Health Behaviour in School-aged Children (HBSC) Ireland 2006. Middle Childhood Study: Socio-demographic patterns in the health behaviours, risk behaviours, health outcomes and social contexts of young people’s health

1. What is the study’s background?
This study was funded by the Office of the Minister for Children and Youth Affairs (now the Department of Children and Youth Affairs) under the National Children’s Research Programme. The study was undertaken by Drs. Saoirse Nic Gabhainn, Colette Kelly and Michal Molcho, and Health Behaviour in School-aged Children (HBSC) Ireland, of the Health Promotion Research Centre, School of Health Sciences, National University of Ireland, Galway.* The report was independently peer-reviewed and published in 2009.

2. What is the study’s purpose?
In line with the HBSC Survey, the aim of the Middle Childhood Survey was to increase understanding of the health and well-being of 9-year-olds in Ireland and to use the findings to inform and influence health promotion policy and practice at national level. The objectives of the study were:
» to initiate and sustain research on health behaviour, health and well-being, and their social contexts in 9-year-old school children;
» to contribute to theoretical, conceptual and methodological developments in child research;
» to contribute to the knowledge base in child health;
» to disseminate findings to relevant audiences, including researchers, health and education policy-makers, health promotion practitioners, teachers, parents and young people;
» to establish and strengthen a multidisciplinary international network of experts in this field;
» to provide an international source of expertise and intelligence on child health for public health and health education.

This briefing note summarises the method of research, key findings, conclusions and recommendations of the study. The full report is available on www.dcy.ie and on www.nuigalway.ie/hbsc

3. How was the study undertaken?
The Middle Childhood study is based on self-reported data from school children. Sampling was conducted in order to be representative of the proportion of children in each of the 8 geographical regions, aiming to achieve a nationally representative sample of 9-year-old children. Data from the 2002 Census were employed to provide a picture of the population distribution across geographical regions. The sampling frame consisted of a list of primary schools, which was provided by the Department of Education and * The views expressed in this report are those of the authors and not necessarily those of the Department of Children and Youth Affairs.
Science. Individual schools were randomly sampled, followed by randomly selecting eligible classes within the schools. The classes that were deemed eligible for this study were 3rd and 4th classes. Overall, 3,404 school children from 122 schools participated in the study, with a response rate of 73% of invited schools and 83% of invited school children.

The study used a modified HBSC questionnaire, which was shorter in length to that used for the older children to suit the reading and comprehension abilities of 9-year-olds. The questionnaire was piloted and changes were made accordingly when questions or answering categories seemed too difficult for this younger cohort.

4. What are the key findings?

4.1 General health
The majority of the 9-year-old children reported that their health was good or excellent (95%) and they were feeling quite or very happy (95%). Girls were slightly more likely to report that they were happy, but no gender differences were evident in relation to self-rated health. There was no evidence of a social class gradient effect for self-reports of health or happiness.

4.2 Smoking
Less than 1% of 9-year-old children reported that they were current smokers.

4.3 Food and dietary behaviour
About 30% of 9-year-old children reported that they consumed fruits more than once a day and about 23% consumed vegetables more than once a day, with slightly more girls consuming fruits and vegetables at that frequency compared to boys. Slightly over a quarter of 9-year-olds (28%) reported consuming sweets at least once a day and 18% reported consuming soft drinks once a day or more. A social class gradient was only evident in the consumption of soft drinks, where those from higher social classes consumed less soft drinks.

4.4 Exercise and physical activity
Overall, 79% of 9-year-olds reported being physically active most days of the week and 72% reported participating in vigorous exercise 4 or more times a week, with little gender and no social class effect.

4.5 Self-care
About two-thirds of 9-year-olds (64%) reported brushing their teeth more than once a day, with more girls than boys brushing their teeth regularly. There was a slight social class effect, with more children from higher social classes reporting that they brushed their teeth more than once a day.

The majority of children (88%) reported that they always used a seatbelt when being driven in a car. There was no evidence of gender or social class differences.

4.6 Bullying
About a third of the children (37%) reported that they were bullied in the past couple of months, with no gender or social class effect.

5. What are the conclusions?
This study is one of the first of its kind in investigating the health, well-being and behaviours of school children in 3rd and 4th classes using a self-report questionnaire. Overall, the study reveals that young children in Ireland are faring well, they report good health and happiness, exercise regularly and are rarely involved in risk-taking behaviours. The collection of this data will be repeated in 2010, which will allow conclusions to be drawn on trends in young children’s health and behaviours.

6. What are the recommendations?
A number of recommendations arise from the research, as follows:

1. Food and nutrition
While about a third of the children reported eating fruits and a quarter eating vegetables more than once a day, the majority still do not adhere to the recommended 5-a-day guidelines. It is important that fruit and vegetable consumption is encouraged among young children.

2. Physical activity
It is evident from the study that a large proportion of the children exercised regularly. However, about 20% were not experiencing active lifestyles and efforts should be made to encourage this group to be more active. It is also important to try and maintain this level of activity as children grow into adolescence.
3. Bullying

Over a third of the children reported that they were victims of bullying at least once in the previous couple of months. Given the known short- and long-term consequences of bullying victimisation, it is important that schools put in place policies targeting bullying and address cases as they happen.

7. What are the benefits of the study?

This is the first study collecting data from such a young cohort (9-year-olds). The study adds to the understanding of the experiences of school children in 3rd and 4th classes and, together with the HBSC Survey, adds to the understanding of how children progress as they move from middle childhood to adulthood. The study has provided baseline knowledge of the health of this group and when repeated (in 2010) will serve for surveillance purposes.
Note No. 10 Research Briefing: HBSC IRELAND 2006: MIDDLE CHILDHOOD STUDY

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Check out www.dcya.ie OR www.nuigalway.ie/hbsc for full report of study.