



Norfolk
County Council
Public Health

Norfolk Flourish Survey 2024 – Mental health

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Please note that this report includes analysis of questions concerning self-harm.

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Norfolk Overview – 2024 data

Proportions average across **Year 4 to Year 13** pupils (pupils aged 8 to 18) unless stated otherwise



Wellbeing



Around **4 in 10** report low mental wellbeing

Just over **1 in 10** report high mental wellbeing

Over **4 in 10** report never liking to talk about their feelings

Female pupils are more likely to report low mental wellbeing than male pupils

Between 2017 and 2024 the proportion of pupils reporting low mental wellbeing increased in **Year 6 and Year 8**, but not **Year 10 and Year 12/13**

Among Year 12/13 pupils...

Just under **3 in 10** report missing school due to their mental health in the 12 months before the survey

Among pupils reporting low mental wellbeing...

Almost **6 in 10** report never liking to talk about their feelings



Worries



Schoolwork problems, exams and tests and/or the way a pupil looks are the most common things pupils worry about quite a lot or a lot

Among Year 11 pupils...

Almost **2 in 3** report worrying quite a lot or a lot about schoolwork problems, exams and tests

Among Year 8 to Year 13 pupils...

Just over **2 in 10** report sometimes, usually or always cutting or hurting themselves when worried or stressed

Among Year 6 to Year 13 pupils...

Over **half** report that feeling worried, sad or upset does not or usually does not stop them doing or enjoying things

Among pupils identifying as having SEND...

Almost **half** report worrying quite a lot or a lot about their mental health

Sleep



Almost **1 in 4** report that they never sleep well

Using a phone or tablet is the most common reason for not immediately going to sleep at bedtime on the night before the survey

Over **3 in 20** report that they normally do not get enough sleep to stay alert and concentrate on schoolwork



Issues

Risk-taking behaviours...

Pupils reporting low mental wellbeing are more likely to report (than pupils reporting average or high mental wellbeing):

Smoking at least once

Vaping at least once

Drinking alcohol at least once a month

Taking illegal drugs at least once

Home and social life...

Pupils reporting low mental wellbeing are more likely to report (than pupils reporting average or high mental wellbeing):

Violence between adults in the home in the month before the survey

Not having a trusted adult to talk to when worried or upset

Never finding it easy to make friends

Being bullied a lot in the 12 months before the survey

Concern about a family member's alcohol and/or drug use at some point

Statements relate to **Year 8 to Year 13** pupils (pupils aged 12 to 18)...

Infographic text description

Proportions average across Year 4 to Year 13 pupils (pupils aged 8 to 18) unless stated otherwise

Wellbeing

- Around 4 in 10 report low mental wellbeing
- Just over 1 in 10 report high mental wellbeing
- Over 4 in 10 report never liking to talk about their feelings
- Female pupils are more likely to report low mental wellbeing than male pupils
- Among Year 12/13 pupils...
 - Just under 3 in 10 report missing school due to their mental health in the 12 months before the survey
- Between 2017 and 2024 the proportion of pupils reporting low mental wellbeing increased in Year 6 and Year 8, but not Year 10 and Year 12/13
- Among pupils reporting low mental wellbeing...
 - Almost 6 in 10 report never liking to talk about their feelings

Worries

- Schoolwork problems, exams and tests and/or the way a pupil looks are the most common things pupils worry about quite a lot or a lot
- Among Year 11 pupils...
 - Almost 2 in 3 report worrying quite a lot or a lot about schoolwork problems, exams and tests
- Among Year 6 to Year 13 pupils...
 - Over half report that feeling worried, sad or upset does not or usually does not stop them doing or enjoy things
- Among Year 8 to Year 13 pupils...
 - Just over 2 in 10 report sometimes, usually or always cutting or hurting themselves when worried or stressed
- Among pupils identifying as having SEND...
 - Almost half report worrying quite a lot or a lot about their mental health

Sleep

- Almost 1 in 4 report that they never sleep well
- Using a phone or tablet is the most common reason for not immediately going to sleep at bedtime on the night before the survey
- Over 3 in 20 report that they normally do not get enough sleep to stay alert and concentrate on schoolwork

Issues

Statements relate to Year 8 to Year 13 pupils (pupils aged 12 to 18)...

Risk-taking behaviours...

- Pupils reporting low mental wellbeing are more likely to report (than pupils reporting average or high mental wellbeing):
 - Smoking at least once
 - Vaping at least once
 - Drinking alcohol at least once a month
 - Taking illegal drugs at least once

Home and social life...

- Pupils reporting low mental wellbeing are more likely to report (than pupils reporting average or high mental wellbeing):
 - Violence between adults in the home in the month before the survey
 - Not having a trusted adult to talk to when worried or upset
 - Never finding it easy to make friends
 - Being bullied a lot in the 12 months before the survey
 - Concern about a family member's alcohol and/or drug use at some point

The Survey

The results from the Flourish Survey begin to be reported on page 11; below, we first provide context to help interpret the results by discussing key details about the sample and analysis. This includes the sample's representativeness, variations in analysis by year group and how confidence intervals allow us to assess which differences in the results are likely to be real. Additionally, Appendix 1 provides further detail on the representativeness of the sample and Appendix 2 explains how year groups map to the age of pupils.

The sample

The analysis is based on a survey which in 2024 sampled 9,347 school pupils in Norfolk from 28 primary schools and 17 secondary schools/further education colleges.¹ The sample represents 12.3% of pupils in state-funded schools in eligible year groups (Year 4 to Year 13, equivalent to pupils aged 8 to 18). Three of the schools in the sample were independent schools. The survey was conducted by the School Health Education Unit (SHEU) which has run similar surveys in other parts of the country for many years. Where the similarity of question wording allows it, we have combined the 2024 data with that from previous Norfolk surveys conducted in 2015 and 2017.

While SHEU has found that results from its surveys are generally broadly consistent with those from other data sources, it is important to note that the dataset is not a truly random sample of pupils. Instead, schools self-select to take part in the survey. As such, while the analysis below results from a large Norfolk sample and offers unique insights into the lives of Norfolk pupils, the results may differ from a survey that had a truly random sample of Norfolk pupils.

A separate topic report provides a detailed comparison of the Flourish Survey sample with the known characteristics of pupils in state-funded schools in Norfolk. A number of key points result from this comparison. First, we do not break out the data by individual district as the data is unevenly distributed across districts, in particular, only primary schools took part in the Borough of Great Yarmouth. Second, the geographic distribution of the data and information on the prevalence of pupils receiving free school meals suggests that pupils from deprived backgrounds may be under-represented in the Flourish Survey sample. Third, between 2015, 2017 and 2024 the age distribution of the

¹ Two private schools served both primary and secondary pupils so 43 schools took part in total.

sample varied noticeably, hence, when making comparisons between these three years we control for age by performing the comparison for individual year groups.

Questions and year groups

The questionnaire for secondary pupils was more detailed than the questionnaire for primary pupils, particularly around alcohol, drugs, smoking/vaping and sexual health. In this report, care needs to be taken to understand the year groups on which statistics and figures are based.² Pupils receiving the questionnaire for primary pupils and those receiving the questionnaire for secondary pupils were shown different mental health questions suited to the different age groups being sampled. The questionnaire for secondary pupils allows construction of the Warwick-Edinburgh Wellbeing Scale (WEMWBS) which is widely used and has been academically validated for pupils aged 13-16 and older groups. The questionnaire for primary pupils includes questions allowing construction of the Stirling Children's Wellbeing Scale (SCWBS) which is designed to assess wellbeing in children as young as 8. The year groups on which analysis is based are clearly indicated in the figure captions and text in each section.

All the percentages and figures in this report are based on the data available for the relevant survey questions. Not all pupils responded to all questions. As such, the number of responses on which percentages and figures are calculated varies within and across topics.

As mentioned above, we make year to year comparisons by looking at data for individual year groups. For brevity, we do not compare all year groups, but in keeping with the other topic reports, make comparisons for Year 6, Year 8, Year 10 and Year 12/13.³ Year 6 and Year 12/13 have been chosen for comparison as they are, respectively, generally the youngest and oldest year groups with data available across multiple years. Year 8 was chosen as in Year 7 not all pupils saw the same questionnaire and Year 10 was chosen as in the sample it contains a greater number of observations than Year 11.

As is standard, the survey was anonymous to ensure that pupils felt able to be honest in their responses. While this means it is not possible to contact pupils revealing issues of

² Most Year 7 pupils were asked to respond to the questionnaire for primary pupils rather than the questionnaire for secondary pupils due to the more sensitive nature of some of the questions in the questionnaire for secondary pupils. As such, the secondary year groups for which the data aims to be representative are Year 8 to Year 13.

³ Depending on the variable considered, data may not be available for a Year 6 comparison.

concern, the survey did contain multiple phone numbers and web addresses of organisations that pupils could contact to obtain topic specific support. Also, schools were guided to perform the survey during lesson time so that support was available if a pupil wished to obtain it.

In terms of results related to aspects of mental wellbeing and mental health that refer to social interactions, the reader should also consult the relevant sections of the topic report on family, friends and bullying. The topic report on family, friends and bullying provides a full discussion of results relating to pupils (lacking) access to a trusted adult to speak to when worried or upset and the ease (or not) of making friends. It also provides some discussion of whether sampled pupils feel loved, can rely on their parents and/or have difficulty trusting other people.

Comparisons with wider SHEU data

Alongside the data from the Norfolk sample, some data is available for equivalent surveys conducted by SHEU in other parts of the country in 2022. In most of the other topic reports we provide comparisons between the data for Norfolk and the data obtained by SHEU from areas where it was contracted to conduct the survey. However, in this topic report, these comparisons are not performed as the aggregate data provided by SHEU does not provide a close enough match of wording and/or response categories to enable direct comparisons.⁴

Assessing differences

Any differences we highlight in the text below are statistically significant at the 5% level. In the charts, the black lines extending from the end of bars are (95%) confidence intervals. The smaller the confidence interval the greater the certainty we have about the true length of the bar/percentage. If the confidence intervals of two categories/groups do not overlap, we know that the difference between the categories is statistically significant, i.e. is likely to be real. If the confidence intervals of two different categories/groups overlap, further analysis would be required to determine if any difference is statistically significant (likely to be real).

⁴ In the aggregate SHEU data a slightly different 'cut point' is used to identify 'low mental wellbeing' than is established in the academic literature; in this report we use the cut point identified in the academic literature. As the aggregate SHEU data is only available for Year 8, Year 10 and Year 12 a comparator for the SCWBS in primary year groups is unavailable.

Identifying Mental Wellbeing

Aggregate indicators

The Flourish survey contains a large number of questions and statements relating to different aspects of mental health. To obtain an overall indicator of pupils' mental wellbeing the survey includes blocks of questions to obtain academically validated wellbeing indicators. As already discussed, Year 4 to Year 7 pupils (pupils aged 8 to 12) were shown statements which allow their wellbeing to be assessed using the Stirling Children's Wellbeing Scale (SCWBS)⁵ and Year 8 to Year 13 pupils (pupils aged 12 to 18) were shown statements allowing the Warwick-Edinburgh Wellbeing Scale (WEMWBS) to be obtained. This report begins by analysing patterns in these aggregate indicators before looking at specific topics. A more detailed description of the methodology for these indicators and the statements used to generate them is provided in the sample description and methodology topic report.

While the SCWBS and WEMWBS have been academically validated, it is important to remember that they are indicators. First, the experiences of those reporting low mental wellbeing are likely to vary; second, like all indicators there will probably be errors of inclusion and exclusion in terms of pupils who are experiencing difficulties; and third, the values of the indicators have most meaning when making comparisons between different groups of pupils.

Stirling Children's Wellbeing Scale (SCWBS)

The SCWBS is based on 15 statements with pupils asked to assess the frequency with which they have experienced each statement in the couple of weeks before the survey according to a five-point scale. The responses result in an indicator that has a minimum score of 12 and a maximum score of 60, with a higher score indicating greater mental wellbeing.

Looking across sampled Year 4 to Year 7 pupils the average (mean) SCWBS value is 41.3. The average SCWBS value is stable across sampled Year 4 to Year 6 pupils, but

⁵ When we refer to SCWBS results for Year 7 pupils these results are based solely on the data for the majority Year 7 pupils who answered the questionnaire for primary pupils.

is lower in sampled Year 7 pupils. The average SCWBS value in Year 7 is 39.6 compared to 42.6 in Year 6.

Looking over time, the average SCWBS score declined between 2017 and 2024 for both Year 5 and Year 6 pupils. For example, in Year 6 the average SCWBS value dropped from 46.3 to 42.6 between these two dates.⁶

Warwick-Edinburgh Wellbeing Scale (WEMWBS)

While based on different statements, the WEMWBS is constructed in a similar way to SCWBS; the WEMWBS is based on 14 statements with pupils being asked to assess how frequently they have experienced them over the two weeks prior to the survey according to a five-point scale. The WEMWBS has a minimum score of 14 and a maximum score of 70, with a higher score indicating greater mental wellbeing. While the WEMWBS has been shown to correlate with mental health issues, it is not designed to be used for diagnostic or screening purposes.

Looking across sampled Year 8 to Year 13 pupils, the average (mean) WEMWBS value is 43.6. This WEMWBS value is broadly stable when looking at individual year groups from Year 8 to Year 12/13.⁷

Looking over time, there is a decline in the average WEMWBS value among sampled Year 8 and Year 10 pupils between 2017 and 2024. The drop is noticeably larger in Year 8 than in Year 10; between 2017 and 2024 the Year 8 WEMWBS value falls from 48.2 to 43.3 whereas the Year 10 WEMWBS value only falls from 44.7 to 43.1. In Year 12/13, the average WEMWBS value is stable between 2017 and 2024, although, this stability is mainly because in 2017 the WEMWBS value for sampled pupils in Year 12/13 (43.5) is lower than the values in Year 8 and Year 10.

Low Mental Wellbeing

While the average SCWBS and WEMWBS scores are informative, a more concrete issue to analyse is pupils that appear to be suffering from low mental wellbeing. The

⁶ A comparison over time for Year 4 is not available due to the low number of these pupils in the sample in 2015 and 2017. A comparison over time for Year 7 is not performed as Year 7 pupils in 2015 and 2017 were shown the questionnaire for secondary pupils.

⁷ When breaking out the data by year group the oldest category is 'Year 12/13' as the questionnaire combined year groups for Year 12 upwards and the sample included 18-year olds.

academic literature states that low mental wellbeing is indicated by a WEMWBS value of 42 or lower.⁸ Given that the average WEMWBS value in the 2024 Flourish survey is only slightly above this threshold, it is worth noting that the threshold was set in 2007 and the distribution of WEMWBS values at a national level may have changed since then.

In statistical terms, the experts who developed WEMWBS selected its low mental wellbeing threshold as being one standard deviation below the average (mean) WEMWBS value in their original study. We apply the same statistical definition to identify low mental wellbeing according to the SCWBS giving a low mental wellbeing threshold score for the SCWBS of 37.⁹

Looking across Year 4 to Year 13, i.e. combining the data for the WEMWBS and SCWBS indicators, 39.9% of pupils report answers that indicate low mental wellbeing. However, a noticeably higher proportion of secondary pupils are identified as having low mental wellbeing than primary pupils. For example, 26.7% of sampled Year 6 pupils are identified having low mental wellbeing, while 45.8% of Year 8 pupils are identified as having low mental wellbeing. As discussed in the sample description and methodology topic report, the extent to which this difference is due to differences in the actual wellbeing of primary and secondary pupils or due to the different wellbeing scales (SCWBS vs WEMWBS) being used by primary and secondary pupils is unclear.

In the other topic reports when we split out results between pupils reporting low mental wellbeing and pupils reporting average or high mental wellbeing, where relevant, we combine the data from primary and secondary year groups. As a robustness check, we have repeated all examples of this breakdown in the other topic reports using data only from Year 8 to Year 13 pupils (so all observations use the WEMWBS) and in only one case does this restriction change the qualitative finding.¹⁰

⁸ See [Collect, score, analyse and interpret WEMWBS](#)

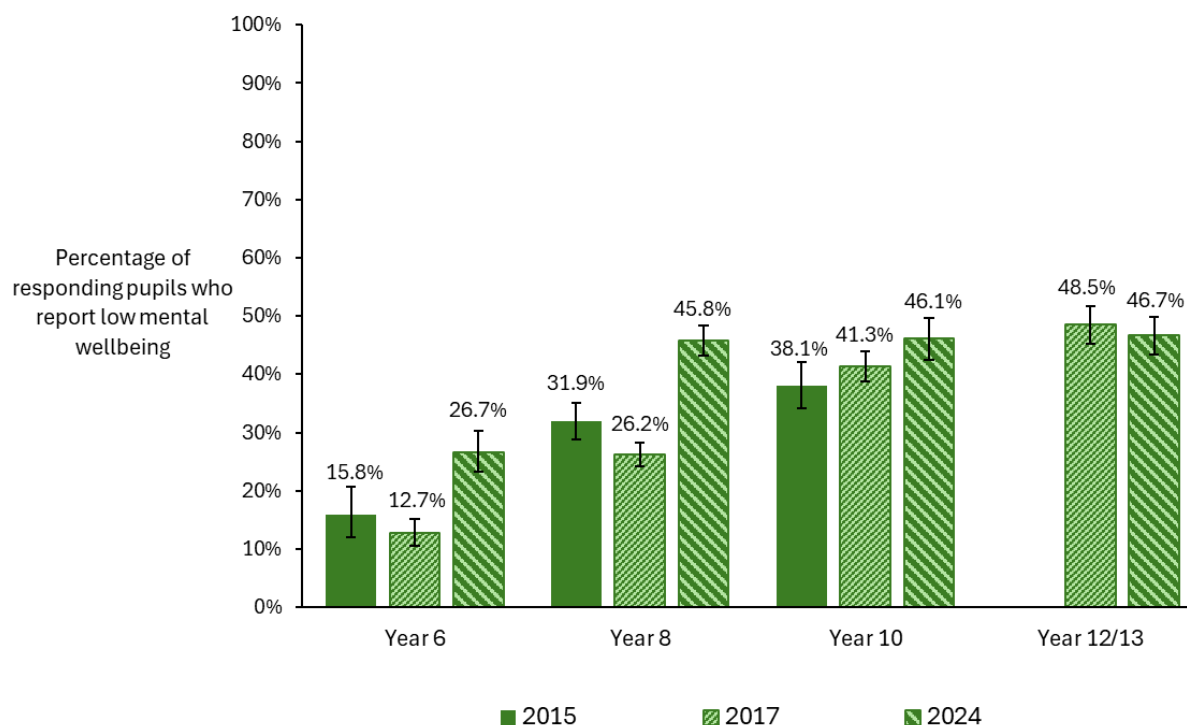
⁹ See [scwbs children report.pdf](#) Again the threshold was set using data from the original study establishing the SCWBS.

¹⁰ In this one case, the original finding was that there was no statistical difference in the proportion of pupils reporting eating takeaways or fast food at least three times a week in at least one of five specified situations between pupils reporting low mental wellbeing and pupils reporting average or high mental wellbeing. When restricting the data to Year 8 to Year 13 pupils, pupils reporting low mental wellbeing are more likely to report this high level of takeaway and fast food consumption than pupils reporting average or high mental wellbeing.

Changes over time

Figure 1 shows that how the proportion of pupils reporting low mental wellbeing changes over time varies considerably depending on the year group considered: Year 6 and Year 8 show large increases between 2017 and 2024, while there is stability between these two dates for Year 10 and Year 12/13 (any differences are not statistically significant). Between 2017 and 2024 the proportion of sampled Year 6 pupils reporting low mental wellbeing increased from 12.7% to 26.7%, while in Year 8 the increase is even larger, from 26.2% in 2017 to 45.8% in 2024. These variations by year group in the proportion reporting low mental wellbeing are consistent with the changes in the average SCWBS and WEMWBS values between 2017 and 2024 reported above.¹¹

Figure 1: Percentage of sampled pupils reporting low mental wellbeing by year group - 2015, 2017 and 2024 (Year 6, Year 8, Year 10 and Year 12/13 data separately)



¹¹ That relatively small decreases in the average values of these indicators for Year 6 and Year 8 can lead to large changes in the proportion of these pupils reporting low mental wellbeing is entirely feasible, it simply implies that the underlying data is distributed in a particular way.

Comparisons with other areas

As has already been noted, SHEU's comparator data for 2022 does not allow a direct comparison with the Norfolk data due to how the former is reported. The main challenge when comparing mental wellbeing in Norfolk and other parts of the country is that the national level wellbeing data for young people identified uses different wellbeing metrics thereby stopping a direct comparison of the results. However, where relevant, we do still provide information about the broad time trends observed in other datasets as context for the Norfolk findings.

The Children's Society¹² reports life satisfaction trends for 10-15 year olds from the Understanding Society dataset which covers the UK as a whole. Unlike the Flourish Survey, the Understanding Society survey aims to follow the same individuals over time. The Understanding Society data shows that between 2016-17 and 2021-22 (the most recent data) the happiness of 10-15-year olds with their life as a whole steadily declined.

The NHS Smoking, Drinking and Drug Use among Young People in England, 2023 survey¹³ (from now on NHS survey A) also includes a series of questions designed to assess wellbeing. Again, the wellbeing indicators in NHS Survey A are not directly comparable to the indicators in the Flourish Survey. Also, the NHS data only relates to 11-15-year olds. The general time trend shown in NHS Survey A is for the proportion of respondents reporting indicators suggesting low mental wellbeing to increase between 2018 and 2021 before falling back to levels relatively close to those in 2018 by 2023. The one exception to this pattern in NHS Survey A is that the proportion of respondents reporting that they had a high level of anxiety on the day before the survey remained at an elevated level in 2023 compared to 2018.

¹² See pg17-18, [Good Childhood Report-Main-Report.pdf](#)

¹³ See [Part 13: Wellbeing and loneliness - NHS England Digital](#)

Variations across groups – interpretation

In the following subsection, the aim is to understand how the proportion of pupils reporting low mental wellbeing varies across a range of groups. The characteristics used for the breakdown are the same in all the Flourish topic reports. In all instances, the identifiers are based on pupils self-reporting their status and so are likely to identify a slightly different group of children than if official designations were used. The characteristics used to split pupils are: identifying as having a Special Educational Need or Disability (SEND)¹⁴, receipt of free school meals¹⁵, different ethnicities¹⁶, identifying as a young carer¹⁷, gender identity¹⁸ and, apart from in Figure 2, low mental wellbeing. It is worth remembering that some pupils will fall into multiple groups, e.g. both identifying as a young carer and reporting receipt of free school meals.

When interpreting all figures in this report, it is important to remember that the analysis only shows correlations, i.e. how things differ across groups, it does not demonstrate that the difference is caused by being in a different group. For example, Figure 2 shows

¹⁴ 2,058 individuals in the 2024 sample identify as having SEND (since only 12% of pupils are sampled the number for Norfolk as a whole would be much higher). This number excludes those answering 'I don't want to say' and represents 22.3% of the sample (when considering Year 4 to Year 13 and excluding non-responses). The number of respondents identifying as having SEND is considerably higher in 2024 than in 2015 or 2017. This is probably linked to a change in question design whereby in 2024 respondents are identified as having SEND if they indicate that they experience at least one of six impairments/difficulties (those identifying as having a long-term illness are not included in the SEND indicator). For most questions in the survey, the number responding will be different as some pupils will choose not to respond.

¹⁵ 1,171 pupils in the 2024 sample report that they currently receive free school meals (since only 12% of pupils are sampled the number for Norfolk as a whole would be much higher). This number excludes those answering 'Don't know' or 'Don't want to say' and represents 15.4% of the sample (when considering Year 6 to Year 13 and excluding non-responses). In 2024 the free school meals indicator is only available for Year 6 and above. For most questions in the survey, the number responding will be different as some pupils will choose not to respond.

¹⁶ 986 individuals in the 2024 sample identify as not having a solely white ethnicity. This number excludes those answering 'Don't want to say' and represents 10.6% of the sample (when considering Year 4 to Year 13 and excluding non-responses). For most questions in the survey, the number responding will be different as some pupils will choose not to respond.

¹⁷ 625 individuals in the 2024 sample identify as young carers (since only 12% of pupils are sampled the number for Norfolk as a whole would be much higher). This number excludes those answering 'Don't want to say' or 'Not sure' and represents 6.8% of the sample (when considering Year 4 to Year 13 and excluding non-responses). For most questions in the survey, the number responding will be different as some pupils will choose not to respond.

¹⁸ 168 individuals in the 2024 sample describe their gender in another way beyond simply male or female (since only 12% of pupils are sampled the number for Norfolk as a whole would be much higher). This number excludes those answering 'I prefer not to say' and represents 1.9% of the sample (when considering Year 4 to Year 13 and excluding non-responses). Primary pupils as well as secondary pupils could identify as a gender other than male or female. The relevant question was framed as asking about gender identity and there was no separate question asking about sex at birth. For most questions in the survey, the number responding will be different as some pupils will choose not to respond.

those identifying as having SEND are more likely to report low mental wellbeing. However, we do not know whether: (i) identifying as having SEND leads to lower mental wellbeing, (ii) having lower mental wellbeing makes pupils more likely to self-identify as having SEND, or (iii) some other factor is driving the patterns in both mental wellbeing and the likelihood of having had a relationship at some point.

Linked to this, all figures in this report only report 'univariate' associations. In other words, they report how one characteristic (e.g. identifying as a young carer) is associated with one outcome variable (e.g. reporting low mental wellbeing). They do not control for any other characteristics, such as age. It is possible that the patterns shown in the figures could result from differences in other characteristics between two groups e.g. if those identifying as a young carer and those not identifying as a young carer differed in age. However, controlling robustly for all characteristics is much more involved than the present analysis allows with it requiring multivariate regression analysis.

Apart from in Figure 2, we continue to include the split by low mental wellbeing vs average or high mental wellbeing despite the outcome variables also relating to mental wellbeing for two reasons. First, the low mental wellbeing indicator is just that, an indicator, and so it is useful to recognise that specific issues will still be experienced by some pupils reporting average or high mental wellbeing. Second, it can also be useful to see when a specific issue is experienced by a particularly large proportion of those with low mental wellbeing.

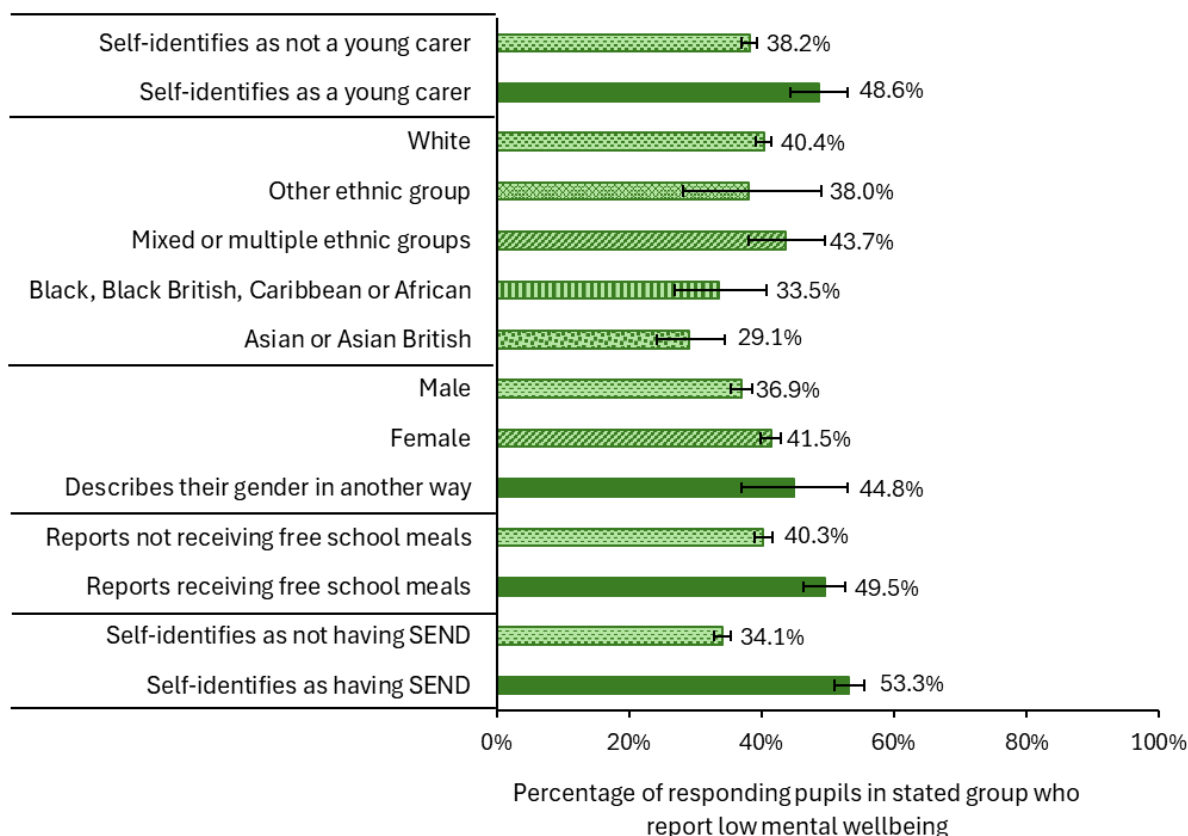
In Figure 2 the results should be read as follows. Each bar reports the percentage within the stated group that reports low mental wellbeing. For example, in Figure 2 53.3% of pupils identifying as having SEND report low mental wellbeing. Each characteristic described on the previous page is used to split the overall sample of Year 4 to Year 13 into mutually exclusive groups. For the indicator of receiving free school meals the split is only performed for Year 6 to Year 13 pupils as the relevant free school meals question was only asked to Year 6 to Year 13 pupils in the questionnaire.

As an example, in the case of those identifying as having SEND, there are two mutually exclusive groups: 'Self-identifies as having SEND' and 'Self-identifies as not having SEND'. The horizontal lines on the vertical axis separate the different cuts of the data, and the statements about statistical significance refer to comparisons between the groups between two of the horizontal lines, e.g. Self-identifies as having SEND vs Self-identifies as not having SEND.

Variations across groups – results

Figure 2 shows that among sampled Year 4 to Year 13 pupils those who identify as young carers and as having SEND are more likely to report low mental wellbeing than pupils without these characteristics. Among sampled Year 6 to Year 13 pupils, those who report receipt of free school meals are more likely to report low mental wellbeing than pupils who report not receiving free school meals. Also, Asian or Asian British pupils are less likely to report low mental wellbeing than White pupils. Last, perhaps the most interesting result, given that in the 2024 Flourish sample differences between genders are rarely identified, female pupils are more likely to report low mental wellbeing than male pupils (41.5% vs 36.9%).

Figure 2: Percentage of sampled pupils reporting low mental wellbeing by selected group - 2024 (Year 4 to Year 13 data combined, except for the free school meals comparison which uses Year 6 to Year 13 data)



While just over half of sampled pupils identifying as SEND, and almost half of those identifying as young carers and reporting receipt of free school meals, report low mental wellbeing, it is important to remember the context that across the sample overall

39.9% of Year 4 to Year 13 pupils report low mental wellbeing. Also, readers should note that one of statements leading to the 2024 SEND indicator is that pupils state that they have a mental health difficulty. As such, some of the correlation between the SEND indicator and mental wellbeing/health indicators observed is likely to be partly mechanical.

That female pupils are more likely to report low mental wellbeing than male pupils is a result mirrored in the alternative wellbeing measures reported by the Children's Society for children aged 10-15. The Children's Society's report shows that in 6 out of 8 years between 2014/15 and 2021/22 female respondents' happiness with life as a whole was lower than for males by a statistically significant margin, with the gap widening after 2018/19. The Children's Society's report also shows that in all years between 2009/10 and 2021/22 female respondents' happiness with their appearance was noticeably lower than for male respondents.

High mental wellbeing

In addition to looking at low mental wellbeing, it is possible to look at pupils reporting high mental wellbeing. We define high mental wellbeing in a similar way to low mental wellbeing by using the SCWBS and WEMWBS, albeit with the change that high mental wellbeing is defined as a pupil having a score at least one standard deviation above the average score for each indicator. Using this definition, 11.3% of sampled Year 4 to Year 6 pupils report high mental wellbeing.

Many of the results for high mental wellbeing are a mirror image of the results for low mental wellbeing. For example, while the percentage of sampled pupils reporting low mental wellbeing is noticeably higher among secondary pupils than primary pupils, the percentage of sampled secondary pupils reporting high mental wellbeing is lower than among sampled primary school pupils. 8.2% of sampled Year 8 pupils report high mental wellbeing compared to 20.4% of sampled Year 6 pupils.

Similarly, when looking over time, as with low mental wellbeing, the changes in high mental wellbeing are concentrated in younger year groups. For both sampled Year 6 and Year 8 pupils, the percentage of pupils reporting high mental wellbeing fell between 2017 and 2024. The percentage of sampled Year 6 pupils reporting high mental wellbeing dropped from 33.8% in 2017 to 20.4% in 2024, while the drop for Year 8 pupils was from 13.5% to 8.2%. Any changes for Year 10 and Year 12/13 pupils between 2017 and 2024 were not statistically significant.

Looking across different groups, not only are sampled Year 4 to Year 13 female pupils more likely to report low mental wellbeing compared to their male counterparts, female pupils are also less likely to report high mental wellbeing. 12.9% of sampled Year 4 to Year 13 males report high mental wellbeing compared to 10.2% of female pupils. Also, sampled Year 4 to Year 13 pupils who identify as having SEND are less likely to report high mental wellbeing than pupils who do not identify as having SEND (7.8% vs 12.8%). In terms of variations by ethnic group, both pupils identifying as Black, Black British, Caribbean or African and those identifying as Asian or Asian British are more likely to report high mental wellbeing than White pupils. For example, 22.2% of sampled Year 4 to Year 13 pupils who identify as Black, Black British, Caribbean or African report high mental wellbeing compared to only 10.5% of pupils who identify as White. Sampled pupils who identify as Black, Black British, Caribbean or African are also more likely to report high mental wellbeing than pupils who identify as Mixed or multiple ethnic groups.

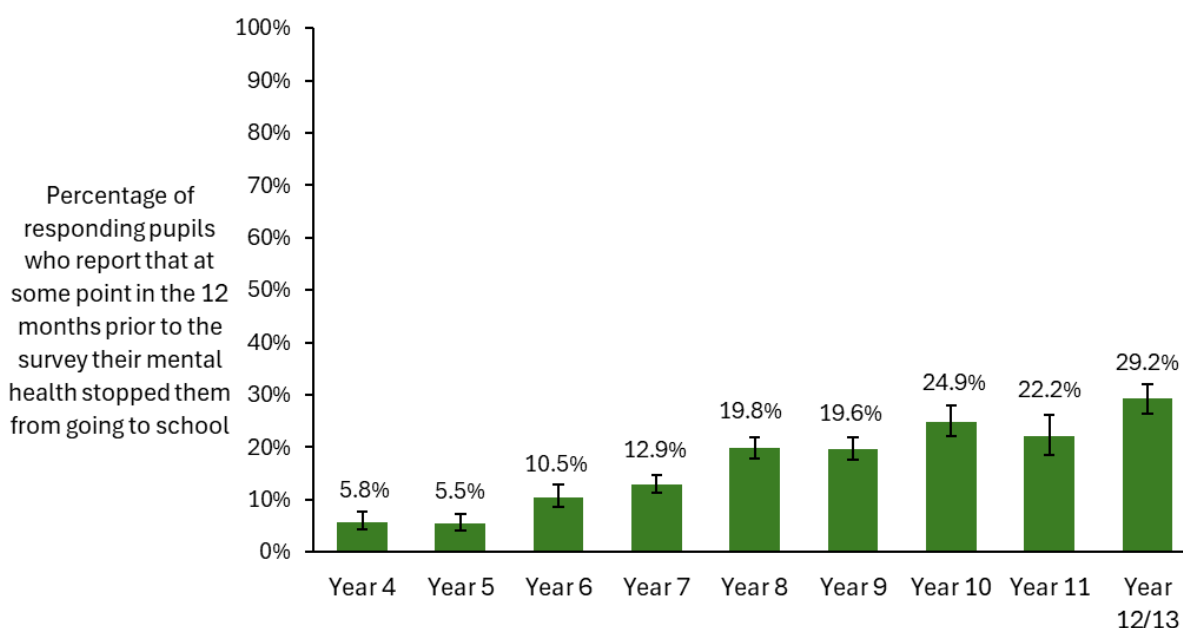
Impacts of poor mental wellbeing

School absences

The 2024 Flourish survey asks pupils whether a range of issues stopped them from going to school over the 12 months prior to the survey; one of the issues is “My mental health”. As 2024 is the first survey wave including this specific response option, comparisons over time are not possible.

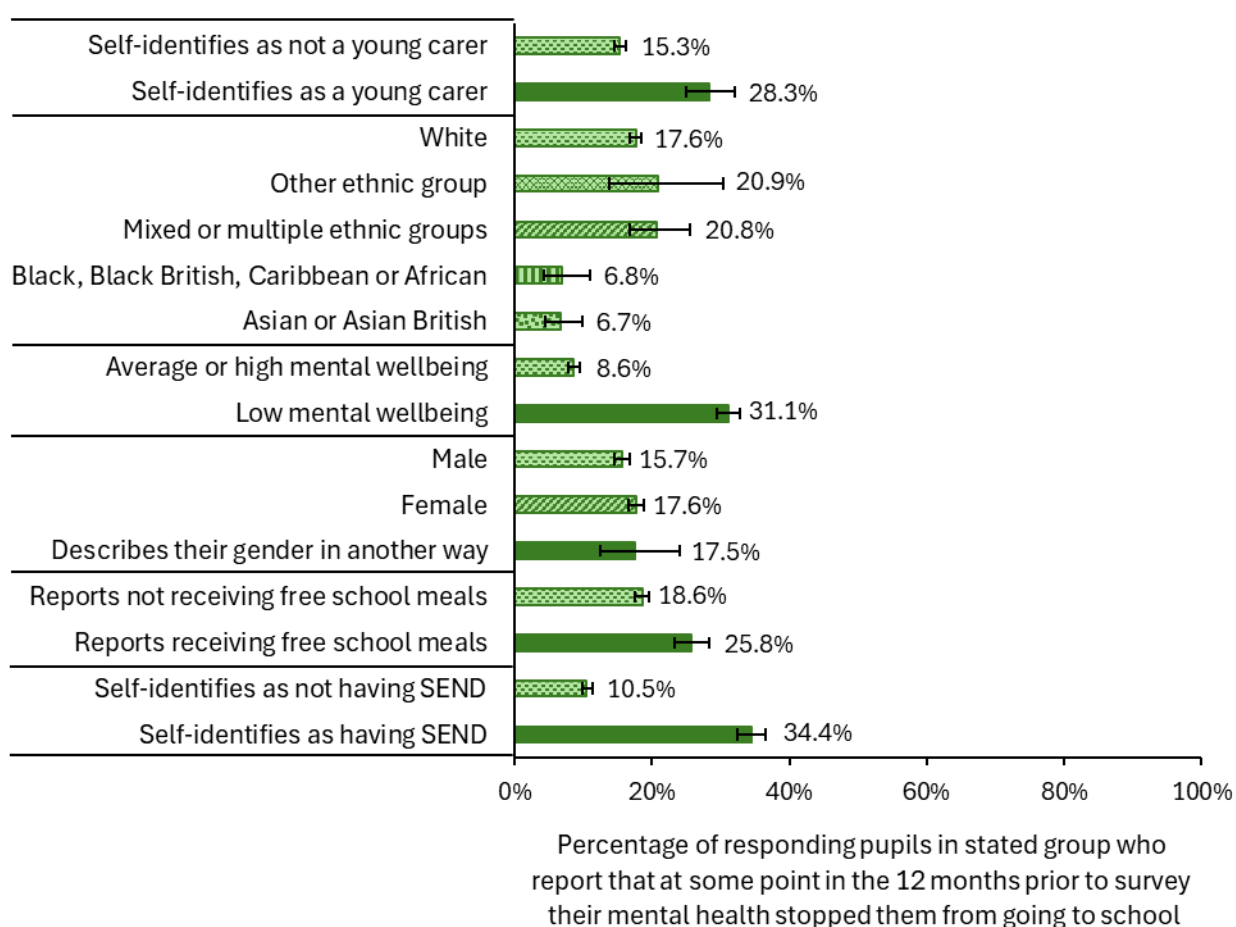
Overall, 16.9% of sampled Year 4 to Year 13 pupils report that in the 12 months prior to the survey their mental health stopped them from going to school at some point. Figure 3 shows that sampled pupils in older year groups are more likely to report that they missed school at some point in the 12 months prior to the survey due to their mental health. The proportion of pupils reporting this issue rises steadily from 5.5% in Year 5 to 19.8% in Year 8, before reaching 29.2% in Year 12/13.

Figure 3: Percentage of sampled pupils reporting that they missed school at some point in the 12 months prior to the survey due to their mental health by year group - 2024 (Year 4 to Year 12/13 data separately)



In Figure 4 one can see that among sampled Year 4 to Year 13 pupils those identifying as young carers, as having SEND and/or reporting low mental wellbeing are more likely to report missing school at some point in the 12 months prior to the survey due to their mental health than pupils not in these groups. Additionally, among sampled Year 6 to Year 13 pupils, those reporting receipt of free school meals are more likely to report missing school in the 12 months prior to the survey due to their mental health than those who report that they do not receive free school meals. The rate of reporting school absences due to mental health among sampled pupils identifying as having SEND appears particularly elevated with it being more than three times the rate among pupils who do not identify as having SEND (34.4% vs 10.5%).

Figure 4: Percentage of sampled pupils reporting that they have missed school at some point in the 12 months prior to the survey due to their mental health by selected group - 2024 (Year 4 to Year 13 data combined, except for the free school meals comparison which uses Year 6 to Year 13 data)



Also, Figure 4 shows that pupils identifying as Black, Black British, Caribbean or African or Asian or Asian British are much less likely to report missing school due to mental

health than White pupils. For example, only 6.8% of pupils identifying as Black, Black British, Caribbean or African report missing school at some point in the 12 months prior to the survey due to their mental health compared to 17.6% of pupils who identify as White.

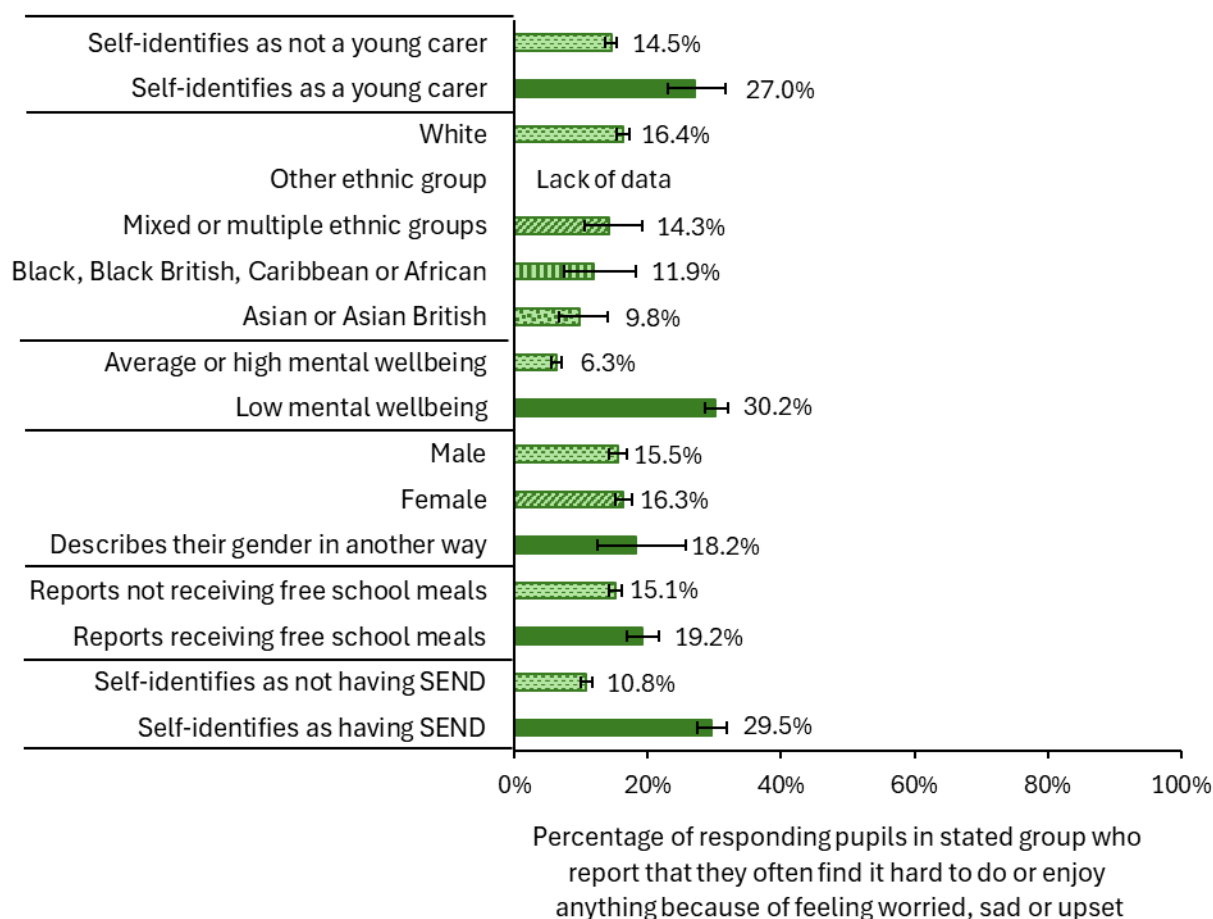
That the reported rate of missing school for mental health reasons in the 12 months prior to the survey among pupils reporting low mental wellbeing is more than three times the reported rate for pupils reporting average or high mental wellbeing is unsurprising as both are assessing the same broad underlying issue.

Impact on activities

The Flourish Survey included a specific question about the extent to which feeling worried, sad or upset affects the life of pupils. Overall, 16.1% of sampled Year 6 to Year 13 pupils report that feeling worried, sad or upset meant that they often found it hard to do or enjoy anything. This proportion is broadly stable across the different year groups. A further 29.9% of sampled Year 6 to Year 13 report that these feelings sometimes stop them from doing or enjoying things. However, 17.0% of Year 6 to Year 13 pupils report that feeling worried, sad or upset does not have any impact on their life and 37.1% report that they can usually deal with these feelings.

In Figure 5 one can see that sampled Year 6 to Year 13 pupils identifying as young carers, reporting low mental wellbeing, reporting receipt of free school meals and/or identifying as having SEND are more likely to report that feeling worried, sad or upset often makes it hard to do or enjoy anything than for pupils not falling into these groups. The difference for pupils identifying as having SEND relative to pupils who do not identify as SEND is particularly large: 29.5% vs 10.8%. In other words, just under a third of sampled pupils who identify as having SEND report that they often find it hard to do or enjoy anything due to their feelings. In contrast, Asian pupils are less likely to report often finding it hard to do or enjoy anything due to their feelings than White pupils (9.8% vs 16.4%).

Figure 5: Percentage of sampled pupils reporting that feeling worried, sad or upset often makes it hard to do or enjoy anything by selected group - 2024 (Year 6 to Year 13 data combined)¹⁹



¹⁹ 'Lack of data' indicates that the relevant statistic would be based on fewer than 10 observations. Due to this limited number of observations we do not report the statistic for anonymity and robustness reasons.

Reasons for worrying

Overview

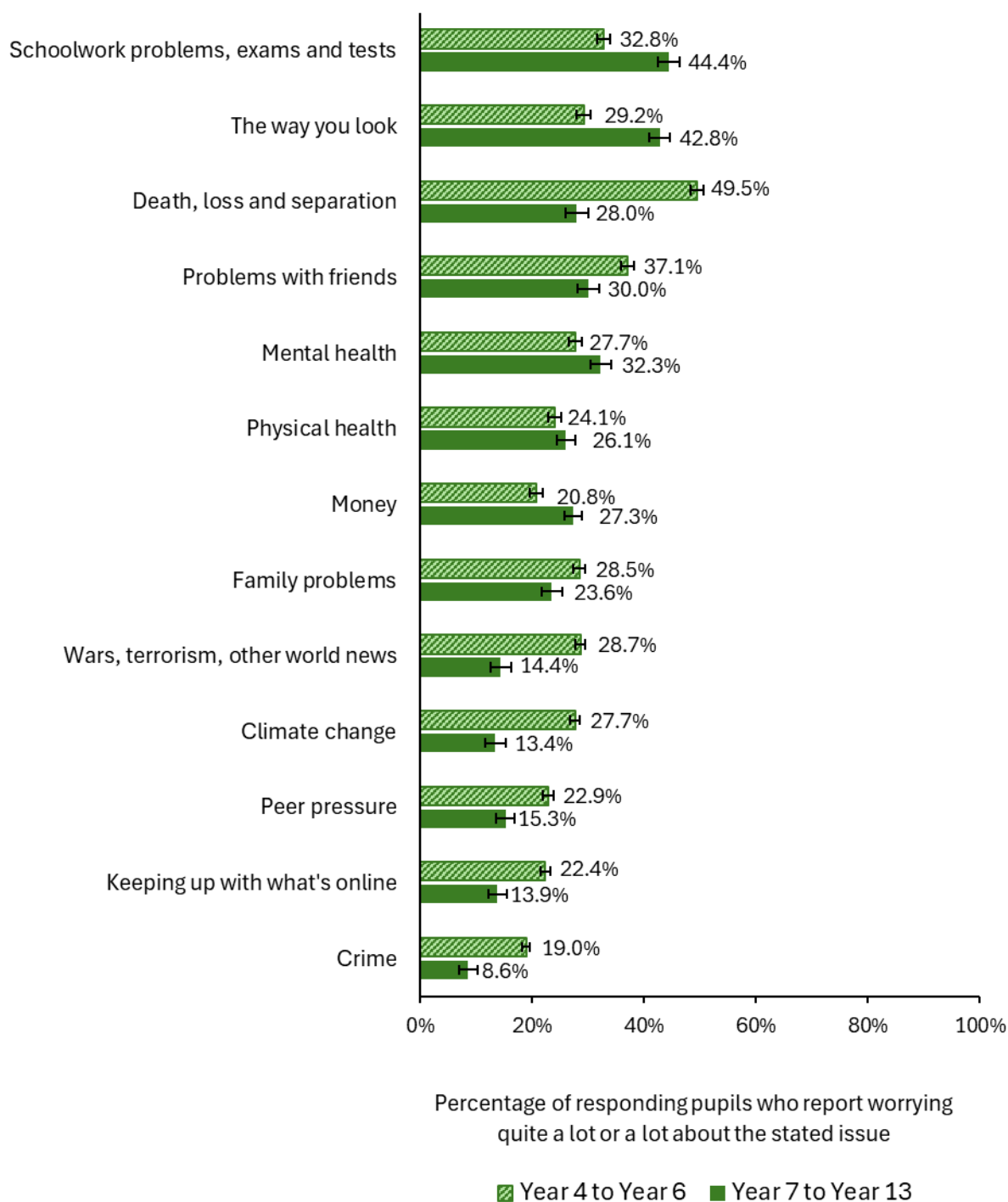
Figure 6 (on the next page) shows that the most common reported worries vary between sampled primary pupils (Year 4 to Year 6) and sampled secondary pupils (Year 7 to Year 13). Among sampled Year 4 to Year 6 pupils the most common issues that they worry quite a lot or a lot about are death, loss and separation (49.5%) and problems with friends (37.1%). In contrast, sampled Year 7 to Year 13 pupils are most likely to worry quite a lot or a lot about schoolwork problems, exams and tests (44.4%) and the way they look (42.8%). In addition to these two issues, the only other two types of worry that are more common among sampled secondary pupils than among sampled primary pupils are worries about mental health and money.

Also, the margin by which some worries are more common among sampled primary pupils appears notable. For example, while 49.5% of sampled Year 4 to Year 6 pupils report worrying quite a lot or a lot about death, loss and separation only 28.0% of sampled Year 7 to Year 13 pupils worry quite a lot or a lot about this topic. Similarly, the proportions of Year 4 to Year 6 pupils worrying quite a lot or a lot about wars, terrorism and world news, climate change and/or crime are around double those for Year 7 to Year 13 pupils.

Figure 6 only reports results for those worries that feature in both the questionnaire for primary pupils and the questionnaire for secondary pupils. In terms of worries only featured in the questionnaire for secondary pupils, 18.9% of sampled Year 8 to Year 13 pupils report worrying quite a lot or a lot about relationships with boyfriends/girlfriends²⁰, 7.5% report the same about becoming a parent before they are ready, 4.3% state that they worry quite a lot or a lot about drugs and 3.5% report worrying quite a lot or a lot about gambling.

²⁰ Any difference in the proportion of pupils reporting worrying quite a lot or a lot about relationships with boyfriends/girlfriends across genders is not statistically significant.

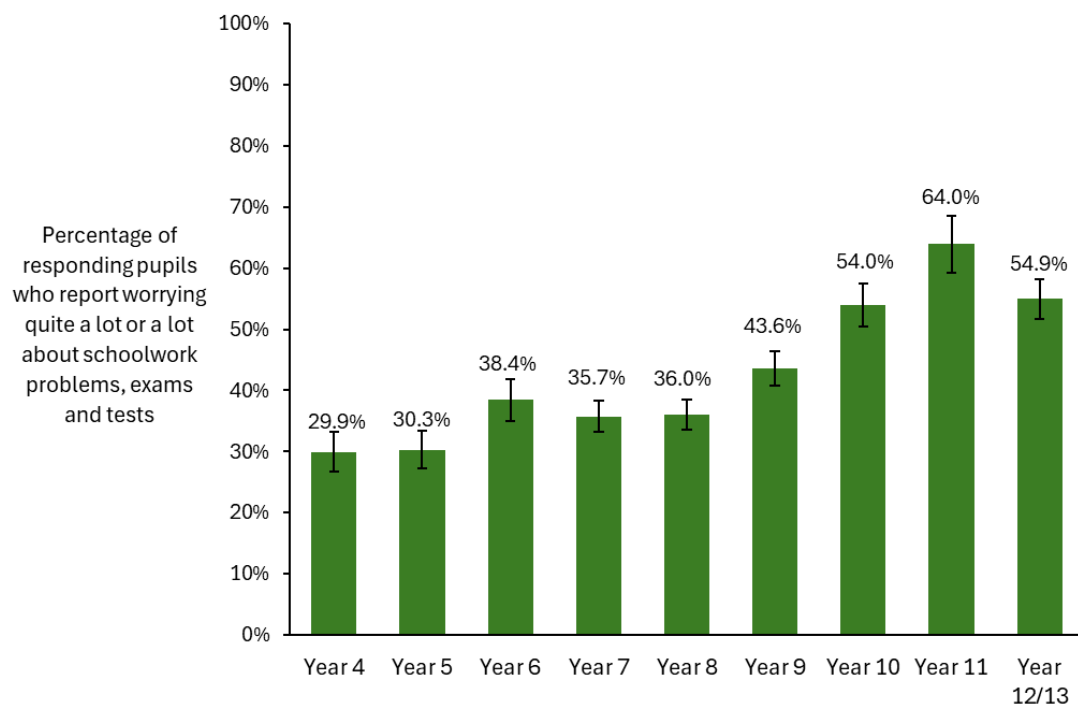
Figure 6: Percentage of sampled pupils reporting that they worry quite a lot or a lot about different issues - 2024 (Year 4 to Year 6 data combined and, separately, Year 7 to Year 13 data combined)



Worries about schoolwork

Figure 7 shows that the prevalence of worries about schoolwork, exams and tests rise steadily from Year 8, where 36.0% of sampled pupils report worrying quite a lot or a lot about schoolwork problems, exams and tests to a peak of 64.0% in Year 11. In other words, almost two-thirds of sampled Year 11 pupils report worrying quite a lot or a lot about school-work problems and exams. That schoolwork and exam worries reach a peak in Year 11 is unsurprising given that this is when pupils take their GCSEs. There is also an uptick in schoolwork worries between Year 5 and Year 6 (30.3% vs 38.4%) which one presumes is related to Year 6 pupils sitting Key Stage 2 (SATs) tests.

Figure 7: Percentage of sampled pupils reporting that they worry quite a lot or a lot about schoolwork problems, exams and tests by year group - 2024 (Year 4 to Year 12/13 data separately)



Looking at individual year groups over time, for each of Year 8 through to Year 12/13 there are no changes in the proportion of sampled pupils reporting that they worry quite a lot or a lot about schoolwork problems, exams and tests between 2015, 2017 and 2024. However, there are substantial increases in the proportion of sampled pupils in Year 6 and Year 7 reporting these types of worries between 2017 and 2024. In particular, the proportion of Year 6 pupils reporting that they worry quite a lot or a lot about schoolwork problems, exams and tests increases from 18.4% in 2017 to 38.4% in

2024.²¹ Interestingly, while Year 7 shows a noticeable increase in schoolwork worries between 2017 and 2024 (24.5% vs 35.7%), the change between 2015 and 2024 is not large enough to be statistically significant. In 2015 30.4% of sampled Year 7 pupils reported that they worried quite a lot or a lot about schoolwork problems, exams and tests.

In terms of national data, a direct comparator of pupils' worries about schoolwork is not available. However, the Children's Society does report an indicator of 10-15-year old's happiness with schoolwork over time. This happiness with schoolwork score shows a continuous decline from 2015/16 to 2021/22.

Looking at the rates of schoolwork and exam worries across different groups, sampled Year 4 to Year 13 pupils who identify as young carers, report low mental wellbeing and/or self-identify as having SEND are more likely to report worrying quite a lot or a lot about schoolwork and exams than pupils not in these groups. It is noticeable that worries about schoolwork and exams extend beyond those reporting low mental wellbeing with 35.1% of sampled Year 4 to Year 13 pupils who report average or high mental wellbeing reporting worrying quite a lot or a lot about schoolwork and exams.

Additionally, sampled pupils who identify as female or who describe their gender in another way are more likely to report worrying quite a lot or a lot about schoolwork problems, exams and tests than pupils who identify as male. Similarly, pupils identifying as from Mixed or multiple ethnic groups are more likely to report worrying about quite a lot or a lot about schoolwork and exams than pupils identifying as White.²²

²¹ In 2015 and 2017 there is insufficient data to make a meaningful comparison over time for Year 4 and Year 5.

²² The confidence intervals for pupils identifying as Asian or Asian British and those identifying as from an Other ethnic group just overlap the confidence interval for pupils who identify as White by a very small amount. This means that it is probably the case that pupils identifying as Asian or Asian British and those identifying as from an Other ethnic group are more likely to report worrying quite a lot or a lot about school-work problems, exams and tests than pupils who identify as White, although to confirm this, a statistical test would need to be performed.

Mental health worries

Sampled pupils in secondary year groups (Year 7 to Year 13) are more likely to report worrying quite a lot or a lot about their mental health than pupils in primary year groups (Year 4 to Year 6); 32.3% of sampled secondary pupils report this issue compared to 27.7% of sampled primary pupils. However, the relationship between age and reporting worrying quite a lot or a lot about one's mental health is generally not steep enough for differences between individual year groups to be statistically significant.

As with many other indicators, the difference between 2017 and 2024 in the proportion of sampled pupils reporting that they worry quite a lot or a lot about their mental health in Year 12/13 is not statistically significant. However, in Year 8 there is an increase in the proportion of sampled pupils reporting that they worry quite a lot or a lot about their mental health from 20.4% in 2017 to 32.3% in 2024. Sampled Year 10 pupils are more likely to report that they worry quite a lot or a lot about their mental health in 2024 than in 2017, but the difference between 2015 and 2024 is not statistically significant.²³

Looking across different groups, sampled Year 4 to Year 13 pupils who identify as young carers, report low mental wellbeing and/or identify as having SEND, as well as sampled Year 6 to Year 13 pupils who report receipt of free school meals, are all more likely to report worrying quite a lot or a lot about their mental health than pupils not in these groups. The proportion of those who identify as young carers or as having SEND who report worrying quite a lot or a lot about their mental health appear particularly high, being 44.6% and 49.1% respectively. It is also interesting to note the distribution of these mental health worries according to the mental wellbeing indicator; 20.1% of sampled Year 4 to Year 13 pupils reporting average or high mental wellbeing also report worrying quite a lot or a lot about their mental health²⁴, while 52.0% of those reporting low mental wellbeing never or hardly ever or worry only a little about their mental health. This suggests that the reasons for pupils worrying about their mental health may be more complex than simply that they are experiencing low mental wellbeing according to the available indicators.

²³ A comparison over time for Year 6 is not performed as the relevant question was not asked to Year 6 pupils prior to 2024.

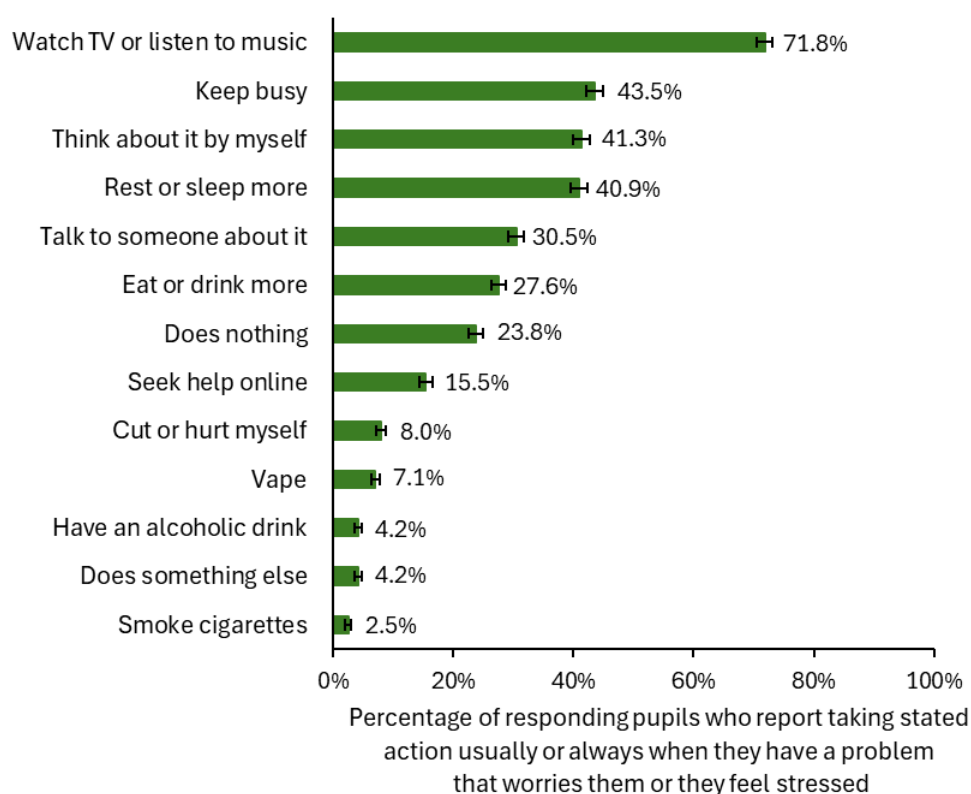
²⁴ It is not possible to know the reason for this group of pupils worrying about their mental health as the survey only asked about the frequency with which pupils experience this type of worry.

Responses to worry and stress

Overview

Questions on how pupils respond when they have a problem that worries them or they feel stressed were asked to pupils in Year 6 to Year 13. Since some of the questions were only asked in the questionnaire for secondary pupils and others had differences in wording between the questionnaires for primary and secondary pupils, in Figure 8 we only report results for sampled pupils from Year 8 to Year 13.

Figure 8: Percentage of sampled pupils reporting different responses that they usually or always do when a problem worries them or they feel stressed - 2024 (Year 8 to Year 13 data combined)



In Figure 8 by far the most common response to feeling worried or stressed among sampled Year 8 to Year 13 pupils is to watch TV or listen to music – 71.8% of these pupils report that they usually or always watch TV or listen to music as a response. The next most common responses, which just over 40% of sampled Year 8 to Year 13 pupils

report doing usually or always are: to keep busy, think about the problem by themselves and/or rest or sleep more. Just under a third of sampled Year 8 to Year 13 pupils (30.5%) report that they usually or always talk to someone when a problem worries them or they feel stressed, while almost a quarter (23.8%) report that they usually or always do nothing when worried or stressed.

Also, Figure 8 shows that in each case fewer than 10% of sampled Year 8 to Year 13 pupils report that they usually or always respond to problems that worry them or to feeling stressed by vaping, having an alcoholic drink or smoking. However, this result depends on the age of pupils being considered. For example, the topic report on drugs and alcohol notes that while only 6.8% of sampled Year 8 pupils respond to worries and stress by sometimes, usually or always drinking alcohol, this figure rises to 33.9% among sampled Year 12/13 pupils.

Self-harm

Of particular note in Figure 8 is that 8.0% of sampled Year 8 to Year 13 pupils report that they usually or always respond to problems that worry them or to feeling stressed by cutting or hurting themselves. More broadly, 21.8% of sampled Year 8 to Year 13 pupils report that they sometimes, usually or always cut or hurt themselves when a problem worries them or they feel stressed, leaving 78.2% who never self-harm in response to these particular feelings. The proportion of sampled pupils reporting that they sometimes, usually or always cut or hurt themselves when a problem worries them or they feel stressed is broadly stable across the individual year groups from Year 8 to Year 12/13. Also, no statistically significant variation by gender is found among sampled Year 8 to Year 13 pupils (see Figure 9).

The questionnaire for primary pupils simply asked pupils whether they hurt themselves and did not include the word 'cut' in the question. As a result, we discuss the data for Year 6 and the majority of Year 7 pupils separately to the data for older pupils. In 2024, 39.6% of sampled Year 6 pupils and 31.4% of Year 7 pupils shown the questionnaire for primary pupils report that they sometimes, usually or always hurt themselves when they have a problem that worries them or they feel stressed.

When taken together with the Year 8 to Year 13 data, the relationship between reporting self-harm and age does not follow the pattern commonly shown by the other mental wellbeing/mental health indicators in the Flourish survey. The other indicators of mental wellbeing generally suggest either low mental wellbeing/mental health increases in older year groups or is, at least, broadly stable across year groups. It is unclear whether the

removal of the word 'cut' from the question has a role in explaining why sampled Year 6 and Year 7 pupils report higher rates of self-harm when worried or stressed than older pupils.

A direct comparison for these self-harm results with national data is not possible. However, the England report of the World Health Organisation's (WHO) Health Behaviour in School-Aged Children study²⁵ states that in 2022 34% of 15-years old reported that they had deliberately hurt themselves in some way during their lifetime. This figure represents an increase on the 22% of 15 year-olds in 2014 and the 25% in 2018 that reported deliberately self-harming at some point over their lifetime. In terms of the frequency of self-harm, the WHO study indicates that among those 15-year olds that reported that they had deliberately self-harmed at some point, 33% reported harming themselves only once, while 25% reported harm themselves at least once a week.

In terms of younger children, the NHS Mental Health of Children and Young People in England, 2023 survey (now referred to as NHS Survey B) provides data on parent's reports of the self-harming behaviour of their children. Importantly, statistics based on parental reports are likely to be lower than figures obtained from children themselves as it is probable that at least some parents will not be aware of their children's behaviour. NHS Survey B states that in 2023 parental reports suggest that 1.6% of children aged 8 to 16 had tried to harm themselves in the 4 weeks before the survey. NHS Survey B also states that, based on parental reports, 9.4% of pupils had tried to self-harm at some point during their life.

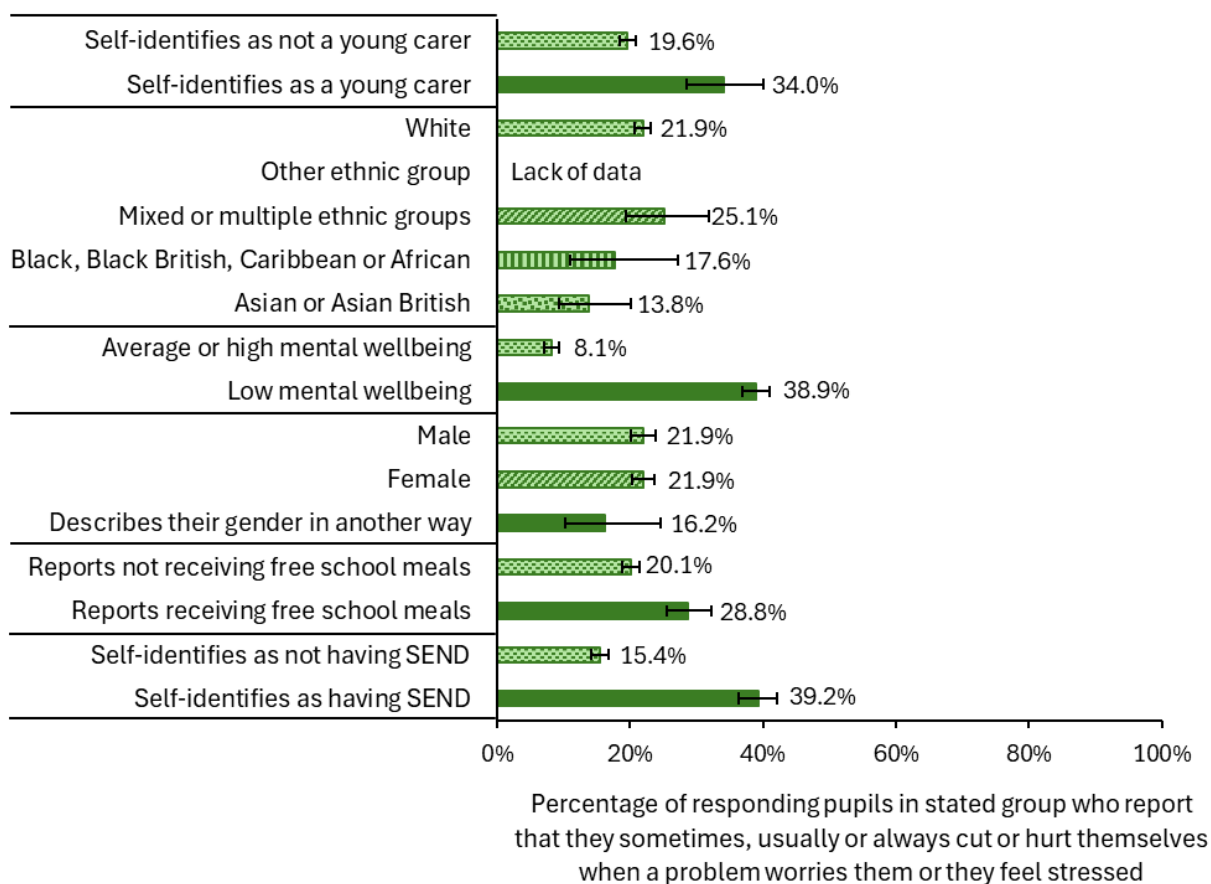
²⁵ See [2022 FULL REPORT final 02.12.24-2.pdf](#) Only 15-year olds in the study were asked the self-harm questions. The question emphasised that hurting yourself was a deliberate act and specifically referenced cutting or hitting yourself or taking an overdose.

Variations in reported rates of self-harm

Looking over time, between 2017 and 2024 the proportion of sampled Year 8 pupils reporting that they cut or hurt themselves when worried or stressed increased. In 2024 22.6% of sampled Year 8 pupils report that they sometimes, usually or always cut or hurt themselves when they have a problem that worries them or they feel stressed compared to 15.0% in 2017. However, any difference in the proportion of sampled Year 10 and Year 12/13 pupils who report that they sometimes, usually or always cut or hurt themselves when they have a problem that worries them or they feel stressed is not statistically significant. Comparisons over time for Year 6 and Year 7 pupils are not possible as the questionnaire for primary pupils did not contain the relevant question about self-harm in 2015 or 2017.

Looking across sampled Year 8 to Year 13 pupils, Figure 9 shows that pupils who identify as young carers, report receipt of free school meals, report low mental wellbeing and/or identify as having SEND are more likely to report that they sometimes, usually or always cut or hurt themselves when a problem worries them or they feel stressed than pupils not in these groups. For example, 39.2% of sampled Year 8 to Year 13 pupils who identify as having SEND and 34.0% of those who identify as a young carer report this response of self-harm. Indeed, among sampled Year 8 to Year 13 pupils who identify as having SEND the rate of pupils reporting that they cut or hurt themselves when a problem worries them or they feel stressed is more than double that among pupils who identify as not having SEND

Figure 9: Percentages of sampled pupils reporting that they sometimes, usually or always cut or hurt themselves when a problem worries them or they feel stressed by selected group - 2024 (data for Year 8 to Year 13 combined)



Additionally, it is potentially of note that 21.9% of both male and female pupils report cutting or hurting themselves when worried or stressed, while pupils identifying as Asian or Asian British are less likely to report this issue than pupils who identify as White.

As is always the case, these variations by group are only correlations, the current data does not enable one to conclude that being in one of the groups listed in Figure 9 is the actual cause of an observed difference in the reported rate of self-harm. Similarly, the differences observed might be due to other confounding factors which are not accounted for in Figure 9.

That Figure 9 shows no difference between males and females in the rate of reporting sometimes, usually or always cutting or hurting oneself when a problem worries a pupil or they feel stressed is in contrast with the findings of the WHO study. The WHO study found that in 2022 49% of 15-year old girls reported that they had deliberately harmed themselves at some point compared to only 20% of boys.

Sleep

A common symptom of stress or other mental health issues is difficulties with one's sleep. The Flourish Survey includes a number of questions about the quality of pupils' sleep and factors which might be disturbing it. These questions on sleep are only asked in the 2024 survey so year to year comparisons are not possible.

Overall, 17.1% of sampled Year 4 to Year 13 pupils report that they normally do not get enough sleep to enable them to stay alert and concentrate on their schoolwork, with a further 25.0% not knowing whether they agree or disagree with this statement. Similarly, 35.6% of sampled Year 4 to Year 13 pupils report that they do not normally get enough sleep to feel awake all day and another 23.0% did not know whether they agree or disagree with this second statement.

Given the potential impact on educational outcomes, we focus on the proportion of sampled pupils reporting that they normally do not get enough sleep to stay alert and concentrate on their schoolwork. Older pupils in secondary school are more likely to report this issue than younger pupils: sampled pupils in each year group from Year 9 to Year 12/13 report a higher rate of normally not getting enough sleep to concentrate on schoolwork than sampled pupils in each year group between Year 4 and Year 6. For example, 23.0% of sampled Year 10 pupils report not normally getting enough sleep to stay alert and concentrate on their schoolwork compared to only 12.8% of sampled Year 6 pupils.

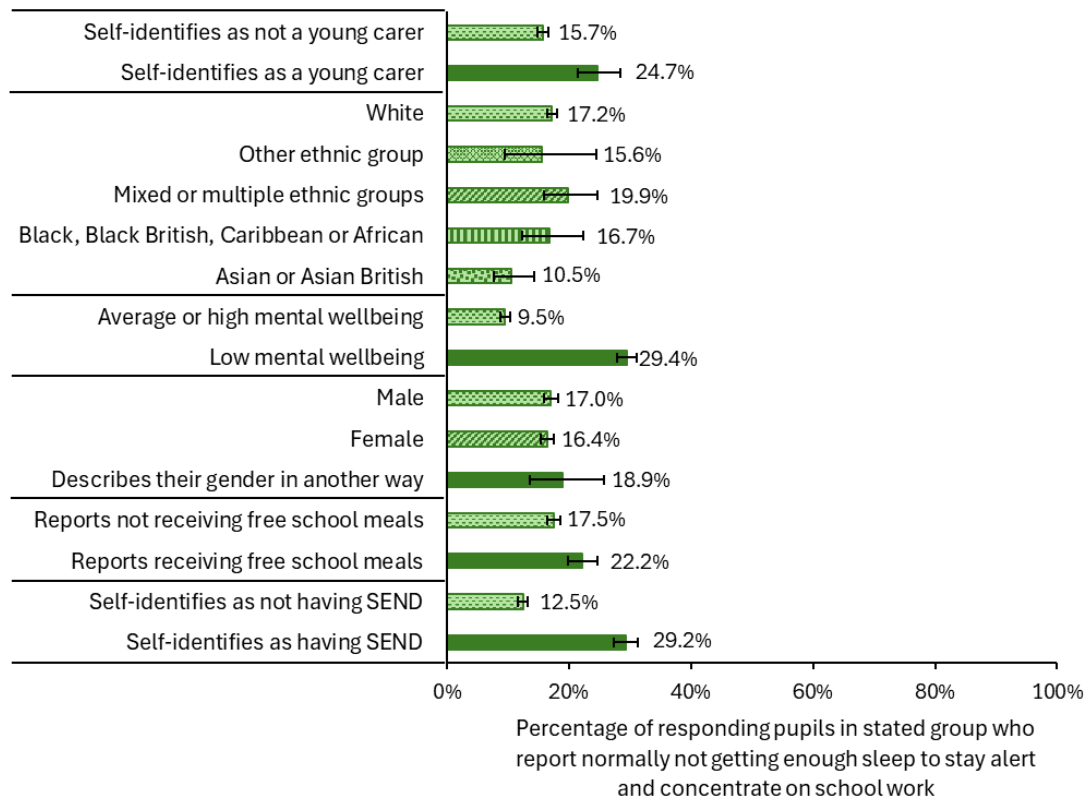
That the proportion of pupils reporting that they do not get enough sleep to stay alert and concentrate on schoolwork increases with age is also found in the WHO study where 26% of 11-year olds, 34% of 13-year olds and 42% of 15-year olds in 2022 reported this issue. While the question wording in the WHO study is almost identical²⁶ to that in the Flourish Survey, the response options in the WHO study did not include 'Don't know' being simply 'Yes' or 'No'. It seems likely that this difference in response options explains why for each of these age categories a substantially lower proportion of pupils in the Flourish Survey report that they do not get enough sleep than in the WHO study.

²⁶ In the WHO study the word 'awake' replaces 'alert' in the statement pupils are asked to access.

Variations by group

Figure 10 shows that among sampled Year 4 to Year 13 pupils, those who identify as young carers, report low mental wellbeing, and/or who identify as having SEND are more likely to report normally not getting enough sleep to stay alert and concentrate on schoolwork than pupils not in these groups. In particular, the proportion of pupils reporting low mental wellbeing who report that they normally do not get enough sleep to stay alert and concentrate on schoolwork is more than three times higher than for pupils reporting average or high mental wellbeing (29.4% vs 9.5%). Similarly, Year 6 to Year 13 pupils who report receipt of free school meals are more likely to report normally not getting enough sleep to stay alert and concentrate on schoolwork than pupils who report not receiving free school meals. Contrasting with this, pupils who identify as Asian or Asian British are less likely to report that they normally do not get enough sleep to concentrate on schoolwork than pupils who identify as White.

Figure 10: Percentage of sampled pupils reporting that they normally do not get enough sleep to stay alert and concentrate on their schoolwork by selected group - 2024 (Year 4 to Year 13 data combined, except for the free school meals comparison which uses Year 6 to Year 13 data)

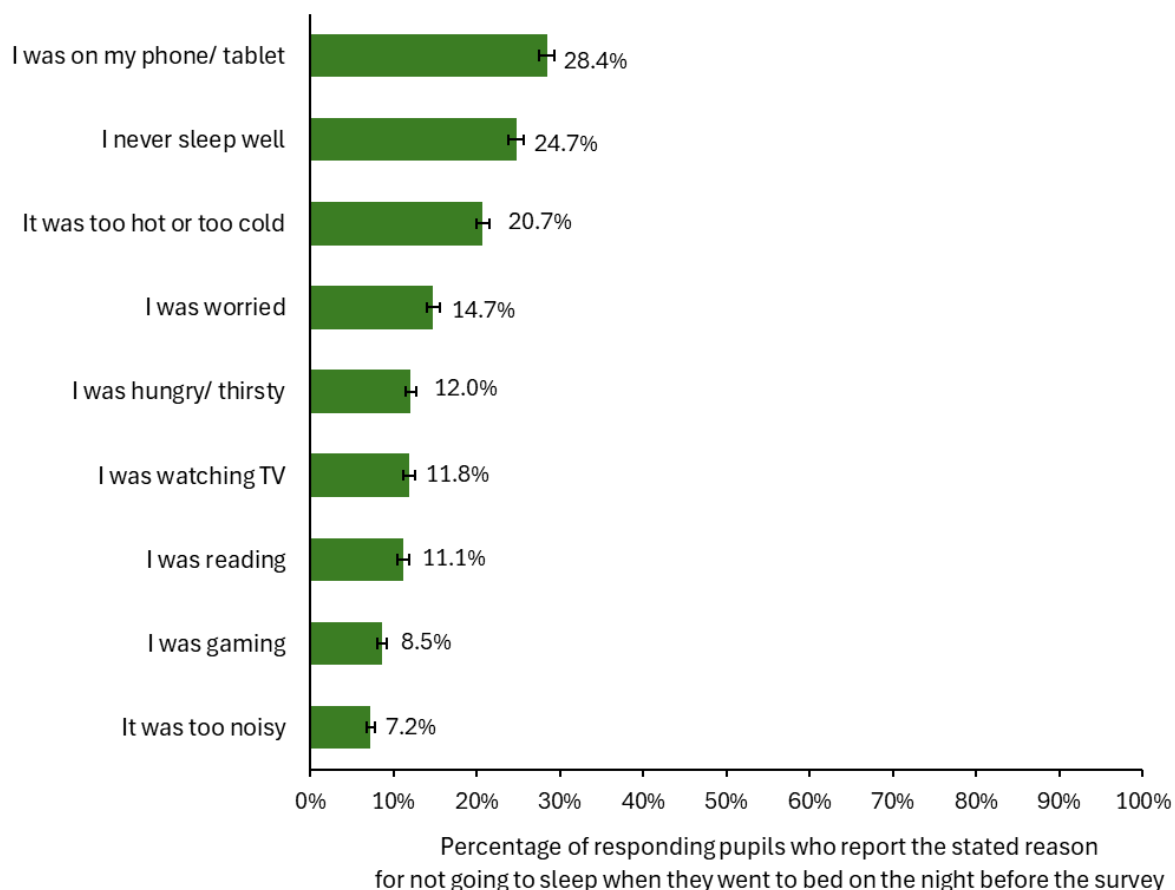


Obstacles to going to sleep

As well as asking pupils about whether they get enough sleep, the Flourish Survey also asks pupils whether there were things that stopped them going to sleep immediately when they went to bed on the night before the survey. Across sampled Year 4 to Year 13 pupils, 31.0% report that they fell asleep quickly on the night before the survey.

Figure 11 shows that among sampled Year 4 to Year 13 pupils report a diverse range of reasons for not immediately going to sleep on the night before the survey. 24.7% of sampled pupils report that they never sleep well, while the most common reason reported for not immediately going to sleep is that pupils were on their phone or tablet, something 28.4% of sampled pupils report.

Figure 11: Percentages of sampled pupils reporting different reasons for not immediately going to sleep when they went to bed on the night before the survey - 2024 (Year 4 to Year 13 data combined)



In terms of the impact of phones and tablets on sleep, older pupils are more likely to indicate that using a phone or tablet stopped them going to sleep immediately. For example, among sampled Year 4 pupils 15.7% report that they did not immediately fall asleep when they went to bed due to phones and tablets on the night before the survey, a figure which rises to 33.2% in Year 8. Above Year 8 the proportion of sampled pupils reporting that using a phone or tablet stopped them from immediately falling asleep is broadly stable.

The percentage of sampled pupils reporting that they never sleep well or that they were unable to immediately go to sleep on the night before the survey due to worry are both broadly stable with age between Year 4 and Year 12/13. In terms of particular groups that are more likely to report not immediately falling asleep due to worry, sampled pupils who identify as young carers, report low mental wellbeing and/or identify as having SEND are more likely to report this issue than pupils not in these groups. In particular, sampled Year 4 to Year 13 pupils who report low mental wellbeing or who identify as having SEND are more than twice as likely to report that worry stopped them going to sleep immediately on the night before the survey than pupils not in these two groups. For example, 25.3% of sampled pupils who identify as having SEND report this issue compared to only 10.8% of pupils who do not identify as having SEND.

Resilience, decision-making and openness to help

As previously noted, the Flourish Survey contains a large number of individual statements linked to mental wellbeing and mental health. Reviewing each of them individually is not feasible, but, in this section, we consider six indicators which provide an insight into pupils' resilience to adversity, ability to make decisions and openness to accessing help.

The following bullet points list the six individual indicators that have been analysed, the year groups for which data is available and the proportion of sampled pupils reporting the issue when averaged across the year groups for which data is available:

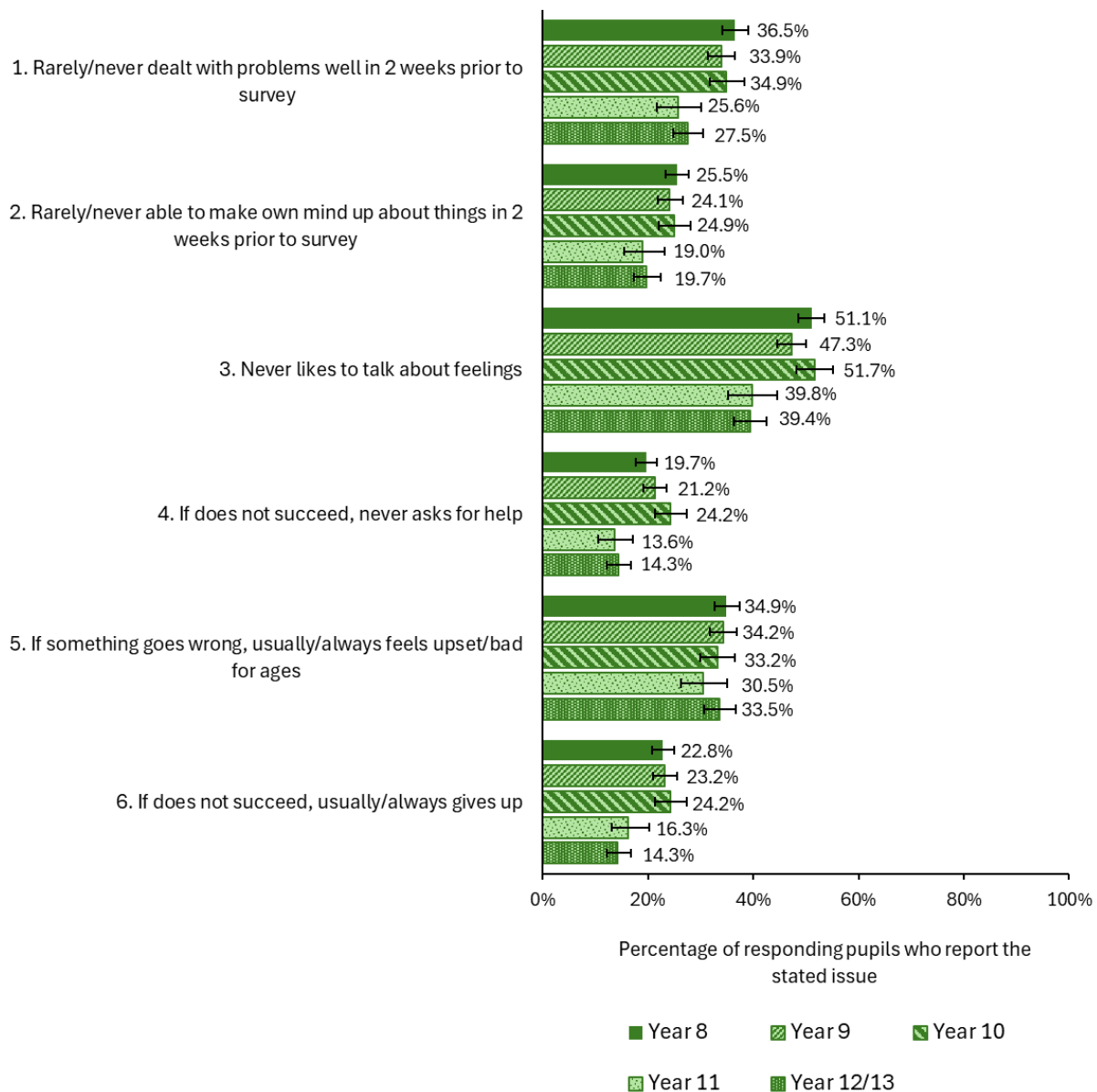
1. Has rarely or never dealt with problems well in the two weeks prior to the survey, Year 8 to Year 13, **33.0%**
2. Has rarely or never been able to make up their own mind about things in the two weeks prior the survey, Year 8 to Year 13, **23.4%**
3. Never likes to talk about their feelings, Year 4 to Year 13, **43.0%**
4. If a pupil does not succeed at something, they never ask for help, Year 6 to Year 13, **17.5%**
5. If something goes wrong, the pupil usually or always feels upset and bad for ages, Year 6 to Year 13, **33.1%**
6. If a pupil does not succeed at something, they usually or always give up, Year 6 to Year 13, **20.8%**

The most striking result among these indicators is the relatively high proportion of sampled Year 4 to Year 13 pupils that never like talking about their feelings.

Relationships with age

A fairly general result across the indicators in Figure 12 is that sampled pupils in Year 11 and Year 12/13 are less likely to report one of the issues above than pupils in Year 8 to Year 10.

Figure 12: The percentage of sampled pupils reporting each of six indicators related to resilience, decision-making and openness - 2024 (Year 8 to Year 12/13 separately)



For example, 34.9% of sampled Year 10 pupils report that they rarely or never dealt with problems well in the two weeks prior to the survey, compared to only 25.6% of Year 11 pupils and 27.5% of Year 12/13 pupils. The one exception to this pattern is that the proportion of sampled pupils who report that they usually or always get upset and feel bad for ages when something goes wrong is broadly stable between Year 6 and Year 12/13.²⁷

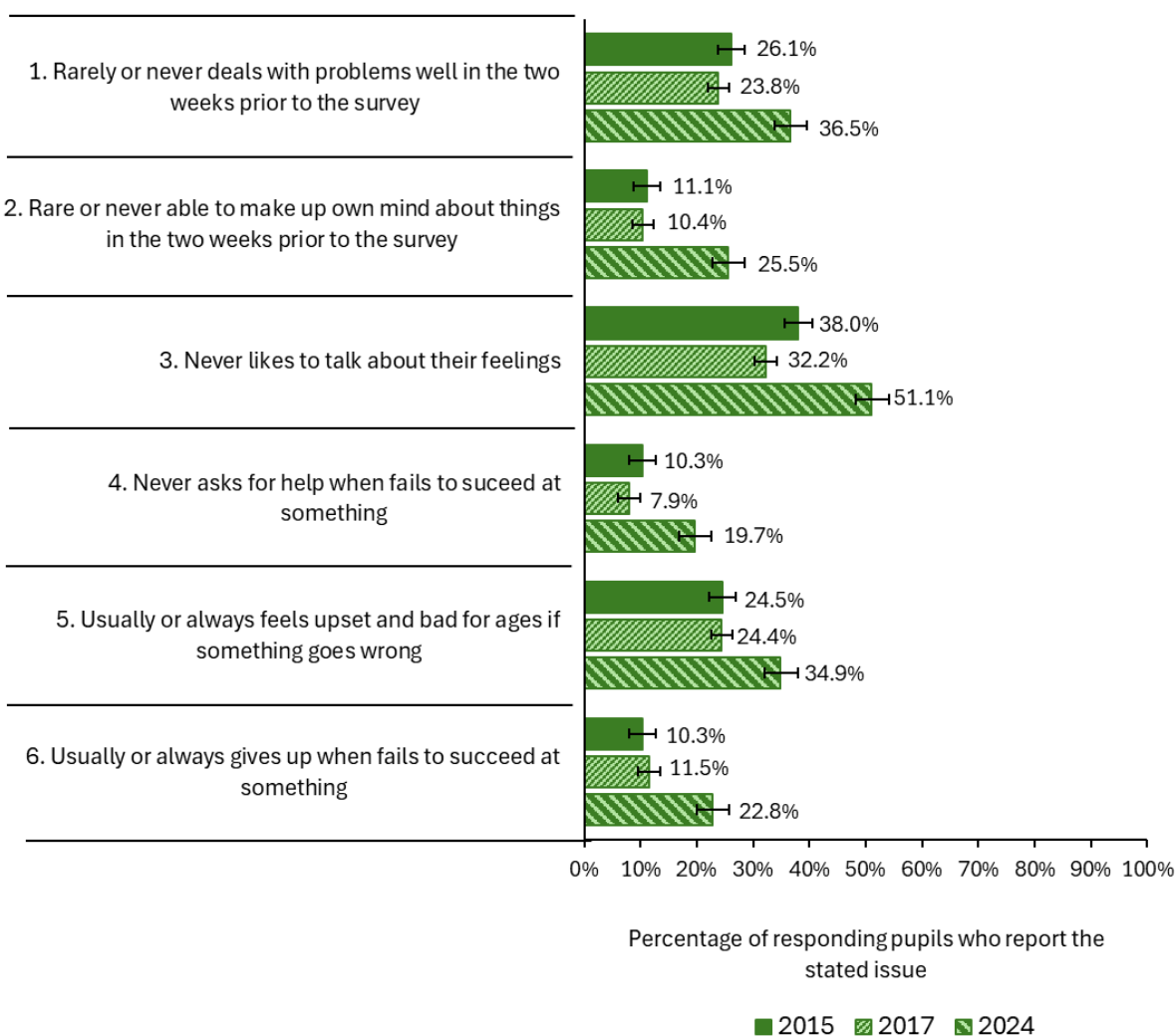
Another finding (not shown in Figure 12) is that the proportions of sampled pupils' reporting that they never like to talk about their feelings or never ask for help when they do not succeed at something increases with age in younger year groups. For example, the proportion of sampled pupils reporting that they never ask for help when they do not succeed at something rises from 10.6% in Year 6 to 24.2% in Year 10. Similarly, the proportion of sampled pupils reporting that they never like talking about their feelings increases from 33.3% in Year 5 to 51.1% among Year 8 pupils.

²⁷ Due to the different indicators being asked to different year groups, Figure 12 only reports those year groups (Year 8 to Year 12/13) where data is available for all of the indicators.

Changes over time

Looking across all six indicators, Figure 13 shows there is an increase in the percentage of sampled Year 8 pupils reporting each of the issues listed above between 2017 and 2024. For each indicator, the increase appears relatively large with the change between 2017 and 2024 always being above 10 percentage points. The biggest increase relates to the proportion of sampled Year 8 pupils who report that they never like talking about their feelings with this proportion increasing from 32.2% in 2017 to 51.1% in 2024. For brevity, we only graph the changes over times for Year 8, however, after Figure 13, the changes over time for sampled Year 10 and Year 12/13 pupils are also discussed.

Figure 13: Percentage of sampled pupils reporting stated issue - 2015, 2017 and 2024 (Year 8 data only)



Turning to the other year groups that we usually look at when assessing changes over time, the results are more mixed, although, broadly consistent with the overall finding that any deterioration in mental wellbeing/mental health for sampled pupils is clearest among pupils in younger year groups. Indicators 1 and 2 are unavailable for Year 6 pupils as they were only asked in the questionnaire for secondary pupils, however, the other four indicators all show that among sampled Year 6 pupils the reported rate of the issues increased between 2017 and 2024.

Among sampled Year 10 pupils, four of the indicators showed an increase in their reported rate between 2017 and 2024. The indicators that do not show a statistically significant change for Year 10 pupils between 2017 and 2024 are pupils reporting that they had rarely or never dealt with problems well in the two weeks prior to the survey (indicator 1) and that if something goes wrong they usually or always feel upset and bad for ages (indicator 5). Although, there was a statistically significant increase in the percentage of sampled Year 10 pupils reporting that they had rarely or never dealt with problems well in the two weeks prior to the survey between 2015 and 2024.

Turning to Year 12/13 pupils, only the proportions of pupils reporting that they never like to talk about their feelings (indicator 3) or that if they fail to succeed at something they never ask for help (indicator 4) increased between 2017 and 2024. Indeed, the proportion of sampled Year 12/13 pupils reporting that they usually or always feel upset and bad for ages if something goes wrong actually fell between 2017 and 2024 by a margin that is likely to be statistically significant.

It seems noteworthy that the proportion of sampled pupils that never like talking about their feelings has increased between 2017 and 2024 (in the year groups considered) at the same time as younger year groups are fairly consistently reporting worsening mental wellbeing. It suggests that, at least for younger year groups, a growing proportion of sampled pupils will be experiencing both low mental wellbeing and a potential obstacle to obtaining support that might help with this issue.

Variations by group

Looking across the six indicators analysed in this section there is significant consistency in the groups that are more likely to experience the six issues listed. For all six indicators, in the year groups for which data is available, sampled pupils who identify as having SEND, report receipt of free school meals and/or report low mental wellbeing are more likely to report the stated issue than pupils who are not in these groups. Also, for

all six indicators sampled pupils who identify as Asian or Asian British are less likely to report the stated issue than pupils who identify as White.

For indicators 1 and 2 their association with reporting low mental wellbeing is largely mechanical as these two indicators feed into the WEMWBS that is used to identify low mental wellbeing. Equally, it is striking that 59.5%, i.e. a majority, of sampled Year 4 to Year 13 pupils who report low mental wellbeing also report that they never like talking about their feelings (indicator 3) compared to only 33.1% of pupils reporting average or high mental wellbeing.

With regard to sampled pupils who identify as young carers, they were more likely to report four of the indicators than pupils who did not identify as young carers. The two indicators for which there was no statistical difference between those identifying as carers and those identifying as non-carers were: (i) I never like talking about my feelings (indicator 3), and (ii) If I don't succeed at something, I usually or always give up (indicator 6).

Results from other topic reports

In the other topic reports based on the Flourish Survey we report key results broken out by whether sampled pupils reported low mental wellbeing or average or high mental wellbeing.²⁸ The purpose of this section is to provide a brief summary of the results found in the other topic reports regarding three broad topics: (i) risk-taking behaviours, (ii) indicators of poor health, and (iii) home and social life.

As discussed above, it is important to recognise that we are merely reporting associations between variables rather than causation. For example, from the Flourish Survey data alone we cannot say whether low mental wellbeing is causing a risk-taking behaviour, a risk-taking behaviour is causing low mental wellbeing or another factor is driving both low mental wellbeing and the risk-taking behaviour. Also, when reporting these associations, we do not control for any other variables which in the background might be influencing the associations reported.

In a difference to the other topic reports, the associations reported in this section are all based on analysing data from sampled Year 8 to Year 13 pupils. This means all the results in this section involve pupils whose wellbeing has been classified according to WEMWBS.

Risk-taking behaviours

Sampled Year 8 to Year 13 pupils who report low mental wellbeing are more likely to report the following 'risk-taking behaviours' than pupils who report average or high mental wellbeing:

- Smoking at least once
- Vaping at least once
- Drinking alcohol at least once a month
- Sometimes, usually or always drinking alcohol when a problem worries a pupil or they feel stressed
- Taking drugs at least once
- Having sex at least once²⁹
- Sending a nude image of yourself to someone (a 'sext')

²⁸ The exception is the topic report discussing the sample's characteristics.

²⁹ The comparison for this risk-taking behaviour is based on data for Year 10 to Year 13 pupils as these were the only year groups asked whether or not they had had sex.

Often the proportionate difference in the reported rates of these behaviours between pupils reporting low mental wellbeing and those reporting average or high mental wellbeing is large. Among sampled Year 8 to Year 13 pupils reporting low mental wellbeing the rates of reporting sending a sext at some point, taking drugs at some point and/or sometimes, usually or always drinking alcohol when feeling worried or stressed are more than double those among pupils reporting average or high mental wellbeing. For example, among sampled Year 8 to Year 13 pupils who report low mental wellbeing 13.0% report that they have taken an illegal drug at some point, whereas only 6.3% of pupils reporting average or high mental wellbeing report taking an illegal drug at some point.

Also, there is a large percentage point difference in the rates reporting vaping at least once: 42.8% of sampled Year 8 to Year 13 pupils who report low mental wellbeing report that they have vaped at least once compared to 24.3% of pupils who report average or high mental wellbeing.

Indicators of poor health

Sampled Year 8 to Year 13 pupils who report low mental wellbeing are more likely to report the following indicators of potential poor health than pupils who report average or high mental wellbeing³⁰:

- Parents or carers who smoke cigarettes
- Wanting to lose weight
- Usually or always eating or drinking more when a problem worries a pupil or they feel stressed
- Eating a takeaway or fast-food at least three times a week in at least one of five stated situations
- Eating fewer than five portions of fruit and vegetables on the day before the survey
- Not visiting a dentist in the past year or having never visited a dentist
- Doing no sport or physical activity outside of school in the four weeks before the survey

In proportionate terms, the differences recorded for these health indicators tend to be smaller than for the risk-taking behaviours above. For example, among sampled Year 8 to Year 13 pupils who report low mental wellbeing 20.6% report not visiting a dentist in

³⁰ No question in the Flourish Survey asked for information about the mental health of a pupil's parents.

the year before the survey or never visiting a dentist compared to 14.8% of pupils who report average or high mental wellbeing.

The largest observed difference concerns the desire to lose weight: 62.7% of sampled Year 8 to Year 13 pupils who report low mental wellbeing also report that they would like to lose weight compared to only 34.7% of pupils who report average or high mental wellbeing. Although, since a stated desire to lose weight is based on a subjective assessment of a pupil's own weight, we cannot be sure whether the difference results from pupils with low mental wellbeing being more likely to be overweight or whether these pupils simply have a more negative perception of their own appearance (linked to their low mental wellbeing).

Home and social life

Sampled Year 8 to Year 13 pupils who report low mental wellbeing are more likely to report the following indicators of challenges in their home and social life than pupils who report average or high mental wellbeing:

- Violence between adults in the home in the month before the survey
- Rates safety at home as okay, poor or very poor
- Does not have a trusted adult to talk to when upset
- At some point has had concerns about the alcohol use of a family member
- At some point has had concerns about the drug use of a family member
- Never finds it easy to make friends
- Being bullied a lot in the 12 months prior to the survey

The difference in the reported rates of these issues between pupils who report low mental wellbeing and those who report average or high mental wellbeing are large. With the exception of concerns about a family members' alcohol use, for all the indicators in this subsection the proportion of pupils reporting low mental wellbeing who also report the indicator is more than double the proportion among pupils reporting average or high mental wellbeing. For example, 28.3% of sampled Year 8 to Year 13 pupils who report low mental wellbeing report that they never find it easy to make friends compared to 7.2% of pupils who report average or high mental wellbeing; and 23.3% of sampled Year 8 to Year 13 pupils who report low mental wellbeing report not having a trusted adult to talk to when worried or upset compared to 6.1% of pupils who report average or high mental wellbeing.

The family, friends and bullying topic report shows that for some of these indicators not only are those who report low mental wellbeing more likely to report challenges in their

home and social life, but also those who report challenges in their home and social life are more likely to report low mental wellbeing. It shows that sampled Year 4 to Year 13 pupils who report being bullied in the 12 months prior to the survey, violence in the home between adults in the month before the survey and/or who lack access to a trusted adult when worried or stressed are all more likely to report low mental wellbeing than pupils who do not report these issues.

Appendix 1: Assessing the representativeness of the sample

A separate topic report provides a detailed comparison of the 2024 Flourish sample with data for the population of schools and pupils in Norfolk. While the sample data is broadly in line with the population data for some characteristics, such as ethnicity, for other characteristics there are differences to the population data. These differences are clearest in terms of the age distribution of responding pupils and the geographic distribution of schools taking part in the survey.

Regarding age, the data is concentrated in Year 7 to Year 10 (pupils aged 11 to 15) rather than being evenly distributed across year groups. To avoid differences in age distributions impacting comparisons between years, and with the wider SHEU comparator data for 2022, we generally make these comparisons according to individual year groups.

Regarding the geographic distribution of the 2024 data, only primary schools chose to take part in the Borough of Great Yarmouth and in Norwich none of the Year 7 to Year 11 data comes from state-funded schools. Furthermore, pupils from King's Lynn and West Norfolk are over-represented in the data for secondary schools and colleges, while pupils from Norwich are over-represented in the primary data and pupils from Breckland are under-represented in the primary data. This uneven geographic distribution of data means that we do not break out results by district.

Also, it appears that the sample probably under-represents pupils who are eligible for free school meals. This, combined with the geographic distribution of the data, means that the sample may under-represent children from deprived backgrounds. However, this does not mean the data should be ignored, rather thought should be given to whether a particular variable is more or less likely to be observed among pupils from deprived backgrounds. For example, where a behaviour is thought to be more common among pupils from a deprived background, the results in this report are likely to be a minimum for the true prevalence of the behaviour among the full population of Norfolk pupils.

In terms of the validity of comparisons between 2015, 2017 and 2024, as noted previously, we control for differences in the age distribution of pupils.³¹ Nevertheless, there are other differences in the compositions of the samples between years. The slightly greater ethnic diversity of the sample and the large increase in the proportion of pupils reporting receipt of free school meals between 2017 and 2024 are broadly mirrored by changes in population data between 2016-17 and 2023-24. In other words, for these two characteristics, the population of pupils in Norfolk is changing rather than it being a clear issue with the sample's representativeness. Regarding the gender breakdown of the sample and the proportion of pupils identifying as having SEND, it is possible that there are changes in the sample composition between years that do not match the population data; although, in both instances, methodological issues cloud the picture.³²

Overall, the analysis is representative of the subset of pupils who are educated within schools with management that might consider undertaking a pupil health survey worthwhile. The Norfolk population data indicates that the sample under-represents pupils taught in schools rated by Ofsted as Requires Improvement. We cannot rule out the possibility that differences in results between years, and with SHEU data from other parts of the country, occur due to differences in the characteristics of pupils being sampled. The results in this and the other topic reports are all unweighted.

³¹ The size of the Flourish sample has also varied considerably between years being 3,155 in 2015 and 11,417 in 2017; however, these changes in sample size are reflected in the size of the confidence intervals reported in figures and they should not have a clear impact on the sample's representativeness.

³² For gender, the sample appears to becoming less representative over time with the proportion of females in the sample increasing. However, drawing firm conclusions is complicated by the population data being about sex rather than gender identity; in other words, the population data only records pupils as male or female. For SEND status, the increase in the proportion of the sample self-identifying as having SEND exceeds the increase observed in the population data between 2016-17 and 2023-24 by some margin; the large increase in the Flourish data probably relates to the question wording in the Flourish questionnaire changing between 2017 and 2024.

Appendix 2: Mapping year groups to age

Generally, the topic reports based on the Flourish Survey break data out by school year group rather than age for two reasons: (i) key events in pupils' lives are determined by school year group, e.g. the switch from primary to secondary school and GCSE exams, and (ii) SHEU reports comparator data from other parts of the country for selected year groups.

For readers who are unfamiliar with school year groups Table 1 provides a mapping to the age of pupils. Year 6 marks the end of primary school, while Year 7 marks the start of secondary school. GCSE exams are taken in Year 11 with pupils moving to sixth form or further education providers for Year 12/13. As discussed in the first section of the report, the questions pupils saw in the Flourish Survey to some extent varied by the year group they were in.

Table 1: Age of pupils in school year groups included in the Flourish Survey

School year group	Age of pupils
Year 4	8-9
Year 5	9-10
Year 6	10-11
Year 7	11-12
Year 8	12-13
Year 9	13-14
Year 10	14-15
Year 11	15-16
Year 12/13	16-18

The Flourish Survey questionnaire does not enable pupils in Year 12 and Year 13 to be separated. Also, in rare circumstances individual pupils of a particular age may be in a different year group if they have been moved up or down a year.