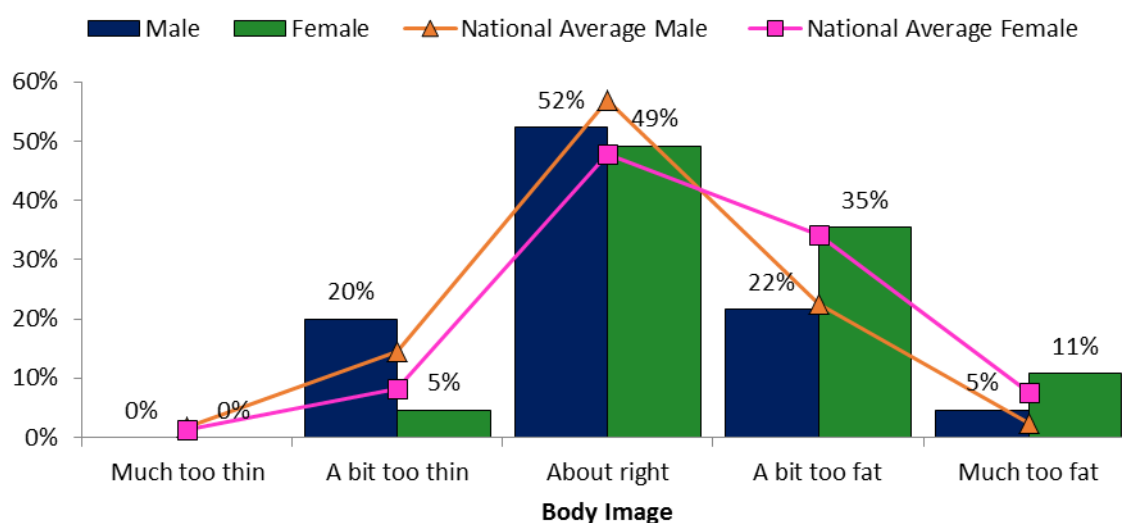


Did you know?

Evidence is growing that sleep plays a critical role in healthy adolescent development, particularly in the regulation of behaviour, attention and emotions. Lack of sleep and disturbed sleep in adolescence have been linked to weight gain and to mental and emotional health issues, including depression, anxiety and low self-esteem³⁹. Research in America found that young people aged 11 – 18 years who went to bed latest during term time (around 12.30am) left high school with a lower grade point average than their peers with earlier bed times (around 10.45pm)⁴⁰.

Body image

Fig.19 Archbishop McGrath Catholic High School: Students responses to “Do you think your body is...”



Your school can make a difference

Look at body image within PSE. Beat Cymru can provide resources and support for schools around body image and eating disorders. <http://www.b-eat.co.uk/beat-cymru/> Youthline 0845 6347650

Who can help?

Contact your local Healthy Schools team for advice on all aspects of Mental and Emotional Health and Wellbeing and recommended local support and resources.

BeatBullying works with young people to reduce and prevent bullying and cyber bullying.

<http://www2.beatbullying.org/wales/index.html>

Barnardo's Cymru works with children, young people and families in Wales to help ensure that every child has the best possible start in life.

www.barnardos.org.uk/what_we_do/barnardos_today/wales.htm

Mind Cymru provides advice and support to empower anyone experiencing a mental health problem. Information leaflets on many issues such as relaxation, anger management, anxiety and improving self-esteem.

Training for those working with young people on Youth Mental First aid

www.mind.org.uk/get-involved/mind-cymru-get-involved

ChildLine provides advice for young people on a range of issues including bullying, online and mobile safety and self-harm

<https://www.childline.org.uk> 0800 1111 (bilingual helpline)

The Children's Commissioner for Wales is to stand up for children and young people's rights. This work links to the United Nations Convention on the Rights of the Child. Information on bullying and cyber bullying on the website.

<http://www.childcom.org.uk/>

How can your school support the mental and emotional health and wellbeing of students?

Senior Leadership Team and Governors can	
Ensure that all relevant policies that support student wellbeing are in place and have been developed in consultation with all sectors of the school community including students. These should include the Equalities policy/ plan, Positive Behaviour Management Policy, Anti Bullying Policy and Strategy and Bereavement policy.	Consider the concept of school connectedness and how that can be encouraged through positive relationships between and across different members of the school community.
Make it clear to all that the wellbeing of students is a key focus of the school. This can be through inclusion in the vision statement and school motto and details of actions taken to this end on the school website.	
School staff can	
Try to foster relationships both with other staff members and students that are based on trust and respect.	Build in approaches to learning and opportunities across the curriculum to allow students to consider emotional health issues and foster self-esteem.
With the support of staff, students can	
Student participation should be encouraged across all aspects of the life in the school, such as: negotiating the school rules and rewards and organising school events. A student voice group such as the school Council should review the school environment in relation to mental and emotional health and wellbeing.	Ensure that young people are given the opportunity to self-refer to the school-based counsellor and other support agencies where available.
Family and community involvement	
Invite local and national agencies with a brief to support mental and emotional health and wellbeing to support the curriculum or run awareness raising sessions for staff and parents.	Consider setting up a group with external agency help that would allow parents to talk through the issues around wellbeing for their children and what they could do as a parent to help.

Smoking

Why is smoking an important agenda in schools?

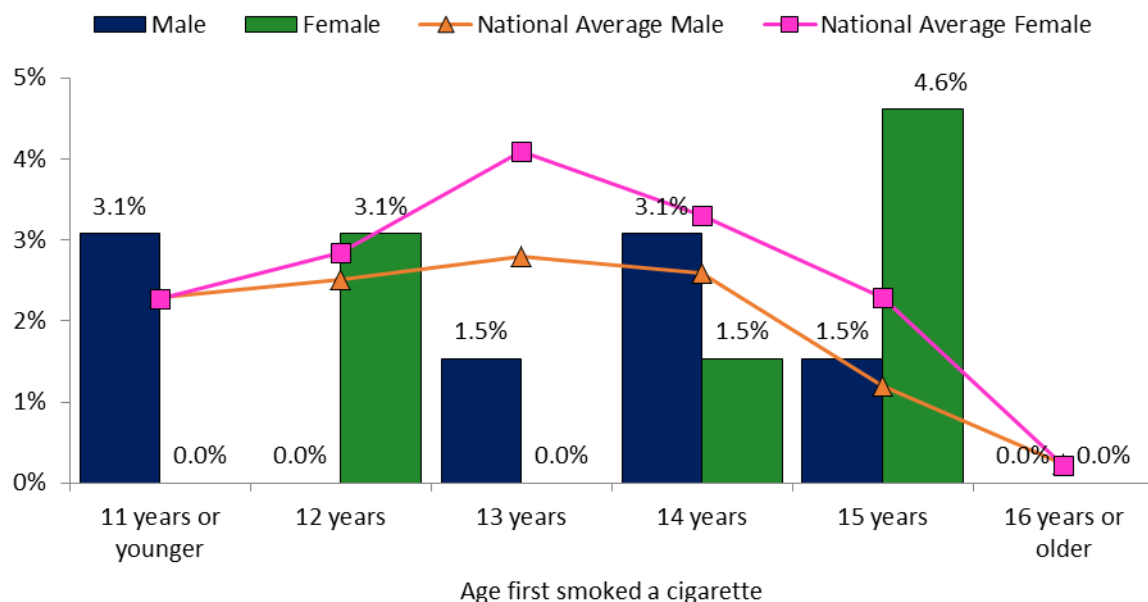
Smoking is a major cause of some of Wales's most devastating diseases. Tobacco smoke contains more than 4,000 chemicals and more than 50 of these are known to cause cancer. Smokers are also more likely to suffer from lung disease, heart disease and stroke.

Smoking doesn't just catch up with you later. Teenage lungs are still growing and smoking impairs lung development. Young people who smoke experience more coughs and wheezing and research in America has found that regular smoking in childhood and adolescence is strongly associated with new cases of asthma over an eight year period^{41,42}.

Schools have an important impact on whether or not young people smoke. Research in Scotland has found that a school's social environment is associated with the number of its students who smoke. This effect is particularly apparent in boys and includes various aspects of school life including teacher-student relationships, students' perception of whether teachers trust and respect them, staff-staff relationships and a school's focus on caring and inclusiveness^{43,44}.

Breathing in tobacco smoke is bad for you, whether or not you're a smoker. Tobacco kills half of the people who use it, which equates to 6 million people a year worldwide – or twice the population of Wales. Second hand smoke in enclosed spaces such as cars is also harmful and causes over half a million early deaths a year. There is no safe level of exposure to second hand smoke.

Fig. 20 Archbishop McGrath Catholic High School: The age students smoked their first cigarette



Did you know?

Cigarettes may have a 'sleeper effect' in young people. Researchers in London identified 11 year old students who had tried a cigarette just once and compared them to their peers who had never tried a cigarette. Students who had tried a cigarette were more likely to be smoking by the time they were 16, even if they had had a three year gap when they didn't try a cigarette at all⁴⁵.

The younger a person is when they first try a cigarette, the more likely they are to become a heavy smoker and to be less successful if they try to quit⁴⁶.

Fig. 21 Archbishop McGrath Catholic High School: Students smoking tobacco at present

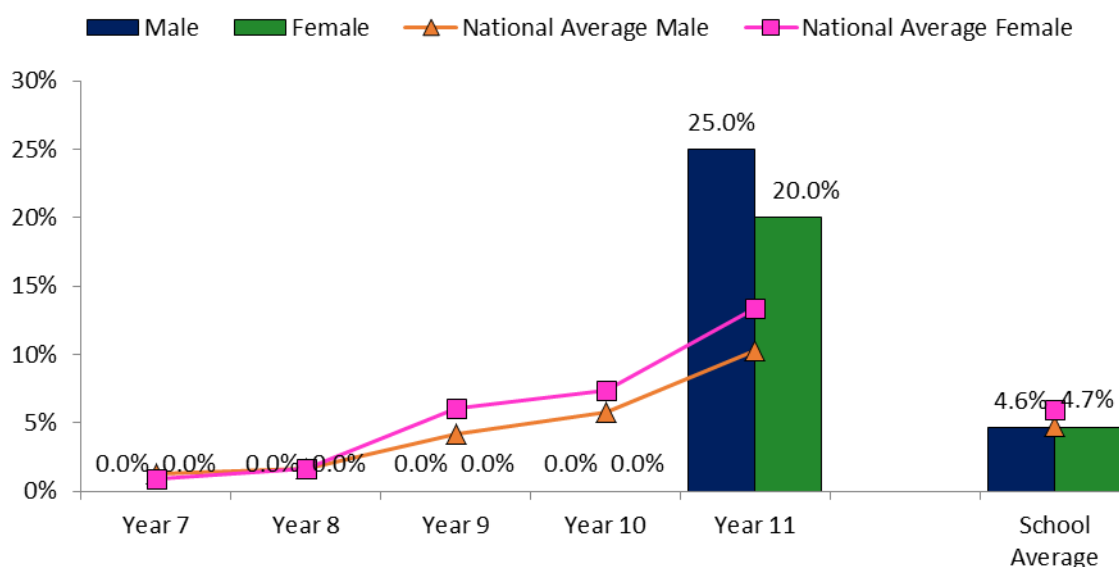
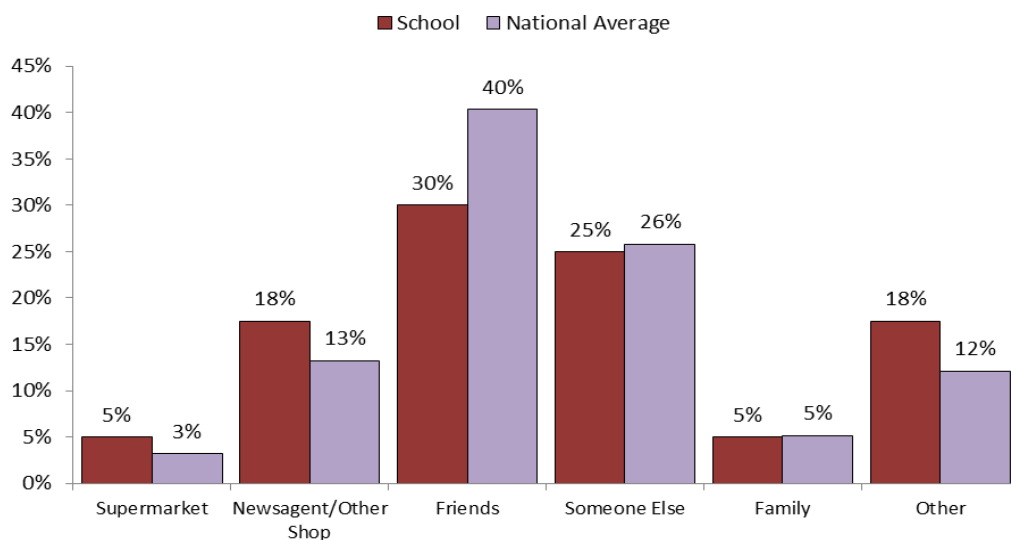


Fig. 22 Archbishop McGrath Catholic High School: Places where students say they often get cigarettes*



*Students could select more than one source of cigarettes. These percentages indicate the proportion of all acquisitions of cigarettes, not the proportion of students.

Did you know?

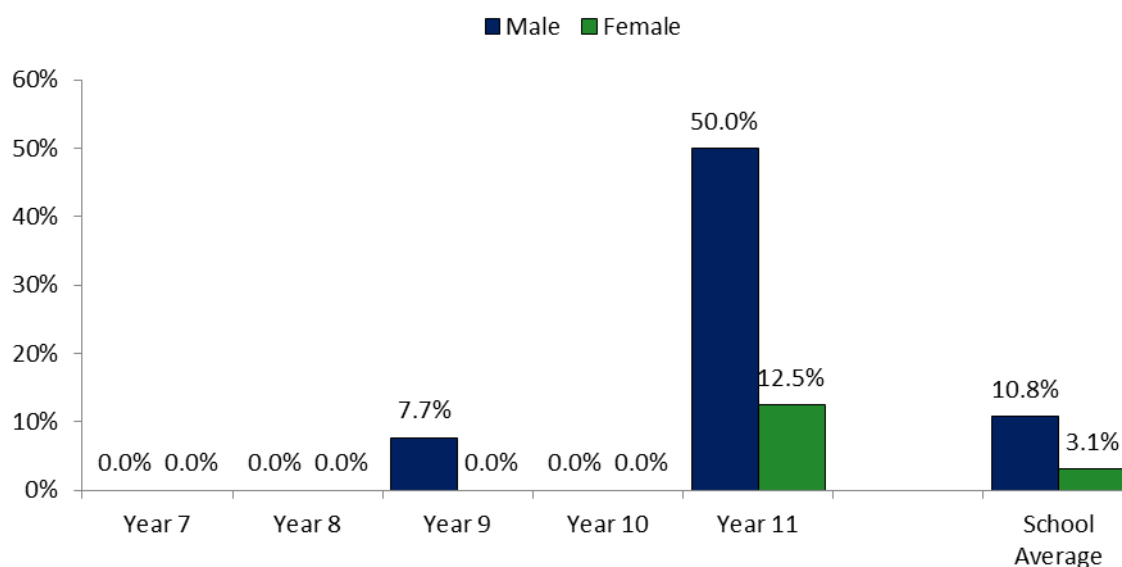
Research with young people suggests that the increase in the legal age to purchase cigarettes has increased the importance of 'proxy purchasing', or asking friends, family or strangers to purchase cigarettes. Young people report knowing what characteristics to look for in a stranger that will make them more likely to agree to purchase cigarettes on their behalf⁴⁷.

11-13 year olds who perceive cigarettes to be easily accessible are more likely to start smoking and to progress to smoking regularly over four years⁴⁸.

E-cigarettes

E-cigarettes are also called electronic nicotine delivery systems (ENDS). They do not contain tobacco, but produce a vapour from a battery powered heater and cartridges. The cartridges usually contain nicotine and may contain flavourings to make the vapour taste like tobacco or like mint, fruit or chocolate. Because of their nicotine content, many e-cigarettes are seen as a smoking cessation aid.

Fig 23. Archbishop McGrath Catholic High School: Students who report having used or tried electronic cigarettes (sometimes called an 'e-cigarette')



The World Health Organization advises that the safety of e-cigarettes has yet to be demonstrated. Powers to regulate e-cigarettes in England and Wales is in the Children and Families Act 2014.

A recent survey by ASH Wales found that amongst young people who had never smoked, e-cigarette use was very low (less than 4%), but amongst current smokers it was much higher (33%)⁴⁹.

Alcohol

Why is alcohol use an important agenda in schools?

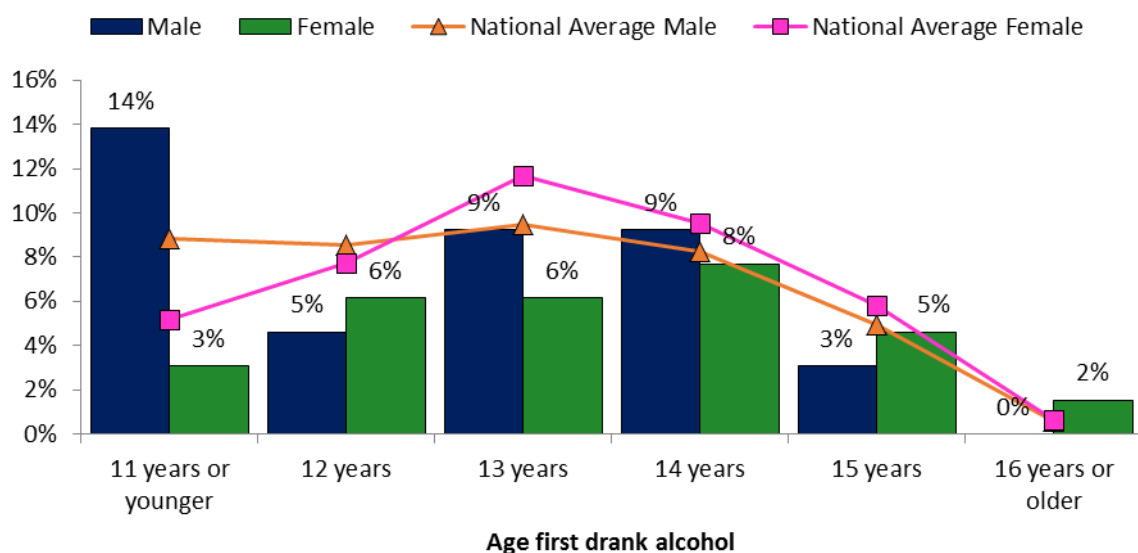
Worldwide, nearly one in ten deaths among 15 to 29 year olds is alcohol related. Many of these are due to intentional and unintentional injuries, including those arising from violence, traffic accidents and suicide.

Alcohol affects body and mind. Young brains are particularly vulnerable to alcohol as they continue to develop throughout adolescence and into young adulthood. Heavy alcohol use in adolescence causes changes in the structure and functioning of the developing brain and is associated with mental health problems. Adolescents who misuse alcohol are also more likely to experience headaches, sleep disturbance, eczema and weight loss and development of their bones, liver and hormone system may be adversely affected⁵⁰.

Binge drinking is much more common in adolescents than adults and can have long term social consequences. The British Birth Cohort Study followed over 11,000 people from birth into adulthood and found that those who reported binge drinking at age 16 were more likely to have experienced a range of health, social and economic problems by the age of 30. These included alcohol dependence, illegal drug use, psychiatric problems, homelessness, criminal convictions, exclusion from school and accidents⁵¹.

Less is better. Unlike the UK, the World Health Organization does not set safe limits on drinking alcohol. This is because for nearly all the diseases that are linked to alcohol consumption, there is a 'dose-response relationship'. This means the more you drink, the greater your risk of disease, so less is better.

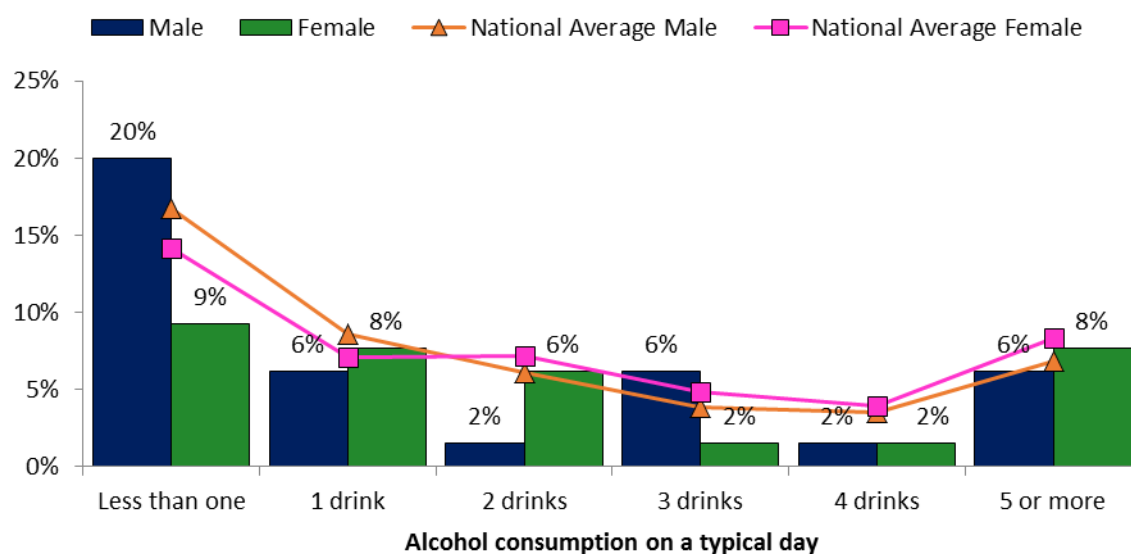
Fig 24. The age Archbishop McGrath Catholic High School students drank alcohol for the first time



Did you know?

Early onset of alcohol use is one of the strongest predictors of later dependence on alcohol: research in America has found that the younger people are when they start to drink alcohol, the more likely they are to be dependent on alcohol by the time they are 25 years old⁵².

Fig 25. Archbishop McGrath Catholic High School: Students' consumption of alcoholic drinks on a typical day



Did you know?

The lower-risk guidelines for alcohol use are **no drinking in childhood** and for adults (**over 18 years**):

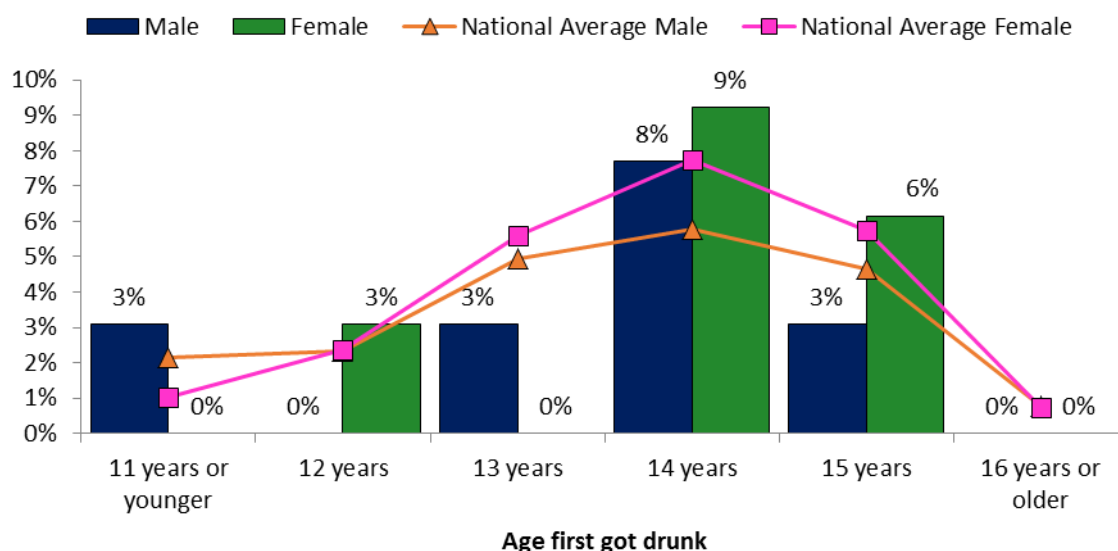
Women: should not regularly drink more than 2 to 3 units of alcohol a day.

Men: should not regularly drink more than 3 to 4 units of alcohol a day.

Binge drinking in adolescents is associated with sexual activity, fighting and use of illegal drugs⁵⁰. It also puts young drinkers at risk of alcohol poisoning, which can fatally suppress the gag reflex and respiratory drive⁵³.

There is an added danger of mixing alcohol and other drugs.

Fig 26: The age Archbishop McGrath Catholic High School students first got drunk



Did you know?

11-14 year olds in the UK who reported positive school wellbeing were significantly less likely to have ever drunk alcohol than peers who reported negative wellbeing. Wellbeing at school included feeling fairly treated by teachers and being able to take part in making school rules⁵⁴.

Your school can make a difference...

The National Institute for Health and Clinical Excellence (NICE) recommends schools follow a 'whole school' approach to alcohol by involving parents, staff and students and addressing school policy, the school environment, the curriculum and staff professional development⁵⁵.

Did you know?

There are dangers in mixing alcohol with high caffeine energy drinks; the caffeine content may make you feel more awake and less aware of how drunk you are. Caffeine and alcohol are also both diuretic meaning they make you produce a lot of urine so drinking them together may leave you badly dehydrated.

Contact your local Healthy Schools team for advice on all aspects of smoking and alcohol and recommended local support and resources.

<p>Ash Wales offer statistics and information on smoking in Wales</p> <p>www.ashwales.org.uk</p>	<p>Filter is the young people's service from Ash Wales which aims 'to filter out the myths and give the facts about smoking'. For information on smoking and help on quitting visit the website or phone 08088 022888</p> <p>www.thefilterwales.org</p>
<p>Stop Smoking Wales</p> <p>Stop Smoking Wales is a free, NHS service to help people quit smoking.</p> <p>www.stopsmokingwales.com</p>	<p>Alcohol Concern Cymru is working with support from the Welsh Government to aim to reduce the harm caused by alcohol in Wales.</p> <p>www.alcoholconcern.org.uk/projects/alcohol-concern-cymru</p>
<p>Drink Wise Wales, run by Alcohol Concern Cymru, is any easy-to-use bilingual website giving information on sensible drinking and about how alcohol affects your body. It has a range of interactive activities as well as information on all aspects of alcohol.</p> <p>www.drinkwisewales.org.uk</p>	<p>DAN, the Wales Drug and Alcohol Helpline, provides free and confidential information or help on issues relating to drugs or alcohol, 24 Hours a day, 365 days a year through the medium of Welsh and English. Call 0800 6 33 55 88 www.dan247.org.uk</p> <p>Frank provides English medium, youth focused advice:</p> <p>Call 0300 123 6600 www.talktofrank.com</p>
<p>NHS Direct Wales provides health information on smoking and alcohol and appropriate local services.</p> <p>Call 0845 46 47 or visit www.nhsdirect.wales.nhs.uk</p>	<p>Cancer Research UK provides comprehensive information on a range of lifestyle issues such as smoking and alcohol.</p> <p>www.cancerresearchuk.org</p>

How can your school help your students resist the pressure to smoke and drink alcohol?

Senior Leadership Team and Governors can

Ensure that the school is a smoke free site (and precludes the use of e-cigarettes) and has policies to deal with smoking and drinking incidents either through separate documents or within the schools substance use and misuse policy.

Consider accessing smoking cessation support for students and staff who want to quit. www.stopsmokingwales.com

Take up the **ASSIST Programme** if offered by Public Health Wales. This is a smoking prevention programme which encourages new norms of smoking behaviour by training influential Year 8 students to work as 'peer supporters'. Research found it to be effective in reducing smoking prevalence over a two year period of follow-up.

School staff can

Consider the most appropriate year groups to target educational input based on the data in the report.

Make the most of the opportunities to deliver smoking and alcohol education within PSE, Science and in other subjects across the curriculum. Ensure that the content is broader than the long term dangers of using the substances. Consider short term consequences, skills to resist unwanted peer and media influences and allow students to consider their attitudes relating to these substances.

With the support of staff, students can

Ensure that Student Voice groups consider smoking and alcohol and review the curriculum and school environment in relation to both substances. The Eco-committee can consider the global effects of smoking on the environment.

Consider awareness raising events to tie in with national events such as No Smoking Day and Alcohol Awareness Week.

Think of appropriate messages that could be delivered to younger students in the school through peer education sessions or assemblies.

Family and community involvement

Invite local and national agencies with a brief in smoking or alcohol to support the curriculum or run awareness raising sessions for staff and parents.

Take the opportunity of spreading learning beyond the school gate; display student curriculum work on substance misuse within the local community such as in Doctors' surgeries and pharmacists.

Encourage families with a child aged up to 14 years to attend **Strengthening Families Programmes** if offered locally. The courses aim to help children build the skills to avoid problems with drugs and alcohol.

How to use your report: Share your report findings with all sectors of the school community



Student wellbeing can be improved through contributions at many levels with all members of the school community using the report data in creative ways:

School Leadership Team and Governors can

Make health and wellbeing a priority in the curriculum, the environment and within school activities. Ensure that this is reflected within the School Improvement Plan.

Look for opportunities to engage all members of the school community in considering and acting on the report. Ask local agencies to support where appropriate.

If there is a change in practice as a result of any actions, ensure that health related policies reflect this.

Consider this feedback report within a governing body meeting and make suggestions as to possible future actions.

Plan a specific action using the expertise of members of the governing body.

School Staff can

Support recommendations within the school improvement plans

Plan and deliver a health curriculum that supports the findings of the school report in PSE and through a cross-curricular approach

Develop opportunities as staff to model healthy behaviours

Evaluate new or previously implemented actions in school

With the support of staff, students can

Explore ways to take action on areas of strength or concern through established student voice groups, such as the school council or by setting up a new group with a healthy living focus.

Organise new initiatives at school (e.g. a fun health event, a student/staff healthy living challenge, award members of the school community who have made a difference in promoting healthy living).

Share the data!

- Write articles in student or local newspapers.
- Feature highlights of data during assemblies
- Talk to friends and family about the report's results.
- Use data in school projects.
- Connect with students from other schools in the School Health Research Network and SHAPES schools in Canada to share explore partnership opportunities.

Families and members of the local community can

Support the Parent Teachers Association to run events that support the health and wellbeing of the school community for example health fairs, fun fitness days

Create opportunities to model healthy behaviours at home and within the local community

Share skills, talents or resources to help address the issues identified in the report

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