

Which school do you go to?

If you are not currently at school (for example, if you are being home educated), select the 'Not at school' option at the end of the list.

Welcome to the Kirklees Young People's Survey 2019.

We are giving every Year 9 student across Kirklees the chance to tell us about their experiences in order to find out what some of the big issues are for young people of your age. We really want to understand how you're feeling, what you're doing, what you think of the support you get and the place you live. Your comments will help schools, Kirklees Council and other organisations we work with to decide what to do to make sure you have the best chance for a happy, healthy life.

The survey should take less than 30 minutes to complete, and you'll be given a chance to talk about some of the issues raised in the survey as a group at the end. We won't ask for personal information like date of birth, name or address. Although we will be sharing combined results from the survey with organisations that provide services to young people in Kirklees, this will only be at a grouped level.

We will never show results of the survey at a level that means someone could be identified from their answers. This means that **nobody will know which answers you've given.**

We hope you'll be able to answer all the questions, but you can choose not to answer anything you don't want to; just move on to the next question if this is the case. If you don't understand something please ask your teacher/the supervising adult. As you work through the survey, additional questions may pop up depending on the answer you select. Most questions ask for a single answer - if you feel like you could select two answers to these questions, choose the one that best reflects how you feel or think at that moment.

Please answer all questions honestly. Remember, your name is not on the questionnaire and no-one will find out what you put.

If you don't want to complete the survey, you don't have to – just circle 'No' below, and raise your hand to let your teacher/the supervising adult know.

Do you agree to take part in the Kirklees Young People's Survey 2019?

Yes – *Please turn to the next page to continue with the survey*

No – *Please read the information below*

Choosing not to take part in the survey

Thank you. If you are worried about anything that may have been covered by the survey, please talk to an adult you trust. They may be able to help, or suggest where you can go to get help. You could also ring ChildLine on 0800 1111, or visit their website (www.childline.org.uk). Kirklees Public Health have also produced a list of useful resources, which you can find here:
http://observatory.kirklees.gov.uk/jsna/KYPS_resources

Please raise your hand to let your teacher/the supervising adult know you choose not to take part.

By continuing, you agree to take part in the survey

Please turn to the next page >

About you

These questions help us to understand if there are any issues which affect some people more than others. We ask for your postcode so we can match to the part of Kirklees in which you live. We can then group all the results from a particular area together and can look for differences between areas.

Q1. How would you describe yourself?

- ☐ Girl
- ☐ Boy
- ☐ Trans girl
- ☐ Trans boy
- ☐ Non-binary
- ☐ I would describe myself in some other way
- ☐ Rather not say

Q2. Which best describes who you are sexually attracted to? *Please select all that apply.*

- ☐ Not attracted to anyone
- ☐ Girls
- ☐ Boys
- ☐ People of non-binary gender
- ☐ People of any gender
- ☐ Other
- ☐ Not sure
- ☐ Rather not say

Q3. What is your home postcode?

Please choose the home where you spend most time. We will only use this postcode to match to the part of Kirklees in which you live, so we can group results from a particular area together and can look for differences between areas. Your house will not be identified and this will not be used to send you anything through the post.

_____ < *write your postcode here*

- ☐ Don't know
- ☐ I'd rather not say

Q4. Which area of Kirklees do you live in? (If postcode not provided)

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Please turn to the next page >

Taking care of yourself

These questions are about your general health and some of the things which might have an effect on it. Remember, your answers are anonymous so no one will find out what you put.

Q5. In general, would you say your health is..?

- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Bad
- ☐ Very bad

Q6a. How often do you eat breakfast?

- ☐ Every school day – *Please move on to Q7*
- ☐ Most days – *Please answer the next question (Q6b)*
- ☐ Sometimes – *Please answer the next question (Q6b)*
- ☐ Hardly ever or never – *Please answer the next question (Q6b)*

Q6b. What is the most common reason for you not eating before school?

- ☐ Not hungry
- ☐ Not enough time
- ☐ Too early to eat
- ☐ Dieting
- ☐ No food in the house
- ☐ Another reason
- ☐ I'd rather not say

Q7. If you're hungry at home, is there food in the house for you to eat (even if it's something you don't like very much)?

- ☐ Always/most of the time
- ☐ Sometimes
- ☐ Hardly ever/never
- ☐ I'd rather not say

Q8. In the school holidays, how often do you... *Please mark your choice with an 'X'*

	Often (at least a few times every week)	Sometimes (about once a week)	Hardly ever	Never
Do fun things with your family or friends				
Take part in organised activities or holiday clubs				
Have to look after a younger brother or sister				
Have to look after another member of your family				
Miss a meal or don't get enough to eat (not through your own choice)				

Please turn to the next page >

Your wellbeing

These questions help us to understand how your year group tends to feel overall.

Q9. How often do you feel that you have no one to talk to?

☐ Hardly ever or never

☐ Some of the time

☐ Often

Q10. How often do you feel left out?

☐ Hardly ever or never

☐ Some of the time

☐ Often

Q11. How often do you feel alone?

☐ Hardly ever or never

☐ Some of the time


☐ Often

Q12. Below are some statements about feelings and thoughts. Please mark the answer that best describes your experience of each over the last 2 weeks.


	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future (<i>'Optimistic' means hoping or believing that good things will happen</i>)					
I've been feeling useful					
I've been feeling relaxed					
I've been dealing with problems well					
I've been thinking clearly					
I've been feeling close to other people (<i>'Close' here might mean having someone you can talk to about things, knowing that someone is there for you if you need them, etc.</i>)					
I've been able to make up my own mind about things					

Please turn to the next page >

Q13. Please circle the answer that best describes your feelings, where 0 is 'not at all' and 10 is 'completely'



Not at all



Completely

012345678910

Overall, how satisfied are you with your life nowadays?
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

To what extent do you feel the things you do in your life are worthwhile?

(‘Worthwhile’ here might mean worth spending time or effort on)
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

How happy did you feel yesterday?
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

Behaviour

These questions are about things you do (or don't do) that can affect your physical and emotional health. Remember, your answers are anonymous. You will be given some resources at the end of the survey with more information about the impact these behaviours may have on your health, which can support you if you want to change your behaviour.

Q14. What is your main method of travel to school? If more than one method could apply, please choose the one option that you feel is the most representative of your journey to school.

- ☐ Walk
- ☐ Cycle
- ☐ Car or van
- ☐ Bus
- ☐ Train
- ☐ Other

Q15. How much PE do you do in school in an average week?

Please write a time in 10 minute intervals (e.g., 10 minutes, 20 minutes).

Q16. Are you a member of a club or team that does sport or other organised physical activity (either through school or outside of school)?

- ☐ Yes

Please move on to Q17.
- ☐ No

Please move on to Q16b.

Please turn to the next page >

Q16b. What would encourage you to join a club or team that does sport or other organised activity? Please tick all that apply

- ☐ If I was better at sports
- ☐ If my fitness level was higher
- ☐ If I had more information about what was available
- ☐ If they met at a place I could easily get to
- ☐ If I had more spare time
- ☐ Another reason
- ☐ I don't want to join one of these clubs or teams
- ☐ I'd rather not say

Q17. In the past week, on how many days have you done a total of 1 hour (60 minutes) or more of physical activity, which was enough to make you breathe harder (or make you sweaty or make your heart beat faster)?

This may include sport, school PE or other exercise, and walking quickly or cycling (for fun or to get to and from places).

days

Q18a. Have you ever tried a tobacco cigarette?

☐ Yes

Please move on to Q18b.

☐ No

Please move on to Q19.

☐ I'd rather not say

Q18b. Which statement best describes your use of tobacco cigarettes?

- ☐ I have tried smoking once or twice
- ☐ I used to smoke but I don't now
- ☐ I smoke but less than one cigarette a week
- ☐ I smoke at least once a week, but not every day
- ☐ I smoke every day

Q19a. Have you ever tried an e-cigarette/vaping?

☐ Yes

Please move on to Q19b.

☐ No

Please move on to Q20

☐ I'd rather not say

Q19b. Which statement best describes your use of e-cigarettes?

- ☐ I have tried them once or twice
- ☐ I used to use them but I don't now
- ☐ I use them less than once a week
- ☐ I use them at least once a week, but not every day
- ☐ I use them every day

Please turn to the next page >

If you answered 'Yes' to Q18 and Q19 please answer Q19c, otherwise move on to Q20

Q19c. Which statement describes you best?

- ☐ I started smoking tobacco first and moved on to e-cigarettes
- ☐ I started using e-cigarettes first and moved on to smoking tobacco

Q20. Have you ever had an alcoholic drink (more than a sip)?

- ☐ Yes
Please move on to Q20b.
- ☐ No
Please move on to Q21
- ☐ I'd rather not say

Q20b. How often do you usually have an alcoholic drink?

- ☐ I never drink alcohol now
- ☐ Occasionally (less than once a month)
- ☐ About once a month
- ☐ About once a week
- ☐ More than once a week

Q21. Have you ever had sex (sexual intercourse)?

- ☐ Yes
Please move on to Q21b.
- ☐ No
Please move on to Q22
- ☐ I'd rather not say

	Always	Usually	Sometimes	Never	I'd rather not say
Q21b. Did you or your partner use condoms?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q21c. Did you or your partner use other forms of contraception (e.g. the pill, implant)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q22. Do you know where to get help or information about sexual health (e.g. safe sex, contraception, sexually transmitted diseases)?

- ☐ Yes
- ☐ No
- ☐ Not sure

Q23. Have you ever gambled online?

- ☐ Yes
- ☐ No
- ☐ I'd rather not say

Please turn to the next page >

Being you

These questions are about the things that may be affecting how you feel about life at the moment and how you're coping with them. The way people deal with problems can have a positive or negative effect on their health. Remember, your answers are anonymous so no one will find out what you put. You will be given a set of resources at the end of the survey with more information about some of the issues raised in this section. Please talk to an adult you trust or have a look at these resources if you're having any problems.

Q24a. Do you ever worry about anything?

☐ Yes

Please move on to Q24b

☐ No

Please move on to Q25.

Q24b. What types of things do you sometimes worry about?

Please tick all that apply

- ☐ Growing up/puberty
- ☐ My weight or appearance
- ☐ Relationships/not fitting in
- ☐ Being teased or bullied
- ☐ Homework/school work/doing well in exams
- ☐ Being at school
- ☐ Home life or family problems
- ☐ Money problems
- ☐ Health problems
- ☐ My future
- ☐ Being the victim of a crime
- ☐ Someone else's wellbeing

Please turn to the next page >

Q24c. How often do you worry about..? Please tick all that apply

	Hardly ever	Sometimes	Quite often	Most days/every day
Growing up/puberty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My weight or appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationships/not fitting in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being teased or bullied	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homework/school work/doing well in exams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home life or family problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Money problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being the victim of a crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Someone else's wellbeing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Something else	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q25. If you have a problem or feel stressed, what do you do about it?*Please tick all that apply*

- ☐ I never have a problem or feel stressed
- ☐ Talk to someone about it
- ☐ Chat about it on social media
- ☐ Think about it on my own
- ☐ Sort it out myself
- ☐ Seek help in magazines or on the internet
- ☐ Rest or sleep more
- ☐ Eat more
- ☐ Eat less
- ☐ Do something to take my mind off it (e.g. watch TV, listen to music, play video games)
- ☐ Do some physical activity/sport
- ☐ Keep busy with other things
- ☐ Smoke a cigarette
- ☐ Drink alcohol
- ☐ Use drugs
- ☐ Cut or hurt myself
- ☐ Something else
- ☐ Do nothing
- ☐ I'd rather not say

Q26. In the last six months have you been physically hurt or intimidated by someone (for example getting hit, pushed around, or threatened, or having belongings stolen)?☐ Yes*Please move on to Q26b.*☐ No*Please move on to Q27*☐ I'd rather not say*Please turn to the next page >*

Q26b. How often has this happened?

- ☐ 1-3 times in the last 6 months
- ☐ More than 4 times in the last 6 months
- ☐ More than once a week

Q27. In the last six months have your feelings been hurt on purpose by someone (such as being called names, being deliberately left out of group activities, or having nasty stories spread about you)?

☐ Yes

Please move on to Q28b.

☐ No

Please move on to Q29

Q27b. How often has this happened?

- ☐ 1-3 times in the last 6 months
- ☐ More than 4 times in the last 6 months
- ☐ More than once a week

Q28. How well does your school deal with bullying?

- ☐ Usually very well/quite well
- ☐ Sometimes quite/very well and sometimes not very well/badly
- ☐ Usually not very well/badly
- ☐ Bullying is not a problem at my school
- ☐ Don't know
- ☐ I'd rather not say
- ☐ Not applicable (not currently at school)

Q29. Does your family ever worry about having enough money to pay for essentials (e.g., food, bills, school uniform)?

- ☐ Never/hardly ever
- ☐ Sometimes
- ☐ Quite often/all the time
- ☐ Don't know
- ☐ I'd rather not say

Please turn to the next page >

Safety and technology

Technology is an important part of our lives, but it can be damaging if used in the wrong way. Please answer these questions honestly; your answers are anonymous so no one will find out what you put.

Q30. Have you ever been involved in sending or receiving 'sexting' messages? 'Sexting' means sharing sexual, naked or semi-naked images or videos, or sending sexual messages

☐ Yes

Please move on to Q30b.

☐ No

Please move on to Q31

☐ I'd rather not say

Q30b. How were you involved in sexting? Please tick all that apply

- ☐ Receiving an image directly
- ☐ Sending my own image
- ☐ Seeing an image that was originally sent to someone else
- ☐ Sending on an image sent by someone else
- ☐ Other
- ☐ I'd rather not say

Q31. Are you comfortable talking to the following people about online safety?

	Yes	No	Don't know
Friends			
Teachers			
Another adult at school			
Parents/carers			
Other family members (e.g., brothers or sisters)			

Please turn to the next page >

Your local area

We'd like to know what you think of your local area (around where you live), as this can have an effect on your health and wellbeing. With this information, the council, police, community groups and others can decide whether anything needs to change in your area. Remember, your answers are anonymous so no one will find out what you put.

When answering questions about your 'local area' you might think about the town or village in which you live, or the area within about a mile (15-20 minutes' walk) of your home.

Q32. Overall, are you satisfied with your local area as a place to live?

As a guide, 'Very satisfied' could mean you're really happy with things in your local area and wouldn't want to change anything; 'Very dissatisfied' could mean you're really unhappy with your local area and would want lots of things to change.

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Dissatisfied
- ☐ Very dissatisfied

Q33. How safe do you feel when outside in your local area?

- ☐ Very safe
- ☐ Fairly safe
- ☐ Neither safe nor unsafe
- ☐ Fairly unsafe
- ☐ Very unsafe
- ☐ Don't know

Q34. Do any of these things make the area where you live feel unsafe?

Please tick all that apply.

- ☐ Gangs
- ☐ Bullies
- ☐ People who hang about
- ☐ Fighting
- ☐ Dangerous dogs
- ☐ Crime
- ☐ Robbery
- ☐ Racial tension (*people from different racial/ethnic backgrounds not getting on with each other*)
- ☐ Road traffic
- ☐ Drug dealing
- ☐ Knives
- ☐ Guns
- ☐ Extremist views (*such as extreme political or religious opinions that may encourage doing harm to people with different views*)
- ☐ The way the area looks
- ☐ Something else
- ☐ The area where I live feels safe

Please turn to the next page >

Politics and local government

Politicians and local Councillors are elected by the public to make decisions that can affect all our lives. Even if you're not yet old enough to vote, it is still important that young people's opinions are represented and considered by local and national government. We want to hear your views on what Kirklees Council should be doing, and how involved and interested you are in politics.

Q35. What are the most important local issues that you think Kirklees Council should deal with? Choose up to 3 responses

- ☐ The local area doesn't feel safe
- ☐ The local area doesn't look very nice (rubbish/litter, graffiti, etc.)
- ☐ Local parks are not very well looked after or don't have enough equipment
- ☐ Not enough good cycle ways and footpaths
- ☐ Not enough organised community events for young people
- ☐ Not enough youth clubs
- ☐ Not enough sports facilities
- ☐ Not enough leisure facilities (cinema, bowling, etc.)
- ☐ Not enough other things for young people to do
- ☐ Poor school facilities or equipment
- ☐ Poor choices for further education (after GCSEs)
- ☐ Not enough job or apprenticeship opportunities
- ☐ Not enough of my favourite shops
- ☐ Something else
- ☐ There are no local issues that the Council needs to deal with
- ☐ Don't know

Q36. Are you interested in politics? *This may involve the process of making decisions about how the country is run and how Local Authorities such as Kirklees Council spend their budget to support the people living in the area*

☐ Yes

☐ No

☐ Don't know

Q37. Where do you get your information about politics from? *Please tick all that apply.*

- ☐ My school
- ☐ TV and media websites
- ☐ Social media
- ☐ Kirklees Council
- ☐ Family and friends
- ☐ Local community or religious leaders
- ☐ Somewhere else
- ☐ Don't know

Q38. Have you met or had contact (e.g. email) with your local elected Councillor or Member of Parliament (politician)?

☐ Yes

☐ No

☐ Don't know

More about you

These questions help us to understand if there are any issues which affect some people more than others. The law recognises that some people may be put at a disadvantage in society due to their natural characteristics. By seeing how different groups of people answer the survey questions, we can work to reduce these inequalities.

Q39. What is your ethnic group? Tick the option that is most true for you. If you have parents of multiple heritage, choose the option you identify with the most (this may be a single ethnicity or one of the mixed/multiple ethnic group categories).

- ☐ White: White British
- ☐ White: Irish
- ☐ White: Gypsy or Irish Traveller
- ☐ White: Eastern European
- ☐ White: other White background

- ☐ Asian/Asian British: Bangladeshi
- ☐ Asian/Asian British: Indian
- ☐ Asian/Asian British: Pakistani
- ☐ Asian/Asian British: Chinese
- ☐ Asian/Asian British: other Asian background

- ☐ Black/African/Caribbean/Black British: African
- ☐ Black/African/Caribbean/Black British: Caribbean
- ☐ Black/African/Caribbean/Black British: other Black background

- ☐ Mixed/Multiple ethnic groups: White and Black Caribbean
- ☐ Mixed/Multiple ethnic groups: White and Black African
- ☐ Mixed/Multiple ethnic groups: White and Asian
- ☐ Mixed/Multiple ethnic groups: any other mixed/multiple ethnic background

- ☐ Other: Arab
- ☐ Other: any other ethnic background

Q40. Do you have a special educational need or a learning difficulty?

☐ Yes

Please answer Q40b.

☐ No

Please move on to Q41

☐ Not sure

Q40b. Do you feel like you get enough support at school with this?

☐ Yes

☐ No

☐ Don't know

☐ Rather not say

Q41. Do you have a long-term health problem or disability that limits your day-to-day activities?

By long term we mean anything that has lasted, or is expected to last, at least 3 months

- ☐ No – *Please move on to Q42*
- ☐ Yes, limited a little – *Please answer the next question (Q41b)*
- ☐ Yes, limited a lot – *Please answer the next question (Q41b)*

Q41b. Do you feel like you get enough support from health services with this?

☐ Yes

☐ No

☐ Don't know

☐ Rather not say

Q42. Do you spend time at home caring for someone with a disability or illness (physical or mental)? *This could include things like doing household chores, helping with washing/dressing or talking to them about their problems*

☐ Yes

☐ No

Please answer Q42b.

Q42b. Who do you look after? Please select all that apply

☐ Parent

☐ Brother or sister

☐ Other relative

☐ Someone else

Only answer Q42c for those options ticked in Q42b

Q42c. How much time do you spend..?

	Less than an hour a day	1-2 hours a day	More than 2 hours a day	Sometime, but not every day
...looking after your parent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...looking after your brother or sister?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...looking after your relative?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...looking after this person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you very much for completing the survey!

We will now gather together the completed surveys from all Year 9 pupils at each school and across Kirklees. We will write a summary report for Kirklees which will be available here towards the end of 2019: www.kirklees.gov.uk/KYPS2019.

Each school will also receive a report showing the findings for their school. Results from the survey will be used by Kirklees Council and other appropriate organisations to help us see where changes could be made to improve the lives of young people in Kirklees. None of the findings from the survey will be shared at a level that enables individual people to be identified from their responses.

If you are worried about any of the issues covered in this survey, please talk to an adult you trust. They may be able to help, or suggest where you can go to get help. You could also ring ChildLine on 0800 1111, or visit their web site (www.childline.org).

Kirklees Public Health have also produced a list of useful resources, which you will be given at the end of this session. The list is also available here: http://observatory.kirklees.gov.uk/jsna/KYPS_resources. If you have finished the survey within the allocated time, please have a look at these resources.