SOCIAL TRENDS AND MENTAL HEALTH:
INTRODUCING THE MAIN FINDINGS
Q: Young people have higher levels of anxiety, depression and behaviour problems than they did 30 years ago. Society has changed over this period. Are current generations of young people less well supported or more challenged by the world they live in than previous generations? Have any of the major social changes in adolescent lives been linked to changes in youth well-being? If so, is there something we can do about it?

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The programme consisted of a series of commissioned research reviews to look at trends in various aspects of teenage life over time, as well as seminars and workshops to bring together researchers, policy makers and practitioners in strategic discussions.

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Written by Ann Hagell – ahagell@nuffieldfoundation.org

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Ordering the book

Changing Adolescence: Social trends and mental health is edited by Ann Hagell with a foreword by Professor Sir Michael Rutter. It is published by Policy Press.

ISBN: 9781447301035
Paperback: £19.99
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Available to order at a 20% discount from www.policypress.co.uk

About the Nuffield Foundation

The Nuffield Foundation is an endowed charitable trust that aims to improve social well-being in the widest sense. It funds research and innovation in education and social policy and also works to build capacity in education, science and social science research.

The Changing Adolescence Programme was led by Dr Ann Hagell, the author of this briefing paper. Ann is a Chartered Psychologist with a specific interest in adolescents, and has worked for many years in social policy research settings, including in the USA as a Fulbright Scholar. She writes regularly about aspects of life for young people, and has been Editor-in-Chief of the Journal of Adolescence since 2000.
The Nuffield Foundation’s Changing Adolescence Programme commissioned a series of research reviews with the aim of understanding how the lives of young people have changed over recent decades, and to see if this could shed light on increases in adolescent mental health problems. The reviews looked at various aspects of teenage life, including changes in how people used their time, parenting, drug and alcohol use, neighbourhoods and school experiences.

This briefing paper highlights some of the key findings of these reviews. Many of these point to questions, not answers, and this paper raises some of the issues that the evidence suggests require more sustained research and wider policy debate.

Full findings from the research reviews are brought together in a book, Changing Adolescence: Social trends and mental health, edited by Ann Hagell and published by Policy Press.

Background

There is now good evidence on mental health trends. Officially recorded rates of suicide, victim surveys of crime, mental health service utilisation and treatment, retrospective reports of lifetime mental disorder and epidemiological surveys of young people’s symptoms – all contribute to a picture of long-term and substantial change in high-income nations, although patterns might vary in different countries.

Trends in the UK included:

• Increases in the proportion of young people reporting frequent feelings of depression or anxiety. This figure doubled between the mid 1980s and the mid 2000s. For boys aged 15/16, rates increased from approximately 1 in 30 to 2 in 30. For girls they increased from approximately 1 in 10 to 2 in 10.1

• Increases in parent-rated behaviour problems. For example, approximately 7 per cent of 15/16 year olds showed high levels of problems in 1974, rising to approximately 15 per cent in 1999.2

• A similar rate of increase in ‘conduct disorders’ (mainly non-aggressive antisocial behaviour like lying and theft) for boys and girls, and for young people from different kinds of backgrounds.

• Encouraging signs of levelling off in these trends post-2000. For example, there was no rise in the level of emotional problems such as anxiety and depression amongst 11–15 year olds between 1999 and 2004.3 However, there are hints that rates of some of the underlying causes might get worse with the rise in youth unemployment and growth in poverty after the 2008 financial crisis and policy responses.

Clearly, young people’s lives are shaped by the social worlds in which they live. Despite the challenges of doing research on such broad and complex topics, evidence is accumulating that a number of key social institutions, such as education, family and part-time employment, influence young people’s lives and have an impact on their outcomes. Research on the causal role of these ‘macro’ level influences is growing.

However, the extent and quality of information about social change is limited. Contrary to what is often presented in the popular media, it is harder to pin down social trends than we might think, and even harder to know how interactions between social changes may result in disadvantage for particular groups of young people. In our work, we have concentrated on objective, robust indicators where we could find them, and we are clear about the difference between ‘findings’, and hypotheses that require further direct examination.


Key social trends that affect young people’s well-being

**Time use and education**

The **shape of the average day** for young people has changed since the 1970s, particularly for 16–18 year olds, although there were changes in the pattern for all groups during the secondary school years. The biggest factor has been the well-documented collapse of the youth labour market. Three decades ago a substantial minority of young people aged 16–18 spent much of their day in employment (the grey part of Figure 1). By 2000, the majority were in full-time education. Figure 1 highlights the difference this makes to the structure of an average weekday, rather than addressing the separate issue of longer-term outcomes of being in education or paid work.

*Figure 1.* Time allocation for 16-18 year olds throughout the average term time weekday in 1974/5 (a) and 2000 (b).

(1974/5 n=611)
(2000 n=337)
These changes to the shape of the average day are underpinned by some major changes in the basic structure of school experiences for adolescents over the last 20 years, including:

- Much more attention to attainment and examinations, applying more widely across the ability and socioeconomic range. Testing is now more likely to include continuous coursework assessment and year-round examinations.

- A significant increase in examination participation, and in examination ‘success’. The proportion achieving five or more passes at GCSE has gone from approximately 20 per cent to over 50 per cent. But the majority of young people also have experience of examination failure, even if they measure up on this basic yardstick.

- A significant increase in the number of young people staying on in education at 16 years and thus having longer school experiences than previously. The number taking A level courses has doubled since the 1970s, from around 18 per cent to over 40 per cent.

- More participation in a variety of non-school post-16 educational routes than in previous decades, though many of these are part-time or less-structured than the A level track. The recent Wolf report estimated that 25–35 per cent (300,000–400,000) of this age group are on courses that are of little value.4

Figure 2. Staying on at school and exam achievement in the UK 1950–2000

Staying on is defined as the percentage of pupils staying on after the compulsory school leaving age. The exam achievement series measures the percentage of school-leavers achieving five or more higher grade GCSE (or O level) passes.

Source: Reproduced with permission from Machin and Vignoles (2006)5

Substance use
There is greater availability of both alcohol and other types of drugs than was the case for young people in the 1970s. This may influence the physical pathways to anxiety and depression and (in the case of alcohol) conduct disorder, but also raises questions about the social aspects of consumption such as peer pressure, which might create stress.

Trends in the consumption of drugs and alcohol have fluctuated since the 1980s, and there is some evidence that overall average levels have gone down in recent years. But the absolute level of alcohol consumption by 11–15 year olds is higher in the UK than in most other countries.

UK trends also have some defining characteristics – early onset, higher volume of intake, more binge drinking – which play an important role in determining whether substance use is likely to become problematic. Approximately a quarter of UK teens recall using alcohol by the age of 13 years, and approximately two thirds report being drunk by the time they are 15 years old. As we have noted, alcohol and substance use have been linked to depression, anxiety and conduct problems in young people.
Family life

There have been dramatic changes to family structure, particularly in relation to family size, the extent of family breakdown and reconstitution, and in the proportion of women working. Around 20 per cent of children will have experienced divorce by the age of 16 years, compared to around ten per cent in the mid 1970s. But what impact, if any, have these changes had on parenting and young people? Research shows that most stress comes from family conflict and family relationships, rather than from the split itself. We highlighted these findings:

- There were increases over time in conduct and emotional problems among all family types, but at all time points the rates among adolescents in non-intact families (separated, divorced and step families) tend to be higher than in intact families (for example, approximately 20 per cent versus 12 per cent in 1999).

- Statistical modelling suggested that about 15–30 per cent of the observed change in emotional and behaviour problems could possibly be linked to the change in family structure; thus the majority of the change has to be explained by other causes. Changes in family composition are likely to be a part of a complex web, working with other social factors in leading to youth outcomes.

- There was a corresponding general increase in self-reported distress among the parents themselves between the 1980s and 2000s, affecting single parents and parents on low incomes to a greater extent than other families.

There is no evidence that parent-adolescent relations in general have gotten worse over this time. In fact, by the measures available to us, they seem to have improved, and the increased warmth and authoritative parenting might help young people weather other kinds of stress. It is clear is that not all young people experience this kind of parenting.

There has been a rise in parental monitoring of adolescents, as Figure 4 demonstrates, comparing rates of different kinds of supervision between 1986 and 2006. This may be particularly important to families under stress or in difficult neighbourhoods.
What might these trends mean?

It would be wrong to assume that all social change is negative or threatening. In many ways, the lives of today’s young people are either improved, or not very different, from their counterparts in the 1970s and 1980s. The increasing numbers obtaining qualifications, and the signs of warmer parenting, are clearly to be welcomed.

However, there are some social trends which may have had a negative impact on young people. Although the evidence for this is not always clear, the questions raised are sufficiently serious to warrant further examination and discussion.

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**Figure 4.** Youth reports of parental monitoring and expectation
The implications of ‘more education’

Educational changes are clearly among the most important experienced by mid to late teens. We identified three groups for whom there might be different implications:

- those now on the A level track who might not have been in the past;
- those who are in the parallel post-16 courses that are less academic and may be much less structured than being in work or in school, and;
- those who have skipped all post-16 education and are not in work.

There is much public debate about the third group, who generally find themselves not in education, employment or training (NEET), but we think all these groups require more serious research and more policy debate.

For example how is young people’s time structured in the particular pathway they are on? Although there is little hard evidence, there are many suggestions that young people who remain in education after 16 but do not take A levels might be in much less structured environments than those doing either A levels or paid work. They may have only a few contact hours each week, and there may be much more flexibility about how each day is spent. Is this a good or bad thing? We need more evidence about what the day looks like for young people in a variety of further education and vocational settings, but also more policy focus on what we mean by non-academic or vocational education after age 16.

Another issue is how young people find themselves on particular trajectories. This is often viewed as being about the provision of better individual ‘careers guidance’. But we suspect the issues are deeper, and that creating more automatic routes or stepping stones to generalised vocational or non-academic pathways would be helpful to many young people, and might also reduce the number of NEETs.

Both these issues would benefit from examination of cross-national evidence about how other educational systems are structured. This might shed light on how we can ensure young people have clear vocational and non-academic options that provide genuine skills and training as well as structure and socialisation.

It would also be useful to collect better evidence about how these educational structures interact with families and peer groups. If young people are not in full-time, well-structured education, are they more likely to be spending time with family and friends in their late teens? If
they are in education rather than work are they likely to be subject to more peer pressure than in previous generations?

The implications of ‘less work’

For today’s young people, the transition from school to work is no longer a normal experience. The full-time employment rate for all young people from age 16–19 is less than 20 per cent, a figure that has more than halved since the mid 1980s. It compares to an overall working-age full-time employment rate of 59 per cent. Most young people’s lives are focused on education, examinations, colleges and training, or around not having access to education, examinations, colleges and training. However good these settings are, they are quite different to work. Paid work is a highly structured activity where young people are almost always in contact with older people, and doing activities that are supervised and structured and which are different from those included under the umbrella of education and training.

For some, these patterns might represent enhanced opportunities, but for others they may not. It entirely depends on what they are doing in that educational setting, and how well it is suited to their needs. What is happening to the group of young people who might previously have gone to work? Is there more age segregation in society if young people are excluded from the work environment until their mid-20s? What are the implications, both for young people and for the rest of society?

This is not a case of training young people better for work; the nature of the youth labour market has fundamentally changed. We need to rethink how they spend their time (and support themselves, and contribute to society) in the absence of work.

The implications for parents

Parents are adapting and responding to social change themselves; spending more time with their children, exerting increasing levels of supervision and control, and demonstrating warm and positive relationships. Despite widening income inequality and declining social mobility over part of our time period, there was no evidence that parenting quality had declined. However, lone parents report more difficulties in supervising their adolescents than two-parent families. This may be simply an acknowledgement that having two people on the case is usually more effective, partly through the support that parents give to each other; rather than a specific issue to do with lone parent households. And there was emerging evidence that in both lone-parent households and households under financial pressure, parents are themselves showing increased signs of stress, which may take a toll on the kind of parenting provided.

But evidence also suggests that in many families, parents are increasingly involved with their older adolescents in ways beyond what was traditional 30 years ago. Parents have become brokers; more involved in the educational decisions their children are asked to make and even signing ‘home-school’ contracts with education providers, agreeing to do ‘their bit’. They negotiate, argue and provide support to help their young people navigate the sometimes rather vague waters in the post-16 world. But again, this might be stressful; as we’ve noted, parental mental health was rated lower in the later surveys we looked at. And those parents whose children do not stay on to study A levels may be least well-prepared to take this on, leading to a growing gap between the outcomes for young people who stay on the academic route and for others. To that extent, creating more secure signposted routes to post-16 education for those who are not doing A levels may help parents and families too.

The implications for drug and alcohol policies

One of the things that parents have to negotiate and supervise is of course, initiation into the world of substance use. Adolescent public health is a huge and growing concern. For the first time ever, adolescent mortality in the UK exceeds that of children aged 1–4. Although the overall trends for alcohol and other types of drug use seem to be decreasing, the UK still has a particular problem with alcohol use in comparison with other countries. This is a public health issue in itself, but it also relates to anti-social behaviour, patterns of school performance (for some) and peer interactions. Changing the norms around teenage drinking, raising the age at which some young people start, and reducing binge drinking should be a priority for those interested in young health.

10 Viner R and Barker M (2005) Young people’s health: the need for action, British Medical Journal 330, 901–903
people’s welfare. A more robust public health policy response (involving regulation, taxation and building public support for change) might help parents – and the rest of society – feel confident about setting norms.

Looking forward

As Professor Sir Michael Rutter points out in his foreword to the book, the impact of the current economic climate, with its particular implications for young people’s well-being, is not yet reflected in the trends we documented. These economic changes are likely to amplify the importance of taking young people’s well-being seriously. For example, increasing unemployment rates will make it difficult to address the need for a more structured transition from education to work. Similarly, any educational reforms designed to provide more structure for non-academic streams could be costly to implement. In these areas and others, further research and more focussed policy discussion is needed.

The findings from the Changing Adolescence Programme suggest that monitoring changes over the long term in a range of different areas of life is important to understanding outcomes for young people. However, this is no easy task, and the questions we asked were often too sophisticated for the data. However improvements to the data mean that identifying trends from here onwards will be easier than starting with a base in the 1970s. Documenting time trends should be a major focus of the coming decades, as it will enrich our understanding of the influences on outcomes for young people, and help us to intervene.
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