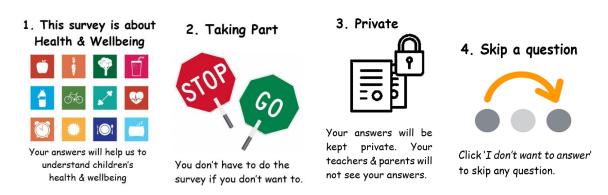
Note: this is a reproduction of the survey

The School Health Research Network (SHRN) Student Health & Well-being Survey 2024



Please read each of the sentences below carefully.

Tick the circles to show you have read, understood and agree with each of the sentences.

Please talk to your teacher if you cannot put a tick next to each sentence. You will not be able to start the survey if you leave any blank.

- My teacher told me what this survey is about.
- I have had a chance to ask my teacher questions about this survey.
- I know it is my choice if I want to do the survey.
- I know I can skip any question I don't want to answer
- I can stop doing the survey at any time but the answers I give will be used by the researchers.

Please choose one of the options below

- Yes, I want to do the survey
- No, I don't want to do the survey (your teacher will give you something else to do)

This section is about you....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'. Your teachers r parents will not see your answers.

1. What school year are you in?

Year 3

Year 4

Year 5

Year 6

2. Are you a?

Boy

Girl

Neither word describes me

I do not want to answer

3. Are you...?

Asian

Black

White

Mixed/Multiple

Gypsy, Roma or Traveller

Another background

I don't know

I don't want to answer

This section is about your home....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

All families are different.

Some children live with two parents; some live with one parent.

Some children have two homes, or live with two families, or live with their grandparents. We would like to know who you live with.

4. Think about your home, the place where you live all / or most of the time. Which adults do you live with?



rick ALL options that apply.

My Mum

My Dad

My Mum's partner

My Dad's partner

My two Mums

My two Dads

My Grandparents

My Foster parents

Other adults

I do not want to answer

(Years 5/6 only)

5. What language does your family speak at home?



Pick ALL options that apply.

English

Welsh

Another language

I do not want to answer

6. Do you have your own bedroom?

Yes

No

I do not want to answer

7. Does your family own a car, van or truck?

No

Yes, one

Yes, more than one

I do not want to answer

SHRN 2024: Reproduction of Student Questionnaire

(Years 5/6 only)

| (************************************** |
|--|
| 8. How many bathrooms (with a bath or shower in them) are in your home? 0 1 2 More than 2 I do not want to answer |
| (Years 5/6 only) |
| 9. Does your family own a dishwasher? |
| Yes No I do not want to answer |
| 10. How many computers (e.g. PCs, laptops, tablets – but NOT games consoles / smartphones) does your family own? |
| 0 1 2 More than 2 I do not want to answer |
| 11. During the past 12 month, how many times did you travel away on holiday with you family? |
| 0 1 2 More than 2 I don't know I do not want to answer |

This section is about things you do....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

12. What time do you normally go to bed if you have school the next day?

Before 7pm

Between 7 – 8pm

Between 8 - 9pm

Between 9 – 10pm

Between 10 – 11pm

Later than 11pm

I don't know

I don't want to answer

13. How many times a week do you have...?

Place a tick in each row.

| | Never | Less than once a week | Once a week | 2-4 days a week | 5-6 days a week | Once a day, every day | Every- day, more than once | I do not want to answer |
|--|-------|--------------------------------|-------------------|--------------------------|--------------------------|--------------------------------|--|-------------------------------|
| Fruits | | | | | | | | |
| Vegetables | | | | | | | | |
| Coke / soft drinks (which contain sugar) | | | | | | | | |
| Sweets (candy or chocolate) | | | | | | | | |
| (only asked to Y5/6) Energy drinks (e.g. PRIME, Red Bull, Monster etc) | | | | | | | | |
| Tap or bottled water (NOT flavoured or squash) | | | | | | | | |

14. How often do you have school dinners or a packed lunch at school during the week?

| | Never | 1 day a week | 2 days a week | 3 days a week | 4 days a week | Everyday | I don't want to answer |
|---------|-------|-----------------|------------------|------------------|------------------|----------|------------------------------|
| School | | | | | | | |
| Dinners | | | | | | | |
| Packed | | | | | | | |
| Lunch | | | | | | | |

15. How many times did you brush your teeth YESTERDAY?

1

2

More than 2

I did not brush my teeth

I don't want to answer

16. How do you normally get to school?

Walk

Bike

Bus, train, tram or boat

Car, taxi, motorcycle or moped

Another way

I do not want to answer

This section is about health....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

Physical activity is any activity that makes your heartbeat faster and makes you get out of breath some of the time.

Physical activity includes sports, school activities, playing with friends, or walking/biking to school.

17. In the last 7 days, how many days did you do physical activity for at least 1 hour in total?

0 days

1-2 days

3-4 days

5-6 days

7 days

I don't know

I do not want to answer

(Years 5/6 only)

18. Why are you active?

Below are some reasons why you might be active.

Think about why you might be an active young person. Put a tick in each row showing if this reason sounds "Not true for you", "Sometimes true for you" or "Very true for you".

| | Not true for me | Sometimes true for me | Very true for me | I do not want to answer |
|--|--------------------|--------------------------|---------------------|-------------------------------|
| Being active is fun | | | | |
| It is important to me to do active things | | | | |
| When I'm not active, I feel bad | | | | |
| Other people say I should be active | | | | |
| I enjoy being active | | | | |
| Being active is important to me | | | | |
| When I don't do activity I feel bad about myself | | | | |
| If I don't, other people will not be pleased | | | | |
| with me | | | | |
| I like being active | | | | |
| In life it is important to be active | | | | |
| I want to show other people how good I am | | | | |
| Other people pressure me to be active | | | | |

(Years 5/6 only)

A vape is a device that a person uses to breath in a vapour. The vapour often contains nicotine or is flavoured.

19. Have you ever tried a vape?

No

Yes, once

Yes, more than once

I don't know

I don't want to answer

(Years 5/6 girls only)

The next question is about puberty.

20. Have you had your first period?

Yes

No

I don't know

I don't want to answer

(If yes)

21. When did you have your first period?

SHRN 2024: Reproduction of Student Questionnaire

Year 4

Year 5

Year 6

I don't know

I don't want to answer

This section is about your feelings....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

22. Below are some sentences about how you might feel.

There are no right or wrong answers.

You should just pick the answer which is best for you.

Place a tick in each row.

| | Never | Sometimes | Always | I do not want to answer |
|--|-------|-----------|--------|-------------------------------|
| 1. I feel lonely | | | | |
| 2. I cry a lot | | | | |
| 3. I am unhappy | | | | |
| 4. Nobody likes me | | | | |
| 5. I worry a lot | | | | |
| I have problems sleeping | | | | |
| 7. I wake up in the night | | | | |
| 8. I am shy | | | | |
| 9. I feel scared | | | | |
| 10. I worry when I am at school | | | | |
| 11. I get very angry | | | | |
| 12. I lose my temper | | | | |
| 13. I hit out when I am angry | | | | |
| 14. I do things to hurt people | | | | |
| 15. I am calm | | | | |
| 16. I break things on purpose | | | | |

| 23. On a | scale of 0-10, now would you rate your life at the moment |
|----------|---|
| 10 | 0 – I have the <u>best</u> possible life |
| 9 | |
| 8 | |
| 7 | |
| 6 | |
| 5 | |
| 4 | |
| 3 | |
| 2 | |
| 1 | |
| 0 | – I have the <u>worst</u> possible life |
| 1. | do not want to answer |

(Years 5/6 only)

24. In the last 6 months, how often have you...?

★ Place a tick in each row.

| | Never | Rarely | About once a month | About every week | More than once a week | About every day | I do not want to answer |
|--------------------------------------|-------|--------|--------------------|------------------------|-----------------------|-----------------------|-------------------------------|
| Felt low | | | | | | | |
| Felt irritable or bad tempered | | | | | | | |
| Felt nervous | | | | | | | |
| Had difficulty getting to sleep | | | | | | | |

This section is about school....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

25. How do you feel about school?

I like it a lot
I like it a bit
I don't like it very much
I don't like it at all
I do not want to answer

(Years 5/6 only)

26. Thinking about the <u>children in your class</u>, how much do you agree or disagree with the following sentences...?

rick in each row.

| | Strongly agree | Agree | Neither agree / disagree | Disagree | Strongly disagree | I do not want to answer |
|-------------------------------------|-------------------|-------|-----------------------------|----------|----------------------|-------------------------------|
| Children enjoy being together | | | | | | |
| Most children are kind & helpful | | | | | | |
| Other children accept me as I am | | | | | | |

27. Thinking about <u>children in your school</u>, how much do you agree or disagree with the following sentences...?

Place a tick in each row.

| | Strongly agree | Agree | Neither agree / disagree | Disagree | Strongly disagree | I do not want to answer |
|--|----------------|-------|--------------------------------|----------|----------------------|-------------------------------|
| (Years 5/6 only) Children have a say in planning school activities | | | | | | |
| (Years 5/6 only) Children have a chance to help plan school projects | | | | | | |

| (Years 5/6 only) Children's ideas | | | |
|--------------------------------------|--|--|--|
| are taken seriously | | | |
| I feel like I belong at this school | | | |

28. Thinking about <u>adults in your school</u>, how much do you agree or disagree with the following sentences...?

Place a tick in each row.

| | Strongly agree | Agree | Neither agree / disagree | Disagree | Strongly disagree | I do not want to answer |
|---|-------------------|-------|--------------------------------|----------|----------------------|-------------------------------|
| (Years 5/6 only) My teachers accept me as I am | | | | | | |
| My teachers care about me as a person | | | | | | |
| (Years 5/6 only) I trust my teachers | | | | | | |
| (Years 5/6 only) I can tell at least one adult in my school if I'm worried about anything | | | | | | |

29. In the summer holidays, some schools run holiday clubs that include meals and activities, did you attend a summer holiday club at your school?

No

Yes, I went to club for 1 - 5 days

Yes, I went to club for 6 - 10 days

Yes, I went to club for more than 10 days

I can't remember

I do not want to answer

(This section asked to Year 6 only)

This section is about going into Year 7....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

30. How do you feel about going into Year 7?

Place a tick in each row.

| | Not at all | Very little | Some | Quite a bit | Very much | I do not want to answer |
|--|------------|----------------|------|-------------|--------------|-------------------------------|
| Are you <u>looking forward</u> to going into Year 7? | | | | | | |
| Are you <u>worried</u> about going into Year 7? | | | | | | |

31. What is the main thing you are looking forward to about going into Year 7?



Conly pick one answer

Making new friends New subjects to learn Feeling more grown up A new start New teachers Better food I'm not looking forward to anything Other I do not want to answer

32. What is the main thing that worries you about going into Year 7?



Conly pick one answer.

Being bullied 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 I'm not worried about anything

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This section is about bullying....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

Please talk to your teacher or parents if you are worried about anything.

We say a person is BEING BULLIED when:

- another person or a group of people keep saying or doing nasty things to them,
- a person is teased in a way they do not like,
- a person is left out of things on purpose.

33. How often have **YOU** bullied another person at school in the past couple of months?

I have not bullied anyone
It has happened once or twice
It has happened more than twice
I do not want to answer

34. How often have you **BEEN bullied** at school in the past couple of months?

I have not been bullied
It has happened once or twice
It has happened more than twice
I do not want to answer

(This section asked to Year 6 only)

This section is about cyberbullying (online bullying)....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

Please talk to your teacher or parents if you are worried about anything.

We say a person is BEING CYBERBULLIED (bullied online) when someone:

- sends unkind or nasty online messages to them,
- posts unkind or nasty things online to make fun of them,
- posts or tags them in unkind or nasty online pictures without their permission.

35. In the past couple of months, how often have YOU taken part in cyberbullying?

I have not cyberbullied anyone It has happened once or twice It has happened more than twice I do not want to answer

36. In the past couple of months, how often have you BEEN cyberbullied?

I have not been cyberbullied It has happened once or twice It has happened more than twice I do not want to answer

This section is about electronic devices & social media....

If there are any questions you don't want to answer, you can pick 'I do not want to answer'.

37. Do you have your own...?



rick ALL that you have.

Smartphone (such as an iphone) Computer or laptop Tablet (such as an ipad or kindle) None of the above I do not want to answer

Portable devices are smartphones and tablets. They are any screen you can easily move around the house or perhaps use outside.

38. How often do you use portable electronic devices to do the following...?

Place a tick in each row.

| | Never | Less than once a week | Once a week | A few times a week | Everyday | I don't want to answer |
|--|-------|--------------------------------|----------------|--------------------------|----------|------------------------------|
| Watch videos | | | | | | |
| Watch TV/films | | | | | | |
| Play computer games | | | | | | |
| Read books | | | | | | |
| Speak to your family online | | | | | | |
| Speak to your friends online | | | | | | |
| Use social media sites or apps (such as Snapchat, Tiktok, Instagram. Facebook etc) | | | | | | |

Thank you for completing!

Please press the 'submit' button to send your survey to us.

If you have any questions or want to talk about any of the topics covered in the survey then please speak to your teacher.

You can also contact Childline on 0800 1111.