Example school

Children's Health & Wellbeing Study 2022

Feedback Report

Contents

Project overview

We would like to thank your school for supporting the School Health Research Network (SHRN)'s expansion into primary schools by participating in the Children's Health & Wellbeing Survey 2022-23. SHRN is funded by Welsh Government and your survey forms part of the development process as we roll out the survey across all primary schools in Wales. This survey is the third stage of the roll out. In the first stage, which took place between April and July 2021, a total of 76 primary schools across Wales participated in the study, with 2,282 Year 6 pupils completing the survey. In the second stage, we extended the survey to include pupils from Years 3, 4 and 5 in addition to Year 6. Six primary schools across Wales participated in the piloting of the Key Stage 2 survey.

This third stage has enabled us to extend the survey to invite all primary schools in Wales in two phases. Between September and December 2022, 73 primary schools took part in the survey, and additional schools will participate early in 2023.

In order to return your school report to you as soon as possible, we have not included national benchmarking data. These data can only be produced when all schools have finished the survey and will be available in the summer of 2023. We will send you a national report including this information during the summer term so that you can compare national findings to your own school report.

Your report

We are delighted to provide you with this tailored report of student health and wellbeing at Example school.

The table below shows the number of students in each year group at your school who took part in the survey. Year group data are not presented in the report if fewer than 15 students participated in that year, however data from these students are used to produce school average values.

Total number of students responding				
Year 3	Year 4	Year 5	Year 6	Total respondents
59	58	60	59	236

This feedback report provides a breakdown on:

• Mental health and wellbeing
• Health protective behaviours
• Screen use and social media
• School connectedness
• School transition

The format of this feedback report is similar to reports provided to secondary schools in Wales who are part of SHRN. This report can help you to identify health and wellbeing issues relevant to young people in your school. We aim to contextualize your results based on relevant research carried out in these topic areas and provide recommendations for ways in which your school might want to engage with these findings and address priorities within the new curriculum. This feedback report is only provided to your school. However, you are strongly encouraged to share the report with all your students, staff, parents and governors. You might also like to share it with your local Healthy Schools Team, Consortia and others with a wellbeing role in your local authority or consortium as they can provide valuable help. For any queries relating to this report please email the Primary SHRN Team: PrimarySHRN@cardiff.ac.uk

Understanding your feedback report
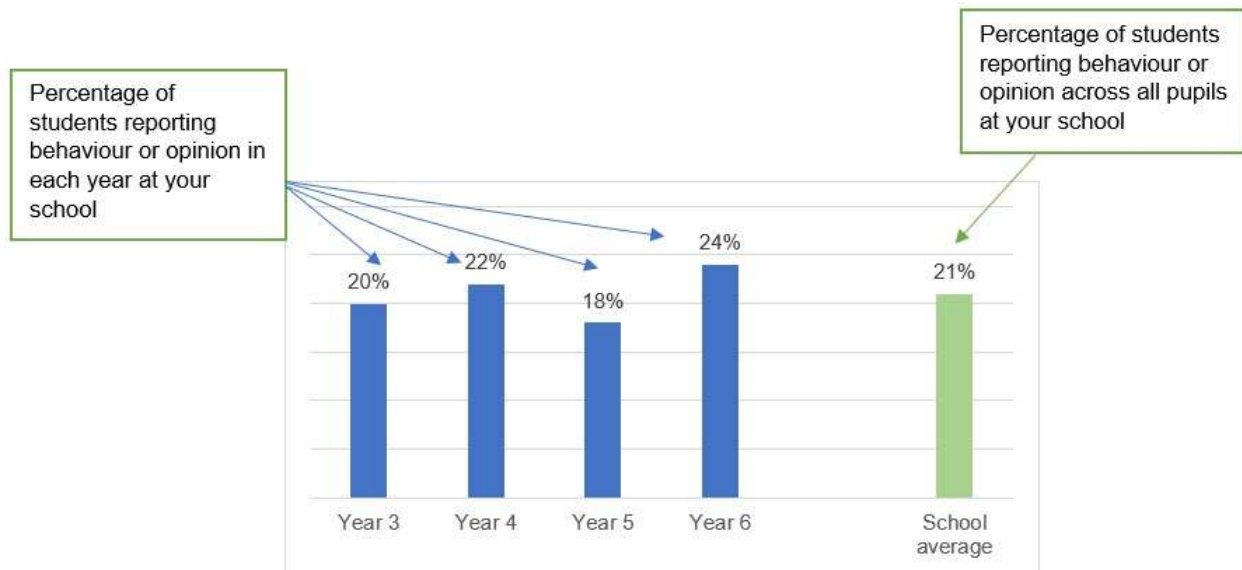
Data are shown for your school in bar charts. Data are displayed for each year group separately in the **blue bars** and the school average in the **green bar**. The green bar is calculated based on all pupils who responded across Years 3-6.

Not all questions were included for all school years. This is because some questions were less relevant to the younger age groups. Where data are not available because the question was not asked to that year group, this is stated in the text.

Maintaining Pupil Anonymity:

In order to maintain pupil anonymity, if fewer than 15 pupils in any year group or at the whole school level have provided an answer to a specific question, we will not provide your school's result for that question.

Please note that not all students will have answered all the questions in the survey.

Mental health and wellbeing

Why is the mental health and wellbeing of students an important agenda in schools?
Most mental health difficulties begin before adulthood so preventing and managing mental ill health and promoting positive wellbeing in young people is crucial. 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 inequalities.[1] In Wales, schools are required to take a whole-school approach to mental health, ensuring that wellbeing is woven into all aspects of school life.[2]

The mental health and wellbeing of young people in the UK lags behind their contemporaries in other countries. In 2020 UNICEF ranked the UK 27th out of 41 developed countries in a league table of child well-being outcomes encompassing mental wellbeing, physical health, and academic and social skills.[3] Our 2019 SHRN survey found that in secondary schools, 20% of young people reported very high mental health symptoms on standardised measures even before the pandemic, including 12% of those young people who had just moved into secondary school.[4] Our 2019 primary school survey also found that 8% of Year 6 pupils reported clinically significant emotional and behavioural difficulties before the pandemic.[5]

Good mental health and wellbeing are positively related to academic attainment and school engagement. A report submitted to the Department of Education by the Childhood Wellbeing Research Centre at the Institute of Education at University of London, reported children with higher levels of emotional, behavioural, social, and school wellbeing, on average, have higher levels of academic achievement and are more engaged in school, both concurrently and in later years.[6] They also found that children with better emotional wellbeing make more progress in primary school and are more engaged in secondary school.

There is good evidence that creating a positive school environment can help students improve mental health. While most of the recent studies in this area focus on secondary schools, the INCLUSIVE trial in South East England has had good effects on pupil mental health[7]. The trial brought pupils and school staff together to review local data on pupil wellbeing, plan improvements to the school environment, and trained teachers in moving away from reward and punishment disciplinary models toward restorative approaches. Similar effects have been found internationally for the mental health benefits of involving pupils in shaping the school environment.

Life satisfaction

Pupils were given a picture of a ladder where the top of the ladder '10' indicates the best possible life and the bottom, '0', indicates 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 pupils who opted for 8 and above. This item is a slightly simplified version of an item used in secondary school SHRN surveys.

High life satisfaction

| Year 3	Year 4	Year 5	Year 6	School average
32%	41%	33%	36%	36%
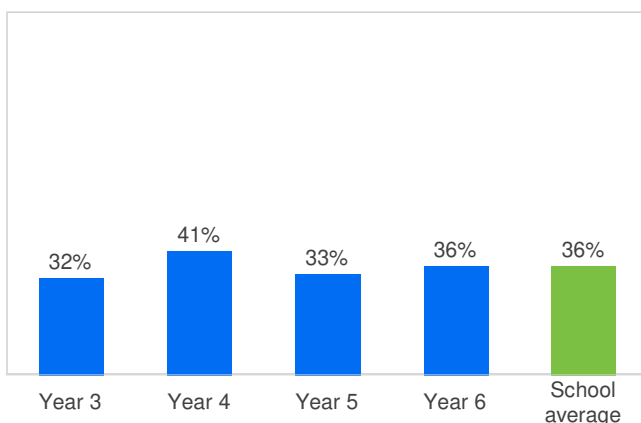
Base: School (236)

Emotions and behaviour

This section includes two measures of children's mental health, using a validated measure called the Me and My Feelings Questionnaire (MMFQ).(8) This is a different measure to that used in secondary SHRN surveys because the Strengths and Difficulties Questionnaire is not recommended for self-completion below the age of 11 years. It includes 16 questions, 10 of which relate to emotions (e.g. 'I feel lonely', 'I cry a lot' and six to behavioural difficulties (e.g. 'I get very angry', 'I break things on purpose). The first 10 form an 'emotional difficulties' score. The remaining six form a behavioural difficulties score. A score of 10-20 on the first scale is considered 'elevated' emotional difficulties, with 12-20 clinically significant. A score of 6-12 on the second scale is considered 'elevated' behavioural difficulties, with 7-12 clinically significant.
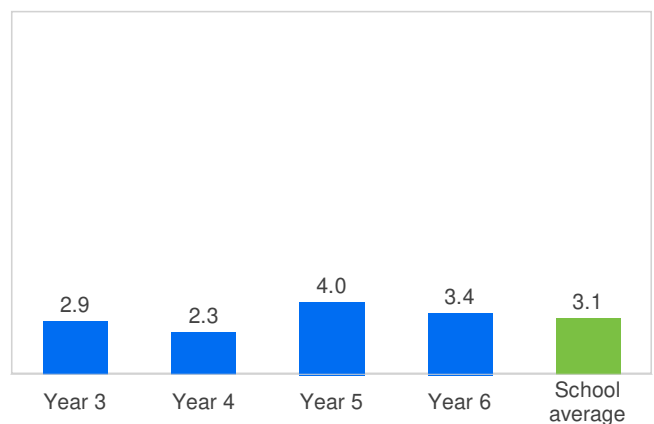
The charts below show the average score on each scale (emotional and behavioural difficulties) in your school (where numbers allow). Emotional difficulties among children appear to have increased in Wales during the pandemic, with 27% of children reporting elevated difficulties in 2021 (compared to 17% in 2019).(5) Behavioural problems do not appear to have increased to the same extent across Wales during the pandemic, but around 1 in 7 pupils report elevated behavioural difficulties.

Emotional difficulties (mean score scale of 0-20)

|	Year 3	Year 4	Year 5	Year 6	School average
Score	7.8	6.3	7.5	6.7	7.1
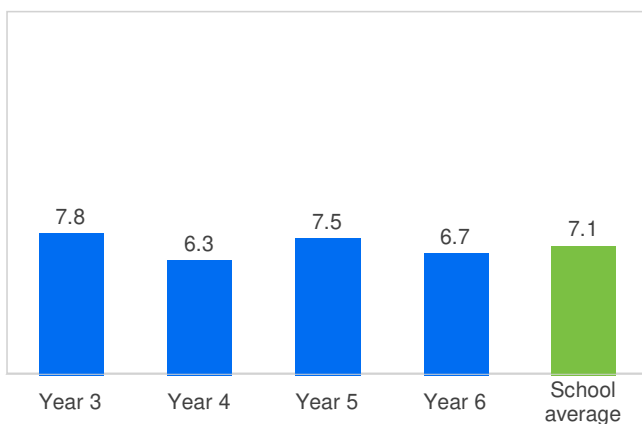
Base: School (226)

Behavioural difficulties (mean score scale of 0-12)

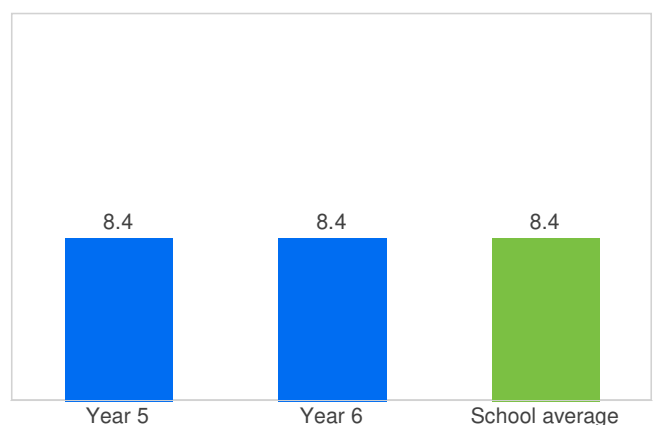|	Year 3	Year 4	Year 5	Year 6	School average
Score	2.9	2.3	4.0	3.4	3.1

Base: School (228)

Children in years 5 and 6 were also asked how happy they are with a range of different aspects of their lives, including relationships and health. These questions are from the Good Childhood Index, a validated measure developed by the Children's Society in 2010, which asks children to rate different aspects of their life on a scale of 0 (very unhappy) to 10 (very happy).(9) The first question asks how happy the child is with their life overall, which aligns to the measure of personal wellbeing used by the Office for National Statistics. There are then 10 further questions about other aspects of the child's life. The charts below represent the average (mean) score for each question.
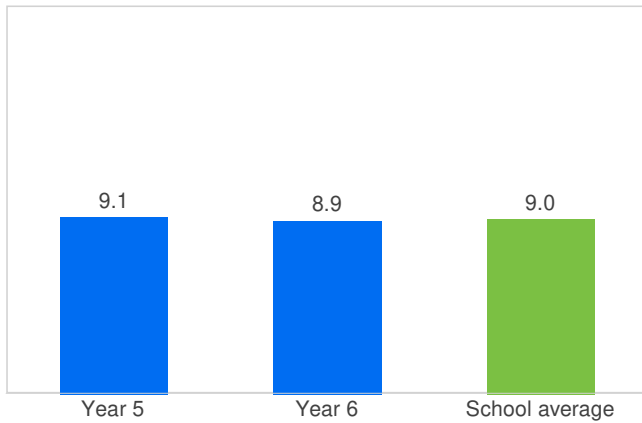
Your life overall (mean score)

	Year 5	Year 6	School average
Score	9.2	8.8	9.0
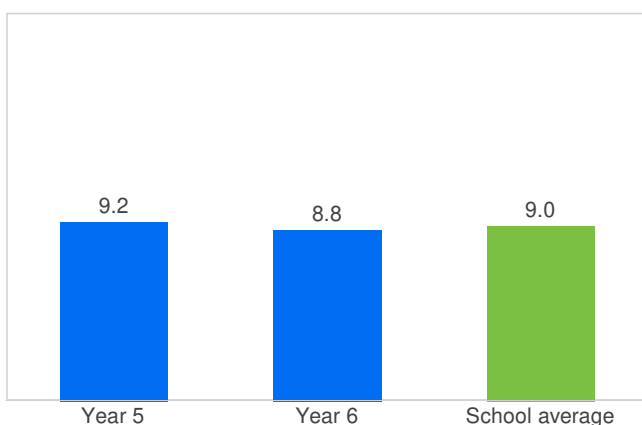
Base: School (119)

Your relationship with your family (mean score)

	Year 5	Year 6	School average
Score	8.4	8.4	8.4

Base: School (119)

The home that you live in (mean score)

Year 5	Year 6	School average
9.1	8.9	9.0

Base: School (119)

How much choice you have in life (mean score)

Year 5	Year 6	School average
8.1	8.3	8.2
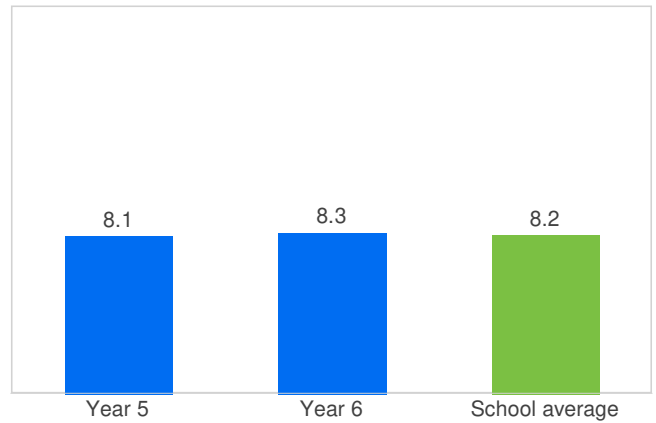
Base: School (119)

Your relationship with your friends (mean score)

Year 5	Year 6	School average
8.2	8.2	8.2
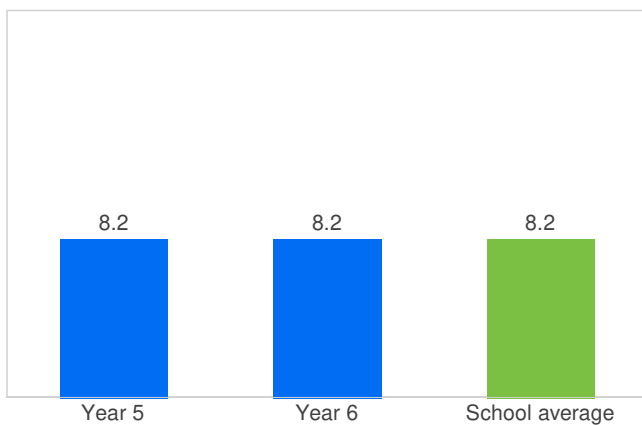
Base: School (119)

The things that you have (like money and the things you own) (mean score)

Year 5	Year 6	School average
8.9	8.9	8.9
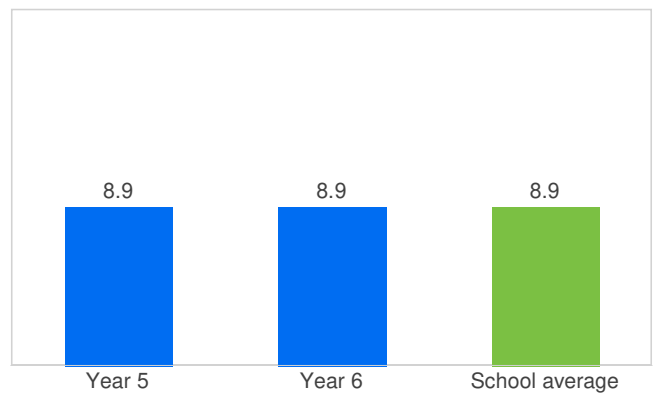
Base: School (119)

Your health (mean score)

Year 5	Year 6	School average
8.6	8.9	8.7
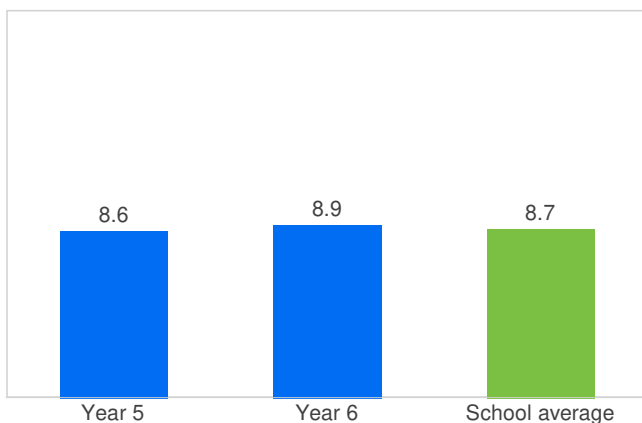
Base: School (119)

Your appearance (the way that you look) (mean score)

Year 5	Year 6	School average
7.3	7.6	7.4
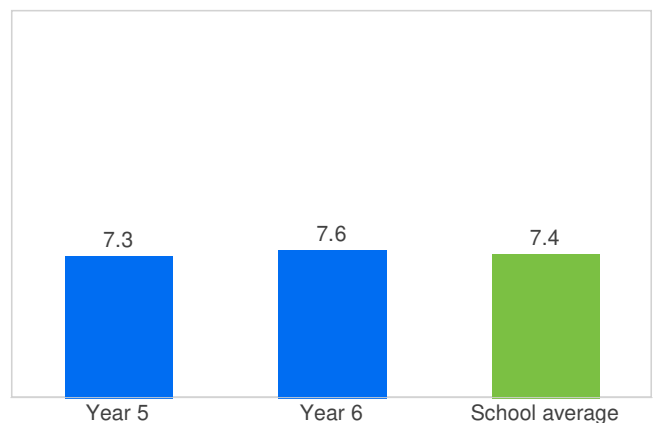
Base: School (119)

What may happen to you in later life (in the future) (mean score)

Year 5	Year 6	School average
8.2	8.4	8.3
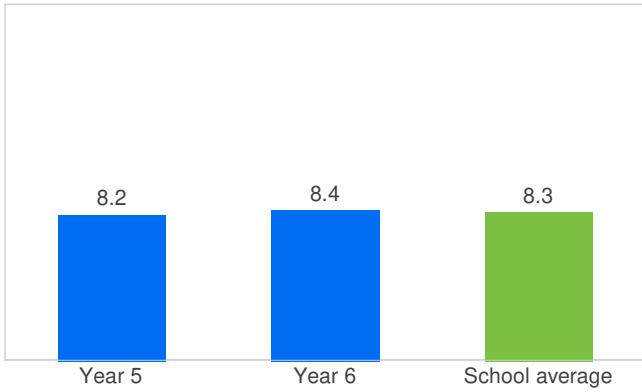
Base: School (119)

The school that you go to (mean score)

Year 5	Year 6	School average
8.2	8.3	8.3
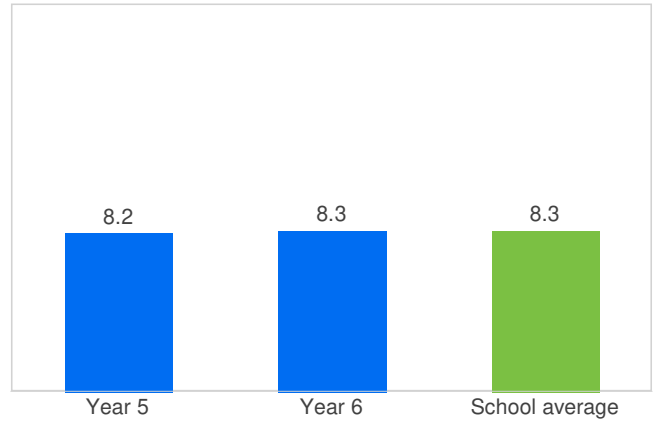
Base: School (119)

The way that you use your time (mean score)

Year 5	Year 6	School average
8.2	8.6	8.4
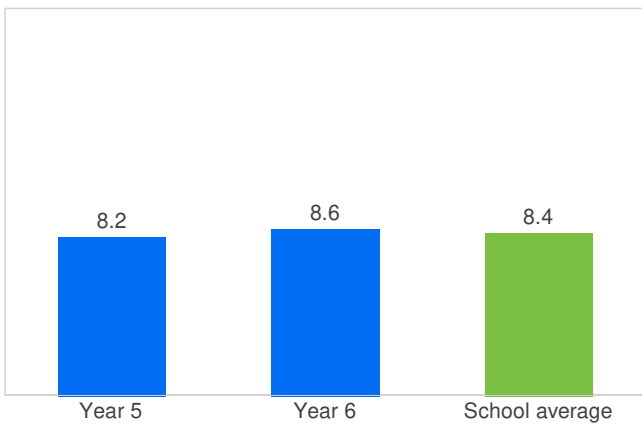
Base: School (119)

Bullying

Why is bullying an important agenda in schools?

Bullying in childhood can have lifelong impacts on mental health. Not only is it associated with depression, loneliness and low self-esteem in the short term,[10] the effects on mental health may last into adulthood, increasing risk of anxiety and depression at age 24-26.[11] Even many decades later, there is evidence that being bullied as a child is associated with greater use of mental health services.[12]

Bullying also has other wide-ranging impacts. Bullying can affect physical health and social relationships[13] and may cause sleeping problems, with the strongest effects found in younger children.[14] Bullying in childhood is also associated with lower educational attainment and earnings in adulthood.[15]

Cyberbullying may have an even greater impact on child and adolescent health than traditional bullying. Content can spread more easily to large audiences, has greater permanence and when it is anonymous, may create greater fear and insecurity.[16] The Children's Commissioner for Wales has produced a report which examines the views of children and young people aged 9 to 18 about the effects of cyberbullying in Wales.[17] Based on the findings, resource packs have been produced for primary and secondary schools. https://www.childcomwales.org.uk/dont-worry-im-here-for-you-childrens-experiences-of-cyberbullying-in-wales-3

There is often not a clear-cut distinction between children who bully and those who are bullied. In-depth research with girls in two London secondary schools found that the schools tended to rigidly identify students as either bully or victim. This belied the complex social dynamics of bullying where perpetrator and victim roles were often quite fluid and incidences of bullying were part of detailed stories of social interaction.[18]
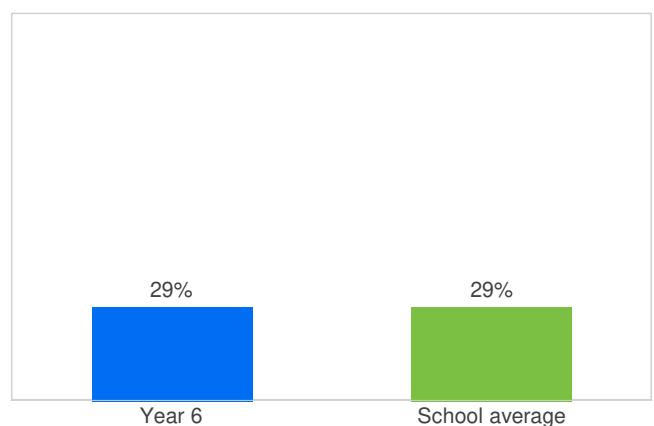
Bullying

Pupils were asked how often they had taken part in bullying at school or in cyberbullying (Year 6 only) in the previous couple of months. The percentage of pupils who said they had taken part in each type of bullying is displayed in the two charts below.

Bullying perpetration
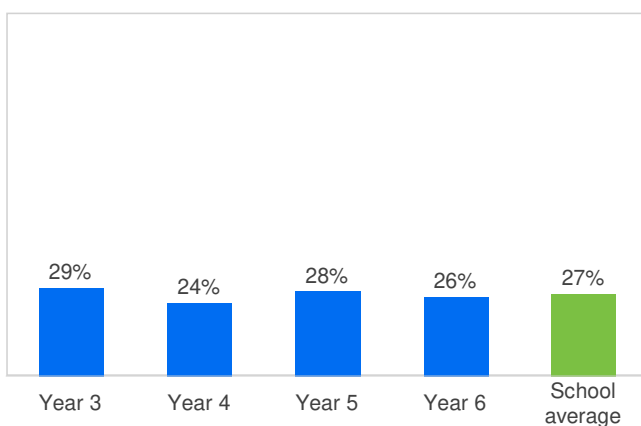
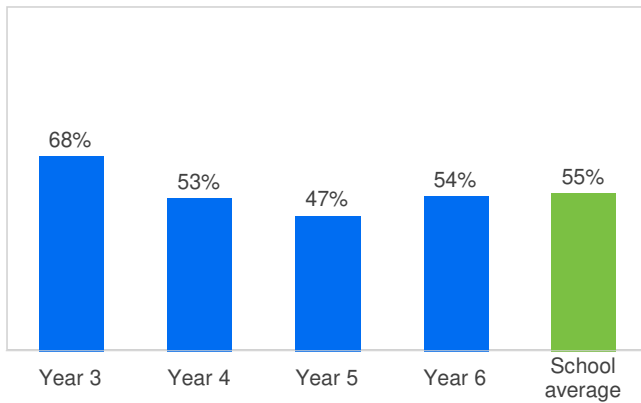Base: School (212)

Cyberbullying perpetration
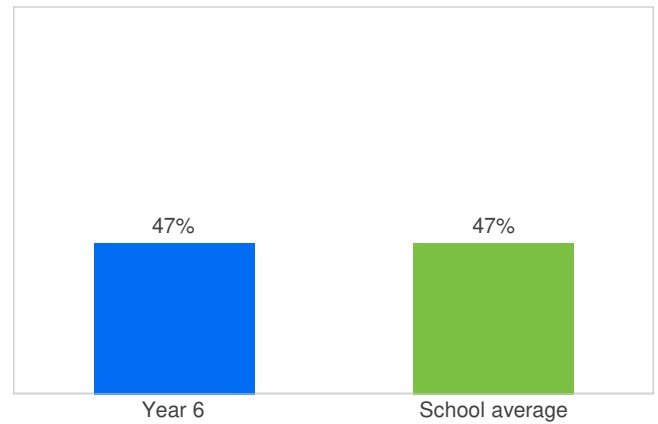

Base: School (55)

They were then asked how often they had been bullied at school or cyberbullied (Year 6 only) in the previous couple of months. The two charts displayed below represent those children who said that they had experienced each type of bullying.

Bullying victimisation

Base: School (213)

Cyberbullying victimisation

Base: School (55)

How can your school support students with their emotional and mental health and wellbeing?

In March 2021, Welsh Government published their Framework on embedding a whole-school approach to emotional and mental wellbeing. (https://gov.wales/framework-embedding-whole-school-approach-emotional-and-mental-wellbeing#content) This is issued as **statutory** guidance to governing bodies of maintained schools and local authorities in Wales.

The data included within this and future Feedback Reports will be invaluable to support the different elements of the Framework: the scoping stage, action planning and implementation and the evaluation of actions.

Contact your local Healthy Schools team for advice on all aspects of wellbeing and emotional health and recommended local support and resources	
The Children's Commissioner for Wales stands up for children and young people's rights. This work links to the United Nations Convention on the Rights of the Child. www.childcomwales.org.uk/ There are a range of bilingual resources on Children's Rights, bullying and cyber bullying https://www.childcomwales.org.uk/resources/primary-teachers/	**Welsh Government** Rights, Respect, Equality: Guidance for Schools and also for Children https://gov.wales/school-bullying
Mind Cymru provides advice for adults 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. https://www.mind.org.uk/about-us/mind-cymru/ **Mind Infoline** (9am-6pm weekdays only) 0300 1233393	**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 **Freephone** 0800 1111 (bilingual helpline) 1-2-1 online chat also available
Mentally Healthy Schools https://www.mentallyhealthyschools.org.uk/	**Hafan Cymru Spectrum Project** domestic abuse schools programme works in primary and secondary schools across Wales to teach children about healthy relationships, abuse and its consequences and where to seek help. The programme includes raising awareness of abuse amongst teachers and teaching support staff, youth workers, and other interested professionals. https://hafancymru.co.uk/projects/spectrum-project/

Health protective behaviours

Healthy eating

Why is healthy eating an important agenda in schools?

Food and drink provision in school can make a positive contribution towards children's health. By providing children with a healthy balanced diet and encouraging the development of good eating habits schools can support children to live healthier longer lives.[19] A national UK study found that primary school children who had school meals for lunch were more likely to meet daily recommendations for vegetable, protein, fibre, salt and sugar intake than children who ate packed lunches.[20]

A healthy diet is important for good growth and development and to prevent ill-health. Healthy eating supports a healthy weight and intake of important nutrients. On the other hand, being overweight or obese during childhood and youth is associated with a wide range of serious health conditions including type-2 diabetes and depression.[21] Welsh Government have recently developed a Healthy Weight Strategy to support individuals to make healthy choices and be active.[22]

What children eat and drink before and during school may affect their behaviour and attainment at school. Research has shown that dietary intake is commonly associated with adverse emotional health outcomes such as lower self-esteem.[23] An observational study using data from the Welsh Government's Primary School Free Breakfast Initiative found significant positive associations between self-reported breakfast consumption and educational outcomes.[24]

Young people's eating habits can 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.[25],[26] Research from America has also found that eating breakfast 'tracks' in the same way.[27]
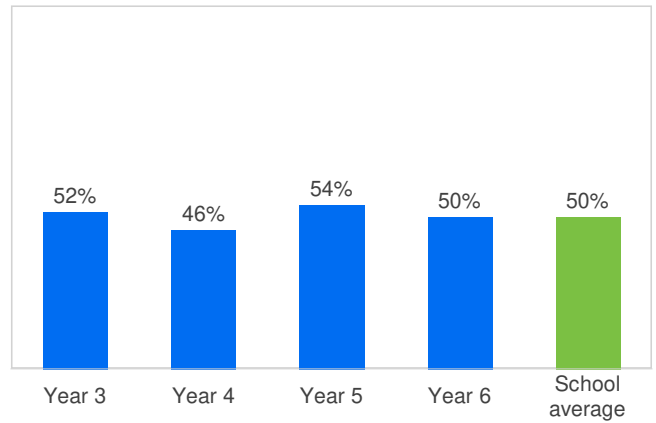
Healthy eating

Pupils were asked how many times a week they consumed the following items. The percentage of pupils saying 'at least once a day' is shown in the charts below.

Daily consumption of fruit

Year 3	Year 4	Year 5	Year 6	School average
53%	55%	58%	54%	55%
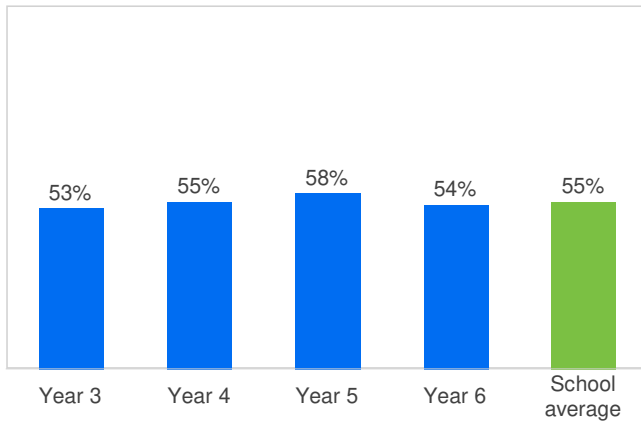
Base: School (211)

Daily consumption of vegetables

Year 3	Year 4	Year 5	Year 6	School average
52%	46%	54%	50%	50%

Base: School (214)

Daily consumption of sugary drinks

Year 3	Year 4	Year 5	Year 6	School average
22%	26%	35%	31%	29%
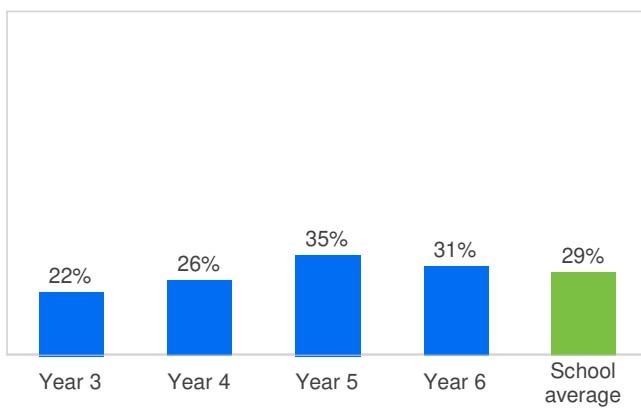
Base: School (213)

Daily consumption of water

Year 3	Year 4	Year 5	Year 6	School average
56%	50%	81%	65%	63%
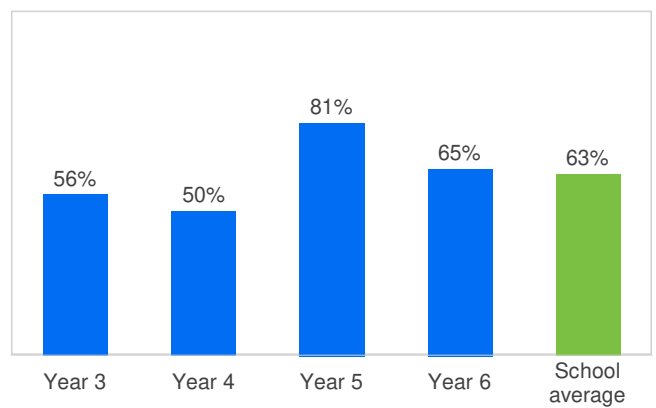
Base: School (215)

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. (28)

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 people.(29)

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 factors.(30)

Physical activity levels tend to decline as children move into adolescence, however different activities have different likelihoods of being maintained. Between the ages of 10 and 14 years, for example, around 80% of young people dropped out of skipping, gymnastics and hockey, but less than 50% dropped out of dancing, football and running.(31)

School-based physical activity programmes can help young people be active. Lots of physical activity interventions have been found not to have lasting effects and this probably depends to a large extent on how well they are integrated into schools' everyday business.(32) However, multi-component programmes (i.e. those that include education, the curriculum and the school environment) show most promise. Family involvement in the programme also appears to be important. Research shows, however, that programmes with a PE component that target boys and girls together, tend to favour the boys, whereas girls benefit when the PE component targets them separately.(33)

Physical activity
Pupils were asked how often they usually exercise in their spare time outside of school hours. The percentage of pupils saying 'four or more times a week' is shown in the chart below.

Exercising at least four times a week

	Year 3	Year 4	Year 5	Year 6	School average
	54%	63%	67%	59%	61%
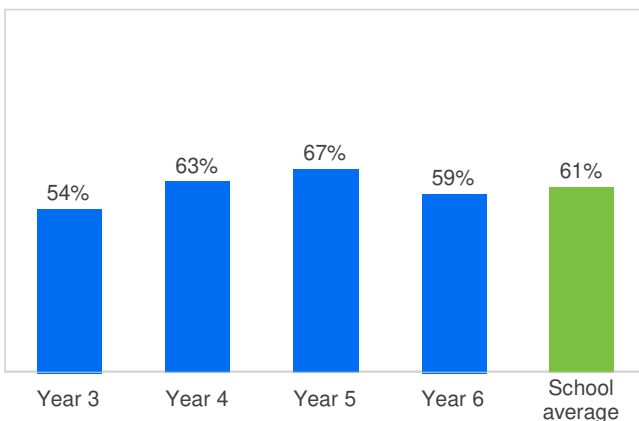
Base: School (205)

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

The food and drink provided in all local authority maintained schools must meet **the Healthy Eating in Schools (Nutritional standards and Requirements) (Wales) Regulations 2013**.[34] Your school could look for ways to share good practice and learning with other schools to support healthy lifestyles among pupils. The Welsh Government's Healthy Weight: Healthy Wales Strategy (https://gov.wales/sites/default/files/publications/2019-10/healthy-weight-healthy-wales-youth-community.pdf) includes a dedicated version for supporting young people.

Simple guidance on a healthy diet for primary schools should be based on the Eatwell Guide. https://gov.wales/eatwell-guide

It shows the proportions of the main food groups that make for a healthy, balanced diet. The proportions shown represent food consumption over the period of a day or even a week, not necessarily each meal time.

The Chief Medical Officers (CMOs) of the UK recommend that children and young people engage in moderate-to-vigorous intensity physical activity for an average of at least 60 minutes per day across the week. This can include all forms of activity such as physical education, active travel, after-school activities, play and sports. Time spent being sedentary should also be minimised. This diagram summarises the CMOs' advice.

www.gov.uk/government/publications/physical-activity-guidelines-uk-chief-medical-officers-report

Sport Wales offer a number of online resources to support sport and physical activity in schools:

https://www.sport.wales/education-and-teachers/free-access-to-sport-wales-education-resources/

Senior Leadership Team and Governors can

Ensure the school has an up-to-date Food and Physical Activity policy developed by a representative working party from all sectors of the school community. Ensure measures place responsibility on the governing body, to include in their report to parents, information about actions taken to promote healthy lifestyles among students.

Make sure that all food provision is in line with The Healthy Eating in Schools (Nutritional Standards and Requirements) (Wales) Regulations 2013.[34] There is local authority help available to support this. Training on delivering key messages in terms of healthy eating could be available from local dieticians and Local Authority catering staff.

Provide facilities in the school that encourage physical activity such as bike racks, climbing walls, measured running/walking tracks. Provide the recommended two hours Physical Education a week.

School staff can

Support teaching and learning on the issue of healthy eating and physical activity within the Health and Wellbeing area of Learning and Experience and across the whole curriculum.

Offer a variety of sports and activity clubs to appeal to a range of pupils; run a cooking club offering healthy recipes.

With the support of staff, students can

Set up pupil 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 pupils.

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.	Consider inviting local chefs to teach healthy recipes to pupils /staff/parents and representatives from local sports clubs so that pupils know about opportunities to be physically active in their free time.
Work with representatives from local agencies to support this agenda in school.	Encourage families and members of the local community to join in any food and fitness events such as a healthy eating fair and Race for Life https://raceforlife.cancerresearchuk.org/about-our-events/schools/primary-schools

Sleep

Why is sleep an important agenda in schools?

Sleep plays a crucial role in the development of young minds. According to the Sleep Foundation, in addition to having a direct effect on happiness,[35] research shows that sleep impacts alertness and attention,[36] cognitive performance,[37] mood,[38] resiliency,[39] vocabulary acquisition,[40] and learning and memory.[41]

Sleep also supports healthy growth and development. Sleep triggers the body to release the hormones that promote normal growth and tissue repair in children and teens. These hormones also support immune function and growth during puberty.[42]

Sleep deprivation is a significant hidden factor in lowering the achievement of school pupils. The analysis was part of the huge data-gathering process for global education rankings - the Trends in International Mathematics and Science Study (TIMSS) and Progress in International Reading Literacy Study (PIRLS). International researchers wanted to learn more about the influence of home life and so the tests were accompanied with questionnaires for teachers, pupils and parents about sleep patterns. This information was compared to student test results. Across all countries surveyed, on average, of pupils taking maths and science tests aged 9 to 10 years, 46% were suffering from sleep deprivation. That proportion was higher in England at 64% with the highest rates of sleep deprivation reported in the United States at 73%.[43],[44]

Bedtime

Pupils were asked what time they usually go to bed on a school night. The percentage of pupils in Years 3 and 4 saying that they go to bed at 9pm or later is shown in the first chart below, while the second chart shows the percentage of pupils in Years 5 and 6 saying that they go to bed at 10pm or later.

Bedtime for Years 3 and 4 (9pm or later)

Year 3	Year 4	Year 3&4 average
34%	58%	46%
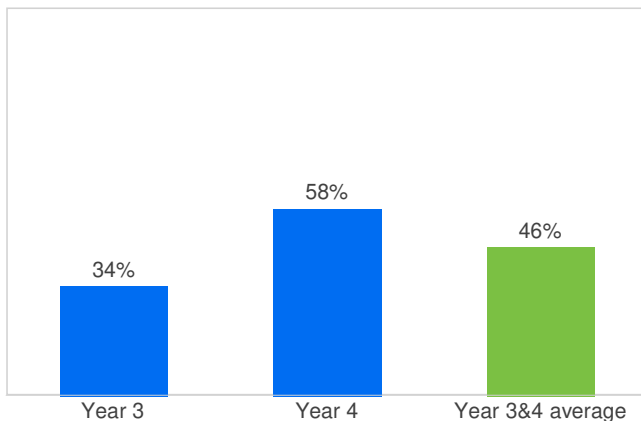
Base: School (108)

Bedtime for Years 5 and 6 (10pm or later)

Year 5	Year 6	Year 5&6 average
35%	42%	39%
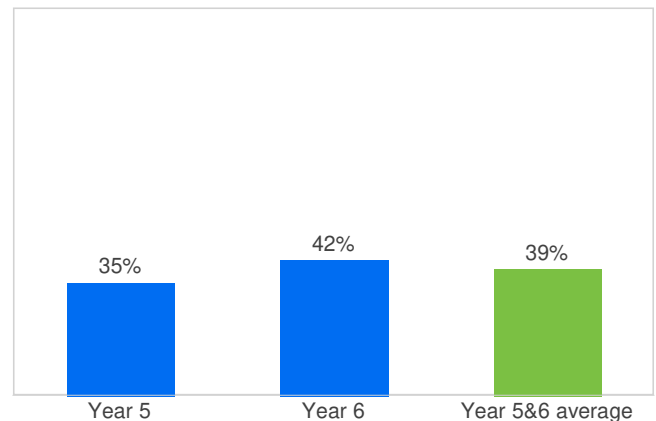
Base: School (114)

Pupils were asked if they have problems sleeping. The percentage of pupils saying they 'sometimes or always' have problems sleeping is shown in the chart below.

Problems sleeping
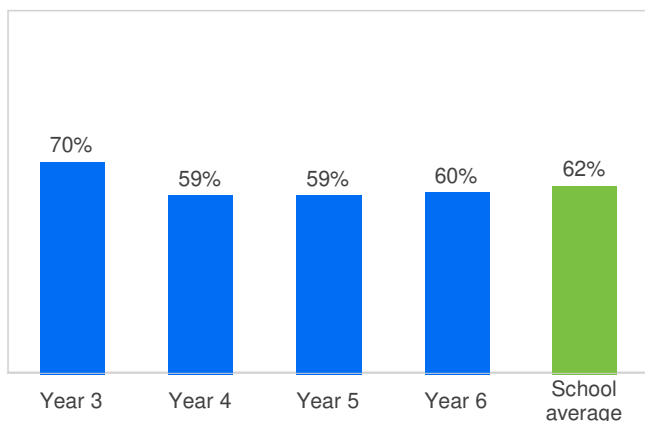
Base: School (221)

How can your school support children's sleep?

Mentally Healthy Schools: Sleep	Helpful hints and tips for schools to support healthy sleep habits among pupils	https://mentallyhealthyschools.org.uk/risks-and-protective-factors/lifestyle-factors/sleep/
Mind sleep problems guide	This guidance document from Mind aimed at adults has lots of useful information about sleep problems and ways to tackle them for use by staff in schools	https://www.mind.org.uk/media-a/5827/sleep-problems-2020.pdf

Screen use and social media

Why is screen use and social media an important agenda in schools?

The World Health Organisation recommend that consistent limits should be placed on the time children spend using forms of media, with limits on media content and minimal disruption to health promoting activities such as sleep, diet and physical activity.(45)

Digital screens have become an integral part of daily life for many children. A recent survey by Ofcom found that among children aged 8-11 years, 66% owned their own tablet and nearly one in two owned their own phone.(46) Reporting on timings and use of devices, The Insights Family global report, noted that almost a quarter of children aged 5-15 used their mobile phone or tablet at the same time as watching TV. (47)

Parents have reported greater difficulty controlling their child's screen time during the COVID-19 pandemic. While more than half of parents reported that their child had a good balance between screen time and other activities, Ofcom found that four out of ten parents found it hard to control their child's screen time in 2020, an increase for children aged 5-11 compared to 2019.(46)

Excessive screen time among children and impacts on health behaviours and outcomes are unclear. Correlation data suggest that spending more than two hours a day on recreational screen-time activities is linked to poorer cognitive scores among 8-11 year olds.(48) A review found very small associations between screen time and adiposity.(49) To date, findings linking screen time to psychological wellbeing (e.g. self-esteem and anxiety) are mixed.(50)

Screen media, especially near bedtime, is adversely associated with sleep time and quantity. There has been a growing interest in the association between screen time and sleep patterns. The vast majority of these studies indicate that the extent of screen time among children and adolescents is associated with delayed bedtime and shorter total sleep time.(51),(52),(53) Several studies also found associations between screen time and reduced sleep quality,(54),(55) and increased daytime tiredness.(56),(57) Most studies examined total daily screen time as a predictor, but even greater effects on sleep have been documented in evening media use in the bedroom (i.e., in the 1–2 hours before bedtime)(58),(59) and in use of violent media at any time.(60),(61)

Social media platforms are growing increasingly popular among children. Findings from the UK Household Longitudinal Study in 2020 indicated that moderate use of social media among 10 to 15 year olds did not significantly impact life satisfaction. Higher levels of use were however associated with lower levels of happiness, particularly among girls.(62)

While screen use is often much maligned, screens have played a vital positive role during the COVID-19 pandemic. During school lockdowns, much of children's learning occurred via screens. Smartphones and video-conferencing tools likely afforded children opportunities to remain connected with family and friends from whom they were otherwise isolated. However, there have been concerns that unequal access to digital devices in Wales and the UK may have further exacerbated inequalities during the pandemic.(63),(64),(65)
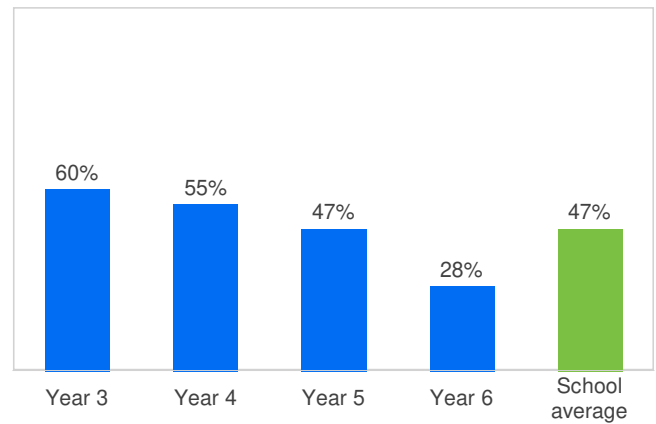
Devices

Pupils were asked if they had their own smartphone, laptop or tablet. The percentage of pupils who do own these portable devices are shown in the charts below.
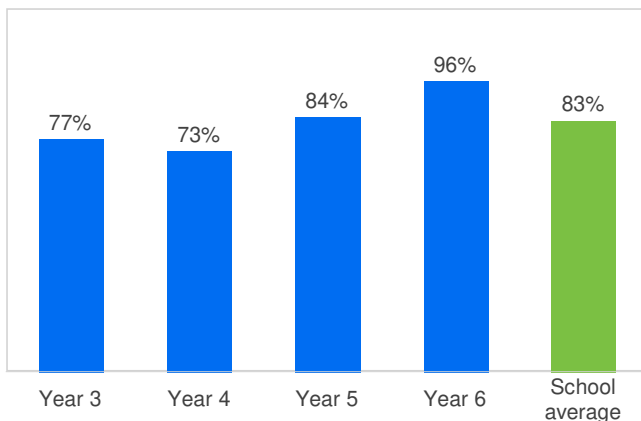
Percentage who own a smartphone

Year 3	Year 4	Year 5	Year 6	School average
40%	51%	69%	81%	61%
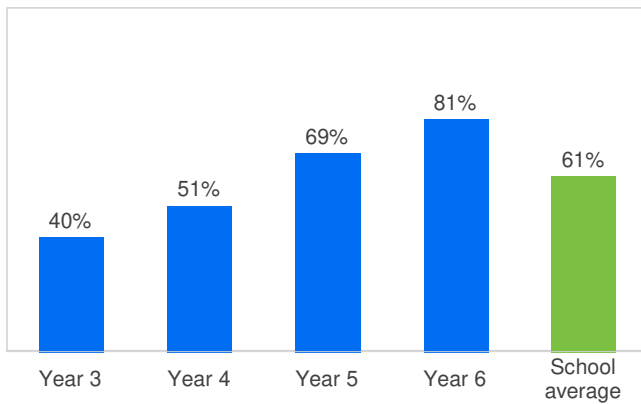
Base: School (219)

Percentage who own a computer, laptop or tablet

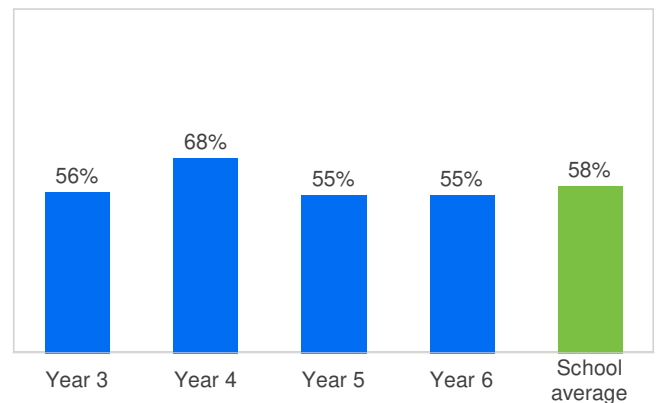| Year 3	Year 4	Year 5	Year 6	School average
60%	55%	47%	28%	47%

Base: School (219)

Pupils were asked how often they use portable devices to do the following activities. The percentage of pupils saying 'a few times a week or everyday' is shown in the charts below.

Watch videos, TV or play computer games

Year 3	Year 4	Year 5	Year 6	School average
77%	73%	84%	96%	83%

Base: School (223)

Read books

Year 3	Year 4	Year 5	Year 6	School average
56%	68%	55%	55%	58%

Base: School (218)

Speak to family or friends

Year 3	Year 4	Year 5	Year 6	School average
60%	61%	77%	87%	72%
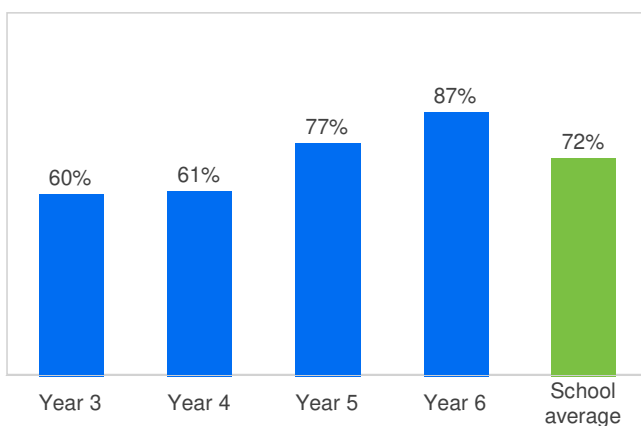
Base: School (219)

Use social media sites or apps

Year 3	Year 4	Year 5	Year 6	School average
33%	44%	62%	69%	52%
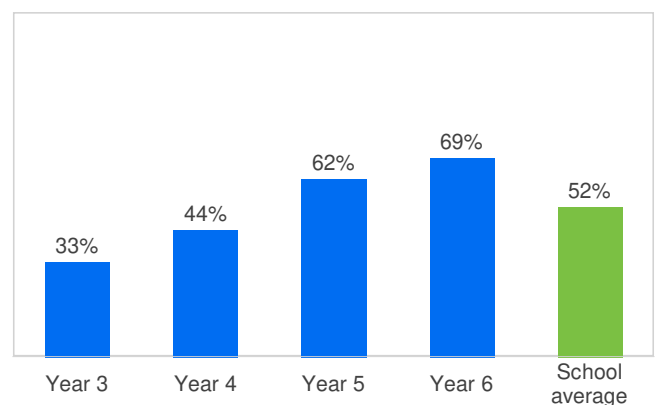
Base: School (211)

How can your school support children's screen use and use of social media?

Welsh Government	**Education for a Connected World 2020** A framework to equip children and young people for digital life. *Online safety action plan for children and young people in Wales 2019.* The document provides an update on the work Welsh Government have completed and the forthcoming planned work to keep children and young people in Wales safe online. Hwb resources on online safety for primary school staff and pupils. https://www.gov.uk/government/publications/education-for-a-connected-world https://gov.wales/sites/default/files/publications/2019-10/online-safety-action-plan-for-children-and-young-people.pdf https://hwb.gov.wales/zones/keeping-safe-online/resources/a-teacher-s-guide-to-recognising-and-challenging-online-bullying
Free online resources	There are a wide variety of resources and toolkits available online. Key resources are available on the Mentally Healthy Schools website by searching 'online safety'. https://www.mentallyhealthyschools.org.uk/resources

School connectedness

Why is school connectedness an important agenda in schools?
School connectedness refers to the extent to which a child feels accepted, supported, valued and encouraged by teachers and peers within the school environment.

A sense of belonging at school is an important protective factor for young people's mental wellbeing.
Research has shown a strong relationship between school connectedness and educational outcomes, which includes school attendance, higher exam results and better classroom test scores.[66],[67],[68],[69],[70] Our own research within secondary SHRN finds that pupils relationships with teachers and perceptions of peer relationships are associated with a diverse array of wellbeing outcomes.[71],[72]

A healthy, safe school environment with a supportive psychosocial climate enhances connectedness.
Positive school environments are typically characterised by opportunities to participate in school activities and decision-making, caring and supportive interpersonal relationships and shared positive norms and values.[73],[74] Lower reports of connectedness have been shown among students at schools with a disciplinary climate.[75],[76]
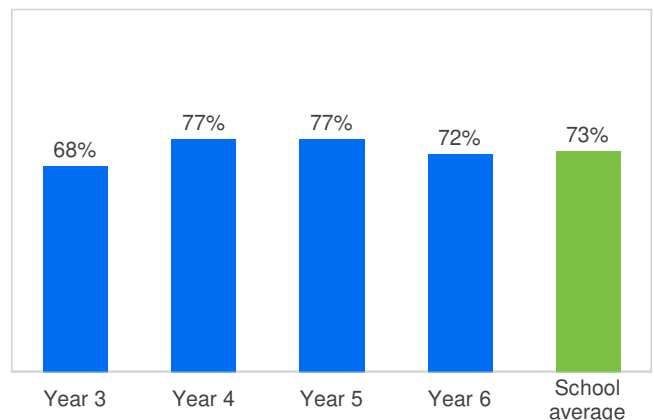
School connectedness

Pupils were asked how much they agree or disagree to the following sentences. The percentage of pupils saying they 'agree or strongly agree' is shown in the charts below. Only years 5 and 6 were asked the questions in the bottom two graphs. These items are slightly simplified versions of items used in secondary school SHRN surveys.

I feel like I belong at this school

Year 3	Year 4	Year 5	Year 6	School average
75%	71%	59%	69%	68%
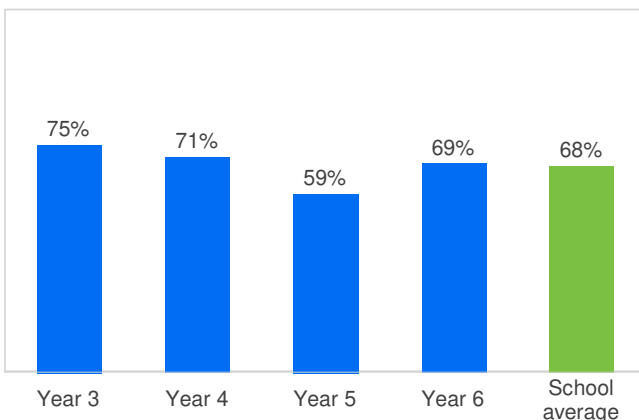
Base: School (212)

My teachers care about me as a person

Year 3	Year 4	Year 5	Year 6	School average
68%	77%	77%	72%	73%

Base: School (233)

There is at least one adult at this school I can talk to about things that worry me

Year 5	Year 6	School average
59%	63%	61%
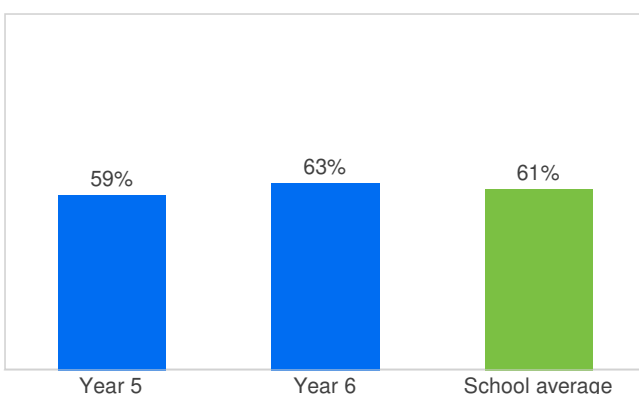
Base: School (118)

Children's ideas are treated seriously

Year 5	Year 6	School average
54%	51%	53%
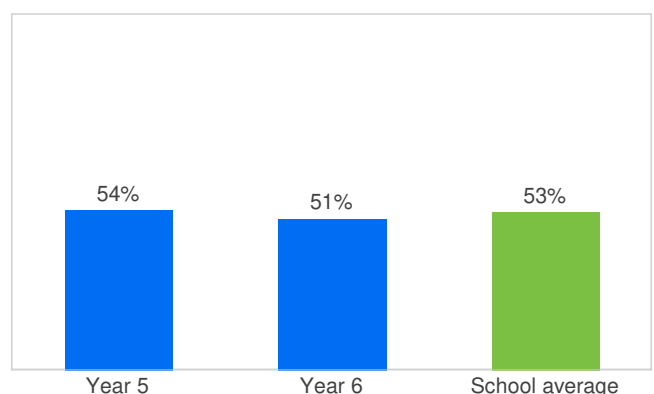
Base: School (116)

How can your school support pupil connectedness?

The Centers for Disease Control and Prevention (CDC) recommends that schools use the following strategies to increase students' feelings of connectedness to school.

1	Create decision-making processes that facilitate student, family and community engagement, academic achievement and staff empowerment.
2	Provide education and opportunities to enable families to be actively involved in their children's academic and school life.
3	Provide students with the academic, emotional and social skills necessary to be actively engaged in school.
4	Use effective classroom management and teaching methods to foster a positive learning environment.
5	Provide professional development and support for teachers and other school staff to enable them to meet the diverse cognitive, emotional and social needs of children and adolescents.
6	Create trusting and caring relationships that promote open communication among administrators, teachers, staff, students, families and communities.

The World Health Organization have produced an Information Series on School Health (https://apps.who.int/iris/bitstream/handle/10665/43733/9789241595995_eng.pdf?sequence=1) which illustrates how certain health issues can serve as entry points in planning, implementing, and evaluating health interventions as part of the development of a Health-Promoting School. Pupil involvement within decision making is central to the intervention models discussed under mental health and wellbeing.

School transition

Why is school transition an important agenda in schools?
The primary–secondary transition can impact on a child's wellbeing and academic achievement. It signifies a period of change during which it is important that children are able to voice any concerns and are supported to prepare and cope with necessary readjustments.

Transition encompasses simultaneous changes in school environments, social interactions, and academic expectations. Children, parents, carers and teachers often experience apprehensions around transition, with worries most often representing a normative short-lived response.[77],[78] A recent UK-based study found that children's concerns about secondary school were specifically associated with loneliness.[79] Findings also revealed that children experiencing mental health difficulties and those with additional educational needs were more likely to express greater transition worries, worries which were also echoed by parents and teachers. While most young people look forward to transition, many look forward to it and worry about it at the same time; within our 2019 primary school survey in Wales we found that worries about transition were more common among children with emotional difficulties or from more disadvantaged backgrounds.[5]

Transition can negatively affect pupils' emotional and psychological adjustment. Throughout the transition period, studies have shown links with numerous school behaviours including absenteeism, lower grades and behavioural issues.[80]
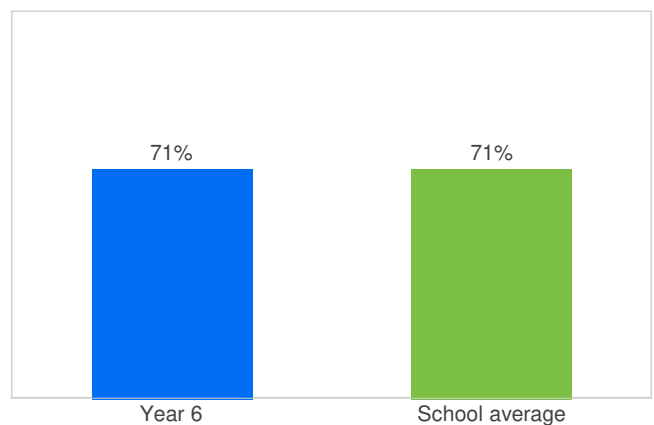
School transition

Pupils in Year 6 were asked how they feel about going to secondary school. The percentage of pupils saying 'quite a bit or very much' are shown in the charts below.

Worried about going to secondary school
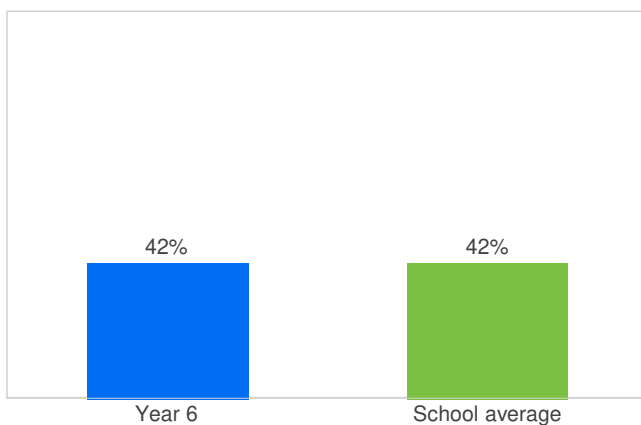
Base: School (57)

Looking forward to going to secondary school

Base: School (58)

Year 6 pupils' main worry and main thing they are looking forward to at secondary school are shown in the charts below.

The answers available for students to select were based on open responses given to an earlier survey. (9) These responses were hand coded into categories. For worries, the answer options were: being bulled; not seeing my primary school friends; school work may be harder; not knowing my way around the big school; not seeing my primary school teachers; what my new teachers will be like; other; and I'm not worried about anything. For looking forward to secondary school, the answer options were: making new friends; new subjects to learn; feeling more grown up; a new start; new teachers; better food; other; and I'm not looking forward to anything.

What is the main thing you are looking forward to about secondary school?
(Top answer for your school)

New subjects to learn   26%
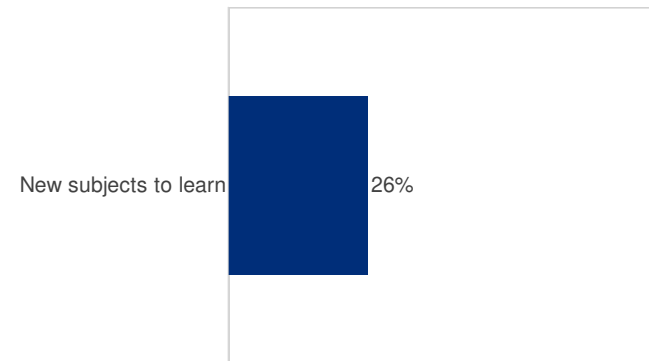
Base: School (58)

What is the main thing you that worries you about going to secondary school?
(Top answer for your school)

Being bullied   35%
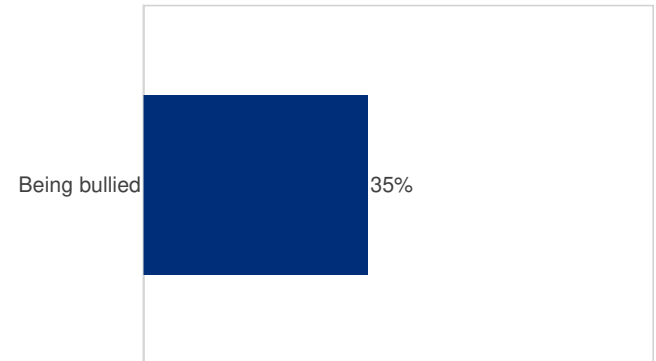
Base: School (54)

How can your school support pupil transition to secondary school?

There are a wide variety of resources and toolkits available online. A few key resources are highlighted below with many more available at the Mentally Healthy Schools website here:
https://www.mentallyhealthyschools.org.uk/resources/?SearchTerm=transition

Guiding principles include:

1. Engage with parents and carers
2. Connect with local education settings
3. Use health & wellbeing lessons to prepare pupils

Teachers
Transition to secondary school lesson plan pack https://campaignresources.phe.gov.uk/schools/resources/transition-to-secondary-school-lesson-plan-pack
Managing transitions for disabled children and SEND children https://dev-foundation-years.pantheonsite.io/files/2015/06/Section-10-Transitions.pdf
Transition assembly https://www.mentallyhealthyschools.org.uk/media/2059/transition-assembly.pdf

Parents and Carers
Transition to Secondary School - Parent/carer guidance on supporting children with transition to secondary school https://www.tinyurl.com/oxfordshire-transition

Children
Moving Up! The transition to secondary school https://www.annafreud.org/schools-and-colleges/resources/moving-up-the-transition-to-secondary-school-animation-teacher-toolkit/

Other sources of health and wellbeing data in the UK

These additional sources of data may be useful to provide context for health action planning in your school.

Good Childhood Reports https://www.childrenssociety.org.uk/the-good-childhood-report-2017	The Good Childhood Reports are a series of annual reports published by the Children's Society about how children in the UK feel about their lives.
The Millennium Cohort Study https://cls.ucl.ac.uk/cls-studies/millennium-cohort-study/	The Millennium Cohort Study is a national longitudinal birth cohort study following the lives of around 19,000 children born in the UK in 2000-01. It collects information on diverse topics such as parenting; childcare; school choice; child behaviour and cognitive development; child and parental health; parents' employment and education; income and poverty; housing, neighbourhood and residential mobility; and social capital and ethnicity.
My local school http://mylocalschool.gov.wales/?lang=en	See where your school sits in relation to other schools, local authority and nationally, and over time, on a range of education outcomes.
Sport Wales Survey https://www.sport.wales/school-sport-survey/	In addition to providing school-level reports for primary and secondary schools, Sport Wales publish data tables and a range of infographics at different levels, e.g. local authority and health board.

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