

Health and Wellbeing Board

Wednesday, 24th July, 2024
at 5.30 pm

Conference Room 1&2

This meeting is open to the public

Members

Councillor Finn (Chair)

Councillor Houghton

Councillor Laurent

Councillor McManus

Councillor Winning

Debbie Chase – Director of Public Health

James House - Managing Director, Southampton Place,
Hampshire and Isle of Wight Integrated Care Board

Robert Henderson – Executive Director Wellbeing
Children and Learning (DCS)

Claire Edgar – Executive Director Wellbeing and
Housing (DASS)

Suki Sitarum – Healthwatch

Dr Sarah Young – Clinical Director, Southampton Place
Hampshire and Isle of Wight Integrated care Board,
(Vice Chair)

Vacancy – Mental Health Clinician

Dr Michael Roe – Local Paediatrician

Dr Trevor Smith – Deputy Chief Medical Officer at
University Hospital Southampton NHS Foundation Trust;

Contacts

Emily Goodwin

Democratic Support Officer

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BACKGROUND AND RELEVANT INFORMATION

Purpose of the Board

The purpose of the Southampton Health and Wellbeing Board is:

- To bring together Southampton City Council and key NHS commissioners to improve the health and wellbeing of citizens, thereby helping them live their lives to the full, and to reduce health inequalities;
- To ensure that all activity across partner organisations supports positive health outcomes for local people and keeps them safe.
- To hold partner organisations to account for the oversight of related commissioning strategies and plans.
- To have oversight of the environmental factors that impact on health, and to influence the City Council, its partners and Regulators to support a healthy environment for people who live and work in Southampton

Southampton: Corporate Plan 2022-2030 sets out the four key outcomes:

- **Communities, culture & homes** - Celebrating the diversity of cultures within Southampton; enhancing our cultural and historical offer and using these to help transform our communities.
- **Green City** - Providing a sustainable, clean, healthy and safe environment for everyone. Nurturing green spaces and embracing our waterfront.
- **Place shaping** - Delivering a city for future generations. Using data, insight and vision to meet the current and future needs of the city.
- **Wellbeing** - Start well, live well, age well, die well; working with other partners and other services to make sure that customers get the right help at the right time.

Responsibilities

The Board is responsible for developing mechanisms to undertake the duties of the Health and Wellbeing Board, in particular

- Promoting joint commissioning and integrated delivery of services;
- Acting as the lead commissioning vehicle for designated service areas;
- Ensuring an up to date JSNA and other appropriate assessments are in place
- Ensuring the development of a Health and Wellbeing Strategy for Southampton and monitoring its delivery.
- Oversight and assessment of the effectiveness of local public involvement in health, public health and care services
- Ensuring the system for partnership working is working effectively between health and care services and systems, and the work of other partnerships which contribute to health and wellbeing outcomes for local people.
 - Testing the local framework for commissioning for: Health care; Social care; Public health services; and Ensuring safety in improving health and wellbeing outcomes

Smoking policy – The Council operates a no-smoking policy in all civic buildings.

Mobile Telephones:- Please switch your mobile telephones to silent whilst in the meeting

Fire Procedure – In the event of a fire or other emergency, a continuous alarm will sound and you will be advised, by officers of the Council, of what action to take

Access – Access is available for disabled people. Please contact the Democratic Support Officer who will help to make any necessary arrangements.

Use of Social Media:- The Council supports the video or audio recording of meetings open to the public, for either live or subsequent broadcast. However, if, in the Chair's opinion, a person filming or recording a meeting or taking photographs is interrupting proceedings or causing a disturbance, under the Council's Standing Orders the person can be ordered to stop their activity, or to leave the meeting. By entering the meeting room you are consenting to being recorded and to the use of those images and recordings for broadcasting and or/training purposes. The meeting may be recorded by the press or members of the public. Any person or organisation filming, recording or broadcasting any meeting of the Council is responsible for any claims or other liability resulting from them doing so. Details of the Council's Guidance on the recording of meetings is available on the Council's website.

Dates of Meetings: Municipal Year 2024/2025

24 July 2024
4 September 2024
11 December 2024
5 March 2025

CONDUCT OF MEETING

BUSINESS TO BE DISCUSSED

Only those items listed on the attached agenda may be considered at this meeting.

PROCEDURE / PUBLIC REPRESENTATIONS

At the discretion of the Chair, members of the public may address the meeting on any report included on the agenda in which they have a relevant interest. Any member of the public wishing to address the meeting should advise the Democratic Support Officer (DSO) whose contact details are on the front sheet of the agenda.

RULES OF PROCEDURE

The meeting is governed by the Executive Procedure Rules as set out in Part 4 of the Council's Constitution.

QUORUM

The minimum number of appointed Members required to be in attendance to hold the meeting is 3 who will include at least one Elected Member, a member from Health and Healthwatch.

DISCLOSURE OF INTERESTS

Members are required to disclose, in accordance with the Members' Code of Conduct, **both** the existence **and** nature of any "Disclosable Pecuniary Interest" or "Other Interest" they may have in relation to matters for consideration on this Agenda.

DISCLOSABLE PECUNIARY INTERESTS

A Member must regard himself or herself as having a Disclosable Pecuniary Interest in any matter that they or their spouse, partner, a person they are living with as husband or wife, or a person with whom they are living as if they were a civil partner in relation to:

(i) Any employment, office, trade, profession or vocation carried on for profit or gain.

(ii) Sponsorship:

Any payment or provision of any other financial benefit (other than from Southampton City Council) made or provided within the relevant period in respect of any expense incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

(iii) Any contract which is made between you / your spouse etc (or a body in which the you / your spouse etc has a beneficial interest) and Southampton City Council under which goods or services are to be provided or works are to be executed, and which has not been fully discharged.

(iv) Any beneficial interest in land which is within the area of Southampton.

(v) Any license (held alone or jointly with others) to occupy land in the area of Southampton for a month or longer.

(vi) Any tenancy where (to your knowledge) the landlord is Southampton City Council and the tenant is a body in which you / your spouse etc has a beneficial interests.

(vii) Any beneficial interest in securities of a body where that body (to your knowledge) has a place of business or land in the area of Southampton, and either:

- a) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body, or
- b) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you / your spouse etc has a beneficial interest that exceeds one hundredth of the total issued share capital of that class

Other Interests

A Member must regard himself or herself as having an, 'Other Interest' in any membership of, or occupation of a position of general control or management in:

Any body to which they have been appointed or nominated by Southampton City Council

Any public authority or body exercising functions of a public nature

Any body directed to charitable purposes

Any body whose principal purpose includes the influence of public opinion or policy

Principles of Decision Making

All decisions of the Council will be made in accordance with the following principles:-

- proportionality (i.e. the action must be proportionate to the desired outcome);
- due consultation and the taking of professional advice from officers;
- respect for human rights;
- a presumption in favour of openness, accountability and transparency;
- setting out what options have been considered;
- setting out reasons for the decision; and
- clarity of aims and desired outcomes.

In exercising discretion, the decision maker must:

- understand the law that regulates the decision making power and gives effect to it. The decision-maker must direct itself properly in law;
- take into account all relevant matters (those matters which the law requires the authority as a matter of legal obligation to take into account);
- leave out of account irrelevant considerations;
- act for a proper purpose, exercising its powers for the public good;
- not reach a decision which no authority acting reasonably could reach, (also known as the "rationality" or "taking leave of your senses" principle);
- comply with the rule that local government finance is to be conducted on an annual basis. Save to the extent authorised by Parliament, 'live now, pay later' and forward funding are unlawful; and
- act with procedural propriety in accordance with the rules of fairness.

AGENDA

1 APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)

To note any changes in membership of the Board made in accordance with Council Procedure Rule 4.3.

2 ELECTION OF VICE-CHAIR

To elect the Vice Chair for the Municipal Year 2024/25.

3 STATEMENT FROM THE CHAIR

4 DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS

In accordance with the Localism Act 2011, and the Council's Code of Conduct, Members to disclose any personal or pecuniary interests in any matter included on the agenda for this meeting.

NOTE: Members are reminded that, where applicable, they must complete the appropriate form recording details of any such interests and hand it to the Democratic Support Officer.

5 MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)

To approve and sign as a correct record the minutes of the meeting held on 13 March 2024 and to deal with any matters arising, attached.

6 CHILDHOOD OBESITY - WHOLE SYSTEM APPROACH

Report of the Cabinet Member for Adults & Health outlining the whole system approach to reducing childhood obesity.

7 #BEEWELL PROGRAMME - KEY FINDINGS

Report of the Director of Public Health outlining the key findings from the young people's wellbeing programme; #BeeWell.

Tuesday, 16 July 2024

Director – Legal and Governance

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HEALTH AND WELLBEING BOARD
MINUTES OF THE MEETING HELD ON 13 MARCH 2024

Present: Councillors Fielker, P Baillie, Finn (Chair) and Houghton
Rob Kurn, Debbie Chase, Robert Henderson, Dr Sarah Young (Vice-Chair), Paul Grundy, James House, Dr Michael Roe and Claire Edgar

Apologies: Councillor Kenny

11. **APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)**

The apologies of Councillor Kenny were noted.

In addition it was noted that:

- Councillor Finn was the Chair of the Health and Wellbeing Board, following the appointment of Councillor Finn as the Cabinet Member for Adults and Health at the Cabinet meeting on the 15 January 2024.
- the Chief Medical Officer at University Hospital Southampton NHS Foundation Trust , Paul Grundy had appointed the Deputy Chief Medical Officer, Dr Trevor Smith to act as his representative on the Board
- At Healthwatch Strategic Group meeting on 29 February it was agreed that, Suki Sitaram, Healthwatch Southampton Chairperson, would be the Healthwatch representative on the Board and that Kevin Allen, Healthwatch Southampton Strategic Group Member would be the deputy.

12. **MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)**

RESOLVED: that the minutes for the Board meeting on 13 December 2023 be approved and signed as a correct record.

13. **HEALTH IN ALL POLICIES**

The Board considered the report of the Cabinet Member for Adults & Health outlining progress in delivering Health in all Policies.

Kate Harvey, Munira Holloway and Mirembe Woodrow were in attendance and, with the consent of the Chair, addressed the meeting.

The Board discussed a number of points including:

- The definition, approach and framework of the Board;
- Progress made during Phase One of the project; and
- Options for the focus of Phase two of the project

The Board discussed the options outlined in the report and concluded that the Option B: A Moderate Approach would require the alignment with the Health Determinants Research Collaborations to evidence impact of decisions considering health.

14. **MENTAL HEALTH & WELLBEING STRATEGY**

The Board considered the report of the Cabinet Member for Adults & Health outlining the new Mental Health & Wellbeing Strategy for Southampton.

Rob Kurn introduced the report stating that the strategy detailed in Appendix 1 of the report was welcomed and that it had been drawn together by an extensive consultation process. Dr Walmsley detailed the considerations set out in the strategy.

RESOLVED:

1. That the Board recommended that Cabinet approve the new Southampton Mental Health and Wellbeing Strategy as attached in appendix 1 and supporting documents (appendix 2-4).
2. That a detailed action plan should be continued to be developed and that a established the multi-agency Southampton Mental Health and Wellbeing Partnership would deliver the strategy.

15. **ROUTINE CHILDHOOD IMMUNISATIONS - STRENGTHS AND NEEDS ANALYSIS**

The Board considered the report of the Cabinet Member for Adults & Health outlining childhood immunisation uptake rates and feedback from providers and parents in order to improve uptake

The Childhood Immunisation Strengths and Needs Assessment (CHISANA) was discussed with regard to work already being undertaken in Southampton. The Board noted the national picture in regard to the recent outbreaks of measles in the Midlands and in London. The steps being implemented to reach out to communities across the City were detailed and explained whether that be through the medical sector or through educational establishments.

RESOLVED that the Board accepted the recommendations from the childhood immunisation strengths and needs assessment 'CHISANA' on engagement, inequalities and inclusion, service improvement and partnership working.

16. **TOBACCO, ALCOHOL AND DRUG STRATEGY UPDATE**

The Board considered the report of the Cabinet Member for Adults and Heath outlining delivery of the Tobacco, Alcohol and Drug Strategy

Charlotte Matthews, Public Health Consultant, Colin McAllister Senior Public Health Practitioner and Helen Dougan Senior Public Health Practitioner were in attendance and, with the consent of the Chair, addressed the meeting. Outlining the progress set out in the report.

RESOLVED that

1. The Board would continue to note the significant harm that tobacco, alcohol and drugs cause in Southampton and notes the progress made in implementing the Southampton Tobacco Alcohol and Drug Strategy, 2023-28.
2. The Board would continue to actively champion the implementation of the strategy, including:
 - All organisations use their impact as Anchor Institutions, to prevent and reduce harm from tobacco, alcohol, and drugs, including vaping when

used other than by adults as a tool to stop smoking. This includes visible leadership, such as a Smokefree commitment, and a “Health in all policies” approach.

- the non-judgemental language: of drug and alcohol use or harm, rather than “misuse”; and of tobacco dependency and treatment, particularly in a health care context.

- evidence-informed policy

3. Board members noted that they could contact Public Health if they would like further advice or support for their strategic or operational work on tobacco, alcohol, drugs and/or vaping.

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Agenda Item 6

DECISION-MAKER:	Health & Wellbeing Board
SUBJECT:	Update on the whole systems approach to childhood obesity
DATE OF DECISION:	24 July 2024
REPORT OF:	COUNCILLOR MARIE FINN CABINET MEMBER FOR ADULTS & HEALTH

<u>CONTACT DETAILS</u>			
Executive Director	Title	Executive Director, Wellbeing (Children & Learning)	
	Name:	Rob Henderson	Tel:
	E-mail:	robert.henderson@southampton.gov.uk	
Author:	Title	Senior Public Health Practitioner	
	Name:	Ravita Taheem	Tel:
	E-mail:	Ravita.taheem@southampton.gov.uk	

STATEMENT OF CONFIDENTIALITY

N/a

BRIEF SUMMARY

Childhood obesity has multiple causes with implications for health and society. It particularly affects those living in the most deprived areas and locally inequalities in childhood obesity have been increasing. No one single solution exists and a system-wide approach that works across the life course has been recommended for local authorities.

RECOMMENDATIONS:

	(i)	To note the contents of this report as an update on the whole system approach to childhood obesity.
	(ii)	<p>This proposal recommends the whole system approach for childhood obesity has systems leadership as follows:</p> <ol style="list-style-type: none"> 1. HWB to: <ol style="list-style-type: none"> a. Communication Provide strategic leadership for childhood obesity and actively engage with other system leaders to communicate the drivers of childhood obesity and agree refine and embed the four intents for system change within their plans b. Request feedback from other sectors and directorates Contribute to governance and oversight for collective actions across sectors/directorates by embedding accountability for the four key drivers identified for childhood obesity c. Monitor progress Provide governance for existing stakeholder groups by monitoring progress on tackling the four drivers of childhood obesity

REASONS FOR REPORT RECOMMENDATIONS	
1.	Tackling childhood obesity is a strategic priority
2.	Whole system leadership is required to contend with the system level drivers of childhood obesity
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED	
3.	N/a
DETAIL (Including consultation carried out)	
4.	<p>Obesity is a complex problem with multiple causes and implications for health and beyond. It particularly affects those living in the most deprived areas. There is no one single solution and a long-term, system-wide approach that works across the life course has been recommended for local authorities.</p> <p>Whole systems working has been described as an ‘ongoing flexible approach by a broad range of stakeholders to identify and understand current public issues where working together can lead to sustainable change’ (Adapted from Background on the Whole system approach).</p> <p>Taking a whole systems approach was one of 16 recommendations from the 2020 Scrutiny Inquiry into Tackling Childhood Obesity. Since 2022 the Council’s Public Health team have led on developing the whole systems approach locally.</p>
5.	<p>The majority of adults in England are overweight or obese, and children are on the same trajectory. The National Child Measurement Programme is one of the five mandated Public Health functions. The programme has been running since 2006 and it measures the height and weight of children aged 4-5 years when they start primary school (Year R) and in their final year of primary school (Year 6).</p> <p>The latest data 2022-23 shows that in Southampton in Year R 22.5% children (England 21.3%) were living with overweight or obesity and 9.5% (9.2% England) were living with obesity. In the same time frame in Year 6, 40.5% children (England 36.6%) were living with overweight or obesity and 26.0% (England 22.7%) were living with obesity.</p> <p>The gap in rates of overweight and obesity between Year 6 children living in the most deprived areas (44.3%) and least deprived areas (23.8%) has been growing. The Year 6 rate of overweight and obesity in Southampton's most deprived quintile was 1.86 times higher than the least deprived quintile.</p>
6.	<p>The whole systems approach project involved running a series of workshops with internal Council teams, external teams and communities including young people. The programme was developed using the guide produced by Public Health England (functions now part of the Office for Health Improvement and Disparities (OHID)).The workshops involved a series of activities to encourage participants to discuss and map the factors that cause obesity in Southampton and explore what could be done to address these drivers.</p> <p>The workshops were undertaken with a number of teams including Transport, Housing, Early Years, Green Spaces as well as Community COVID Champions and children and young people. The mapping allowed groups to form a collective understanding of the issue and the many interrelated and complex local causes of childhood obesity.</p>

7.	<p>Complex systems are described as made up of numerous interacting parts, they are dynamic, self-organising and resilient to change. Crucially they are underpinned by reinforcing feedback loops which are notoriously difficult to reverse. Obesity is understood to be a symptom (or an output) of a complex system. Over time interventions have been targeted to deal with obesity (the symptom) rather than the system that causes the issue.</p> <p>The whole systems approach workshops pinpointed the ‘causes of the causes’ of obesity. These were identified as the reinforcing feedback loops that drive the local system. These have been refined to four key drivers of childhood obesity in Southampton:</p> <ol style="list-style-type: none"> 1. Time and resource poor families 2. Mixed signals (national, community, local level) 3. Public spaces are perceived as unsafe, unpleasant and off-limits 4. Local policies with competing priorities that don’t support a healthy weight environment
8.	<p>Applying a whole systems approach requires a long-term commitment from a broad-range of senior stakeholders in a position to intervene at a system level. Intervening in a complex system is understood to be counterintuitive, however a framework taken from the academic literature describes four main leverage points at which to intervene to change a system (below). It is now clear that most of the interventions and activity traditionally targeted at childhood obesity is limited to System Material level, which deals with the symptom and not the system which has caused the issue:</p> <ul style="list-style-type: none"> • System Intent- (values, world view), paradigm, goals (people don’t usually know system goals). Changed by those in power and articulating what is wrong with the system • System Design- (structures) – rules, self-organisation, information flows. Change it by legislation, policy, getting data/information to decision-makers. Who designs those rules and their intent? • System Feedback- (interactions in system)- slowing down the feedback loops, (balancing feedback e.g. thermostats) <p>System Materials- (usual interventions least likely to change the system)- stocks/flows, buffers. Standards, campaigns, training</p>
9.	<p>The whole systems work was presented to the Health and Wellbeing Board Development session in January. The Health and Wellbeing Board recommended developing a set of ‘System Intents’ that could address the challenges identified. These were developed with a Child Friendly Board subgroup (the Early Years Prevention and Early Intervention subgroup).</p> <ul style="list-style-type: none"> • To address Time and Resource poor families Intent A city where families have sufficient time and resource to live well • To address Mixed signals at national, community and individual level Intent A city where messages people get from their surroundings are supportive of a healthy and happy life • To address Public spaces are perceived as unsafe, unpleasant and off limits

	<p>Intent Public spaces are (feel) safe, enjoyable and welcome residents and visitors</p> <ul style="list-style-type: none"> To address Local policies with competing priorities that don't support a healthy weight environment <p>Intent All local policies and decisions support a health promoting environment</p>
10.	<p>The whole systems work and the key drivers of childhood obesity have been shared with internal and external colleagues and communities. Interestingly the drivers are no surprise and are recognised as key challenges in the system across council functions and externally. Different council functions also have plans in place to address these drivers. However, plans may not be aligned to a common strategic intent and therefore some policies/interventions are dormant or misaligned. There are missed opportunities to identify collective actions to align with an agreed strategic intent to address the challenges outlined above.</p>
11.	<p>The whole systems approach guide recommends the development of a stakeholder group to steer local actions. However, in Southampton a number of groups already exist to support a range of activities on the ground, for example the Healthy Sustainable Schools Alliance, the Physical Activity Alliance, the Early Years Prevention and Early Interventions subgroup, a new Food Partnership group is being developed and the Childhood Obesity task and finish group. All are crucial to drive their topic focussed priorities. However, a systems approach calls for system level leadership with cross-departmental and cross-directorate relationships to ensure positive changes towards shared goals and through creating a culture where systems approaches can flourish.</p> <p>The literature on systems thinking suggests that one way to change the 'system intent' is to consistently point out the challenges in the system. A systems approach where sectoral and organisational leaders in the HWB, with input from the Child Friendly Board and the Safe City Partnership in their capacity collaborate across sectors and directorates to consistently point out the four system drivers of childhood obesity and jointly prioritise, refine, monitor and embed activities and policies to tackle the issue is recommended. This could be achieved through HWB requesting regular progress updates on how the drivers are bring incorporated in the workplans and activities of key groups and boards. This proposal moves beyond the guide developed by Public Health England and recommends the approach has systems level leadership as follows</p> <ol style="list-style-type: none"> 1. HWB to: <ol style="list-style-type: none"> a. Communication Provide strategic leadership for childhood obesity and actively engage with other system leaders to communicate the drivers of childhood obesity and agree refine and embed the four intents for system change within their plans b. Request feedback from other sectors and directorates Contribute to governance and oversight for collective actions across sectors/directorates by embedding accountability through requesting feedback on how the four key drivers identified for childhood obesity are being addressed

	c. Monitor progress Provide governance for existing stakeholder groups by monitoring their progress on tackling the four drivers of childhood obesity
RESOURCE IMPLICATIONS	
<u>Capital/Revenue</u>	
	N/a
<u>Property/Other</u>	
	N/a
LEGAL IMPLICATIONS	
<u>Statutory power to undertake proposals in the report:</u>	
	N/aHealth and Social Care Act 2012 the Act gives local authorities the responsibility for improving the health of their local populations.
<u>Other Legal Implications:</u>	
	N/aSection 149 Equality Act 2010 obliges public authorities to have due regard to the need to advance equality of opportunity between people who share a protected characteristic and those who do not
RISK MANAGEMENT IMPLICATIONS	
	None
POLICY FRAMEWORK IMPLICATIONS	
	Corporate Plan, Children and Young Peoples Strategy, Health and Wellbeing Strategy

KEY DECISION?	No
WARDS/COMMUNITIES AFFECTED:	All
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	PowerPoint presentation to Board on 24 July 2024
Documents In Members' Rooms	
1.	None.
Equality Impact Assessment	
Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.	No
Data Protection Impact Assessment	
Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.	No
Other Background Documents	
Other Background documents available for inspection at:	

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)	
1.		
2.		

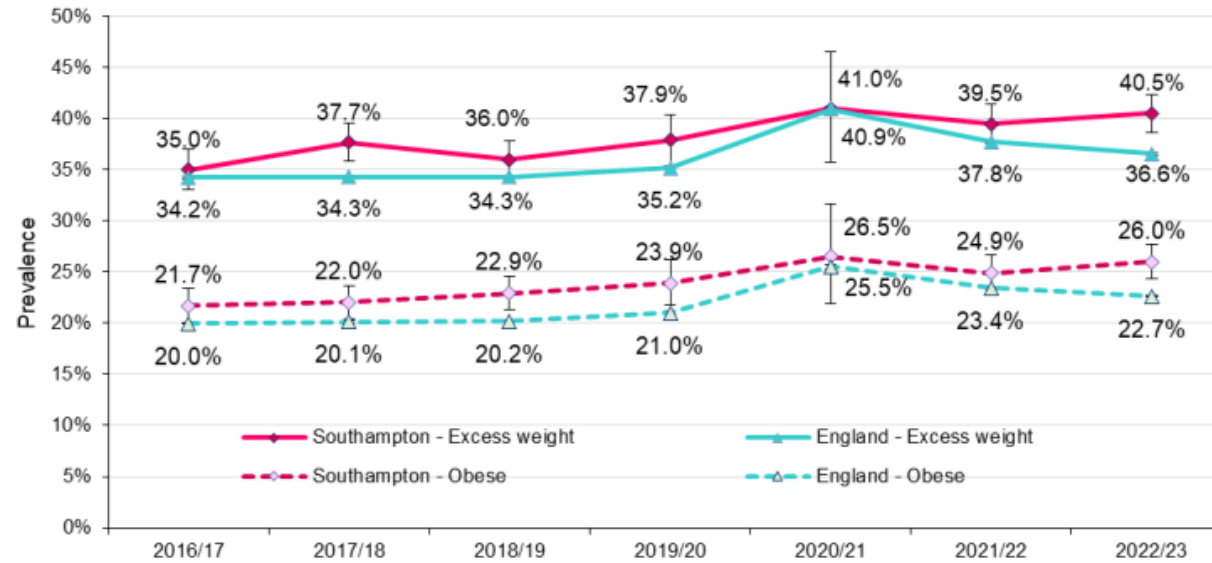
Tackling Childhood Obesity in Southampton

A Whole Systems Approach

Developing the strategic intent



Year 6 Obesity and Excess Weight Southampton and England trend: 2016/17 to 2022/23



Source: NHS Digital NCMP Enhanced data sets 2016/17 to 2021/22 with 95% Confidence Intervals (Wilson), 2022/23 data via NHS Digital Table 3a_6

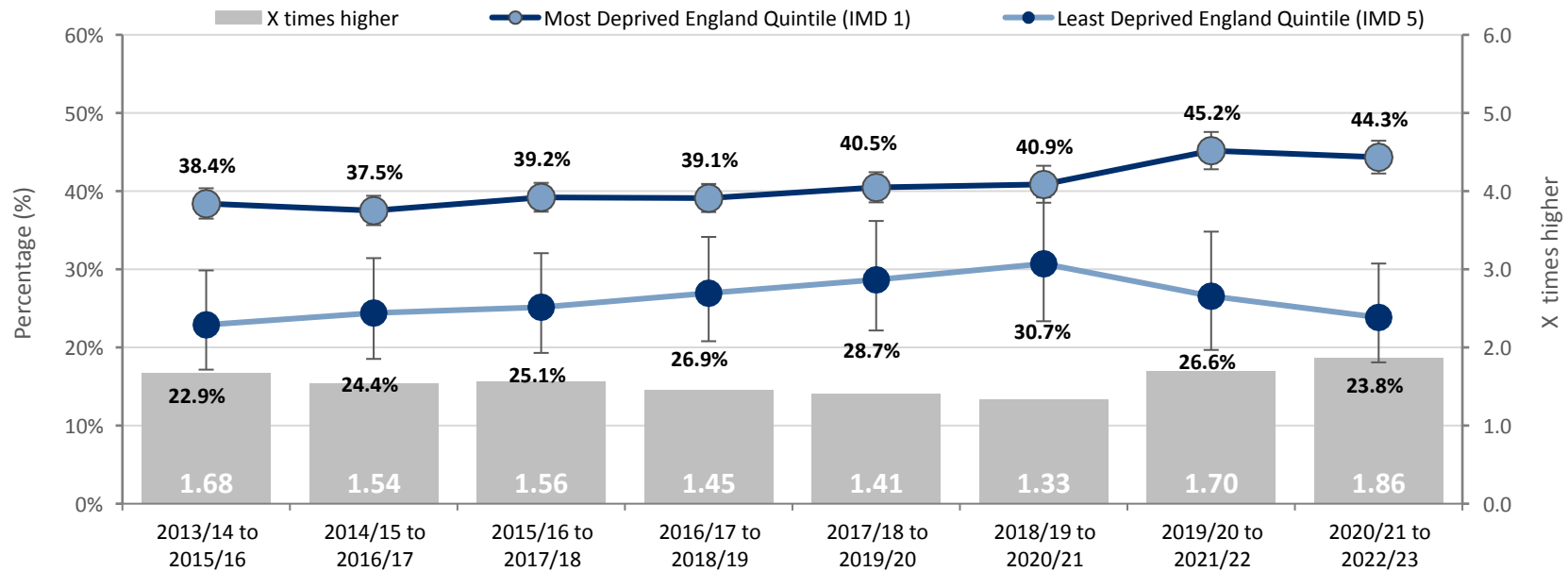


NCMP measurements in 2019/20 and 2020/21 were disrupted by the COVID-19 pandemic. 2021/22 NCMP was the first data collection since the COVID-19 pandemic that was unaffected by school closures and other public health measures.

2022/23 England - Year 6:	Obese 22.7%	Excess Weight 36.6%
Southampton - Year 6:	Obese 26.0%	Excess Weight 40.5%



Percentage of children considered to be overweight (incl. obese) in Year 6 Inequalities Trend - Most Vs Least Deprived IMD England Quintiles (IMD 2019): 2013/14-15/16 to 2021/20-22/23 (pooled)



Sources: the National Child Measurement Programme Pupil Enhanced Data Set, NHS Digital – Lifestyle Statistics (data for 2013/14 onwards)

Scrutiny Inquiry recommendations

Whole systems approach

Local Authority
Declaration on Healthy
Weight (contracts, events,
marketing, concessions)

Scale up Healthy Settings
Awards,
HEYA, Healthy High-5,
(Healthy Schools Website),
Free school meals

Support schools provide
healthier food, provide
longer lunch breaks
develop toolkits. Increase
Free school meals uptake

City Vision, reduce
proliferation of hot-food
takeaways

Food environment,
intelligence, data mapping

Develop a vision for
Leisure

Governance and oversight

Become a sustainable food
place

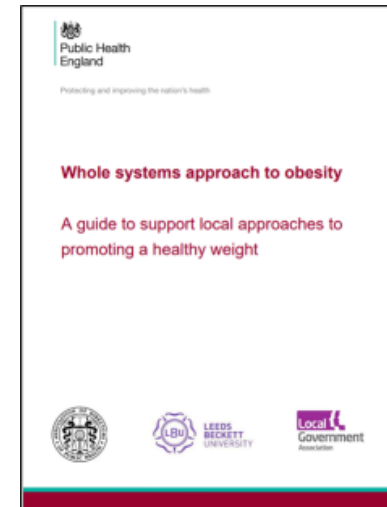
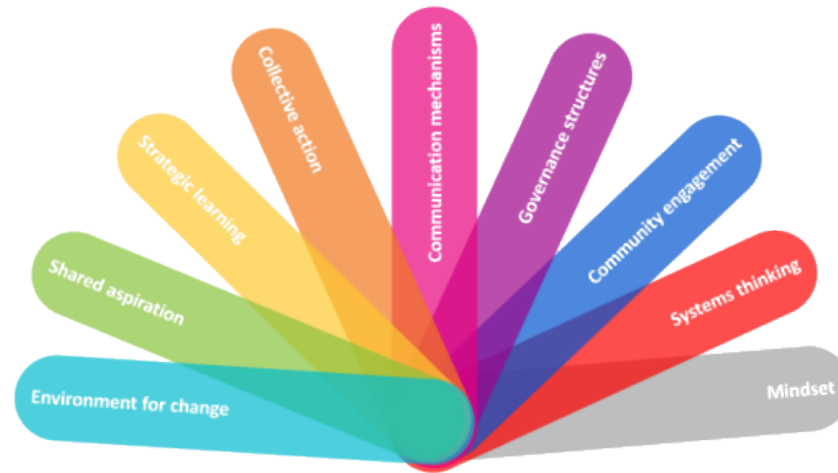
Learn lessons from HENRY

Develop the evidence-
base and engage with
academia

Healthy Food award for
retailers

What we did

- We aspired to **identify system behaviours we could influence** to continually reduce levels city-wide of childhood obesity.
- To this end, we **held thirteen workshops** with the teams listed below. We are **making plans to engage with additional colleagues**, including the senior leadership team.
 - Community COVID Champions
 - Children and young people
 - Transport
 - Green Spaces
 - Communities
 - School Nursing
 - Housing
 - Early Years
 - Planning
 - Communications
 - Public Health



Dozens of factors identified

Task 1 - Rate Over Time

In the left hand column, select the pen to draw your line. Then use the sticky notes to add your factors.



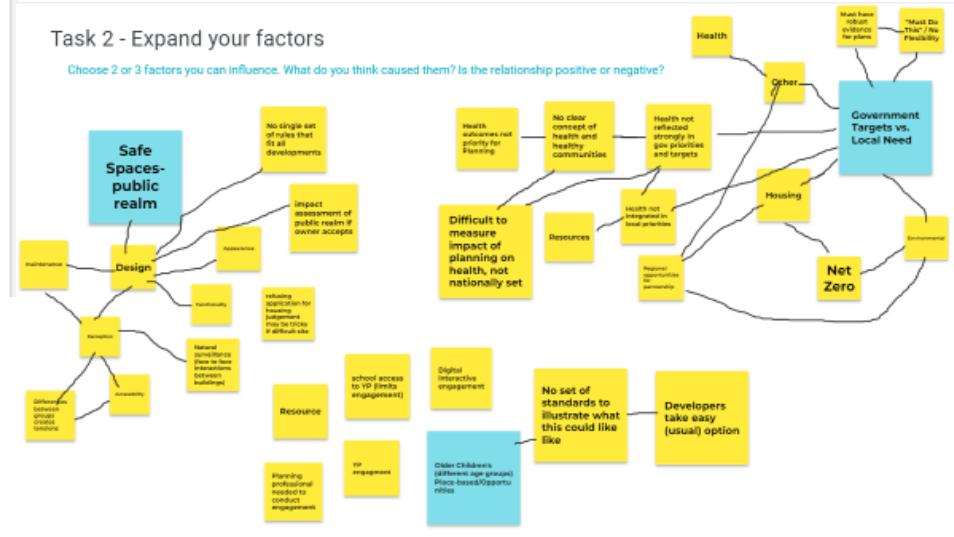
% of Children being C

In the left hand column, select the pen to draw your line. Then use the sticky notes to add your factors.



Task 2 - Expand your factors

Choose 2 or 3 factors you can influence. What do you think caused them? Is the relationship positive or negative?



Examples of jamboard activities

Local themes

We identified several themes or drivers, listed below, that contribute to rates of childhood obesity.

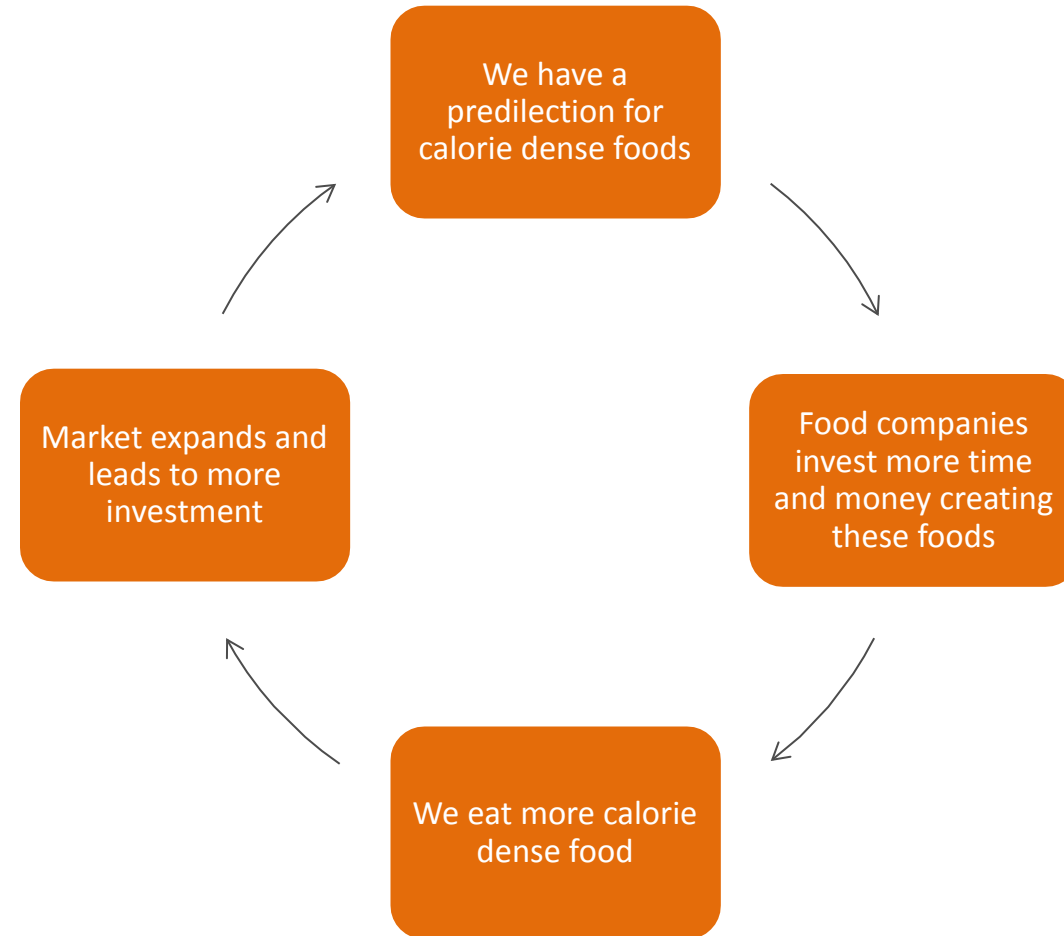
- 1. Time and resource poor families**
- 2. Mixed signals** (national, community, local)
- 3. Public spaces are perceived as unsafe, unpleasant and off limits**
- 4. Local policies with competing priorities** that don't support a healthy weight environment

A national example

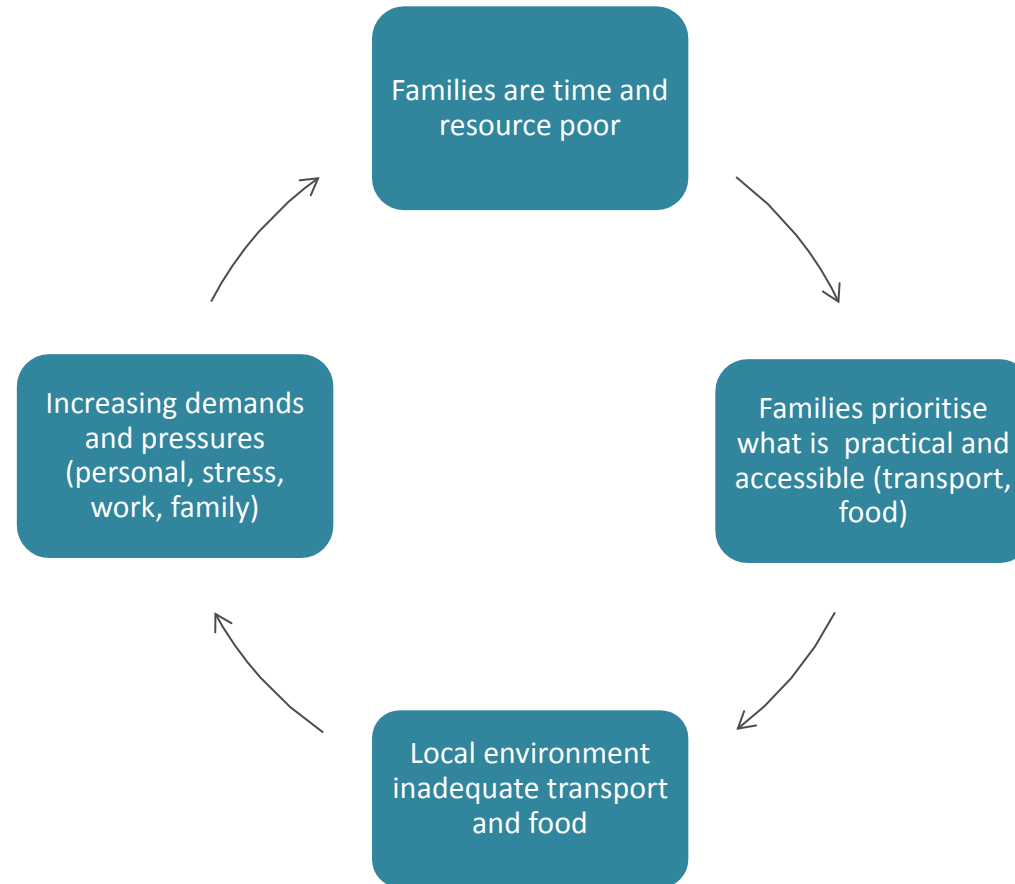
We have become stuck in a reinforcing feedback loop – a vicious circle, **the junk food cycle**

The government has intervened using:

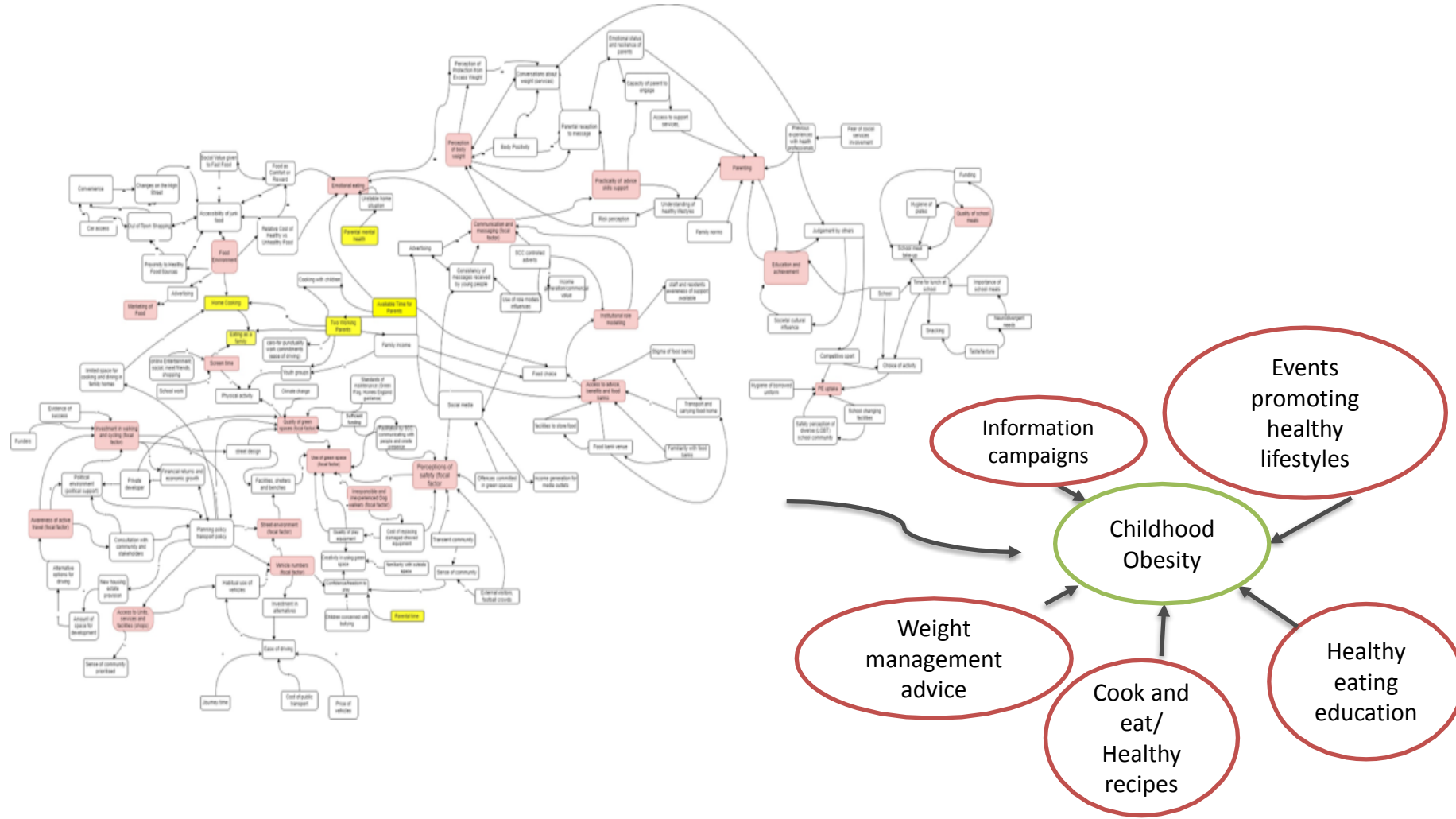
- Soft drinks industry levy
- HFSS (high fat, sugar, salt) product placement legislation
- HFSS price promotion (delayed legislation)
- Ban on online and TV HFSS advertising (legislation delayed)
- The government's voluntary sugar reduction programme voluntarily reduce sugar by 20% by 2020 in the food that contribute most to the intakes of children aged up to 18 years.



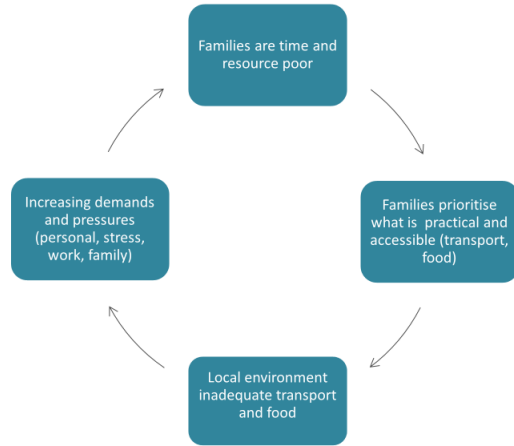
1. Time and resource poor families



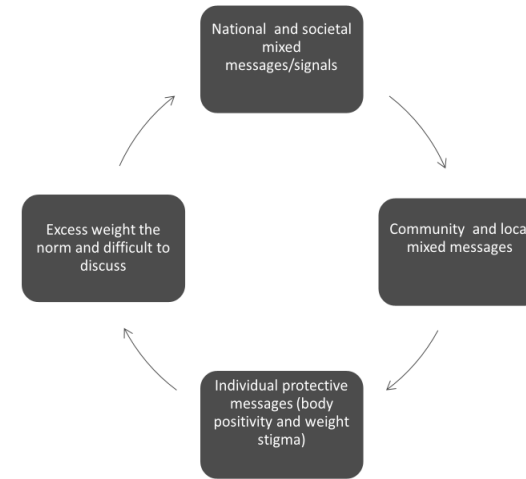
We deal with the symptom and not the causes...



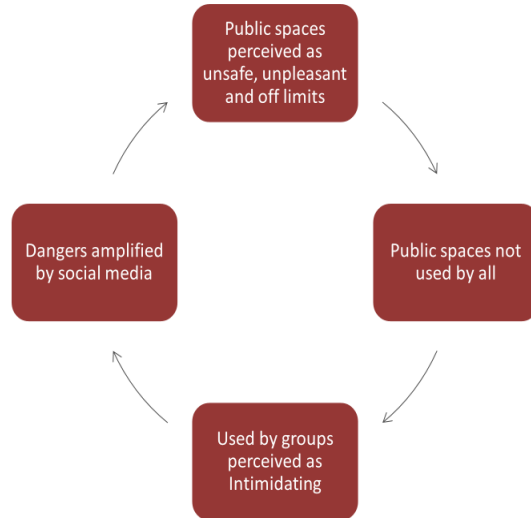
1. Time and resource poor families



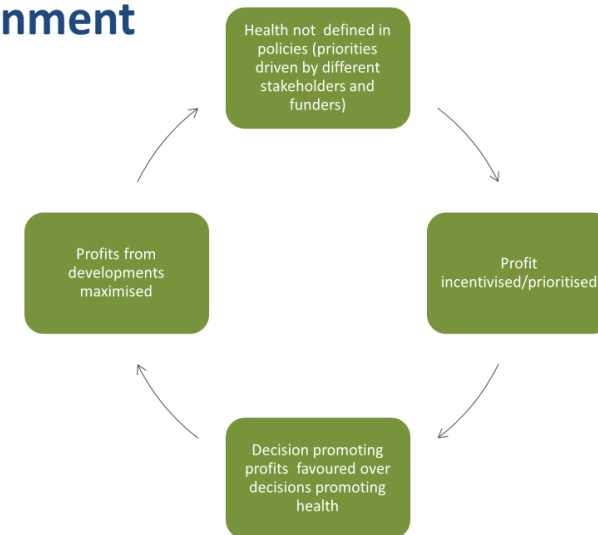
2. Mixed signals, national, local and individual level



3. Public places perceived as unsafe, unpleasant and off limits



4. LA policies , competing priorities support the status quo and not a healthy weight environment



Intervening-counterintuitive



Intent- (values, world view), paradigm, goals (people don't usually know system goals). **Changed by those in power and articulating what is wrong with the system**



Design- (structures) – rules, self-organisation, information flows. **Change it by legislation, policy, getting data/information to decision-makers.** Who designs those rules and their intent?



Feedback- (interactions in system)- feedback loops, delays. Monitoring, (balancing feedback) thermostats and reinforcing feedback loops (lead to erosion)
Strengthen what works and weaken what doesn't.



Materials- (usual interventions **least likely to change the system**)- stocks/flows, buffers. Standards, campaigns, training

Health and Wellbeing Board feedback

1. Time and Resource poor families

Intent

A city where families have sufficient time and resource to live well

2. Mixed signals at national, community and individual level

Intent

A city where messages people get from their surroundings are supportive of a healthy and happy life

3. Public spaces are perceived as unsafe, unpleasant and off limits

Intent

Public spaces are (feel) safe, enjoyable and welcome residents and visitors

4. Local policies with competing priorities that don't support a healthy weight environment

Intent

All local policies and decisions support a health promoting environment

System Intent developed with Child Friendly Board subgroup (Early Years Prevention and Early Intervention)

Leverage points in a complex system

*“Systems cannot be controlled, they can be designed and re-designed”
(Meadows, 2009)*

*“One should not try to cure the symptoms: and therefore, one should try to settle the problem on as high a level as possible”
(Rittel and Webber, 1973)*

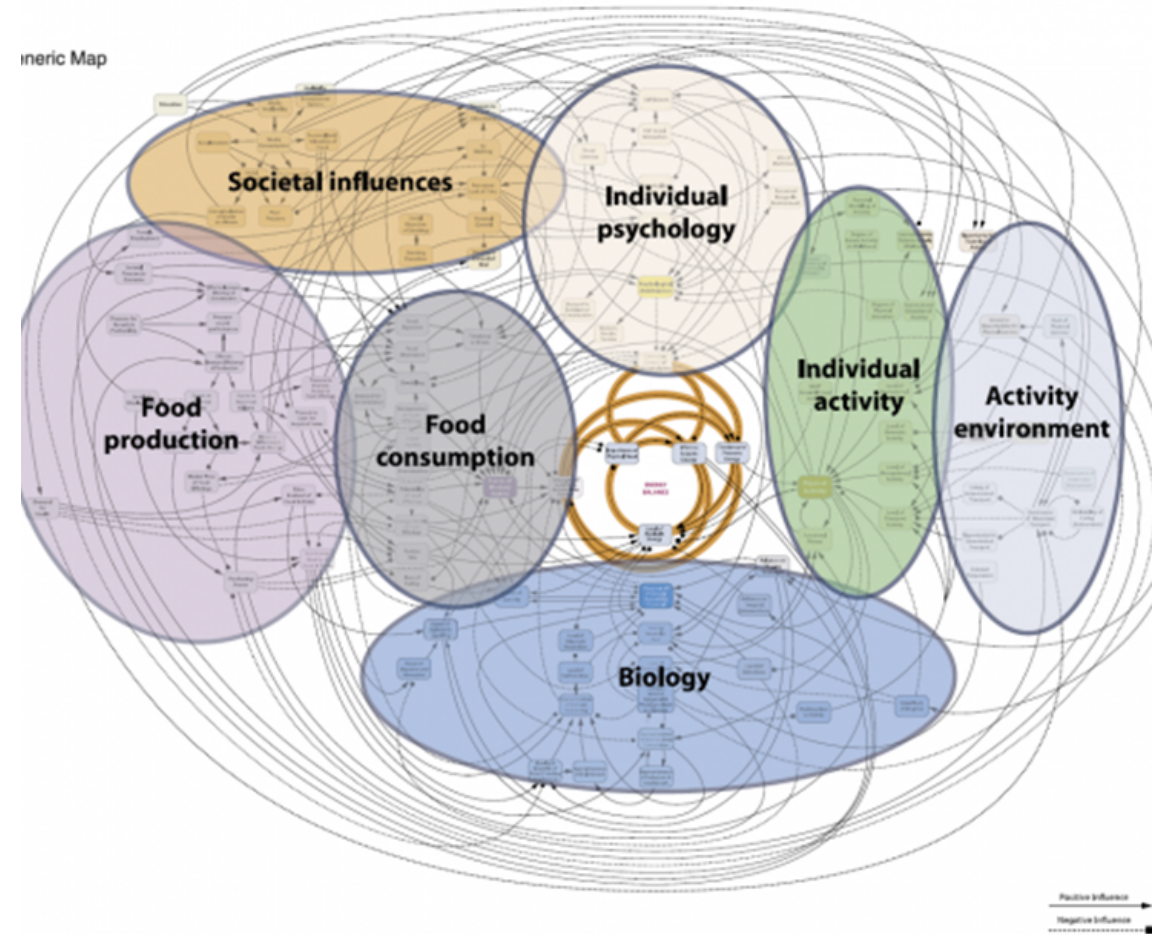
Reinforcing feedback loops have an amplifying effect, the leverage point is slowing the growth (Meadows 2009)

“Leverage points are frequently not intuitive” (Meadows, 2009)

Recommendations

1. **HWB, Child Friendly Board and the Safe City Partnership are asked to:**
 - a. **Communicate** actively engage **with other system leaders to communicate the drivers of childhood obesity** and agree refine and **embed the four intents** for system change within their plans
 - b. **Feedback** ask for **feedback from other sectors and directorates** contribute to governance and oversight for collective actions across sectors/directorates and embedding accountability for the **four key drivers identified for childhood obesity**
 - c. **Monitor progress** Provide governance for **existing stakeholder groups** to monitor progress on tackling the four drivers of childhood obesity

At an **operational level** continue to communicate the drivers to all partners and gather evidence of more aligned policies/actions. Update system leaders.



Agenda Item 7

DECISION-MAKER:	Health & Wellbeing Board
SUBJECT:	#BeeWell Survey Findings 2023
DATE OF DECISION:	24 July 2024
REPORT OF:	COUNCILLOR MARIE FINN CABINET MEMBER FOR ADULTS & HEALTH

<u>CONTACT DETAILS</u>			
Director	Title	Director of Public Health	
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	E-mail:	Natalie.madden@hants.gov.un	

STATEMENT OF CONFIDENTIALITY	
n/a	
BRIEF SUMMARY	
This report outlines the findings from the #BeeWell survey into young people's wellbeing in Southampton for 2023.	
RECOMMENDATIONS:	
	(i) To note the contents of this report and next steps for the programme.
	(ii) To commit to acting on the findings to improve young people's wellbeing and to promote use of the #BeeWell findings.
	(iii) To identify opportunities to work collaboratively across the system to address the results of the #BeeWell survey and improve young people's wellbeing.
REASONS FOR REPORT RECOMMENDATIONS	
	To share findings from the first year of the #BeeWell survey and outline next steps in the programme.
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED	
	n/a
DETAIL (Including consultation carried out)	
1.	Background #BeeWell believes young people's wellbeing is as important as their academic attainment. It is a collaboration between The University of Manchester, The Gregson Family Foundation and the Anna Freud Centre, who launched the programme in 2019. Building on the success of #BeeWell in Greater Manchester, the programme expanded into Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS) in 2023.

	<p>#BeeWell seeks to understand what factors influence young people’s wellbeing and what makes them thrive. Using a co-designed survey, #BeeWell listens to the voices of as many young people as possible, publishes the results privately to schools and publicly by neighbourhood, and drives action across society to improve young people’s wellbeing.</p> <p>More than 22,000 Year 8 and Year 10 pupils from 103 schools took part in Autumn 2023 in Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS). 2500 of these young people live in Southampton; with 12 Southampton schools participating.</p> <p>Participating schools receive a bespoke, private data dashboard, with insights into the strengths and needs of their pupils and are invited to a 1:1 session to help interpret the results and respond to the findings.</p> <p>Results at a neighbourhood level are publicly available via an interactive neighbourhood-level dashboard, produced by the University of Manchester, providing insights into how wellbeing varies across HIPS’ 46 neighbourhoods. Southampton has five #BeeWell neighbourhoods, based on the North, South, East, West and Central neighbourhoods.</p>
<p>2.</p>	<p>Findings</p> <p>Please see the appendices for the full headline report. Selected findings from the survey have been drawn out for this report on the following themes:</p> <ul style="list-style-type: none"> a) Overall wellbeing and inequalities b) Health and routines (including physical activity, physical health, substance use, dental hygiene, nutrition and sleep) c) Relationships d) Local environment e) Schools <p>It should be noted that the sample size is relatively low for the North and Central neighbourhoods of Southampton, so these results may not be as robust as the other three neighbourhoods.</p>
	<p>a) Overall wellbeing</p> <p>Key life satisfaction and mental wellbeing scores at a HIPS-level seem consistent with what we know from other large studies that have used one or more of the measures included in the #BeeWell Survey. We see a positive picture for Southampton young people who score slightly higher than the HIPS average for mental wellbeing, self-esteem, stress and coping. Southampton young people are in line with the HIPS average for Life Satisfaction measure, and the Central neighbourhood has the highest score across HIPS.</p> <p>Wellbeing inequalities: Inequalities persist in wellbeing scores particularly across gender and sexual orientation, with girls having lower mental wellbeing and higher odds of experiencing emotional difficulties than boys. Young people who identify as LGBTQ+ have lower mental wellbeing scores and higher odds of experiencing emotional difficulties than their peers.</p>
	<p>b) Health and Routines (including physical activity, physical health, substance use, dental hygiene and sleep)</p>

	<p>The percentage of Southampton young people reporting they have ‘good, very good or excellent’ physical health is in line with the HIPS average, although it is lower for girls, those eligible for Free School Meals and those with SEN.</p> <p>Southampton young people are slightly more likely to get enough sleep to feel awake and concentrate on their school work: 59.8% compared to the HIPS average of 56%, though this is lower for girls than boys. The Central neighbourhood has the highest score in HIPS (71.3%).</p> <p>Young people were asked how many hours they spend using social media. Young people in three Southampton neighbourhoods have a higher than average score, meaning they spend more time on social media than other students. Girls report higher usage than boys.</p>
	<p>Physical activity</p> <p>Across HIPS, only 38.8% of young people in HIPS are reaching the recommended levels of physical activity set by the UK Government’s Chief Medical Officer of an average of one hour per day. This is lower for girls, LGBTQ+ young people and some ethnic groups. Southampton young people are in line with the HIPS average, though girls and those with SEN score lower than their counterparts across HIPS. Young people eligible for Free School Meals in Southampton report that they are doing more physical activity than their counterparts across HIPS, and this is particularly high in Central and North neighbourhoods.</p>
	<p>Substance use</p> <p>Southampton young people report lower use than average of alcohol. In line with trends seen across HIPS, girls are more likely to use e-cigarettes, cigarettes and alcohol than boys, whereas boys report higher usage of cannabis and other drugs than girls. Those eligible for free school meals in Southampton are twice as likely to use e-cigarettes than their peers. Usage of all substances varies across Southampton neighbourhoods.</p>
	<p>Dental hygiene</p> <p>Nearly nine out of ten young people reported having visited the dentist in the last 12 months. The vast majority (84%) of young people in HIPS brush their teeth the NHS-recommended twice per day. 17% said that they have had pain in their teeth or mouth sometimes, often or very often in the last three months.</p> <p>Southampton young people are slightly less likely to have visited the dentist in the last 12 months compared to the HIPS average, although this varies across neighbourhood and is especially low in Central. Southampton young people are also slightly less likely to brush their teeth the recommended twice a day, and are more likely to report having pain in their teeth or mouth in the last three months.</p>
	<p>Nutrition</p> <p>Students were asked about how frequently they eat fruit and vegetables, and how frequently they eat unhealthy snacks and drinks. Across HIPS 70% of young people say they often ate fruit and vegetables. This score is slightly lower in all five Southampton neighbourhoods, more significantly in Central (58%). Southampton young people are less likely to eat unhealthy snacks on a regular basis.</p>

	<p>c) Relationships</p> <p>Overall, young people in Southampton report feeling slightly less lonely than the HIPS average though this is still higher than the national average. One in ten young people in HIPS reported that they often or always feel lonely. This is significantly higher than the national average of 5.5%.</p> <p>Overall, the Southampton the score for bullying is lower than the HIPS average.</p> <p>Young people in Southampton eligible for FSM and those with SEN feel less supported by adults at home than their peers. Young people in Southampton with SEN also report lower scores for friendships and social support.</p> <p>Experience of peer pressure is not discernibly different to the average, but young people in the Central neighbourhood report the lowest levels of peer pressure across HIPS.</p>
	<p>Discrimination</p> <p>Young people in Southampton report higher levels of discrimination due to race, skin colour of where they were born, and faith, than the HIPS average.</p> <p>Discrimination due to gender and sexual orientation is in line with the HIPS average, and discrimination due to disability is slightly lower.</p>
	<p>d) Local environment</p> <p>Young people in Southampton feel slightly less safe within a 5-minute walk of their home than the average for HIPS; the East neighbourhood sees one of the lowest score across HIPS. In line with trends, girls feel less safe than boys, as do those eligible for Free School Meals and those with SEN.</p> <p>Southampton boys and those young people eligible for Free School Meals are less likely to agree that there are good places to spend their free time, compared to their counterparts across HIPS.</p>
	<p>e) Access to mental health support in schools</p> <p>Southampton young people are in line with the HIPS average for feeling they belong at their school. In line with trends, girls, young people eligible for FSM and those with SEN are less likely to feel they belong. Southampton young people perceive marginally higher levels of support from adults in school, though this is lower for young people with SEN (the opposite is true across HIPS for SEN).</p> <p>Happiness with attainment is in line with levels seen across HIPS.</p> <p>Southampton young people are less likely to report feeling ‘a lot’ of pressure from schoolwork than the HIPS average.</p> <p>On average across HIPS and Southampton, only a third of young people said they felt comfortable talking to adults in schools about their mental health. Southampton neighbourhoods are in line with this score, although a higher percentage in the North said they felt comfortable (40%). 45% of students said they could access mental health support in schools when they need, and just over a third of young people felt that the available mental health support in schools is helpful.</p>

<p>3.</p>	<p>Co-Production</p> <p>#BeeWell’s youth centred approach seeks to ensure young people are at the centre of our response to the data.</p> <ul style="list-style-type: none"> • The survey has been co-created by young people from HIPS and Greater Manchester. 200 young people from 15 pathfinder schools took part from HIPS. • Participation groups: nine VCSE organisations in HIPS have facilitated conversations with groups of young people on behalf of the #BeeWell team, gathering insights and feedback to help shape the #BeeWell programme. 40 young people and their youth workers came together for a wellbeing and activity day at Avon Tyrrell in the Easter holidays. • Youth-led commissioning: The #BeeWell Youth Steering Group, made up of young people across Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS), will have access to £16,000 to commission activities in response to the #BeeWell findings. The commissioning pot has been provided by Hampshire County Council and match funding is being sought from The National Lottery Awards for All. • Young Researchers Programme: 26 Year 10 pupils from HIPS participated in the programme to develop their research knowledge and skills, working with the #BeeWell team and the University of Manchester to interpret the survey responses and identify future areas of research. Their report on stress has been published BeeWell-Evidence-Briefing-6-YRP-2024-1.pdf (beewellprogramme.org) • The #BeeWell programme team have launched a competition for schools, with five prizes of £2,000 each to be won for the best action plan to improve students’ wellbeing. The action plans have been co-created with students in response to the school’s data dashboard. A young people’s panel will judge the entries and the winners will be announced in the summer term.
<p>4.</p>	<p>Next Steps</p> <ul style="list-style-type: none"> • One-to-one follow up support sessions for schools to interpret their data and identify actions to improve their students’ wellbeing. Themes from these sessions collated, resources and good practice shared. Communities of practice will be established on top topics. • Engage schools for Year 2 of the survey, due to be delivered October-November 2024 to years 9 and 10. • Streamline the process for small settings such as special schools and alternative provisions to deliver the survey, to enhance completion rates. • Continue to seek feedback on place-based data from young people to develop narratives and co-design localised responses via #BeeWell groups and established mechanisms. Work with LGBTQ# young people to contextualise specific findings for this cohort, and develop recommendations. • <i>Youth Matters</i>, the #BeeWell youth steering group, take part in recruitment of co-creation lead. Youth commissioning of priority projects.

	<ul style="list-style-type: none"> • A survey suitable for use by young people educated at home will be delivered in the autumn term 2024. • Work with partners through the #BeeWell Steering Group and Advisory Board to identify priority areas for joined up working across the system.
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RESOURCE IMPLICATIONS

Capital/Revenue

	<p>The programme is provided by the University of Manchester and Anna Freud, with the delivery in HIPS supported by an academic lead, data manager, researchers, and policy and communication officers, at no cost to HIPS.</p> <p>The programme team costs in HIPS for 2023/24 were covered by Hampshire County Council.</p> <p>Financial contributions have been made to the 24/25 costs by the ICB and Hampshire and IoW Councils. For 6 months between January and June 2024, Southampton City Council contributed 10 hours per week of a staff member's time to the co-creation function of the programme.</p> <p>Contributions for 2025/26 will again be sought from the ICB and the four local authorities.</p> <p>(NB - it is acknowledged that the Health & Wellbeing Board cannot commit Southampton City Council (or any other organisation) resources; so any future cost commitment would have to follow the City Council decision making process).</p>
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Property/Other

	None
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LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

	None
--	------

Other Legal Implications:

	None
--	------

RISK MANAGEMENT IMPLICATIONS

	None
--	------

POLICY FRAMEWORK IMPLICATIONS

	None
--	------

KEY DECISION?	No
WARDS/COMMUNITIES AFFECTED:	All
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	Presentation to Board on 24 July 2024 (PowerPoint)

2.	<p>Headline report summarising key findings from the survey responses across Hampshire, Isle of Wight, Portsmouth and Southampton which is also available here:</p> <p>https://beewellprogramme.org/wp-content/uploads/2024/03/HIPS-Headline-Findings-2024.pdf</p>
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Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.	No
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Data Protection Impact Assessment

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.	No
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Other Background Documents

Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1.	
2.	

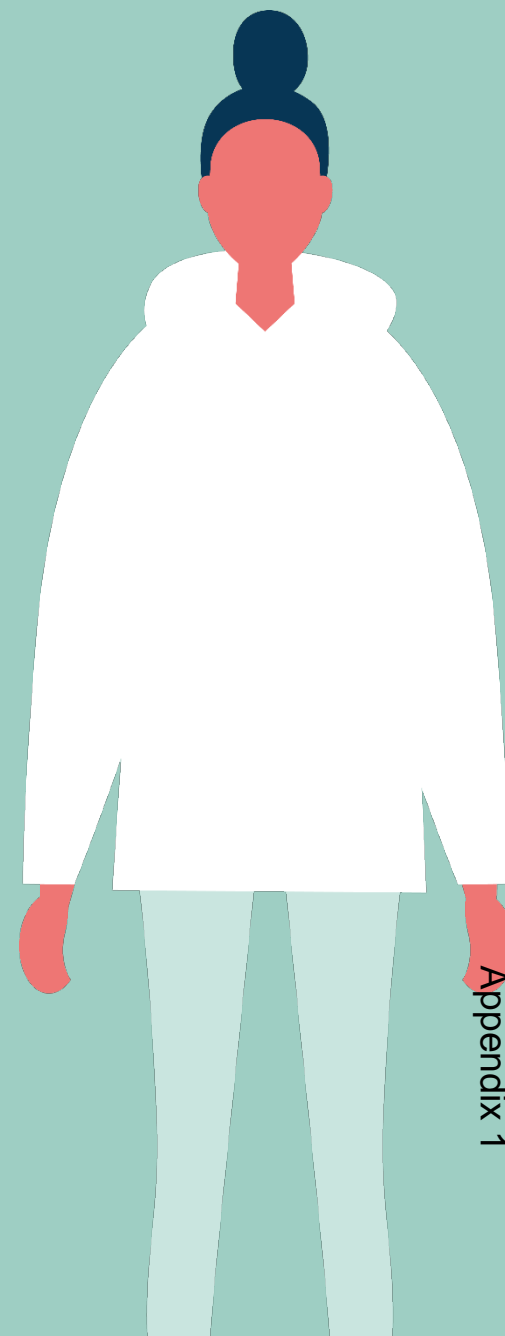
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#BEE WELL



#BeeWell
Page 33
Headline Findings 2023

Southampton
Health & Wellbeing Board



Appendix 1

Agenda Item 7

#BeeWell – background



#BeeWell believes young people’s wellbeing is as important as academic attainment.

Starting with a co-created survey in secondary schools, #BeeWell seeks to understand what factors influence young people’s wellbeing and what makes them thrive.



The programme expanded into Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS) in 2023.

- The first wave of the survey in HIPS was completed by Year 8 and Year 10 pupils in Autumn 2023.
- A total of 103 mainstream secondary schools, special schools, pupil referral units and independent schools delivered the survey across HIPS. 12 Southampton schools participated.
- 22,000 young people took part, which represents 53% of all young people in that age bracket in HIPS. 2,500 participants live in Southampton.
- Young people in non-mainstream schools were able to complete a short version of the survey.
- A symbol-based version of the survey was also created for young people with severe or profound and multiple learning disabilities.
- The survey is based on a range of wellbeing drivers: health & routines; hobbies & entertainment; school; environment & society; relationships; wellbeing support.

Hampshire
76 schools
17,000 young people

Portsmouth
6 schools
1,300 young people

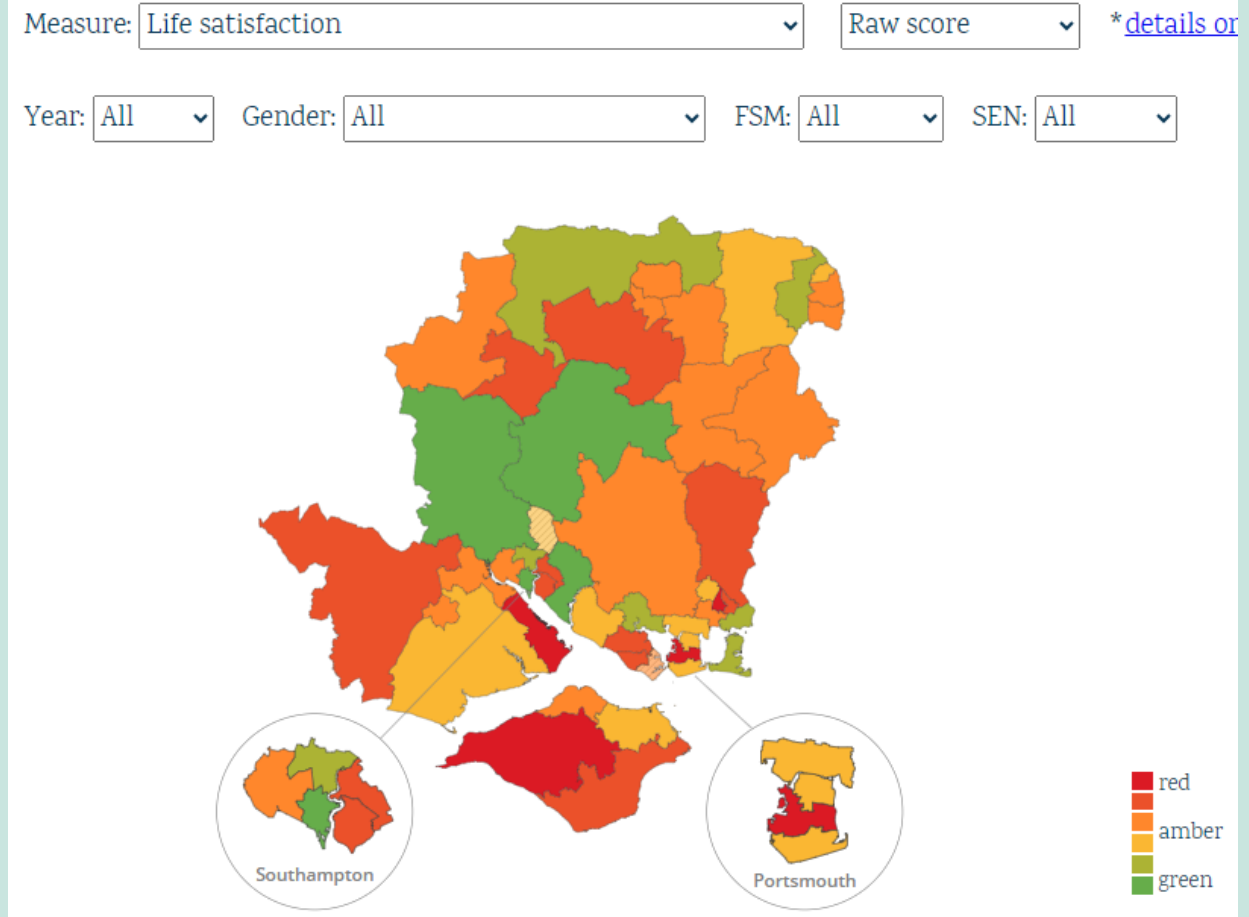
IOW
9 schools
1,500 young people

Southampton
12 schools
2,500 young people

#BeeWell – Dashboard

- Schools receive a private, bespoke data dashboard, giving insights into their students' wellbeing.
- The anonymous results can be disaggregated by age, gender, free school meal eligibility and special educational needs.
- Schools are invited to webinars and 1:1 support sessions to interpret data and identify priorities for improvement.
- An interactive Neighbourhood-level dashboard has been published: [#BeeWell Neighbourhood Data Hive \(uomseed.com\)](#).
- The HIPS region has been split into 46 neighbourhoods. Data is mapped to participants' home postcodes; schools are not identifiable.

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Southampton Neighbourhood	Number of participants
North	208
East	684
South	500
Central	174
West	901
Total	2,467

Overall wellbeing



Across HIPS, key life satisfaction and mental wellbeing scores seem consistent with other large studies that have used one or more of the measures included in the #BeeWell Survey.

We see a positive picture for Southampton young people who score higher for mental wellbeing, self-esteem, stress and coping.

Pa Southampton young people are in line with the HIPS average for Life Satisfaction measure, although the Central neighbourhood has the highest score across HIPS.

We do see a proportion of young people particularly in the South and East neighbourhoods with an unusually low score for three of these wellbeing measures.

Specific details for these wellbeing measures are included in slide 16 below.

Emotional Difficulties:

Across HIPS, 17% of young people reported a high level of emotional difficulties e.g. worrying a lot, feeling unhappy, having problems sleeping.

These thresholds do not represent a clinical diagnosis but indicate young people scoring in this range may require additional, preventative support. Large national studies use different measures so are not directly comparable, but do typically reveal similar estimates.

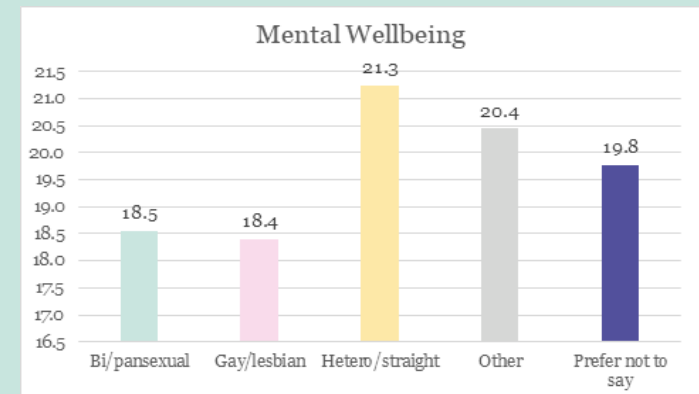
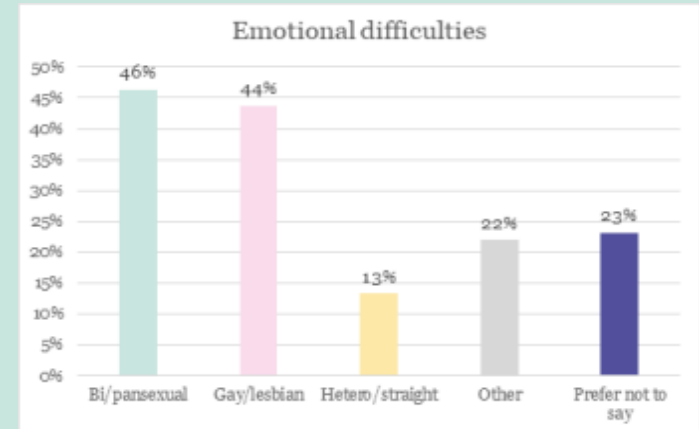
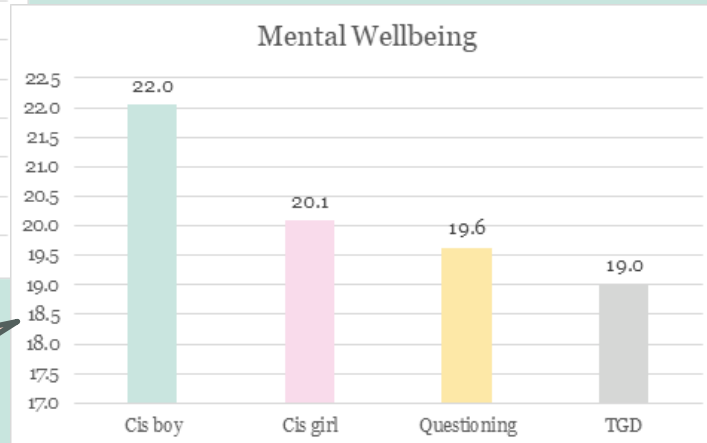
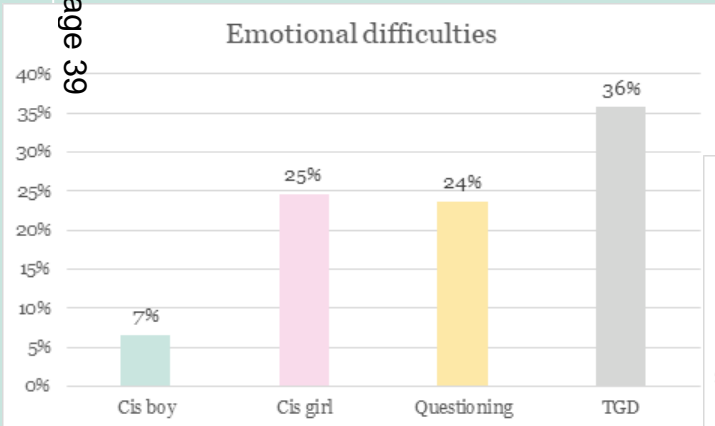
Wellbeing inequalities

Inequalities persist in wellbeing scores particularly across gender and sexual orientation.

Disparities in *emotional difficulties* is marked between boys and girls, with girls having considerably higher odds of experiencing emotional difficulties than boys. Girls also have lower wellbeing scores than boys.

The greatest disparities for both mental wellbeing and emotional difficulties were observed for those identifying as Trans- or Gender-Diverse (TGD).

Bi/pansexual and Gay/lesbian have considerably lower mental wellbeing scores and higher odds of experiencing emotional difficulties than their heterosexual peers.



HIPS young people feel that boys have a more positive result than girls because they don't like to talk about their feelings, and they won't show or admit they are struggling.

Health & routines – physical activity

Across HIPS, only 38.8% of young people in HIPS are reaching the recommended levels of physical activity set by the UK Government's Chief Medical Officer of an average of one hour per day. This is lower for girls, LGBTQ+ young people and some ethnic groups.

Southampton young people are in line with the HIPS average for physical activity, though girls and those with SEN score lower than their counterparts across HIPS.

In Southampton, young people eligible for Free School Meals report doing more physical activity than their counterparts across HIPS, and this is particularly high in Central and North neighbourhoods.

Specific data about physical activity provided in slide 17 below.

What young people say about physical activity

Where 'male stereotype' sports are offered to girls, the same level of effort is not provided by adults i.e. if schools offer football to girls, it's a small area of the field and they just kick a ball about themselves, whilst the boys get football pitch and coach.

People are put off exercise as they are conscious of their body; there are lots of comparisons on social media, especially for girls.

Young people would like to see what activities are available, to know the choices and also to have access to different choices.

Walking classrooms were suggested, with the opportunity to study outdoors.

Health & routines – physical health, sleep, social media

The percentage of Southampton young people reporting they have ‘good, very good or excellent’ **physical health** is in line with the HIPS average, although it is lower for girls, those eligible for Free School Meals and those with SEN.

Southampton young people are slightly more likely to get enough **sleep** to feel awake and concentrate on their school work: 59.8% compared to the HIPS average of 56%, though this is lower for girls than boys.

Central neighbourhood has the highest score in HIPS (71.3%).

Page 4
Students were asked how many hours they spend using **social media**. Young people in three Southampton neighbourhoods have a higher than average score, meaning they spend more time on social media than other students. Girls report higher usage than boys.

Specific data about these measures is provided in slide 18 below.

Health and routines – substance use

Southampton young people report lower use than average of alcohol than the HIPS average

In line with trends seen across HIPS, girls are more likely to use e-cigarettes, cigarettes and alcohol than boys, whereas boys report higher usage of cannabis and other drugs than girls.

Those eligible for free school meals in Southampton are twice as likely to use e-cigarettes than their peers.

Further details about substance use is provided in slide 19 below.

Page 8
The neighbourhood dashboard depicts current use of substances: Sometimes (between 1 and 9 days), and Often (10 or more days in the last month).

- Current use of **e-cigarettes** is higher than the HIPS average in West and South, and lower in Central.
- Use of **cigarettes** is higher than the HIPS average in Central and West (3.7 and 2.6% respectively of young people saying they smoke sometimes or often, compared to 1.8%)
- Use of **cannabis** is higher than average in North and West (2.9% and 2.8% compared to 1.9%.)
- Use of **other drugs** is lower in Central (0%) and higher in North (1.1%) compared to the HIPS av of 0.7%.
- The HIPS average for young people reporting they use **alcohol** sometimes or often use alcohol is 14.6%. All neighbourhoods in Southampton are lower, ranging from 5.2% in Central to 12.6% in South.

Young people feedback on e-cigarettes:
Surprised by the results and think that more than 1/10 young people use vapes regularly. Potential reasons for youth vaping: peer pressure; see it on Instagram, think it's cool; stress relieving effects; easy to get hold of (Tesco, Sainsbury's). Other young people say that adults think of vaping as smoking, but young people see it as a toy, and it smells nice.

Health and routines – Dental Hygiene

Southampton young people are slightly less likely to have visited the dentist in the last 12 months compared to the HIPS average, although this varies across neighbourhood and is especially low in Central.

Southampton young people are also slightly less likely to brush their teeth the recommended twice a day, and are more likely to report having pain in their teeth or mouth in the last three months.

Dental hygiene

- 85.5% of Southampton young people reported having visited the dentist in the last 12 months, compared to the HIPS average of 87.7%.
- The lowest percentage across HIPS is seen in the Southampton Central neighbourhood and this lowers the average for Southampton:
 - East – 88.7%
 - North – 87.3%
 - South – 86.5%
 - West – 84.4%
 - Central – 69.3%
- The vast majority (84%) of young people in HIPS brush their teeth the NHS-recommended twice per day, although this is slightly lower for Southampton young people (81.8%), with lower prevalence seen in the North neighbourhood at 77.6%
- 18.4% of young people in Southampton report having had pain in their teeth or mouth sometimes, often or very often in the last three months, compared to 17% for the HIPS average. Three of the Southampton neighbourhoods are in line with the HIPS average, whereas slightly higher percentages are seen in South and East, (19.5 and 20% respectively).

Health and routines – Nutrition

The percentage of young people eating fruit and vegetables 'often' is slightly lower in all five Southampton neighbourhoods compared to the HIPS average, and notably lower in Central.

Southampton young people are less likely to eat unhealthy snacks on a regular basis.

Nutrition

- Students were asked about how frequently they eat fruit and vegetables, and how frequently they eat unhealthy snacks and drinks (e.g. sweets, chocolates, crisps, fizzy drinks).
- Across HIPS 70% of young people say they often ate fruit and vegetables (5-6 days a week, once a day, every day more than once). The percentage of young people eating fruit and vegetables 'often' is slightly lower in all five Southampton neighbourhoods, more significantly in Central (58%):
 - West 69%
 - North 67%
 - South 63%
 - East 62%
 - Central 58%
- Across HIPS, 46% of young people report eating unhealthy snacks often; Overall this is lower in Southampton apart from in the South neighbourhood:
 - Central 34%
 - North 39%
 - West 41%
 - East 44%
 - South 50%

Relationships

- Overall, young people in Southampton report feeling less **lonely** than the HIPS average (8.44%) though this is still higher than the national average.
- One in ten young people in HIPS reported that they often or always feel lonely. This is nearly double the national average where 5.5% of 11-16 year-olds in England say they often or always feel lonely (NHS Digital, 2023).
- Overall, the Southampton the score for **bullying** is lower than the HIPS average.
- Young people in Southampton eligible for FSM and those with SEN feel less **supported by adults at home** than their peers.
- Young people in Southampton with SEN also report lower scores for **friendships and social support**.
- Experience of **peer pressure** is not discernably different to the average, but young people in the Central neighbourhood report the lowest levels of peer across HIPS.

Further details about relationships provided in slide 20 below.

Relationships – discrimination

Across HIPS, just under half (44%) of young people reported experiencing discrimination on account of either their gender, sexuality, race, ethnicity, where they were born, disability or faith.

Young people in Southampton report higher levels of discrimination due to race, skin colour of where they were born, and faith, than the HIPS average.

Discrimination due to gender and sexual orientation is in line with the HIPS average, and discrimination due to disability is slightly lower.

Discrimination – HIPS average:

- Discrimination on the grounds of race is most prevalent in Black (closely followed by Chinese) young people with seven in ten reporting they have experienced discrimination in the past.
- Of those with Special Educational Needs (SEN), one in three (33%) report having experienced discrimination because of their disability.
- Six in ten bi/pansexual young people report discrimination, which rises to over seven in ten for gay/lesbian young people. On the basis of their gender, half of trans and gender diverse young people report having experienced discrimination in the past.

Southampton neighbourhoods compared to HIPS average:

- Discrimination occasionally, some of the time, often or always because of **race, skin colour, or where they were born:**
 - HIPS average – 11.8%
 - Central – 23.6%
 - North 15.9%
 - South 14.5%
 - East 13.6%
 - West 13.3%
- Discrimination experienced occasionally, some of the time, often or always because of **faith/religion:**
 - HIPS average – 5.8%
 - East 18.4%
 - Central – 14.0%
 - North 6.9%
 - South 6.1%
 - West 5.3%

Local environment – feeling safe

Young people in Southampton feel slightly less safe within a 5-minute walk of their home than the average for HIPS; the East neighbourhood sees one of the lowest score across HIPS.

In line with trends, girls feel less safe than boys, as do those eligible for Free School Meals and those with SEN.

Feeling safe

Young people were asked to what extent they feel safe within a five minutes walk of their home. 84% of young people report that they feel fairly safe or very safe in their local area.

Overall, this is lower in Southampton with 80% of young people reporting that they feel fairly safe or very safe in their local area. This varies across neighbourhoods, with young people in the North neighbourhood reportedly feeling safer than the average at 84%, with the converse true of young people living in the East (75%):

- Both males and females feel less safe in Southampton than their counterparts in HIPS: 81.9% of Southampton males compared to 86.4% for the HIPS average, and 78% of females, compared to 82% for the HIPS average for females.
- 74.8% of young people eligible for free school meals (FSM) in Southampton report feeling fairly safe or very safe, compared to 82.4% of their peers not eligible for FSM. The HIPS average for FSM is 78.6%.
- 77.8% of young people in Southampton with SEN feel fairly or very safe, compared to 80.4% of their peers who do not have SEN.

Local environment – good places to go

Southampton boys and those young people eligible for Free School Meals are less likely to agree that there are good places to spend their free time, compared to their counterparts across HIPS.

- Overall, **61.8% of Southampton young people agree or strongly agree** there are good places to spend free time (e.g. parks) in their local area.
- This is only marginally lower than the HIPS average. 63% of young people in HIPS agree or strongly agree that there are good places to spend free time (e.g. parks) in their local area.
- The highest score was seen in the Southampton North neighbourhood (65%) with the other 4 neighbourhoods ranging from 59.3% in Central to 61.8% in the East.
- Females score in line with the HIPS average for girls at just over 60%. A lower percentage of males in Southampton agree or strongly agree there are good places to go, 62.7% compared to 66.5% for their male counterparts across HIPS.
- A lower percentage of young people in Southampton eligible for FSM agree there are good places to spend free time, 57.3% compared to 63.8% of their peers who are not eligible for FSM. The HIPS average for young people eligible for FSM is 60.6%.

Schools

Southampton young people are in line with the HIPS average for feeling they belong at their school. In line with trends, girls, young people eligible for FSM and those with SEN are less likely to feel they belong.

Southampton young people perceive marginally higher levels of support from adults in school, though this is lower for young people with SEN (the opposite is true across HIPS for SEN).

Happiness with attainment is in line with levels seen across HIPS.

Southampton young people are less likely to report feeling 'a lot' of pressure from schoolwork than the HIPS average.

Further information about these measures provided in slide 21 below.

Students were asked whether they had used any mental health support available at their school. Overall, in HIPS, 18% said yes. This varies across Southampton neighbourhoods with the highest score seen in East (20%) and the lowest in West neighbourhood (14%)

Students were asked about different aspects of the mental health support available in their school

- On average across HIPS, 29.5% of young people said they felt comfortable talking to adults in schools about their mental health. Southampton neighbourhoods are in line with this score, although a higher percentage in the North said they felt comfortable (40%).
- Young people were asked whether the available mental health support in schools is helpful. 35% of students agreed a little or a lot, and Southampton young people are in line with the HIPS average for this.
- Across HIPS, 45% of students said they could access mental health support in schools when they need it, three Southampton neighbourhoods are in line with this, with a lower percentage seen in two.

Overall wellbeing



The *average mental wellbeing score* for HIPS was 20.9 Possible scores range from 7-35, with higher scores indicating better mental wellbeing.

- **Southampton young people have a slightly higher average score for mental wellbeing of 21.2.**
- Higher than average levels of psychological wellbeing are seen in two neighbourhoods: Central (22.09) and North (21.39).
- Scores for young people living in the other three neighbourhoods are in line with the HIPS average:
 - West – 21.31
 - East – 20.84
 - South – 20.49 – significantly worse than the HIPS average based on 2 standard errors from the mean

Southampton young people also have a slightly higher score for self-esteem: 14.44 compared to the HIPS average of 14.27, (on a scale of 5-20, with higher scores indicating higher levels of self-esteem). Again, higher scores are seen in Central and North neighbourhoods. The average HIPS score for *stress and coping* is 7.23 on a scale of 0-16, with lower scores being more positive. **Southampton young people scored more positively for stress and coping: 7.04**

Young people responding to the *Life Satisfaction* item gave an average score of 7.6 out of 10, with higher scores representing higher levels of satisfaction with life. Overall, both the HIPS and the Southampton scores are in line with another large study undertaken by The Children's Society, where weighted average for 10-17 year-olds in 2023 was also 7.6.

- **The Central neighbourhood has the highest score for Life Satisfaction** across the whole of HIPS (8.28). The remaining neighbourhoods are within the average range, though South is towards the lower end for the region:
 - North – 7.8
 - West – 7.55
 - East 7.48
 - South 7.36

Elevated need: A proportion of young people in every neighbourhood in HIPS has elevated need, which means they have an unusually low or high score. **We see a higher percentage of young people living in the South and East neighbourhoods with elevated need for various wellbeing measures:**

- Nearly 21% of respondents living in both East and South show an unusually low score for the *Life Satisfaction* measure. Across HIPS on average, 19% of young people have elevated need for this measure.
- For psychological wellbeing, 16% (worse centile in HIPS) in South and 13% (2nd worse centile in HIPS) in East have unusually low score; the average for HIPS is 11% of young people having elevated need for this measure.
- In Southampton South, nearly 19% (worse centile in HIPS) of young people have an unusually low score for self-esteem, compared to 14% for the HIPS average.

Health & routines – physical activity

Overall, the average score for Southampton is not significantly different to the HIPS average score, at 37.52% compared to 38.8%.

This varies across the five neighbourhoods, with a higher than average score seen for Central (44.4%) and North (42.2%) and slightly lower for West (37.1%), South (35.1%) and East (34.1%).

48.4% of Southampton boys meet the recommended level of physical activity of an hour a day, whereas for girls it is much lower at 25%. The HIPS average for girls is 30%.

At 61.5%, Year 8 boys living in Central have the highest score in HIPS.

For Southampton young people with special educational needs, 30% meet the recommended level (compared to the HIPS average of 33.8% for young people with SEN).

For Southampton young people eligible for free school meals, 36.4% meet the recommended level (compared to the HIPS average for this cohort of 34.9%).

A much higher percentage than average of young people eligible for FSM living in Central and North meet the recommended level of physical activity (58.3% and 47.3% respectively) although care should be taken when interpreting results as < 100. The average score for young people on FSM is 34.9%.

Health & routines - physical health, sleep, social media

Physical health:

- The percentage of young people reporting they have 'good, very good or excellent' physical health is in line with the HIPS average at 82.5%. This varies across Southampton neighbourhoods from 80% in the East to 85.8% in the North.
- In line with trends, boys are more likely to report positively on their excellent physical health (87.7% compared to 76.5% of girls.)
- Young people eligible for FSM are less likely to report having good, very good or excellent physical health (75.4% compared to 85.7% of their peers).
- Those who have SEN is also lower than those who do not have SEN (77.5% compared to 83.3%)

Sleep

- Page 52
- Students were asked whether the amount of sleep they get is enough for them to feel awake and concentrate on their schoolwork. Southampton young people are slightly more likely to report that they get enough sleep – 59.8% compared to the HIPS average of 56%. This varies across neighbourhoods, with Central seeing the highest score in HIPS (71.3%).
- Girls report getting less sleep than boys. Across HIPS there is a 12% gap, but in three neighbourhoods in Southampton there is a 20% gap* (*n.b small cohorts).
 - Usually those on FSM get less sleep than their peers, but the converse is true of Central neighbourhood.

Social media

- Students were asked how many hours they spend using social media (e.g. TikTok, Instagram, Snapchat) on a normal weekday during term time. Possible scores for this measure range from 0 to 8, with higher scores indicating higher number of hours per day spent on social media use.
- Young people in Southampton South, East and West neighbourhoods have a significantly higher than average score (based on 2 standard errors from the mean), meaning they spend more time on social media than other students across HIPS. Girls report higher usage than boys.

Health and routines – substance use

The #BeeWell survey asks young people about their use of substances such as alcohol, cigarettes, e-cigarettes and drugs. Trends for HIPS:

- Current or previous users of **e-cigarettes** are significantly more likely to be older, eligible for free school meals, cisgender girls, trans and gender diverse, or questioning their gender identity.
- For **alcohol**, current or previous users are significantly more likely to be trans and gender diverse and older pupils.

On average, Southampton young people report very marginally lower use of most substances and lower use than average of alcohol (18.11% current or previous users compared to 24.60%).

In line with trends seen across HIPS, **girls are more likely to use e-cigarettes, cigarettes and alcohol** than boys, whereas **boys report higher usage of cannabis and other drugs** than girls.

14.46% of Southampton young people eligible for **FSM** are current or previous users of e-cigarettes compared to 7.19% of those not eligible for FSM. Those eligible for FSM also have a higher percentage for alcohol use (20.52% compared to 17.02%). This is in contrast to the HIPS average where young people eligible for FSM have a slightly lower use of alcohol than those not eligible for FSM.

In line with the trend seen elsewhere in the HIPS, **a higher percentage of young people with SEN are current or previous users of e-cigarettes, cigarettes and cannabis than their peers, and report lower use of alcohol**. For young people with SEN, use of other illegal drugs is 1.29% for HIPS whereas it is zero in Southampton.

Substance use for <u>current or previous</u> users	HIPS	Southampton
Electronic cigarettes	10.40%	9.46%
Cigarettes	3.26%	3.18%
Cannabis	3.22%	3.17%
Other drugs	1.05%	0.70%
Alcohol	24.60%	18.11%

As part of this section of the survey, a fake substance ('Semeron') was included. Data are provided for students who reported that they had never tried Semeron.

Relationships

Loneliness

- **In line with trends, females in Southampton report higher levels of loneliness than males (11.6% compared to 5.6%).**
- Young people on **FSM** report higher levels of loneliness than their peers not of FSM (9.8% compared to 7.8%).
- The percentage of young people with **SEN** in Southampton that often or always feel lonely is over 12%. This is over 4.5% greater than their peers who do not have SEN, whereas the gap between these two cohorts across HIPS is 2.8%.

The Neighbourhood dashboard shows greater detail at a neighbourhood level. Students were asked how often they feel lonely. Possible scores* for this measure range from 1 to 5, with higher scores indicating higher levels of loneliness.

- **Young people living in Southampton West, North and Central have some of the lowest scores in HIPS (2.62, 2.49 and 2.45 respectively, compared to the HIPS average of 2.75).**
- South and East neighbourhoods are in line with the HIPS average.
- In the South, whilst the avg is in line with HIPS, it is in the worse HIPS centile for elevated need and significantly worse compared to HIPS based on context adjusted need.

*Awaiting alteration to the dashboard for loneliness, from score to percentage.

Parent/carer relationships

- These questions are about the support young people receive from adults at home. e.g., 'At home, there is an adult who believes that I will be a success.' Possible scores for this measure range from 4 to 20, with higher scores indicating higher levels of perceived support from family.
- **Southampton at 16.76 is in line with the HIPS average for this measure.**
- Young people eligible for **FSM** feel less supported by adults at home than their peers and those with **SEN** feel less supported still, with a score of 15.38.

Young people in Southampton with SEN also report lower scores for friendships and social support, 13.99 compared to their peers in Southampton without SEN (15.16) and young people with SEN across HIPS (14.28).

Bullying

- These questions are about the frequency with which young people experience different types of bullying e.g., 'How often do you get physically bullied at school? By this we mean getting hit, pushed around, threatened, or having belongings stolen.' Possible scores for this measure range from 3 to 12, with higher scores indicating higher levels of bullying.
- The HIPS average score is 4.30. Young people with SEN report more frequent bullying than their peers who do not have SEN (4.60 compared to 4.25).
- **Overall, the Southampton score is lower, 4.18. Young people in North and West neighbourhoods experience less bullying than other students; the other three neighbourhoods are within the average range.**

Schools

School connection - 'I feel that I belong at my school.'

The percentage reporting they belong at school 'somewhat, quite a bit, a lot':

- HIPS average 74.6%. **Southampton average is 1% higher at 75.6%.**
- In line with trends, **girls** are less likely to feel they belong at schools, (69% compared to 80.5% of boys).
- Those eligible for **FSM** in Southampton are less likely to feel they belong – 68.8% compared to 78% of their peers who are not eligible for FSM, though this is in line with the trend across HIPS.
- 67.8% of young people with **SEN** report a sense of belonging, compared to 76.3% of their peers who do not have SEN, again in line with trend across HIPS.

Relationship with staff - These questions are about support received from adults at school. e.g., 'At school there is an adult who listens to me when I have something to say.' Possible scores for this measure range from 4 to 20, with higher scores indicating higher levels of perceived support from adults at school.

- The average HIPS score is 13.9.
- **The average for Southampton is very slightly higher at 14.03, meaning higher levels of perceived support from adults.**
- In line with trends seen across HIPS, Southampton girls score marginally lower than boys and those eligible for FSM score marginally lower than their peers.
- Across HIPS, young people with SEN score in line with their peers who do not have SEN, but in Southampton they score lower

Happiness with attainment - 'How happy are you with the marks you get in school?' Possible scores for this item range from 0 to 10, with higher scores indicating higher levels of happiness with attainment.

- Overall Southampton young people are in line with the HIPS average of 6.06, although it is higher in Central neighbourhood (6.41).
- Across HIPS and in 4 out of the 5 neighbourhoods in Southampton, boys are happier than girls with their attainment. In Central neighbourhood, girls have one of the highest scores across HIPS (6.64) * n.b small cohort of girls in this neighbourhood.

School pressure - 'How pressured do you feel by the schoolwork you have to do?' Percentage feeling 'a lot' of pressure:

- **Southampton young people are less likely to report feeling 'a lot' of pressure than the HIPS average – 23.65% compared to HIPS av of 28%. Considerably lower levels are seen in Central and North neighbourhoods.**
- In line with the trend across HIPS the percentage of **girls reporting that they felt "a lot" of pressure from schoolwork was 11% higher than boys.**
- Across HIPS, a slightly higher percentage of young people with SEN (29%) report feeling a lot of pressure compared to their peers (28%). **In Southampton this is reversed, with 21.7% of young people with SEN report feeling a lot of pressure**

Progress since publication of findings in March

Young People

- *Youth Matters*, the #BeeWell youth steering group, established and meet monthly.
- Shared headline findings with participation groups and Youth Matters to understand what is most important to young people. Hampshire Youth Parliament shared insight on headline findings and voted on topics for the press release.
- 40 young people attended a #BeeWell day at Avon Tyrrell, including 13 young people educated at home from IoW.
- Youth commissioning pot currently at £16k, with application submitted to Awards for All for match funding.
- Young researchers programme published report into [impact of stress](#).

Schools

- One-to-one follow up support sessions to interpret their data and identify actions to improve their students' wellbeing. Themes from these sessions collated, resources and good practice shared. Communities of practice will be established on top topics.
- Schools have co-created improvement plans and submitted to a competition to win £2,000 (money provided by central #BeeWell programme.)
- Presented localised findings to Headteacher forums.
- Following feedback from headteachers, streamlined process for smaller settings to maximise participation rates, e.g. special schools and education centers can now complete survey with any secondary age pupils.
- Re-engaging schools for Year 2 of the survey, due to be delivered October- November 2024 to years 9 and 10. Mapping of schools who disengaged or did not sign up for year one, with targeted engagement to drive participation for year two. Webinars to promote #BeeWell to Independent schools.
- #BeeWell team is working with UoM, EHE teams and networks to develop survey suitable for use by young people educated at home.

Coalition of partners

- [35 local coalition partners in HIPS](#), and a further 70 national organisations, signed up to committing to act on the results of the #BeeWell survey.
- Several organisations have used #BeeWell data for funding bids.
- Bespoke data cuts requested to support work, e.g. detailed findings provided by the University of Manchester for LGBTQ+ young people and Ukrainian refugees across several measures.

Next steps

Young People

- Continue to seek feedback on place-based data from young people to develop narratives and co-design localised responses via #BeeWell groups and established mechanisms.
- Youth commissioning projects via Youth Matters, the youth steering group.
- Young people's panel to judge school improvement plans.
- Work with LGBTQ# young people to contextualise the findings and develop recommendations.

Schools

- Communities of practice to be established on common themes.
- The #BeeWell Prize, for the best co-created improvement plans judged by young people's panel.
- Continue to re-engage schools for Year 2 of the survey, due to be delivered October- November 2024 to years 9 and 10.
- Develop survey suitable for use by young people educated at home and engage with families via teams and networks.
- Case studies of school action / achievements collected and shared.
- UoM and Anna Freud are seeking to undertake further research on school provision; this is being developed in collaboration with Public Health in Hampshire and IoW where a provision survey is already delivered.

Coalition of partners

- Steering Group and Advisory Board to identify priority areas for joined up working. Selection of theme for UoM research paper.
- Continue to support organisations to access the data.
- Collate funding bids and other activities using #BeeWell data to begin evidencing impact.



#BEE WELL

**Hampshire, Isle of Wight,
Portsmouth, and Southampton**

**#BeeWell Headline Findings
Survey 2023**

Published March 2024

Hampshire County Council | ISLE of WIGHT | Portsmouth CITY COUNCIL | SOUTHAMPTON CITY COUNCIL | NHS Hampshire and Isle of Wight

Workshops were held to co-create the survey – 15 pathfinder schools & 200 young people



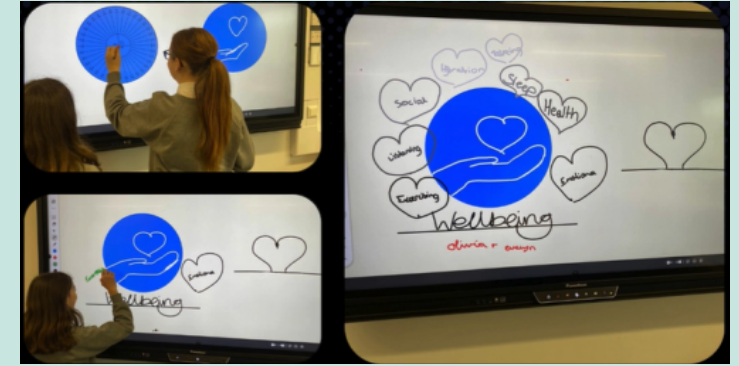
Nine VCSE participation groups shaping the programme



Page 59

Young people are at the centre of the #BeeWell Programme

Animated video designed, scripted and voiced over to introduce #BeeWell



University of Manchester Young Researchers' Programme involving 26 young people from HIPS

“We want to know we are making a change”



Read their research briefing into the impact of stress



Young people are involved in the design and decision making of #BeeWell, through Youth Matters, the #BeeWell Youth Steering Group

Coming next.. interpreting the data, youth commissioning, Young people's panel to judge the #BeeWell prize (£2,000 prize for 5 schools)

Responding to the #BeeWell data

Young people are leading the response to the findings:

- 40 young people attended a #BeeWell day at Avon Tyrell, including 13 young people educated at home from the IoW
- Youth Steering Group established, called, Youth Matters, with a youth commissioning pot to direct spend to priorities
- VCSE led #BeeWell participation groups helped design next phase of the programme and providing context & insight into the findings
- Hampshire Youth Parliament analysed and provided context to the headline findings, voting on what should be included in the press release
- 26 young people joined the young researchers' programme at HoM, and report published
- Young people's panel to judge school co-created improvement plans



Young People

Coalition Partners

Local Government & Health system

Schools

#BeeWell has over 30 local and 100 national partners; several have already committed to acting on the findings, including...

- Premiership 'Inspire' competition in schools – Saints Foundation
- Breakout Youth and ICB requested LGBTQ+ specific research and analysis
- Supporting applications for additional funding to address need
- Energise Me collaboration with Hampshire and Southampton Public Health teams and #BeeWell to promote physical activity, aligning #BeeWell findings with setting surveys and the Active Life Strategy
- Energise Me learning from Get Moving in Greater Manchester
- The Girls Network exploring embedding comparable wellbeing measure in impact survey
- SEND specific findings shared with EIEF
- DoE, GirlGuiding & Scouts engaged

- Homes for Ukraine Team in HCC requested bespoke data cut to understand the need of young Ukrainian refugees
- Mapping the 'reading for enjoyment' findings with school library service to understand impact and drive improvements
- #BeeWell findings used to inform development of the Children and Young People's Plan - IoW Children's Trust
- Substance use findings shared with Trading Standards to target interventions in neighbourhoods
- Use of neighbourhood level findings to inform refreshed strategic plan in East Hampshire Borough Council

- Private, bespoke dashboards and one to one support to interpret dashboard and identify priorities
- Themes collated to inform communities of practice
- The #BeeWell Prize - 5 awards of £2,000 each for the best co-created improvement plan, one prize for each LA area and one special school
- Selected area based findings presented to Hants SE area Headteachers
- Presentation at Hampshire HT conference, and Southampton & Portsmouth Headteacher forums





Hampshire, Isle of Wight, Portsmouth, and Southampton

#BeeWell Headline Findings Survey 2023

Published March 2024



INTRODUCTION TO #BEEWELL

LISTEN

#BeeWell has listened to the voices of over 22,000 young people in Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS).

In the autumn of 2023, Year 8 and 10 pupils from 103 mainstream, special and independent schools, and alternative provision sites, told us what is important to them and what impacts their wellbeing. This represents 53% of all young people in those year groups in the area.

ACT

Young people themselves are leading the response to the data through the #BeeWell youth steering group and through participation groups facilitated by nine local voluntary sector organisations. Twenty-six Year 10 pupils are also participating in a Young Researchers Programme with The University of Manchester, helping to interpret the survey responses and identify future areas of research.

Every school participating in the #BeeWell programme has received a bespoke data dashboard providing insights into the strengths and needs of their pupils and will be supported to identify priorities for improvement based on their individual findings.

The findings are already informing activity across the region, with schools, voluntary sector organisations, and Children's Services working closely with young people to interpret and act on the results.

An interactive public dashboard, to be published at the end of March 2024, will show more detailed results and insights into young people's wellbeing across different neighbourhoods in the region.

CELEBRATE YOUNG PEOPLE'S WELLBEING

Summary of headline findings

Overall wellbeing

The key findings of the survey show that young people in the region feel generally satisfied with their life, with overall wellbeing scores in line with other large studies that use similar measures.

However, there are noteworthy inequalities in wellbeing across both gender and sexuality. Findings show that girls are more likely to experience emotional difficulties and lower mental wellbeing than boys. The greatest disparities for both mental wellbeing and emotional difficulties were observed for those identifying as Trans- or Gender-Diverse (TGD). Bi/pansexual and gay/lesbian young people have considerably lower mental wellbeing scores and higher chances of experiencing emotional difficulties than their heterosexual peers.



Health and Routines

The overall picture for physical health is positive with the vast majority, eight in ten young people, saying they feel they have good, very good or excellent physical health. We also know that seven out of ten young people report taking part in sports/exercise/other physical activities at least once a week outside of school.

However, only four in ten young people in HIPS are reaching the recommended levels of physical activity of an average of one hour per day¹. This falls to three in ten for girls and is lower still for young people who identify as LGBTQ+.

Use of e-cigarettes and alcohol is much more commonplace than other substances such as cannabis. Peer pressure is seen to be an influence on patterns of substance use, with young people who have experienced higher levels of peer pressure more likely to use e-cigarettes or drink alcohol.



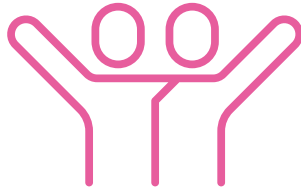
¹ Recommended by the UK Government's Chief Medical Officer.

Relationships

Young people are generally positive about relationships with their family and friends, in particular, high scores are seen for the support young people received from adults at home.

Despite this, one in ten young people in HIPS reported that they ‘often’ or ‘always’ feel lonely, almost double the national average seen in similar studies.

Just under half of young people reported experiencing discrimination on account of their gender, sexuality, race, ethnicity, where they were born, disability and/or faith.



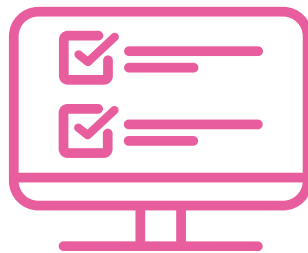
Local area

In 2023, over eight out of ten young people surveyed feel ‘fairly safe’ or ‘very safe’ in their local area and six out of ten young people agree that there are good places to spend free time in their local area.



Non-mainstream school findings

Young people in non-mainstream schools were able to complete a short or symbol version of the survey.



Next steps

Continuing the conversation with young people

#BeeWell's youth centred approach seeks to ensure young people are at the centre of our response to the data.

Nine voluntary and community sector organisations in HIPS have set up #BeeWell participation groups, gathering insights and feedback from young people to help shape the #BeeWell programme. These groups have helped the team establish the #BeeWell youth steering group and plan a #BeeWell day in April 2024. Now, the groups will help to interpret the data, telling us what is most important and what needs to be done to improve young people's wellbeing.

The #BeeWell Youth Steering Group, made up of young people across HIPS, will have a budget to commission activities in response to the #BeeWell findings.

Twenty-six Year 10 pupils from HIPS are participating in the Young Researchers Programme to develop their research knowledge and skills, working with the #BeeWell team and the University of Manchester to interpret the survey responses and identify future areas of research.

A priority for 2024/25 is to develop a version of the #BeeWell survey suitable for young people in HIPS who are educated at home.

Neighbourhood results

By the end of March, the University of Manchester will publish a neighbourhood dashboard providing insights into how wellbeing domains and drivers vary across HIPS' 46 #BeeWell neighbourhoods.

The publicly available [dashboard](#), which can be filtered by age, gender, SEND status and Free School Meal eligibility, will show variation in wellbeing across different communities, as well as insights into the key drivers of young people's wellbeing.

Support for schools

All participating schools have already received a bespoke data dashboard providing insights into the strengths and needs of their pupils, with the ability to explore trends by gender, free school meal (FSM) eligibility, age, and special educational needs (SEN).

All schools have been invited to an introductory webinar on using their dashboards and have been offered one-to-one follow up support sessions with Anna Freud to interpret their data and identify actions to improve their students' wellbeing.

The #BeeWell team have launched a competition for schools, with five prizes of £2,000 each to be won for the best action plan to improve their students' wellbeing. The action plans will be co-created with students in response to the school's data dashboard. A young people's panel will judge the entries and the winners will be announced in June 2024.

Whole system response

Thirty six local coalition partners in Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS), and a further 70 national organisations, have signed up to committing to act on the results of the #BeeWell survey.

MAKING YOUNG PEOPLE'S WELLBEING
EVERYBODY'S BUSINESS

Emerging key findings

Overall wellbeing

Overall wellbeing scores are consistent with what we know from other large studies that have used one or more of the measures included in the #BeeWell Survey.

The average mental wellbeing score of young people across HIPS is 20.9. Possible scores range from 7-35, with higher scores indicating better mental wellbeing.

This average mental wellbeing score is measured by young people rating themselves against positively worded statements such as ‘I’ve been feeling optimistic about the future, I’ve been feeling useful, I’ve been feeling relaxed².’

Young people were asked ‘Overall, how satisfied are you with your life nowadays?’. The average score is 7.6 out of a possible 10, with higher scores representing higher levels of satisfaction with life. This is identical to The Children’s Society weighted average for 10-17-year-olds in 2023.

17% of young people responding to the Me and My Feelings measure reported a high level of emotional difficulties e.g. worrying a lot, feeling unhappy, having problems sleeping. These thresholds do not represent a clinical diagnosis but indicate young people scoring in this range may require additional, preventative support. This overall figure is consistent with our previous findings in other areas³.

² Short Warwick Edinburgh Mental Wellbeing Scale - developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. It uses statements about thoughts and feelings, which relate more to functioning than feelings and so offer a slightly different perspective on mental wellbeing. The seven statements are positively worded with five response categories from ‘none of the time’ to ‘all of the time’.

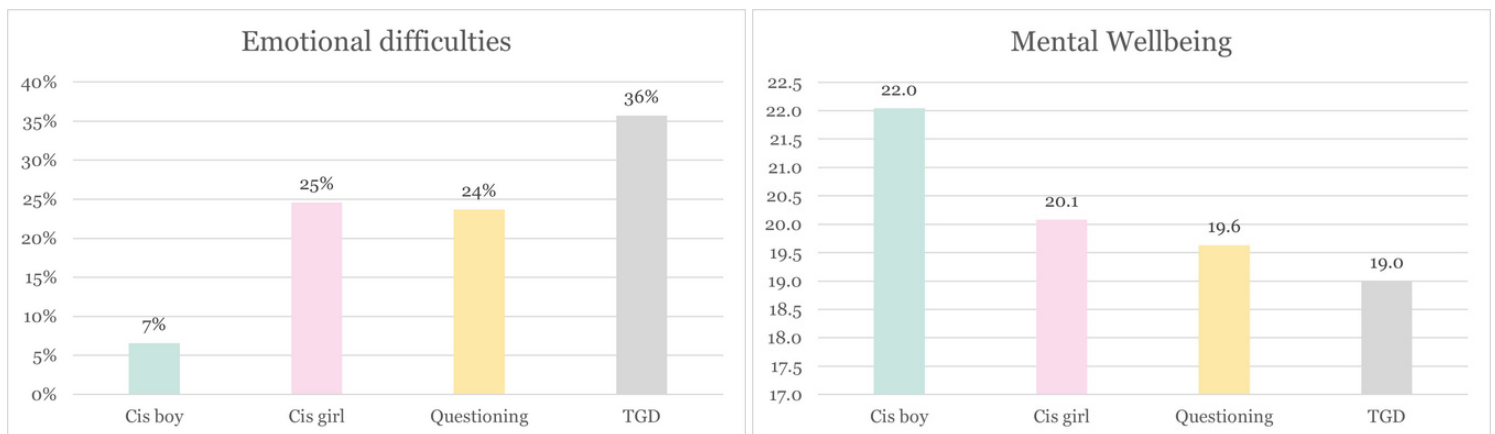
³ #BeeWell 2021 survey findings from Greater Manchester: [BeeWell-overview-briefing-2021.pdf](#) ([beewellprogramme.org](#)).

Mind the gap: wellbeing inequalities

Inequalities persist in wellbeing scores, particularly across gender and sexual orientation.

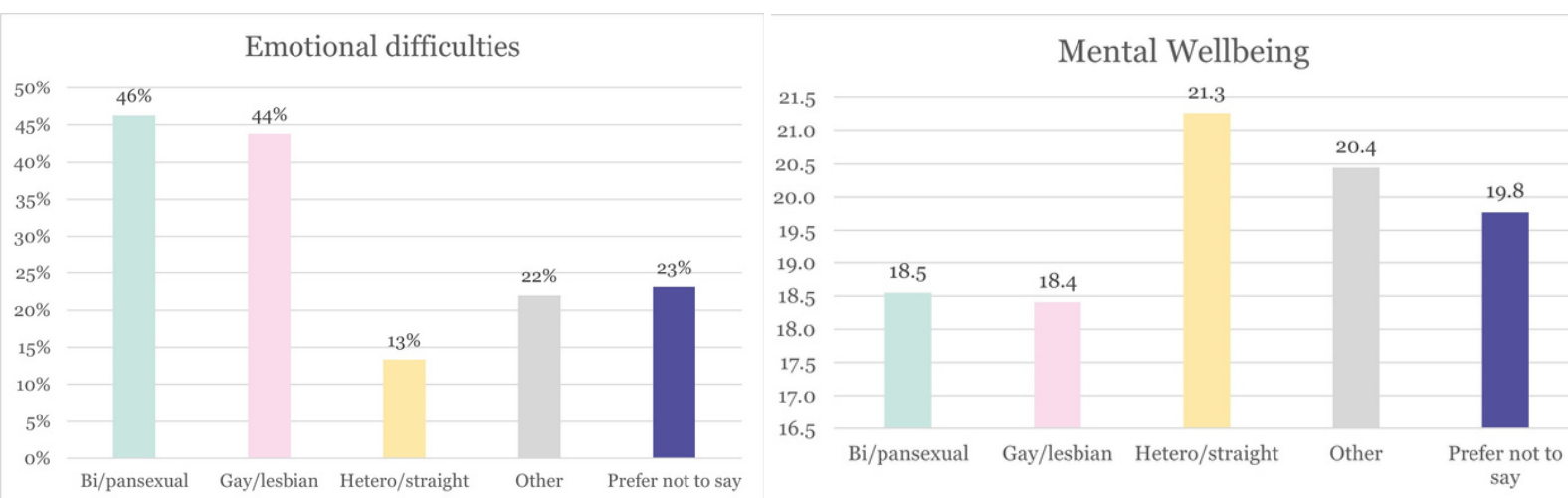
In their feedback, 25% of girls reported substantial emotional difficulties compared with 7% of boys. Girls also have lower mental wellbeing scores than boys (20.1 compared to 22.0, in a possible range of 7-35)

The greatest disparity in terms of gender are observed for those who identify as trans or gender diverse, with emotional difficulties reported by 36% of this cohort.

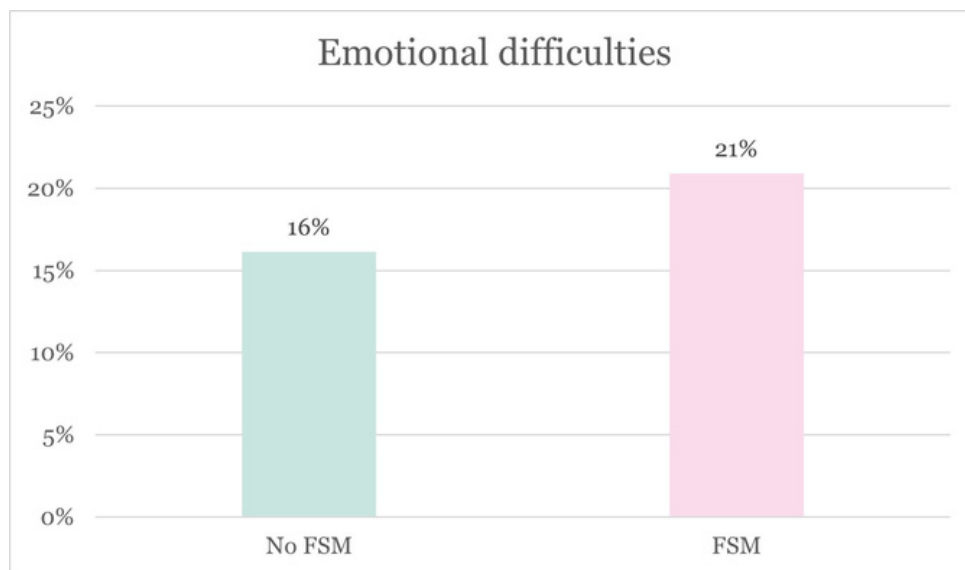


NB - Cis (short for cisgender) describes a person whose gender identity corresponds to their sex assigned at birth

There are similar trends in terms of sexuality. 44% of young people who identify as lesbian or gay report substantial emotional difficulties, rising to 46% of those who identify as bisexual or pansexual. This is compared with 13% of heterosexual young people.



Young people eligible for free school meals reported higher levels of emotional difficulties than their peers, 21% compared to 16%.



There is also evidence that wellbeing varies by place. For example, the proportion of young people reporting high levels of emotional difficulties ranges from 8% to 23% across the 46 HIPS neighbourhoods⁴



⁴ However, it is important to note that comparing neighbourhoods can over-emphasise differences given the comparison is between the highest and lowest scoring areas (that is, there may be little variation among the neighbourhoods in between).

Health and routines: selected findings

Physical activity

Across HIPS, only four in ten young people (39%) are reaching the recommended levels of physical activity set by the UK Government's Chief Medical Officer of an average of one hour per day.

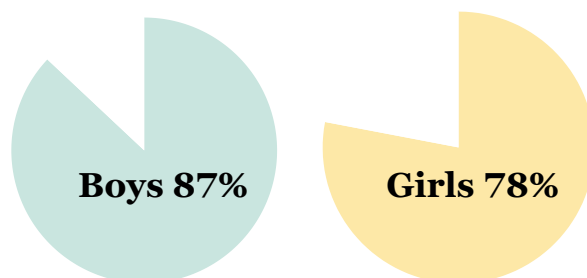
This falls to three in ten girls; 2.7 in ten gay/lesbian young people and 2.5 in ten bi/pansexual young people; and two in ten Chinese young people.



4 in 10 young people reach the recommended levels of physical activity

Physical health

Around eight in ten of young people say they feel they have 'good, very good or excellent' physical health across HIPS. A higher percentage of boys than girls rated their health as 'good, very good or excellent' (87% compared to 78%). Young people who are not eligible for free school meals are more positive about their physical health than young people who are eligible for free school meals, with 84% compared to 76% rating their health as 'good, very good or excellent'.



Spare time

Young people in HIPS feel positive about how often they can do things they like in their spare time, although disparity across gender is evident with 80% of boys compared to 68% of girls reporting 'almost always' or 'often.' We do know that seven out of ten young people take part in sports/exercise/other physical activities at least once a week outside of school.

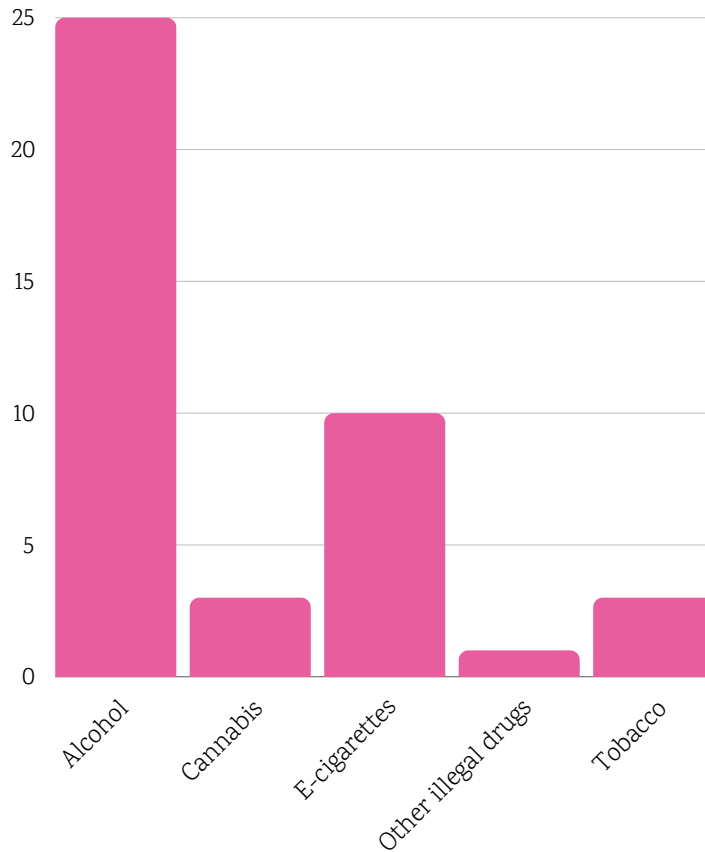
Sleep

Just under half (44%) of young people said they do not normally get enough sleep to feel awake and concentrate on their schoolwork during the day. This score is higher for girls (50%) compared to boys (37%) and is marginally higher for young people eligible for free school meals than their peers, and for young people in Year 10 than in Year 8.

Substance Use

The #BeeWell survey also asks young people about their use of substances such as alcohol, cigarettes, e-cigarettes and drugs⁵. Use of e-cigarettes and alcohol is much more commonplace than other substances such as cannabis. The figures in the chart below show current users (last 30 days) combined with previous users (used but not in the last 30 days).

25% of young people report currently or previously using alcohol, and 10% report currently or previously using e-cigarettes. This is compared with just 3% for both cannabis and tobacco, and 1% for other illegal drugs.



Young people experiencing higher levels of peer pressure are more likely to use both e-cigarettes and alcohol.

Young people who use e-cigarettes are more likely to be older, eligible for free school meals, girls, trans and gender diverse, or questioning their gender identity.

Those who drink alcohol are significantly more likely to be trans and gender diverse and older pupils. Young people from all ethnic minority groups are less likely to drink alcohol compared to White young people.

⁵ We included an item about a fake substance, Semeron, in the survey. Data shown above are for the 98% of young people who reported never having tried this substance.

Dental hygiene

In terms of dental hygiene, nearly nine out of ten young people reported having visited the dentist in the last 12 months. The vast majority (84%) of young people in HIPS brush their teeth the NHS-recommended twice per day.

17% said that they have had pain in their teeth or mouth ‘sometimes, often or very often’ in the last three months.

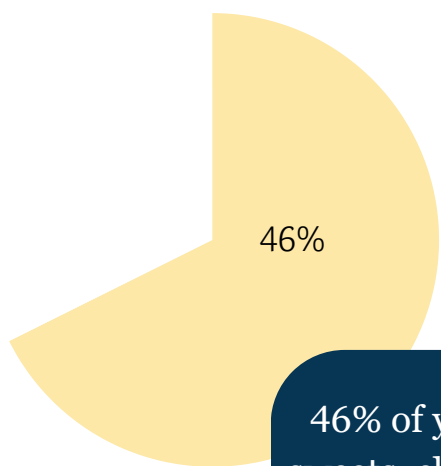
There is some evidence that dental hygiene varies by place: the proportion of young people reporting they visited the dentist in the last 12 months ranges from 69% to 96% across the 46 HIPS neighbourhoods.



Over 8 out of 10 young people brush their teeth twice a day

Nutrition

#BeeWell asks young people about their nutrition. 90% reported regularly eating fruit and vegetables (2-4 days a week or more). Young people eligible for FSM eat fruit and vegetables slightly less frequently than their peers who are not eligible for FSM (83% compared to 91% of their peers.)



46% of young people reported eating unhealthy snacks such as sweets, chocolate, crisps or fizzy drinks 5-6 days a week or more.

Relationships

Young people in HIPS are generally positive about relationships with their family and friends.

The survey asked questions about the support young people received from adults at home, for example, 'At home there is an adult who believes I will be a success.' The average score is nearly 17, out of a possible range of 4 to 20 with higher scores indicating higher levels of support. In response to questions about the support young people received from their peers, the average score is 15, also on a scale of 4 to 20.



However, one in ten young people in HIPS report that they often or always feel lonely. This ranges from 5% to 14% across HIPS neighbourhoods. This is almost double the national average where 5.5% of 11-16 year-olds in England say they often or always feel lonely (NHS Digital, 2023).

1 in 10 say they often or always feel lonely.



Information and advice

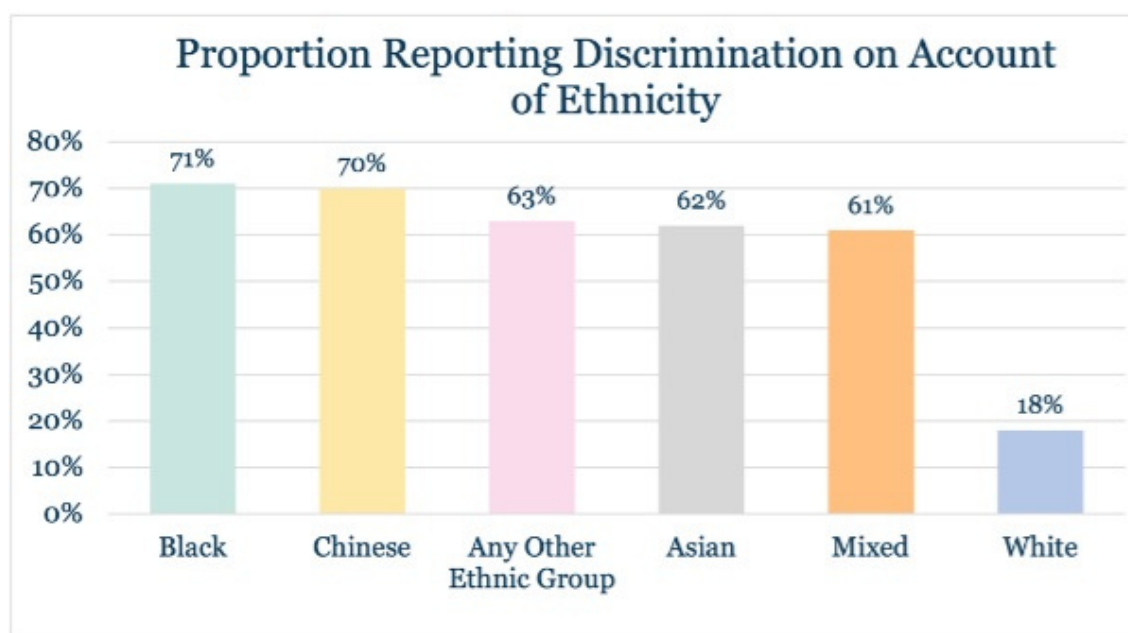
Over half of the young people said they sought information and advice about mental health from someone in their family or from close friends 'sometimes', 'often' or 'always'. Girls are more likely than boys to seek information and advice from both friends and family. Frequent use of telephone helplines and online sources and websites is significantly lower, at 12% and 15%.

Discrimination

The #BeeWell survey asks young people how often people make them feel bad because of their race, skin colour or where you were born; gender; sexuality; disability; or their religion/faith?⁶

In total, just under half (44%)⁷ of young people reported experiencing discrimination in at least one of these areas. Specifically, a quarter of pupils (24%) reported discrimination due to race, skin colour, or where they were born, 21% due to their gender, 14% due to their sexuality, 15% due to their disability and 11% due to their faith.

Discrimination on the grounds of race is most prevalent in the experience of Black (closely followed by Chinese) young people, with seven in ten reporting they have experienced discrimination in the past.

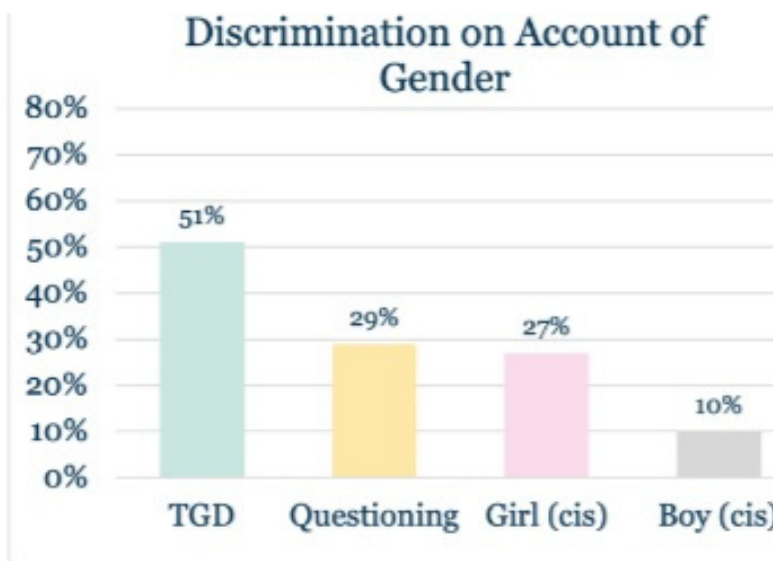
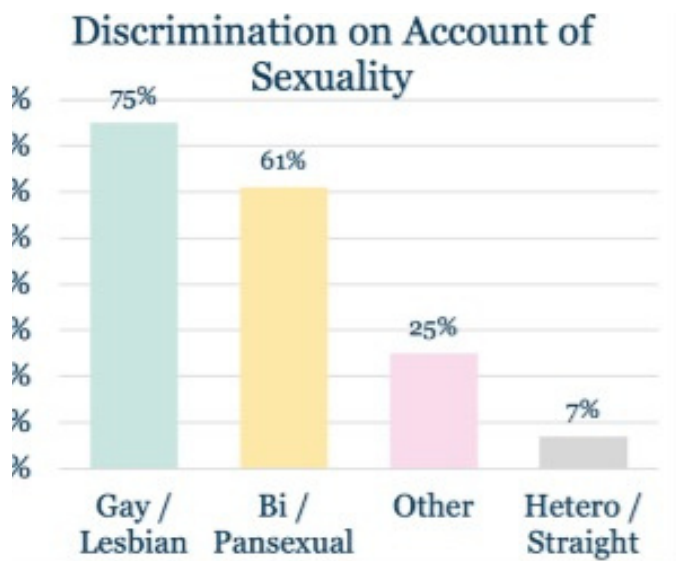


Of those with Special Education Needs, one in three (33%) report having experienced discrimination because of their disability, compared with roughly one in ten (12%) of pupils who do not have Special Educational Needs.

6 This question is adapted from the “Harmful or abusive relationships, interactions and experiences (Adapted from Determinants of Adolescent Social Wellbeing and Health Study & Harvard Measuring Discrimination Resource). The team worked with young people in Greater Manchester pathfinder schools, the #BeeWell young peer reviewers and Questionnaire Advisory Group to adapt the items.

7 This figure includes all 5 types of discrimination and any frequency other than ‘never’.

Less than one in ten (7%) of heterosexual/straight young people have experienced discrimination account of their sexuality. In comparison, six in ten bi/pansexual young people report discrimination, which rises to over seven in ten for gay/lesbian young people. On the basis of their gender, half of trans and gender diverse young people report having experienced discrimination in the past.



Local Environment: Feeling safe and good places to go

In 2023, 84% of young people surveyed feel fairly safe or very safe in their local area (within 5 minutes walking distance of home). This ranged from 67% to 93% across HIPS neighbourhoods. Boys report feeling marginally safer than girls, and young people who do not have SEN report feeling marginally safer than those with SEN. The greatest disparity in feelings of safety is between those young people eligible for free school meals (79%) compared with their peers who are not eligible (85%).

63% of young people in Hampshire, Isle of Wight, Portsmouth, and Southampton agree that there are **good places to spend free time** in their local area

this leaves over **1 in 3** young people feeling like they don't

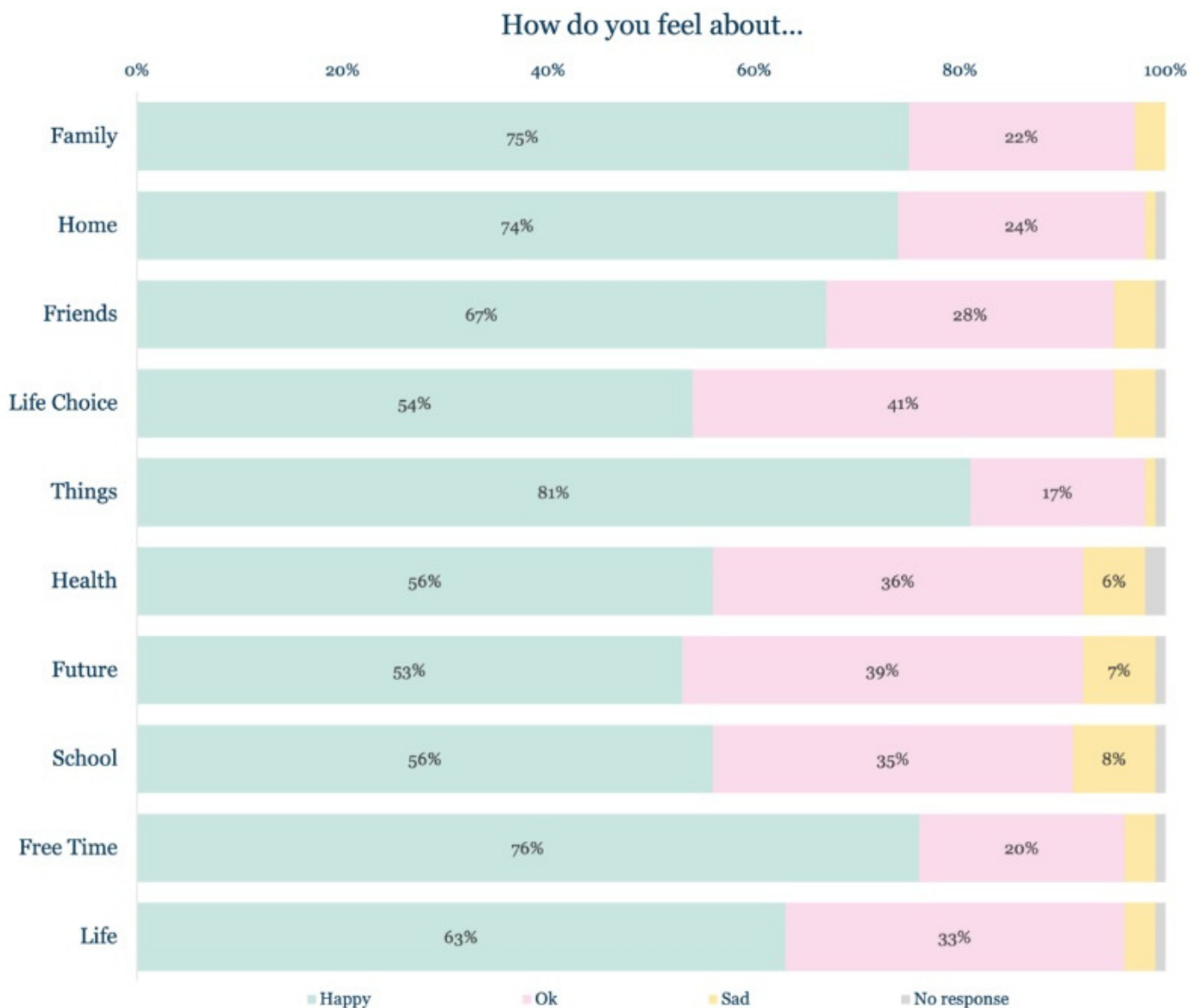
Non-mainstream school findings

Young people in non-mainstream schools were able to complete a short version of the survey. A symbol-based version of the survey is also available for young people with severe or profound and multiple learning disabilities.

You can access a summary of the findings here :

- [Short survey summary](#)
- [Symbol survey summary](#)

The following graph provides a summary of the data for the 279 pupils who completed the #Beewell Symbol Survey. 76% of young people who completed the survey are happy about their free time and 81% reported feeling happy about the things they have.



Contact us

We look forward to working with schools, partners and young people to interpret and act on the findings.



LISTEN



ACT



CELEBRATE

If you require further support in relation to the headline findings, the dashboard or require specific data to support your work, please get in touch with the HIPS #BeeWell Project Team.



hiow.beewell@hants.gov.uk



Background to #BeeWell

#BeeWell is a collaboration between The University of Manchester, The Gregson Family Foundation and Anna Freud, who, together with the Greater Manchester Combined Authority, launched the programme in 2019. Building on the success of #BeeWell in Greater Manchester, the programme expanded into Hampshire, Isle of Wight, Portsmouth and Southampton (HIPS) in 2023.

#BeeWell believes that young people's wellbeing is as important as their academic attainment. Using a co-designed survey, we listen to the voices of as many young people as possible, publish the results privately to schools and publicly by neighbourhood, and drive action across society to improve young people's wellbeing. #BeeWell's mission is to see this approach implemented nationally by 2030.

Co-created survey

The #BeeWell survey has been tailored to reflect what is important to young people in HIPS. We listened to the voices of over 200 young people in workshops in 15 pathfinder schools to understand what wellbeing means to them, what factors influence their wellbeing and what makes them thrive. These workshops were combined with inputs from a Questionnaire Advisory Group of mental health⁶ professionals, healthcare representatives, education experts, teachers, local authorities, and voluntary sector representatives amongst others, to inform the themes covered in the survey. In parallel, we considered the priorities of professionals working to support young people in the HIPS system (e.g., public health).

School participation

The #BeeWell team signed up 87% of HIPS mainstream secondary schools in summer 2023, as well as special schools, pupil referral units and alternative provision sites, and independent schools. The first wave of the survey was completed by Year 8 and Year 10 pupils in autumn 2023 in 103 schools, with more than 22,000 young people taking part. This represents 53% of all young people in those year groups in HIPS.