

Health Behaviour in School-aged Children (HBSC) Ireland

National Report Launch January 2020











PRESENTATION OUTLINE



- Background
- Method
- Results
- Summaries
- Questions

Background



- Collaborative study with the WHO European office
- Network of researchers with policy and practice links
- Initiated by four countries in 1982
- International surveys every four years
- Ireland joined in 1994
- 47 countries and regions collected data in 2018
- Irish data collected over six cycles since 1998
- Celebrating our 25th year of HBSC work

HBSC Conceptual Framework



Age Gender SES Ethnicity

Children's lives

Contexts:

Family

School

Peers

Locality

Risk behaviours:

Drinking, smoking...

Health enhancing behaviours:

Physical activity, leisure activity...

Health outcomes:

Well being Life satisfaction Self rated health

.....

WHAT IS NEW IN THIS REPORT?



Alcohol availability

Source of alcohol Location of alcohol consumption

Mental health

Mental Health Inventory WHO-5 Well-Being Index

E-cigarettes

Lifetime use Past 30 days use



METHODS



- Research protocol developed by the network
- International and national questions
- Self-administered questionnaires
- Participants: 15,557 children from a stratified sample of
 255 primary and post-primary schools across the country
- 63% of invited schools and 84% of invited students
- Main Study: 5th class to 5th year (10 to 17 year olds)
- Middle Childhood: 3rd and 4th class (9 to 10 year olds)

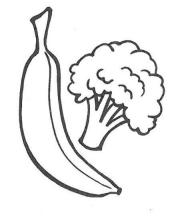
RESULTS





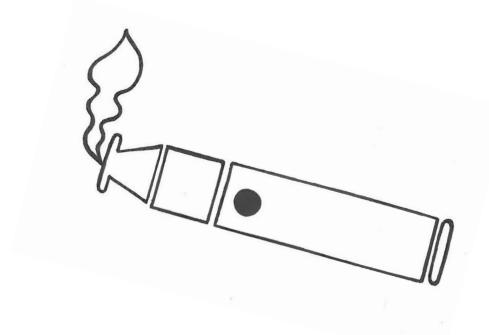






SMOKING





Tobacco smoking (lifetime)



Figure 9: Percentages of boys who report ever smoking tobacco

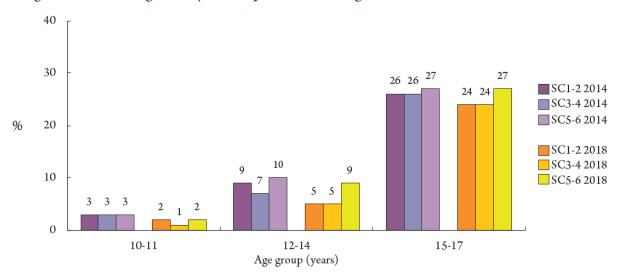
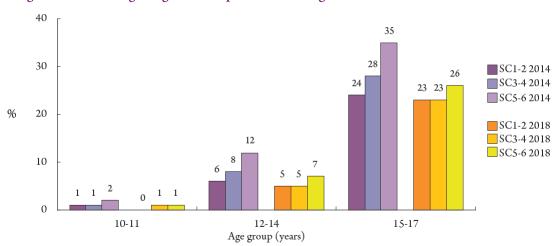


Figure 10: Percentages of girls who report ever smoking tobacco



Tobacco smoking: Current smokers



Figure 11: Percentages of boys who report they are current smokers

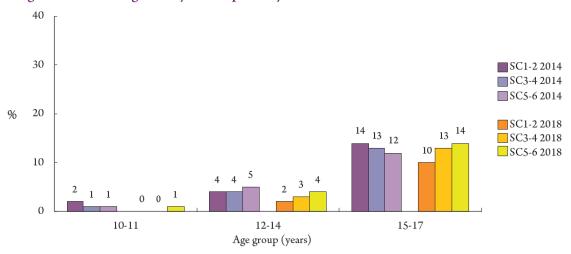
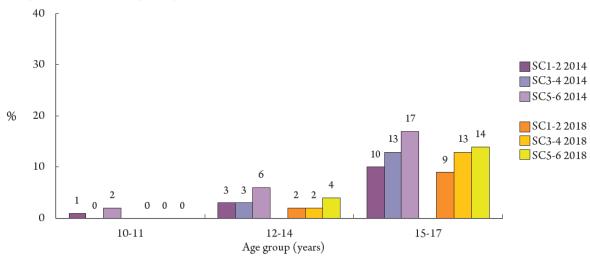


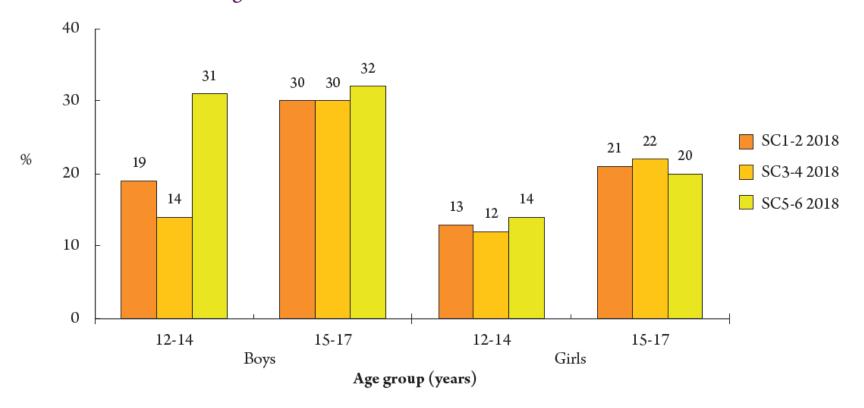
Figure 12: Percentages of girls who report they are current smokers



E-cigarettes: Lifetime use



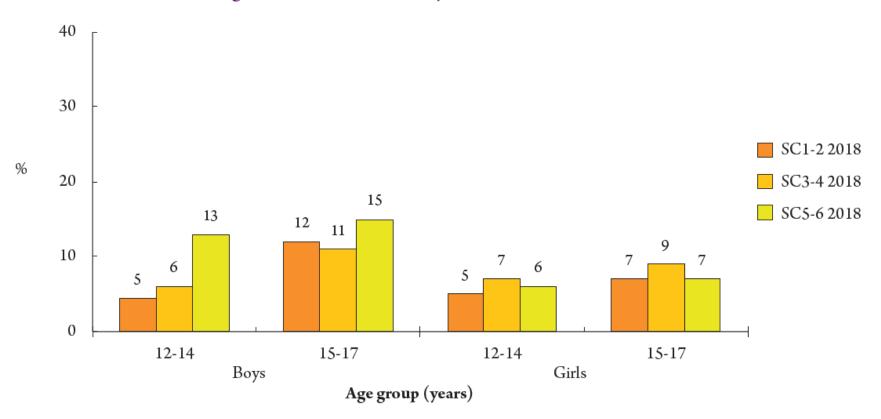
Figure 13: Percentages of 12 to 17 year old boys and girls who report they have ever used electronic cigarettes



E-cigarettes: Last 30 days



Figure 14: Percentages of 12 to 17 year old boys and girls who report they have used electronic cigarettes in the last 30 days



ALCOHOL





Alcohol (last 30 days)



Figure 17: Percentages of boys who report having had an alcoholic drink in the last 30 days

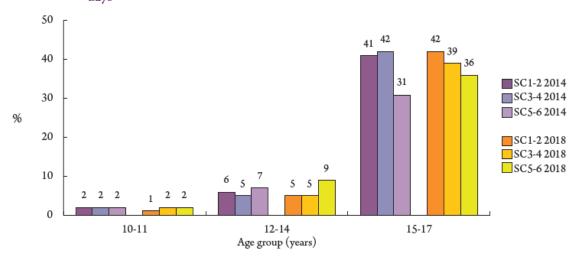
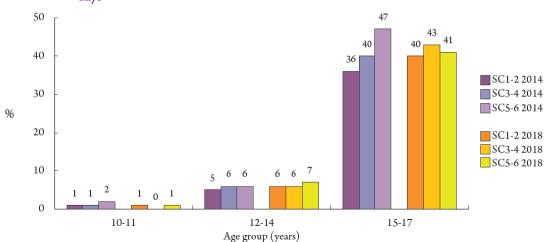
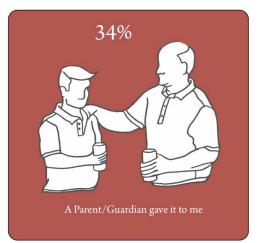


Figure 18: Percentages of girls who report having had an alcoholic drink in the last 30 days



Source of alcohol



















- Parent or Guardian 34%
- Friends 30%
- Gave someone else money to buy 21%
- Pub, bar or disco 17%
- From home 11%
- Brothers or sisters 9%
- Other way 7%

Location of alcohol consumption















- Someone else's home 30%
- At home 26%
- Bar or pub 20%
- Outdoor or open area 15%
- Disco 11%
- Other place 11%
- Restaurant 4%

DIETARY BEHAVIOURS





Eating vegetables more than once a day



Figure 31: Percentages of boys who report eating vegetables more than once a day

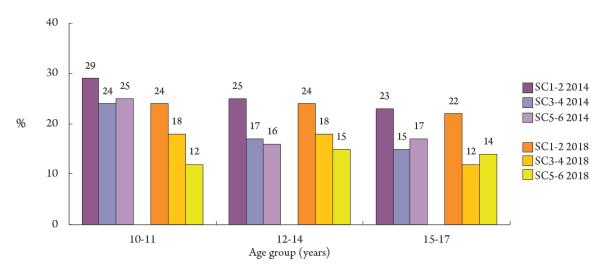
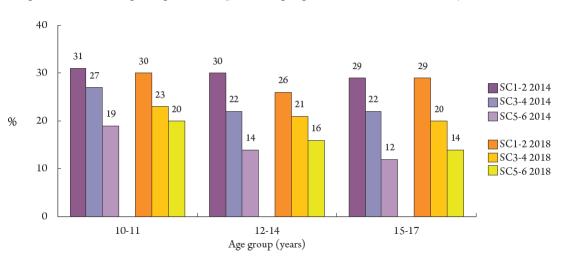


Figure 32: Percentages of girls who report eating vegetables more than once a day



Eating sweets daily or more



Figure 33: Percentages of boys who report eating sweets daily or more

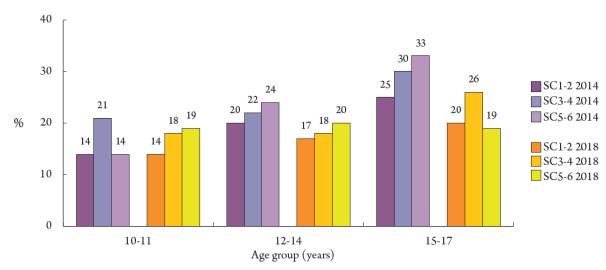
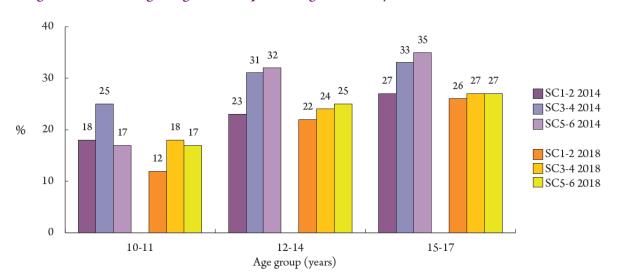


Figure 34: Percentages of girls who report eating sweets daily or more



Not having breakfast on weekdays



Figure 37: Percentages of boys who report not having breakfast on weekdays

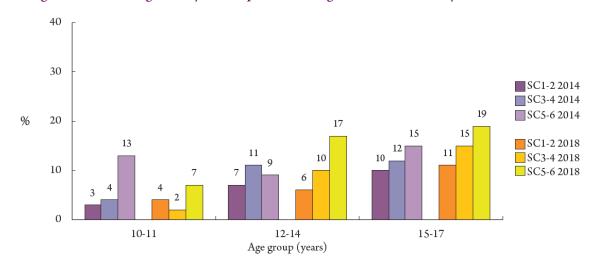
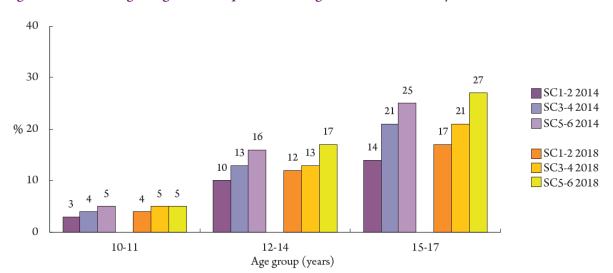


Figure 38: Percentages of girls who report not having breakfast on weekdays



Going to school or bed hungry



Figure 39: Percentages of boys who report ever going to school or bed hungry

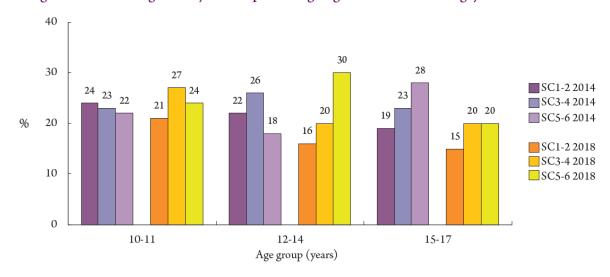
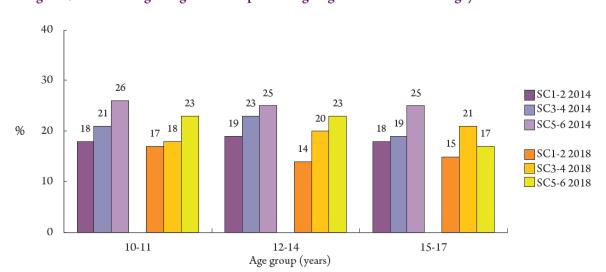


Figure 40: Percentages of girls who report ever going to school or bed hungry



PHYSICAL ACTIVITY





Physically active on 7 days in the last week



Figure 47: Percentages of boys who report being physically active on 7 days in the last week

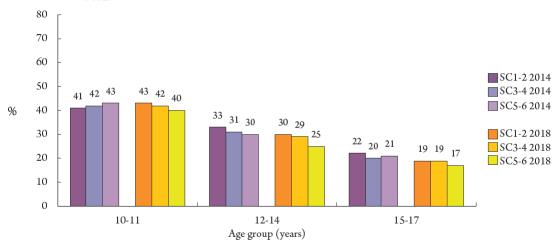
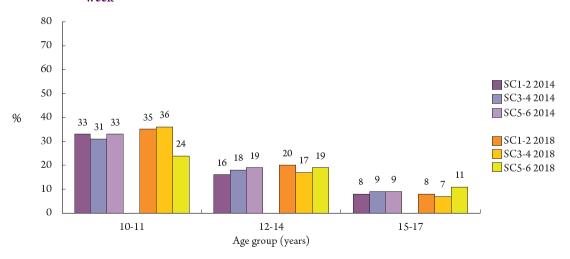
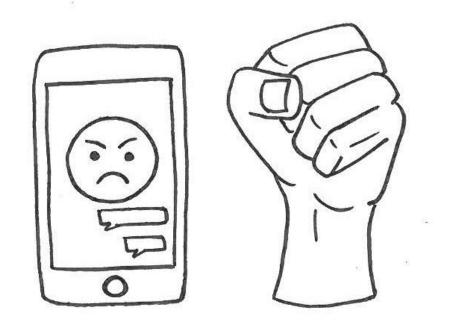


Figure 48: Percentages of girls who report being physically active on 7 days in the last week



BULLYING





Being bullied in the past couple of months (traditional)



Figure 59: Percentages of boys who report ever being bullied at school in the past couple of months

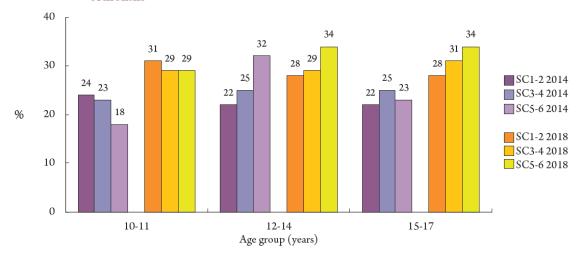
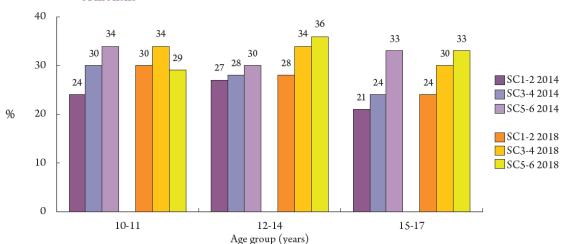


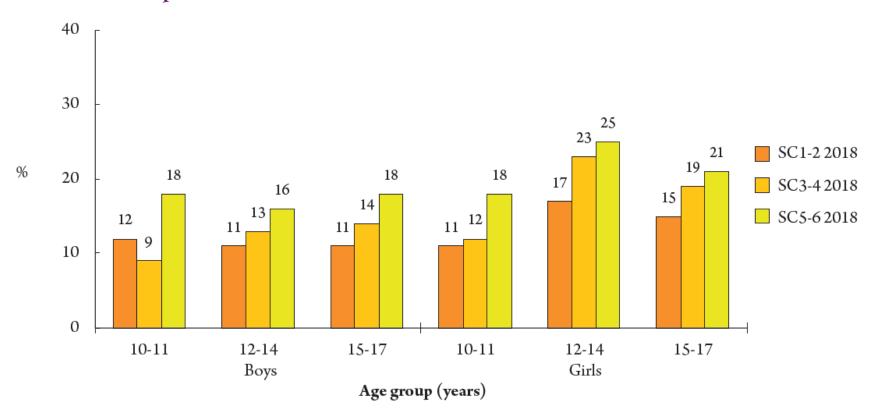
Figure 60: Percentages of girls who report ever being bullied at school in the past couple of months



Being cyberbullied in the past couple of months

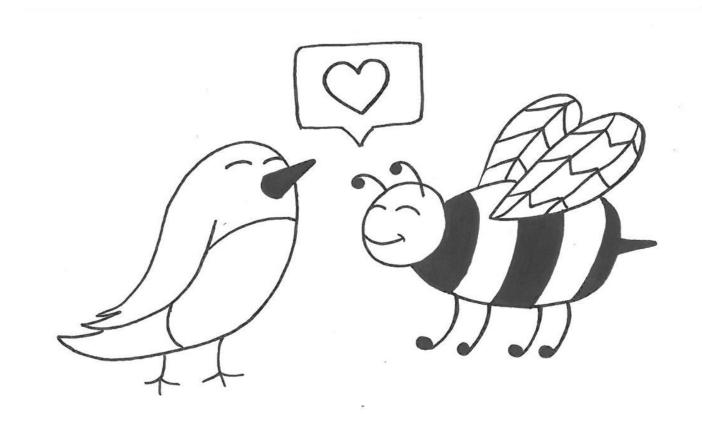


Figure 62: Percentages of boys and girls who report ever being cyberbullied in the past couple of months



SEXUAL BEHAVIOUR

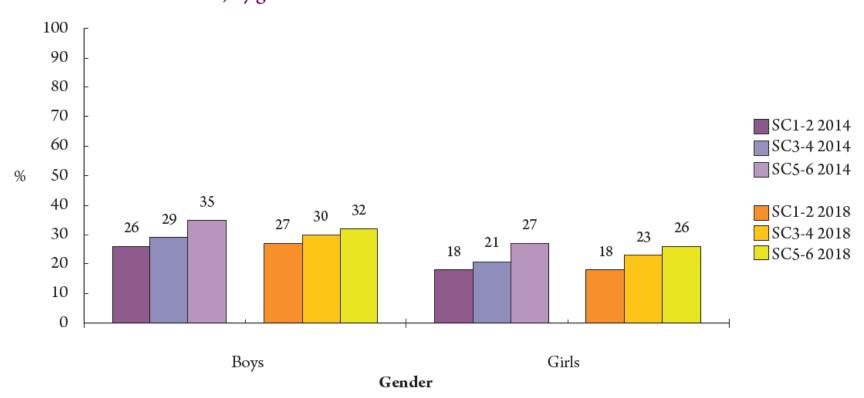




Ever had sexual intercourse



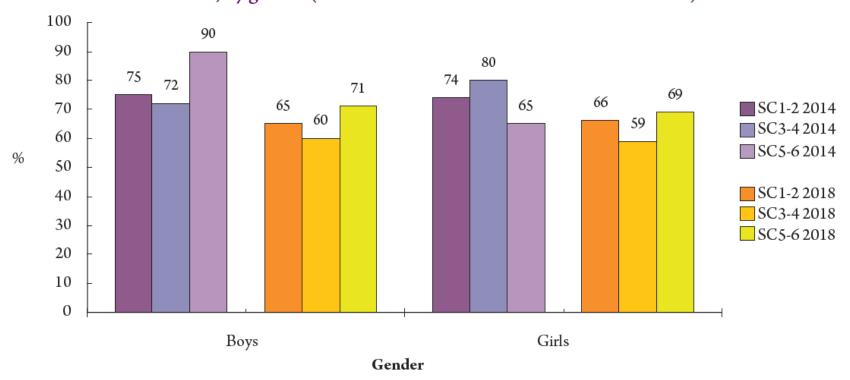
Figure 63: Percentages of 15 to 17 year olds who report having ever had sexual intercourse, by gender



Using a condom at last intercourse



Figure 65: Percentages of 15 to 17 year olds who report using a condom at last intercourse, by gender (of those who have ever had sexual intercourse)



MENTAL HEALTH





Life satisfaction



Figure 5: Percentages of boys who report high life satisfaction

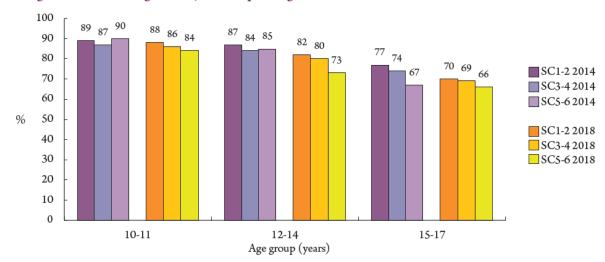
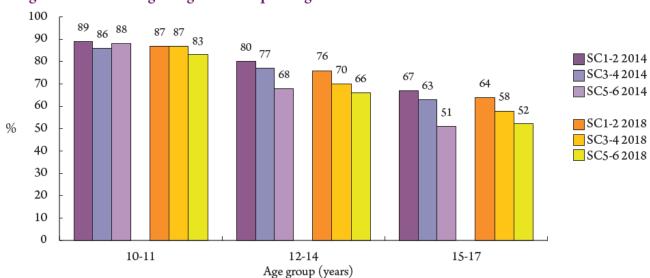


Figure 6: Percentages of girls who report high life satisfaction



WHO-5 Well-Being Index (WHO, 1998)



- Five-item scale
 - Feeling cheerful and in good spirits
 - Feeling calm and relaxed
 - Feeling active and vigorous
 - Waking up fresh and rested
 - Feeling that my daily life was filled with things that interest me
- A higher score reflects a higher level of well-being in the last two weeks

WHO-5 Well-Being Index



Table 20: WHO-Five Well-Being Index scores in 15 to 17 year olds, by gender and social class

	SC1-2		SC3-4		SC5-6	
	Boys	Girls	Boys	Girls	Boys	Girls
Mean	56.61	47.02	56.50	44.13	54.33	44.56
Std. deviation	21.35	21.34	21.80	22.32	21.30	20.73
Std. error	0.74	0.66	0.95	0.89	1.79	1.55

- Girls score significantly poorer than boys; there are no significant social class differences
- Those scoring 9 or less are at risk of depressive disorder (1.3% boys and 2.9% girls)

Summaries



GOOD NEWS

Increase	Never drinking alcohol	
Decrease	Soft drinks and sweets, alcohol, cigarette smoking, and going to bed or school hungry	

NOT SO GOOD NEWS

Increase	Being bullied
Decrease	Contraceptive pill and condom use
New item	E-cigarette use is more common as tobacco smoking

Patterns by gender



Boys	Report higher levels of self-reported health, life satisfaction, happiness, e-cigarette use (but not tobacco), cannabis, soft drinks, hunger, physical activity, being injured, fighting, bullying others (both traditional and cyberbullying) and ever having had sex
Girls	Report higher levels of love for the family, drunkenness (but not other alcohol measures), fruit and vegetables, sweets, not having breakfast and dieting, self-care, being cyberbullied and contraceptive pill use

Patterns by social class groups



Higher social class groups	Report higher levels of self-reported health, life satisfaction, fruit and vegetables consumption, physical activity and self-care behaviours
Lower social class groups	Report higher levels of current smoking, sweets and soft drink consumption, hunger, dieting, not having breakfast, fighting, bullying and being bullied (all types) and ever having had sex

Patterns by age groups



Older age groups	Report higher levels of all substance use, unhealthy food and dietary behaviours, injury, bullying others and cyberbullying (both sending and receiving)	
Younger age groups	Report higher levels of self-reported health, happiness and life satisfaction, fruit and vegetable consumption, physical activity, self-care, and of being bullied	

NEXT STEPS



- Interactive visualisations will be available on our website www.nuigalway.ie/hbsc
- HBSC Ireland research translation helpdesk open for analysis and data requests
- Continuation of data and analysis supply for DCYA, IPH, HRB and others
- Work continuing on the 2020 International HBSC report and Journal Supplements (due in April)
- Work continuing on the full HBSC Ireland trends report due this coming Autumn
- Continuing with publications with international colleagues for scientific and policy audiences

HBSC Ireland Advisory Committee



- Mr. Paul Brosnan, Department of Health
- Ms. Caitríona Connolly, Department of Health
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Acknowledgements

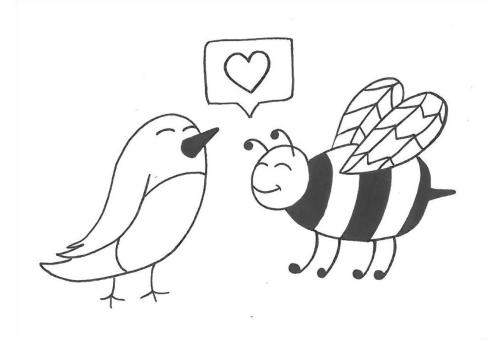


- All of the children who gave consent and participated in the study
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Thank You

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