

<b>Institution:</b> University of Hertfordshire
<b>Unit of Assessment:</b> Panel A3B: Allied Health Professions and Nursing
<b>Title of case study:</b> Influencing Government Policy on Health Behaviour in School-aged Children
<p><b>1. Summary of the impact</b> (indicative maximum 100 words)</p> <p>In 2008, the University of Hertfordshire joined, as principal investigators for England, the World Health Organization's <b>Health Behaviour in School-aged Children</b> study. European and US policy makers use this long-running cross-national project to set directions for young people's health and wellbeing. Our findings (2011) directly informed policy in the departments of Health and Education, and were identified as a key data source underpinning the Department of Health's outcomes framework for children and young people. Our team also co-authored the World Health Organization's four-yearly international report for 2012, a widely influential document in health care policy and practice.</p>
<p><b>2. Underpinning research</b> (indicative maximum 500 words)</p> <p>The Health Behaviour in School-aged Children (HBSC) study is a unique cross-national research survey of adolescent health behaviours and health. Initiated in 1982 and adopted by the World Health Organization (WHO) as a collaborative study, HBSC is the longest-running international study of the health behaviour and social context of young people. With forty-three participating European and North American countries and regions, every four years it gathers cross-nationally comparable data on a range of adolescent schoolchildren's health, behavioural and social indicators.</p> <p>In 2008, the university's Centre for Research in Primary and Community Care (CRIPACC) became key members of the study's network of 250 academic and policy researchers. Led by Professor Fiona Brooks, CRIPACC was appointed as the HBSC England team, which included taking ownership of, analysing and reporting previous survey data. This located HBSC England for the first time within a university department and enabled the England survey to be theoretically driven by an academic team. We also joined the international network's policy development team, and the scientific development committee that defines the content of the mandatory survey elements, with our team determining the England-only elements. The Department of Health provided external funding, signalling its commitment to employ the England data to inform and influence health improvement policy and practice for young people in the UK.</p> <p>Internationally, more than 200,000 young people were surveyed, with a total of 4,404 aged 11, 13 and 15 participating in the 2010 survey cycle for England. Key findings from the 2010 England first national report, which appeared the following year, found that 80% of young people reported feeling positive about their lives and experiencing high life satisfaction. Across a number of key health risk behaviours there had been some positive changes: the number of smokers had decreased since 2006; and since 2002 there had been a marked drop in regular drinking across all ages. Family life and school connectedness were shown to be the two key protective factors of young people's health and wellbeing. This report, and related publications that we produced, also pinpointed the most vulnerable groups of young people, and highlighted the fact that positive health behaviours – including healthy eating and physical activity – had over the previous decade remained a characteristic of only a minority of young people.</p> <p>By examining the broader social context of young people in England – their family, school and community life – our study moved beyond simply monitoring the prevalence of risk behaviours among young people. Instead, the findings offered a means to understand and respond to the social determinants of health and wellbeing, and to identify different risk and protective health factors for young people. It also offered policy makers and practitioners an understanding of exactly which social and development factors must be addressed in any prevention/ intervention programmes.</p>

### 3. References to the research (indicative maximum of six references)

– Items 1, 2 and 4 are REF2 outputs

1. Pickett, W., Molcho, M., Elgar, F., **Brooks, F.** et al. (January 2013). Trends and socioeconomic correlates of adolescent physical fighting in 30 countries. *Pediatrics* [eFirst Pages], 131(1), pp. e18–e26. doi: 10.1542/peds.2012-1614
2. **Brooks, F.**, Magnusson, J., Spencer, N. and Morgan, A. (2012). Adolescent multiple risk behaviour: An assets approach to the role of family, school and community, *Journal of Public Health*, 34, 48–56. doi: 10.1093/pubmed/fds001
3. **Brooks, F.**, Magnusson, J., Klemmera, E., Spencer, N. and Morgan, A. (2011). HBSC England National Report: Health Behaviour in School-aged Children: World Health Organization Collaborative Cross National Study. Hatfield: University of Hertfordshire, CRIPACC. Full report available from: <[www.hbscengland.com/docs/HBSC%20England%20report2011.pdf](http://www.hbscengland.com/docs/HBSC%20England%20report2011.pdf)>
4. Fenton, C., **Brooks, F.**, Spencer, N. and Morgan, A. (2010). Sustaining a positive body image in adolescence: An assets-based analysis, *Health and Social Care in the Community*, 18(2), 189–98. doi: 10.1111/j.1365-2524.2009.00888.x
5. **Brooks, F.** et al. (2009). Young people's health in Great Britain and Ireland: Findings from the Health Behaviour in School-aged Children Survey, 2006. HBSC International Reports: Cardiff, Edinburgh, Galway, Hertfordshire, University of Hertfordshire and University of Edinburgh. Full report available from: <[www.nuigalway.ie/hbsc/documents/2009\\_young\\_peoples\\_health\\_in\\_gb\\_\\_ireland.pdf](http://www.nuigalway.ie/hbsc/documents/2009_young_peoples_health_in_gb__ireland.pdf)>

#### Grants

Awarded to Principal Investigator Professor Fiona Brooks by the Department of Health (Children and Young People's Public Health):

2009–2012 Research Grant HBSC England: £400,000.

2012–2015 Research Grant HBSC England: £472,000.

### 4. Details of the impact (indicative maximum 750 words)

#### National Significance and Reach

The 2010 HBSC National Report for England achieved notable public attention, with its launch widely covered in the national media, including BBC radio, *The Sunday Times*, *Daily Telegraph*, and the *People*. The Rt Hon Anne Milton MP, minister for Public Health, commented in detail on the HBSC's clear messages for health services and public health.

Since 2008 the CRIPACC team had been collaborating closely with the departments of Health and Education to ensure that HBSC formed a key reference study and that its outputs informed policy and actions in the area of young people's health and wellbeing. This resulted in the following government policies:

#### 1. Department of Education

'Positive for Youth' was published on 19 December 2011. Led by the Department of Education, it represented a new policy for young people, recommending actions and strategic policy for youth across government departments and agencies. The HBSC England findings provided the evidence base for policy direction and supported the following proposed actions:

- i) To counter the negative perspective of youth as 'problem': *'There are 4.5 million teenagers in England today. Despite some widely held prejudices, most of them are doing well, and over 85% report high life satisfaction.'* (p. 3)

- ii) To highlight the need for action relating to the way computer games are changing youth leisure: *'Rapid development of IT and the internet is also changing leisure patterns. For example, the proportion of young people playing two or more hours of computer games each week increased between 2006 and 2010 from 42% to 55% for boys, and from 14% to 20% for girls.'* (p. 5)
- iii) To identify new assets that operate to protect young people against participation in risk behaviours: *'One recent study found that parents' participation in how young people spend their free time, the connectedness young people feel with their teachers, and the extent to which they feel safe in their community and have a friendly neighbourhood, were all protective factors against young people misusing multiple substances at age 15, and low life satisfaction.'* (p. 32)
- iv) To identify ways in which strategies to increase physical activity rates among young people can be developed and be most effective: *'While young people will be enthused by sport through the School Games they will also need to be pointed to good and welcoming sport clubs in their area that can keep their passion for sport burning . . . the Department for Culture, Media and Sport is tasking Sport England to focus more on youth, specifically the 14–25 year old age group. Increasing opportunities for young people to take part in sport with their friends may be particularly important for addressing the low levels of physical activity among girls – recent research shows that while only 28% of girls take part in sport with their families at least once a week, almost 56% do so with their friends.'* (p. 36)

## 2. Department of Health

HBSC England work directly underpinned Department of Health public health policy. We were specifically asked to undertake additional analysis and provide the DoH with briefing papers in relation to particular areas. Selected actions arising from our evidence are outlined below:

- i) HBSC findings indicated that since 2002 the proportions of all young people regularly eating breakfast had significantly declined, and girls on a diet were more likely to skip meals than adopt beneficial behaviours. The Department's public health team adopted policy to promote healthy eating and positive weight strategies among girls, and the importance of eating breakfast for all young people.
- ii) Personal and Social Health & Economic (PSHE) education policy: HBSC findings enabled the Department to identify new developments that would ensure more effective PSHE education, especially in terms of responsiveness to young people's needs, age-appropriateness and delivery by sufficiently expert specialists.
- iii) The DoH's communications directorate used HBSC to inform the development of a new social marketing strategy for youth.
- iv) Based on information in the study, the Department identified a new area of public health intervention: the relationship between online game playing and young people's health, particularly the connection between computer-play physical fighting and bullying.
- v) HBSC findings have been used by the Public Health subgroup of the Children and Young People's Outcomes Forum to help generate a series of robust, evidence-based recommendations for the Children and Young People's Outcomes Strategy.

## International Significance and Reach

### WHO

The international HBSC network co-ordinates the publication of international reports soon after the completion of each national survey, presenting information on cross-national comparisons.

According to WHO's HBSC web page ([www.euro.who.int/HBSC](http://www.euro.who.int/HBSC)), the international report 'is issued every four years and is widely used by policy makers and relevant professionals'. The report allows national and international policy makers to compare their own country's position with others in terms of health behaviours, outcome measures and determinants. The 2012 report featured key contributions by the CRIPACC team on family culture (lead author) and sexual health (co-author).

### **OECD**

HBSC was employed as a reference study by the OECD. This collaboration culminated in February 2010 with the England HBSC team working with OECD to contextualise their recent international project on the Social Outcomes of Learning Project through presentation of the implications of the HBSC findings at an international briefing for an audience of policy makers and researchers.

## **5. Sources to corroborate the impact** (indicative maximum of 10 references)

### **Media Coverage**

Templeton, Sarah-Kate, 'Eat with your kids, says minister', *Sunday Times*, 23 October 2011, <[www.thesundaytimes.co.uk/sto/news/uk\\_news/Health/article804785.ece](http://www.thesundaytimes.co.uk/sto/news/uk_news/Health/article804785.ece)> (partial story; hard copy of full story available on request)

– *Minister for Public Health Anne Milton reports on HBSC England and family mealtimes*

Adams, Stephen, 'British girls among heaviest teenage drinkers', *Telegraph*, 2 May 2012, <[www.telegraph.co.uk/health/healthnews/9239176/British-girls-among-heaviest-teenage-drinkers.html](http://www.telegraph.co.uk/health/healthnews/9239176/British-girls-among-heaviest-teenage-drinkers.html)>

'Youth violence declining in UK', *Medical Xpress* [online medical and health news], 4 December 2012, <<http://medicalxpress.com/news/2012-12-youth-violence-declining-uk.html>>

'Youth Violence is Declining, according to Herts University Report', *106 Jack FM* [Hertfordshire local radio; includes audio clip], <[www.106jack.com/news/local-news/audio-youth-violence-is-declining-according-to-herts-university-report/](http://www.106jack.com/news/local-news/audio-youth-violence-is-declining-according-to-herts-university-report/)>

### **Reports, and Policy and Framework Documents**

#### ***WHO International Report***

World Health Organization, Social determinants of health and well-being among young people: Health Behaviour in School-aged Children (HBSC) study (2012). ISBN 978 92 890 1423 6 <[www.euro.who.int/en/what-we-publish/abstracts/social-determinants-of-health-and-well-being-among-young-people.-health-behaviour-in-school-aged-children-hbhc-study](http://www.euro.who.int/en/what-we-publish/abstracts/social-determinants-of-health-and-well-being-among-young-people.-health-behaviour-in-school-aged-children-hbhc-study)>

#### ***Policy / Other Documents Drawing on HBSC England Findings***

'Positive for Youth: A new approach to cross-government policy for young people aged 13 to 19' (2011), DFE-00133-2011. Available from:

<[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/175496/DFE-00133-2011.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/175496/DFE-00133-2011.pdf)>

'Children and Young People's Outcomes Strategy: Report of the Children and Young People's Health Outcomes Forum' (2012). <[www.dh.gov.uk/health/2012/07/cyp-report/](http://www.dh.gov.uk/health/2012/07/cyp-report/)>

– *HBSC England findings were a key data source for this Dept of Health outcomes framework*

### **Institutional Corroboration**

An individual at the Department of Health has agreed to corroborate the impact of our research on government policy: contact details supplied separately.