

## FOR TEACHERS ONLY: Annotated copy

### Survey Introduction to be read to class:

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#### About the project

Some people (researchers) at Cardiff University work for the School Health Research Network (SHRN). They are doing important work about children's health and wellbeing. They are asking children in Year groups 3 to 6 across many schools in Wales to take part and help them. Our school has agreed to help. Your parents/carers know about the project and they are happy for you to be involved if you want to do it.

#### Taking part

You will be asked to answer some questions about yourself, how you are feeling, and what you think about school.

You don't need to type your name, and all of your answers are **private**, so no-one apart from the research team will see your answers, but they won't know who they came from. Your parents and teachers won't see your answers either. Because this is private, please don't ask your friends what answers they have answered.

Taking part is **voluntary**. This means it is up to you if you want to do the survey. If not, I will give you something else to do. If you do want to do the survey, if there is any question you do not want to answer, you can choose the 'I don't want to answer' option to **skip** them.

**Does anyone have any questions?** (allow time to answer any questions children have before directing them to the survey)

The beginning of the survey will repeat the things I've said. Please read the sentences and tick that you have read, understood and agree with them. They must be ticked for you to start the survey. If you want to do the survey, tick the box that says 'Yes I'll do the survey'. If you don't want to do the survey, tick that box, and I will find you something else to do.

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#### **Check understanding**

Check learners understand what they are being asked to do and answer any questions they may have before they start. If any learner does not want to do the survey, find them an alternative activity so they do not disturb those who do.

#### **Sensitivity and safeguarding:**

Some learners may have sensitivities around certain topic areas. Please provide the necessary support in addressing any concerns. If a safeguarding concern arises, please follow your school's safeguarding procedure.

# The School Health Research Network (SHRN) Student Health & Well-being Survey 2024

## 1. This survey is about Health & Wellbeing



Your answers will help us to understand children's health & wellbeing

## 2. Taking Part



You don't have to do the survey if you don't want to.

## 3. Private



Your answers will be kept private. Your teachers & parents will not see your answers.

## 4. Skip a question



Click 'I don't want to answer' to skip any question.

Please read each of the sentences below carefully.

Tick the circles to show you have read, understood and agree with each of the sentences.

Please talk to your teacher if you cannot put a tick next to each sentence. You will not be able to start the survey if you leave any blank.

- My teacher told me what this survey is about.
- I have had a chance to ask my teacher questions about this survey.
- I know it is my choice if I want to do the survey.
- I know I can skip any question I don't want to answer
- I can stop doing the survey at any time but the answers I give will be used by the researchers.

Please choose one of the options below

- Yes, I want to do the survey
- No, I don't want to do the survey  
(your teacher will give you something else to do)

## ***This section is about you....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'. Your teachers r parents will not see your answers.***

**Teacher guidance: Question 1 requires an answer from all pupils as this will filter subsequent survey questions which are appropriate to each Year group.**

### **1. What school year are you in?**

Year 3

Year 4

Year 5

Year 6

### **2. Are you a....?**

Boy

Girl

Neither word describes me

I do not want to answer

### **3. Are you...?**

Asian

Black

White

Mixed/Multiple

Gypsy, Roma or Traveller

Another background

I don't know

I don't want to answer

## ***This section is about your home....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

All families are different.

Some children live with two parents; some live with one parent.

Some children have two homes, or live with two families, or live with their grandparents.

We would like to know who you live with.

**4. Think about your home, the place where you live all / or most of the time.**

**Which adults do you live with?**

★ *Pick ALL options that apply.*

My Mum

My Dad

My Mum's partner

My Dad's partner

My two Mums

My two Dads

My Grandparents

My Foster parents

Other adults

I do not want to answer

**(Years 5/6 only)**

**5. What language does your family speak at home?**

★ *Pick ALL options that apply.*

English

Welsh

Another language

I do not want to answer

**Teacher guidance: Questions 6 to 11 might seem quite abstract to younger children. Together these questions are used to assess children's' socioeconomic status through information on family ownership. With a sensitive approach, please encourage pupils to read each of the questions but note there is an option for pupils not to answer any or all of these.**

**6. Do you have your own bedroom?**

- Yes
- No
- I do not want to answer

**7. Does your family own a car, van or truck?**

- No
- Yes, one
- Yes, more than one
- I do not want to answer

**(Years 5/6 only)**

**8. How many bathrooms (with a bath or shower in them) are in your home?**

- 0
- 1
- 2
- More than 2
- I do not want to answer

**(Years 5/6 only)**

**9. Does your family own a dishwasher?**

- Yes
- No
- I do not want to answer

**10. How many computers (e.g. PCs, laptops, tablets – but NOT games consoles / smartphones) does your family own?**

- 0
- 1
- 2
- More than 2
- I do not want to answer

**11. During the past 12 month, how many times did you travel away on holiday with your family?**

- 0
- 1
- 2
- More than 2
- I don't know
- I do not want to answer

## ***This section is about things you do....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

### **12. What time do you normally go to bed if you have school the next day?**

- Before 7pm
- Between 7 – 8pm
- Between 8 - 9pm
- Between 9 – 10pm
- Between 10 – 11pm
- Later than 11pm
- I don't know
- I don't want to answer

### **13. How many times a week do you have...?**

★ *Place a tick in each row.*

	Never	Less than once a week	Once a week	2-4 days a week	5-6 days a week	Once a day, every day	Every-day, more than once	I do not want to answer
Fruits								
Vegetables								
Coke / soft drinks (which contain sugar)								
Sweets (candy or chocolate)								
(only asked to Y5/6) Energy drinks (e.g. PRIME, Red Bull, Monster etc)								
Tap or bottled water ( <b>NOT</b> flavoured or squash)								

14. How often do you have school dinners or a packed lunch at school during the week?

	Never	1 day a week	2 days a week	3 days a week	4 days a week	Everyday	I don't want to answer
School Dinners							
Packed Lunch							

15. How many times did you brush your teeth YESTERDAY?

- 1
- 2
- More than 2
- I did not brush my teeth
- I don't want to answer

16. How do you normally get to school?

- Walk
- Bike
- Bus, train, tram or boat
- Car, taxi, motorcycle or moped
- Another way
- I do not want to answer

## ***This section is about health....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

Physical activity is any activity that makes your heartbeat faster and makes you get out of breath some of the time.

Physical activity includes sports, school activities, playing with friends, or walking/biking to school.

17. In the last 7 days, how many days did you do physical activity for at least 1 hour in total?

- 0 days
- 1-2 days
- 3-4 days
- 5-6 days
- 7 days
- I don't know
- I do not want to answer

**(Years 5/6 only)**

**18. Why are you active?**

Below are some reasons why you might be active.

Think about why you might be an active young person. Put a tick in each row showing if this reason sounds “Not true for you”, “Sometimes true for you” or “Very true for you”.

	Not true for me	Sometimes true for me	Very true for me	I do not want to answer
Being active is fun				
It is important to me to do active things				
When I’m not active, I feel bad				
Other people say I should be active				
I enjoy being active				
Being active is important to me				
When I don’t do activity I feel bad about myself				
If I don’t, other people will not be pleased with me				
I like being active				
In life it is important to be active				
I want to show other people how good I am				
Other people pressure me to be active				

**(Years 5/6 only)**

A vape is a device that a person uses to breath in a vapour. The vapour often contains nicotine or is flavoured.

**19. Have you ever tried a vape?**

- No
- Yes, once
- Yes, more than once
- I don’t know
- I don’t want to answer

**(Years 5/6 girls only)**

The next question is about puberty.

**20. Have you had your first period?**

- Yes
- No
- I don’t know
- I don’t want to answer



(If yes)

21. When did you have your first period?

Year 4

Year 5

Year 6

I don't know

I don't want to answer

## ***This section is about your feelings....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

**Teacher guidance: This is a validated measure. Validated measures are questions that have been scientifically tested to ensure production of reliable and accurate results.**

22. Below are some sentences about how you might feel.

There are no right or wrong answers.

You should just pick the answer which is best for you.

★ Place a tick in each row.

	Never	Sometimes	Always	I do not want to answer
1. I feel lonely				
2. I cry a lot				
3. I am unhappy				
4. Nobody likes me				
5. I worry a lot				
6. I have problems sleeping				
7. I wake up in the night				
8. I am shy				
9. I feel scared				
10. I worry when I am at school				
11. I get very angry				
12. I lose my temper				
13. I hit out when I am angry				
14. I do things to hurt people				
15. I am calm				
16. I break things on purpose				

**Teacher guidance: This is a validated measure. Validated measures are questions that have been scientifically tested to ensure production of reliable and accurate results.**

**23. On a scale of 0-10, how would you rate your life at the moment?**

- 10 – I have the best possible life
- 9
- 8
- 7
- 6
- 5
- 4
- 3
- 2
- 1
- 0 – I have the worst possible life
- I do not want to answer

**Teacher guidance: This is a validated measure. Validated measures are questions that have been scientifically tested to ensure production of reliable and accurate results.**

**(Years 5/6 only)**

**24. In the last 6 months, how often have you...?**

★ *Place a tick in each row.*

	Never	Rarely	About once a month	About every week	More than once a week	About every day	I do not want to answer
Felt low							
Felt irritable or bad tempered							
Felt nervous							
Had difficulty getting to sleep							

## ***This section is about school....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

**25. How do you feel about school?**

- I like it a lot
- I like it a bit
- I don't like it very much
- I don't like it at all
- I do not want to answer

**(Years 5/6 only)**

**26. Thinking about the children in your class, how much do you agree or disagree with the following sentences...?**

★ *Place a tick in each row.*

	Strongly agree	Agree	Neither agree / disagree	Disagree	Strongly disagree	I do not want to answer
Children enjoy being together						
Most children are kind & helpful						
Other children accept me as I am						

**27. Thinking about children in your school, how much do you agree or disagree with the following sentences...?**

★ *Place a tick in each row.*

	Strongly agree	Agree	Neither agree / disagree	Disagree	Strongly disagree	I do not want to answer
<b>(Years 5/6 only)</b> Children have a say in planning school activities						
<b>(Years 5/6 only)</b> Children have a chance to help plan school projects						

(Years 5/6 only) Children's ideas are taken seriously						
I feel like I belong at this school						

**28. Thinking about adults in your school, how much do you agree or disagree with the following sentences...?**

★ Place a tick in each row.

	Strongly agree	Agree	Neither agree / disagree	Disagree	Strongly disagree	I do not want to answer
(Years 5/6 only) My teachers accept me as I am						
My teachers care about me as a person						
(Years 5/6 only) I trust my teachers						
(Years 5/6 only) I can tell at least one adult in my school if I'm worried about anything						

**29. In the summer holidays, some schools run holiday clubs that include meals and activities, did you attend a summer holiday club at your school?**

- No
- Yes, I went to club for 1 - 5 days
- Yes, I went to club for 6 - 10 days
- Yes, I went to club for more than 10 days
- I can't remember
- I do not want to answer

(This section asked to Year 6 only)

## ***This section is about going into Year 7....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

**30. How do you feel about going into Year 7?**

★ Place a tick in each row.

	Not at all	Very little	Some	Quite a bit	Very much	I do not want to answer
Are you <u>looking forward</u> to going into Year 7?						
Are you <u>worried</u> about going into Year 7?						

**31. What is the main thing you are looking forward to about going into Year 7?**

★ Only pick one answer

- Making new friends
- New subjects to learn
- Feeling more grown up
- A new start
- New teachers
- Better food
- I'm not looking forward to anything
- Other
- I do not want to answer

**32. What is the main thing that worries you about going into Year 7?**

★ Only pick one answer.

- Being bullied
- Not seeing my primary school friends
- School work may be harder
- Not knowing my way around the big school
- Not seeing my primary school teachers
- What my new teachers will be like
- I'm not worried about anything

Other

I do not want to answer

## ***This section is about bullying....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

***Please talk to your teacher or parents if you are worried about anything.***

We say a person is BEING BULLIED when:

- another person or a group of people keep saying or doing nasty things to them,
- a person is teased in a way they do not like,
- a person is left out of things on purpose.

**33. How often have YOU bullied another person at school in the past couple of months?**

I have not bullied anyone

It has happened once or twice

It has happened more than twice

I do not want to answer

**34. How often have you BEEN bullied at school in the past couple of months?**

I have not been bullied

It has happened once or twice

It has happened more than twice

I do not want to answer

(This section asked to Year 6 only)

## ***This section is about cyberbullying (online bullying)....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

***Please talk to your teacher or parents if you are worried about anything.***

We say a person is BEING CYBERBULLIED (bullied online) when someone:

- sends unkind or nasty online messages to them,
- posts unkind or nasty things online to make fun of them,
- posts or tags them in unkind or nasty online pictures without their permission.

**35. In the past couple of months, how often have YOU taken part in cyberbullying?**

- I have not cyberbullied anyone
- It has happened once or twice
- It has happened more than twice
- I do not want to answer

**36. In the past couple of months, how often have you BEEN cyberbullied?**

- I have not been cyberbullied
- It has happened once or twice
- It has happened more than twice
- I do not want to answer

## ***This section is about electronic devices & social media....***

***If there are any questions you don't want to answer, you can pick 'I do not want to answer'.***

**37. Do you have your own...?**

★ Pick ALL that you have.

- Smartphone (such as an iphone)
- Computer or laptop
- Tablet (such as an ipad or kindle)
- None of the above
- I do not want to answer

**Teacher guidance: Within the following question portable computer games could include items such as Nintendo Switch and other games consoles.**

Portable devices are smartphones and tablets. They are any screen you can easily move around the house or perhaps use outside.

**38. How often do you use portable electronic devices to do the following...?**

★ Place a tick in each row.

	Never	Less than once a week	Once a week	A few times a week	Everyday	I don't want to answer
Watch videos						
Watch TV/films						
Play computer games						
Read books						
Speak to your family online						
Speak to your friends online						
Use social media sites or apps (such as Snapchat, Tiktok, Instagram, Facebook etc)						

Thank you for completing!

Please press the 'submit' button to send your survey to us.

If you have any questions or want to talk about any of the topics covered in the survey then please speak to your teacher.

You can also contact Childline on 0800 1111.

**Teacher guidance: Please check surveys have been submitted.**