Establishing a core set of national, sustainable mental health indicators for children and young people in Scotland: Final Report

Appendices

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Appendix 1 Advisory Group Membership

Tam Baillie	Assistant Director (Policy and Influencing), Barnardo's (Scotland) (member until April 2009)
Dr Graham Bryce	Consultant Child and Adolescent Psychiatrist, NHS Greater Glasgow and Clyde, and Scottish Government Advisor (member until June 2010)
Professor David Cottrell	Professor Child and Adolescent Psychiatry, University of Leeds
James Cox	Advisor to Getting it Right for Every Child, Children, Young People and Social Care, Scottish Government (member from June 2009)
Brian Donnelly	Director RespectMe (member from June 2009)
Anne-Marie Dorrian	Education Analytical Services Division, Children, Young People and Social Care, Scottish Government (member from December 2010)
Dr Susan Elsley	Independent Consultant and Senior Research Fellow, The Centre for Research on Families and Relationships (CRFR), University of Edinburgh (member from September 2009)
Professor Peter Fonagy	Freud Memorial Professor of Psychoanalysis, Director of the Research Department of Clinical, Educational and Health Psychology, University College London
Dr Lynne Friedli	Mental Health Promotion Specialist
Rod Harrison	Head of Analytical Services, Children Young People and Social Care Directorate, Scottish Government (member from March 2009)
Emma Hogg	Head of Population Mental Health, Mental Health Division, Primary and Community Care Directorate, Scottish Government (member until September 2009)
Trevor Lakey	Health Improvement and Inequalities Manager (Mental Health Partnership) Greater Glasgow and Clyde NHS Board
Karen Lax	Team Leader - Stakeholder Engagement, Young People and Social Care Directorate, Scottish Government (member until November 2008)
Susan Leslie	Development Officer, Mental Health and Emotional Wellbeing, Learning and Teaching Scotland (member until December 2010)
Dr Yvonne Kelly	Senior Lecturer in Epidemiology and Public Health: representing ESRC Research Centre (member until September 2010)
Boyd McAdam	Branch Head Getting it Right for Every Child, Children, Young People and Social Care, Scottish Government (member from March 2009)
Dr Allyson McCollam (Chair)	Health Improvement Lead - Children and Young People and Mental Health, NHS Borders
Professor Howard Meltzer	Professor of Mental Health and Disability, University of Leicester
Dr Helen Minnis	Senior Lecturer Child and Adolescent Psychiatry, University of Glasgow (member until June 2009)
Graham Monteith	CAMHS Nurse Advisor, Scottish Government (member from December 2010)

Dr Janine Muldoon	Research Fellow, Child and Adolescent Health Research Unit, University of Edinburgh
Iain Ramsey	Health & Well being Team Leader, Learning and Teaching Scotland (member from October 2009)
Gavin Russell	Mental Health Division, Primary and Community Care Directorate, Scottish Government (member from September 2009)
Dr Jonathan Sher	Director of Research, Policy and Practice Development Children in Scotland
Professor Sarah Stewart-Brown	Director of the Health Sciences Research Institute, Chair of Public Health, University of Warwick
Dr Helen Sweeting	Research Scientist, MRC Social and Public Health Sciences Unit
Dr Kay Tisdall	Senior Lecturer Social Policy, and Associate Researcher, Centre for Research on Families and Relationships (member until September 2009)
Jonathan Wright	Principal Research Officer, Public Health and Sport Team, Health Analytical Services Division, The Quality Unit, Scottish Government

The Advisory Group contributed to shaping the Children and Young People's mental health indicators work from the first meeting in October 2008. Membership changed during the course of the work but even in instances where individuals were no longer able to continue formal membership, they continued to contribute their expertise to the indicator development.

Appendix 2 Elements of Mental Wellbeing used in the Adult Mental Health Indicators Work

For the adult indicators, mental wellbeing (positive mental health) was considered to consist of subjective wellbeing (affect and life satisfaction), and psychological wellbeing (which covers a wider range of cognitive aspects of mental health than affect and life satisfaction) (Parkinson, 2007b). This equates to the elements below (Table 2) and covers both the hedonic and eudaimonic perspectives.

Table 2: Elements of mental wellbeing used in the indicators work

Mental wellbeing
Subjective Wellbeing (Hedonic)
Affect – feelings, emotions and moods (importantly the presence of positive affect and absence of negative affect)   **Life Satisfaction –** cognitive evaluation of one's life
Psychological Wellbeing* (Eudaimonic)
Self-acceptance - feeling good about yourself whilst being aware of your limitations   This equates to possessing a positive attitude towards oneself, recognising various parts of oneself, such as one's good and bad qualities, feeling self-confident and accepting one's past life and all its positive and negative experiences.   **Positive Relations with Others** - seeking to develop and maintain warm and trusting inter-personal relationships   This equates to possessing warm and trusting relationships with others, being capable of strong empathy, affection and intimacy.   **Environmental Mastery** - shaping the environment so as to meet personal needs and desires   This equates to taking advantage of environmental opportunities, of participating in work and familial activities and of possessing a sense of competence in managing everyday activities.   **Autonomy -** sustaining individuality within a larger social context, seeking a sense of self-determination and personal authority   This equates to independence, self-determination and the ability to resist social pressure to think or act in certain ways. A person with autonomy possesses an internal locus of control and can evaluate the self by a personal standard.   **Purpose in Life** - endeavouring to find meaning in one's efforts and challenges   This equates to having goals, intentions and a sense of direction which contributes to the feeling that life is meaningful.   **Personal Growth** - making the most of one's talents and capacities   This equates to being open to new experiences, being capable of facing challenges and tasks at different periods of life and considering the self as growing and expanding over time (process of self-realisation).

* six elements from Ryff's model of psychological wellbeing which cover positive psychological functioning and a wider range of cognitive aspects of mental health (Ryff, 1989; Ryff and Keyes, 1995).

Appendix 3 Indicators List

High Level Constructs

Indicator	Measure	Data source
Mental wellbeing		
Mental wellbeing	• Mean score for 16 and 17 year olds on the Warwick-Edinburgh Mental Well-being Scale (WEMWBS)[1] • Mean score for S2 and S4 pupils on the Warwick-Edinburgh Mental Well-being Scale (WEMWBS)[1, 2] • *Assessment of mental wellbeing of children aged 8 to 13 years old* [R3] • *Assessment of mental wellbeing of children at entry to P1* [R, 2] • *Assessment of mental wellbeing of children aged from 24 to 30 months* [R]	• Scottish Health Survey • Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) • *No suitable data source identified* • *No suitable data source identified* • *No suitable data source identified*
Life satisfaction	• Mean score of how satisfied 16 and 17 year olds are with their life as a whole nowadays[1] • Mean score for P7, S2 and S4 pupils on an adapted Cantril ladder (rating of whether an individual perceives they have the best or worst possible life for them at the moment)[1, 2]	• Scottish Health Survey • Health Behaviour in School-aged Children Survey (HBSC)
Happiness	• Percentage of P7, S2 and S4 pupils who feel very happy with their life at present[2]	• HBSC
Pro-social behaviour	• Percentage of S2 and S4 pupils with a 'normal' score on the pro-social scale of the Strengths and Difficulties Questionnaire (SDQ)[2] • Percentage of 4 to 12 year olds with a 'normal' score on the pro-social scale of the Strengths and Difficulties Questionnaire (SDQ)[4]	• SALSUS • Scottish Health Survey
Mental health problems		
Common mental health problems	• Percentage of 16 to 19 year olds who score 4 or more on the General Health Questionnaire-12 (GHQ-12) (a score of 4 or more indicates a possible mental health problem over the past few weeks)	• Scottish Health Survey
Emotional and behavioural problems	• Percentage of S2 and S4 pupils with a 'borderline' or 'abnormal' total difficulties score on the Strengths and Difficulties Questionnaire (SDQ)[2] • Percentage of 4 to 12 year olds with a 'borderline' or 'abnormal' total difficulties score on the Strengths and Difficulties Questionnaire (SDQ)[4] • *Assessment of emotional and behavioural problems of children aged from 24 to 30 months* [R]	• SALSUS • Scottish Health Survey • *No suitable data source identified*

Indicator	Measure	Data source
Mental health problems - continued		
Emotional symptoms	• Percentage of S2 and S4 pupils with a 'borderline' or 'abnormal' score on the emotional symptoms scale of the Strengths and Difficulties Questionnaire (SDQ)[2] • Percentage of 4 to 12 year olds with a 'borderline' or 'abnormal' score on the emotional symptoms scale of the Strengths and Difficulties Questionnaire (SDQ)[4]	• SALSUS • Scottish Health Survey
Conduct problems	• Percentage of S2 and S4 pupils with a borderline' or abnormal' score on the conduct problems scale of the Strengths and Difficulties Questionnaire (SDQ)[2] • Percentage of 4 to 12 year olds with a 'borderline' or 'abnormal' score on the conduct problems scale of the Strengths and Difficulties Questionnaire (SDQ)[4]	• SALSUS • Scottish Health Survey
Hyperactivity/ inattention	• Percentage of S2 and S4 with a 'borderline' or 'abnormal' score on the hyperactivity/inattention scale of the Strengths and Difficulties Questionnaire (SDQ)[2] • Percentage of 4 to 12 year olds with a 'borderline' or 'abnormal' score on the hyperactivity/inattention scale of the Strengths and Difficulties Questionnaire (SDQ)[4]	• SALSUS • Scottish Health Survey
Sadness	• Percentage of P7, S2 and S4 pupils who felt sad quite often, very often or always in the last week[2]	• HBSC
Alcohol dependency	• Percentage of 16 to 19 year olds who score 2 or more on the CAGE questionnaire (a score of 2 or more indicates possible alcohol dependency in the previous 3 months)	• Scottish Health Survey
Drug-related disorders	• Hospital patients per 100,000 children and young people aged 19 years and under discharged in the past year for mental and behavioural disorders due to psychoactive substance use (general acute and psychiatric hospitals)[5]	• ISD Scotland, SMR01/04
Suicide	• Deaths per 100,000 children and young people aged 19 years and under in the past year from intentional self-harm or by events of undetermined intent	• National Records of Scotland
Self-harm [R]	• *Incidence rate of intentional self-harm (self-poisoning or self-injury irrespective of the apparent purpose of the act, excludes self-harm through substance misuse, accidental self-harm and self-harm related to eating disorders) in the past year in children and young people aged 17 years and under*	• *No suitable data source identified*
Eating disorders [R]	• *Prevalence of eating disorders in children and young people aged 17 years and under*	• *No suitable data source identified*

Contextual Constructs

Individual		
Indicator	**Measure**	**Data source**
Learning and development		
Play [R]	• *Assessment of encouragement, support, and ability to access imaginative, spontaneous indoor and outdoor play* • *Assessment of time spent in spontaneous play*	• *No suitable data source identified* • *No suitable data source identified*
Readiness for school [R]	• *Assessment of readiness for school in P1 pupils, which covers cognitive functioning, communication (ability to understand and to use spoken language) and development[2]*	• *No suitable data source identified*
Healthy living		
Physical activity	• Percentage of 5 to 15 year olds who met the recommended level of physical activity for children (at least 60 minutes of physical activity on all 7 days in the last week) in the previous week[6]	• Scottish Health Survey
Healthy eating	• Percentage of 16 and 17 year olds who ate five or more portions of fruit and vegetables in the previous day • Percentage of 2 to 15 year olds who ate five or more portions of fruit & vegetables in the previous day[6] • Percentage of P7, S2 and S4 pupils who usually have breakfast every weekday[2]	• Scottish Health Survey • Scottish Health Survey • HBSC
Obesity	• Percentage of 2 to 15 year olds classified as obese or morbidly obese (BMI ≥95th Centile of the 1990 UK reference data)	• Scottish Health Survey
Alcohol consumption	• Percentage of S2 and S4 pupils who drank alcohol in the last week[2, 7] • Percentage of P7 pupils who drink anything alcoholic every week[2] • Mean number of units drunk by S2 and S4 pupils in the last week[1, 2, 7]	• SALSUS • HBSC • SALSUS
Drug use	• Percentage of S2 and S4 pupils who usually take illicit drugs at least once a month[2]	• SALSUS
Smoking	• Percentage of 16 and 17 year olds who smoke cigarettes nowadays • Percentage of S2 and S4 pupils who usually smoke at least one cigarette a week[2] • Percentage of P7 pupils who smoke at least once a week[2]	• Scottish Household survey • SALSUS • HBSC
Sexual health	• Pregnancies (registered births and stillbirths combined with notifications of abortions) in children and young people aged 15 years and under per 1,000 females aged 13 to 15 years old in the past year • Percentage of S4 pupils, who reported having had sexual intercourse, who used a condom on the last occasion that they had sexual intercourse[2]	• ISD Scotland www.isdscotland.org/ Health-Topics/Maternity-and-Births/Teenage-Pregnancy/ • HBSC

Individual		
Indicator	**Measure**	**Data source**
General health		
Self-reported health	• Percentage of 16 and 17 year olds who perceive their health in general to be good or very good • Percentage of children and young people aged 15 years and under whose health in general is perceived to be good or very good[6]	• Scottish Health Survey • Scottish Health Survey
Long-standing physical condition or disability	• Percentage of 16 and 17 year olds who have a long-standing physical condition or disability that has troubled them for at least 12 months, or is likely to affect them for at least 12 months • Percentage of children and young people aged 15 years and under who have a long-standing physical condition or disability that has troubled them for at least 12 months, or is likely to affect them for at least 12 months[6]	• Scottish Health Survey • Scottish Health Survey
Limiting long-standing physical condition or disability	• Percentage of 16 and 17 year olds who have a long-standing physical condition or disability that limits their daily activities • Percentage of children and young people aged 15 years and under who have a long-standing physical condition or disability that limits their daily activities[6]	• Scottish Health Survey • Scottish Health Survey
Spirituality		
Spirituality [R]	• *Assessment of spirituality*	• *No suitable data source identified*
Emotional intelligence		
Emotional intelligence [R]	• *Assessment of emotional intelligence*	• *No suitable data source identified*
Life events		
Stressful life events [R]	• *Percentage of children and young people who have experienced three or more stressful life events*	• *No suitable data source identified*
Adverse childhood experiences [R]	• *Percentage of children and young people who have experienced one or more adverse childhood experiences*	• *No suitable data source identified*

Family		
Indicator	**Measure**	**Data source**
Family relations		
Parent-child relationship [R]	• *Percentage of children aged from birth to 3 years with a positive parent-child relationship[8]*	• *No suitable data source identified*
Nurturing adult [R]	• *Percentage of children and young people aged 17 years and under who have at least one caring, competent, consistent adult who they can confide in*	• *No suitable data source identified*
Family meals	• Percentage of P7, S2 and S4 pupils who eat a meal with one or both parents 4 or more times a week[2]	• HBSC
Talking to parents	• Percentage of P7, S2 and S4 pupils who find it very easy or easy to talk to their mother or stepmother (or father's partner) about things that really bother them[2]	• HBSC
	• Percentage of P7, S2 and S4 pupils who find it very easy or easy to talk to their father or stepfather (or mother's partner) about things that really bother them[2]	• HBSC
Treatment by parent(s)	• Percentage of P7, S2 and S4 pupils who felt that their parent(s) treated them fairly very often or always in the last week[2]	• HBSC
Parental discord [R]	• *Assessment(s) of the impact of parental discord on children and young people, measured by features of the parental discord such as frequency, intensity and resolution, threat to the child and self-blame felt by the child*	• *No suitable data source identified*
Caring for a family member [R]	• *Assessment of whether older children and young people with significant caring responsibilities perceive their caring experience as negative*	• *No suitable data source identified*
	• *Assessment of whether older children and young people with significant caring responsibilities perceive their caring experience as positive*	• *No suitable data source identified*
Family structure		
Lone parent family	• Percentage of children and young people aged 17 years and under living in lone parent households	• Scottish Household Survey
Contact with non-resident birth parent [R]	• *Percentage of children and young people in frequent contact with their non-resident birth father*	• *No suitable data source identified*
	• *Percentage of children and young people in frequent contact with their non-resident birth mother*	• *No suitable data source identified*
Teenage parents	• Live births per 1,000 females aged 15 years and under in the past year	• National Records of Scotland
Parental imprisonment	• Children and young people who had a father in prison per 1,000 aged 17 years and under in the past year[9]	• Scottish Prison Survey[10]
	• Children and young people who had a mother in prison per 1,000 aged 17 years and under in the past year[9]	• Scottish Prison Survey[10]

Family		
Indicator	**Measure**	**Data source**
Parental healthy living		
Maternal smoking in pregnancy	• Percentage of mothers who smoked during pregnancy (women recorded as 'current smoker' at antenatal booking appointment) in the past year	• ISD Scotland, SMR02
Maternal alcohol use in pregnancy [R]	• *Percentage of mothers who drank alcohol during pregnancy* • *New-borns affected by alcohol (with foetal alcohol spectrum disorder)*	• *No suitable data source identified* • *No suitable data source identified*
Maternal drug use in pregnancy [R]	• *Percentage of mothers who took drugs during pregnancy*	• *No suitable data source identified*
Parental problematic alcohol consumption [R]	• *Prevalence of children and young people aged 15 years and under affected by parental alcohol misuse* [11, 12]	• *Scottish Government, Scottish Health Survey analysis in development*
Parental problematic drug use [R]	• *Prevalence of children and young people aged 15 years and under affected by parental drug misuse* [11, 12]	• *ISD Scotland and Scottish Government analysis in the future*
Parental health		
Parental mental wellbeing	• Mean score for parents of children aged 15 years and under on the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) [1, 12] • *Assessment of mother's mental wellbeing during pregnancy* [R]	• Scottish Health Survey • *No suitable data source identified*
Parental common mental health problems	• Percentage of children and young people aged 15 years and under who have a parent who scores 4 or more on the General Health Questionnaire-12 (GHQ-12) (a score of 4 or more indicates a possible mental health problem over the past few weeks) [12] • *Percentage of mothers who had a common mental health problem during pregnancy* [R]	• Scottish Health Survey • *No suitable data source identified*
Postnatal depression [R]	• *Percentage of mothers who had postnatal depression* • *Percentage of fathers who had postnatal depression*	• *No suitable data source identified* • *No suitable data source identified*
Parental alcohol dependency	• Percentage of children and young people aged 15 years and under who have a parent who scores 2 or more on the CAGE questionnaire (a score of 2 or more indicates possible alcohol dependency in the previous 3 months) [12]	• Scottish Health Survey
Parental limiting long standing physical condition or disability	• Percentage of children and young people aged 15 years and under who have a parent with a long-standing physical condition or disability that has troubled them for at least 12 months, or is likely to affect them for at least 12 months, which limits their daily activities [12]	• Scottish Health Survey

Learning environment		
Indicator	**Measure**	**Data source**
Engagement with learning		
Pre-school home learning environment [R]	• *Assessment of the pre-school home learning environment*	• *No suitable data source identified*
School attendance	• Percentage school attendance by primary and secondary pupils in the past year	• Scottish Government School Education Statistics
Liking of school	• Percentage of S2 and S4 pupils who like school a lot or a bit at the moment[2] • Percentage of P7 pupils who like school a lot or a bit at present[2]	• SALSUS • HBSC
Peer and friend relationships		
Early years friendships [R]	• *Assessment of the ability of children aged 3 to 4 years old to form and maintain friendships*	• *No suitable data source identified*
Close friends	• Percentage of S2 and S4 pupils who have at least three or more close friends[2] • Percentage of P7 pupils) who have at least three or more close friends[2]	• SALSUS • HBSC
Relationship with best friend	• Percentage of P7, S2 and S4 pupils who find it very easy or easy to talk to their best friend about things that really bother them[2]	• HBSC
Peer relationship problems	• Percentage of S2 and S4 pupils with a 'borderline' or 'abnormal' score on the peer relationship problems scale of the Strengths and Difficulties Questionnaire (SDQ)[2] • Percentage of 4 to 12 year olds with a 'borderline' or 'abnormal' score on the peer relationship problems scale of the Strengths and Difficulties Questionnaire (SDQ)[4]	• SALSUS • Scottish Health Survey
Acceptance by peers	• Percentage of P7, S2 and S4 pupils who strongly agree or agree that other pupils accept them as they are[2]	• HBSC
Experience of being bullied	• Percentage of P7, S2 and S4 pupils who haven't been bullied at school in the past couple of months[2]	• HBSC
Participation in bullying	• Percentage of P7, S2 and S4 pupils who haven't taken part in bullying another pupil(s) at school in the past couple of months[2]	• HBSC

Learning environment		
Indicator	**Measure**	**Data source**
Educational environment		
Treatment by teachers	• Percentage of P7, S2 and S4 pupils who strongly agree or agree that their teachers listen to how they would like to do things[2]	• HBSC
Relationship with teachers	• Percentage of P7, S2 and S4 pupils who strongly agree or agree that their teachers care about them as a person[2]	• HBSC
Relationship with all school staff [R]	• *Assessment of pupil's perception of their relationship with all school staff*	• *No suitable data source identified*
Control at school	• Percentage of P7, S2 and S4 pupils who strongly agree or agree that their teachers provide them with choice and options[2]	• HBSC
School ethos	• Percentage of P7, S2 and S4 pupils who strongly agree or agree that the students in their class(es) treat each other with respect[2]	• HBSC
	• *Percentage of pupils who feel that their school acknowledges a range of indicators of success at school, not just academic [R]*	• *No suitable data source identified*
	• Percentage of parents with school-aged children who strongly or tend to agree that the school keeps them well informed about their child's progress	• Scottish Household Survey
	• *Assessment of the overall school ethos covering such things as relationships, the environment of learning, personal and professional satisfaction, leadership, opportunities for children to take responsibility, involvement of staff in decision-making and the 'feel' of the school [R]*	• *No suitable data source identified*
Pressures and expectations		
Time pressure	• Percentage of P7, S2 and S4 pupils who felt that they had enough time for themselves very often or always in the last week[2]	• HBSC
Choice of how to spend free time	• Percentage of P7, S2 and S4 pupils who felt that they were able to do the things that they want to do in their free time very often or always in the last week[2]	• HBSC
Pressure of school work	• Percentage of S2 and S4 pupils who feel they very often or often have more school work than they can handle[2]	• HBSC
Pressure to succeed in life [R]	• *Assessment of whether children and young people feel pressure to succeed in life*	• *No suitable data source identified*
Pressure to fit in [R]	• *Assessment of whether children and young people feel pressure to fit in at school or with others their own age*	• *No suitable data source identified*

Community		
Indicator	**Measure**	**Data source**
Participation		
Sense of agency [R]	• *Assessment of whether children and young people believe that they can make, or believe that they already do make, a positive difference in the world around them*	• *No suitable data source identified*
Respect of children's rights [R]	• *Assessment of whether children and young people feel their rights are respected by others*	• *No suitable data source identified*
Influencing local decisions	• Percentage of households containing children and young people aged 8 to 17 years, where at least one 8 to 17 year old regularly takes part in representing young people's views or involvement in youth politics (e.g. Youth Forum or Dialogue Youth)[4]	• Scottish Household Survey
Participation in clubs, groups or organis'ns	• Percentage of households containing children and young people aged 8 to 17 years, where at least one 8 to 17 year old regularly takes part in clubs, groups or organisations[4]	• Scottish Household Survey
Social networks		
Contact with peers [R]	• *Assessment of children and young people's peer group contacts*	• *No suitable data source identified*
Social support		
Social support	• Percentage of S2 and S4 pupils who agree a lot or a bit that they can ask for help or a favour from neighbours in the area where they live[2]	• HBSC
Trust		
Neighbourhood trust	• Percentage of S2 and S4 pupils who agree a lot or a bit that you can trust people in the area where they live[2]	• HBSC
	• Percentage of S2 and S4 pupils who disagree a lot or a bit that most people in the area where they live would try to take advantage of them if they got the chance[2]	• HBSC
Community cohesion	• Percentage of S2 and S4 pupils who agree a lot or a bit that people say 'hello' and stop to talk to each other in the street in the area where they live[2]	• HBSC
Informal social control [R]	• *Assessment of the extent to which adults are willing to intervene in hypothetical neighbourhood situations, for example, where a child/children are perceived to be misbehaving*	• *No suitable data source identified*
Safety		
Neighbourhood safety	• Percentage of 16 and 17 year olds who feel very or fairly safe walking alone in their neighbourhood after dark	• Scottish Household Survey
	• Percentage of S2 and S4 pupils who, generally speaking, always feel safe in the area they live[2]	• HBSC
	• Percentage of S2 and S4 pupils who agree a lot or a bit that it is safe for younger children to play outside during the day in the area where they live[2]	• HBSC

Structural		
Indicator	**Measure**	**Data source**
Equality		
Absolute poverty	• Percentage of children and young people aged 15 years and under, or aged 16 to 19 years (but not married nor in a Civil Partnership nor living with a partner and living with their parents and in full-time non-advanced education or in unwaged government training), living in absolute poverty (before housing costs) (Absolute poverty is defined as living in households whose equivalised income is below 60% of the (inflation adjusted) Great Britain median income in 1998/99)	• Scottish Government Income and Poverty Statistics
Income inequality	• GINI coefficient for households with children aged 17 years and under[13]	• Department for Work and Pensions Households Below Average Income dataset from the Family Resources Survey
Relative poverty	• Percentage of children and young people aged 15 years and under, or aged 16 to 19 years (but not married nor in a Civil Partnership nor living with a partner and living with their parents and in full-time non-advanced education or in unwaged government training), living in relative poverty (before housing costs) (Relative poverty is defined as living in households whose equivalised income is below 60% of UK median income in the same year)	• Scottish Government Income and Poverty Statistics
Persistent Poverty	• Percentage of children and young people aged 15 years and under, or aged 16 to18 years (but in school or non-advanced further education, not married and living with their parents) living in persistent poverty (before housing costs) (Persistent poverty is defined as living in households which have spent three or more years out of any four-year period in relative poverty)	• Scottish Government Income and Poverty Statistics
Equality analysis	• Analysis of all of the other indicators by protected characteristics under the Equality Act (2010),[14] deprivation, rurality, children with additional support needs and children looked after, where data allow	• Scottish surveys, plus administrative datasets for the Scottish Index of Multiple Deprivation, Scottish Government Children and Young People and School Education Statistics

Structural		
Indicator	**Measure**	**Data source**
Social inclusion		
Workless households	• Percentage of children and young people aged 15 years and under who live in workless households	• Annual Population Survey
Positive and sustained destinations	• Percentage of school leavers (from Scottish publicly funded schools) in positive and sustained destinations (further education, higher education, employment, volunteering or training) 9 months after leaving school	• School Leavers Destination Survey, Follow-up Survey
Education	• Percentage of 16 and 17 year olds with at least one academic or vocational educational qualification • Percentage of children and young people leaving school with a qualification in English and Maths at least at SCQF Level 3 (Access 3 or Standard Grade at Foundation level) • Percentage of P3, P7 and S2 pupils estimated to have 'well-established' or better skills at the expected levels for their stages in mathematics[2, 15] • Percentage of P3, P7 and S2 pupils estimated to have 'well-established' or better skills at the expected levels for their stages in reading[2, 16]	• Annual Population Survey • Scottish Government School Education Statistics • Scottish Survey of Achievement • Scottish Survey of Achievement
School exclusion	• Exclusions (temporary and removal from register) from local authority schools per 1,000 pupils in the past year	• Scottish Government School Education Statistics
Homelessness	• Cases assessed as homeless or potentially homeless in the past year where the main applicant was aged 16 or 17 years old at the time of assessment per 1,000[17] • Children and young people in cases assessed as homeless or potentially homeless per 1,000 aged 15 years and under, or aged 16 to18 years (who are either receiving or about to begin full-time education or training, or are, from some other reason unable to support themselves), in the past year[17]	• Scottish Government Housing and Regeneration Statistics • Scottish Government Housing and Regeneration Statistics
Feeling lonely	• Percentage of P7, S2 and S4 pupils who never felt lonely in the last week[2]	• HBSC
Children looked after	• Children and young people looked after by local authorities per 1,000 aged 17 years and under in the past year	• Scottish Government Children and Young People Statistics
Additional support needs	• Pupils classified as having additional support needs per 1,000 pupils in the past year	• Scottish Government School Education Statistics

Structural		
Indicator	**Measure**	**Data source**
Discrimination		
Discrimination and harassment [R]	• *Assessment of whether children and young people feel that they have been unfairly treated, discriminated against, harassed or abused due to discrimination*	• *No suitable data source identified*
Perception of attitude of adults towards children and young people [R]	• *Percentage of children and young people who in general think adults have a lot or a fair amount of trust in young people today*	• *No suitable data source identified*
Stigma towards children and young people [R]	• *Assessment of whether children and young people perceive themselves to be labelled or stigmatised in some way*	• *No suitable data source identified*
Physical environment		
Neighbourhood satisfaction	• Percentage of 16 and 17 year olds who rate their neighbourhood as a very or fairly good place to live • Percentage of S2 and S4 pupils who feel that the area they live is a really good or good place to live[2]	• Scottish Household Survey • HBSC
Free time places	• Percentage of S2 and S4 pupils who agree a lot or a bit that there are good places (e.g. leisure centres, parks, shops) to spend their free time in the area that they live[2]	• HBSC
Greenspace [R]	• *Assessment of whether children and young people feel they can access green and open spaces in their neighbourhood*	• *No suitable data source identified*
House condition	• Percentage of households with children aged 17 years and under where the highest income householder (or their spouse/partner) rates the condition of their house or flat as very or fairly good	• Scottish House Condition Survey
Overcrowding	• Percentage of households with children aged 17 years and under where the highest income householder (or their spouse/partner) feels their home has too few rooms	• Scottish House Condition Survey
Violence		
Domestic abuse [R]	• *Percentage of children and young people aged 17 years and under who live in a household where there is domestic abuse*	• *No suitable data source identified*
Child protection [R]	• *Assessment of the number of children and young people requiring child protection[18]*	• *No suitable data source identified*
Neighbourhood violence [R]	• *Assessment of children and young people's exposure to violence in their neighbourhood*	• *No suitable data source identified*

Structural		
Indicator	**Measure**	**Data source**
Culture		
Perception of looks	• Percentage of P7, S2 and S4 pupils who think they are average, quite or very good looking[2]	• HBSC
Body image	• Percentage of P7, S2 and S4 pupils who think that their body is about the right size[2]	• HBSC
Culture and values [R]	• *Assessment(s) relating to the materialism and individualism of modern Western consumer culture*	• *No suitable data source identified*

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[1] Where an indicator is based on the mean, the mean will be used if the data are normally distributed; if not then the median is more appropriate. The appropriateness of the mean will be assessed on analysis of the data.

[2] P1, P3, P7, S2 and S4 pupils are circa 5, 7, 11, 13 and 15 year olds, respectively.

[3] [R] Indicates that there is a recommendation attached to the indicator.

[4] Data collected by parental/guardian assessment.

[5] Recent service changes from hospital-based to community-based treatment have affected the figures for SMR04 which means that retrospective SMR04 data are not suitable for trend analysis. These changes have largely settled down making prospective SMR04 data suitable to use. This indicator, however, remains sensitive to changes in clinical practice and service demands. This means that trends have to be interpreted with caution and care as changes in the trend may not necessarily reflect a change in population need.

[6] Data includes parent/guardian assessment for those aged 12 years and under and self-assessment for those aged 13 years and above.

[7] The percentage of S2 and S4 pupils who drank alcohol in the last week and the mean number of units drunk by S2 and S4 pupils in the last week need to be interpreted in tandem.

[8] This indicator covers attachment felt by the child, a specific aspect of early parent-child relationships.

[9] It is unknown from the self-report data if a prisoner is the biological parent, step-parent or guardian etc of the child.

[10] Administrative data on prisoners are being improved and could include information on children. This could be a more accurate source of data in the future than the Scottish Prison Survey which is self-report.

[11] Indicator under development by the Scottish Government. The suitability of this as an indictor for monitoring trends will be assessed.

[12] Parent will be aged 16 years and above.

[13] GINI coefficient is an inequality index which measures income inequality between the richest decile of a population and the poorest decile.

[14] The protected characteristics under the act are: age, sex, disability, race, sexual orientation, religion or belief, gender reassignment, marriage and civil partnership, pregnancy and maternity.

[15] From 2011 the Scottish Survey of Achievement was replaced by the Scottish Survey of Literacy and Numeracy. This indicator will be revised to reflect this new data source when the Scottish Survey of Literacy and Numeracy reports on numeracy in 2012.

[16] From 2011 the Scottish Survey of Achievement was replaced by the Scottish Survey of Literacy and Numeracy. This indicator will be revised to reflect this new data source when the Scottish Survey of Literacy and Numeracy reports on literacy in 2013.

[17] The data include some children and young people who are classified as homeless more than once in a year. However, the number is small and declining.

[18] The Scottish Government is currently developing a child protection indicator for the national performance framework. This will be aligned to, if appropriate.

Appendix 4 Age Group Coverage of the Children and Young People's Indicators

	Construct	Indicator	Pre-birth	Pre-school	Primary	Secondary	Post-compulsory schooling
High level	**Mental Wellbeing**	Mental wellbeing		Red	Red	Green	Orange
		Life satisfaction			Cyan	Cyan	Orange
		Happiness			Cyan	Cyan	
		Pro-social behaviour			Orange	Green	
	Mental health problems	Common Mental Health Problems					Orange
		Emotional and Behavioural Problems		Red	Orange	Green	
		Emotional symptoms			Orange	Green	
		Conduct problems			Orange	Green	
		Hyperactivity/inattention			Orange	Green	
		Sadness			Cyan	Cyan	
		Alcohol dependency					Orange
		Drug dependency		Purple	Purple	Purple	Purple
		Suicide		Purple	Purple	Purple	Purple
		Self-harm		Red	Red	Red	Red
		Eating disorder		Red	Red	Red	Red
Individual	**Learning and development**	*Play*		Red	Red	Red	Red
		Readiness for school			Red		
	Healthy living	Physical activity			Orange	Orange	
		Healthy eating		Orange	Cyan	Cyan	Orange
		Obesity		Orange	Orange	Orange	
		Alcohol consumption			Cyan	Green	
		Drug use				Green	
		Smoking			Cyan	Green	Yellow
		Sexual health			Purple	Purple/Cyan	Purple
	General health	Self-reported health		Orange	Orange	Orange	Orange
		Long-standing physical condition or disability		Orange	Orange	Orange	Orange
		Limiting long-standing physical condition or disability		Orange	Orange	Orange	Orange
	Spirituality	*Spirituality*		Red	Red	Red	Red

Family	Emotional intelligence	Emotional intelligence						
	Life events	Stressful life events						
		Adverse childhood experiences						
	Family relations	Parent-child relationship						
		Nurturing adult						
		Family meals						
		Talking to parents						
		Treatment by parents						
		Parental discord						
		Caring for a family member						
	Family structure	Lone parent family						
		Contact with non-resident parent						
		Teenage parents						
		Parental imprisonment						
	Parental healthy living	Maternal smoking in pregnancy						
		Maternal alcohol use in pregnancy						
		Maternal drug use in pregnancy						
		Parental problematic alcohol consumption						
		Parental problematic drug use						
	Parental health	Parental mental wellbeing						
		Parental common mental health problems						
		Post-natal depression						
		Parental alcohol dependency						
		Parental limiting long-standing physical condition or disability						
Learning environment	Engagement with learning	Pre-school home learning environment						
		School attendance						
		Liking of school						
	Peer and friend relationships	Early years friendships						
		Close friends						
		Relationship with best friend						
		Peer relationship problems						
		Acceptance by peers						
		Experience of being bullied						
		Participation in bullying						

Learning environment cont.	**Educational environment**	Treatment by teachers			(cyan)	(cyan)	
		Relationship with teachers			(cyan)	(cyan)	
		Relationship with all school staff			(red)	(red)	
		Control at school			(cyan)	(cyan)	
		School ethos			(cyan/yellow/red)	(cyan/yellow/red)	
	Pressures and expectations	Time pressure			(cyan)	(cyan)	
		Choice of how to spend free time			(cyan)	(cyan)	
		School work pressure				(cyan)	
		Pressure to succeed in life			(red)	(red)	
		Pressure to fit in			(red)	(red)	
Community	**Participation**	*Sense of agency*		(red)	(red)	(red)	(red)
		Respect of children's rights		(red)	(red)	(red)	(red)
		Influencing local decisions			(yellow)	(yellow)	(yellow)
		Participation in clubs, groups or organisations			(yellow)	(yellow)	(yellow)
	Social networks	*Contact with peers*		(red)	(red)	(red)	(red)
	Social support	Social support				(cyan)	
	Trust	Neighbourhood trust				(cyan)	
		Community cohesion				(cyan)	
		Informal social control		(red)	(red)	(red)	(red)
	Safety	Neighbourhood safety				(cyan)	(yellow)
Structural	**Equality**	Absolute poverty		(lilac)	(lilac)	(lilac)	(lilac)
		Income inequality		(lilac)	(lilac)	(lilac)	(lilac)
		Relative poverty		(lilac)	(lilac)	(lilac)	(lilac)
		Persistent poverty		(lilac)	(lilac)	(lilac)	(lilac)
	Social Inclusion	Workless households		(green)	(green)	(green)	
		Positive and sustained destinations					(purple)
		Education			(brown)	(brown/lilac)	(green)
		School exclusion		(lilac)	(lilac)	(lilac)	(lilac)
		Homelessness		(lilac)	(lilac)	(lilac)	(lilac)
		Feeling lonely			(cyan)	(cyan)	
		Children looked after		(lilac)	(lilac)	(lilac)	(lilac)
		Additional support needs		(lilac)	(lilac)	(lilac)	

Structural cont.	**Discrimination**	Discrimination and harassment		red	red	red	red
		Perception of attitude of adults towards children and young people		red	red	red	red
		Stigma towards children and young people		red	red	red	red
	Physical environment	Neighbourhood satisfaction				cyan	yellow
		Free time places				cyan	
		Greenspace		red	red	red	red
		House condition		pink	pink	pink	pink
		Overcrowding		pink	pink	pink	pink
	Violence	Domestic abuse		red	red	red	red
		Child protection		red	red	red	red
		Neighbourhood violence		red	red	red	red
	Culture	Perception of looks			cyan	cyan	
		Body image			cyan	cyan	
		Culture and values		red	red	red	red

Colour code	Data source
(olive green)	Annual Population Survey
(light purple)	Administrative data/Scottish Government statistic (Note: this may be from another survey)
(red)	Data-less with associated recommendation
(cyan)	Health Behaviour in School-aged Children
(white)	No indicator for the age sub-group
(purple)	School Leavers Destination Survey, Follow-up Survey
(light green)	Scottish Adolescents Lifestyle and Substance Use Survey
(orange)	Scottish Health Survey
(pink)	Scottish House condition survey
(yellow)	Scottish Household survey
(teal)	Scottish Prison Survey
(brown)	Scottish Survey of Achievement

Appendix 5 Children and Young People's Indicators Data Sources, Questions and Scales[1]

High Level Indicators
Mental wellbeing

Mental wellbeing
• Warwick-Edinburgh Mental Well-being Scale (WEMWBS) in the self-completion booklet for young adults of the Scottish Health Survey • WEMWBS in the Scottish Adolescents Lifestyle and Substance Use Survey (SALSUS)
Life satisfaction

• question in the core section of the Scottish Health Survey
    All things considered, how satisfied are you with your life as a whole nowadays?
    - 0 extremely dissatisfied to10 extremely satisfied
• adapted Cantril ladder in the Health Behaviour in School-aged Children Survey (HBSC)
    Here is a picture of a ladder. The top of the ladder '10' is the best possible life for you and the bottom '0' is the worst possible life for you.
    - In general, where on the ladder do you feel you stand at the moment?

Happiness

• question in HBSC
    In general, how do you feel about your life at present?
    - I feel very happy
    - I feel quite happy
    - I don't feel very happy
    - I'm not happy at all

Pro-social behaviour
• pro-social scale of the Strengths and Difficulties Questionnaire (SDQ) in the self-completion booklet for parents of 4-12 year olds of the Scottish Health Survey • pro-social scale of the SDQ in SALSUS

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[1] Survey questionnaires undergo periodic review. The questions/scales listed here were the latest versions at the time of establishment of the indicators (November 2011). Future changes to survey questionnaires and methodology (e.g. sample size, frequency etc) may impact on the continuity of data either in terms of comparability or robustness.

Mental health problems
Common mental health problems
• General Health Questionniare-12 (GHQ-12) in the self-completion booklet for young adults and the self-completion booklet for adults of the Scottish Health Survey
Emotional and behavioural problems
• SDQ in the self-completion booklet for parents of 4-12 year olds of the Scottish Health Survey • SDQ in SALSUS
Emotional symptoms or **Conduct problem** or /**Hyperactivity/inattention**
• emotional symptoms or conduct problems or hyperactivity/inattention scale of the SDQ in the self-completion booklet for parents of 4-12 year olds of the Scottish Health Survey • emotional symptoms or conduct problem or/hyperactivity/inattention scale of the SDQ in SALSUS
Sadness

• item from Kidscreen-10 in HBSC
     Thinking about the last week... Have you felt sad?
     - Never
     - Not often
     - Quite often
     - Very often
     - Always

Alcohol Dependency
• CAGE 4-item questionnaire in the self-completion booklet for young adults and the self-completion booklet for adults of the Scottish Health Survey[2]
Drug-related disorders
• SMR01/SMR04 codes for mental and behavioural disorders due to psychoactive substance, F11-19 excluding F17, ISD Scotland
Suicide
• ICD10 codes for deaths by intentional self harm or by events of undetermined intent, ICD-9 codes E950-959 and E980-989/ICD10 X60-84, Y10-34, Y87.0 and Y87.2, National Records of Scotland

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[2] The AUDIT scale is to replace CAGE in the Scottish Health Survey from 2012. This will impact on future time trend analysis.

Contextual Constructs – Individual
Healthy living

Physical Activity

- series of questions in the core section of the Scottish Health Survey
  The questions cover:
  - sports and exercise
  - active play
  - walking
  - housework or gardening (children aged 8 and over).

Prior to 2008, sport and exercise, active play and walking undertaken as part of school lessons were not included, although activities undertaken on school premises but not as part of lessons (for example, play or sport at lunchtime or at after-school clubs) were included. From 2008, additional questions asked about 'walking, sports, exercise or other active things' undertaken as part of school lessons.

Activity recommendation = active for 60 minutes on 7 days in the last week

Healthy eating

- composite from a range of questions to determine the number of portions of fruit and vegetables consumed yesterday, where yesterday means the 24 hours from midnight to midnight, in the core section of the Scottish Health Survey
  Questions cover: vegetables (fresh, frozen or canned); salads; pulses; vegetables in composites (e.g. vegetable chilli); fruit (fresh, frozen or canned); dried fruit; and fruit in composites (e.g. apple pie) and pure fruit juice. Note: respondents are asked if this is typical. Prior to 2008 only children aged 5-15 years old were asked these questions.

- question in HBSC
  How often do you usually have breakfast (more than a glass of milk or fruit juice)?
  - I never have breakfast during weekdays
  - One day
  - Two days
  - Three days
  - Four days
  - Five days

Obesity

- height and weight measurement in the core section of the Scottish Health Survey

Alcohol consumption

- question in SALSUS

    When did you last have an alcoholic drink?
    - Today
    - Yesterday
    - Some other time during the last seven days
    - 1 week, but less than 2 weeks ago
    - 2 weeks, but less than 4 weeks ago
    - 1 month, but less than 6 months ago
    - 6 months ago or more

- question in HBSC

    At present, how often do you drink anything alcoholic, such as beer, wine or spirits? Try to include even those times when you only drink a small amount. Frequency reported for each of the following options: Beer or lager, Wine or champagne, Alcopops (like Smirnoff Ice, Bacardi Breezer, WKD), Spirits (like whisky, vodka), Cider, Fortified (strong) wine like sherry, martini, port, Buckfast, Any other drink that contains alcohol
    - Every day
    - Every week
    - Every month
    - Hardly ever
    - Never

- range of questions in SALSUS to assess usual weekly consumption in the past year (using the quantity frequency method) for pupils identified as having drunk in the week before the survey, as determined by the SALSUS question above

Drug use

- question in SALSUS

    How often do you usually use drugs?
    - I have only taken drugs once
    - I used to take drugs sometimes but I don't take them anymore
    - I take drugs a few times a year
    - I take drugs once or twice a month
    - I take drugs at least once a week
    - I take drugs most days

Smoking

• question in the random adult interview of the Scottish Household Survey
 	
     Do you smoke cigarettes nowadays?
     - Yes
     - No
 	
• question in SALSUS
 	
     Now read the following statements carefully and cross the box next to the one which best describes you
     - I have never smoked
     - I have only ever tried smoking once
     - I used to smoke sometimes but I never smoke a cigarette now
     - I sometimes smoke cigarettes now but I don't smoke as many as one a week
     - I usually smoke between one and six cigarettes a week
     - I usually smoke more than six cigarettes a week
 	
• question in HBSC
 	
     How often do you smoke tobacco at present?
     - Every day
     - At least once a week, but not every day
     - Less than once a week
     - I do not smoke

Sexual health

• National Records of Scotland registered births and stillbirths, and notifications (to the Chief Medical Officer for Scotland) of abortions performed under the Abortion Act 1967 from ISD Scotland www.isdscotland.org/Health-Topics/Maternity-and-Births/Teenage-Pregnancy/
 	
• question in HBSC
 	
     The last time you had sexual intercourse, did you or your partner use a condom?
     - I have never had sexual intercourse
     - Yes
     - No

General health
Self-reported health
• question in the core section of the Scottish Health Survey 　　How is your health in general? Would you say it was ... 　　- very good 　　- good 　　- fair 　　- bad 　　- very bad
Long-standing physical condition or disability and **Limiting long-standing physical condition or disability**
• question in the core section of the Scottish Health Survey 　　Do you have a long-standing physical or mental condition or disability that has troubled you for at least 12 months, or that is likely to affect you for at least 12 months? 　　- Yes 　　- No 　　If yes 　　What is the matter with you? (codes up to 6 conditions or disabilities) • Does (this) limit your activities in any way? 　　- Yes 　　- No

Family
Family relations

Family meals
• question in HBSC 　　How many days a week do you usually eat a meal with one or both of your parents? 　　- Every day 　　- 4 to 6 days a week 　　- 2 to 3 days a week 　　- Once a week 　　- Hardly ever or never

Talking to parents

• question in HBSC
  How easy is it for you to talk to the following persons about things that really bother you? Please tick one circle for each line
  Frequency reported for each of the following options: Mother; Father; Stepmother (or father's partner); Stepfather (or mother's partner); Older brother(s); Older sister(s); Best friend; Friends of the same sex; Friends of the opposite sex;
  - Very easy
  - Easy
  - Difficult
  - Very
  - Difficult
  - Don't have or don't see this person

Treatment by parents

• item from Kidscreen-10 in HBSC
  Thinking about the last week… Have your parent(s) treated you fairly?
  - Never
  - Not often
  - Quite often
  - Very often
  - Always

Family structure
Lone parent family
• data from the household composition grid completed in the household section of the Scottish Household Survey by the highest income householder or their spouse/partner (the household reference person).
Teenage parents
• registered births, National Records of Scotland
Parental imprisonment

• question in the Scottish Prison Survey
  Are you a parent of any children under 18 years of age?
  If yes, please indicate how many children you have under 18 years of age

- 1 child
- 2 children
- 3 children
- 4 children
- 5 children
- 6+ children

Parental healthy living

Maternal smoking in pregnancy

- SMR02, ISD Scotland

Parental health

Parental mental wellbeing

- WEMWBS in the self-completion booklet for young adults and the self-completion booklet for adults of the Scottish Health Survey, data linked to the household composition grid to identify those who are parents

Parental common mental health problems

- GHQ-12 in the self-completion booklet for young adults and the self-completion booklet for adults of the Scottish Health Survey, data linked to the household composition grid to identify those who are parents

Parental alcohol dependency

- CAGE 4-item questionnaire in the self-completion booklet for young adults and the self-completion booklet for adults of the Scottish Health Survey, data linked to the household composition grid to identify those who are parents[3]

Parental limiting long-standing condition or disability

- question in the core section of the Scottish Health Survey, data linked to the household composition grid to identify those who are parents
  Do you have a long-standing physical or mental condition or disability that has troubled you for at least 12 months, or that is likely to affect you for at least 12 months?
  - Yes
  - No
  If yes
  What is the matter with you? (codes up to 6 conditions or disabilities)

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[3] The AUDIT scale is to replace CAGE in the Scottish Health Survey from 2012. This will impact on future time trend analysis.

• Does (this) limit your activities in any way?
    - Yes
    - No

Learning Environment
Engagement with learning

School attendance
• School Education Statistics, Scottish Government

Liking of school

• question in SALSUS
    How much do you like school at the moment?
    - I like it a lot
    - I like it a bit
    - I don't like it very much
    - I don't like it at all
 	
• question in HBSC
    How do you feel about school at present?
    - I like it a lot
    - I like it a bit
    - I don't like it very much
    - I don't like it at all

Peer and friend relationships

Close friends

• question in SALSUS
    How many close friends would you say you have?
    - None
    - One
    - Two
    - Three or more
 	
• question in HBSC
    At present, how many close male and female friends do you have?

Males	Females
- None	- None
- One	- One
- Two	- Two
- Three or more	- Three or more

Relationship with best friend

- question in HBSC

    How easy is it for you to talk to the following persons about things that really bother you? Please tick one circle for each line
    Frequency reported for each of the following options: Mother; Father; Stepmother (or father's partner); Stepfather (or mother's partner); Older brother(s); Older sister(s); Best friend; Friends of the same sex; Friends of the opposite sex;
    - Very easy
    - Easy
    - Difficult
    - Very
    - Difficult
    - Don't have or don't see this person

Peer relationship problems

- peer relationship problems scale of the SDQ in the self-completion booklet for parents of 4-12 year olds of the Scottish Health Survey
- peer relationship problems scale of the SDQ in SALSUS

Acceptance by peers

- item from a question in HBSC
    Here are some statements about the pupils in your class(es). Please show how much you agree or disagree with each one.
    Other pupils accept me as I am
    - Strongly agree
    - Agree
    - Neither agree nor disagree
    - Disagree
    - Strongly disagree

Experience of being bullied
• question in HBSC

How often have you been bullied at school in the past couple of months?
- I haven't been bullied at school in the past couple of months
- It has only happened once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

Participation in bullying
• question in HBSC

How often have you taken part in bullying another pupil(s) at school in the past couple of months?
- I haven't bullied another pupil(s) at school in the past couple of months
- It has only happened once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

Educational environment

Treatment by teachers
• item from a competence and autonomy scale in HBSC

Here are some statements about the teachers in your class(es). Please show how much you agree or disagree with each one
My teachers listen to how I would like to do things
- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

Relationship with teachers
• item from a relatedness scale in HBSC

Here are some statements about your teachers. Please show how much you agree or disagree with each one.

I feel that my teachers care about me as a person
- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

Control at school

- item from a competence and autonomy scale in HBSC
    Here are some statements about the teachers in your class(es). Please show how much you agree or disagree with each one
    I feel that my teachers provide me with choices and options
    - Strongly agree
    - Agree
    - Neither agree nor disagree
    - Disagree
    - Strongly disagree

School ethos

- item from a question in HBSC
    Here are some statements about your school. Please show how much you agree or disagree with each one.
    The students in my class(es) treat each other with respect
    - Strongly agree
    - Agree
    - Neither agree nor disagree
    - Disagree
    - Strongly disagree

- item from a question in the household part of the Scottish Household Survey completed by the highest income householder or his/her partner/spouse (the household representative) for one random child in the household who has been described as 'at school' and the responsibility of the household representative (the random schoolchild)
    To what extent do you agree or disagree with the following statements about the school that {child} attends?
    The school keeps me well informed about {child}'s progress
    - Strongly agree
    - Tend to agree

- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know

Pressures and expectations

Time pressure

- item from Kidscreen-10 in HBSC

    Thinking about the last week... Have you had enough time for yourself?

    - Never
    - Not often
    - Quite often
    - Very often
    - Always

Choice of how to spend free time

- item from Kidscreen-10 in HBSC

    Thinking about the last week... Have you been able to do things that you want to do in your free time?

    - Never
    - Not often
    - Quite often
    - Very often
    - Always

Pressure of school work

- item from a question in HBSC

    Here are some statements about your school. Please show how much you agree or disagree with each one…

    I have more school work than I can handle

    - Almost never
    - Not very often
    - Sometimes
    - Often
    - Very often

Community
Participation

Influencing local decisions

- a response option to a question in the household part of the Scottish Household Survey. This question is asked of households with someone aged 8-21 years. The highest income householder or his/her partner/spouse (the household representative) responds for one random child in the household aged 8-21 years. Note: There are slight variations in the question depending on whether there is more than one household member aged 8-21 and whether the household respondent is aged under 21 years and selected to answer the questions about themselves.
    The Scottish government is interested in the extent to which young adults and children are involved in a range of activities. I'd now like to ask some questions about what {sub} does in his/her spare time.
    Which, if any, of the activities on this card does {sub} regularly take part in?
    - Representing young people's views or involvement in youth politics (e.g. Youth Forum or Dialogue Youth)

Participation in clubs, groups or organisations

- response options to a question in the household part of the Scottish Household Survey. This question is asked of households with someone aged 8-21 years. The highest income householder or his/her partner/spouse (the household representative) responds for one random child in the household aged 8-21 years. Note: There are slight variations in the question depending on whether there is more than one household member aged 8-21 and whether the household respondent is aged under 21 years and selected to answer the questions about themselves.
    The Scottish government is interested in the extent to which young adults and children are involved in a range of activities. I'd now like to ask some questions about what {sub} does in his/her spare time.
    Which, if any, of the activities on this card does {sub} regularly take part in?
    - Any music or drama activities - playing in a band, a theatre group
    - Any other arts activities - a photography or art club including classes
    - Any sports or sporting activity whether played competitively or not
    - Any other groups or clubs - a youth club or youth group, scouts, chess club, bridge club etc.

Social support

Social support

- item from a question in HBSC
    Please say how you feel about these statements about the area where you live.
    I could ask for help or a favour from neighbours
    - Agree a lot
    - Agree a bit
    - Neither agree nor disagree

- Disagree a bit
- Disagree a lot

Trust

Neighbourhood trust

• item from a question in HBSC
     Please say how you feel about these statements about the area where you live.
     You can trust people around here
     - Agree a lot
     - Agree a bit
     - Neither agree nor disagree
     - Disagree a bit
     - Disagree a lot
 	
• item from a question in HBSC
     Please say how you feel about these statements about the area where you live.
     Most people around here would try to take advantage of you if they got the chance
     - Agree a lot
     - Agree a bit
     - Neither agree nor disagree
     - Disagree a bit
     - Disagree a lot

Community cohesion

• item from a question in HBSC
     Please say how you feel about these statements about the area where you live.
     People say 'hello' and often stop to talk to each other in the street
     - Agree a lot
     - Agree a bit
     - Neither agree nor disagree
     - Disagree a bit
     - Disagree a lot

Safety
Neighbourhood safety

• question in the random adult section of the Scottish Household Survey
 	
    How safe do you feel walking alone in your neighbourhood after dark? Would you say you feel…?
    - Very safe
    - Fairly safe
    - A bit unsafe
    - Very unsafe
    - Don't know
 	
• question in HBSC
 	
    Generally speaking, I feel safe in the area where I live…
    - Always
    - Most of the time
    - Sometimes
    - Rarely or never
 	
• item from a question in HBSC
 	
    Please say how you feel about these statements about the area where you live.
    It is safe for younger children to play outside during the day
    - Agree a lot
    - Agree a bit
    - Neither agree nor disagree
    - Disagree a bit
    - Disagree a lot

Structural
Equality
Absolute poverty
• Department for Work and Pensions Households Below Average Income (HBAI) dataset from the Family Resources Survey (FRS), used in Income and Poverty Statistics, Scottish Government

Income inequality
• Department for Work and Pensions HBAI dataset from the FRS

Relative poverty
• Department for Work and Pensions HBAI dataset from the FRS, used in Income and Poverty Statistics, Scottish Government

Persistent poverty
• Department for Work and Pensions data from the British Household Panel Survey, used in Income and Poverty Statistics, Scottish Government. Note: From 2009, the British Household Panel Survey has been subsumed into the Understanding Society Survey, which will be the future data source.

Equality analysis
• Scottish surveys, plus administrative datasets for Scottish Index of Multiple Deprivation, Children and Young People and School Education statistics Scottish Government

Social inclusion

Workless households
• questions in the Annual Population Survey, derived variable INECAC05, data linked to household composition grid to identify if children in household

Positive and sustained destination
• School Leavers Destination Survey, Follow-up Survey, Skills Development Scotland

Education

• question in the Annual Population Survey, derived variable HIQUAL excluding no qualification option (covers any qualifications including 'other' qualifications)
    Which qualifications do (you think) you have, starting with the highest qualifications?
    - Degree level qualification including foundation degrees, graduate membership of a professional institute, PGCE, or higher
    - Diploma in higher education
    - HNC/HND
    - ONC/OND
    - BTEC/ BEC/TEC/EdExcel/LQL
    - SCOTVEC, SCOTEC or SCOTBEC
    - Teaching qualification (excluding PGCE)
    - Nursing or other medical qualification not yet mentioned
    - Other higher education qualification below degree level

- A-level/ Vocational A-level/GCE in applied subjects or equivalents
- New Diploma
- Welsh Baccalaureate
- International Baccalaureate
- NVQ/SVQ
- GNVQ/GSVQ
- AS-level/ Vocational AS level or equivalent
- Certificate of sixth year studies (CSYS) or equivalent
- Access to HE
- O-level or equivalent
- Standard/Ordinary (O) Grade / Lower (Scotland)
- GCSE/ Vocational GCSE
- CSE
- Advanced Higher / Higher / Intermediate / Access qualifs. (Scotland)
- RSA/ OCR
- City & Guilds
- YT Certificate
- Key Skills / Core Skills (Scotland)
- Basic Skills (Skills for life / literacy / numeracy / lang)
- Entry Level Qualifications
- any other professional / work related qualification / foreign qualifications

- School Education Statistics, Scottish Government

- estimates of performance in mathematics and numeracy are based on the results of written assessments in the Scottish Survey of Achievement Mathematics and core skills. Pupils answering 80% or more of the questions correctly are classified as having 'very good' skills, those answering 65% or more as having 'well-established' skills. Prior to Curriculum for excellence, the previous 5-14 curriculum was based on six levels, A-F with pupils attaining Level A by the end of P3, Level D by the end of P7 and Level E by the end of S2.

- estimates of performance in reading based on the results of written assessments in the Scottish Survey of Achievement Reading and Writing. Pupils answering 80 per cent or more of the questions correctly are classified as having 'very good' skills, those answering 65% or more as having 'well-established' skills. Prior to Curriculum for excellence, the 5-14 curriculum was based on six levels, A-F with pupils attaining Level A by the end of P3, Level D by the end of P7 and Level E by the end of S2.

School exclusion

- School Education Statistics, Scottish Government

Homelessness

- HL1 homelessness data capture system, Housing and Regeneration Statistics, Scottish Government
- HL1 homelessness data capture system, Housing and Regeneration Statistics, Scottish Government

Feeling lonely

- item from Kidscreen-10 in HBSC

  Thinking about the last week... Have you felt lonely?
  - Never
  - Not often
  - Quite often
  - Very often
  - Always

Children Looked After

- Children and Young People Statistics, Scottish Government

Additional Support Needs

- School Education Statistics, Scottish Government

Physical environment

Neighbourhood satisfaction

- question in the random adult section of Scottish Household Survey

  Thinking now about the neighbourhood you live in, how would you rate it as a place to live?
  - Very good
  - Fairly good
  - Fairly poor
  - Very poor
  - No opinion

  If pressed, define 'your neighbourhood' as 'the street you live in and the streets nearby' (urban) or 'the local area' (rural).

- question in HBSC

Do you think that the area in which you live is a good place to live? - Yes, it's really good - Yes, it's good - It's OK - It's not very good - No, it's not good at all

Free time places

- item from a question in HBSC

  Please say how you feel about these statements about the area where you live.

  There are good places to spend your free time (e.g., leisure centres, parks, shops)
  - Agree a lot
  - Agree a bit
  - Neither agree nor disagree
  - Disagree a bit
  - Disagree a lot

House condition

- question in the Scottish House Condition Survey completed by the highest income householder or spouse/partner, data linked to the household composition grid to identify if there are children in the household

  Overall, how do you rate the general condition of this house/flat?
  - Very good
  - Fairly good
  - Average/alright
  - Fairly poor
  - Very poor
  - Don't know

Overcrowding

- question in the Scottish House Condition Survey completed by the highest income householder or spouse/partner, data linked to the household composition grid to identify if children in the household

  In your view, does your house/flat have too few rooms, too many rooms, or about the right number for your current household?
  - Too few

- Too many   - About right

Culture

Perception of looks

• question in HBSC
      Do you think you are…..
      - Very good looking
      - Quite good looking
      - About average
      - Not very good looking
      - Not at all good looking
      - I don't think about my looks

Body image

• question in HBSC
      Do you think your body is……
      - Much too thin
      - A bit too thin
      - About the right size
      - A bit too fat
      - Much too fat

Survey	Description of current survey[4]
Annual Population Survey	Combines results from the Labour Force Survey and the English, Welsh and Scottish Labour Force Survey boosts www.scotland.gov.uk/Topics/Statistics/Browse/Labour-Market/DatasetsLFS
Health Behaviour in School-aged Children	Four yearly survey for P7, S2 and S4 pupils www.hbsc.org/
School Leavers Destination Survey, Follow-up Survey	Survey of school-leavers nine months after they have left publicly funded schools in Scotland www.scotland.gov.uk/Topics/Statistics/Browse/School-Education/publ-fup
Scottish Adolescents Lifestyle and Substance Use Survey	Biennial survey for S2 and S4 pupils www.drugmisuse.isdscotland.org/publications/abstracts/salsus.htm
Scottish Health Survey	Continuous survey for all ages with parental reporting for those aged 12 and under www.scotland.gov.uk/Topics/Statistics/Browse/Health/scottish-health-survey
Scottish House Condition Survey	Continuous survey where the highest income householder or spouse/partner is interviewed. From 2012 the survey is integrated into the Scottish Household Survey as a module www.scotland.gov.uk/Topics/Statistics/SHCS
Scottish Household Survey	Continuous survey for adults aged 16 years and over, the highest income householder, or his/her partner/spouse, is interviewed about themselves and other members of the household. In addition, a randomly selected adult member of the same household aged 16 or over (who may, by chance, be the same person) is interviewed on other topics. The survey is becoming modular from 2012 www.scotland.gov.uk/Topics/Statistics/16002
Scottish Prison Survey	Annual survey www.sps.gov.uk
Scottish Survey of Achievement	Annual survey focusing on a different aspect of the school curriculum of P3, P5, P7 and S2 pupils. www.scotland.gov.uk/Topics/Statistics/Browse/School-Education/TrendAchievement Replaced by the Scottish Survey of Literacy and Numeracy in 2011 to monitor literacy and numeracy in alternate years, for P4, P7 and S2 pupils www.scotland.gov.uk/Topics/Statistics/Browse/School-Education/SSLN

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[4] Methodological changes from 2012 for some of these surveys could impact on the direct continuity or robustness of datasets in future years. For details please see the survey websites and www.scotland.gov.uk/Resource/Doc/997/0123649.doc .

Appendix 6 Children and Young People's Mental Health Indicators Recommendations

Inevitably, the creation of an indicator set such as this identifies areas where further work is required. The recommendations below document these gaps for data producers and commissioners to consider in the future. NHS Health Scotland itself will report on, maintain and update the national indicators dataset on the ScotPHO website (www.scotpho.org.uk), thus fulfilling recommendation 1 and partly recommendations 2 and 5 below.

General
1. Reporting on the indicators The national mental health indicators for children and young people should be reported on every four years to track progress and change over time. ScotPHO is the most appropriate body to report on the indicators and, within this collaboration, NHS Health Scotland will fulfil this task.
2. Updating the indicators The indicators should be updated as required to reflect advances in the evidence-base and changes in the data sources. As the evidence-base improves and the nature, direction and magnitude of the relationship between personal, social and structural factors and mental health become better understood, so the indicators may need amendment. Furthermore, the data sources available to populate the indicator set are likely to change over time and the indicator set will need to be adjusted to account for this. It is important that survey managers of the national surveys remain aware of this important use of their data.
3. Wider use of the indicators Local colleagues should look to utilise and adapt the indicators to inform local work and report on local outcomes. While developed as national indicators, the national mental health indicators form a set from which local colleagues can select those relevant to their needs. Where possible, data for the national indicators have been drawn from national sources, which allow as much sub-national disaggregation as possible. However, many of the data sources cannot provide data at the sub-national geographies required and there may be a need for the use of other local data sources or for new local data collection. For the latter, it is suggested that the questions and scales used in national surveys for the national indicators be used, thus matching the definitions of the national indicators to ensure comparability.
4. Improved data collection for the monitoring of mental health and its context It is recommended that data be collected in routine national data collection systems for indicators and measures for which there is currently no suitable national data source that could be used for monitoring purposes. A full recommendation for each data gap identified in the indicator set is listed in the appropriate construct (indicator) section and the full list of recommendations is presented here. In many instances colleagues working in other policy areas desire similar new or improved data. There are, therefore, clear overlaps in data requirements which can be capitalised on and opportunities to work with others seeking data improvement should be identified. Current data improvement initiatives and question(s) and scales that could be used to collect the required data or as a starting point for development and which were noted during the course of the children and young people's mental health indicators project, have been identified in appropriate recommendations but others will exist and these opportunities should also be identified and explored.

5. Analysis of existing datasets
Continued analyses of existing datasets are required, and especially datasets which included measures of mental wellbeing.
Existing datasets represent an under-utilised resource for furthering the evidence-base about the factors that influence mental health. With the inclusion of the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) in recent surveys, these datasets can contribute to determining whether risk and protective factors differ for mental health problems and mental wellbeing.
6. Longitudinal studies
Longitudinal studies are required to help investigate whether identified associations between mental health and key personal, social and structural factors are causal, confounding, or coincidental.
It is especially important that mental wellbeing be assessed in longitudinal studies as currently the greater proportion of the mental health evidence-base relates to mental health problems.
High Level
7. Mental wellbeing of children aged 8 to 13 years old
A mental wellbeing scale to cover children aged 8/9 up to 13/14 years old should be identified or developed and included in routine national surveys to obtain data suitable for the assessment of mental wellbeing of children aged 8 to 13 years old.
There is a lack of suitably validated scales to measure mental wellbeing in children under 13 years of age; the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) is valid for assessing the mental wellbeing of children aged 13 years and above but is not suitable for younger children. There is therefore a need for a mental wellbeing scale which would cover children aged 8/9 up to 13/14 years old. The Stirling Children's Wellbeing Scale for 8 to 13 year olds has recently been developed, using WEMWBS as a starting point, and shown to be valid and reliable (Carter *et al*., paper in preparation; for information email childrenswellbeingscale@gmail.com). The scale has also been found to be suitable for older children allowing comparisons between a greater age range of children. This scale offers potential and its utility for inclusion in national surveys should be fully assessed and any additional validation required considered.
8. Mental wellbeing of children in the early years of their life: aged from 24 to 30 months and on entry to P1
Means of assessing mental wellbeing in the early years should be developed and included in routine national data collection systems in Scotland, specifically to obtain data suitable for children aged from 24 to 30 months and on entry to P1.
A suitable scale designed to assess mental wellbeing of the early years does not currently exist for this age group. Although there are scales designed to assess related, overlapping concepts these have not been developed with mental wellbeing assessment in mind. Development of a developmentally appropriate carer-report scale or assessment method to assess mental wellbeing in the early years therefore needs to be considered. There is opportunity following the review of Health for All Children (Hall 4) (Scottish Government, 2011d), which included a recommendation for the re-introduction of a 24-30 month assessment for all children. It is suggested that the minimum assessment includes coverage of personal, social and emotional development (including behavioural issues). It is important that the measure focuses on the positive. Through the Child Health Systems Programme–School all children are offered a health check on entry to primary school. This could be used to collect data on mental wellbeing at entry to P1.

9. Emotional and behavioural problems of children aged from 24 to 30 months

A means of assessing emotional and behavioural problems of children aged from 24 to 30 months should be identified or developed and included in routine national data collection systems in Scotland.

Data suitable for monitoring emotional and behavioural problems of children aged from 24 to 30 months are currently not collected routinely nationally in Scotland. A suitable scale or assessment method may exist already. The suitability of existing scales or assessment methods needs to be determined and if necessary the development of a new one should be considered. There is opportunity following the review of Health for All Children (Hall 4) (Scottish Government, 2011d), which included a recommendation for the re-introduction of a 24-30 month assessment for all children. It is suggested that the minimum assessment includes coverage of personal, social and emotional development (including behavioural issues).

10. Self-harm

More accurate data on the incidence and prevalence of self-harm amongst children and young people are required and opportunities to collect this routinely nationally should be explored.

Data on self harm could be obtained by the inclusion of a question(s) in a national population survey as is the case for adults in the Scottish Health Survey. Questions used in the Office for National Statistics surveys of the mental health of children and young people in Great Britain (Green *et al.*, 2005) could offer insight and a starting point. It will also be important to determine the progress of, and link to, the Scottish Government's strategy on self-harm (Scottish Government, 2011e), which noted that it is not currently possible to assess prevalence and incidence of self-harm as it is unsafe to generalise from the main source of current data of hospital admission/discharge to the community, as hospital data do not reflect the true situation, especially for adolescents. Objective S08 of the strategy called for: 'Improvement of data in respect of self-harm in Scotland, building on existing data from hospital admissions and discharges, and reliable evidence based data from other sources.... The Benchmarking work in mental health is now developing more detailed information regarding individuals who self-harm and access accident and emergency, acute and psychiatric hospital settings...'.

11. Eating disorders

More accurate data on the incidence and prevalence of eating disorders amongst children and young people are required and opportunities to collect this routinely nationally should be explored.

Hospital discharge data for eating disorders exist for Scotland but represent only the most severe end of the illness spectrum. Therefore, to have a clearer picture of the problem, additional sources of data are necessary to capture the true incidence and prevalence nationally. No alternative sources of this data currently exist and opportunities to gather this data in the future should be pursued.

Individual Level

12. Play

A means of assessing aspects of play, such as encouragement, support and the ability to access imaginative, spontaneous indoor and outdoor play as well as time spent by children and young people in spontaneous play, should be identified or developed and the data collected in a routine national data collection system in Scotland.

It is not currently known if there is a tool available to assess aspects of play identified as important for a mental health indicator (encouragement, support

and the ability to access imaginative, spontaneous indoor and outdoor play as well as time spent in spontaneous play). An assessment of the time spent by children and young people in spontaneous play and the various aspects of play, ideally collected in a national population survey, would inform this indicator set. The suitability of existing scales or assessment methods needs to be determined and if necessary the development of a new one should be considered. Play Scotland has recently developed Getting it Right for Play, a set of indicators and toolkit to help local authorities and community groups improve the design and provision of places and spaces for all children to play and spend their free time, feeling safe and confident, outside in their neighbourhoods. The utility of the Play Scotland indicators for assessing, or for informing the development of suitable question(s) to assess, aspects of play required for the data-less mental health indicator, which could be subsequently adopted by national surveys, should be determined.

13. Readiness for school

A means of assessing readiness for school when children enter school (P1) should be included in a routine national data collection system(s) in Scotland.

The Early Development Instrument (EDI) (www.offordcentre.com/readiness/) is currently being piloted in East Lothian to identify lessons that could be learned for whether it can be extended to the rest of Scotland. If the outcome of the pilot is favourable, and the Scottish Government decides to adopt it as a measure of school readiness, it should be considered for the data-less indicator of readiness for school, along with certain of its specific areas of assessment for indicators of cognitive functioning, development and communication.

14. Spirituality

There is a need to identify or develop question(s) which adequately measure the concept of spirituality, for inclusion in a routine national survey.

Initial work to explore in detail the complex construct of spirituality for children and young people – what it is to them, its relation to religion, what aspects set it apart from eudaimonic wellbeing[1] and meaning and purpose in life – is required. This will assist in developing the working understanding further and in developing an appropriate measurement tool suitable for inclusion in national surveys. Questions included in the Office for National Statistic's (ONS) 2007 survey of the emotional development and well-being of children and young people (Parry-Langdon *et al.*, 2007) could offer some insight. These cover some aspects of spirituality but are not sufficient. Other recent work on spirituality for children and young people includes that of the Playfield Institute.

15. Emotional intelligence

Further work is required to define the construct of emotional intelligence and how it might be measured for an indicator.

An in-depth review of the literature is needed to obtain a greater understanding of this complex construct and the academic debates. This will assist in developing the working understanding further and in developing an appropriate measurement tool suitable for inclusion in routine national surveys.

16. Stressful Life Events

There is a need to collect national data on the extent of stressful life events which have occurred in the life of children and young people. A means of assessing this should be identified or developed and the data collected in a routine national survey.

The ten item question set used in the Office for National Statistics surveys of the mental health of children and young people in Great Britain (Green *et al.*,

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[1] The eudaimonic perspective of wellbeing focuses on psychological functioning, good relationships with others and self realisation. This is the development of human potential which when realised results in positive functioning in life, and covers a wide range of cognitive aspects of mental health.

2005; Parry-Langdon *et al.*, 2007) could offer insights and a starting point for the development of a data collection tool which could be subsequently adopted by national surveys. There are, however, other additional stressful life events which are not captured by this question set and it would be worth considering whether the question set should be developed further. One such stressful life event which impacts on the mental health of children and young people is loss of contact with a parent, specifically the absence of a positive relationship with a father, especially a birth-father.

17. Adverse childhood experiences

There is a need to collect data on the extent of adverse childhood experiences which have occurred in the life of children and young people. A means of assessing this should be identified or developed and the data collected in a routine national survey.

The question set asked of both parents and children in the ONS surveys of the mental health of children and young people in Great Britain (Green *et al.*, 2005; Parry-Langdon *et al.*, 2007) could offer insights and a starting point for the development of a data collection tool which could be subsequently adopted by national surveys.

Family Level

18. Parent-child relationship

An assessment of the quality of the parent-child relationship, including that for fathers, at the population level is required nationally in Scotland. A means of assessing this should be identified or developed and the data collected in a routine national data collection system(s) in Scotland.

Such an assessment would provide a broad assessment of relationship issues and could cover attachment felt by the child,[2] a very specific marker of the quality of the parent-child relationship from a child's perspective, ideally covering the period from birth until the third birthday. Whilst various parent-child relationship scales that extend to 3 years of age have been delivered at the population level through surveys such as the Millennium Cohort Study and Sure Start, these require sufficient validation.

19. Nurturing adult

There is a need to collect data on the presence of a nurturing adult (a caring, competent and consistent adult who can be confided in) in a child's life nationally in Scotland. A means of assessing this should be identified or developed and the data collected in a routine national data collection system in Scotland.

20. Parental discord

There is a need to collect data on parental discord from a child's perspective nationally in Scotland. A means of assessing this should be identified or developed and the data collected in a routine national data collection system in Scotland.

Assessment of parental discord from a child's perspective should specifically cover the nature of the inter-parental conflict covering such things as frequency, intensity and resolution and feelings of threat to the child and self-blame. One such scale is the validated and widely cited Children's Perception of Interparental Conflict Scale (CPIC) (Grych *et al.*, 1992), developed specifically to assesses multiple aspects of conflict from a child's perspective. However, at 49 items long it is unsuitable for inclusion in national survey assessments but could be a starting point for identifying a suitable survey

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[2] Currently there is no identified scale which can be delivered at the population level through surveys to assess attachment (Lim *et al.*, 2010). Developmental work to either create an attachment measure *de novo* or to further validate existing promising scale would be a substantial undertaking.

question(s) if an appropriately short scale is not available for the assessment nationally.
21. Caring for family members
More detailed information should be collected on a national basis about the nature of a child's caring experience to allow meaningful indicators to be established. A suitable means for collecting more in-depth data on caring needs to be identified or developed and the data collected in a routine national data collection system in Scotland.
Whilst data on the caring responsibilities that children and young people undertake are available from the Scottish Household Survey (and will also be from the Scottish Health Survey from 2012), this data provide statistics on the number of carers and the number of hours they spend caring, rather than the quality of caring experience, which is important for a child's mental health. A suitable means for collecting more in-depth data on caring needs to be identified or developed.
22. Contact with non-resident birth parent
There is a need to collect data on the frequency of contact children and young people have with non-resident birth parents, especially with fathers, nationally in Scotland.
There are no suitable data currently available on the contact children and young people have with non-resident birth parents. A means of assessing this should be identified or developed and the data collected in a routine national data collection system in Scotland.
23. Maternal drug and alcohol use in pregnancy
Robust data on maternal drug and alcohol use in pregnancy and the effect of alcohol use in pregnancy are required. Established work to improve national data collection should be monitored to determine the suitability of the improved data.
Current SMR02 data from ISD Scotland are not robust enough for monitoring purposes. However, work underway, which will lead to improved SMR02 data and the Scottish Government policy focus on foetal alcohol spectrum disorder, with an associated programme of work to enhance surveillance and identification of children with foetal alcohol spectrum disorder, could mean that data will become suitable for providing robust indicators of maternal drug and alcohol use in pregnancy in the future. This work should be monitored to determine the suitability of the improved data.
24. Parental problematic alcohol/drug consumption
Work being undertaken by the Scottish Government to develop indicators for/estimates of children and young people affected by parental substance misuse (CAPSM) should be assessed to determine whether it is suitable for the data-less indicators of parental problematic alcohol/drug consumption.
25. Maternal mental health during pregnancy
There is a need for routine national data on maternal mental health (both mental health problems and mental wellbeing) during pregnancy. National opportunities should be explored.
Existing scales such as the General Health Questionnaire (GHQ-12) to assess possible mental health problems and the Warwick Edinburgh Mental Well-being Scales (WEMWBS) to assess mental wellbeing should be considered where an opportunity arises for data collection in this population.
26. Postnatal depression
There is a need for national data to be collected and reported on for postnatal depression both for mothers and fathers. National possibilities should be

explored.

The indicator set requires that data be collected and reported on for postnatal depression both for mothers and fathers. While the Edinburgh Postnatal Depression Scale score is routinely collected amongst postnatal women and recorded in midwifery and health visitor notes, these are not routinely recorded electronically nor collated nationally. Opportunities should be sought to introduce a national data collection system for postnatal depression for mothers and fathers.

Learning Environment Level

27. Pre-school home learning environment

Further work is required to define the pre-school home learning environment and how it might be measured for an indicator on the pre-school home learning environment.

Further work is required to define this concept and how it is best measured for an indicator. Once initial work has been completed, opportunities should be sought to collect data in a routine national data collection system.

28. Early years friendships

Assessment of the ability of children aged 3 to 4 years old to form and maintain friendships is required nationally. A means of assessment needs to be identified or developed and included in a routine national data collection system.

National data on peer relationship problems are available for children from 4 years onwards but not for those younger in age leaving a clear data gap on friendships for the very early years. A means of assessing early years friendships needs to be identified or developed and then included in a routine national data collection system.

29. Relationships with all school staff

There is a need to collect data on the quality of relationships with all school staff. Suitable question(s) should be identified or developed and included in a routine national survey.

Within the school environment it is not just relationships and treatment by teachers that are important for children's mental health. Relationships with all school staff are equally important. Data therefore need to be collected in a routine national survey on a wider range of relationships in the school setting. Suitable question(s) should be identified or developed in the first instance.

30. Wider successes at school

There is a need to collect data on whether children feel that their school acknowledges their wider successes. A means of assessment should to be identified or developed and included in a routine national data collection system.

Success is historically assessed in an academic manner but it is much wider than this as the new Curriculum for Excellence seeks to convey. A means of assessing wider successes at school needs to be identified or developed and then included in a routine national data collection system.

31. Overall school ethos

There is a need to collect data on the overall school ethos nationally in Scotland. A means of assessment should to be identified or developed and

included in a routine national data collection system.

Current policy such as the Curriculum for Excellence recognises the importance of the school ethos for many aspects of children and young people's lives including their mental health. Data on the school overall ethos covering such things as relationships, the environment for learning, personal and professional satisfaction, leadership, opportunities for children to take responsibility, involvement of staff in decision-making, and the 'feel' of the school should be collected routinely nationally. A suitable scale or set of questions, which could be combined to provide a single assessment, should be identified or developed. A set of twelve school ethos indicators have been developed for Scotland (MacBeath *et al.*, 1992a, 1992b). Whilst not developed with factors which impact on mental health explicitly in mind they offer a good resource to inform data collection.

32. Pressure to succeed or pressure to fit in

There is a need to collect data on the pressure children and young people feel to succeed in life and to fit in at school or with others their age. Suitable question(s) should be identified or developed and included in a routine national survey.

There are no existing suitable sources of data on this indicator and opportunities should be sought to identify a suitable data collection instrument and means of data collection. Items to collect the data could be along the lines of the following suggestion by the Children and Young People's Mental health Indicators Advisory Group:

- *Do you feel under pressure to succeed in life?*
- *Do you feel under pressure to fit in at school or with others your age?*
  With answers: no pressure; a little pressure; a lot of pressure; overwhelming pressure

Community Level

33. Sense of agency

There is a need to collect data to allow an assessment of whether children and young people believe that they can make, or believe that they already do make, a positive difference in the world around. Suitable question(s) should be identified or developed and included in a routine national survey.

Collection of data on children and young people's sense of agency is consistent with the recent Programme for Government, launched 7th September 2011, which contains a new Rights of Children & Young People Bill for consultation which will enshrine in law the requirement for the Scottish Government to have due regard to the UN Convention of the Rights of the Child when exercising its responsibilities. The bill will ensure that all of the Scottish Government's policies and legislation take account of and promote the rights of children and young people, and aims to set an example for the wider public sector. Suitable question(s) should be identified or developed and included in a routine national survey.

34. Respect of children's rights

There is a need to collect data to allow an assessment of whether children and young people feel their rights are respected by others. Suitable question(s) should be identified or developed and included in a routine national survey.

Collection of data on whether children and young people feel that their rights are respected is consistent with the recent Programme for Government, launched 7th September 2011, which contains a new Rights of Children & Young People Bill for consultation which will enshrine in law the requirement for the Scottish Government to have due regard to the UN Convention of the Rights of the Child when exercising its responsibilities. The bill will ensure that all

of the Scottish Government's policies and legislation take account of and promote the rights of children and young people, and aims to set an example for the wider public sector. Suitable question(s) should be identified or developed and included in a routine national survey.

35. Contact with peers

Further developmental work should be undertaken to understand children and young people's social networks, specifically contact with peers. This will assist in developing suitable question(s) for inclusion in routine national surveys.

Social networks are an important part of children and young people's lives and one that needs to be assessed. However, the nature of networks and peer group contacts are rapidly changing for children and young people as telecommunication technology advances. This is an emerging area where further work is needed to fully understand how networks currently work for children and young people in order to be able to say what this indicator should be and what needs to be assessed and how.

36. Informal social control

There is a need to collect data to allow a national assessment of informal social control. Suitable question(s) should be identified or developed and included in a routine national survey.

A potential scale for assessing informal social control is for example the Informal Social Control Scale (Sampson *et al.,* 1997), which measures the willingness to intervene in hypothetical neighbourhood-threatening situations, such as where a child/children are perceived to be misbehaving. The suitability of scales for inclusion in a national survey needs to be determined and a shortened version or question(s) developed specifically if required.

Structural Level

37. Discrimination and harassment

There is a need to collect data on whether children and young people feel that they have been discriminated against. Suitable question(s) should be identified or developed and included in a routine national survey.

Collection of data on whether children and young people feel that they have been discriminated against is consistent with the recent Programme for Government, launched 7th September 2011, which contains a new Rights of Children & Young People Bill for consultation which will enshrine in law the requirement for the Scottish Government to have due regard to the UN Convention of the Rights of the Child when exercising its responsibilities. The bill will ensure that all of the Scottish Government's policies and legislation take account of and promote the rights of children and young people, and aims to set an example for the wider public sector. Suitable question(s) should be identified or developed and included in a routine national survey.

38. Perception of attitude of adults towards children and young people

There is a need to collect data on children and young people's perception of the attitude of adults towards children. Suitable question(s) should be identified or developed and included in a routine national survey.

Collection of data on children and young people's perception of the attitude of adults towards children is consistent with the recent Programme for Government, launched 7th September 2011, which contains a new Rights of Children & Young People Bill for consultation which will enshrine in law the requirement for the Scottish Government to have due regard to the UN Convention of the Rights of the Child when exercising its responsibilities. The bill will ensure that all of the Scottish Government's policies and legislation take account of and promote the rights of children and young people, and aims to

set an example for the wider public sector. Suitable question(s) should be identified or developed and included in a routine national survey. The Office for National Statistics' question developed for 16 to 24 year olds (Deviren and Babb, 2005) could be considered as a starting point.

39. Stigma towards children and young people

There is a need to collect data on stigma towards children and young people. Suitable question(s) should be identified or developed and included in a routine national survey.

Collection of data on whether children and young people perceive themselves to be stigmatised is consistent with the recent Programme for Government, launched 7th September 2011, which contains a new Rights of Children & Young People Bill for consultation which will enshrine in law the requirement for the Scottish Government to have due regard to the UN Convention of the Rights of the Child when exercising its responsibilities. The bill will ensure that all of the Scottish Government's policies and legislation take account of and promote the rights of children and young people, and aims to set an example for the wider public sector. Suitable question(s) should be identified or developed and included in a routine national survey. Surveys which have previously collected data on aspects of stigma towards young people (e.g. Being Young in Scotland 2009 and Office for National Statistics 2003 Citizenship survey's young people's boost) could offer insight into how best to collect this data.

40. Greenspace

Further work is required to determine how best to measure children and young people's contact with greenspace.

Evidence is emerging for a link between contact with nature, green and open spaces and children's mental wellbeing. How this may be captured in an indicator is complicated and requires more work to determine what should be assessed, this will assist in developing suitable question(s) for inclusion in routine national surveys. A data-less indicator of '*assessment of whether children and young people feel they can access green and open spaces in their neighbourhood*' has been proposed but may not prove to be the most appropriate indicator relating to greenspace.

41. Domestic abuse

Robust routine national data are required on children and young people affected by domestic abuse. Established work to improve current data should be monitored to determine the suitability of improved data for providing a robust indicator of domestic abuse.

The Scottish Crime and Victimisation Survey collects data on domestic abuse, however, work is underway seeking to improve this data. When available the suitability of this improved data for an indicator should be determined. Data on domestic abuse are also collected by the police force but currently this is not robust enough for the purposes of monitoring by a national indicator. Work through the Police Information Management strategy is seeking to collect consistent national systematic data on child concerns through a new child concern form, this includes domestic abuse. This form links to the Getting it Right for Every Child SHANARRI indicators and is due to be rolled out nationally. Once established, the suitability of this improved data for an indicator should be determined.

42. Child protection

The suitability and appropriateness of a revised child protection indicator, currently in development for the Scottish Government's National Performance Framework, and improved child protection data for an indicator on child protection should be determined.

Whilst there has been work to improve child protection classification, which may help improve consistency, differences in service provision and reporting

practice etc between areas mean that it is not possible to use current data on child protection for national monitoring purposes. Work is currently underway in the Scottish Government's child protection team to improve child protection data and this includes work to develop a revised child protection indicator for the Scottish Government's National Performance Framework.

43. Neighbourhood violence

Robust routine national data are required on the exposure of children and young people to violence in their neighbourhood. National opportunities and approaches to capture this data should be explored.

Whilst data on violence is currently recorded by the police it is recognised that this mainly reflects incidence of more serious violence and is an underestimation of the true picture. Reporting practice can also varies between areas. Alternative approaches to capturing exposure to violence, including the use of survey methods should be considered.

44. Culture and values

Further development work is required on the construct of culture and its associated indicator(s).

An in-depth review of the literature is needed to obtain a greater understanding of this complex construct and the academic debates covering such issues as materialism, consumerism and individualism of modern Western society. This will assist in conceptualising this concept and developing the working understanding further so a suitable indicator(s) can be identified to capture aspects of culture (norms, individualism, materialism, media etc) important to children and young people's mental health and in developing appropriate question(s) suitable for inclusion in national surveys to obtain routine national data.

Prioritisation of the Recommendations

In order to identify which are the most important recommendations to focus on for new data, the advisory group was asked to prioritise all the recommendations, except the six general recommendations, in terms of importance of the indicator.[3] The indicators are presented in the table below in order of prioritisation by the Advisory Group. Further assessment indicates whether a suitable measurement tool and data improvement initiative already exist for collecting the required data or whether further work is required to define the construct and/or indicator.[4]

Recommendation	Advisory group score	Suitable measurement tool, data improvement initiative or further work required
Readiness for school	High Priority Score 26-33	Early Development Instrument, currently being assessed and if favourable the Scottish Government may adopt it
Parent-child relationship		Potential scales exist but requiring further validation
Nurturing adult		No tool identified
Mental wellbeing of children aged 8 to 13 years old		Stirling Children's Wellbeing Scale offers potential
Maternal mental health during pregnancy		Scales such as GHQ-12 and WEMWBS
Mental wellbeing of children in the early years of their life: on entry to P1		No tool identified
Pre-school home learning environment		Work is required to define and determine how best to measure
Overall school ethos		School ethos indicators could inform development
Sense of agency		No tool identified
Stressful life events		Office for National Statistics questions could inform development
Maternal drug and alcohol use in pregnancy		SMR02 data, which are being improved, and project to enhance identification of children with foetal alcohol spectrum disorder
Postnatal depression		Scales such as Edinburgh Postnatal depression Scale
Parental problematic alcohol/drug consumption		Scottish Government is working on indicators/estimates
Self-harm	Medium Priority Score 19-25	Office for National Statistics questions could inform development
Contact with non-resident birth parent		The Growing up in Scotland Study has asked about this
Domestic abuse		Current data collection (survey assessment and police recording) is being improved

[3] Priority was assigned to each recommendation by the advisory group using a scale of 1 (low priority) to 3 (high priority).
[4] As identified in the course of the indicators work. Extensive searches have not been carried out.

Indicator	Priority	Tool
Child protection		Scottish Government is working to improve data
Mental wellbeing of children in the early years of their life: aged from 24 to 30 months		No tool identified but could link with a proposed re-introduced 24-30 month assessment
Emotional and behavioural problems of children aged from 24 to 30 months		No tool identified but could link with a proposed re-introduced 24-30 month assessment
Adverse childhood experiences		ONS questions could inform development
Parental discord		Children's Perception of Interparental Conflict Scale could inform development
Discrimination and harassment		No tool identified
Play		Getting it Right for Play indicators and toolkit could inform development
Respect of children's rights	Medium Priority Score 19-25	No tool identified
Stigma towards children and young people		Previous surveys could inform development
Contact with peers		Work is required to define and determine how best to measure
Eating disorders		Opportunities to gather this data should be pursued
Greenspace		Work is required to define and determine how best to measure
Neighbourhood violence		No tool identified
Emotional intelligence		Work is required to define and determine how best to measure
Caring for family members		No tool identified
Pressure to succeed or pressure to fit in		Advisory Group suggestion could inform development
Perception of attitude of adults towards children and young people		ONS questions could inform development
Relationship with all school staff		No tool identified
Culture and values		Work is required to define and determine how best to measure
Wider successes at school		No tool identified
Informal social control	Low priority Score 11-18	Informal Social Control Scale could inform development
Early years friendships		No tool identified
Spirituality		Work is required to define and determine how best to measure