

The specificity of France regarding school - Perspectives from the HBSC survey

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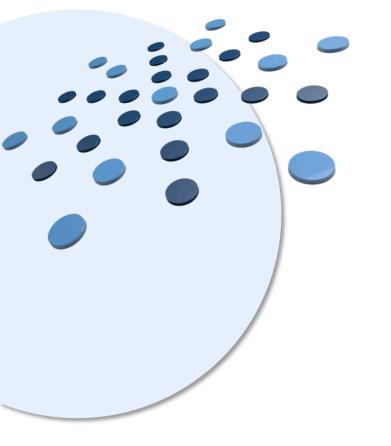
School & well-being

- In a setting approach, school has to be considered as a strong determinant of the developpement of health and well-being of children and adolescents
 - ✓ Time spent in school (as a building)
 - ✓ Interactions with classmates, peers, teachers...
 - ✓ School-climate
 - ✓ Academic achievement (school performance, workload, pressure...)
- School experiences track into adults' health and well-being
- Background for health promoting schools, whole school approaches
- The HBSC survey can provide data around these issues



Main points

✓ Some specificities of the French school
 ✓ The international HBSC study
 ✓ Data from HBSC indicators related to school
 ✓ Data from HBSC indicators related to health
 ✓ Links btw school & health (HBSC France)
 ✓ Focus on the school experience and well being of students with chronic conditions in France



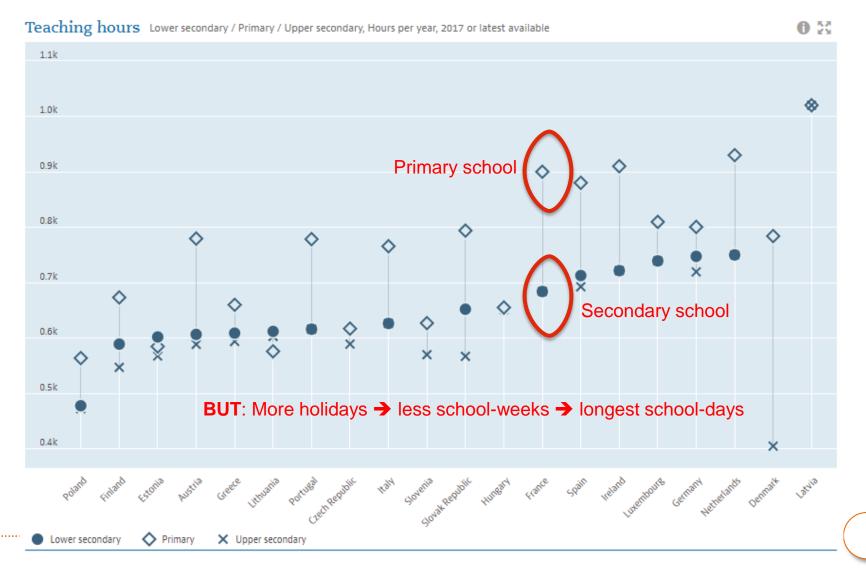


THE FRENCH SCHOOL

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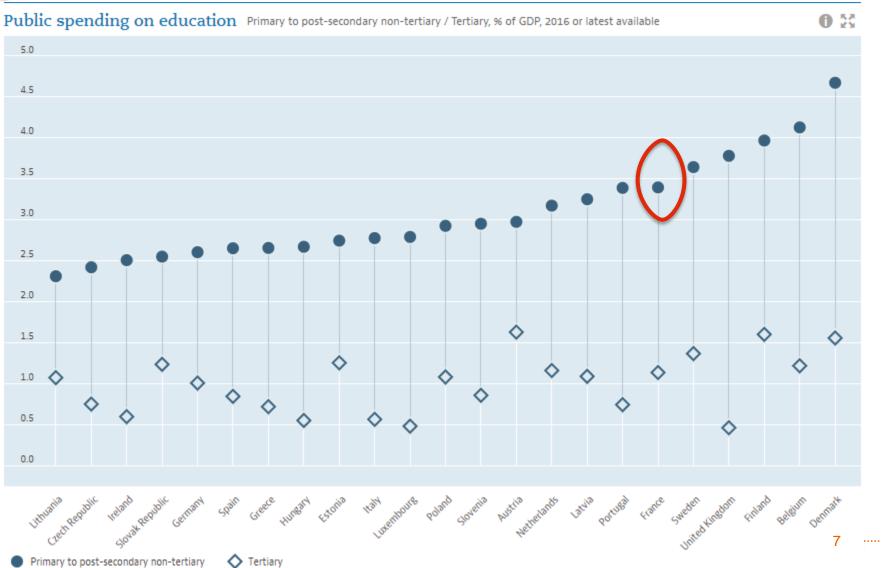


Teaching hours in EU (Pisa, 2017)





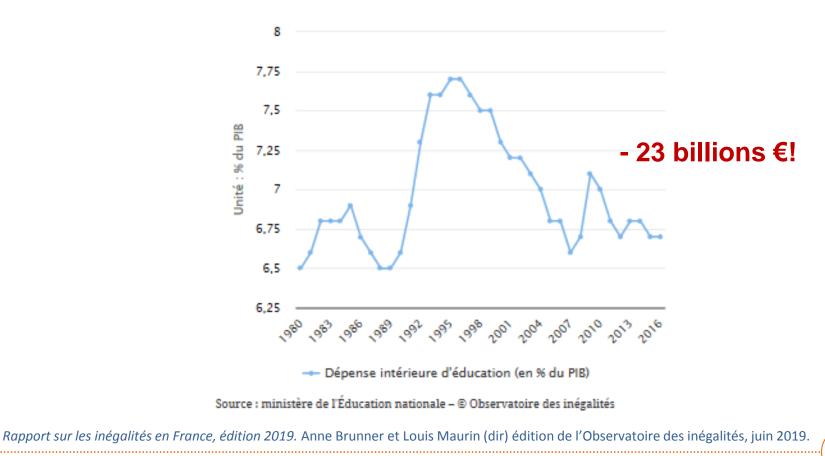
Public spending on education (PISA 2017)





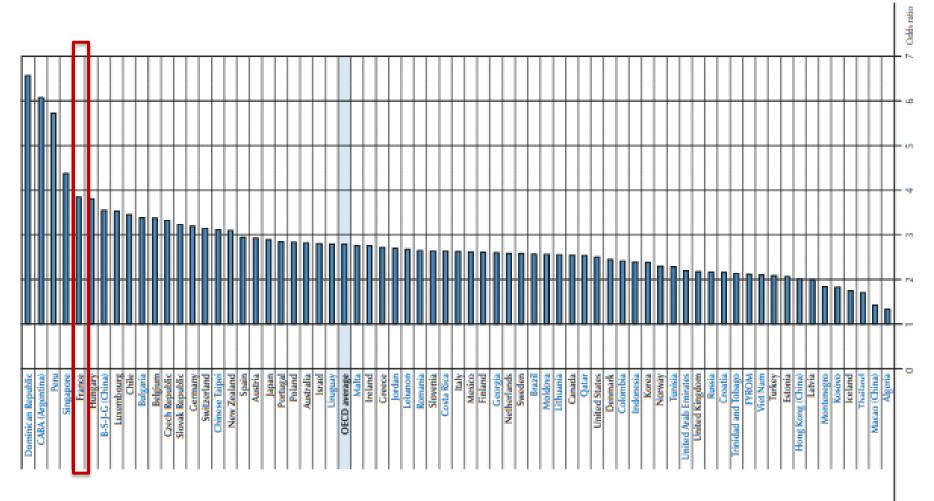
Evolution of spending related to gross domestic product: from 7.7% in 1996 to 6.7% in 2016

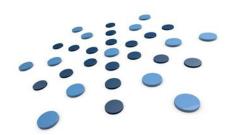
Évolution des dépenses d'éducation rapportées à la richesse nationale en France



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Likelihood of low performance among disadvantaged students, relative to non-disadvantaged students, in science, PISA 2015, OECD countries

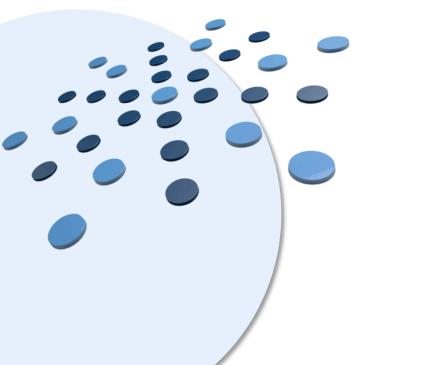




Place of school within the French society

- Since centuries, French society globally overvalues degrees & diplomas vs. other factors, much more than in other countries
- ✓ Getting a diploma is an emergency → find a job quickly & keep it!
- Professionnal status is overvalued vs. other components of people's life
- ✓ Academic content is overvalued vs. technical skills, → inequalities
- ✓ Initial training is overvalued vs. continuing education
- ✓ French middle class famillies have complex strategies regarding the choice of their children's schools ;
- French paradox: public spending on school is relatively low vs other rich countries (elementary & university) 7 inequities

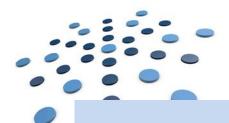
C. Van de Velde, *Devenir adulte. Sociologie comparée de la jeunesse en Europe*, PUF, « Le Lien social », 2008 – L. Maurin, *Déchiffrer la société française*, préface de Denis Clerc. Paris, La Découverte, 2009 – A. van Zanten, *Choisir son école. Stratégies familiales et médiations locales*, PUF, Le lien social, 2009 - A. Brunner , L. Maurin (dir) *Rapport sur les inégalités en France, édition 2019*, Observatoire des inégalités, 2019 -





THE HEALTH BEHAVIOUR SCHOOL-AGED CHILDREN HBSC

Health Behaviour in School-aged children (HBSC)



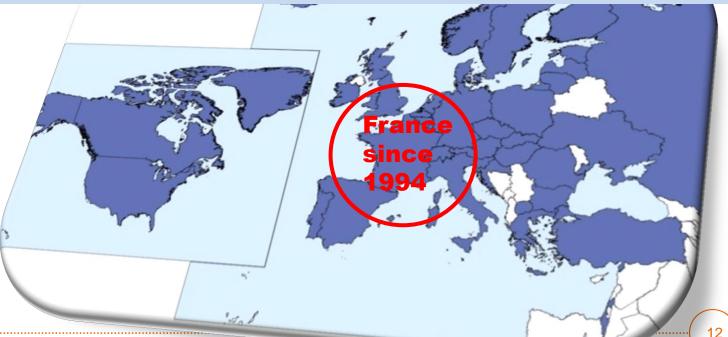
2018: 49 nations (4 in 1983)

✓ >200 000 11-15 y-o students

 \checkmark > 1,5 millions of adolescents included to date

http://www.hbsc.org/publications/international/ \checkmark

✓ Under the auspices of WHO



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HBSC methodology

School-based survey every 4 years: anonymous, confidential self-reported questionnaires completed in classroom

Nationally representative samples of ~1500 11, 13 & 15 year olds.

10 surveys to date. Last in 2017/18 Countries use validated **standardised methods**

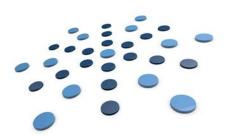
Questionnaire consists of **core mandatory items**, optional packages and national items

Data submitted to International Databank at University of Bergen. Report published by **WHO**



- ✓ Data collected **directly from students** about them themselves
- ✓ Wide picture of students' life (subjective indicators, ≠ behaviours, determinants, settings +++ school)
- Detailed observation of the dynamic of adolescence (developpmental perspective)
- ✓ Allows to capture health inequalities
 - ✓ By age
 - ✓ By gender
 - ✓ By socio-economic background of parents
- ✓ Allows trends (every 4 years)
- Allows international comparisons





- ✓ Since **1994**, national sample since 2002
- ✓ Data presented **by grades since 2010**, focused on middle-school
- ✓ Coordinated by the ministry of Education
 - ✓ in parternship with the French National medical research institute (Inserm U1027), the French Observatory of Drugs & Addictions (OFDT), the French Public health institution in charge of surveillance, health education & prevention (SPF)
- ✓ Last wave available : 2014 (10 434 students from last year of primary school to 1st year of high school, from public and private schools) → 7023 middle-school students / 169 schools
- ✓ Last data collected: 2018, together with ESPAD → the National Survey in Middle- and High-School for Adolescents on Health and Substances, EnCLASS (20,198 students, 12,973 doing HBSC)









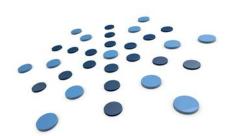
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ANÇAIS DES

DROGMES ET DES



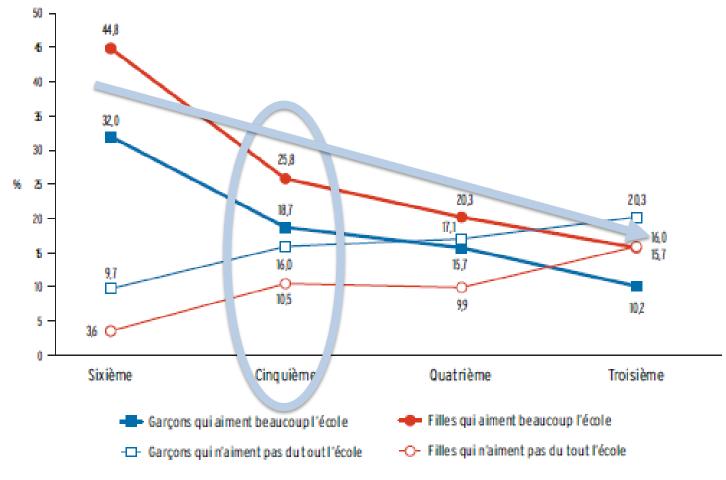


School indicators

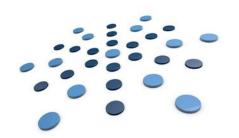
- Liking school (« how do you feel about school at present? », answers : I like it a lot, I like it a bit, I don't like it very much, I don't like it at all).
- Perceived school performance (« according to you, how do your teachers find your achievements compared to your class-mates? », answers : very good, good, average, below average),
- School pressure (« How pressured do you feel by the schoolwork you have to do?», answers : not at all, a little, some, a lot),
- ✓ Grade repetition (coded with age of students and actual grade)



A progressive disenchantment of middle-school students



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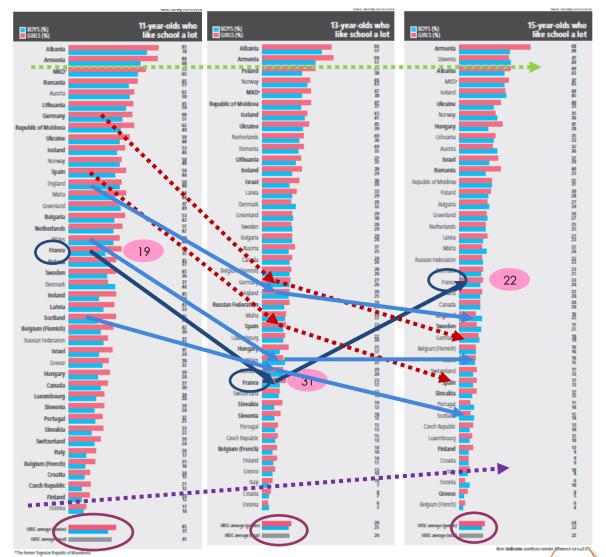


 ✓ Significant decrease in most countries with large differences (>15%)

 ✓ Gender differences at all age, significant in almost all countries at 11

 ✓ No strong association with family affluence

Liking school, HBSC international 2014: a peculiar age trend in France



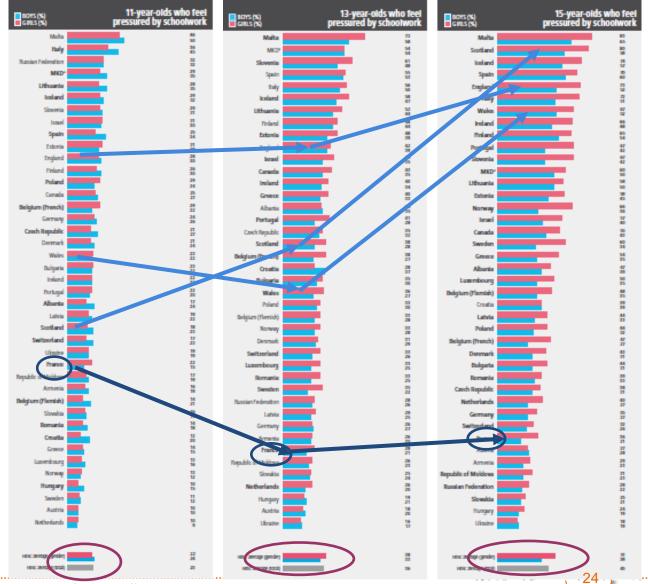


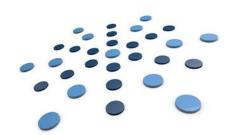
Significant
 increase in
 almost all
 countries, more
 among girls

 ✓ Gender differences reverse & become significant in most countries at age 15 (with girls more stressed)

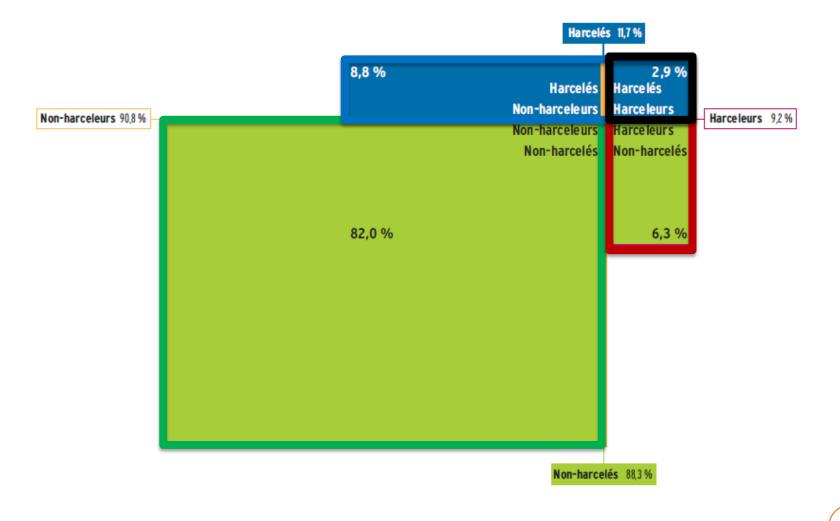
✓ No pattern with family affluence

Perceived school pressure, HBSC international 2014: paradoxically not so high in France



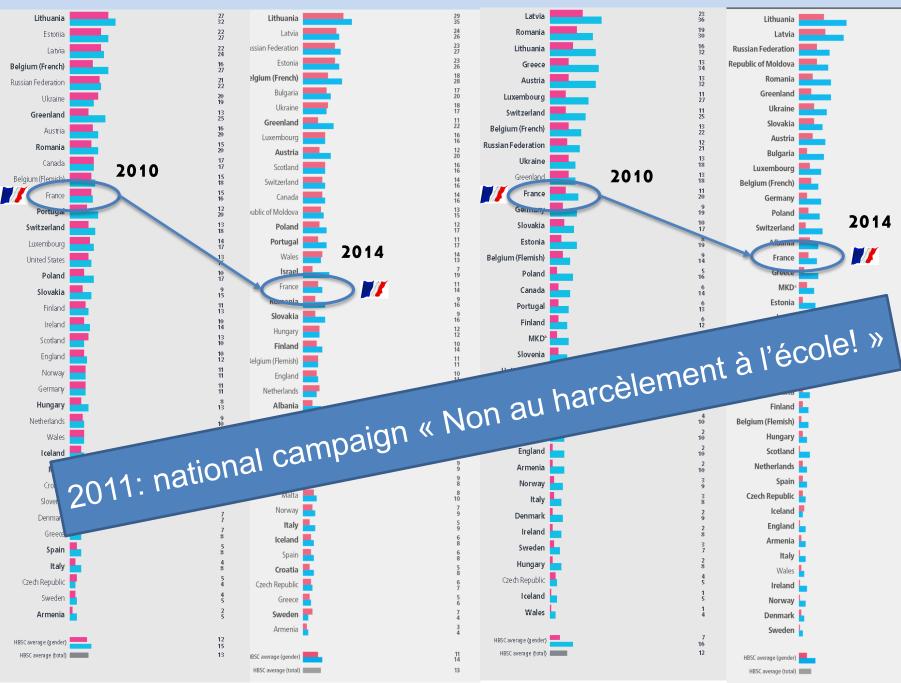


A majority of students not involved in bullying, 12% of victims, 9% of bullies

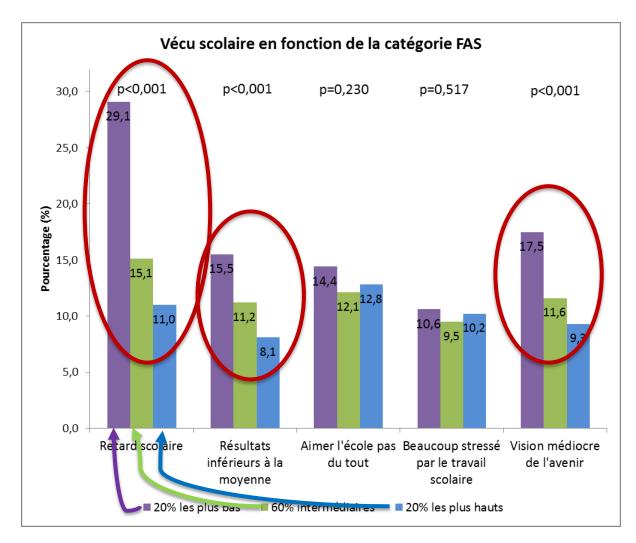


Bullied, 11 y-o

Bullies, 15 y-o



FAS & school indicators : not in favour of most deprived in France !



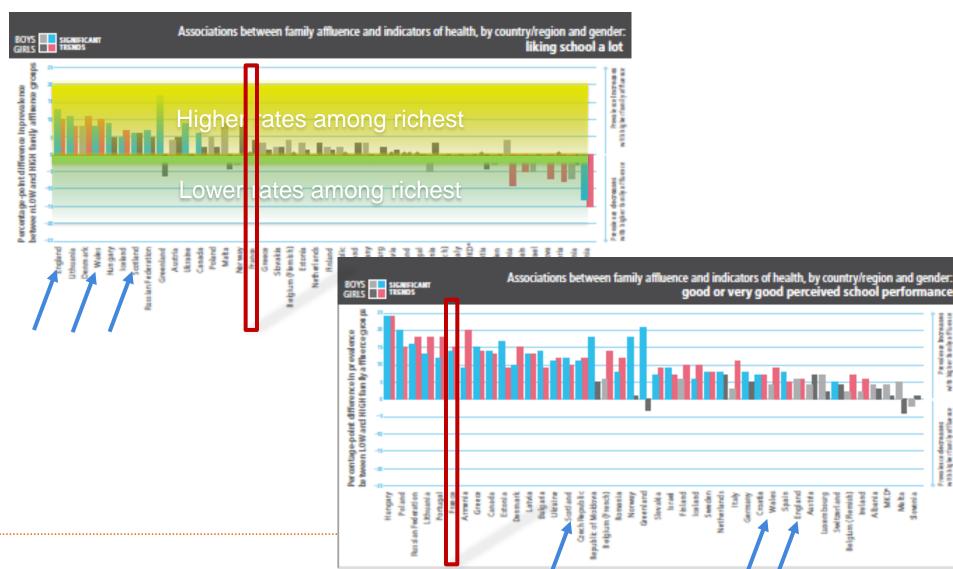
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FAS & liking school, FAS & perceived school-performance

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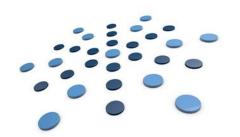








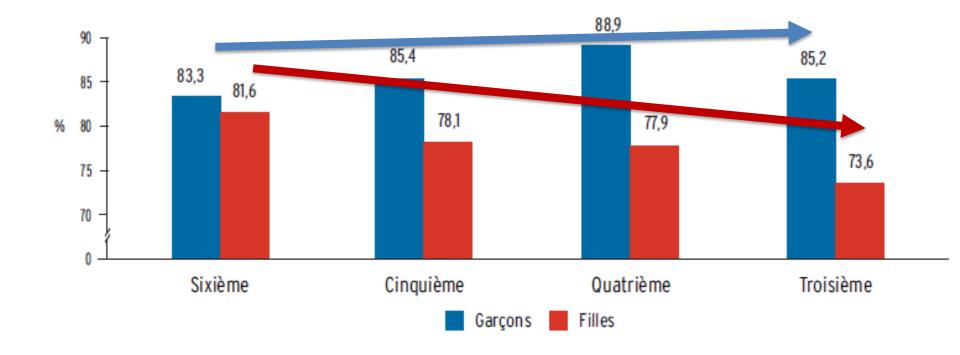




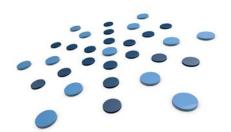
Health indicators measured within HBSC

- ✓ **Cantril ladder**, a score < 6 meaning a low life satisfaction,
- ✓ Multiple complains (≥ 2 complaints ≥ once a week : headackes, stomackackes, back pain, difficulties in falling asleep, dizzinness, feeling low, irritability or bad temper, feeling nervous)
- ✓ Perceived health (excellent, good, fair, bad),
- Perception of future, (// Cantril lader, a score < 6 being a poor perception of one's future)
- ✓ **Oral health**, a score < 6 meaning a poor oral health
- Depressivity (among 8th and 9th grades only), measured with the French Adolescent Depression Rating Scale (ADRS), score in 3 catégories (no symptoms, low risk of depressivity, high risk of depressivity)





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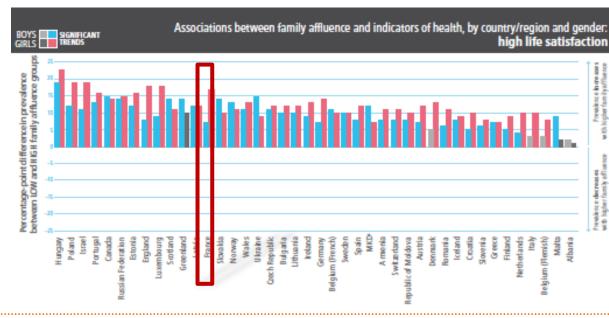


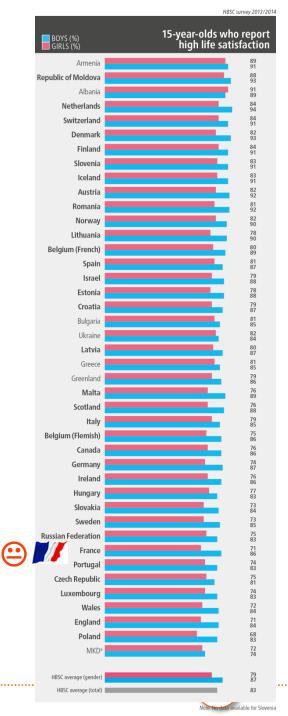
High life satisfaction

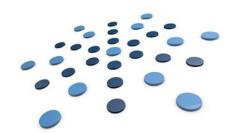
ALL countries |> |

•Overall decrease of high life satisfaction with age, increase of gender differences

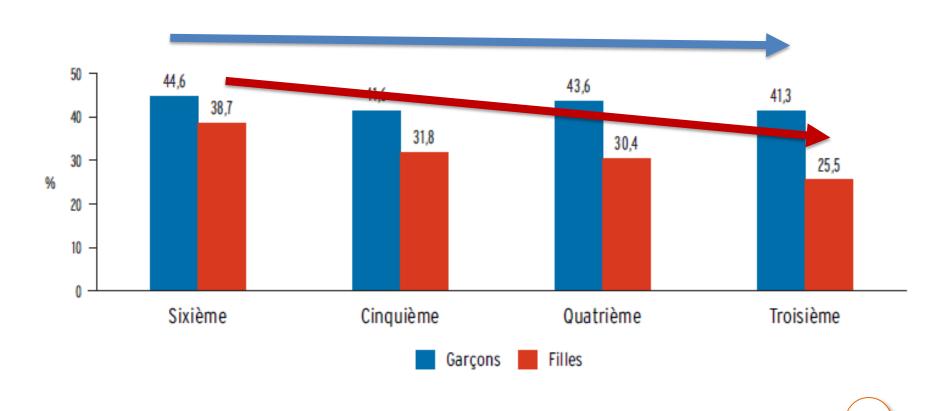
•ALL countries: positive association with familly affluence



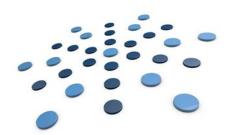




Perceived health as excellent: gender differences that **7** btw 6th & 9th grade as **3** among **‡**



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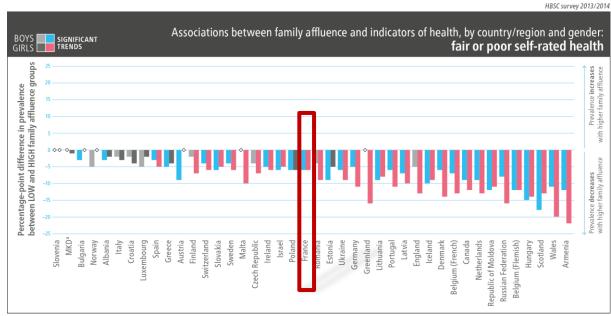


Fair or poor health

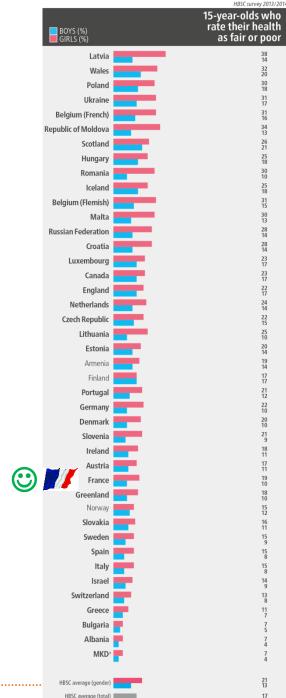
•ALL countries **|** > **|**

 Overall increase of poor perceived health and gender difference with age

 ALL countries negative association with familly affluence



*The former Yugoslav Republic of Macedonia. Note: low- and high-affluence groups represent the lowest 20% and highest 20% in each country. 🔷 means less than +/-0.5%



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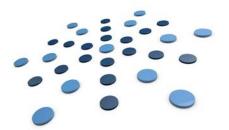
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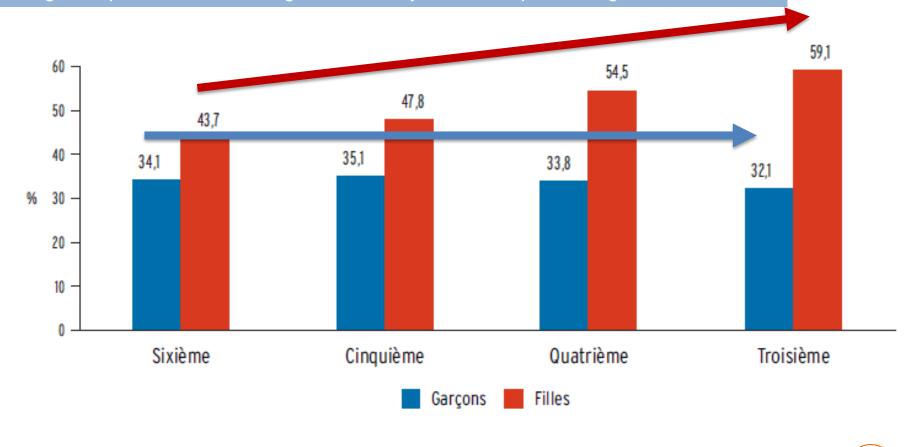
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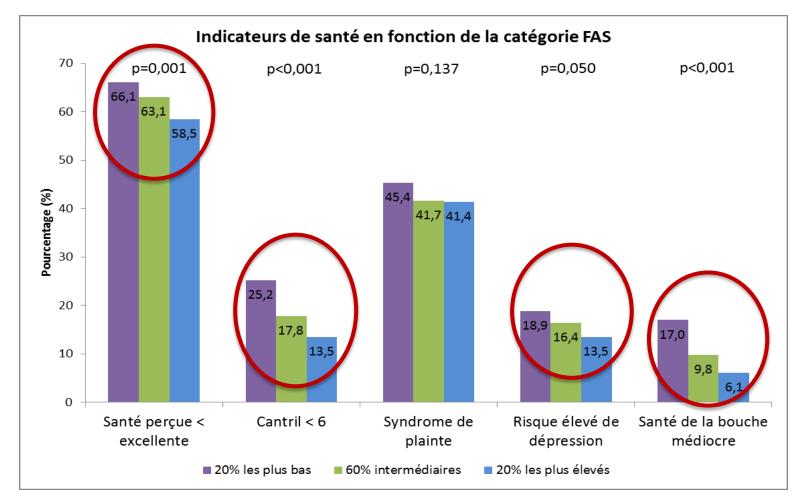
Multiple symptoms: gender differences **7** btw 6th & 9th grade as **7** among **1**

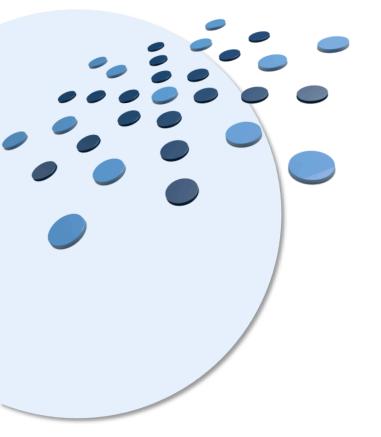
 \geq 2 symptoms \geq once a week : headackes, stomackackes, back pain, difficulties in falling asleep, dizzinness, feeling low, irritability or bad temper, feeling nervous





FAS & health indicators: high inequalities in middle school students



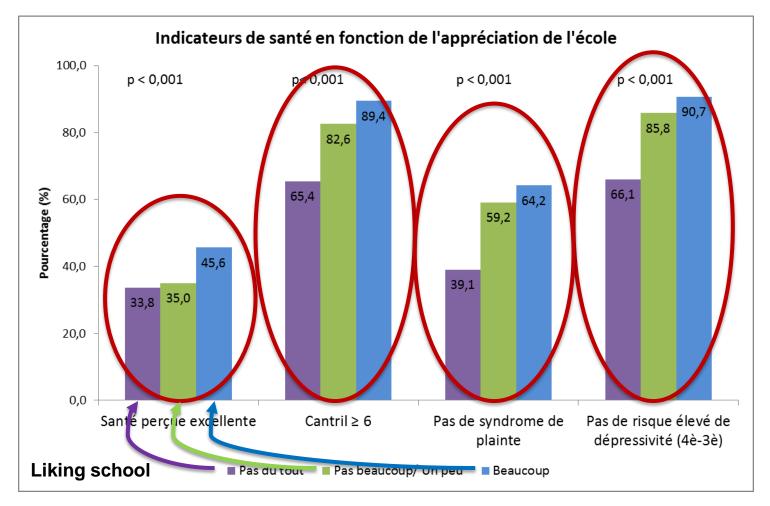




LINKS BETWEEN SCHOOL & HEALTH



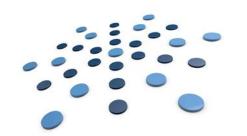
Liking school & health indicators: strong links



Logistic regression explaining the odds to report low life satisfaction among middle school students in France HBSC 2014, weighted data

(adjusted on sex, grade, FAS & 4 school related indicators, N = 6403)

Variable	OR	IC 95%	P-value
Grade (ref = 6 ^e)			0.023
5 ^e	0.93	[0.75 ; 1.16]	0.527
4 ^e	0.77	[0.63 ; 0.94]	0.009
3 ^e	0.94	[0.76 ; 1.17]	0.584
FAS (ref =rich 20% highest)			< 0.001
middle	1.37	[1.12 ; 1.67]	0.002
Deprived (20% lowest)	2.02	[1.59 ; 2.57]	< 0.001
Repeated class (ref : non)			
Among boys : oui	0.93	[0.71 ; 1.23]	0.620
Among girls : oui	1.41	[1.07 ; 1.84]	0.014
Do not like school at all (ref : no)	\frown		< 0.001
Yes	2.71	[2.22 ; 3.32]	
School stress very much/much (ref : no)			< 0.001
Yes	2.06	[1.76 ; 2.39]	
Results below class mean (ref : no)	X		< 0.001
Yes	2.07	[1.66 ; 2.59]	



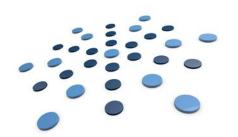
Logistic regression explaining the odds to report a <u>poor perceived health</u> among middle school students in France HBSC 2014, weighted data

(adjusted on sex, grade, FAS & 4 school related indicators, N = 9823)

Variable	OR	IC 95%	P-value
Gender (ref : Boy)	\frown		< 0.001
Girl	1.87	[1.58 ; 2.20]	
Grade (ref = 6°)			0.021
5°	0.93	[0.75 ; 1.16]	0.511
4 ^e	0.77	[0.63 ; 0.93]	0.009
3°	0.94	[0.76 ; 1.17]	0.603
FAS (ref =Rich, 20% highest)	\frown		0.646
middle	1.37	[1.13 ; 1.67]	0.002
Deprived (20% lowest)	2.03	[1.59 ; 2.58]	< 0.001
Repeated class (ref : no)			0.118
yes	1.17	[0.96 ; 1.41]	
Do not like school at all (ref : no)	\frown		< 0.001
Yes	2.70	[2.21 ; 3.30]	
School stress very much/much (ref : no)			< 0.001
Yes	2.05	[1.076 ; 2.39]	
Results below class mean (ref : no)			< 0.001
yes	2.07	[1.66 ; 2.57]	4



WELL-BEING & SCHOOL PERCEPTION AMONG STUDENTS WITH A CHRONIC CONDITION

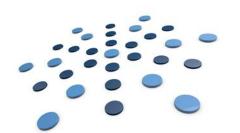


HBSC France 2014

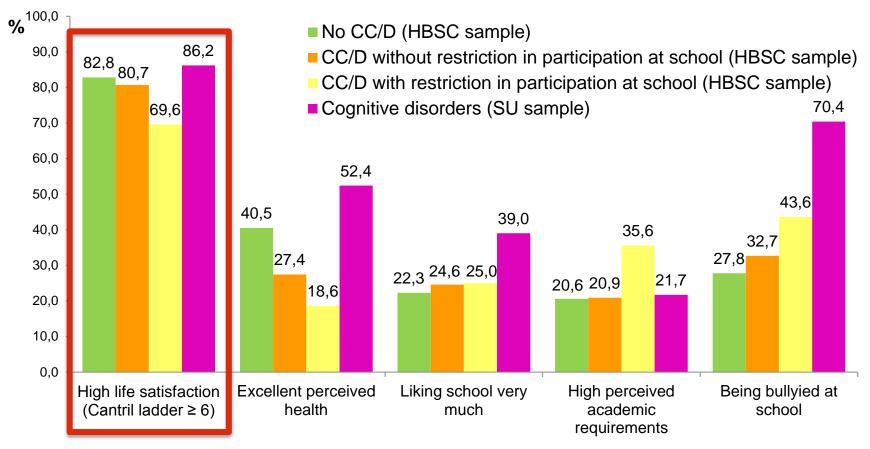
- 7023 students representatives of French junior high-school students, mean age 13.5 y.o (481 classes, 286 schools)
 - Students without any CC (78,5%)
 - Students with a CC NOT restricting their participation in school (17,3%)
 - Students with a CC restricting their participation in school (4,2%)

HBSC ULIS 2014

- 700 students in 75 special units (special classes in mainstream schools), sampled in France, mean age 14.2 y-o
 - By definition all SU students are recognised disabled
 - Most enrolled (about 75%) have cognitive disorders



Contrasted results, students with a CC + restrictions being the worse off



Godeau et al. Education & Formations, 2016



Conclusions and perspectives

- ✓ French studen
- ✓ Gender, age 8 strong in France

Thank you for your attention ! emmanuelle.godeau@ehesp.fre godeau

- Overall their perception
 not so well compared to other countries
- School experience is average, with some specificities: strong disenchantement/middle-school ; negative perception of school performances ; but no so much pressure expressed ; rather high levels of bullying, improving
- This experience is contrasted among students with a chronic condition
- Links btw school and well-being are (as expected) strong

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Is good, but