



## HBSC Briefing Paper 25

# Self-confidence and social well-being in Scottish adolescents

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March 2016

Extensive research has analysed the role played by feelings of confidence, social isolation and school-related pressure in adolescent daily functioning<sup>1</sup>. For many adolescent behaviours, social context and social acceptance play an important role<sup>2</sup>. Adolescents go through a period of social reorientation where the opinions of peers can become more important compared to those of family members<sup>3</sup>. In this context, some of the main drivers for risky adolescent behaviours arise from the desire to be accepted by one's peers, and avoid social rejection and exclusion<sup>4</sup>. Self-confidence, as another driver of adolescent well-being, is important and undergoes developmental change during this period. High levels of self-confidence are associated with lower levels of loneliness and increased levels of psychological well-being. Moreover, school-related stress had been related with increased likelihood for experiencing problems such as headaches, backaches and dizziness<sup>5</sup>.

## Summary of key findings

- When asked how often they felt confident, fewer than one in five (16%) of adolescents answered "always"; this proportion has declined in each survey since 2002.
- Since 1994, boys and younger age groups have consistently reported higher levels of confidence.
- When asked how often they felt left out or excluded, fewer than one in five (17%) adolescents answered "never"; this proportion has declined in both 2010 and 2014.
- Fewer girls than boys report "never" feeling left out and prevalence declines with age.
- Two-fifths (41%) of adolescents reported feeling pressure from school work.
- Girls and older adolescents reported higher levels of pressure from school work; the percentage of 15-year old girls reporting such pressure has risen steeply from 40% in 2006, to 55% in 2010 and to 80% in the latest 2014 survey.

## The Scottish context

The Scottish Government identifies school as an important setting which influences young people's physical, mental and emotional health: as indicated in *Delivering a Healthy Future: An Action Framework for Children and Young People's Health in Scotland*<sup>6</sup>. The school curriculum in Scotland underwent major revision with the implementation of a unified Curriculum for Excellence for all learners aged 3-18 in 2010<sup>7</sup>. Health and wellbeing is one of the eight curriculum areas within Curriculum for Excellence<sup>8</sup>. Moreover, improving the lives of girls and women is an identified Government priority through the program Women's Fund Scotland, where a special focus is placed on promoting health and well-being, as well as building skills and confidence<sup>9</sup>.

†The 2014 HBSC Survey in Scotland was funded by NHS Health Scotland.

Thanks to other members of the HBSC Scotland team: Dorothy Currie, Karen Hunter, Fergus Neville and Ross Whitehead.

## Confidence (always feeling confident)

- In 2014, 16% of adolescents reported that they "always" felt confident. (Figure 1)
- Across all six survey years, more boys than girls reported that they "always" feel confident, with the highest proportion in 2002 (27% boys and 15% girls) and lowest proportion in 2014 (21% boys and 11% girls)

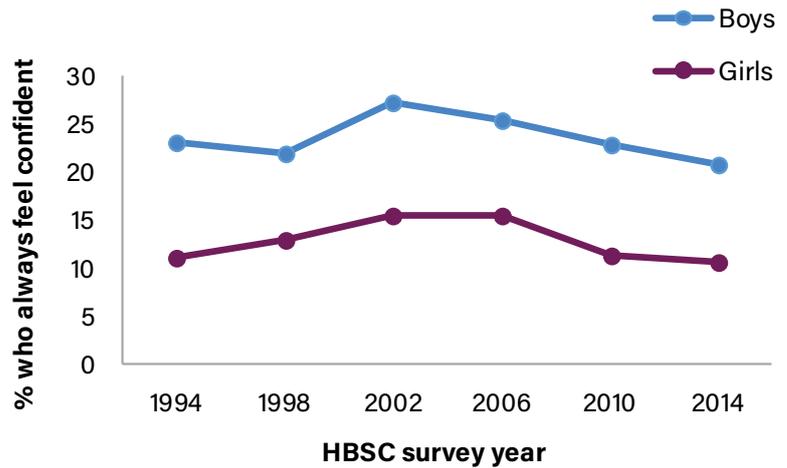


Figure 1. Always feel confident by gender and survey year

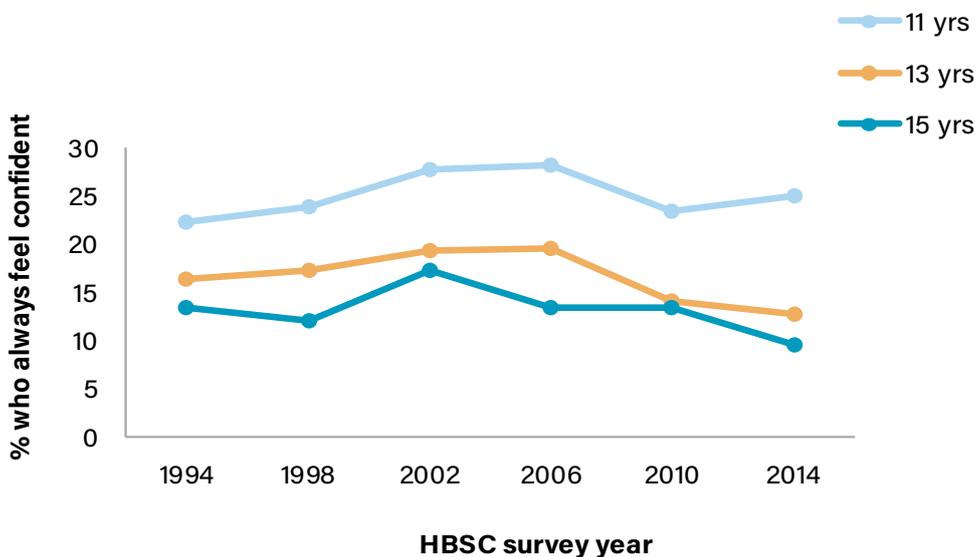


Figure 2. Always feel confident by age and survey year

- The likelihood of "always" feeling confident decreases with age (i.e. 25% of the 11-year olds in 2014; compared to only 9% of 15-year olds). (Figure 2)
- The lowest prevalence was found among by the 15 year-old girls across all 6 survey cycles (4.2% in 2014). (See Figure 2A- in BP25 Supplement<sup>a</sup>)

## Feeling left out

- In 2014, 17% of Scottish adolescents said that they have "never" felt left out (21% boys and 13% girls). (Figure 3)
- Across all five survey years since 1998, a greater proportion of boys than girls reported that they had "never" felt left out; with the lowest levels in 2014.

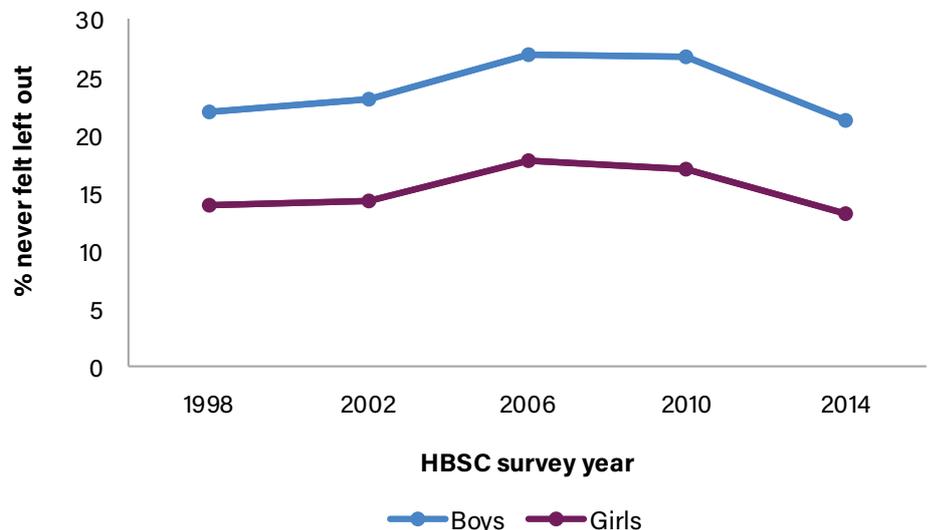


Figure 3. Never feel left out by gender and survey year

- Compared to 15-year olds, 11-year olds were more likely to report that they had "never" felt left out across all survey years since 1998. (Figure 4)

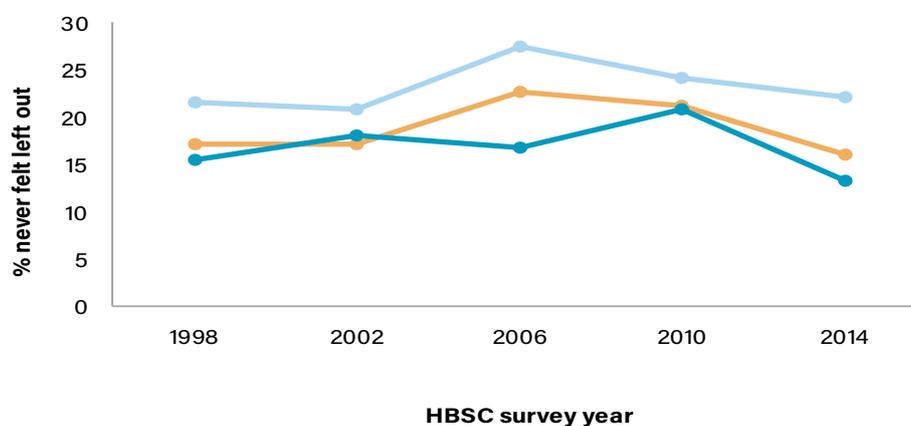


Figure 4. Never feel left out by age and survey year

## Pressured by school work

- In 2014, four out of ten adolescents (41%) reported that they felt "some" or "a lot" of pressure from school work. (Figure 5)
- Across all survey years, girls were more likely to say that they felt pressured by school work, with the highest levels being reported in 2014 (37% boys and 46% girls) (*also see Figure 6A of BP25 Supplement*).
- The highest levels of school work-related pressure were reported by 15-year olds, where in 2014 60% of the boys and 80% of the girls indicated that they felt pressured by their school work.
- From 2006 onwards, 15-year olds (both boys and girls) reported an increase in feeling "some" or "a lot" of pressure from school work. An upward trend was also observed for 13-year old girls from 2006 onwards.

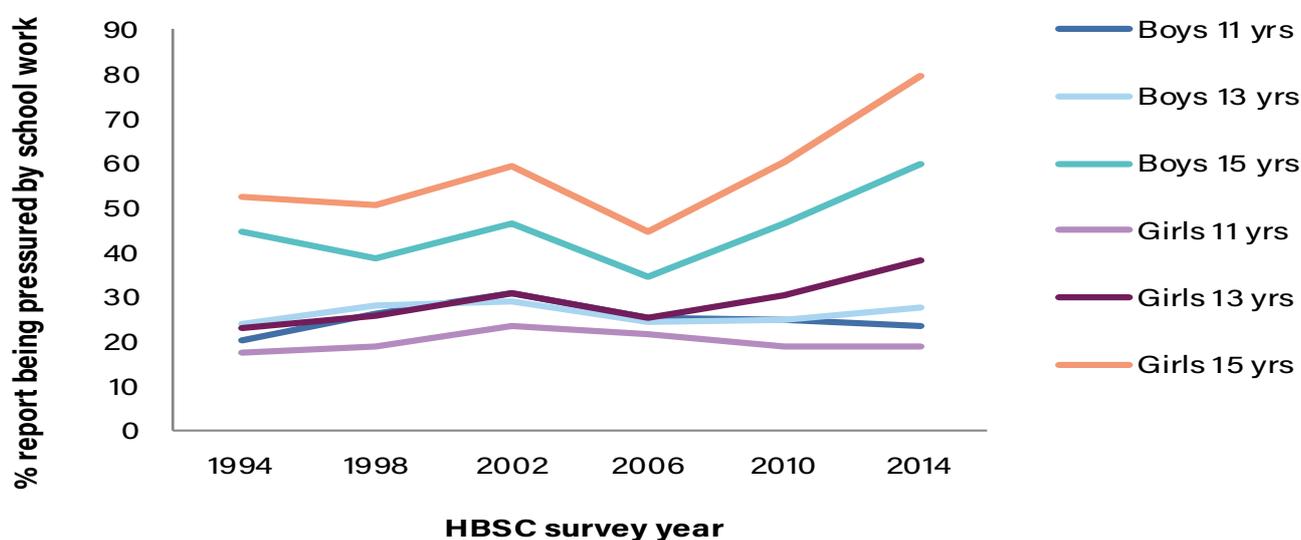


Figure 5. Feeling pressured by school work, by age, gender and survey year

## Methods

Between January and June 2014, a nationally representative sample of 10,839 Scottish school children (aged 11, 13 and 15 years) completed the Health Behaviour in School-aged Children (HBSC) survey as part of the HBSC: WHO Collaborative Cross-National Study in 42 countries. This Briefing Paper examines the findings from the 2014 Scottish HBSC survey using three indicators of general well-being and health: self-confidence, feeling left out, and schoolwork pressure.<sup>11</sup>

## Background

Exposure to social isolation during adolescence increases the likelihood of depressive behaviours<sup>11</sup>. During this developmental period, a desire for peer acceptance and avoidance of social exclusion may lead to risky behaviours<sup>2</sup>. In other studies, exclusion from peer groups has been associated with negative outcomes for adolescents, ranging from social withdrawal and anxiety, to depression<sup>12</sup>. High levels of school pressure have also been positively associated with psychological complaints and psychosomatic problems<sup>13</sup>.

## Discussion of key findings

This Briefing Paper presents indicators of social well-being and health among Scottish adolescents. Analysing trends over time for these behaviours shows that 2014 saw the lowest levels of “always” feeling confident (since 1994) and “never” feeling left out (since 1998). For these two dimensions of adolescents’ lives, the overall relationship with age was very similar: younger children felt more confident and less excluded. A pattern similar to other well-being indicators emerged for 15-year old girls: across all survey cycles they had the lowest levels of self-confidence with a consistent decrease since 2002 onwards. Similarly, older girls reported the highest levels of school pressure as well as the highest levels of feeling left out. The research literature supports these findings, with female adolescents consistently presenting the lowest levels of well-being<sup>14</sup>. Possible explanations for this pattern could be based on the societal changes that may negatively affect women, for example changing media and consumer culture<sup>15</sup>, as well as the changing nature of transitions and cultural expectations for adolescent girls. Moreover, girls appear to be more negatively influenced by school performance and pressure than boys, they are also exposed to earlier sexualisation compared to previous generations, which may be associated with low self-esteem and depression.

## References

1. Sawyer SM, Afifi RA, Bearinger LH, Blakemore SJ, Dick B, Ezeh AC, Patton GC. Adolescence: a foundation for future health. *The Lancet*. 2012 May 4;379(9826):1630-40.
2. Larson RW, Richards MH, Moneta G, Holmbeck G, Duckett E. Changes in adolescents’ daily interactions with their families from ages 10 to 18: Disengagement and transformation. *Developmental Psychology*. 1996 Jul;32(4):744.
3. Sebastian CL, Tan GC, Roiser JP, Viding E, Dumontheil I, Blakemore SJ. Developmental influences on the neural bases of responses to social rejection: implications of social neuroscience for education. *Neuroimage*. 2011 Aug 1;57(3):686-94.
4. Cheng H, Furnham A. Personality, peer relations, and self-confidence as predictors of happiness and loneliness. *Journal of Adolescence*. 2002 Jun 30;25(3):327-39.
5. Torsheim T, Wold B. School-Related Stress, School Support, and Somatic Complaints A General Population Study. *Journal of Adolescent Research*. 2001 May 1;16(3):293-303.
6. Scottish Executive (2007). *Delivering a Healthy Future: An Action Framework for Children and Young People’s Health in Scotland*. Edinburgh: Scottish Executive.
7. Education Scotland (2015). *What is Curriculum for Excellence?* <http://www.educationscotland.gov.uk/learningandteaching/thecurriculum/whatiscurriculumforexcellence/> . Accessed July 2015
8. Education Scotland (2015). *Curriculum Areas*. <http://www.educationscotland.gov.uk/learningandteaching/curriculumareas/> Accessed July 2015
9. Women for Scotland (2015). <http://www.womensfundscotland.org/about/about-womens-fund-for-scotland-2/> Accessed July 2015
10. CAHRU (2015). *HBSC Scotland’s 2013/14 national questionnaire*. Available at: <http://www.cahru.org/content/03-publications/03-briefing-papers-and-factsheets/briefing-papers-and-factsheets/14-scottish-questionnaire>
11. Leussis MP, Andersen SL. Is adolescence a sensitive period for depression? Behavioral and neuroanatomical findings from a social stress model. *Synapse*. 2008 Jan 1;62(1):22-30.
12. Leary MR, Twenge JM, Quinlivan E. Interpersonal rejection as a determinant of anger and aggression. *Personality and Social Psychology Review*. 2006 May 1;10(2):111-32.
13. Hjern, Anders, Gösta Alfven, and Viveca Östberg. “School stressors, psychological complaints and psychosomatic pain.” *Acta Paediatrica* 971 (2008): 112-117.
14. Bor W, Dean AJ, Najman J, Hayatbakhsh R. Are child and adolescent mental health problems increasing in the 21st century? A systematic review. *Australian and New Zealand Journal of Psychiatry*. 2014 May 14;0004867414533834.
15. Hamilton M. *What’s happening to our girls?*. Penguin UK; 2009 Jun 29.