



**Fact Sheet EURO/04/04
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***Young people's health in context: selected key findings
from the Health Behaviour in School-aged Children study***

To chart the links between the life circumstances and young people's health and build a better understanding of the factors that influence their well-being, the Health Behaviour in School-aged Children (HBSC) study conducted a collaborative cross-national survey of over 162 000 young people aged 11, 13 and 15 years in 35 countries and regions¹ in 2001/2002. The WHO Regional Office for Europe has just published the results in *Young people's health in context* (http://www.euro.who.int/eprise/main/WHO/InformationSources/Publications/Catalogue/20040601_1). The information in this international report, received directly from young people themselves, shows how their behaviour and life circumstances mark their health.

Health and well-being

Young people's rating of their health varies widely between countries and regions. Among 15-year-olds, 8–32% of boys and 13–63% of girls report their health to be fair or poor, and girls are more likely than boys to report poorer health in all countries and regions. Levels of poorer health among 15-year-old girls are highest (over 42%) in Latvia, Lithuania, the Russian Federation and Ukraine.

Smoking

All three age groups show large cross-national differences in weekly smoking. At age 15, 11–57% of boys and 12–67% of girls are weekly smokers (most of who smoke daily).

Gender patterning is split geographically, girls having higher rates in western European countries and regions and boys in eastern ones. For example, girls' weekly smoking is lowest (under 15%) among girls in Canada, Poland, Sweden and the United States, the Baltic states and parts of southern Europe. In general, levels are higher in northern and central Europe.

Drinking

Weekly drinking is more widespread among boys than girls, except in a few countries where rates are very similar at 15, such as Norway and the United Kingdom. The average levels among 15-year-olds are 34% for boys and 24% for girls.

¹ Austria, Belgium (the Flemish-speaking and French-speaking areas), Canada, Croatia, the Czech Republic, Denmark, England (the United Kingdom), Estonia, Finland, France, Germany, Greece, Greenland (Denmark), Hungary, Ireland, Israel, Italy, Latvia, Lithuania, Malta, the Netherlands, Norway, Poland, Portugal, the Russian Federation, Scotland (the United Kingdom), Slovenia, Spain, Sweden, Switzerland, The former Yugoslav Republic of Macedonia, Ukraine, the United States of America and Wales (the United Kingdom).

Weekly drinking among boys rises with age:

- to over a tenth in six countries at age 11;
- to a fifth in eight countries at age 13; and
- to over a third in nineteen countries at age 15.

In Denmark, Malta, the Netherlands and the United Kingdom, about half of 15-year-old boys drink weekly. Weekly drinking among 15-year-old girls is especially high in Denmark, the Netherlands and the United Kingdom.

Having been drunk twice or more times is most common among young people in Canada and northern European countries (such as Denmark, Finland, the United Kingdom and the Baltic states) and least common among those in southern Europe. Levels of drunkenness on two or more occasions vary widely among 15-year-olds in the 35 countries and regions surveyed: 17–68% for boys and 6–65% for girls.

Cannabis use by 15-year-olds

Cannabis use varies widely among 15-year-olds: those who have ever used it range from 3% to 46%.

On average, boys are more likely to use cannabis than girls: 22% and 16%, respectively, have used it in the previous 12 months.

Regular use of cannabis (3–39 times in the previous 12 months) is highest (15% or over) in Canada, Spain and Switzerland.

Sexual health of 15-year-olds²

While the average percentage of young people having had sexual intercourse is 20% for girls and 28% for boys, levels vary widely between the countries and regions: from 4% to 79% of girls and 18% to 71% of boys.

In general, rates are lower in eastern and central Europe, and Spain; and higher in Greenland, Ukraine and the United Kingdom.

Reported sexual intercourse shows varying gender patterns. In most countries and regions, rates are higher among boys. Others – including Austria, Belgium (Flemish), Canada, England, the Netherlands and Scotland – show little gender difference. In several countries and regions, including Finland, Germany and Wales, rates are 10% or more higher among girls.

On average, among the sexually active, 70% of girls and 80% of boys report using a condom during their last intercourse. The ranges are quite large, however: 58–89% for girls and 69–91% for boys. Rates are highest in some southern European countries, and lowest in Finland, Germany, Sweden and the United Kingdom.

On average, 85% of girls and 86% of boys report using at least one form of contraception during their last sexual intercourse. Among girls, the rates of contraception use are lowest in Croatia, Hungary, Poland, Scotland and Ukraine (under 75%) and highest rates in the Netherlands (97%) and Switzerland (95%).

² Several countries and regions did not include questions on sexual health.

Physical activity

Young people are recommended to participate in one hour or more of at least moderate physical activity on five or more days a week. Less than half of young people do so in almost every country and region.

Across all countries and regions and all age groups, girls are less active than boys and the gender gap increases with age.

The countries with the highest percentages (over 40%) of boys achieving the recommended amount of physical activity are Canada, the Czech Republic, England, Greenland, Ireland, Lithuania and the United States.

Canada, the Netherlands and the United States have the highest rates of physical activity for 15-year-old girls, with over 36% meeting the guidelines.

Eating habits

Less than two fifths of young people eat fruit daily, and only about a third eat vegetables each day, but there are large variations across countries and regions.

The daily consumption of sweets also varies. Levels for 15-year-olds, for example, range from 40–50% in Belgium (French), Ireland, Israel, Italy, Malta, Scotland and The former Yugoslav Republic of Macedonia to 20% or below in Austria, Denmark, Finland, Greece, Lithuania, Norway and Sweden.

Daily soft-drink consumption by young people aged 11–15 shows similar extremes, with similar groups of countries at the high and low end of the range: for example, over 40% in Israel and Scotland but under 15% in Denmark and Finland.

Body dissatisfaction, dieting and weight control

The extent of dissatisfaction with body size (feeling too fat) varies across countries but is consistently higher among girls than boys, this gender gap widening with age.

On average around a quarter of 11-year-old girls, increasing to over 40% of 15-year-old girls, consider themselves to be too fat; at the extremes, over 50% of 15-year-old girls in Belgium (both Flemish and French), Germany and Slovenia think they are too fat compared with 26% or fewer in the Russian Federation, The former Yugoslav Republic of Macedonia and Ukraine.

Rates of dieting and weight control behaviour are higher in girls than boys at all ages, the gender gap widening with age.

Rates of dieting vary widely across countries among girls (and to a lesser degree among boys). At 15 years, the highest rates of dieting among girls (almost 30% or over) are found in Canada, Denmark, Hungary, the United States and Wales, while 20% of boys in the United States report dieting, compared with 11% or fewer in all other countries.

Overweight

Data presented on overweight and obesity are derived from self-reported height and weight information used to calculate body mass index, not from actual measurements, and so need to be treated with some caution. In some countries and regions, many young people did not supply this information and so reports are only on those who did. The general term “overweight” includes

two groups: those who are considered obese and those who are considered overweight but not obese.

The percentage of 13- and 15-year-old boys and girls who are overweight ranges from 3% to 35% across countries and regions. Canada, Greenland, Malta, the United States and Wales have among the highest rates.

Oral health

Regular (more than once a day) tooth brushing is not the norm in all countries. Across the three age groups, the range among boys and girls is between 12% (15-year-old boys in Malta) and 91% (13-year-old girls in Switzerland).

The highest levels of tooth brushing are found in Denmark, Norway, Switzerland and Sweden; in general there is little change with age in this behaviour, but girls tend to brush their teeth more often than boys.

Bullying and fighting

Levels of bullying (at least twice a month) range from 1% to 50% across all countries and regions and age/gender groups.

The survey's averages show bullying to be higher among boys than girls and to increase slightly between 11 and 15 years of age.

Levels of bullying remain consistent across age groups in certain countries. For example, the Czech Republic, Ireland, Malta, Scotland, Slovenia, Sweden and Wales have consistently low levels, while Austria, Greenland and Lithuania have consistently high levels. Levels of being bullied show similar patterns, although the gender difference is smaller.

Levels of physical fighting also show cross-national variation and marked gender differences, with very low levels of fighting among girls. The highest levels of fighting at 13 and 15 years are consistently reported in Estonia and Lithuania; while consistently low levels at all ages are reported in Finland, Germany and The former Yugoslav Republic of Macedonia.

Injuries

Over 40% of 11–15-year-olds sustained injuries requiring medical attention once or more in the previous 12 months.

Young people's life circumstances: family, school, peers

Levels of family affluence among young people vary between and within countries and regions. While around 40% in all countries live in families of middle affluence, the proportion living in relatively low affluence varies. For example, in the wealthier countries such as Canada, Norway, Sweden and the United States, this figure is under 15%, but in less wealthy countries 50–75% fall into this category: Ukraine 73%, the Russian Federation 58% and Lithuania 53%.

Young people from less affluent families report poorer health than those from more affluent backgrounds. Those from more affluent families are more likely to report taking part in regular physical activity.

While most young people live with both parents, the extent of other family arrangements differs across countries, one-parent families and step-families being the most common. In Canada, the

United Kingdom, the United States and a number of other countries and regions in northern and western Europe, 60–75% of young people live with both parents, and 16–20% live with a single parent. This contrasts with countries in southern and eastern Europe, including Greece, Italy, Malta and The former Yugoslav Republic of Macedonia, where over 90% live with both parents.

Reports of how easy young people find it to talk to their parents about things that really bother them vary across countries. For example, from 67% of 15-year-olds in the United States to 90% in The former Yugoslav Republic of Macedonia find it easy to talk to their mother. While no gender difference is observed in the ease with which young people talk to their mothers, girls find it less easy to talk to their fathers than do boys, this gender gap increasing with age. Consistent across all countries is that fewer 15-year-olds talk easily with their parents than do 11- or 13-year-olds, yet their need for parental support persists.

Ease of communication with parents is related to better reported health and lower rates of smoking.

Peers are a key source of support for young people, although excessive time spent with peers is also associated with increased risky behaviour. Time spent socializing increases with age and is greater among boys; but there are large differences across countries, with adolescents in northern Europe apparently spending more time socializing with friends in the evenings than those in southern Europe.

Electronic communication, which increases with age, shows the opposite gender pattern to going out with friends. At all ages, girls are more likely than boys to phone, e-mail or text friends; and the highest levels of this form of communication are reported in countries where going out with friends in the evening is less common, such as Croatia and Greece.

Positive perceptions of school are associated with better life satisfaction, fewer health problems and less risk of smoking. But the extent to which young people report positive school experiences varies with age, gender and country or region. Younger children are more likely to report liking school a lot than older children (over 30% of 11-year-olds compared with under 18% of 15-year-olds).

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