The Good Childhood Report 2016 – Children’s Society

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Summary

The Good Childhood Report 2016 is the latest report into children and young people’s well-being published by the Children’s Society and produced collaboratively with York University. The report’s main thesis is that whilst more traditional approaches to child well-being often focus on a basket of objective indicators (free school meals, index of multiple deprivation, etc.), the Children’s Society have found that the subjective responses of children and young people provide a far better explanation of well-being and mental health. The report focuses on (i) children’s well-being as they see it themselves, (ii) the relationship between children and young people’s well-being and their mental health, (iii) the link between local neighbourhoods and children’s well-being, and (iv) the alternative factors arising from their research that provide better explanations of well-being for children and young people. For councils reviewing, or looking to extend their customer feedback and participation work as an underpinning for policy development, these findings may be important.

This briefing will be of interest to elected members and officers in local authorities and partner organisations with responsibility for child poverty and children’s health, social care, mental health and education services. It will also be of interest to Directors of Public Health and members of Health and Wellbeing Boards.

Background

In 2005 the Children’s Society ran a national consultation of young people aged 14 and 15 which led to regular well-being surveys of children and young people in mainstream schools in England. The Society instituted a quarterly ‘Good Childhood Index’ in 2010 and this series of annual reports started in 2012.

Their research framework and programme which uses a qualitative approach based on open-ended questions started in 2006 when the society identified from their survey work the three most common words used by children when articulating what a good life means - friends, family and bullying. They also used a framework of three concepts (self, relationships and environment) as a way of thinking about the themes and issues raised by children and young people. In addition to its own surveys, since 2012 the reports have also used the ‘British Household Panel’ Survey, its successor the ‘Understanding Society’ survey, and the Millennium Cohort Study as sources of information on trends in children’s wellbeing over time.

By 2013 the methodological basis of the work was well established, as represented in the diagram below taken from their The Good Childhood Report 2013. The Society’s approach starts from
children’s own perceptions of their well-being, using a framework of positive effects, negative effects and life satisfaction to categorise children’s emotions and feelings. All three are seen as important because whilst they each exist independently for children, there can also be important relationships between them that can help us to understand well-being. Concepts of psychological well-being are then set alongside these subjective views.

**Briefing in full**

**Children’s subjective well-being**

Chapter One outlines two broad approaches to the well-being of children; one focused on a basket of objective indicators (such as the UNESCO and UNicef reports providing international comparisons on children’s well-being – see Related Briefings) and another that focuses on recording children’s subjective experiences. Subjective experience can be codified in a psychological or medical sense of well-being, or can be seen in a broader cognitive sense within the context of a child’s social world. The Society’s approach sees medical and psychological frameworks as useful but primarily it takes a wider view of well-being, saying “we are interested in cognitive as well as emotional assessments of well-being, and ‘global’ evaluations of life as a whole”. The report summarising its approach by saying that “relationships with others and a sense of autonomy are at the heart of children’s well-being”.

The 2016 report, in common with previous reports, finds that a large majority of children and young people respond positively when asked about their happiness with life as a whole, and with specific aspects of their life. Between 2% and 11% of children aged 10 to 17-years-old are unhappy with their lives or aspects of their lives, depending on the question being asked. Between 2009 and 2014, there was an increase in happiness with school work and school, but a decrease in happiness with friends and appearance.

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Time trends reveal growing gender differences for some aspects of children’s well-being – most strikingly for appearance, with girls becoming increasingly unhappy. The report suggests this needs considering in the context of international comparisons highlighted in The Good Childhood Report 2015, in which England ranked last out of 15 countries for happiness with appearance, and also had the most pronounced gender differences for this aspect of life of all participating countries. When cross referenced with data about mental health for children and young people the analysis found associations between emotional problems and happiness with appearance and life as a whole which were strongest for girls. As girls get older, not only are they more likely to be unhappy about their appearance, they are also more likely to experience emotional health problems such as anxiety and depression. Boys, on the other hand, are more likely to be unhappy with their school work and more likely to have conduct and hyperactivity/attention issues. These differences for boys disappear from age 12 or 13 onwards.

The report takes the concept of ‘flourishing’ and ‘languishing’ found in other academic work and applies it to children’s well-being by combining a measure of psychological well-being with a measure of subjective well-being in a way that provides an estimation of the proportion of 12-year-old children said to be ‘flourishing’ and languishing’ as set out in the table below. The report claims this is ground breaking work and the first time this concept has been related to children’s well-being.

<table>
<thead>
<tr>
<th>Low life satisfaction</th>
<th>Low Psychological well-being</th>
<th>10% (languishing)</th>
<th>4% (unhappy but functioning well)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High life satisfaction</td>
<td>High Psychological well-being</td>
<td>4% (happy but not functioning well)</td>
<td>82% (flourishing)</td>
</tr>
</tbody>
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One of the reports interesting findings is that bullying, as identified by children themselves, is more strongly related to subjective feelings of well-being than to psychological measures of well-being, and within those subjective feelings it is more strongly related to negative feelings of sadness. The report uses this as an issue to illustrate the usefulness of their ‘Flourish-Languishing’ framework as a way of understanding better the relationship and relative significance of subjective and psychological well-being for children.

The relationship between subjective well-being and mental ill-health

The second chapter explores further well-being for children and young people by considering the relationship between subjective well-being to mental health. It also explores the Strengths and Difficulties questionnaire (SDQ) a common tool used by local authorities to identify likely mental health issues for children and young people. In their 2013 report the Society said that subjective well-being is more strongly related to factors pertaining to children’s relationships, while mental ill-health is more strongly associated with children’s behaviours”. Previous reports have shown that:

- many children have low subjective wellbeing while not having identifiable mental health disorders.
- Mental ill-health scores are more closely related than subjective well-being scores to behaviours such as drinking alcohol and truanting.
Subjective well-being scores are more closely related than mental ill-health scores to aspects of relationships, such as feeling supported by family and frequency of talking to parents about things that matter.

The report describes the strengths and difficulties questionnaire as not providing a clinical measure of mental ill-health, but as providing a “widely validated measure of mental health issues in children”. This questionnaire consists of five sets of questions that cover emotional symptoms, peer relationship problems, conduct disorders, hyperactivity/inattention disorders and pro-social behaviour. Scores from the first four sets of questions are added together to provide a total difficulties score.

In terms of mental health issues, the report found that whilst girls had significantly greater emotional problems than boys and boys had significantly greater problems with conduct and hyperactivity/inattention than girls, there was no significant difference in peer relationship problems or total difficulties scores on the strengths and difficulties questionnaire. For the report writers this raises questions about the strengths and difficulties questionnaire and they suggest it could be important to conduct more detailed analysis separately by gender. Overall the analysis found that at age 10 boys are more likely than girls to have a mental health issue when all types are considered together, but by age 14 the situation is reversed.

The report looks at the impact on children and young people of remaining on a low well-being score over a period of time, suggesting that these children and young people have an increased likelihood of having mental health issues. It considers well-being scores 2 years apart and says that the odds of having mental health issues at the second time point are substantially higher for children with low well-being at both time points than for children with high well-being at both time points. This analysis suggests that changes in subjective well-being level, are significantly associated with the risk of mental health issues, even after taking account of factors such as age, gender and previous mental health. For the authors this shows the importance of continuously monitoring well-being.

Children’s views of their local area

The Society found, through its local area work, that the most common forms of bullying are emotional and relational (e.g. name calling, being made fun of), which girls are more likely to experience. They also found these types of bullying twice as likely to occur as the physical bullying, which boys are more likely to experience. The report looked at the issue of cyber bullying, but, contrary to some recent reports, found that school based bullying was still much more significant with more than three quarters of children experiencing bullying saying they had been bullied at school, compared to around 1 in 10 children who said they had experienced bullying online or by text.

In its analysis of geographical differences in children’s well-being, the report found no solid evidence of regional differences or links to area-level deprivation (i.e. the Index of Multiple Deprivation (IMD)), although there is a link between adult well-being and IMD or other economic indicators. Their overall conclusion is that children’s level of subjective well-being does not seem to be affected by the level of deprivation of the local area in which they live, but parent’s life satisfaction does, at least to some extent, seem linked.
In comparison, the report found that children’s perceptions and experiences of their local area were clearly linked to their well-being. The society’s questions for children and young people focused on facilities, how safe or free young people felt, and on their perceptions of local adults. They also asked children about local problems. Children who rated their local area relatively highly for facilities, safety/freedom and local adults, had higher life satisfaction scores than children who rated their local area more poorly. The same patterns applied for feeling happy and finding life worthwhile. Children who reported more problems tended to have significantly lower subjective wellbeing for all three measures. Noisy neighbours and people drinking or taking drugs were the two local area problems with the strongest associations to the two measures of subjective well-being.

The Society’s conclusion from this is that children’s own views and experiences of their local area (as exemplified by subjective analysis of their feelings and emotions) are much more important than objective measures of well-being in a local area. Factors that are known to be related to adults’ well-being (e.g. deprivation scores) are not necessarily linked to children’s well-being.

Factors associated with children’s subjective well-being

This chapter starts by summarising the two key points already established:

- The factors that are associated with children’s subjective well-being are not the same as those associated with adult subjective well-being.
- Objective social indicators are much less helpful in explaining why children’s subjective well-being varies than children’s self-reported experiences of life.

Further analysis found that children living with both birth parents had higher life satisfaction than those living with a lone parent, with children living in a stepfamily somewhere in the middle. However, they also found that the relationship between family structure and life satisfaction for children was significantly weaker than a single question about whether children felt their family got along well together. Family structure only explained around 2% of the variation in children’s life satisfaction whereas how well families get along together explained around 20% of the variation.

The report looked at household poverty and deprivation, and found that the relationship with well-being for children and young people (it explained about 3% of differences in well-being) is much weaker than for adults (where it explains about 7% of differences in well-being). The analysis found that the highest correlation with well-being was found amongst those with ‘about the same’ income as their friends. Those with incomes above and below both had lower correlations.

The society is not claiming that material deprivation is unimportant for children, but suggests that it needs to be measured in a more child-centred way. They refer to their previous work in this area where they considered such things as pocket money, or being able to ‘afford the right kind of clothes’, suggesting it is possible to generate a child centred index of material deprivation that can provide a much better explanation of well-being scores for children and young people than the more traditional basket of adult focused indicators does.

When they introduced information reported by children into the analysis (such as experiences of being bullied, conflict with friends and children’s feelings of safety in the local area) they found that these were much more strongly associated with child subjective well-being than any parent-reported information. Their analysis found no relationship at all between well-being for children
and young people and their parent’s education. Further to this the report suggested that when the traditional basket of adult based socio-economic indicators is considered there is little relationship with children’s well-being scores across European countries, whilst in contrast, for adults, there is a significant relationship.

These two findings, taken together, have substantial implications for the study of subjective well-being and its use for policy purposes. The Children’s Society feels that subjective well-being is increasingly becoming recognised as a potentially important indicator of how a society is doing, and has been proposed as a compliment to more traditional measures of societal progress such as GDP (see for example an OECD Paper by Stiglitz et al, 2010). However, if research into children and young people’s subjective well-being is ultimately to influence policy, it is vital that findings are generated which help policymakers understand this.

The authors suggest that although there have been advances in data on child subjective well-being over the past few years, it still lags well behind the wealth of data and findings on adults’ subjective well-being with the report saying “it is vital that we understand the distinctive nature of the factors associated with children’s subjective well-being. If we do not, and if findings on adults’ subjective well-being do inform policy, then there is a clear risk that policy measures may not address the needs of children, or even that they could be detrimental to children’s well-being while promoting that of adults”.

Discussion
The report offers a final section entitled discussion rather than ‘conclusions’ or ‘recommendations’. The society claims its findings are interesting and worth pursuing, but does not claim they are the final word on measuring or describing well-being for children and young people. Greater understanding seems to be their main objective and to this end they suggest:

- That we cannot assume that the factors which affect adults’ subjective well-being also affect children’s subjective well-being in the same way.
- If we want to understand variations in children’s subjective well-being it is essential to also gather information directly from them about their lives, rather than rely on traditional socio-economic variables such as family structure, household income, local area deprivation indexes or GDP per capita.
- Having developed children’s evaluations of their local areas and shown that they are significantly linked with their life satisfaction, the society believes these measures may be valuable for local areas who wish to monitor and improve the quality of life for children.
- There is a need for improved survey research that includes better measures of subjective wellbeing, alongside validated mental ill health measures in order to understand more about the connections between changes in the two aspects.

They conclude by saying that without further developments in monitoring children’s well-being there “Is a real risk that local and national policy developments will reflect the concerns and needs of adults, but not of children”.

Comment
For local authorities (LAs) and their partner agencies there are a number of points in this report that are of relevance. The work the Society has done on linking subjective well-being to
psychological concepts and mental health may be helpful in developing a greater understanding of the risk and resilience factors in children’s lives that can lead to, or prevent, mental health issues developing. Local authorities may find the flourishing and languishing frame of reference helpful. LA’s may also feel that the Society’s points about the strengths and difficulties questionnaire, a tried and tested tool, are also worth reflecting on.

For authorities pursuing neighbourhood based strategies, the Society’s conclusions about factors within local communities that have a significant impact on well-being for children and young people may be of interest. Their conclusions also resonate with those interested in Place Based Health (see Related Briefings below).

Local authorities where customer feedback is an important element of the way they work may want to reflect on the finding that whilst a basket of socio-economic indicators can be helpful in exemplifying adult well-being, for children and young people it will need to focus on issues relevant to them and requires the collation of children’s subjective views.

External Links

UK Data Service: ‘British Household Panel’ Survey
Understanding Society: The UK Household Longitudinal Study
Institute of Education, University College, London: Millennium Cohort Study

Related Briefings

DfE research: wellbeing of young people (August 2016)
Access to Child and Adolescent Mental Health Services: Children’s Commissioner (June 2016)
Mental health and well-being of looked-after children report: Commons Education Committee (May 2016)
Place-based health: step forward local government? (May 2016)
Sport and mental health: tackling stigma and promoting community wellbeing (April 2015)
The role of culture and leisure in improving wellbeing (April 2014)
Child well-being in rich countries: international comparisons Unicef report (May 2013)

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