

# Changing Adolescence Programme

briefing paper

TIME TRENDS IN ADOLESCENT WELL-BEING  
UPDATE DECEMBER 2009



**Q:** Are adolescent mental health problems on the rise in the UK? If so, is this happening everywhere, or is there something specific about the UK? What are the most up to date trends?

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### Notes on this briefing paper series

The Nuffield Foundation has a longstanding interest in understanding and improving outcomes for young people. Evidence suggests that young people's emotional and behaviour problems have risen significantly in recent decades. Why is this so and what are the implications?

In this briefing paper the results from secondary data analysis of a series of large British birth cohort studies are presented in order to illustrate these time trends. The projects were funded by the Foundation, and led by Dr Barbara Maughan (Institute of Psychiatry, London) and Dr Stephan Collishaw (Cardiff, University School of Medicine). The paper also includes discussion points that arose in a seminar to debate the emerging findings. It updates an earlier briefing paper on the same topic published in 2004, and includes a new wave of data.

In addition to these two projects, the Nuffield Foundation has also commissioned a series of reviews on various aspects of social change and adolescent experiences in order to explore how changes in young people's lives today might be related to these time trends in their well-being. This paper introduces the main themes of the Changing Adolescence Programme, and further information is available on our website, [www.nuffieldfoundation.org](http://www.nuffieldfoundation.org)

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The general well-being of British adolescents has been the topic of considerable debate in recent years. Evidence has suggested that the current level of behavioural and emotional problems in teenagers is higher than in the past, and that our young people compare unfavourably with children in other countries.<sup>1</sup>

The types of mental health problems that young people might experience during their adolescent years include depression, anxiety, behaviour problems, and hyperactivity. Of course, not all adolescents face these sorts of problems. Surveys suggest that clinically significant emotional or behavioural difficulties are restricted to a minority of around one in ten children aged 11-15 years, who show one or more of these problems at any given point in time.<sup>2</sup> Do robust data from large surveys support the claim that these types of difficulties – and also the milder problems that affect many more adolescents – are increasing?

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<sup>1</sup> UNICEF (2007)

<sup>2</sup> Meltzer H, Gatward R, Goodman R and Ford T (1999) *The Mental Health of Children and Adolescents in Great Britain*, 1999 survey published by the Office of National Statistics in London. Ten per cent of girls and 13 per cent of boys aged 11-15 years showed either emotional disorders, clinically significant conduct disorders, hyperactivity or other syndromes.



## The Institute of Psychiatry research study

As we reported in the earlier edition of this briefing paper,<sup>3</sup> in 2001 the Nuffield Foundation funded a research team at the Institute of Psychiatry to undertake a project on time trends in adolescent mental health. Barbara Maughan, Stephan Collishaw, Robert Goodman (who were all based at the time at the Institute's Social, Genetic and Developmental Psychiatry Centre) and Andrew Pickles (from the University of Manchester) analysed data from three national surveys of the UK general population, looking at trends in adolescent emotional and behavioural problems over a 25 year period up to 1999.

The focus of the study was 15-16 year olds in 1974, 1986 and 1999. The data came from the National Child Development Study, the 1970 Birth Cohort Study, and the 1999 British Child and Adolescent Mental Health Survey. Parents filled in comparable questionnaires in each survey, describing their children's symptoms. The full results were published in 2004 in the *Journal of Child Psychology and Psychiatry*<sup>4</sup> and were the subject of the first edition of this briefing paper.

Recently the research team added a fourth wave of data to the findings, allowing us to see how the emotional and behavioural difficulties of young people had changed between 1999 and 2004.<sup>5</sup>

<sup>3</sup> The Nuffield Foundation (2004) *Time trends in adolescent well-being*. London: The Nuffield Foundation

<sup>4</sup> Collishaw S, Maughan B, Goodman R and Pickles A (2004) Time trends in adolescent mental health. *Journal of Child Psychology and Psychiatry*, Vol 45, 1350-1362

<sup>5</sup> Maughan B, Collishaw S, Meltzer H and Goodman R (2008)



## Trends in emotional and behavioural problems 1974-1999

In brief, the main findings from the initial study were:

- There were few systematic trends in adolescent **hyperactivity** over the 25 year period up to 1999, for either girls or boys.
- Reports of adolescent **emotional problems** (such as depression and anxiety) increased for both girls and boys from the mid 1980s to 1999.
- Adolescent **conduct problems** showed a continuous rise for both boys and girls over the whole 25-year study period. Much of this seemed to be an increase in non-aggressive conduct problems such as lying, stealing and disobedience rather than in aggressive problems such as fighting.
- The strength of associations between these problems and poor outcomes later in adulthood remained similar over time, suggesting that the results are **not attributable to changes in the thresholds** of what is counted as a problem – that is, they are not the result of an increasing tendency for parents to rate teenagers as having problems, but are instead the result of changes in problem levels.
- Marked changes in **family type** (such as increases in the numbers of single parent families) over the period were not the main reason for rising trends in behaviour problems.
- Changes in **socio-economic background** were not the main reason either, although there is now a social class gradient in emotional difficulties that was not there before.



4 **Figure 1.** UK 1974-1999: Time trends in parent rated hyperactivity, emotional and conduct problems<sup>6</sup>

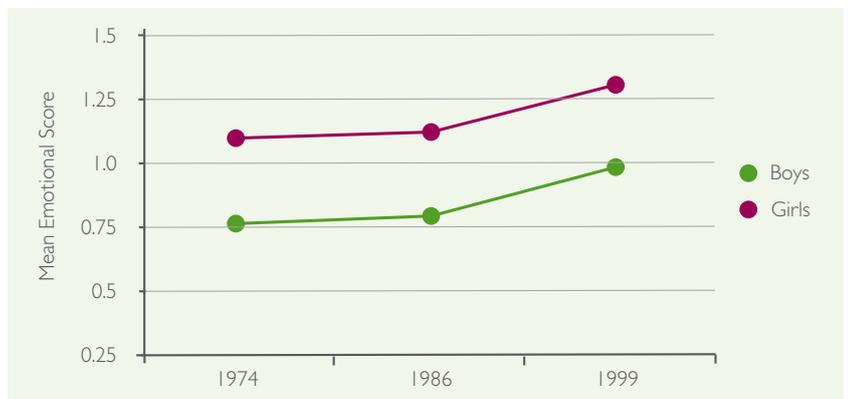


Figure 1 gives a clear picture of these trends for three different types of problems, for both sexes.

<sup>6</sup> Collishaw et al (2004)



## Trends in emotional and behavioural problems 1999-2004

What happened next? The UK Office of National Statistics undertook two large scale surveys in 1999 and 2004, looking at child and adolescent mental health. Results for the full age range of children from age 5 to 15 were published in 2008. Based on this new and more recent comparison, the research team concluded that “*The upward trends in rates of UK child adjustment problems noted since the 1970s and 1980s may have plateaued, and possibly begun to be reversed.*”<sup>7</sup> They note, however, that the absolute level of difficulties is still considerably higher than it was in the 1970s. As we have a particular interest in adolescence, the research team extracted the data for just the older children in this study. Looking only at the adolescents aged 11-15 in both surveys (4,244 and 2,930 individuals), and focusing on the same difficulties (conduct problems, hyperactivity, and emotional problems), it appeared that ratings of these difficulties either remained stable, or showed small declines between the late 1990s and the mid 2000s. The only exception was for teacher ratings of emotional problems, which were higher in 2004 than in 2009, representing one comparison out of the nine that were made. Children in the later survey had fewer problems overall.

These interesting results are shown in Table 2. It is also clear that the different reporters (parents, teachers and young people) vary quite consistently in the levels of the problems they identify, with teachers generally reporting lower levels of problems than either parents or young people themselves.

	Reporter								
	Parent			Teacher			Adolescent		
	1999	2004		1999	2004		1999	2004	
Conduct	1.53	1.41	lower	0.93	0.94	no difference	2.23	2.12	lower
Hyperactivity	3.23	3.04	lower	2.64	2.60	no difference	3.76	3.85	no difference
Emotional	1.93	1.92	no difference	1.33	1.46	higher	2.81	2.62	lower

Differences are significant to  $p < 0.01$ . All tests for year differences controlled for gender

**Table 2.** Parent, teacher and young people’s ratings on the Strengths and Difficulties Questionnaire in 1999 and 2004, for age 11-15 only study<sup>8</sup>

<sup>7</sup> Maughan et al, 2008, p305

<sup>8</sup> Young people’s self-ratings from Maughan et al (2008); parent and teacher ratings calculated specifically for this paper; personal communication from Maughan (2009).



Overall, the results showed that the emotional and behavioural problems increased up to the end of the 1990s, and levelled out thereafter: Children in their teens in the 1990s were more likely to show a range of difficulties than those in their teens in the mid 1970s, but the increase in problems seemed to have reached a plateau in the early 2000s, and may have started to decline.

## Trends around the world

The international perspective is crucial to understanding what is going on. In 1995 Michael Rutter and David Smith led an international study group on what was known at the time about time trends in psychosocial disorders of young people; they showed that rises in the mid to late 20th century were “surprising and troubling” (p782), occurring in many developed countries.

However, in the first edition of this briefing paper in 2004, we suggested that by the end of the 20th century, the UK was witnessing a continuing upward trend, whereas studies from, for example, the Netherlands and the US had shown either no increase, or recent decreases in levels of psychosocial difficulties. Interestingly, with a fourth wave of data at the start of the 21st century, the trends in the UK now seem to be levelling off, if not decreasing. On the other hand, trends in the Netherlands (as one example) may now be slightly on the increase. In addition, some country specific studies within the UK do not all report the same trends.<sup>9</sup>

### Cross-country comparisons: trends in the Netherlands and US

**Netherlands:** Professor Frank Verhulst and his team at Erasmus University in Rotterdam explored ten-year trends in adolescent problem behaviour between 1983 and 1993. Using information from over 2,000 children aged 4-16 years they found no notable differences in problems reported by parents or teachers over this period. Where there were differences, they were so small as to be negligible. The team wrote that *“Taking these findings together, we must conclude that they do not support the notion of a dramatic increase in behavioural/emotional problems in children and adolescents”*.<sup>10</sup> However, in 2007 the team updated these findings, with data extending to 2003. They concluded that over the longer timescale there was evidence for small increases in internalising problems (emotional). In fact changes were strongest between 1993 and 2003.

<sup>9</sup> Sweeting and West (2009)

<sup>10</sup> Verhulst FC, van der Ende J, Rietbergen A (1997); Tick, NT, van der Ende J and Verhulst FC (2007).



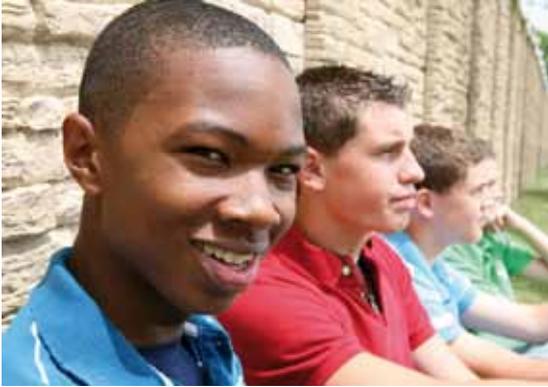
**United States:** Thomas Achenbach is one of the best known American researchers on problem behaviours, and author of one of the most widely used measures for testing for antisocial behaviour. A team from Vermont and Pennsylvania looked at scores on this measure (the Child Behaviour Checklist) in 1976, 1989 and 1999 for groups of several hundred American 7-16 year olds each year. They concluded “Changes in item and scale scores from 1976 to 1989 reflected increasing problems and decreasing competencies, but these trends were reversed from 1989 to 1999”.<sup>11</sup>

**International surveys:** A cross sectional survey of 35 countries and regions in the World Health Organisation (Europe and North America) was published in June 2004.<sup>12</sup> Looking at physical, emotional and psychological aspects of health, and the influences of the family, schools and peers on over 162,000 young people aged 11, 13 and 15 years old, this confirmed some worryingly high levels of risky behaviour among the UK teenagers in the survey, regardless of whether the trend was up or down.

Although the new data suggest that the worrying time trends in behavioural and emotional problems in the UK seem to be levelling out, some aspects of the well-being of UK adolescents continue to be worse than for their peers in some other countries. They are still more likely to have emotional and behavioural problems than a few decades ago. There may be subgroups with particular problems. Why might this be? What aspects of social change might be having an impact on young people's lives?

<sup>11</sup> Achenbach TM, Dumenci L and Rescorla LA (2003)

<sup>12</sup> Currie C, Roberts C, Morgan A, Smith R, Settertobulte W, Samdal O and Barnekow Rasmussen V (2004)



## Social change and adolescent lives

In their 1995 review, Rutter and Smith concluded “...the enterprise of formulating and testing hypotheses has scarcely begun.”<sup>13</sup> The analyses undertaken by the Collishaw and Maughan team began this process of understanding what may be happening. However, their analyses suggested that changing family forms, or more “fractured” family lives are not solely to blame.<sup>14</sup> The data also suggested that while increasing socio-economic inequalities might play a part, this did not seem to be the full explanation. The possibility remained that broader social changes were also implicated – changing educational and occupational expectations; changes in youth culture and differences in peer group dynamics; perhaps even changes in how we parent younger children that only show up in early adolescence.

In the first edition of this briefing paper, we laid out some of the possible hypotheses about social change that might be useful avenues for further research. These included:

- Issues relating to **education and educational expectations**. The transition to secondary school might be becoming more demanding, or there may be other issues with the ways in which expectations for academic achievement have risen, yet opportunities for those who struggle with the usual academic tests have been restricted. While more children stay on at school, this is partly for lack of alternatives. What does this do for groups of young people with no real hope of gaining proper currency in the skills market of 18 year olds?
- Beyond education, is it something to do with **non-school time**? Is the balance right in terms of structured and unstructured outside school activities? Has something changed about peer group interactions and non-family socialisation? Do young people spend their time in very different ways compared with their parents' generation? Do they spend less time with adults than previous generations?

<sup>13</sup> Rutter M and Smith DJ (1995).

<sup>14</sup> Collishaw et al (2007)



- Does the balance of **education, training and employment** play a role, in a world where both (a) a significant proportion of children work during their school years, yet (b) far fewer than before have any sort of full-time work at the end of compulsory education? What sort of economic role do young people have now compared with twenty five years ago, and how does this affect how they see themselves and their contribution? In what ways have society's expectations changed for them and the role we think they should play?
- What is the role of issues relating to the **family context**? As discussed above, changes in family structure made some contribution to changes in adolescent well-being in the Maughan et al study, but did not represent the whole story. The possibility remains that there are other aspects of family context that may be important, such as the amount of time family members spend together or the clarity with which parents give guidance or set rules or limits. Do we parent differently from families in other countries, or differently from the 1970s in this country? The Foundation has published a briefing paper in this area, showing that in certain important aspects, parenting of adolescents has improved over recent decades.<sup>15</sup>
- What are the issues relating to the **changing social situation for young men** in particular, including increasing numbers remaining single or divorcing, high unemployment rates, increasing risk of imprisonment, increasing availability and use of drugs and alcohol?

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<sup>15</sup> Nuffield Foundation (2009) *Time Trends in parenting and outcomes for young people*.

London: Nuffield Foundation



## Nuffield Foundation Changing Adolescence Programme<sup>16</sup>

From an initial review of the available evidence it became clear there was very little work pulling together time trends in social change along these lines for this age group, particularly in relation to outcomes. As a result, the Foundation funded a research programme in order to allow critical evaluation of the state of the evidence. A key goal was to explore which elements of social change might be implicated in the changing patterns of emotional and behavioural problems in adolescents.

The work has included a series of commissioned reviews, and seminars to discuss emerging findings. The results of this work are being published in a series of briefing papers from mid-2009 onwards. A final report, drawing together findings and implications, will also be published.

## Conclusions

Since we published the first edition of this Briefing Paper in 2004, much coverage and debate has surrounded results from the UNICEF survey of child-wellbeing in rich countries, a Save the Children report on child well-being in the UK (2007), a WHO report on inequalities in young people's health (2008), and the Children's Society Good Childhood Inquiry (2009). Some of these data seem stronger than others, and one purpose of our reviews is to assess the evidence dispassionately. Nevertheless, there is a continuing concern that young people in the UK have poorer life experiences than some of their counterparts in other developed nations. The data presented here relate only to social, emotional and behavioural problems, not to welfare in general, but they suggest that time trends may be levelling off, giving perhaps some cause for guarded optimism. This still, however, leaves young people of today with a general level of emotional and behavioural problems that is significantly higher than it was for the 16 year olds living through the 1970s and 1980s. Questions still remain as to why this is the case.

We are particularly concerned not to imply that things are difficult for all young people. There is much that is positive in the life experiences of today's teenagers, and much to be celebrated. However, for important sub-groups the picture might be less rosy, and we need to set our conversations about the challenges facing this age group within a bigger conversation about society, expectations and social support.

<sup>16</sup> Originally called the 'Nuffield Foundation Adolescent Mental Health initiative'

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