



NUI Galway  
OÉ Gaillimh

# Health Behaviour in School-aged Children (HBSC):

A World Health Organisation  
Cross-national Collaboration

*September 2013*



The HBSC Ireland Trends Report  
1998–2010:

Child Health Behaviours,  
Outcomes and Contexts

*September 2013*





# Presentation Outline

- HBSC Background
- HBSC Methods
- Framework
- Findings





# HBSC: Background

- Collaborative study with WHO European Region
- Initiated by 4 countries in 1982
- 40 countries and regions collected data in 2010
- Irish data collected in 1998, 2002, 2006 and 2010
- Temporal trends presented for the first time



# HBSC: Ireland

- Four cycles of data collection to date
  - 1998
    - N= 8,497; 5<sup>th</sup> class to 5<sup>th</sup> year; 10-17 year olds
  - 2002
    - N= 8,424; 5<sup>th</sup> class to 5<sup>th</sup> year; 10-17 year olds
  - 2006
    - N=13,738; 3<sup>rd</sup> class to 5<sup>th</sup> year; 9-17 year olds
  - 2010
    - N=16,060; 3<sup>rd</sup> class to 5<sup>th</sup> year; 9-17 year olds
- Trends 1998 – 2010
  - 5<sup>th</sup> class to 5<sup>th</sup> year; 10-17 year olds
  - Items that were used in each cycle 1998-2010 or since 2002

# HBSC: Objectives

- To contribute to theoretical, conceptual, and methodological developments
- ***To monitor health of school-aged children over time***
- To compare health of school-aged children in member countries
- To disseminate findings

## HBSC: Objectives (2)

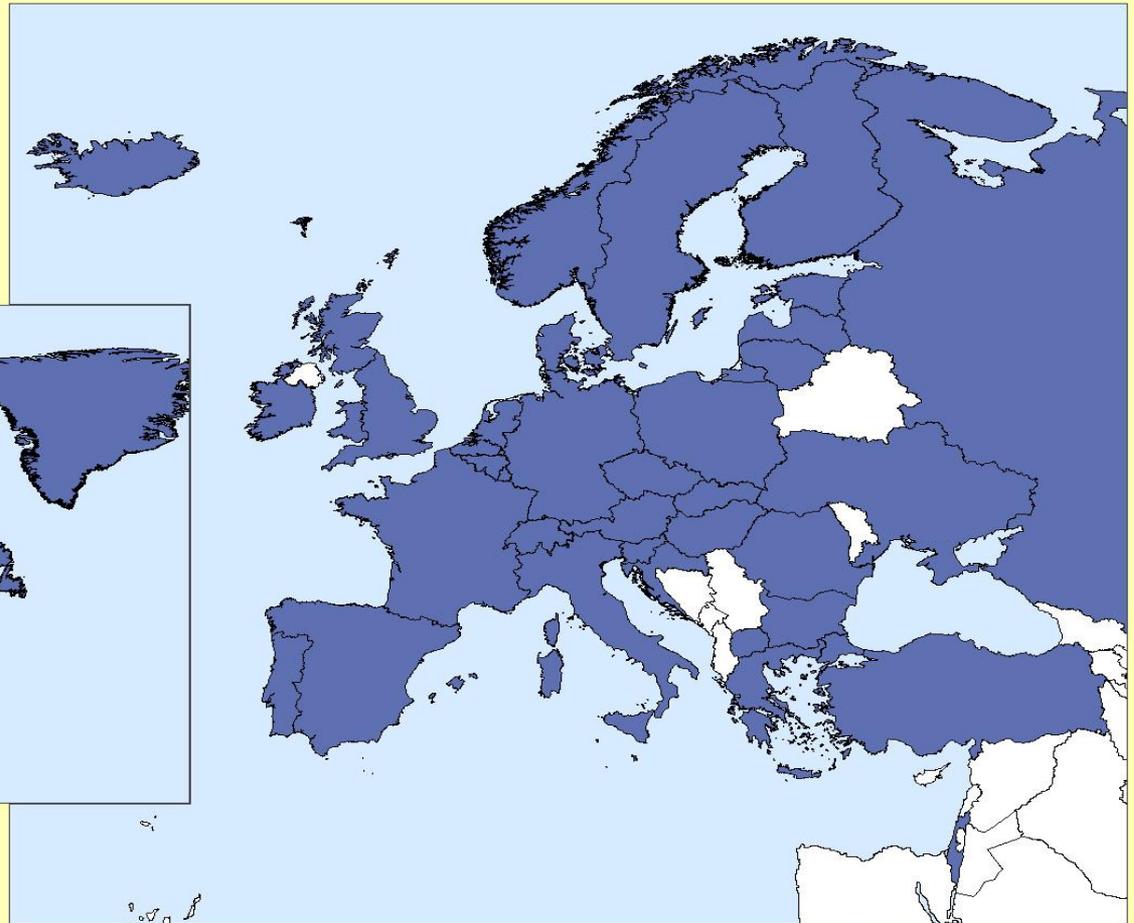
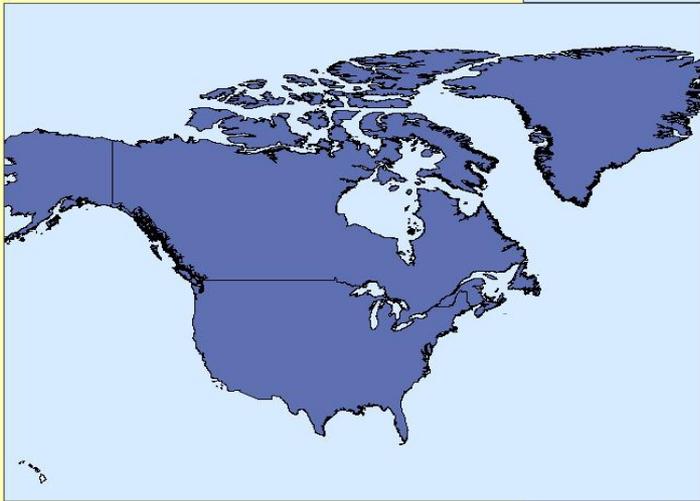
- To develop partnerships with relevant external agencies
- To promote and support the establishment of expertise in the field
- To establish and strengthen a multi-disciplinary network of experts
- To provide an international source of expertise and intelligence



# HBSC International 2010 – 43 countries/regions



2005/06





# HBSC: Methods

- Research protocol developed by the network
- Random / systematic-random sampling
- Class as the sampling unit
- Nationally representative samples
- Self-report, self-completion questionnaires
- Testing for significance
- Same methods used in all 4 cycles



# Children's lives

SES  
Gender  
Age  
Social  
Class  
Ethnicity



## Contexts:

Family  
School  
Peers

Risk behaviours:  
Drinking, Smoking...

Health enhancing  
behaviours:  
Physical activity  
Leisure activity...

## Health outcomes:

Well being  
Life satisfaction  
Self rated health  
...



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DEPARTMENT OF HEALTH

# Findings



hbsc  
ÉIREANN / IRELAND



# Trends report

- **Health behaviours**
  - Health risk behaviours
  - Positive health behaviours
- **Health outcomes**
  - Physical health outcomes
  - Positive health outcomes
- **Contexts of children's lives**
  - Family
  - School
  - Peers
  - Local area

All presented by year and gender.



# Main Trends

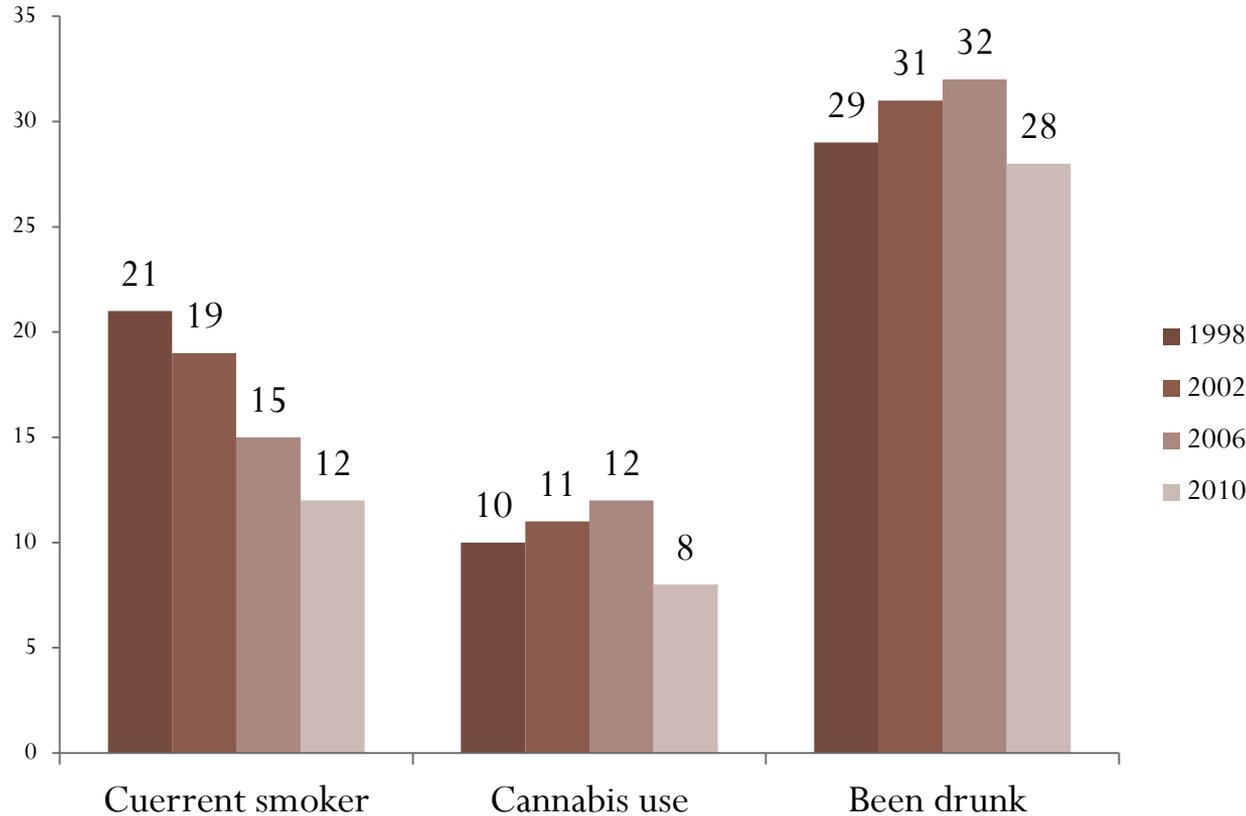
- The good news
  - Increases in fruit and vegetable consumption, use of seatbelts, excellent health, happiness, life satisfaction, tooth brushing, communication with mother and father, liking school and (most) positive school perceptions, local area has good places to go and is a good place to live and can ask for help from neighbours
  - Decreases in smoking, drunkenness, cannabis use, bullying others, injuries, consumption of soft drinks and crisps



- The less good news
  - Increases in feeling pressured by school work, feeling low, stomachache and back ache, local area is run down
  - Decreases in exercise, thinking local area is well off
  - No changes since 1998 in headaches, feeling nervous, having been bullied or feeling safe in local area
- Other trends
  - Increases in e-communication, decreases in living with both parents



# Risk behaviours



International rankings  
improving overall

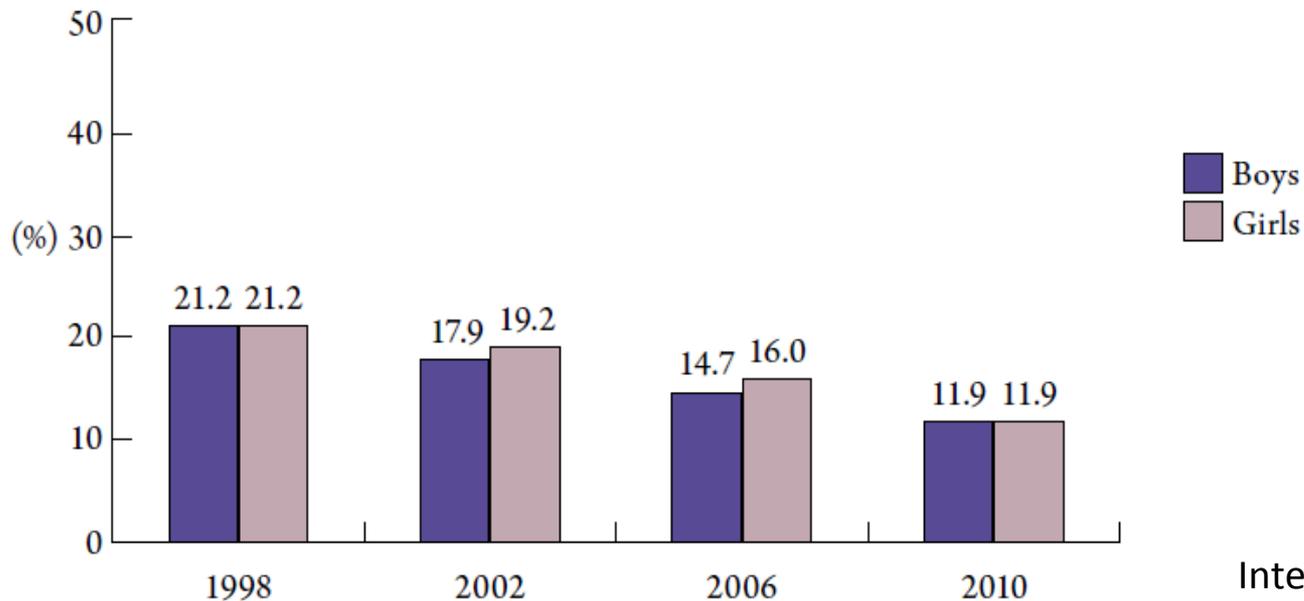
Smoking: 12<sup>th</sup> -23<sup>rd</sup> /27

Cannabis: 14<sup>th</sup>-15<sup>th</sup> /27

Drunkenness: 18<sup>th</sup>-23<sup>rd</sup> /27



# Current Smoking



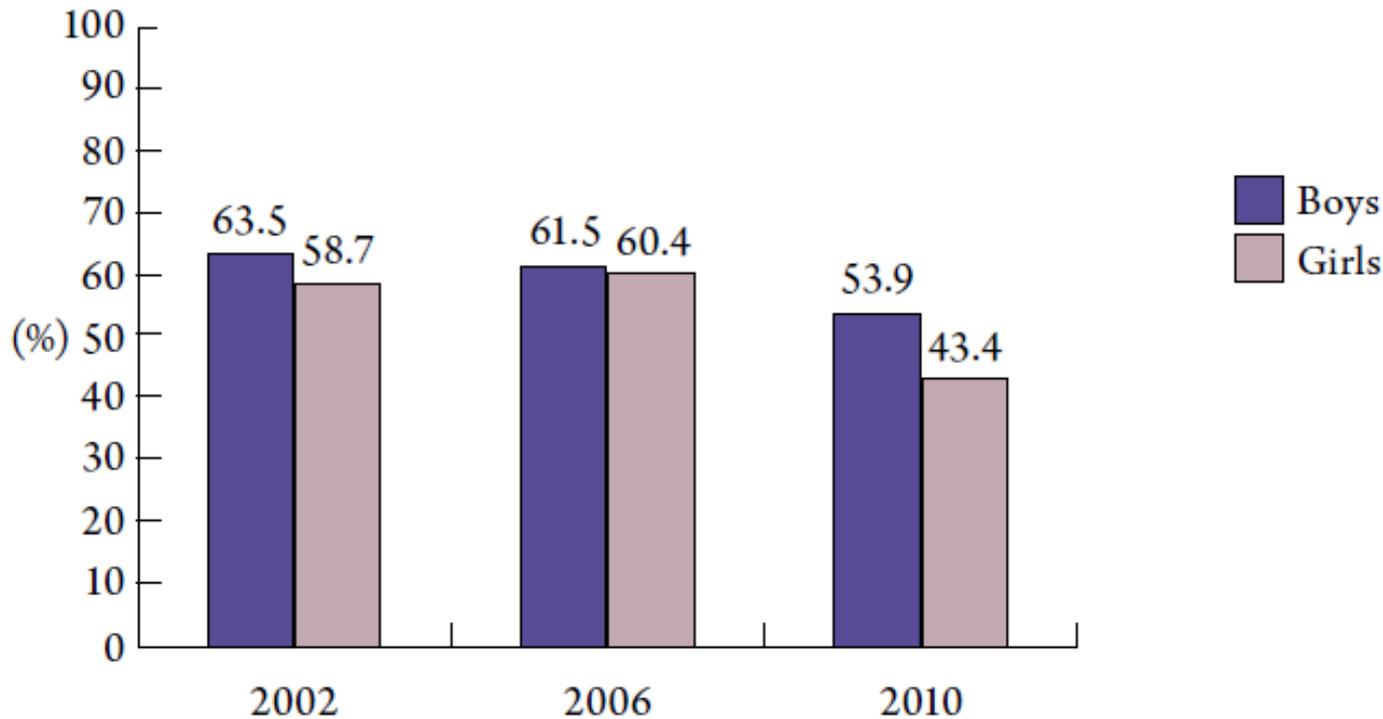
International ranking has improved

Boys: 11<sup>th</sup>-26<sup>th</sup> / 27

Girls: 15<sup>th</sup>-22<sup>nd</sup> / 27



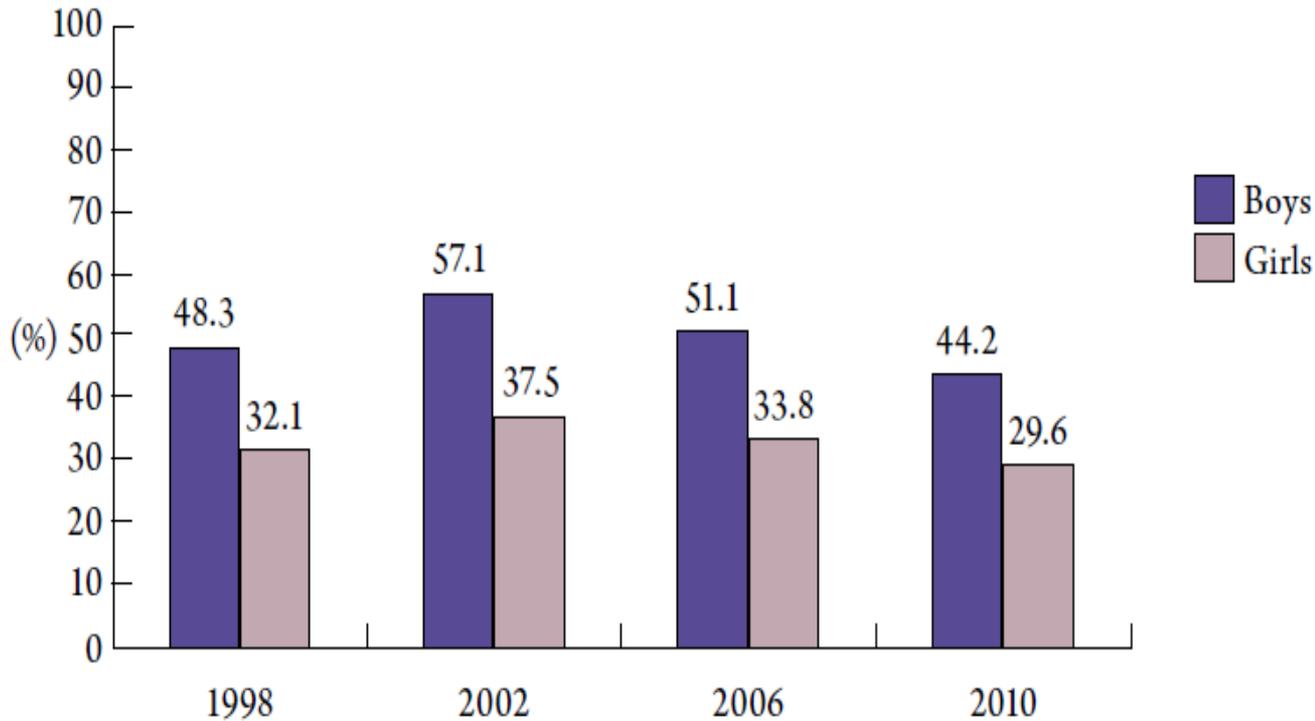
## Early smoking Initiation



Those aged 15-17 who tried their first cigarette at age 13 or younger – of those who had ever had a cigarette



# Injuries



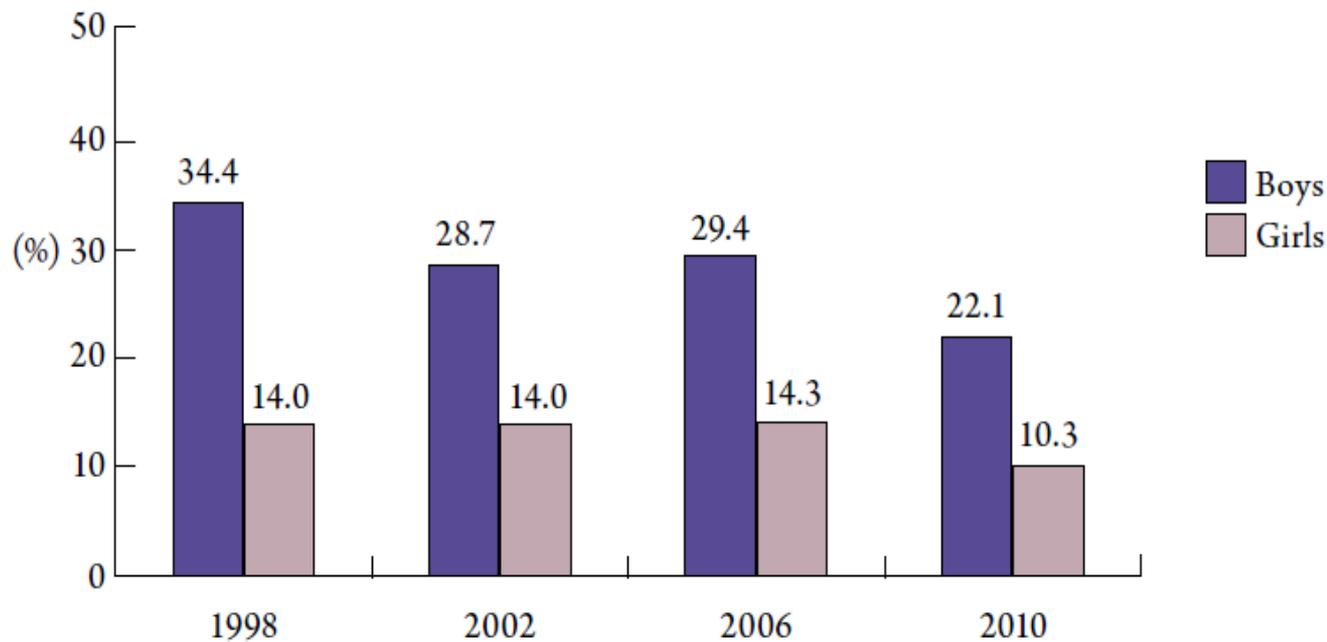
International ranking has improved

Boys: 4<sup>th</sup> -21<sup>st</sup> / 27

Girls: 18<sup>th</sup>-22<sup>nd</sup> /27



## Bullying others twice or more



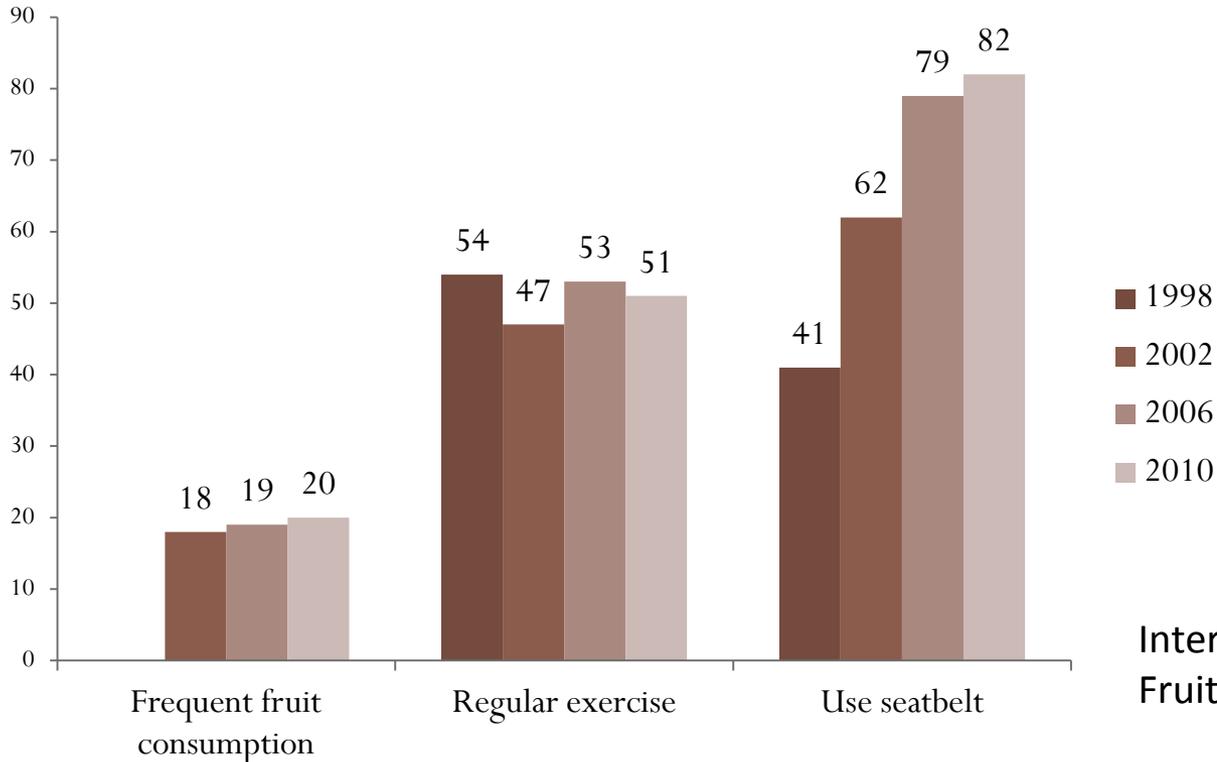
International ranking has been stable overall

Boys: 19<sup>th</sup>-24<sup>th</sup> / 27

Girls: 27<sup>th</sup>-26<sup>th</sup> / 27



## Positive health behaviours

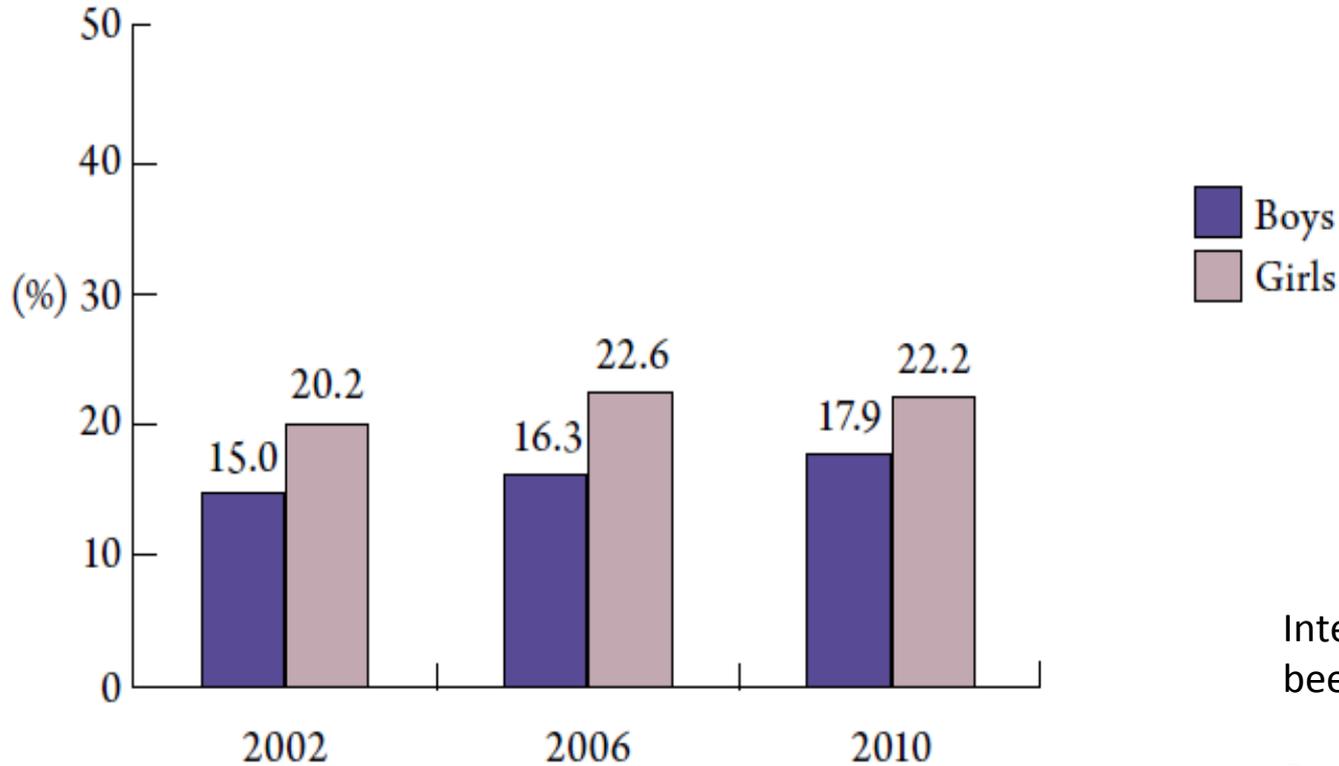


International ranking stable  
Fruit: 10<sup>th</sup>-11<sup>th</sup> / 27

No internationally  
comparable data for  
physical activity and  
seatbelt use



# Fruit Consumption



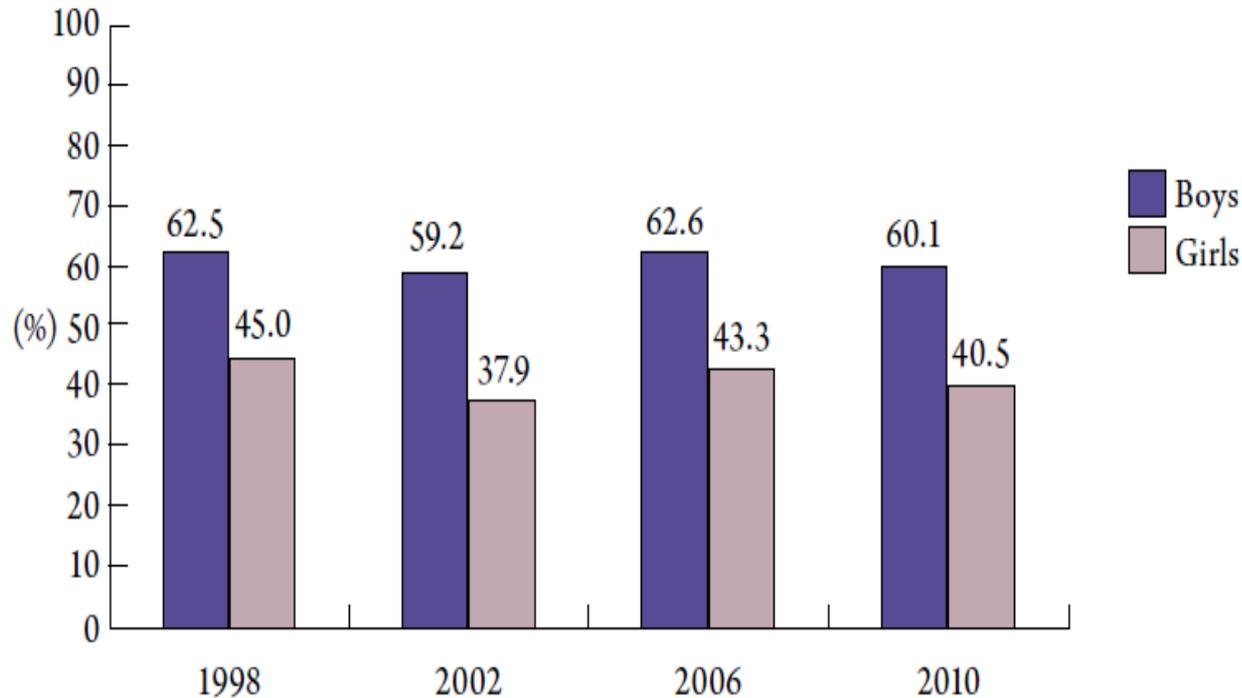
International ranking has been stable overall

Boys: 10<sup>th</sup>-10<sup>th</sup> / 27

Girls: 8<sup>th</sup>-10<sup>th</sup> / 27



## Exercise (4+ per week)

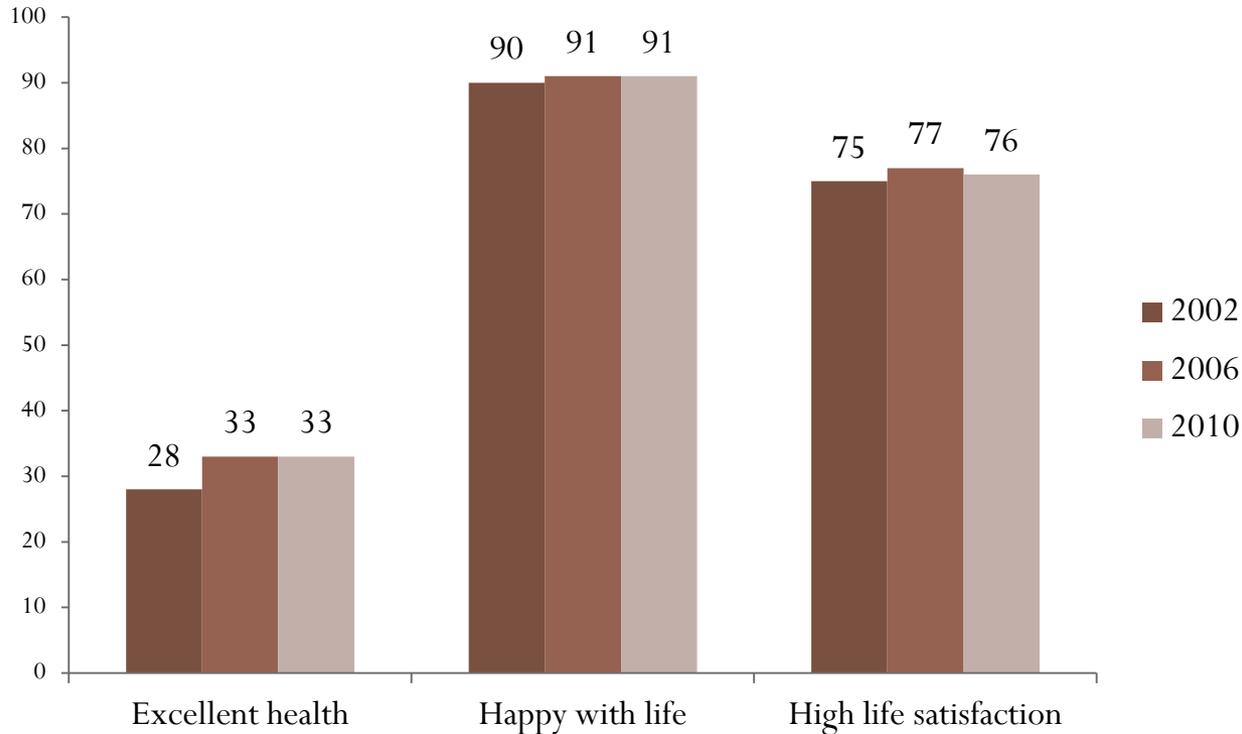


Inconsistent patterns  
over time

1998-2002: decrease  
2002-2006: increase  
2006-2010: decrease



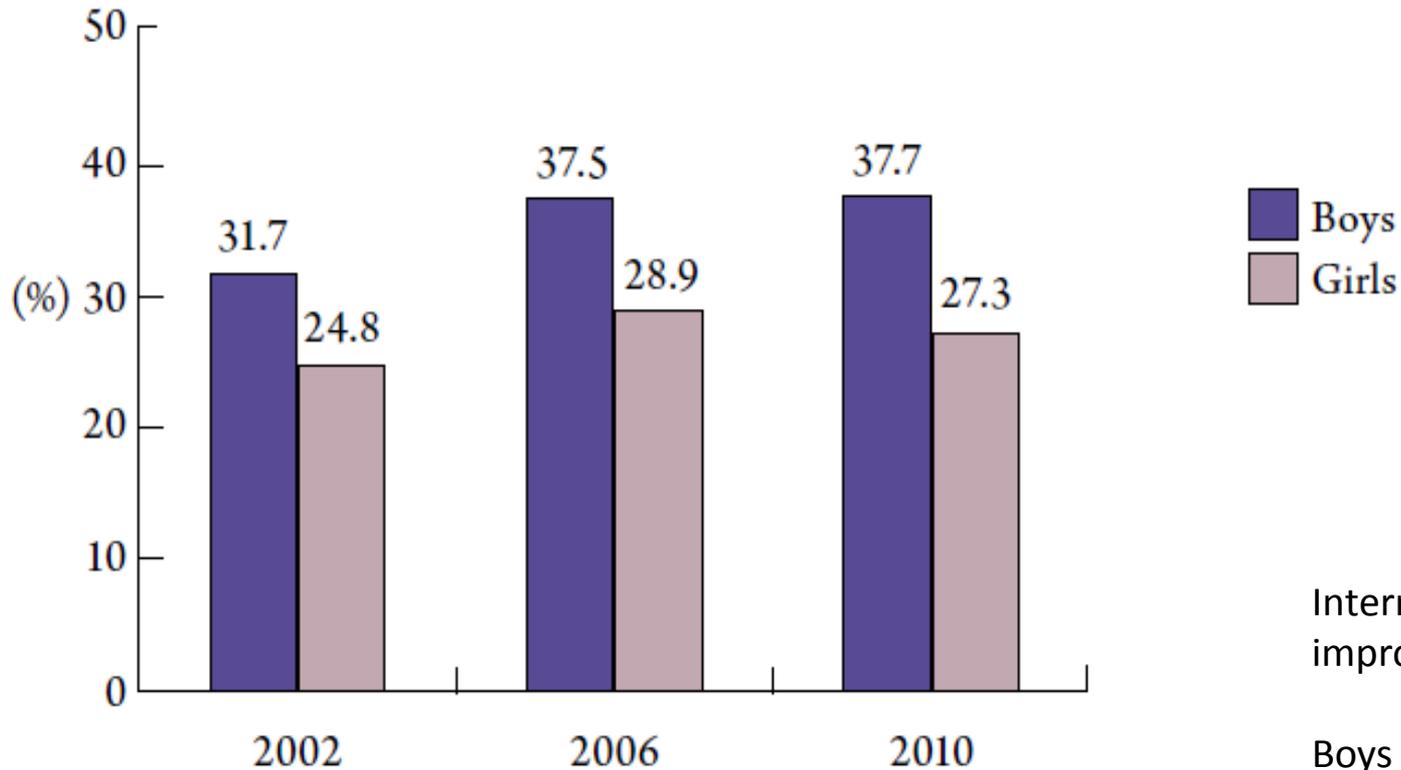
# Positive health



Modest but statistically significant improvements over time in being happy with life and life satisfaction



# Excellent health

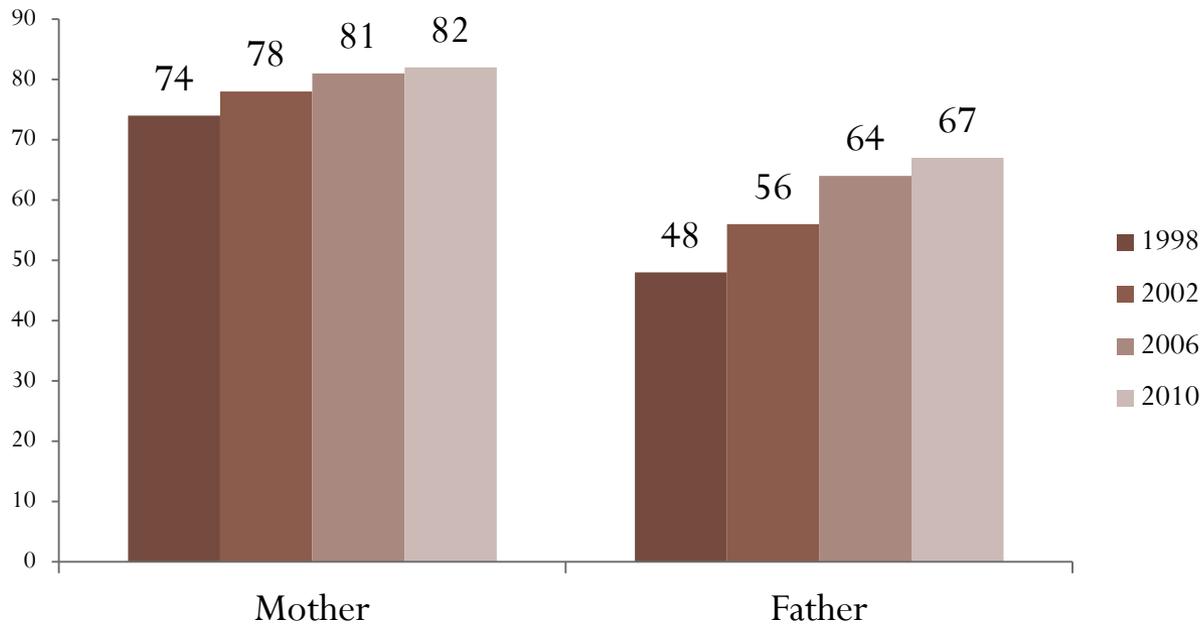


International ranking has improved overall

Boys 14<sup>th</sup> to 11<sup>th</sup>/27  
Girls 13<sup>th</sup> to 12<sup>th</sup>/27



# Communication with parents



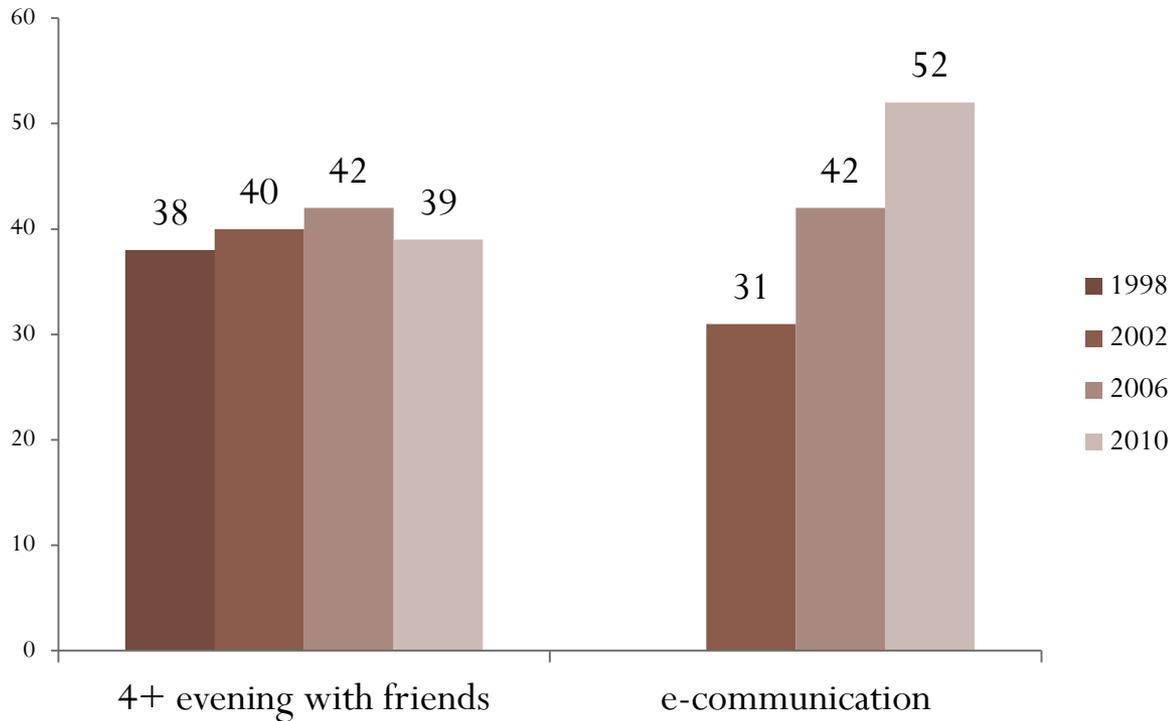
International rankings  
have improved

Mothers: 24<sup>th</sup>-16<sup>th</sup> / 27

Fathers: 26<sup>th</sup>-6<sup>th</sup> / 27



# Communication with friends



International rankings stable overall

E-communication: 13<sup>th</sup>-12<sup>th</sup> / 27

Evenings out: 12<sup>th</sup>-10<sup>th</sup> / 27



## HBSC 1998 - 2010

- Provides an excellent opportunity to document children's health related behaviours and contexts over time
- There is good news on many fronts – substance use, healthy eating, self-perceptions, family and peer relationships, school and local community perceptions
- Need to investigate some negative trends, improve measures and ensure the information gets to those who can use it to improve children's lives further

## HBSC Ireland Team Members

- Dr. Saoirse Nic Gabhainn (Lead Principal Investigator)
- Dr. Michal Molcho (Co-Principal Investigator)
- Dr. Colette Kelly (Co-Principal Investigator)
- Ms. Aoife Gavin
- Ms. Natasha Clarke
- Ms. Mary Callaghan
- Mr. Jakub Gajweski
- Ms. Larri Walker



## Dissemination of Irish HBSC data since 1998

- 44 reports (national and international)
- 100 journal articles
- 7 books or book chapters
- >125 conference presentations
- 29 short reports
- >60 Factsheets





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# Contact Us

HBSC Ireland Website: [www.nuigalway.ie/hbsc](http://www.nuigalway.ie/hbsc)

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Professor Candace Currie, International Coordinator of HBSC, University of St. Andrew's

Professor Oddrun Samdal, Data Bank Manager, University of Bergen

All members of the international HBSC network

All researchers and students who have worked with us since 1997



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# Thank you

