What is happening to children and young people's risk behaviours?

In the first year of the Horizon Scanning Programme, we led a research project on the Social Attitudes of Young People. The report, published late last year, identified that over the last decade there is evidence to suggest a slow and steady decline in risk behaviours and negative outcomes, such as drinking, drug use, smoking, youth crime, suicide, and teenage pregnancy amongst children and young people (for more information, see the accompanying data pack).
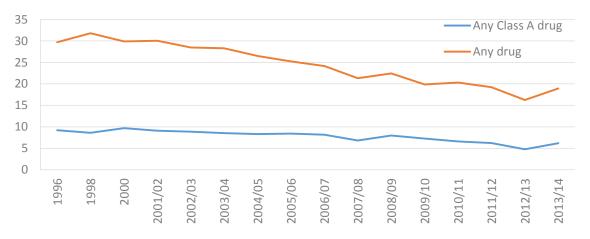
These findings were discussed by the Cabinet Secretary Advisory Group in summer 2014. They agreed that these trends look like good news but they raise a number of questions:

1. How confident can we be that these trends are really happening?
2. What is causing them?
3. Are new risk behaviours emerging and what is the impact of digital technologies?
4. What does this mean for Government?

As a result, the Government Chief Scientific Adviser, Sir Mark Walport decided to look at these issues in more detail. On 14th October, Sir Mark chaired a roundtable discussion of academics, practitioners, policy officials and young people to assess what the evidence tells us about these questions.

This article summarises the views of attendees based on the discussions at this roundtable and accompanying desk research.
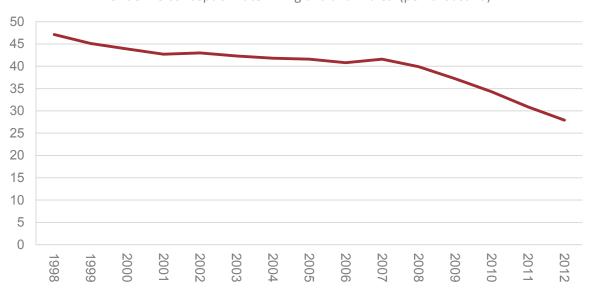
Proportion of 16-24 year olds reporting drug use in the last year in England and Wales 1996-2013/14

Source: Home Office (2014) Drug misuse: findings from the 2013 to 2014 Crime Survey for England and Wales

Are risk behaviours in decline?

The group discussed how the practical difficulties in measuring risk behaviours make it difficult to be certain about the trends. Most data comes from self-declared participation in such activities. It may be that as these behaviours become less socially acceptable, fewer children and young people own

up to them when asked. There is evidence that young people now think that smoking and drinking is less acceptable for their age group than they did 10 years ago.[1]

Under 18 conception rate in England and Wales (per thousand)

Source: ONS (2014) Conceptions in England and Wales, 2012

It was recognised that those most likely to be engaging in harmful risk behaviours are often the most disengaged from public services and so the most difficult to persuade to take part in research. The Health Behaviours of School Aged children survey sampled children through school, so those who are regularly absent or excluded would not be included.

Omitting the small number of people more likely to participate in multiple and severe risk behaviours could lead to systematic underestimation of the problem. Whilst a significant proportion of young people drink alcohol to some degree, the costs of alcohol abuse are exponential. It is the small number of people who consume the most alcohol who have the most contact with public services and the worst outcomes.
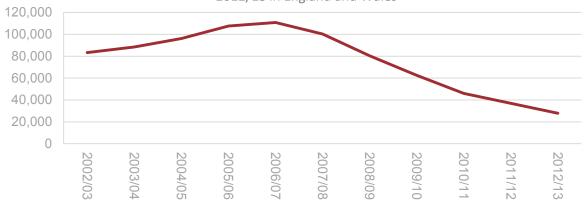
However, despite these methodological issues, attendees felt that it is likely that we are seeing a genuine decline in a number of risk behaviours. There is evidence that trends similar to those observed in the UK are being seen in comparable countries. The USA has seen consistently declining rates of crime committed by children and young people over the past 20 years. Falls in suicide rates, binge drinking and smoking amongst teenagers have also been observed. A large number of developed countries have seen declining teen birth rates.[2]

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[1] HSCIC (2014) *Smoking, Drinking and Drug Use amongst Young People in England in 2013* [online]. Available from: http://www.hscic.gov.uk/catalogue/PUB14579/smok-drin-drug-youn-peop-eng-2013-rep.pdf
[2] Finkelhor, D. (2014) *Trends in Child Welfare* Carsey Institute Policy Series 31.3.14.

Numbers of first time entrants to the criminal justice system aged 10-17 from 2002/3 to 2012/13 in England and Wales

Source: Youth Justice Board (2014) Youth Justice Statistics 2012/13: England and Wales

Despite the declines in a number of risk behaviours, the group agreed that there are still persistent challenges that cannot be ignored. Participation in a number of risk behaviours is still high by international standards. For example, globally, 'heavy episodic drinking' by 15-19 year olds is higher in Europe than any other region, and the UK has one of the highest rates in Europe.[3]

Why might this be happening?

Given the number of complex personal, familial or societal factors that may underpin why any one child or young person may engage in these behaviours, attendees noted that it is unlikely that a single 'grand theory' could explain all declining risk behaviours over time.

It is also very difficult to isolate the relative importance of specific drivers of risk behaviour. Some of these drivers relate to the behaviour and attitudes of young people; others relate more to the influences and controls acting upon them.

The group discussed how trends in specific risk behaviours and outcomes can sometimes be explained by specific policy interventions, like the more effective enforcement of under-age drinking laws. However, the declining trends in a number of behaviours and outcomes implies that some common underlying causes, such as changing attitudes and norms and wider socio-economic factors, may be at work.

One theory discussed by the group stems from evidence of improved parenting practices since the 1980s. It may be that better relationships with parents, and improved parental monitoring and supervision are part of the explanation for declining risk behaviours.[4]

Some attendees felt that it may be simply that other activities have replaced these 'traditional' risk behaviours. For instance, if children and young people are spending more time online or in structured extra-curricular activities, then they will have less time and opportunity to participate in traditional risk behaviours.

What about the most vulnerable?

Engaging in multiple and severe risk behaviours is often associated with a range of future negative outcomes, such as criminal behaviour, lower educational attainment and prolonged unemployment.

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[3] World Health Organisation (2014) *Global Status Report on Alcohol 2014*
[4] Gardner et al. (2012) 'Trends in Parenting' in Ann Hagell Ed. *Changing Adolescence* Bristol, Policy Press

The group discussed how vulnerability can be defined in many ways; by socio-economic circumstances, poor mental health or the absence of supportive family relationships. Some groups will be particularly at risk, such as children in care or those involved in gangs, who may be forced to participate in risk behaviours.

Attendees agreed that it may be that an overall decline in risk behaviours masks different trends for particular groups of children and young people, particularly the most vulnerable. Whilst the numbers of children and young people who drink has declined, among 15 year olds who report drinking weekly, 83% of boys and 57 % of girls reported being drunk more than 10 times during last 30 days[5]. Across the whole population, alcohol-related admissions to hospital in England have increased significantly in the 10 years to 2011/12 and ONS mortality data show a rise in deaths from alcohol poisoning, despite declining overall alcohol consumption.[6]

Similarly, whilst the numbers of first time entrants to the Youth Justice System has declined dramatically in the last 10 years, those in the Youth Justice System are now more likely to re-offend.[7]

For many risk behaviours, there appears to be an evidence gap; whilst we know that risk behaviours are in decline overall we cannot be sure if the same can be said for the most vulnerable. Attendees noted that we don't appear to know if the 'core' of children and young people engaged in multiple and severe risk behaviours is growing or if their outcomes are getting worse.

What new risk behaviours could be emerging? How could digital immersion change risk behaviours?

The group discussed how new or previously unrecognised risk behaviours may be emerging. The evidence is incomplete but it is possible that self-harm is on the rise.   It is particularly an area of concern for teenage girls; around one third of 15 year old girls report having self-harmed.[8] Figures for eating disorders and body image issues suggest that these are also significant problems, and are likely to be associated with poor mental health.

Physical exercise may also be in decline amongst teenagers. This could have long term health implications. The proportion of boys meeting current guidelines for physical activity has decreased from 28% in 2008 to 21% in 2012. For girls, rates of physical activity are lower but the decrease, from 19% in 2008 to 16% in 2012, was not as significant[9]. Chronic lack of sleep may also be an issue for many adolescents and could be associated with mental health problems.

Clearly, the advent of digital immersion, including social media use and online gaming, particularly amongst children and young people, denotes a rapid and dramatic societal shift that has occurred in a short space of time. Attendees discussed the wide ranging impacts that these changes might have on young people. The online space constitutes a place where children and young people can explore, experiment and socialise. As technology changes, this space is becoming more

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[5] Brooks, F et al (2015) *The Health Behaviour in School aged Children (HBSC) 4th England National Report.* University of Hertfordshire. Hatfield *(in press)*

[6] HSCIC (2013) *Statistics on Alcohol in England 2013* Online available from: http://www.hscic.gov.uk/catalogue/PUB10932

[7] Ministry of Justice (2014) *Criminal Justice Statistics Quarterly Update to March 2014* https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/346639/criminal-justice-statistics-april-2013-to-march-2014.pdf

[8] Brooks, F et al (2015) *The Health Behaviour in School aged Children (HBSC) 4th England National Report.* University of Hertfordshire. Hatfield *(in press)*

[9] Health and Social Care Information Centre (2014) *Statistics on obesity, physical activity and diet, England 2014* [online]. Available from: http://www.hscic.gov.uk/catalogue/PUB13648/Obes-phys-acti-diet-eng-2014-rep.pdf

'personalised' people access the internet through their smart phones and tablets. Attendees felt that the growth of social media and other new technologies means that pathways to risk may be reconfigured through new technological interfaces and also new social practices. For example, the group discussed how the internet makes obtaining legal high 'designer drugs' easier. However, that does not mean that technologies necessarily increase risk behaviours or negative outcomes.

There is clear evidence that moderate use of technology is likely to have significant positive impacts, improving wellbeing and social connectedness[10]. Attendees observed that for many young people it will be a valuable source of information and support, alleviating concerns about mental or sexual health.

However, for a small minority of young people who use technology extensively, there could be a range of negative impacts. Attendees felt that it was possible that this trend could intensify as young people's social interactions become increasingly technologically mediated by new devices and applications. For some children and young people internet usage approaches levels where it could be classified as an addiction[11].

The group discussed how estimates of online risks vary according to definition and measurement, but do not appear to be rising substantially as access to mobile and online technologies increases. This may be because these technologies pose no additional risk to offline behaviour, or because any risks are offset by a commensurate growth in safety awareness and initiatives. We are seeing increased cyber-bullying and exposure of children to hate content, self-harm and pro-anorexia sites. However, 'sexting' and exposure to sexual content is declining. Under-age use of social media has fallen over time.[12] Some participants felt that online risk behaviours are likely to be linked, such as accessing pornography, sexting, bullying and 'revenge porn', and that these could have significant psychological impacts.

The group felt that there is considerable uncertainty about the scale of these effects. In many areas there is little evidence of causal impact and it is often too early to tell what the long-term impacts might be. However, a correlation has been observed between online and offline risk behaviours, suggesting both might have common causes.

What might the future hold?

Attendees emphasised that there are many positive things about this generation of young people that often go unrecognised in public debate. As well as declining participation in risk behaviours, large numbers of young people are actively participating in society. 80% of 16 to 24 year olds have volunteered in the last year, more than any other age group.[13]

Nevertheless, risk behaviours do persist, and there is significant uncertainty about whether new forms could be emerging. We are still unable to be certain about the trends in risk behaviours for the most vulnerable groups. This means that there's no space for complacency.

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[10] ONS (2012) *Measuring National Wellbeing- Children's Wellbeing 2012* [online]. Available from: http://www.ons.gov.uk/ons/dcp171766_283988.pdf

[11] Howard-Jones, P. (2011) *The impact of digital technologies on human wellbeing* Nominet Trust [online]. Available from: http://www.nominettrust.org.uk/sites/default/files/NT%20SoA%20-%20The%20impact%20of%20digital%20technologies%20on%20human%20wellbeing.pdf

[12] Livingstone, S. et al. (2014) *'Net Children Go Mobile, The UK report'* Online available from: http://eprints.lse.ac.uk/57598/1/__lse.ac.uk_storage_LIBRARY_Secondary_libfile_shared_repository_Content_EU%20Kids%20Online_EU_KIids_Online_Net_Children_go.pdf

[13]Cabinet Office (2014) *Community Life Survey 2013/14* online available from: https://www.gov.uk/government/statistics/community-life-survey-2013-to-2014-data