

Assessing Wellbeing Among Children and Young People: Findings from a Large-Scale Schools Survey in Swindon

Dr Elli Kontostoli¹, Dr Anastasios Argyropoulos¹

¹ Swindon Borough Council, Prevention and Communities, Public Health Intelligence

Background

Swindon is experiencing pupil health challenges:

- declining school attendance
- higher-than-average rates of social, emotional, and mental health difficulties

Without directly capturing the voices of children and young people (CYP), services risk overlooking the realities of their lived experiences.

The survey aimed to:

- 1) Understand CYP mental and emotional health
- 2) Understand lifestyle behaviours and experiences

Methods

From November 2024 to February 2025, a survey was administered in 62 schools, with participation from 3,588 pupils in Years 4, 6, 7, and 10.

The survey covered 11 wellbeing domains: overall wellbeing, friendships and relationships, sleep, mental wellbeing at school and outside of school, bullying, self-harm, help outside of school, eating and body image, social media, and activities. included structured and open-ended questions.

Non-parametric tests (Kruskal–Wallis, Mann–Whitney U, with post-hoc Dunn’s tests) were used to determine whether pupils with specific characteristics such as age, gender identity, sexual orientation, health, and personal circumstances (e.g. long-term conditions) responded differently. Open-ended questions were analysed using Natural Language Processing and topic modelling.

Results

Figure 1 shows that the sample is quite balanced across the Years. The majority of CYP reported being happy (Fig 2), though responses varied for pupil characteristics (for example, Asian/Asian British students reported better wellbeing and emotional regulation (if not shown here, data available in the [full report](#))). Loneliness, poor sleep linked to digital use, body image concerns, online safety issues were also reported (Fig 2). Around 30% of pupils had experienced or were unsure about experiencing bullying whereas only 4% perceived themselves as bullying others. 30% of pupils reported self-harming at least once, with some continuing to self-harm regularly. One in two worried about family finances and one in four expressed regular concern about having enough food.

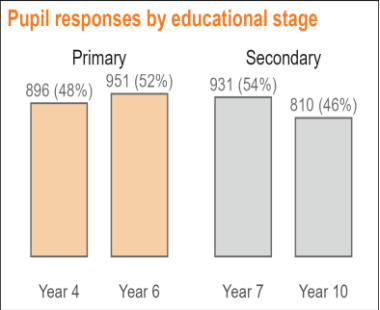


Figure 1. Demographic characteristics

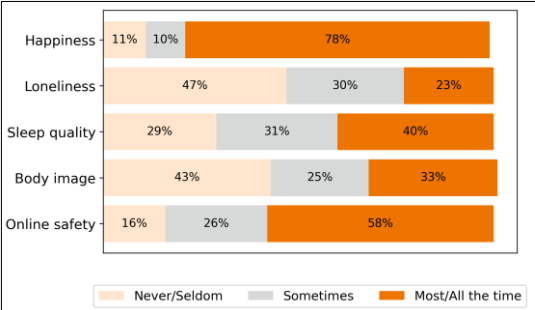


Figure 2. Selected wellbeing measures

Table 1 shows key themes identified across all Year groups and illustrates how these change from younger groups to older groups. As children age, themes like emotional wellbeing, and peer conflict and bullying become more complex.

Table 1. Selected key themes as children age

Theme	Change with Age
Emotional wellbeing	Sadness develops into anxiety, depression
Peer conflict	Bullying evolves into complex social issues
School enjoyment	Friends contribute to supportive environment
Trusted adults	Care & safety lead to mental health, inclusion
Substance use	Feeling rejected causes some individuals to use substances to cope

Recommendations

Enhance Mental Health Support: Prioritise early-intervention and ongoing support for pupils with diverse needs.

Strengthen Bullying Prevention and Emotional Safety: Ensure clear, consistent anti-bullying policies. Provide safe, anonymous reporting and emotional literacy education to reduce harm and improve peer relationships.

Promote Healthy Digital Habits and Online Safety: Educate pupils on screen time, digital boundaries, and responsible social media use to support wellbeing, sleep, and safety.

Expand Community and Family Support Programmes: Work with local organisations to strengthen food, financial, and parenting support initiatives.