

Scotland's mental health: Children and young people 2013

Sub-national data availability
NHS Health Scotland



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Authorship

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Abbreviations

C&YP	Children and young people
CHP	Community Health Partnerships
GHQ-12	12-item General Health Questionnaire
HBSC	Health Behaviour in School-aged Children Survey
ISD	Information Services Division
SALSUS	Scottish Schools Adolescent Lifestyle and Substance Use Survey
SCQF	Scottish Credit and Qualifications Framework
SDQ	Strengths and Difficulties Questionnaire
SMR	Scottish Morbidity Records
WEMWBS	Warwick-Edinburgh Mental Well-being Scale

Background

Improving mental health is a national priority in Scotland. *Towards a Mentally Flourishing Scotland: Policy and Action Plan 2009–2011*¹ committed NHS Health Scotland to work with key stakeholders to develop a set of national indicators to monitor trends in children and young people's (C&YP) mental health (mental wellbeing and mental health problems) and associated contextual factors. The importance of the indicators was highlighted in the latest mental health policy in *Scotland Mental Health Strategy for Scotland: 2012–2015*.²

The C&YP's mental health indicator set was finalised in November 2011. For further information see www.healthscotland.com/scotlands-health/population/mental-health-indicators/children.aspx While having a national remit, the considerable interest in establishing local mental health indicators has been recognised. This briefing paper has, therefore, been prepared to help local areas in making decisions.

Local indicators

The first step in monitoring mental health locally is to make maximum use of data that are already available for the local area of interest. But currently these are generally limited for local areas, especially for areas smaller than NHS Boards and local authorities. Local mental health indicators should not, however, be restricted to those for which data are currently available. The ability to monitor the mental health of C&YP at a local level will improve only if local indicator sets are developed on the basis of including indicators essential for assessing mental health, and then developing the means to collect such data, either drawing from national sources where these are able to provide robust and representative data, or developing local collection aligned with the national indicator set.

Although the indicator set has been developed for the national level, it also has local utility. The national C&YP's mental health indicators form a set from which colleagues responsible for a sub-national population can select those relevant to their needs. Local mental health indicators should be established on the basis of what is important locally, matching the definitions used in the national C&YP's mental health indicator set to ensure comparability. Although data for the national indicators have been drawn from national sources which allow as much sub-national disaggregation as possible, disaggregation to the local geographies required is often limited. In instances where national data for an indicator cannot be disaggregated to the required sub-national level, there may be two options: local boosts to the relevant national surveys could be prioritised or the relevant questions/scales, used nationally for the national indicators, could be used in surveys conducted locally.

Improved coverage of mental health in national surveys

National surveys are increasingly seeking to be responsive to local data needs. In recent years more questions have been included on mental health and the factors that impact on it, especially in the redesigned Scottish Health Survey. This has enhanced provision of Scotland-level data for the mental health indicators and some

¹ <http://scotland.gov.uk/Resource/Doc/271822/0081031.pdf>

² [www.scotland.gov.uk/Resource/0039/00398762.pdf](http://scotland.gov.uk/Resource/0039/00398762.pdf)

of these data will also be available for certain sub-national geographies allowing previously impossible sub-national analysis for some indicators.

An important example where data have become available is for mental wellbeing, a key indicator of population mental health. Inclusion of the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) in the Scottish Health Survey from 2008 has provided data on mental wellbeing for those aged 16 and above in Scotland annually, and for all NHS Boards after four years of the survey. Analysis for larger NHS Boards may be available sooner. Local authority analysis will be possible for the larger local authorities after four years; again it may be available sooner for the largest local authorities but only after many years for some of the smallest, due to small sample sizes at these sub-national geographies.

For C&YP, WEMWBS has been included in the Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) for S2 and S4 pupils (circa 13- and 15-year-olds) from 2010 and in the Scottish Health Survey for children aged 13 to 15 from 2012. The latter will complement the SALSUS WEMWBS data and add to the data already collected in the Scottish Health Survey on mental wellbeing (via WEMWBS) for those aged 16 and over.

Of note, the Scottish Government's Long Term Survey Strategy set out an objective to combine data from multiple surveys into a 'pooled sample', large enough to produce robust estimates of rarely-occurring characteristics at a national level and other characteristics at a smaller level. In order to achieve this, the Scottish Government has been developing a set of core and harmonised survey questions. The core questions have been identified for inclusion in all Scottish Government cross-sectional surveys from January 2012 (www.scotland.gov.uk/Topics/Statistics/About/SurveyHarm) and include the 7-item short version of WEMWBS (SWEMWBS), while the harmonised questions are those that may occur in more than one survey for which it is desirable to use the same wording and response categories to aid comparability. They are recommended for use but as they are not asked in all Scottish Government cross-sectional surveys the data from them will not be pooled.

Sub-national data for the children and young people's mental health indicators

The table below, 'Data sources and available sub-national geographies for the C&YP's mental health indicators for Scotland', shows the current position of sub-national data availability for the C&YP's mental health indicators for overall point estimates for the indicators. Other sub-national disaggregation by population subgroups, for example gender, will need to be assessed separately. Further information on the potentially possible sub-national availability is provided in the notes on the data sources below the table. It is, however, suggested that individual queries concerning a specific indicator and local geography are made to the relevant national survey manager or data provider.

The following documents (available from www.healthscotland.com/scotlands-health/population/mental-health-indicators/children.aspx) should be referred to for full

details of the indicators and whether the identified data source for a specific indicator has been available in past years:

- *Children and young people's mental health indicators for Scotland*: Final briefing, November 2011
- *Establishing a core set of national, sustainable mental health indicators for children and young people in Scotland*: Final report (2012)
- Scotland's mental health: Children and young people 2013: Full report, December 2013.

Conclusion

Where mental health indicators are desired locally, these should be established on the basis of what is important locally, matching the definitions used in the national C&YP's mental health indicator set to ensure comparability. The table and data source information below can then be used to identify what data are currently available or are planned to become available, taking into account the size of local area being considered. Where the local area is too small for robust data to be available from national sources, inclusion in local surveys of the questions and scales used to obtain data for the national mental health indicators will have to be considered. Local areas will need to balance a range of factors – including data requirements, feasibility and cost of collection, and quality and timeliness – in deciding what is most appropriate for their area.

Data sources and available sub-national geographies for the C&YP's mental health indicators for Scotland

Construct	Indicator	Data source	Geographies for the data
Mental health outcomes			
Mental wellbeing	Mental wellbeing (WEMWBS)	Scottish Health Survey	National , sample size for 16- and 17-year-olds too small for sub-geographies
		Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS)	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
	Life satisfaction	Scottish Health Survey	National , sample size for 16- and 17-year-olds too small for sub-geographies
		Health Behaviour in School-aged Children Survey (HBSC)	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Happiness	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Pro-social behaviour (SDQ)	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
		Scottish Health Survey	National , with some NHS Board analysis possible for 2008–2011 combined data
Mental health problems	Common mental health problems (GHQ-12)	Scottish Health Survey	National , sample size for 16- and 19-year-olds too small for sub-geographies
	Emotional and behavioural problems (SDQ)	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
		Scottish Health Survey	National , with some NHS Board analysis possible for 2008–2011 combined data
	Emotional symptoms (SDQ)	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting

		Scottish Health Survey	National , with some NHS Board analysis possible for 2008–2011 combined data
Conduct problems (SDQ)	SALSUS	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority , Alcohol and Drug Partnership and NHS Board reporting
		Scottish Health Survey	National , with some NHS Board analysis possible for 2008–2011 combined data
Hyperactivity/inattention (SDQ)	SALSUS	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority , Alcohol and Drug Partnership and NHS Board reporting
		Scottish Health Survey	National , with some NHS Board analysis possible for 2008–2011 combined data
Sadness	HBSC		National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
Alcohol dependency	Scottish Health Survey		National , sample size for 16- and 19-year-olds too small for sub-geographies
Drug-related disorders	ISD Scotland, SMR01/04		National
Suicide	National Records of Scotland		National with five years pooled data. NHS Boards may be possible with aggregation of more years of data
<i>Self-harm</i>	No suitable data source		
<i>Eating disorder</i>	No suitable data source		

Contextual factors associated with mental health

Individual

Learning and development	<i>Play</i>	No suitable data source	
	<i>Readiness for school</i>	No suitable data source	
Healthy living	Physical activity	Scottish Health Survey	National , with some NHS Board and local authority analysis possible for 2008–2011 combined data
	Healthy eating	Scottish Health Survey	16- and 17-year-olds – National for 2008–2011 combined data, sample size too small for sub-geographies
		Scottish Health Survey	2- to 15-year-olds – National , with some NHS Board and local

			authority analysis possible for 2008–2011 combined data
	HBSC		National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
Obesity	Scottish Health Survey		National , with some NHS Board and local authority analysis possible for 2008–2011 combined data
Alcohol consumption	SALSUS		National but boosted every other survey (i.e. every four years) to allow local authority , Alcohol and Drug Partnership and NHS Board reporting
Drug use	HBSC		National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
Smoking	SALSUS		National but boosted every other survey (i.e. every four years) to allow local authority , Alcohol and Drug Partnership and NHS Board reporting
	Scottish Household Survey		National , sample size for 16- and 17-year-olds too small for sub-geographies
Sexual health	HBSC		National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
General health	ISD Scotland		National and majority of NHS Boards annually and local authorities possible for three years pooled data
	Self-reported health	Scottish Health Survey	16- and 17-year-olds – National for 2008–2011 combined data, sample size too small for sub-geographies
		Scottish Health Survey	0 to 15-year-olds – National , with some NHS Board and local

			authority analysis possible for 2008–2011 combined data
Long-standing physical condition or disability	Scottish Health Survey	16- and 17-year-olds – National for 2008–2011 combined data, sample size too small for sub-geographies	
	Scottish Health Survey	0 to 15-year-olds – National , with some NHS Board and local authority analysis possible for 2008–2011 combined data	
Limiting long-standing physical condition or disability	Scottish Health Survey	16- and 17-year-olds – National for 2008–2011 combined data, sample size too small for sub-geographies	
	Scottish Health Survey	0 to 15-year-olds – National , with some NHS Board and local authority analysis possible for 2008–2011 combined data	
Spirituality	<i>Spirituality</i>	No suitable data source	
Emotional intelligence	<i>Emotional intelligence</i>	No suitable data source	
Life events	<i>Stressful life events</i>	No suitable data source	
	<i>Adverse childhood experiences</i>	No suitable data source	
Family			
Family relations	<i>Parent-child relationship</i>	No suitable data source	
	<i>Nurturing adult</i>	No suitable data source	
	Family meals	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Talking to parents	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Treatment by parents	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	<i>Parental discord</i>	No suitable data source	
	<i>Caring for a family member</i>	No suitable data source	
Family structure	Lone parent family	Scottish Household Survey	National , high level estimates at NHS Board and local authority level may be possible by combining two years of data (2009–2010)

			and definitely by combining four years (2007–2010) ³
	Contact with non-resident parent	No suitable data source	
	Teenage parents	National Records of Scotland	National
	Parental imprisonment	Scottish Prison Survey	National
Parental healthy living	Maternal smoking in pregnancy	ISD Scotland, SMR02	National and NHS Board. Scottish Neighbourhood Statistics reports annually also at community health partnership, intermediate geography and datazone level using three years aggregated data for these geographies
	Maternal alcohol use in pregnancy	No suitable data source	
	Maternal drug use in pregnancy	No suitable data source	
	Parental problematic alcohol consumption	No suitable data source	
	Parental problematic drug use	No suitable data source	
Parental health	Parental mental wellbeing	Scottish Health Survey	National with two years pooled data, some NHS Board and local authority analysis may be possible for 2008–2011 combined data
	Parental common mental health problems	Scottish Health Survey	National with two years pooled data, some NHS Board and local authority analysis may be possible for 2008–2011 combined data
	Post-natal depression	No suitable data source	
	Parental alcohol dependency	Scottish Health Survey	National with two years pooled data, some NHS Board and local authority analysis may be possible for 2008–2011 combined data
	Parental limiting long-standing physical condition or disability	Scottish Health Survey	National with two years pooled data, some NHS Board and local authority analysis may be possible for 2008–2011 combined data
Learning environment			
Engagement with learning	Pre-school home learning environment	No suitable data source	
	School attendance	Scottish Government School Education	National and local authority , reported biennially since 2010

³ The Scottish Household Survey team does not usually recommend combining four years data as much of the utility of the data is lost and this would require using historic data from as far back as 2007 in order to obtain the estimates. Data pre- and post-2012 cannot be combined due to changes in the survey.

		Statistics	
Liking of school		SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
		HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
Peer and friend relationships	<i>Early years friendships</i>	No suitable data source	
	Close friends	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
		HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Relationship with best friend	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Peer relationship problems (SDQ)	SALSUS	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
		Scottish Health Survey	National , with some NHS Board analysis possible for 2008–2011 combined data
	Acceptance by peers	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Experience of being bullied	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Participation in bullying	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data

			(Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
Educational environment	Treatment by teachers	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Relationship with teachers	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	<i>Relationship with all school staff</i>	No suitable data source	
	Control at school	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	School ethos	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
		Scottish Household Survey	National , high level estimates at NHS Board and local authority level may be possible by combining four years of data (2007–2010) ⁴
Pressures and expectations	Time pressure	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Choice of how to spend free time	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	School work pressure	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data

⁴ The Scottish Household Survey team does not usually recommend combining four years data as much of the utility of the data is lost and this would require using historic data from as far back as 2007 in order to obtain the estimates. Data pre- and post-2012 cannot be combined due to changes in the survey.

			(Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	<i>Pressure to succeed in life</i>	No suitable data source	
	<i>Pressure to fit in</i>	No suitable data source	
Community			
Participation	<i>Sense of agency</i>	No suitable data source	
	<i>Respect of children's rights</i>	No suitable data source	
	Influencing local decisions	Scottish Household Survey	National , sample size too small for sub-geographies
	Participation in clubs, groups or organisations	Scottish Household Survey	National , sample size too small for sub-geographies
Social networks	<i>Contact with peers</i>	No suitable data source	
Social support	Social support	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
Trust	Neighbourhood trust	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Community cohesion	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	<i>Informal social control</i>	No suitable data source	
Safety	Neighbourhood safety	Scottish Household Survey	National , sample size for 16- and 17-year-olds too small for sub-geographies
		HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)

Structural			
Equality	Absolute poverty	Scottish Government Income and Poverty Statistics	National
	Income inequality (Gini)	Department for Work and Pensions Households Below Average Income dataset from the Family Resources Survey	National
	Relative poverty	Scottish Government Income and Poverty Statistics	National
	Persistent poverty	Scottish Government Income and Poverty Statistics	National
Social inclusion	Workless households	Annual Population Survey	National and local authority
	Positive and sustained destinations	School Leavers Destination Survey, Follow-up Survey	National and local authority. Scottish Neighbourhood Statistics reports annually also at NHS Board, community health partnership, intermediate geography and datazone level
	Education	Annual Population Survey	National
		Scottish Government School Education Statistics	National
		Scottish Survey of Achievement/Scottish Survey of Literacy and Numeracy	National , although for the 2008 Scottish Survey of Achievement for numeracy 19 local authorities opted to boost local collection for local reporting
	School exclusion	Scottish Government School Education Statistics	National and local authority , reported biennially since 2010

	Homelessness	Scottish Government Housing and Regeneration Statistics	National and local authority
	Feeling lonely	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Children looked after	Scottish Government Children and Young People Statistics	National and local authority
	Additional support needs	Scottish Government School Education Statistics	National and local authority . Scottish Neighbourhood Statistics reports annually also at NHS Board, community health partnership and intermediate geography level
Discrimination	<i>Discrimination and harassment</i>	No suitable data source	
	<i>Perception of attitude of adults towards children and young people</i>	No suitable data source	
	<i>Stigma towards children and young people</i>	No suitable data source	
Physical environment	Neighbourhood satisfaction	Scottish Household Survey	National , sample size for 16- and 17-year-olds too small for sub-geographies
		HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Free time places	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	<i>Greenspace</i>	No suitable data source	
	House condition	Scottish House Condition Survey	National and also local authority using three years pooled data
	Overcrowding	Scottish House Condition Survey	National and also local authority using three years pooled data

Violence	<i>Domestic abuse</i>	No suitable data source	
	<i>Child protection</i>	No suitable data source	
	<i>Neighbourhood violence</i>	No suitable data source	
Culture	Perception of looks	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	Body image	HBSC	National , although for 2014 three NHS Boards in collaboration with their local authorities have opted to boost for local-level data (Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands)
	<i>Culture and values</i>	No suitable data source	

Colour Key

	Possible potential geographical level
	National
	National but may be some NHS Boards
	National but may be some NHS Boards and local authorities
	National but boosted every other survey (i.e. every four years) to allow local authority, Alcohol and Drug Partnership and NHS Board reporting
	National but small area data available from Scottish Neighbourhood Statistics
	Local authority
	Local authority but small area data available from Scottish Neighbourhood Statistics
	No data source for indicator

Notes

Sub-national geographies listed above are the main sub-national geographies at which the data for the indicators are available. In the case of national survey data, it may be possible to obtain either more frequent analysis at a sub-national level, for example, for larger local authorities, or NHS Boards or analyses at smaller/other geographies. However, this will depend on the following which need to be taken into account to assess the robustness of the required analysis:

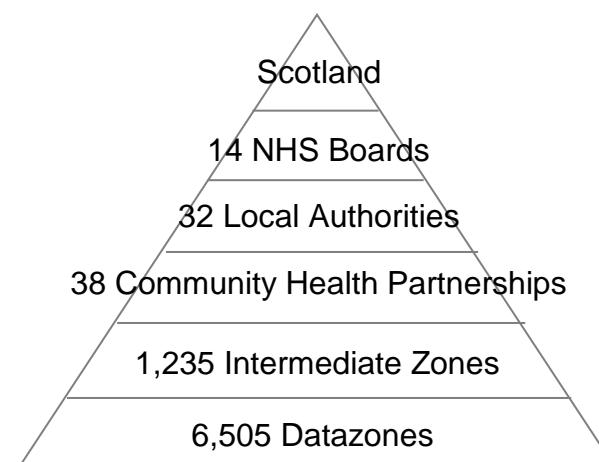
1. The question being asked
2. The number of cases
3. The size of the geographical area of interest
4. The representativeness of the data for the new geographical area, the survey may not be designed to be representative at the required geography and this may need to be investigated.

To establish whether a required analysis is possible please refer to the relevant national survey team or data provider.

Scotland's geographies comprise 14 area NHS Boards and 32 local authorities, with 38 Community Health Partnerships (CHPs) (in some cases known as Community Health and Care Partnerships (CHCPs) or Community Health and Social Care Partnerships (CHSCPs), but referred to as CHPs here) nested within these. In many cases CHPs and local authorities are coterminous, but some local authorities contain more than one CHP. Intermediate zones present data below CHP level (1,235 in total), although this is only possible for a subset of indicators. Below this, datazones are a small area geography (6,505 in total) made up from aggregations of the 2001 census output areas and have an average population of between 500 and 1,000 residents. Datazone geographies cover the whole of Scotland and nest within local authority boundaries. Some do not fit exactly into an NHS Board and may cross multiple Boards. Datazones can be used as building blocks to aggregate 'best-fit' statistics for larger geographical areas. This is used by the Scottish Neighbourhood Statistics profile tool www.sns.gov.uk/default.aspx; indicators which are included in this profile tool are noted here and the geographies available.

However, estimates created from aggregated datazone data may show slight differences from data published elsewhere and caveats exist; it is best to refer to the Scottish Neighbourhood Statistics website for these.

Figure 1. Geographical tiers



Data sources

Below are listed some more specifics for each data source. The comments on data availability should be used as a guide only and the analysis that is actually possible will depend on the samples sizes for the questions of interest. Further, as the indicators focus on C&YP this group makes up only a small fraction of the overall sample of many of the data sources; this is especially so for surveys for which the sample covers adults, and so for many of the indicators/measures it may not be possible to provide local authority or NHS Board level breakdowns even when combining multiple years for these indicators/measures.

Annual Population Survey

- Designed to provide robust estimates at a local authority level, there is a target for the number of economically active adults who are surveyed in each local authority.
- **Smallest geographical unit:** Local authority for the workless indicator but national for the education indicator, due to the limited age range.
- As postcode information is collected, it is possible to obtain analyses for bespoke geographies for instance at sub-local authority level, NHS Board level and some larger CHPs, provided the data at this geography are considered reliable.
- Combines results from the Labour Force Survey and the English, Welsh and Scottish Labour Force Survey boosts. The boosts increase the sample size to allow more robust labour market estimates for local areas compared to the main survey.
- Individuals living at private households in the UK are surveyed and the Scottish Government funds the Scottish boost, taking the sample size from approximately 5,800 households each year to 20,000 households.
- To establish if your required geography is possible, please email: labour-market.statistics@scotland.gsi.gov.uk

Health Behaviour in School-aged Children Survey (HBSC)

- A cross-national research study conducted in collaboration with the WHO Regional Office for Europe.
- **Smallest geographical unit:** National. For the 2014 survey round in Scotland, local authorities and NHS Boards were given the option to boost the local HBSC sample size to collect data at a local level. Three NHS Boards in collaboration with their local authorities have taken this offer up. These are: Dumfries and Galloway, Forth Valley (Falkirk, Stirling and Clackmannanshire local authorities) and the Shetlands, so for 2014 the HBSC data will also be reported on local level for these sub-national geographies.
- The first survey was conducted in 1983/84, the second in 1985/86, and every four years since then using a common research protocol. The first national survey was conducted in Scotland in 1990.
- Schoolchildren in the final year of primary school (P7) and in the second (S2) and fourth (S4) years of secondary education are surveyed. A nationally representative sample of approximately 1,500 pupils is used from each age group, giving a total national sample size of approximately 4,500 children. In 2010, Scotland increased its desired sample size to 2000 pupils per grade in order to allow more scope for subgroup analysis. The final achieved sample was 6771 pupils. In 2014, the desired achieved sample size will remain at 2000 per age group.
- Data are collected through self-completion questionnaires administered in the classroom under exam conditions. All participating countries use a mandatory standard international questionnaire, with additional optional and national items.

- Access to the data is restricted to HBSC research teams for a period of three years from survey completion. After this time, the data are available for external use by agreement with the International Coordinator and Principal Investigators. The 2014 Scottish HBSC survey data will be lodged in the UK Archive for public access.
- For further information please email Dr Winfried van der Sluijs, HBSC Scotland Survey Manager: wpmvds@st-andrews.ac.uk

ISD Scotland, SMR01/04

- **Smallest geographical unit:** National. Data availability is limited due to small numbers.
- Please contact the data provider directly for further information: nss.csd@nhs.net

ISD Scotland, SMR02

- Reported at national and NHS Board level.
- **Smallest geographical unit:** NHS Board.
- Scottish Neighbourhood Statistics website reports annually also at community health partnership, intermediate geography and datazone level using three years aggregated data for all these geographies.
- Please contact the data provider directly for further information: nss.csd@nhs.net

ISD Scotland, teenage pregnancy

- Reported at national level and for the majority of NHS Boards. Annual reporting for Borders is suppressed in many years due to small numbers and is not possible for Orkney, Shetland and Western Isles NHS Boards again due to small numbers.
- **Smallest geographical unit:** Local authority reporting is possible for three-year rolling aggregates, i.e. three years pooled data.
- Please contact the data provider directly for further information: nss.csd@nhs.net

National Records of Scotland (formerly General Register Office for Scotland)

Suicide

- **Smallest geographical unit:** National using five years pooled data.
- Sub-national reporting for under-19s is not routinely possible as numbers are too small; even numbers for five years combined data are too small for release. Combining more years of data may allow reporting by NHS Board.
- Please contact data provider directly for further information: www.nrscotland.gov.uk/about-us/contact-form

Teenage parents

- **Smallest geographical unit:** National.
- Numbers for sub-national reporting for those 15 years old and under are too small.
- Please contact data provider directly for further information: www.nrscotland.gov.uk/about-us/contact-form

Scottish Government Children and Young People Statistics

- Reported at the national and local authority level.
- **Smallest geographical unit:** Local authority.
- The statistics on looked after children are collected at an individual level from local authorities and only specify in what local authority the child is looked after. Until 2009, the year end reporting date was 31 March, from 2010 it was 31 July.
- Children who are looked after by local authorities can either be looked after at home (e.g. supervised by the local authority but living at home) or looked after away from home (e.g. living in residential accommodation, in the community or with family/friends). Data exclude children who are on a planned series of short-term placements.
- Prior to 2007, data include estimates wherever local authorities were not able to provide information.
- Statistics for years prior to 2008–09 used data supplied by local authorities aggregated at a local authority level. Since 2008–09, local authorities are reporting significant improvements in the quality of their data reporting as a result of the new individualised collection methodology.
- For information on the data contact: children.statistics@scotland.gsi.gov.uk

Scottish Government Housing and Regeneration Statistics

- Reported at the national and local authority level.
- **Smallest geographical unit:** Local authority.
- The data are derived from councils' administration of homelessness legislation, HL1 data. While the postcode of the last settled address is reported, this is only complete for 60% of cases, meaning that reporting below local authority level will not provide a full picture.
- Under the homelessness legislation, only people aged 16 or over can apply as homeless. They can also apply more than once and so make repeat presentations. The vast majority of cases which repeat are single-person households and couples without children. The double counting that affects this measure should be removed in analyses.
- Data for children aged 15 or under, or aged 16 to 18 (who are either receiving or about to begin full-time education or training, or are, for some other reason unable to support themselves), are for children contained with all homeless cases. These children have not made a homelessness application in their own right. As households containing children tend not to make repeat presentations, the number of children is largely unaffected by double counting.
- Further information on the data contact: homelessnessstatisticsinbox@scotland.gsi.gov.uk

Scottish Government Income and Poverty Statistics

Absolute poverty, income inequality and relative poverty

- Reported at national level.
- **Smallest geographical unit:** National.
- Data come from the Department for Work and Pensions' Households Below Average Income dataset which is produced from the Family Resources Survey:

- An annual survey of 25,000 households covering the whole of the UK with 4,000 in Scotland, although sampling was reduced to 20,000 households in 2011.
- The area of Scotland north of the Caledonian Canal was included for the first time in the 2001/02 survey year, and from the 2002/03 survey year, the survey was extended to include a 100 per cent boost of the Scottish sample. This has increased the sample size available for analysis at the Scottish level.
- Please contact the Family Resources Survey team for further information: team.frs@dwp.gsi.gov.uk
- For information on the data for the indicators contact: social-justice-analysis@scotland.gsi.gov.uk

Persistent poverty

- Reported at national level.
- **Smallest geographical unit:** National.
- Data come from the British Household Panel Survey:
 - Annual longitudinal panel survey which commenced in 1991 sampling all adults within 5,500 households in Great Britain (10,300 individuals).
 - Scottish boost of around 1500 households (2500 individuals) from the whole of Scotland were added from 1999 to permit independent country analysis.
 - Now subsumed into the Understanding Society Survey at the start of 2009. For more details see: www.understandingsociety.org.uk
- For information on the data for the indicator contact: social-justice-analysis@scotland.gsi.gov.uk

Scottish Government School Education Statistics

School attendance

- Reported annually at national and local authority level prior to 2010 but subsequently data have been collected biennially.
- **Smallest geographical unit:** Local authority.
- Scottish Neighbourhood Statistics website reports separately on annual primary and secondary attendance, rather than in total, also at NHS Board, community health partnership, intermediate geography and datazone level.
- The data are for the academic year for mainstream grant-aided schools and do not include grant-aided special schools, independent schools or preschool establishments.
- Information, which includes postcode, is provided to the Scottish Government by the local authorities and managers of mainstream grant-aided schools. Data collected pre-2007 was recorded differently and is therefore not comparable to subsequent data.
- For information on the data contact: educ.outcomes.stats@scotland.gsi.gov.uk

Education

- Reported at national level.
- **Smallest geographical unit:** Local authority, for S4 pupils alone.

Note that this data will not give the cumulative figures for S4 to S6 pupils and will not therefore fit with the exact definition of the measure/data used nationally for the mental health indicator set's education indicator based on the Scottish Credit and Qualifications Framework (SCQF) attainment leaving school. This data may thus result in slight under-reporting as those who attain the minimum in S5 and S6 are not included in the data.

- Scottish Neighbourhood Statistics website reports annually for attainment for S4 pupils alone also at NHS Board, local authority, community health partnership, intermediate geography and datazone level. Note the comment about this data above.
- Information on national qualifications is obtained from the Scottish Qualifications Authority. The SCQF is used as the basis for reporting attainment.
- For information on the data contact: educ.outcomes.stats@scotland.gsi.gov.uk

School exclusion

- Reported annually at national and local authority level prior to 2010 but subsequently data have been collected biennially.
- **Smallest geographical unit:** Local authority.
- Local authorities collect certain statistics from schools on exclusions each year. The statistics relate to half-days of temporary exclusions and number of pupils removed from the register (previously known as 'permanent' exclusions).
- Data include publicly funded local authority schools only and do not include grant-aided schools.
- For information on the data contact: educ.outcomes.stats@scotland.gsi.gov.uk

Additional support needs

- Reported at national and local authority level.
- **Smallest geographical unit:** Local authority.
- Scottish Neighbourhood Statistics website reports annually also at NHS Board, community health partnership and intermediate geography level.
- Data come from the pupils census conducted in September and collected through local authorities. Until 2009, the year-end reporting date was 31 March, from 2010 it was 31 July.
- Data include all publicly funded schools in Scotland (local authority and grant-aided).
- For information on the data contact: educ.outcomes.stats@scotland.gsi.gov.uk

Scottish Health Survey

- Designed to be representative at NHS Board level.
- **Smallest geographical unit:** NHS Board and local authority for some indicators.
- Analysis for questions in the core (asked annually to all adult sample) possible for all NHS Boards after four years from 2008. Analysis for larger NHS Boards may be available sooner.
- As postcode information is collected, local authority analysis will be possible for the larger local authorities after four years, again it may be available sooner for the largest. Where local authority boundaries coincide with an NHS Board, analysis will be possible

when the NHS Board analysis is. Analysis may never be possible for some of the smaller local authorities. Note that as the survey is designed to be representative at NHS Board level the suitability of the data for each local authority will need to be assessed. The Scottish Health Survey has produced a paper Scottish Health Survey Analysis by local authority or Health Board (2009) summarising when results for different sub-Scotland geographies are available (with associated measures of precision of these results) and should be referred to.

- Sub-national analysis for questions in the nurse and biennial module is not possible/advised due to the small sample numbers.
- As the indicators focus on C&YP this group makes up only a small fraction of the overall sample and so for some of the indicators it is not possible to provide local authority or NHS Board level breakdowns even when combining multiple years, please refer to the table above.
- Surveys were undertaken in 1995, 1998, and 2003. The continuous survey began in January 2008 and is running continuously from 2008–2015, although the nurse interview was removed from 2012 and the sampling was designed to combine data over 2008–2011 and then over 2012–2015.
- Over time, the age range captured within the survey has changed. In 1995 the age range was 16–64; in 1998 children aged 2–15 were also included and adult coverage was extended to 16–74; in 2003 children were extended to cover 0–15 and adults to cover age 16 and over.
- For further information on analyses possible, please email: Scottishhealthsurvey@scotland.gsi.gov.uk

Scottish House Condition Survey

- Designed with local authority level analysis in mind. A reliable sample is achieved only where there are three years of data (no matter the size of the local authority) (since the survey went continuous in 2003).
- **Smallest geographical unit:** Local authority.
- NHS Board level analysis is not performed but could be possible every three years.
- Postcode information is collected in the survey, allowing different geographical analyses to be created. However, for all sub-national analysis; the smaller the area, the smaller the sample and the less reliable the statistics. As part of the Scottish House Condition Survey's Code of Practice there are minimum levels where the survey team will not be able to provide any figures.
- In 2007 there was a change to calendar collection from financial year; as a result there is a small collection gap between mid-2006 and the beginning of 2007. This is viewed by the Scottish House Condition Survey team as approximately continuous and although there is nothing that can be done to rectify this there is no obvious discontinuity in the outputs that would be cause for concern.
- Since 2012, the survey has been integrated into the Scottish Household Survey (from the 2012 fieldwork period) as a module. Interview sample sizes have remained more or less consistent in spite of this methodology change. This means that the Scottish House Condition Survey questions are applied to only one-third of the sample of the Scottish Household Survey. Sample sizes (around 3,800 individuals) for all years of the annual Scottish House Condition Survey are provided in SHCS Key Findings 2012 Table 52 available at: www.scotland.gov.uk/Topics/Statistics/SHCS/Downloads
- To establish whether a required geographical analysis is possible, please email: SHCS@scotland.gsi.gov.uk

Scottish Household Survey

Up to and including 2011 survey

- Designed to be representative at local authority level.
- **Smallest geographical unit:** Local authority.
- Information for all local authorities is possible every two years for data from the full survey sample. Analysis for larger local authorities may be available sooner.
- As postcode information is collected, NHS Board analysis may be possible and it is possible to obtain analyses for bespoke geographies.
- For a three-quarter sample size, analysis should be available for the majority of local authorities and NHS Boards using two years' combined data, and possibly sooner for the largest.
- For a one-quarter sample size, analysis should be possible for the larger local authorities and NHS Boards using four years' combined data, and possibly sooner for the largest.
- As postcode information is collected, it is possible to obtain analyses for bespoke geographies.
- As the indicators focus on C&YP this group makes up only a small fraction of the overall sample and so for some of the indicators it is not possible to provide local authority or NHS Board level breakdowns even when combining multiple years, please refer to the table above.
- To establish whether a required geographical analysis is possible please email: shs@scotland.gsi.gov.uk

From 2012 onwards

- From January 2012, a new Scottish Household Survey went into the field with a substantially restructured sample design designed to be representative at the national level.
- **Smallest geographical unit:** Local authority.
- Overall sample size has reduced from around 14,000 household interviews to about 11,000, though improvements in efficiency of the survey design mean it is now possible to attain local authority estimates on an annual basis where analysis permits.
- Information for all local authorities is possible every year for data from the full survey sample. Typically, only high-level estimates are available at local-authority level on an annual basis. Multiple years will need to be combined to produce more detailed disaggregation.
- As postcode information is collected, NHS Board analysis may be possible. As with local authorities, information for all NHS Boards is possible every year for data from the full survey sample. Typically, only high-level estimates are available at NHS Board level on an annual basis. Multiple years will need to be combined to produce more detailed disaggregation.
- As postcode information is collected, it is possible to obtain analyses for bespoke geographies.
- The survey now typically asks questions of either one-third of the sample or of the full sample. Questions only asked of a one-third sample will usually require multiple years to be combined to produce local authority or NHS Board level analysis.
- Where a single year dataset does not provide a sufficient sample size to run a particular analysis, under the new survey design it will be possible to run analysis on any combination of years on a rolling basis (e.g. combining two years such as 2012–2013,

2013–2014 or even three years if required, 2012–2014) to increase sample size. However, at sub-national level, due to the different sampling methodologies used, it is not appropriate to combine data collected under the old survey design with data collected from 2012 onwards.

- To establish whether a required geographical analysis is possible please email: shs@scotland.gsi.gov.uk

Guidance on what may be possible for each indicator from the survey is provided in the table above based on data up to and including the 2011 Scottish Household Survey. The guidance on data availability will not alter significantly from 2012 as the sample sizes will remain small.

Scottish Leavers Destination Survey, Follow-up Survey

- Published at national and local authority level.
- **Smallest geographical unit:** Local authority.
- Scottish Neighbourhood Statistics website reports annually also at NHS Board, community health partnership, intermediate geography and datazone level.
- Information on the destination of leavers from publicly funded schools is provided to the Scottish Government by Skills Development Scotland.
- Skills Development Scotland contact each young person they have identified as a school leaver in the September after they leave school and the following March.
- A school leaver is classed as a young person of school-leaving age who left school during or at the end of the school year, where the school year is taken to run from 1 August to 31 July, and their age is calculated as of 30 June.
- For information on the data contact: educ.outcomes.stats@scotland.gsi.gov.uk

Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS)

- Reported at a national level (usually) every two years. A boosted sample (normally) every four years allows additional reporting at local level every second survey (2002, 2006, 2010), although the 2013 survey will also report at these sub-national levels (as there was no 2012 survey). The sample is selected in order to fulfil analysis at local authority and NHS Board level.
- **Smallest geographical unit:** Local authority, Alcohol and Drug Partnerships (replacing drug and alcohol action teams) and NHS Board normally once every four years.
- Although not all of the C&YP's mental health indicators have been reported at local level (indicators reported are alcohol consumption, smoking and drug use), numbers should largely allow this analysis. The way SALSUS is presented is currently being revised, with the tabular data being presented in interactive Excel workbooks. This means that the local results will be presented alongside the national results for each indicator, and should enable those mental health indicators with sufficient numbers to also be presented.

- The survey continues the biennial series on smoking, drinking and drug use among secondary school children conducted between 1982 and 2000 in England and Scotland. Normally conducted every two years, the first survey was undertaken in 2002 and since in 2004, 2006, 2008, 2010 and 2013.
- The target population is all pupils in Secondary 2 (S2) and Secondary 4 (S4) in Scotland. All local authority and independently funded schools with pupils in the target age groups are eligible for inclusion in the survey, with the exception of schools for children with special educational needs.
- The survey is conducted in schools using a class-based design. All pupils in selected classes are asked to complete a confidential self-completion questionnaire administered in the classroom.
- The target sample size was 9,500 pupils in the 2008 survey, with the number of pupils sought in each local authority proportionate to the distribution of S2 and S4 pupils across Scotland. In total 10,063 pupils were sampled. For the boosted 2010 survey, the target sample size was 32,000 pupils; the minimum number of pupils sampled per local authority was 600 to allow the sub-national reporting, disproportionately sampled to ensure that all local authorities could reach this figure; two local authorities commissioned additional boosted samples. In total, 37,307 pupils were sampled.
- Further information on the survey is available from: www.isdscotland.org/Health-Topics/Public-Health/SALSUS/

Scottish Survey of Achievement

- Assessed and reported at the national level on pupils' attainment in reading and writing at the P3, P5, P7 and S2 stages. Replaced by the Scottish Survey of Literacy and Numeracy in 2011.
- Smallest geographical unit:** National
- To achieve the required level of accuracy at a national level, approximately 4,000 pupils across Scotland were sampled from each of P3, P5, P7 and S2, giving an intended total pupil sample size of 16,000 pupils, for national assessment.
- The only pupils deliberately excluded from the survey were those in special schools.
- The 2008 survey assessing mathematics and numeracy was primarily a national assessment but local authorities were given the opportunity to 'opt-in' to provide additional pupils to allow reporting of their own performance, resulting in the survey being boosted from the minimum of 16,000 pupils required to provide the national estimates to 50,000 (just under 40,000 pupils for the 19 reporting authorities and just over 10,000 for the other authorities): figures for each of the 19 'opting in' local authorities are available at: www.scotland.gov.uk/Publications/2009/04/02133043/0 (supporting evidence and local authority results).

Scottish Survey of Literacy and Numeracy

- An annual sample survey to monitor national performance in literacy and numeracy in alternate years for school pupils at P4, P7 and S2. Replaces the Scottish Survey of Achievement and was developed to support assessment approaches for Curriculum for Excellence.
- Smallest geographical unit:** National.
- The sample size at school and local authority level is too small to produce reliable school or local authority level results. There are no plans in the foreseeable future to allow local authorities to opt in to get local authority results.

- About 4,000 pupils participate at each stage. This ensures a representative picture of pupil performance is gathered at a national level for each stage.
- The first numeracy survey took place in May 2011 and approximately 11,000 pupils participated. The first literacy survey took place in May 2012.
- Special schools are ineligible to take part and schools with insufficient pupil numbers are not required to take part but may do so if they wish. But pupils with additional support needs or English as a foreign language attending a mainstream school are part of the population of pupils which the survey results represent and so are eligible for sampling.
- For more information contact the survey at: ssln@scotland.gsi.gov.uk

