

# Youth Scan

February 2006

From the National Youth Council  
"Developing a Vibrant, Highly-Connected,  
and Self-Sustaining Youth Sector, and Nurturing World-Ready Youth"

Bringing you snippets of youth trends and issues compiled from diverse sources such as news reports, journals and press releases, Youth Scan aims to help you stay in touch with the constantly evolving youth scene.

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**1. USA: The New Normal? What Girls Say about Healthy Living**

*Girl Scouts, January 2006*

On January 25, the Girl Scout Research Institute released a new original research report, entitled "The New Normal? What Girls Say About Healthy Living" that combined focus group research with online surveys of more than 2,000 eight- to 17-year-old girls. The study was conducted in response to the general lack of information regarding girls' attitudes about health, body image, diet, weight, and exercise and the role of these issues in their lives. The study also surveyed some 460 boys and 600 mothers in a bid to address these and other dimensions of girls' health-related attitudes and behaviours.

Overview of Findings

Girls today seek the status quo -- looking to find that safe middle ground where they feel and will be perceived as "normal". This "normal lifestyle" is largely dependent on whether their behaviours align with their peers. It is also dependent on the adults who influence them, the media, and girls' own sense of self and body image. These messages are often conflicting and contradictory; on one hand, girls are told to be happy the way they are, and on the other hand, they are given the message that being overweight is unhealthy and unattractive.

The major findings of this study reveal that girls today use a new set of norms to define health. This "new normal" departs from what adults may believe in four distinct ways:

(a) Aspiring to be "Normal Healthy"

*For most girls, being healthy has more to do with appearing "normal" and feeling accepted than maintaining good diet and exercise habits.*

-- In general, physical appearance is of greater concern to girls than what they eat or how much they exercise. 65 percent of girls said their lifestyle was "healthy enough for my age."

-- While most girls have an accurate perception of their own weight, as many as one-third of girls have a distorted perception of their weight -- either perceiving themselves as too heavy when they are actually normal weight or believing their weight to be normal when they are too heavy. An erroneous perception of overweight seems most prevalent among 16- to 17-year-olds, with 15% of normal weight girls believing they are overweight. Additionally more than 30% of normal weight girls (aged 16-17) are trying to lose weight through exercise, dieting, skipping meals, and eating healthier.

-- Girls tend to think about health as the absence of negative behaviours (e.g. being free of drugs, alcohol and tobacco) rather than what behaviours can improve their health and well-being.

#### (b) Emotional Health is Central

*Emotional health, self-esteem, and body image play a critical role in girls' attitudes about diet and exercise.*

-- Most girls view emotional health and physical health as equally important.

-- One in four girls (26%) has some dissatisfaction with her weight compared to 19% of boys. Girls generally are more concerned than boys about everything, from getting along with friends and doing well in school, to how they look, and whether they are too heavy or too thin.

-- However, satisfaction with weight and body image has more to do with perception than reality. Regardless of their actual weight, girls who think they are overweight are more dissatisfied with their weight than girls who think they are normal weight. This is important because how girls view themselves affects their self-esteem, their willingness to participate in sports, and their overall feelings of confidence, among other things.

-- The more physically active girls are, the greater their self-esteem and the more satisfied they are with their weight, regardless of how much they weigh. On the other hand, inactive girls are more likely to be dissatisfied with their appearance and perceive themselves as overweight.

-- 83 percent of very active girls say that physical activity makes them feel good about themselves. Despite the clear benefits, 40% of girls aged 11-17 say they do not play sports because they do not feel skilled or competent and 23% do not think their bodies look good. This creates an unfortunate cycle. If a girl does not feel good about herself or perceives herself as physically incompetent, she will not exercise. And without physical activity, she will not get the emotional and physical benefits from exercise.

#### (c) Tension between Health Awareness and Behaviours

*Although girls demonstrate basic knowledge about healthy foods and eating behaviours, they often do not put this knowledge into practice, and it is "normal" for many girls to make poor choices with respect to diet and exercise.*

- Meal skipping, particularly breakfast and lunch, is not uncommon among girls and occurs more frequently as they grow older. More than 60% of teenage girls skip breakfast at least once a week and nearly 20% skip it every day.
- Teenage girls spend increasingly more time on sedentary activities, such as talking on the phone, using the computer, and watching television.
- Availability of junk food, lack of tastiness in healthy food choices, and lack of energy and motivation to exercise are top contributors to unhealthy lifestyles for girls.

#### (d) The Influential Role of Mothers

*Mothers were the most frequently cited source of information on healthy living and they clearly function as role models for their daughters. A mother's weight, body image, attitude, and health habits are strong indicators of whether her daughter is overweight, satisfied with her body and physically active.*

- Regardless of socioeconomic status, overweight mothers are more likely to have overweight daughters and sons.
- A daughter's dissatisfaction with her weight is greater if her mother is also dissatisfied with her own weight, in spite of how much a daughter actually weighs.
- Controlling factors including income, race and weight of both mother and daughter, active daughters are more likely to have active mothers.
- Daughters of overweight mothers were considerably less likely to mention their mothers as positive role models for healthy living.

#### Recommendations for Moving Forward

##### (a) Give "health" social relevance.

To become a priority, healthy habits need to be framed as a means to achieve ends that are socially significant to girls of different ages, ethnicities, and backgrounds. Efforts that incorporate peer-to-peer support and role-modeling, where girls work together to achieve healthier lifestyles, can assign social value to healthy behaviours and positively leverage the importance girls place on peer relationships.

##### (b) Embrace a holistic definition of health.

Girls believe being healthy has many components. Therefore, efforts to improve their health that focus solely on eating habits and physical activity will not resonate with them. Because emotional health, self-esteem, and body image play a critical role in girls' attitudes about diet and exercises, health messages need to acknowledge what is important to them: their friendships, fitting in with peers, feeling good about themselves, and feeling safe (emotionally and physically).

##### (c) Emphasize physical activity.

Research shows that being active is one of the strongest predictors of both physical and emotional health. However, as girls get older, not only do demands on their time

increase, but activities become more sedentary. Girls need more opportunities to participate in informal, less competitive physical activities in safe environments where they do not feel self-conscious about their looks or ability, where they can choose the activities they want, and be active in ways that make them comfortable.

(d) Demonstrate positive outcomes that result from healthy behaviours.

Since girls frequently view good health simply as the absence of unhealthy behaviours or serious illness, so that skipping meals, eating junk food, and eating dinner alone are considered relatively harmless and well within "normal" behaviours. For these reasons, "just say no" efforts that merely discourage bad or extreme behaviours without providing positive alternatives, are incomplete. Without a valued benefit or evidence of potential harm, there is little motivation for girls to make better health choices.

(e) Make good health an attainable goal.

Girls receive a myriad of conflicting messages from home, school, peers, popular culture, and media. It is unclear to them what is right and what is achievable. It is also important to define good, nutritious eating habits, not as an unattainable extreme, but as a healthy balance and something that seems realistic. Efforts to encourage a healthy lifestyle must be reasonable and acknowledge girls as they are -- valuing their socio-economic and cultural backgrounds and their different self-perceptions and abilities.

(f) Target adult role models - especially mothers.

Parents who do not model healthy dietary and physical activity habits are an obstacle to fostering healthy habits in their children. In particular, mothers are major sources of nutrition information and emotional reinforcement for their daughters. Efforts to inspire and motivate girls to make healthier choices must focus on helping parents support their daughters and teach them that their choices model behaviours for how to live a healthy life.

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## **2. USA: Turning Training into Results: The New Youth Program Quality Assessment**

*High/Scope Educational Research Foundation, December 2005*

After an extensive, four-year validation study, the High/Scope Youth Program Quality Assessment (PQA) -- a comprehensive measurement tool for after-school programs -- has just been released. The Youth PQA Validation Study took place from 2002 to 2005, and was funded by the William T Grant Foundation.

The Youth PQA contains two booklets reflecting two different types of assessment: Form A measures youth experience based on a rater's observation; Form B looks at organizational policies through an interview with a program administrator. The Youth PQA consists of five indicators that measure program quality critical for positive youth development:

(a) Participatory Policies and Procedures

- Youth have an influence on the setting and activities in the organization.
- Youth have an influence on the structure and policy of the organization.
- Organization promotes staff development.

(b) Safe Environment

- Healthy food and drinks are provided.
- Program space and furniture accommodate the activities offered.
- Appropriate emergency procedures and supplies are present.
- The physical environment is safe and free of health hazards.
- Psychological and emotional safety is promoted.

(c) Supportive Environment

- Staff use youth-centered approaches to reframe conflict.
- Staff support youth with encouragement.
- Staff support youth in building new skills.
- Activities support active engagement.
- Session flow is planned, presented and paced for youth.
- Staff provide a welcoming atmosphere.

(d) Interaction

- Youth have opportunities to partner with adults, act as group facilitators and mentors, participate in small groups, and develop a sense of belonging.

(e) Engagement

- Youth have opportunities to reflect, make choices based on their interests, and set goals and make plans.

The major findings from the Youth PQA Validation Study are also valuable to the field of youth development:

(a) The program offering is more significant than the organization.

Quality -- especially in organizations which offered many workshops or classes for youth -- varied more within each organization than it did across organizations. This finding suggests that what happens in a program offering matters more than a youth organization's policies and procedures. The data also suggests that individual staff members tend to maintain consistent scores over time. So, how a youth worker builds a learning environment matters and without intervention (such as training or technical assistance), the quality of the environment a particular youth worker builds tends to remain static.

This finding also suggests important implications for how training and technical assistance money is spent in youth organizations. It is natural to think of quality in terms of organizations (e.g. a particular organization has a level of quality). But the data shows otherwise: quality varies greatly within the organization. In order to improve quality, it is therefore essential to improve the interaction and learning environment experienced by youth, which is best accomplished by improving youth worker competencies.

(b) Items about higher order skills (interaction and engagement) associate

more strongly with positive youth reports than other items (such as having to do with health and safety).

This finding helped drive the creation of the Pyramid of Program Quality, allowing the Youth PQA to provide a map to help programs attain higher levels of quality. It provides further information for youth program investments, and suggests that for an organization interested in quality, considerable portions of their resources should be invested in improving higher order experiences (e.g. interaction and engagement).

(c) The most significant organization items involve sharing control with youth and staff.

"Participatory policies and procedures" measure whether and how adults and youth participate in the decision-making and day-to-day operation of a youth program. A youth organization has the opportunity to use the organization itself as a learning experience. In organizations that do this, youth run a leadership board or council, help interview and hire staff, and get involved in setting the program content. When asked, youth said that when they attended these organizations they were interested and challenged, and they experienced growth as a result of the experience.

Additionally, if the staff meets regularly, three things are likely to happen: they build camaraderie, they discuss important issues related to youth, and they make decisions together -- all of which involve participation.

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### **3. Australia: Siblings' bad habits brush off**

*University of Queensland, January 2006*

Brothers and sisters are more powerful role models than friends or parents when it comes to teenage drinking and smoking, research shows. Researchers from the University of Queensland and University of Washington have proved that tobacco and alcohol use by older siblings increases the odds of similar behaviour from younger siblings by three to five times.

University of Washington Sociologist, Dr Abby Fagan, studied the contributions and influence of parents, siblings and peers on teen drug use. Dr Fagan used data from 1,370 Brisbane teenagers, who have been part of one of the world's longest running health studies -- the Mater-University of Queensland Study of Pregnancy. The teenagers were interviewed between 1995 and 1997 at 14 years old and were asked about how often they drank and smoked and also about their family relationships.

-- On average, 13 percent of younger siblings reported smoking and 36 percent reported drinking, but rates increased when older siblings also reported substance use.

-- About 10 percent of younger siblings with non-smoking older siblings used tobacco, compared to 40 percent of those whose older siblings smoked.

-- Likewise, younger sibling alcohol use increased from 25 to 53 percent when older siblings reported drinking.

"The results underscore the need to include siblings, or at least address issues relating to sibling relationships and influences, in prevention efforts," Dr Fagan wrote in her study, published in the latest *American Journal of Drug Issues*.

"Currently, most tobacco and alcohol prevention programs target individuals for change or are aimed at improving parent-child communication and interactions. If siblings are more powerful role models than parents, however, sibling and their potential influences on each other should be a primary focus of intervention."

Maternal depression also had a significant effect on adolescent substance use.

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#### **4. Australia: Australian kids 'lose' one billion exercise hours**

*Queensland University of Technology, January 2006*

Grab a frisbee and 'move it' because now is a good time to get the kids 'up and at 'em' to compensate for hundreds of 'lost' physical activity hours during the new school year, Queensland University of Technology researchers say.

Dr Ken Edwards and Dr Craig Daly of QUT's School of Human Movement Studies have estimated that, compared with their mid 1970s counterparts, today's school leaver has missed out on 5,000 hours of physical activity at the end of 12 years' schooling. The researchers, whose calculations were based on similar research in overseas countries, presented their findings at the World Summit on Physical Education in Switzerland. They said Australia's 3.5 million school aged children 'lost' 1,050 million physical activity hours in 2005.

"The typical primary school child spends about 300 fewer hours being physically active and it gets worse in high school where up to 600 hours a year are lost," Dr Edwards said.

The findings were important in the light of the rise in childhood obesity and lost exercise could be part of the problem along with 'computer lifestyles', safety concerns and inappropriate food choices.

"The loss of opportunities for getting physical occurred when about 30 hours a year of formal physical education and sport was deleted from the primary school curriculum," Dr Edwards said.

"And traditional schoolyard play and sports practice before and after school and lunch time, as well as organised weekend activities, have disappeared. Many children are driven to school because of security fears, and the average school now has one bike rack where once there were dozens, which means young Australians now have to find 45 minutes a day to do a mix of mild, moderate and vigorous physical activity."

Dr Edwards said further problems were that students were not developing vital coordination skills nor positive attitudes to physical activity and the basic information and insights that would allow them to make diet and other lifestyle decisions in the future.

Dr Edwards and Dr Daly said insurance issues and concern about competitiveness could be behind many schools not allowing students to go to school early to play, and restricting play areas and types of activities. Physical activity was once compulsory in high schools but now many schools and parents saw it as optional and traded physical education for extra academic classes.

"Despite a flurry of interest by governments in childhood obesity and exercise levels, nothing has been done to increase the level of school-related physical activity."

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#### **5. China: Young Chinese Prefer 'Lease' to 'Purchase'**

*Xinhua, January 2006*

More and more young Chinese people are choosing to lease houses and cars instead of purchasing, as they opt for a more flexible life without financial burdens. As China Youth Daily observed, attitudes are changing. In contrast to their ancestors who

believed that one should live in a house of his or her own, young people prefer an easy life without the complications of a mortgage.

A recent survey showed in Shanghai that more than 1.5 million people are living in leased houses, of which 20 percent are white-collar workers with a monthly income of 5,000 yuan (625 U.S. dollars) or more.

"It's not because we can't afford the housing, but I hate my life being affected by loan," said Xu Yun, staff with a Shanghai tourism company. In Xu's eyes, people who buy a house and a car are forced to calculate their earnings and their expenditure day by day, which deprives them of joy and fun in their life.

A lady who only gave her surname as Wu to China Youth Daily, said she and her husband, despite amassing a deposit sufficient for the down payment for an apartment, choose to stay with her parents-in-law for several years to come.

"I am waiting for the fall in house prices," said Wu, adding that she is not willing to be driven and harnessed by the loan.

The case is similar for a lady whose surname is Zhao, who works at a financial consulting company and also has a part-time job as a cosmetics consultant. The company lays on a shuttle bus for its staff, so Zhao only needs a vehicle for her part-time job. She rents a car for her part-time job with a monthly expenditure of 600 yuan (around 75 U.S. dollars), which is far less than the expenditure for owning a car.

"Renting a car has spared my money and has taken a load off my mind," Zhao said.

In recent years, Chinese people have put more emphasis on the taste and quality of life, and have spent more on house furnishings. Bi Keren, a teacher in Qinghua University, bought two plants of azalea worth 2,000 yuan (250 dollars). However, the flowers died only one month later due to her lack of experience. To embrace the Spring Festival which will fall on Jan. 29 this year, Bi rented two plants of azalea costing no more than 200 yuan (25 dollars) for two months. The florist also offers a pruning service.

Since there are strict limits on pet-feeding in big cities like Beijing and Shanghai, pet lovers have also turned to renting a pet for 10 to 20 yuan (1.25 to 2.5 U.S. dollars) for a happy weekend.

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