Every Child Matters

Every Child Matters in Derbyshire

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Report 2	Staying safe
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Report 4	Positive contribution
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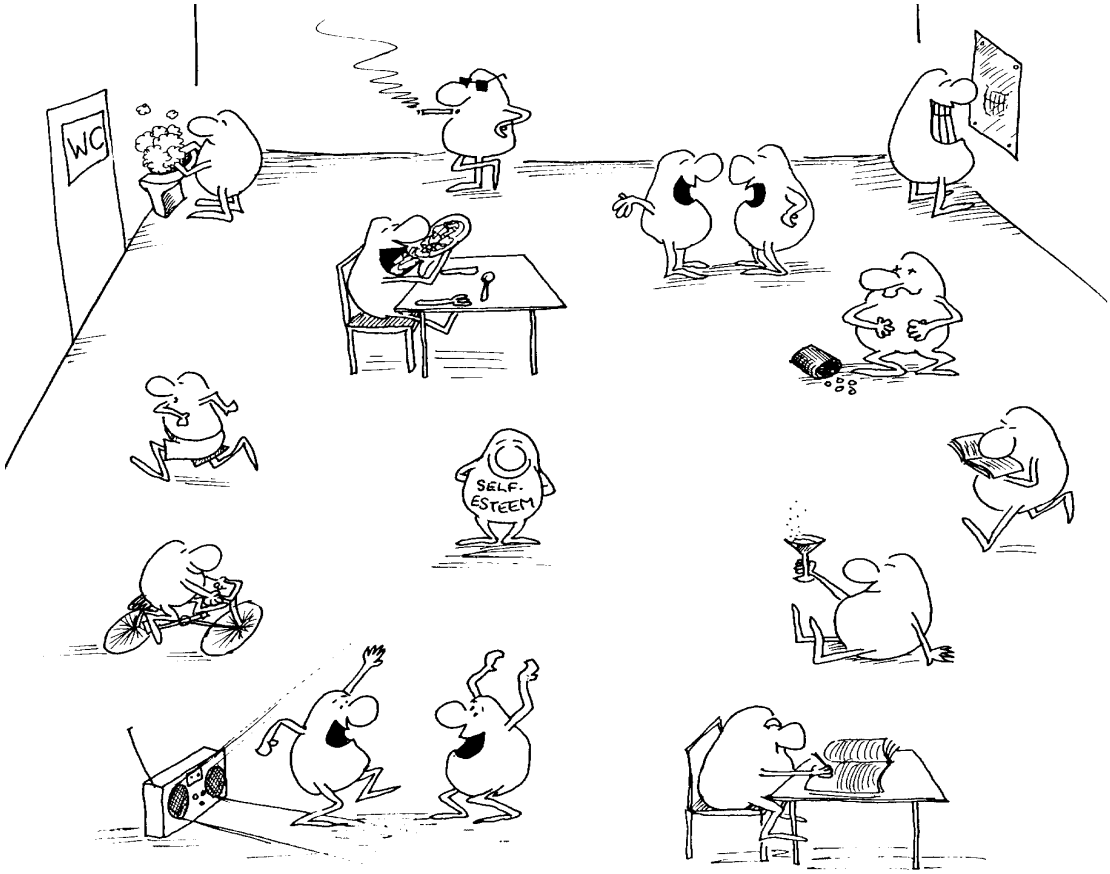

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EXECUTIVE SUMMARY

This report arises from a survey of young people in secondary schools in Derbyshire conducted in the Summer of 2009, following an earlier study in 2007. It was commissioned by Derbyshire County Council and led by Steve Ford (School Improvement Adviser). 14

The questionnaire was designed by advisers in Derbyshire in collaboration with local teachers and SHEU.. 14

Each school was asked to provide at least 100 pupils per year group (about 4 classes) who are a representative cross-section of their school population. 18

To ensure that we had the opportunity to compare like with like, we identified 4 schools which also conducted the survey exercise in 2007 and 2009. 18

Three-quarters of pupils agree that *The school encourages me to be physically active* 20

Only 33% of pupils agreed that their school encourages them to walk or cycle to school. 20

35% say they have tried smoking in the past or smoke now. 22

11% in the survey smoked at least one cigarette during the last 7 days. 22

39% say that they have at least one person who regularly smokes at home 22

34% had at least one alcoholic drink in the last week. 23

The most common sources of alcohol, as we might expect, are friends and family 23

10% of pupils report that alcohol was bought for them from a shop. 23

If drinking was ever done at home, 62% of the pupils say it always took place with their parents' knowledge. 24

43% reported they were 'fairly sure' or 'certain' that they knew someone who used drugs that were not medicines. 25

21% of pupils have been offered cannabis, a figure that is very similar to the 2007 result 25

15% say they have taken some form of illegal drug themselves. 26

32% of Year 10 pupils report that have been offered cannabis, 17% say they have ever used cannabis, and 9% have used cannabis in the last month. 26

96% agreed with at least one statement about being in control of their health (Q67a&c). 29

76% in the survey think they can trust 3 or more adults. 30

5% in the survey think there are no adults they can trust. 30

31% are usually 'at ease' meeting people of their own age 30

58% of the pupils said 'When a friend wants me to do something I don't want to do… I can usually or always say no'. 30

93% of the pupils have at least one close friend 31

Males and females share a view about the two most important features of a friendship: 'have fun together' and 'can be honest with each other'. *females* rated much more highly than did males the item 'can talk about feelings together', which 89% of females gave as important. 31

When thinking about relationships with boy- or girl-friends, honesty and fun were seen as the most important dimensions of dating relationships by both males and females 31

The awareness of Year 10 pupils about sexually transmitted infections is quite good, and best of all for HIV/AIDS. However, while HIV is very important it is a less common infection in the UK than all the others mentioned in the question. 32

43% believe there is a special contraception and advice service for young people available locally. 33

Condoms were widely seen by Year 10 pupils as reliable to stop pregnancy and (to a lesser extent) to stop infections; this was also found in 2007 33

Looking at the above table, there seems to be a high degree of consensus among the pupils that they have learnt about the dangers of smoking (85%) and taking drugs (83%). 34

33% of pupils reported they felt afraid of going to school because of bullying at least 'sometimes'..... 35

The responses from pupils in Derbyshire to statements about enjoying and achieving are generally positive. 38

The two statements that pupils were most likely to agree with were the same as in the last survey, namely: 'the school expects the best behaviour from me' and 'I am expected to come to school every day and on time'. 38

Year 10 students are less positive about 'enjoying and achieving' statements than are Year 8 pupils..... 40

A large proportion of pupils feel that the school *wants them to think for themselves* and that the school *encourages them to get on with other people.* These items also scored well in the 2007 sample..... 41

Year 10 students are less positive about 'support and inclusion' statements than are Year 8 pupils..... 42

82% of pupils in the survey worry about at least one problem 'Quite a lot' or 'A lot'. 42

The issues most likely to be worried about by pupils are *exams and tests* and *the way you look*..... 43

70% of pupils say that there is someone they can talk with about things that worries them: 'most things' or 'almost everything'..... 43

There was a single statement about Making a Positive Contribution that more than half of the pupils agreed with: 'the school helps me know about rights and responsibilities' (52%). This was also one of the higher-scoring items in 2007. 44

Paper surveys come top of the list of preferred methods of consultation for young people in Derbyshire, but as noted in 2007 this may be prompted by the method used to ask the question..... 46

Talking to teachers was the most common way that pupils thought they were listened to in school, with about a quarter so reporting. 47

61% of pupils felt that their *teachers help them if they have difficulties in lessons*; this was the statement with the highest consensus among pupils..... 48

Less than a quarter of pupils agreed with the statement *'some people in this school are treated badly because if the colour of their skin'* and around half of the pupils felt that, *at their school, it is OK to be different*..... 48

42% of pupils receive pocket money regularly..... 50

8% of pupils received more than £10 pocket money on the last occasion..... 50

30% of pupils have a regular paid job during term-time. 50

97% of the 2009 sample in Derbyshire report that they are of White UK ethnic background; this is rather higher than we see in the reference sample (72%)..... 50

21% of the survey sample report having a long-term illness or disability (9% did not know); the most common reported condition was asthma (11%)..... 50

4% of the sample report having a statement of special educational needs (10% did not know)..... 50

2% of the sample report living in a care home or with foster carers, which is similar to that reported in the SHEU reference sample (2% were not sure how to respond)..... 50

50% of the sample were female. 50

KEY POINTS

- These schools have had a chance to review and respond to their results, and so changes in these schools may not be seen in the whole Derbyshire samples (and vice versa). 19
- A minority of pupils think that people at school are helpful in case of being unwell, a finding that also appeared in the 2007 study. 20
- Year 10 students are much less likely to agree with each of the statements about Being Healthy than are Year 8 pupils. This is particularly true of *The school encourages me to eat healthily and to drink water regularly,* where we see a drop from 60% in Year 8 to 43% in Year 10. 20
- Several of the statements are more likely to be agreed with by Year 8 pupils in 2009 than the same age pupils from 2007, including *The school encourages me to be physically active*..... 20
- The figures for *crisps* and *fizzy drinks on most days* among boys in the repeat sample in 2009 are rather higher than they were in 2007. 21
- The figures for eating *High-fibre cereals or muesli rarely or never* among boys in the repeat sample in 2009 are rather higher than they were in 2007. 21
- The figures for smoking experience from Derbyshire in 2009 are lower than those from 2007 in both the overall and the repeat samples. 22
- It seems that over a third of pupils in Derbyshire may be exposed to cigarette smoke at home (39%); though this seems less than in the reference sample (45%). This is similar to the findings in 2007. 22
- Smoking at home is reported a little less often in the 2009 samples than in the 2007 samples. 22
- Drinking in the last week is reported a little more often in the overall and the repeat 2009 samples than in the equivalent 2007 samples. 23
- SHEU data from across the country show that the home is generally the most common source and site of drinking alcohol up to the age of 16, and this is also true in Derbyshire. 23
- It is important to note that reports of offers of illegal drugs exceed reports of experimentation. This suggests that many if not most pupils in Derbyshire are quite capable of refusing an unwelcome offer of a drug. 26

It is interesting to track changes between Year 8 and Year 10 in the attitudes of pupils towards the most commonly used illegal drug, cannabis. 27

Typically, Year 10 pupils are both more aware of the names of different types of drugs and more aware of the dangers, but for cannabis, Year 10 pupils are more sanguine about the risks of using cannabis than are Year 8 pupils. 27

- The proportion of pupils regarding cannabis use as 'always unsafe' increased from 48% to 54% between 2007 and 2009 in both the overall and the repeat samples. 27
- Results for the drug questions in Derbyshire in 2009 were similar to the reference sample; one of the few significant differences is that more Year 10 pupils in Derbyshire believe that cannabis is *always unsafe* (49%) than do Year 10 pupils in the reference sample (37%), and we might expect that this would translate into a lower propensity to use cannabis. As similar finding occurred in 2007 27
- A suggestion in the 2007 figures that self-esteem scores were not as high in Derbyshire as in the reference sample is not supported in 2009. 28
- The figure for being 'at ease' meeting people of their own age is higher in 2009 than in 2007 in both the overall and repeat samples. 30
- The figure for being able 'usually or always say no' when a friend wants me to do something I don't want to do is higher in 2009 (58%) than in 2007 (54%) (this is seen in both the overall and repeat samples). 30
- 1% of the pupils say that they don't have any real friends. 31

- The proportion of Year 10 pupils in Derbyshire who correctly identified *Chlamydia* and gonorrhoea as treatable and curable in 2009 was markedly higher than in 2007 in both the overall and repeat samples... 32
- The proportion of Year 10 pupils in Derbyshire who correctly identified *Chlamydia* and gonorrhoea as treatable and curable in 2009 was much higher than in the reference sample; this repeats a similar positive finding in 2007. 32
- The proportion of Year 8 pupils in Derbyshire in 2009 who reported awareness of a local sexual health service for young people was markedly higher than in 2007 in both the overall and repeat samples..... 33
- Compared with the reference sample, the proportion of Year 10 pupils in Derbyshire in 2009 who reported awareness of a local sexual health service for young people was markedly higher..... 33
- Year 8 pupils in 2009 were aware of a greater number of contraceptive methods than those in 2007 in both the overall and repeat samples; they were also more confident about the prophylactic use of condoms. 33
- Year 10 pupils in Derbyshire showed greater confidence in the reliability of condoms as methods of preventing pregnancy and in preventing infections than did those in the reference sample..... 33
- A relatively small proportion of pupils agreed that their school makes school areas safe for them (47%) and 37% of pupils either did not feel safe or were not sure that they feel safe at school. 34
- For many of the statements regarding learning about Staying Safe, Year 10 pupils were just as positive as the Year 8 pupils..... 34
- For statements about being safe at school and bullying, the Year 10 pupils were less likely to agree than the Year 8 pupils; those Year 10 pupils who do not positively agree are split between those who are not sure and those who definitely disagree..... 34
- Results for Derbyshire seemed rather higher than in the reference sample, but this difference is much smaller for the overall sample in 2009..... 35
- Derbyshire pupils seem more likely to report instances of bullying than do those in the reference sample. *This repeats a finding from 2007.* 35
- It is important to note that the proportion of pupils who sometimes feel afraid to go to school because of bullying exceeds the proportion who have actually experienced bullying in the last year..... 35
- Males were more likely than females to say 'fairly sure' or 'certain' about friends carrying weapons for protection. The most commonly reported weapon for the males was a knife or other item with a blade.. 37
- The most notable exception to the positive picture about enjoying and achieving was the statement *I know what I am going to learn next*, where more pupils disagreed than with the statement than agreed with it. This was the same picture as in 2007..... 38
- Looking at only the repeat schools from 2009, there are some significant shifts in perceptions of enjoying and achieving since 2007, mostly positive..... 39
- About a quarter of pupils disagree with the two statements *This school teaches me the value of friendship* and *People listen to what I have to say*. 41
- About 60% of pupils in Derbyshire agree that *The school helps me work as part of a team*, which compares with 40% of the reference sample. 41
- Looking at the repeat schools only, there are some significant shifts in perceptions of support and inclusion since 2007, all of which are positive..... 42
- This proportion of pupils reporting worry about at least one issue is very similar to the proportion found in the 2007 sample (85%) and just as in 2007 is higher than we see in the reference sample (75%)..... 42
- We see that females are more likely to express worry about any of the issues than are the males. 43
- The item least often agreed with was: 'the school teaches me how to manage my feelings' (29%)..... 44
- Although a third of pupils report that they take their chances to give their views about 'Life in school', they are not all convinced that giving their views makes much difference. 46

• There seems to be a sense that pupils feel that their school helps them academically and helps prepare them for further education, but most do not see that learn about money and business. Less than a third of pupils agreed that they have *learnt about how to manage money at school.* 48

• Pupils in Derbyshire are more likely to have a regular paid job during term time than those in the reference sample. 50

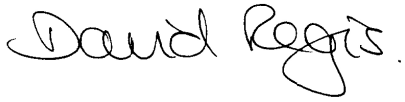
Foreword

Every Child Matters is the Government White Paper about caring for children. It describes five sets of outcomes for young people.

This report describes results from a consultation exercise with young people where, for each outcome area, they tell us what their lives are like, and how well we are looking after them.

Such a comprehensive data base provides everyone involved with young people, be they parents, professionals or volunteers, with the opportunity to reflect and consider whether service delivery is consistent with the survey findings; it offers opportunity to better engage with students because it improves the probability of relationships based on fact rather than supposition.

It is hoped that this report will encourage a wide-ranging debate that will define the actions to achieve good health for all the young people within Derbyshire.



Dr. David Regis

Research Manager
Schools Health Education Unit

Acknowledgements

Grateful thanks go to all the pupils in Derbyshire for their willingness and enthusiasm to take part in the survey. The help, and the time and effort spent, by the staff of the schools is also very much appreciated.

Ashgate Croft School
Belper School
Bennerley School
Chapel-en-le-Frith High School
Dronfield Henry Fanshawe School
Highfields School
Hope Valley College
Ilkeston School
Newbold Community School
Parkside Community School
Queen Elizabeth's Grammar School, Ashbourne
Swanwick Hall School
The Bolsover School
The William Allitt School

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Introduction

This report arises from a survey of young people in secondary schools in Derbyshire conducted in the Summer of 2009, following an earlier study in 2007. It was commissioned by Derbyshire County Council and led by Steve Ford (School Improvement Adviser).

The Schools Health Education Unit

SHEU is the leading provider of school-based surveys in the areas of PSHE and health education. It was established in 1977 by John Balding, and continues his vision of providing local information to enable better discussion and planning. The Unit originated and developed within the University of Exeter, where it was based until 1998.

The core of their work is the *Health-related Behaviour Questionnaire* (HRBQ) survey method, which has been used by secondary schools for almost 20 years.

SHEU does not just carry out HRBQ surveys, although these are the most important dimension of their work. SHEU also designs and processes questionnaires for other researchers; evaluates educational projects; produces resources for primary and secondary health education, and publishes the annual *Young People…* reports as well as the journal *Education and Health*.

SHEU personnel involved with the Derbyshire survey include:

Research Manager: Dr David Regis

Data preparation Manager: Jim Podbery

Method

The questionnaire was designed by advisers in Derbyshire in collaboration with local teachers and SHEU.

Items were drawn from a number of sources including:

- SHEU *Every Child Matters* questionnaire
- SHEU *Health-Related Behaviour* questionnaire, Version 23
- customised items previously used by other SHEU clients
- new items suggested by the group

The draft questionnaire, including new items, was reviewed and a final design produced by SHEU.

Schools fitted this exercise into their scheme of work and, once completed, the questionnaires were sent to the Schools Health Education Unit (SHEU) in Exeter. SHEU collated and analysed the data, and produced the draft that formed the basis of this report.

Quality assurance

A seminar was offered to all participating schools to explain and discuss administering the survey to pupils, and representatives attended from each school. Further guidance was provided through written material supplied by e-mail and on paper with the questionnaire booklets.

Each teacher **supervising** completion of questionnaires was asked to provide feedback on a standard form about the conduct of the sessions. Most of these feedback sheets raised no concerns or made only positive comments. Some sheets called our attention to general difficulties (*some of our Year 8 pupils didn't see the point*) or problems with particular questions. We enjoyed one comment from 2007: *The only question which caused any problems was 'does everyone have a pen?'*.

The questionnaire is a taxing exercise for younger and less able students, although most can complete the questionnaire with adequate time and some support in the classroom.

Importance to pupils

The manner in which the data is collected is also vital. Even with the best possible sample and the best-researched instrument, the value of the data is questionable if the respondent does not enter into the spirit of the enquiry. Numbers of unanswered questions or abused questionnaires would signal a doubtful procedure, but in our experience while there are occasional unengaged young people who misuse the questionnaires, it is very unusual for these to form a significant proportion of responses. In the unlikely event that this happens, the school will be contacted.

In every school, supervisors can be found who can generate an atmosphere of importance for the task, inspire trust in the confidentiality and anonymity of the exercise, and provide ideal support for the completion of the questionnaire. Such conditions offer the most favourable environment for the collection of valid data.

If the children know that the questionnaires are completely anonymous, that they will immediately be sealed in envelopes to be sent away for processing, and that the results will be returned only as a summary in which no individuals can be identified, their motivation to be honest will be reinforced. If, in addition, they feel that what they are doing is important for themselves — that it will affect the work they do in school to their own benefit — they will answer the questions as conscientiously as possible.

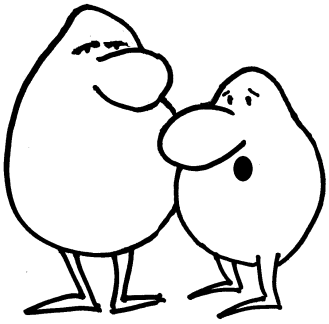
An important strength of the current survey is that it is not administered by or on behalf of an external agency, but by the school itself, who will be motivated to derive a set of valid results on which to base curriculum and other improvements. If a school volunteers to fit the questionnaire process into its already crowded timetable, then it is serious about the enquiry, and this commitment will be transmitted to the pupils.

Reporting and analysis

Analysis was carried out by the Schools Health Education Unit at Exeter using the statistical software package SPSS. Analysis took the form of simple frequency distributions and cross-tabulation.

Reporting from the survey has been carried out at different levels:

- The commissioners have a set of detailed tables based on the composite data set for the district, and supplementary tables and analysis.
- Each school has a similar set of tables, and a 'school report', a summary of their own data next to a summary of the whole Derbyshire data, together with a supporting text.



National context

In 2003, the Government published a Green Paper called *Every Child Matters* alongside the formal response to the report into the death of Victoria Climbié. After a thorough consultation process, the Children Act 2004 became law. This legislation is the legal underpinning for Every Child Matters, which sets out the Government's approach to the well-being of children and young people from birth to age 19.

The aim of the Every Child Matters programme is to give all children the support they need to:

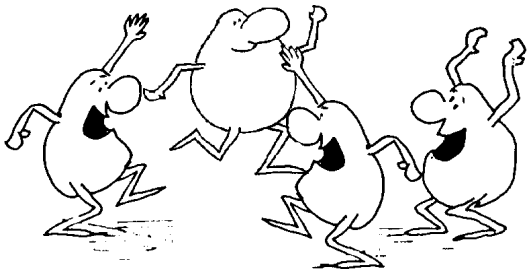
- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution, and
- achieve economic well-being.

The Every Child Matters agenda has been further developed through publication of the *Children's Plan: Building Brighter Futures* in December 2007. The Children's Plan is a ten-year strategy to make England the best place in the world for children and young people to grow up. It places families at the heart of Government policy, taking into account the fact that young people spend only one-fifth of their childhood at school. Because young people learn best when their families support and encourage them, and when they are taking part in positive activities outside of the school day, the Children's Plan is based around a series of ambitions which cover all areas of children's lives.

The goals set out in the Children's Plan include:

- Enhance well being, particularly at transition points.
- Every child ready for success in school.
- Every child ready for Secondary School.
- Every young person with the skills for adult life and further study.
- Parents satisfied with the information and support they receive.
- Employers satisfied with young people's readiness for work.
- Child health improved.
- Child poverty eradicated by 2020.
- Significantly reduce number of young offenders

http://www.dcsf.gov.uk/everychildmatters/about/



Local context

The Derbyshire Service Plan 2009-2014 identifies how the Children and Younger Adults Department will continue its delivery of high quality services by contributing to the vision and priorities identified within both the Sustainable Community Strategy for Derbyshire and the Council Plan. The Plan is structured around the council's planning framework, which sets out an overarching priority for 2009-2014 **to tackle inequalities** and twenty two other thematic priorities.

In planning for the future, the council has identified a number of challenges that the authority and partners will need to address and has set a number of specific priorities to concentrate its effort on achieving in 2009/10.

Derbyshire County Council, Children and Younger Adults Department Service Plan, 2009-2014

Being Healthy

Principles and Priorities

Our aim is to ensure all children and young people have good physical and mental health and link it with a healthy lifestyle. **The key principles are: -**

- Services, agencies and partners will work together to improve the health of all children and young people, including those who may find it hard to get a service, with services provided as close to children and young people's homes as possible, so that they can lead and enjoy healthy lifestyles.
- We want children and young people to know and understand about the things that are good for them and those that are dangerous to their health.
- Services will work together to prevent severe illness in children and young people and to provide access to the best services, locally for those with a serious illness or disability.
- We will work together to help children and young people feel good about themselves and provide services for those who have any form of emotional or mental health difficulty.

Our key priorities are: -

(1) Reducing obesity by promoting healthy eating and physical activity

(2) Reducing the number of teenage pregnancies

(3) Increasing the amount of breast feeding

1. (4) Providing help to stop excess drinking

Our secondary priorities are: -

(1) Improving support for children and young people suffering from emotional or mental health problems

(2) Developing parenting skills programmes in order to improve emotional well-being and life chances

(3) Maintaining high levels of vaccination and immunisation

(4) Addressing health inequalities including infant mortality and low birth weight

(5) Providing improved health advice and support to young people within schools and other local settings

(6) Continuing to tackle problematic drug use

Derbyshire County Council, Children and Younger Adults Department Service Plan, 2009-2014

Staying safe

Principles and priorities

Our aim is to ensure all children and young people are protected from harm and helped to develop safely.

The key principles are:-

- Services will share information to get help quickly to any child at risk of harm.
- Services will involve children and young people and parents and carers in the planning and review of services and parents and carers in decisions about their children.
- Services will offer support to families when they are having serious difficulties.
- Services will build strong links with services for adults to ensure parents get the help and support they need to keep children and young people safe.

Our **key priorities** are:

1. Protecting children from abuse. We will ensure that the Safeguarding Children Procedures are followed for all children and the recommendations of 'The Protection of Children in England: a Progress Report' written by Lord Laming are fully implemented
2. Reducing the severity and numbers of children who are bullied

Our **Secondary Priorities** are:

2. Further developing services to prevent and to tackle the impact of domestic abuse
3. Improving personal safety and reducing the number of children and young people injured or killed in accidents
4. Reducing the number of children and young people missing from home or from care.
5. Providing stable and consistent places for children in care to live in

Derbyshire County Council, Children and Younger Adults Department Service Plan, 2009-2014

Enjoying and achieving

Principles and Priorities

Our principles are:-

- We will reduce inequality by closing the attainment gaps and improving outcomes for children at all key stages
- We will continue to provide support and challenge to improve the quality of education in all settings in Derbyshire
- We will take prompt action and intervene to prevent failure
- We will develop extended services in and around 21st century schools so that all services can work in partnership to remove barriers to achievement
- We will provide effective support services to enable schools, early learning and care settings and other providers to meet the needs of children and young people with additional needs
- We will promote the educational achievement of Children in Care
- We will develop local placements for those with complex needs
- We will promote good attendance and reduce exclusions
- We will work together to make sure that all young people over 16 are in education, employment or training

Our key priority is:-

Improving attainment at all key stages and for vulnerable and disadvantaged groups.

Our supplementary priorities are:-

(1) Providing full access to children's centre services for all children in Derbyshire

(2) Providing full access to extended services in and around schools for all children in Derbyshire

(3) Improving attendance and reducing exclusions at all key stages and for vulnerable and disadvantaged groups including children with disabilities and children in care

(4) Developing 14-19 education

Derbyshire County Council, Children and Younger Adults Department Service Plan, 2009-2014

Positive contribution

Principles and Priorities

Our **Key principles** are:

In order that children and young people can take a full and active part in their own development:-

- We will improve support to parents and carers to promote the positive social development of children and young people by further developing the parent support strategy
- We will further develop effective consultation, involvement and participation mechanisms to ensure that the voice of children and young people influence both decisions about their own lives as well as future policy and service development.
- We will provide information to children and young people and their families about services that are available to them
- We will create opportunities for young people to engage in volunteering
- We will develop positive activities for young people
- We will reduce youth crime in Derbyshire
- We will celebrate children and young people's achievements

Our key priority is: -

To increase the range of positive activities, incorporating sport and community safety activities

Our secondary priorities are:-

1. Further development of the new integrated youth support structure to offer young people more effective services
2. Further develop arrangements for the systematic involvement, participation and consultation with children and young people and parents and carers
3. Reducing offending and anti-social behaviour particularly final warnings and convictions of children in care
4. Involving more young people in reviewing and planning their care and education
5. Promoting a positive image of children and young people in Derbyshire
6. Creating opportunities for volunteering for children, young people and others

Derbyshire County Council, Children and Younger Adults Department Service Plan, 2009-2014

Economic well-being

Principles and Priorities

Working on the principle of improving the economic well being of all people in Derbyshire, we will work with others to

increase employment opportunities in the County. This work is being intensified during the economic downturn.

The **key principles** are:

- Make sure no group of people are disadvantaged
- Provide high quality childcare provision to help parents and carers to work
- Provide clear information about welfare benefits
- Work with others to improve the quality of and access to housing
- Build on the work of the 11-19 partnership to increase education and training opportunities such as apprenticeships and diplomas
- Provide high quality information, advice and guidance services with fully integrated careers education and guidance in schools and colleges

Our key priority is:

Reducing the numbers of young people aged 16 – 19 not in education, employment or training (NEET). This work will be particularly targeted at young people who are young mothers, care leavers and young people with learning difficulties and/or disabilities.

Our secondary priorities are: -

1. Reducing child poverty
2. Improving services for homeless young people
3. Ensuring the sufficiency of childcare including for children with learning difficulties and/or disabilities

Derbyshire County Council, Children and Younger Adults Department Service Plan, 2009-2014

Disabled children

A programme is underway to transform how services are provided for disabled children and their families. Working closely with people who use our services, we are improving the quality and availability of services and developing a programme of short break services.

Priorities

Our overall **key priority** is

- to improve services for disabled children
- We will achieve this by tackling the following issues:
- Improving equity of access for disabled children to specialist and support/outreach services
- Developing systematic and routine arrangements for consultation with and involvement of children and young people with learning difficulties/or disabilities
- Developing a full service offer of short breaks for disabled children and their families in Derbyshire

Samples

Each school was asked to provide at least 100 pupils per year group (about 4 classes) who are a representative cross-section of their school population.

This means that the survey would be representative of pupils of similar ages across the county. This does not take into account absentees[1].

The Derbyshire sample 2009

The completed sample size (excluding blank returns and scripts with inappropriate answers) was:

	Year 8	Year 10	All
Male	845	849	1694
Female	831	836	1667

Comparing Derbyshire figures in 2008 and 2009

The overall samples from 2009 can be compared with figures from 2007.

		Year 8	Year 10	All
2007	Male	485	449	934
	Female	466	462	928
2009	Male	845	849	1694
	Female	831	836	1667

Schools taking part in 2007 and 2009

The 2009 sample was larger than the 2007 sample and was formed from sample from different schools.

	2007	2009
Ashgate Croft School		✔
Belper School		✔
Bennerley School	✔	
Chapel-en-le-Frith High School	✔	✔
Dronfield Henry Fanshawe School		✔
Highfields School	✔	✔
Hope Valley College		✔
Ilkeston School		✔
Newbold Community School		✔
Parkside Community School	✔	✔
Queen Elizabeth's Grammar School, Ashbourne		✔
Swanwick Hall School	✔	
The Bolsover School		✔
The William Allitt School	✔	✔

To ensure that we had the opportunity to compare like with like, we identified 4 schools which also conducted the survey exercise in 2007 and 2009.

[1] Absent pupils will include those who are ill and any that habitually miss school. Therefore, some of the data recorded in the surveys may be biased. This will be a feature of any school-based survey. However, staff may already be more familiar with the characteristics of this absentee group than those of the section of the school population that complete the questionnaire. Moreover, we should not assume that the absentees are all poorly behaved; our work on bullying suggests that a number of shy, well-behaved pupils may be missing school and therefore biasing the results in the other direction.

The 'repeat' sample

The combined sample of 'repeat schools' was:

Repeaters	Year 8	Year 10	All
2007	666	627	1293
2009	593	590	1183

- These schools have had a chance to review and respond to their results, and so changes in these schools may not be seen in the whole Derbyshire samples (and vice versa).

Reference samples

It is often interesting to compare local figures with results from elsewhere in the country. In this report, the Derbyshire sample has been compared with the SHEU aggregate sample from 2008.

	Year 8	Year 10	All
Male	14211	14079	28290
Female	15133	14810	29943
	29344	28889	58233

Each year the Schools Health Education Unit (SHEU) supports surveys in very many schools throughout the UK and publishes the total picture for each year in the series *Young People in 1986, 1987, ... into 2009*.

The surveys making up the *Young People...* reference samples were carried out throughout the school year, while the Derbyshire survey was carried out in the Spring. Therefore, any differences seen between the Derbyshire survey and the reference sample may be caused by seasonal factors or the academic calendar. They may also arise from differences in home background seen in the samples.

Trends in the results in the *Young People in...* series can be seen over time.

The quality of the survey data: Notes from SHEU

The notion of *validity* is what people usually have in mind when looking at a question — does this question really measure what you say it does? Are the respondents honest? Does the question mean anything to the respondents? If people were asked whether they would prefer to go on holiday to Flaunce or to Gzornenplatch, they may *reliably* give a preference for Flaunce, perhaps because of its earlier position or its more mellifluous sound. The fact that people have never heard of either resort cannot be detected from the reliability of their written responses.

Whether the answers to our questions mean what we think they mean must therefore be investigated in other ways, for example by interviews. There is a common-sense approach to this: namely, does it look as though it works? For example, one might be hesitant about accepting 'How much do you like pop music?' as a measure of extroversion, but be more convinced by 'Do you generally like loud, fast music, or is the music you prefer more often quieter and slower?' This sort of 'looks right' validity is called face validity. (Other sorts of validity are described in the literature, but these are not readily applied to the HRBQ).

Another dimension of the data that might reassure us about its quality is the distribution of responses between pupils. Typically, there are highly regular and consistent age-related differences, and often differences between the sexes. Where this pattern is seen and is consistent with expectations, we have more confidence in the data. In SHEU annual compilations, we can see very consistent age-related trends, even when year groups are composed of young people from different parts of the country.

Also, we can look for associations between items in the questionnaire that have been found elsewhere — for example, there are a number of known correlates of smoking in young people, such as drinking alcohol, school attainment and other variables such as self-esteem and locus of control. A number of these associations can be found in the Derbyshire data, which firstly reassures us that the data are valid, and secondly suggests that new associations can be sought in the wider range of topic items held in the databanks.

Finally, the interview and other work described above in piloting new questions, and the thousands of sheets of supervisors' feedback relating to established ones, provide a solid foundation for our confidence in the validity of the answers.

Statistical confidence

TABLE OF STANDARD ERRORS OF PROPORTION

		Percentage seen in sample				
		10%	**20%**	**30%**	**40%**	**50%**
Number	**20**	6.7	8.9	10.2	11.0	11.2
In	**30**	5.5	7.3	8.4	8.9	9.1
sample	**40**	4.7	6.3	7.2	7.7	7.9
	50	4.2	5.7	6.5	6.9	7.1
	60	3.9	5.2	5.9	6.3	6.5
	80	3.4	4.5	5.1	5.5	5.6
	100	3.0	4.0	4.6	4.9	5.0
	150	2.4	3.3	3.7	4.0	4.1
	200	2.1	2.8	3.2	3.5	3.5
	300	1.7	2.3	2.6	2.8	2.9
	500	1.3	1.8	2.0	2.2	2.2

So, if you have a sample of 50 pupils and 15% of them think that the school needs a new swimming pool, we can see from the table that the standard error of that percentage is about 5%, and analysis shows us that you can be 64% confident that the true population value for that statistic is within ±5%. 95% confidence limits are usually given as about twice the standard error, but typically, the percentage of the year group sampled is high, which reduces the expected sampling error.

APPENDIX: Young People in Derbyshire in 1997/98

Home & Family

74.0% of all pupils in the survey live with both parents. From the Schools Health Education Unit (SHEU) annual national data, a figure of 75% is observed for pupils within Years 8 and 10 living with both parents.

1.2% of pupils report that they are not from UK or European groups.

97.4% have some form of central heating at home. Question P7 gives as examples of what counts as central heating, e.g. radiators, storage heaters, warm air ducts.

The average number of bedrooms is 3.4.

Smoking

17.3% in the survey sample smoked at least one cigarette during the last 7 days, a figure which is similar to the 17.1% from *Young People in 1997*.

17.7% say they smoke 'regularly' or 'occasionally'.

77.2% of smokers in both years claim they want to stop smoking (by Question D4). Even if some are giving what they think is the 'correct' answer, this finding has important implications for health and education service planners, and is one which is encouraging for anyone working in the area of young people and smoking cessation.

It would seem that more work needs to be done to promote the message that children should live in a smoke free environment.

Smoking levels in Derbyshire are not very different to those nationally. The figure, however, of 77.2% of the smokers in Derbyshire who would like to give up smoking, is significantly higher than the 70.4% found within the *Young People in 1997* data.

48.7% of all pupils in the survey have a parent or sibling who smokes.

24.5% of those who have at least one parent who smokes themselves smoke, whereas 12.4% of those who report neither parent as smoking themselves smoke. Such findings suggest a strong influence played by parent's own smoking habits on the smoking careers of their children.

49.0% believe that cigarette advertising influences young people to start smoking 'quite a lot' or 'a lot'.

Alcohol

49.2% of those surveyed had at least one alcoholic drink in the last week. The figures for the individual year and gender groups may cause concern, in that over 50% of the females and almost 70% of the males within Year 10 report having drank alcohol during the previous week, figures which are higher than those within the 1997 representative sample.

Despite these typically high figures relating to alcohol consumption, it is necessary and encouraging to emphasise that the majority of Year 8 pupils do not regularly consume alcohol, as is the case for around half of the Year 10 pupils.

Comparing these Derbyshire figures for average weekly number of alcohol units consumed with those within *Young People in 1997*, there is evidence that whereas the females' levels are similar, the figures for Derbyshire males are on average half a unit higher.

Recently some confusion has occurred over recommended weekly levels of alcohol intake for adult males and females. However, medical opinion has confirmed the levels previously quoted (14 units for a woman and 21 units for a man) as safe maximum weekly limits.

Of the male drinkers in the oldest year group within Derbyshire, 7.0% of the males were over the advised weekly limit for adult males of 21 units; for females in this year group the equivalent limit of 14 units was exceeded by 10.8% of the drinkers.

From the comparison with *Young People in 1997*, it is evident that more Year 8 Derbyshire pupils reported drinking over the 'safe' levels; this characteristic is reversed for the Year 10 males, with fewer of this group reporting having drank over the respective adult limits.

Closer inspection of the results for separate year and gender groups reveal that within the Year 10 Derbyshire data at least 20% of the pupils drank beer/lager and wine during the past week with alcoholic 'soft' drinks consumed by 17% of the males and 22% of the females.

A substantial percentage of the pupils from Derbyshire report that their parents usually or always know if they are drinking at home, especially Year 10 pupils in comparison with *Young People in 1997*. Are some of these the children

of parents that encourage sensible drinking in a family context? If drinking was ever done at home, 84.5% of the pupils say it took place as a rule with their parents' knowledge.

Illegal drugs

50.8% are fairly sure that they know someone who takes drugs, a figure which is higher than the 46.3% from *Young People in 1997*. As is evident here and in other HRBQ surveys, the awareness of drug-users changes markedly in the two-year interval between Year 8 and Year 10.

22.4% say they have been offered some form of illegal drug. The very large increase in experience of offers between Year 8 and Year 10 shows that this is when contact with drugs really takes off.

16.3% of the sample reported they have taken some form of illegal drug themselves, a figure which is similar to the one within *Young People in 1997*, although a significantly lower proportion of Year 10 Derbyshire females report having taken a drug than those within the representative sample.

Although being offered a drug to try, many young people from Derbyshire refuse the offer.

6.1% say they have used some form of illegal drug within the last month, which again is in line with the 7.2% from *Young People in 1997*.

1.5% of pupils have been offered body building steroids.

0.6% of pupils report that they have used body building steroids.

Health & Hygiene Services

72.3% wash their hands 'whenever possible' after visiting the lavatory; 89.4% took at least 3 baths or showers last week.

The Derbyshire Year 8 males results for personal hygiene suggest slightly fewer pay attention to washing their hands after visiting the lavatory, compared with those in the reference sample, in that 65.7% report washing their hands whenever possible after visiting the toilet, in comparison with 70.2% of Year 8 males from *Young People in 1997*.

72.3% clean their teeth at least twice a day (the recommended frequency).

Fewer Derbyshire pupils brushed their teeth at least twice on the previous day than those in the reference sample.

87.5% of the Derbyshire pupils report having been to the dentist in the last six months, a lower frequency than those in the reference sample.

14.6% had a filling the last time they visited the dentist.

15.4% in this survey report treating asthma 'last week', this figure is lower than the 18.4% reported within *Young People in 1997*.

44.4% of the wheezers take medication. National figures suggest a degree of under-diagnosis of asthma which is a view shared by many paediatricians.

15.2% say that they have eczema, a slightly higher figure than the 13.1% found within *Young People in 1997*.

55.3% report asthma or eczema in the family.

73.3% have visited their doctor within the last six months, a figure which rises to 89.2% for the last year (Figure 3).

46.3% were 'at ease' with their doctor on this last visit. Of course confidence may be strongly affected by the nature of the complaint.

A similar proportion of pupils in Derbyshire said that they were at ease with their doctor on the last visit, as in the reference sample.

Personal & Social

44.6% of all pupils in the survey say they get on best with 'both parents' (this may be compared with the 73.5% who live at home with both parents).

65.9% in the survey think they can trust 3 or more adults, a figure which is slightly lower than the 68.2% reported by the *Young People in 1997* sample.

5.2% in the survey think there are no adults they can trust, an overall figure which is similar to the 5.0 found within *Young People in 1997*.

19.2% have a current boyfriend or girlfriend; 18.7% have never had a boyfriend or girlfriend (Figure 4).

As is typically seen from the 1997 representative data, by Year 10 more females than males report having a steady partner. Generally it is accepted that females tend to have boyfriends somewhat older than themselves, which may have an effect on their health-related behaviour. If this is true, what support can be offered to these young women?

38.4% are 'at ease' meeting people of their own age and opposite sex.

In contrast to the 1997 representative data, levels of confidence are similar between the two gender groups in both age groups. Typically we would expect, by Year 10, to observe a higher proportion of females reporting that they felt at ease with the opposite sex.

HIV/AIDS

A significantly higher proportion of Derbyshire Year 10 females reported that HIV could NOT be transmitted by lavatory seats than those within the reference sample.

87.1% think they will take precautions against infection; from other work SHEU know that the single most common precaution mentioned by young people is use of a condom.

40.4% of young people in the survey say they know where they can get condoms free of charge, a figure which is higher than the 32.7% reported within *Young People in 1997*.

22.8% believe there is a specialist service for young people available locally. You will be able to interpret these figures in the light of local knowledge.

Mental Health

In both year groups, more males than females scored higher on the self-esteem scale, a pattern reflected in the *Young People in 1997* data.

86.7% agreed with at least one statement about being in control of their health (P10a&c); 56.5% agreed with at least one statement saying that they weren't.

73.0% of the pupils in the survey had a net positive score for these health locus of control questions. SHEU know from other studies that such scores are related to higher levels of participation in health-promoting behaviour, and lower levels of health-risk behaviour.

It is interesting to observe that contrary to the 1997 representative data, the external health locus of control scores for the females drops from 73.9% in Year 8 to 68.% in Year 10. What knowledge, local to Derbyshire, exists which may explain this unexpected drop?

64.7% of pupils in the survey worry about at least one problem 'quite a lot' or 'a lot'.

66.6 % say they are in general 'quite a lot' or 'very much' satisfied with their life (Figure 9).

Overall, 25.4% of the Derbyshire sample reported that they felt afraid of going to school because of bullying at least sometimes. Figure 11 illustrates the full results for this particular question.

Levels fearing bullying within Year 8 are similar to those within *Young People in 1997*, although the results for Year 10 suggest fewer young people within Derbyshire fear bullying than within this representative sample.

Out of school activities

Of these pupils who reported doing homework, 40.9% reported they did more than an hour, a slightly higher figure than the 37.7% from *Young People in 1997*.

In Derbyshire 86.8% watched some TV the previous night; 17.1% watched for over 3 hours.

26.8% of pupils reported reading a book for pleasure for at least part of the evening before the survey, a figure which is similar to the 27.9% reported within *Young People in 1997*.

Money & Employment

36.8% of the pupils in the survey have a regular paid job, a figure higher than the 30.6% within the representative sample.

The average length of time spent working last week by those who have paid work was 5.9 hours.

The mean pay for those being paid was £13.21, which is line with the average £13.00 earned within *Young People in 1997*. The average amount of pocket money or allowance for all those who received some was £5.02. Total income exceeded £10 last week for 25.8% in the survey.

The average amount spent by those spending any money from the whole sample, was £11.29.

Nutrition

6.7% in the survey did not have any lunch at all on the day before the survey; 28.3% had no more than a drink for breakfast on the day of the survey.

8.1% of the pupils in the survey would like to put on weight.

39.5% of the Derbyshire sample would like to lose weight, although when compared with the 41.1% reported within *Young People in 1997* it is revealed that fewer young Derbyshire young people would like to lose weight.

As both samples show, young people become less choosy about what they eat as they grow older. Why is this? Do they care less about being 'healthy', or do they think that diet is not an important contributory factor to a healthy lifestyle?

Active living, Exercise & Sport

42.8% thought they were 'fit' or 'very fit' (Figure 14) a figure which is lower than the 48.8% reported in *Young People in 1997*.

87.4% exercised last week hard enough to increase breathing rate.

77.3% say they enjoy physical activities 'quite a lot' or 'a lot', a figure which is similar to 78.2% from the representative sample.

21.4% came to school by car.

53.1% walked to school at least part of the way.

More pupils in the Derbyshire sample report that they walk to school than in the reference sample.

About half of the Derbyshire pupils reported having had an accident in the past 12 months that needed treatment. 25.2% of these pupils said they were treated for an accident by a nurse or doctor within the last year.

Compared to the reference sample, fewer young people in Derbyshire seem to be having accidents treated.

14.9% of the whole Derbyshire sample say they don't cycle.

Of the Derbyshire sample who do cycle, 29.2% don't have a safety helmet compared with 31.4% from the *Young People in 1997*. Comparison of percentages for those who wear a helmet sometimes or hardly ever, reveals similarity between the two samples (Derbyshire: 41.0% compared with 43.2% from the representative sample). Figures for the regular wearers of helmet reveals 29.8% from the Derbyshire sample reporting wearing a helmet 'most of the time' or 'Always' (Figure 16) a figure which is similar to the 25.3% from *Young People in 1997*.

The figures for regular use of a cycle helmet by Derbyshire young people (with the exception of Year 8 females) are significantly higher than those within *Young People in 1997*.

17.7% of the whole sample say they know of the availability of cycle training courses; 43.7% say they have been on such a course, 17.1% in the last two years.

More males than females report having been on a cycling course.

This report was prepared for **Derbyshire County Council** by Dr. David Regis

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