



Department  
of Health

## DEVELOPING WELL – 11-19 YEARS

- *Wellbeing in adolescence suggests a 'u-shaped' curve, with wellbeing reaching its lowest ebb around 14-15. This decline appears to be sharper for girls*
- *Health is important for young people's wellbeing, but they perceive it as less important for their wellbeing than adults do*
- *Family relationships are very important for young people's wellbeing*
- *Poverty is associated with lower levels of wellbeing, especially when young people are deprived of things they feel are necessary for a normal childhood*
- *Being NEET (not in education, employment or training) is detrimental to young people's wellbeing*
- *Young people's experiences of school are important to their wellbeing – particularly experiences of bullying, which have a strong negative effect*

### 1. Wellbeing among Young People

- Wellbeing measures for teenagers tend to involve asking the young person how satisfied they are with their life as a whole, how happy they are in general or how satisfied or happy they are about a range of domains, such as health, family life and school. However, the Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) has now been validated for the use with 13-15 year-olds.
- **Over 80% of 11-15-year-olds in England are satisfied with their lives** overall (scoring more than 6 out of 10 on the Cantril Ladder scale)<sup>1</sup>. There are some differences between genders (see Figure 1).
- **Wellbeing appears to be relatively stable within individuals** over time in this age group. Having low levels of wellbeing increases the chances of experiencing low levels of wellbeing later on<sup>2 3</sup>.
- **There are gender differences in levels of wellbeing, which appear to become more pronounced through the teenage years** (see Figure 1). Across age 11 to 15, girls have lower levels of wellbeing than boys, and the gap between them increases over time<sup>1</sup>. Girls are also more likely than boys to develop emotional disorders over a three year period, even if they have no symptoms initially<sup>4</sup>. This clinical finding is replicated for sub-clinical symptoms: 'feeling low' at least once a week is more common among girls than boys, and this difference increases as they get older<sup>1</sup>.

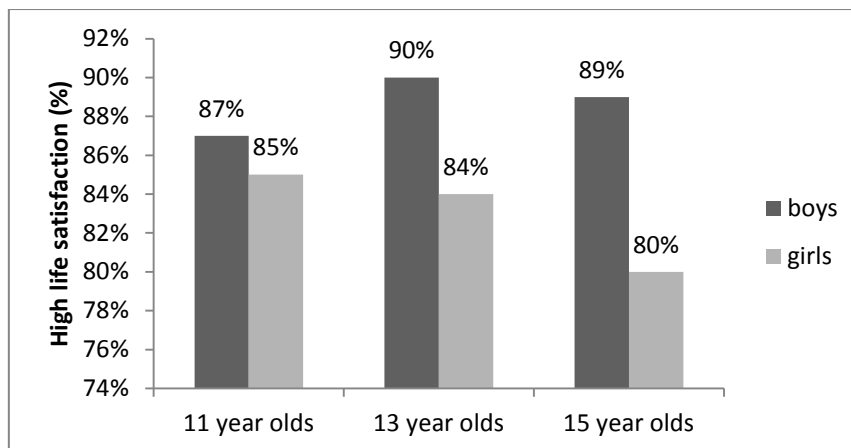


Figure 1: 11, 13 and 15 year olds with high life satisfaction (over 6) ratings, by gender (Source: HBSC England Report 2009-10)

- Growing older (towards mid-teenage years) tends to result in lower levels of wellbeing for both genders, but this does not appear to be an inevitable part of adolescence. When asked how happy they are with five areas of their life<sup>i</sup> and with their life overall, **young people report lower levels of wellbeing with age<sup>2</sup>**. However, this relationship becomes non-significant in the analysis when other factors are controlled for, suggesting that this decline is due to age being associated with increased prevalence of threats to wellbeing, rather than age itself.
- **Although wellbeing seems to decrease between the ages of 11 to 15, this trend appears to reverse for 16 and 17-year-olds, with a slight rise in levels of wellbeing in this age group. This suggests a ‘u-shaped’ curve in adolescence<sup>3</sup>**. Findings from the Children’s Society suggest that this is associated with increases in this age group’s happiness with the amount of choice they have in their lives, their family and their appearance; these are the areas which experience the greatest decreases over the 11 to 15 age range.
- **16 to 19-year-olds appear to have lower levels of anxiety than people in midlife**, and have similarly low levels to adults in the ‘post-retirement peak’ of 65-70 years. **16 to 24-year-olds tend to have higher levels of wellbeing than people in midlife** in general, with higher ratings of life satisfaction, happiness and how worthwhile their life is<sup>5</sup>.
- **Being part of an ethnic minority has been found to have no effect on young people’s level of wellbeing** when accounting for other factors<sup>2</sup>.

## 2. Health and Health Behaviours

- In England, 84% of 11-15-year-olds rate their health as good or excellent, and **self-rated health is associated with higher life satisfaction**: 93% of young people who report excellent or good health also have high life satisfaction, compared with 50% of those who rate their health as poor<sup>1</sup>.

<sup>i</sup> School work, appearance, family, friends, and the school they attend – from Understanding Society.

- Young people between the ages of five and 16 may be more likely to develop an emotional disorder over the next three years if they have a physical disorder<sup>4</sup>, and **19-year-olds who have a disability tend to be more likely to report low life satisfaction**, with 17% reporting they are dissatisfied with their lives, compared with 7% of young people who do not have a disability<sup>6</sup>.
- **Health is clearly linked with young people's wellbeing**, replicating findings with adults. There are two key differences between these age groups however. When asked, more adults mention health as important in their lives than mention any other factor<sup>7</sup>; adolescents do not appear to share this level of concern, and health does not feature as prominently as a priority for their wellbeing<sup>8</sup>. Self-reported health is the single strongest predictor of adult wellbeing<sup>9</sup>; for adolescents, health ranks fourth of life domains assessed by the Children's Society for strength of association with life satisfaction, after 'family', 'choice' and 'money and possessions'<sup>3</sup>.
- **Young people's wellbeing appears to be linked to the health of people around them.** Young people who have a parent with a limiting long term illness tend to have lower levels of wellbeing<sup>10</sup>. Young people with a parent who cares for them or a disabled sibling also tend to have lower levels of wellbeing<sup>10</sup>.
- **Maternal wellbeing appears to be very important for young people's wellbeing.** Mothers' mental wellbeing is associated with their children's wellbeing among 11 to 15-year-olds – mothers with higher levels of wellbeing had children with higher levels of wellbeing<sup>2</sup>, and children whose mothers are at risk of mental health difficulties are more likely to develop or experience the persistence of an emotional disorder over the next three years<sup>4</sup>.
- **Some, but not all, health risk behaviours are associated with low levels of wellbeing among young people.** Young people who are currently smokers tend to be more likely to be unhappy than non-smokers<sup>11</sup>. Young people who have ever tried an illegal drug tend to have lower levels of wellbeing<sup>2</sup> and young people who have used illegal drugs in the last year have been found to be 1.5 times more likely to have low levels of wellbeing<sup>12</sup>.
- 15-17-year-olds are involved in more risky behaviours (smoking, intercourse, drug use, and alcohol consumption) than those in younger age groups (11-12 and 13-14), and **15-17-year-olds with lower levels of wellbeing (do not feel happy, good about themselves or confident and feel low) tend to be more likely to engage in these risky behaviours<sup>11</sup>** (see Figure 2).

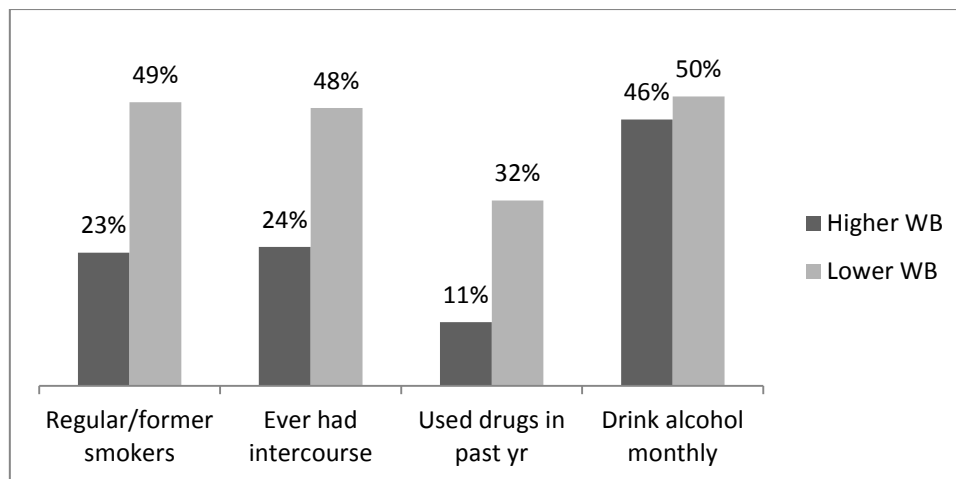


Figure 2: Percentage of 15-17 year olds engaging in health risk behaviours by subjective wellbeing (Source: Lifecourse Tracker Young People Survey, Baseline Summer 2012. Respondents aged 15-17 years)

- However, young people who have never smoked and never drank alcohol appear to have similar levels of wellbeing to those who have engaged in these behaviours, once socioeconomic factors are taken into account<sup>2</sup>.
- **Positive health behaviours have more mixed effects on wellbeing than health risk behaviours.**
- In a recent report by the Children’s Society, children who **engaged in team sports or activities, non-team sports and activities and cycling or walking very often or every day reported higher levels of wellbeing** than those who never or occasionally took part in these activities<sup>3</sup>.
- This research did not take into account other factors however, which could also be associated with engaging in physical activity. In a more thorough and controlled analysis, NatCen found that **active travel to school is not associated with the wellbeing of 11-15-year-olds and days per week of sport or keep fit activity does not have an effect on 11-15-year-olds’ wellbeing<sup>2</sup>.**
- Secondary analysis of a large UK-representative dataset, controlling for other variables, found little association between incremental increases in television viewing and young people’s wellbeing<sup>2</sup>. However, **particularly high levels of certain types of screen time appear to be linked to lower levels of wellbeing**: young people who spend more than four hours playing computer games on weekdays have lower levels of wellbeing than those who play for less than one hour<sup>2</sup>.
- **Healthy, or unhealthy, eating habits appear to not have a significant impact on young people’s wellbeing.** 11 to 15-year-olds’ wellbeing is not associated with a range of dietary behaviours, such as eating 5-a-day of fruit and vegetables, having unhealthy or sugary snacks between meals, or drinking sugary drinks between meals<sup>2</sup>.
- There is one exception to this lack of association: **eating fast food or takeaways on at least a weekly basis was associated with higher levels of wellbeing** compared with rarely or never

eating these types of food. This may be due to the context in which these food types are consumed, often as a treat with family or friends.

### 3. Family

- **Family is the aspect of young people’s lives that most strongly predicted their life satisfaction** in recent research by the Children’s Society<sup>3</sup>. Family structure, however, appears to have little effect on young people’s wellbeing: living with one or two parents does not influence the wellbeing of 11-15-year-olds, controlling for other variables<sup>3</sup>.
- 11 to 15-year-olds whose family situation is classified as ‘other’ in Children’s Society research (approximately 1% of children were not currently living with either of their parents, or possibly without parent figures at all) were more likely to experience low levels of wellbeing: 50% of children in this group reported low levels of wellbeing, compared with 10% of all young people<sup>8</sup>.
- **For 19-year-olds, whether they have their own child affects their life satisfaction:** both young men and young women with a child reported higher levels of life satisfaction, with 36% and 35% reporting that they were very satisfied with their lives, compared with 27% of childless young people<sup>6</sup>.
- Although family structure does not have a large effect on wellbeing, **changes in family structure** are associated. **Changing from living with two parents to living with only one is associated with an increased risk of developing an emotional disorder for children aged 5-16**, as are other stressful life events<sup>4</sup>. Changes in the adults a child lives with is associated with a higher risk of experiencing low levels of wellbeing among 11 to 15-year-olds, as is moving house more than once in a year<sup>8</sup>.
- **Family relationships are an important predictor of children and young people’s wellbeing.** Feeling supported by their family, regularly talking to family members about things that matter to them and eating meals together are all associated with higher levels of wellbeing in 11-15 year-olds<sup>2,3,6</sup> (see Figure 3).

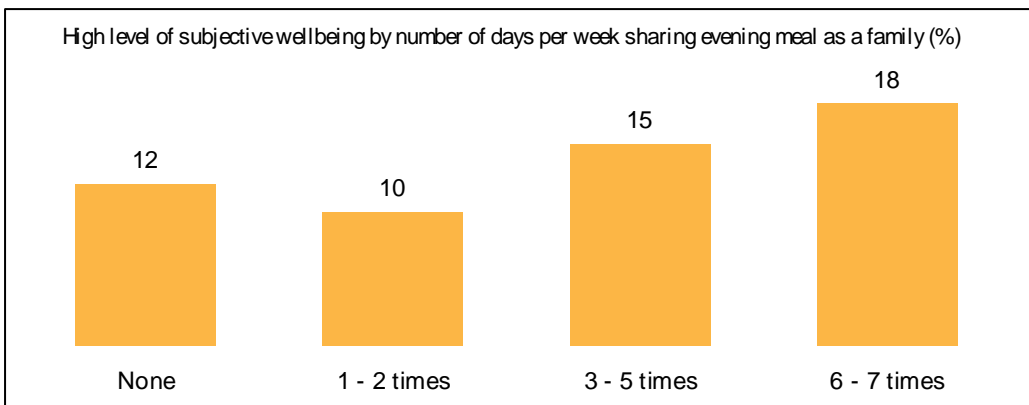


Figure 3: Subjective wellbeing and sharing evening meals as a family (Source: Understanding Society, Wave 1. Respondents aged 10-15 years)

- While they are a minority (7%), **11 to 15-year-olds who do not feel safe at home have been found to be far more likely to have low levels of wellbeing**, with over 70% of this group experiencing low levels of wellbeing, compared with 10% of children who feel safe at home<sup>8</sup>.
- **Sibling bullying is associated with lower levels of wellbeing among 10 to 15-year-olds**, whether they are the bully or the victim<sup>13</sup>. Bullying their siblings increases young people's odds of low levels of wellbeing more than being bullied does, but **young people who are victims of bullying at home are more likely to be victims of bullying at school**, another strong predictor of wellbeing.
- **Relationships with their parents appear to be very important for children and young people's wellbeing**. Young people who feel that their parents are warm towards them have higher levels of wellbeing<sup>14</sup> and the negative impact of divorce on child wellbeing is partly explained by its association with poorer parent-child relationships<sup>15</sup>.
- Communication within the family seems to be an important basis for family support and wellbeing. 11- to 15-year-olds who feel they can very **easily communicate with their mothers** are more likely to report **high life satisfaction** than those who report difficult communications with their mother; ease of communication with their father appears to be less important and does not predict young people's wellbeing<sup>16</sup>.
- **Relationships between parents are important for young people's wellbeing**: parental conflict is a key process through which separation and divorce can result in lower levels of wellbeing for children<sup>15</sup>. Parental conflict also has implications for adult wellbeing: marriages with high levels of conflict that remain intact through the children's teenage years are associated with lower levels of wellbeing in adulthood, suggesting that it may not always be best to 'stay together for the kids'<sup>17</sup>.

#### **4. Poverty, Income and Deprivation**

- Research suggests that **recent paternal unemployment does not have an impact on children's happiness** with their lives or their self-esteem, but **paternal unemployment in the previous three years has a strong and negative effect on children's wellbeing**, even if their father is now employed<sup>18</sup>. This is referred to as a 'scarring' effect, and is specific to unemployment, rather than being due to general inactivity in the labour market. **The longer a father has spent out of work in the last three years, the lower his children's level of wellbeing**, even controlling for socioeconomic factors, such as household income
- **Among older adolescents, engaging in employment, education or training is important for wellbeing**. In a recent UNICEF report, the UK ranked 24<sup>th</sup> out of 28 OECD countries for rates of 15 to 19-year-olds who are NEET (not in education, employment or training), with 10% of young people in this situation<sup>19</sup>. **Being "NEET" is consistently associated with lower levels of wellbeing across later adolescent years**: children who were less happy at age 14 were more likely to be NEET at age 16<sup>20</sup>, and young people who were NEET at 16 and 19 were more likely to

have low levels of wellbeing (dissatisfied with their lives or unhappy) than young people in education, training or employment<sup>6,20</sup>.

- Parental reports of deprivation, such as lacking the money for holidays, social activities or household repairs, have not been found to be associated with 11 to 15-year-olds' wellbeing<sup>2</sup>.
- **Child reported deprivation appears to have a stronger effect**, although these findings come from unadjusted analysis<sup>8</sup>. Young people who are lacking five or more of 10 items that are viewed by their peers as necessary for a normal childhood are **five times as likely to experience low levels of wellbeing** as children who are lacking none of these things, and twice as likely as children who are lacking two of these items.

## 5. Neighbourhood and housing

- **Housing tenure had a significant effect on 11 to 15-year-olds' wellbeing**: young people who lived in privately rented accommodation had lower levels of wellbeing than those whose parents owned their homes<sup>2</sup>. Housing tenure also has an impact on the **persistence of emotional disorders** among young people: children whose parents rented, rather than owned, the property were more likely to experience persistent symptoms of emotional disorder over three years (35% persistence vs. 26% persistence)<sup>4</sup>.
- Living in a low socioeconomic status neighbourhood is associated with higher rates of internalising problems for adolescents, such as anxiety and depression<sup>21</sup>. More broadly, how happy young people are in general with their local area has been found to be strongly associated with their overall wellbeing<sup>8</sup>.

## 6. Friends and school

- **Having social support and someone to talk to about problems is important for wellbeing**. 26% of 16-year-olds who said they were much more depressed or unhappy than usual didn't talk to anyone about their problems, compared with 5% of those who did not feel this way at all<sup>20</sup>.
- **Bullying at school is a strong predictor of wellbeing**, whether it has been experienced recently or several years ago. Being bullied between the ages of eight and 10 has a strong association with children's emotional wellbeing in their early teenage years (age 11-14).<sup>22</sup> The single question 'have you been bullied in the last twelve months?' has been found to explain more variation in the wellbeing scores of 11 to 15-year-olds than their individual and family characteristics (such as gender, ethnicity and family income) combined<sup>8</sup>.
- **Physical bullying at school was associated with lower levels of wellbeing**, controlling for other factors, among 11 to 15-year-olds, and young people's number of friends does not explain significant variations in wellbeing when the effect of negative peer relationships is accounted for<sup>2</sup>.

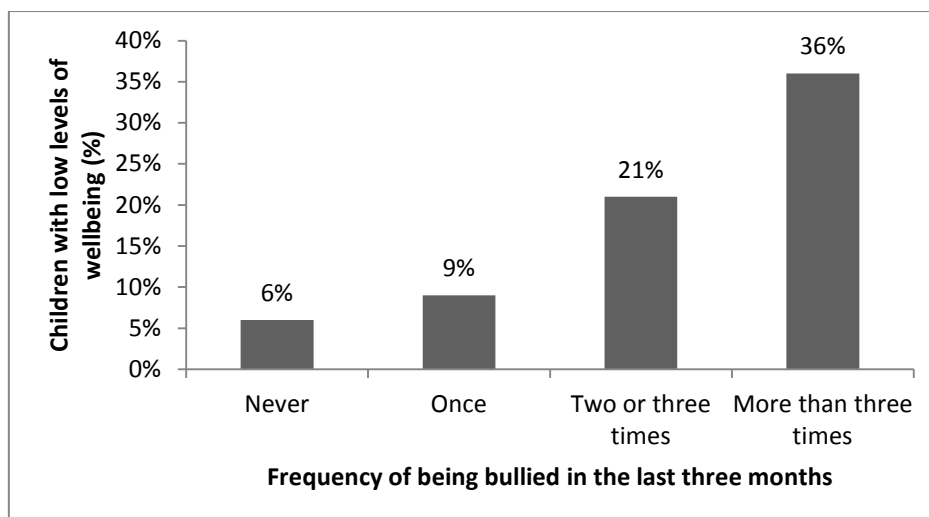


Figure 4: Low levels of wellbeing by frequency of being bullied in the last three months (Source: The Good Childhood Report 2012, The Children’s Society. Respondents aged 10-15)

- Experiences at school other than bullying are important to young people’s wellbeing. 7% of 10 to 15-year-olds report that they **do not feel safe at school**, but these young people are **far more likely to report low levels of wellbeing** (35% vs. 11% of the rest of the sample)<sup>8</sup>. In contrast, **11 to 15-year-olds who experience a strong sense of ‘school belonging’ are more likely to have high levels of wellbeing** than those who experience weak, or medium feelings of school belonging<sup>16</sup>.
- **The experience of disruptive behaviour in school is negatively associated with young people’s wellbeing**, whether it is perpetrated by them or by their classmates<sup>2</sup>.
- **Educational achievement matters for wellbeing, both for the rest of adolescence and adulthood.** Young people with five or more GCSEs at A\*- C grades have higher levels of life satisfaction than those with lower qualifications at age 19<sup>6</sup>. **Qualifications matter for later wellbeing:** higher levels of educational achievement are associated with higher levels of wellbeing in adulthood<sup>2</sup>.

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<sup>2</sup> Chanfraeu, J., Lloyd, C., Byron, C., Roberts, C., Craig, R., De Feo, D., McManus, S (2013). *Predicting Wellbeing*. Prepared by NatCen Social Research for the Department of Health <http://www.natcen.ac.uk/media/205352/predictors-of-wellbeing.pdf>

<sup>3</sup> Rees et al. 2013. The Good Childhood Report 2013. *The Children’s Society, Leeds*.

<sup>4</sup> Clements, A., Fletcher, D., & Parry-Langdon, N. 2008. Three years on: Survey of the development and emotional wellbeing of children and young people. *Office for National Statistics*.

<sup>5</sup> Office for National Statistics. 2013. Personal Well-being in the UK, 2012/13. *Statistical Bulletin from the Office for National Statistics*.

<sup>6</sup> Department for Education. 2011. *Youth Cohort Study & Longitudinal Study of Young People in England: The activities and experiences of 19 year olds: England 2010*.



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- <sup>7</sup> Office for National Statistics. 2011. Findings from the National Well-being Debate. *Supplementary Paper from the Office for National Statistics*.
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- <sup>19</sup> UNICEF Office of Research. 2013. UNICEF Innocenti Report Card 11: Child wellbeing in rich countries: A comparative overview. Accessed at <http://www.unicef-irc.org/publications/683>.
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