Exploring the decline in wellbeing for Australian girls

August 2021

Contents

Foreword

All of Western Australia's 610,000 children and young people deserve to be safe, respected and supported, however there appears to be a wellbeing gender gap.

One of the standout results in WA's inaugural Speaking Out Survey of 2019 was that female young people consistently rated their wellbeing below that of their male peers, reporting higher rates of stress, low life satisfaction and not feeling happy about themselves.

This alarming finding warranted further investigation and, having drawn it to the attention of the WA Government, I sought to contextualise our data by seeking to compare what WA young people have said with evidence from research both nationally and internationally into gender and wellbeing.

While the focus of this report is on female young people's negative experiences and outcomes, it should be noted that this is not the case for all, with many children and young people reporting positive wellbeing outcomes. However, the evidence is clear that gender is a significant factor in the wellbeing outcomes for our children and young people.

The decline in mental health and wellbeing for female children and young people starts to show around puberty and at a time of transition in their education, when they move between primary to secondary school, although the foundations for this may have been laid years earlier.

Female students often perform better academically at school than their male peers, and yet fewer of them report a sense of belonging there. At home, fewer female young people feel safe, however are more likely to highlight the importance of close and supportive family relationships.

The decline in wellbeing for female children and young people goes well beyond a child's home or school environment and must be considered in the broader context of our modern society.

While there has been progress in improving gender equity in Australia over the last 50 years, there are still many areas of everyday life where inequality remains for Australian girls and women, including gender stereotypes, domestic violence, income parity, employment and education opportunities.

Investment has been targeted at reducing gendered inequality (particularly violence against women and girls), however the hoped-for cultural change appears to be slow.

The solutions are not only in practical activities, such as increased services for mental health and programs to improve engagement at school, but are reliant on decreasing gender inequality and gendered attitudes in society.

This is not simply a problem for government alone to address. The responsibility lies with us all: government, the non-government sector and the community as a whole must work together to address the clear concerns expressed by many WA female children and young people.

This cannot be done without first listening to female children and young people, hearing their concerns and challenging how societal norms are influencing the wellbeing of our next generation.

It is long past time for change - we all need to listen to what children and young people are telling us and be prepared to act on their views.

Colin Pettit
Commissioner for Children and Young People

Australian female young people are being hospitalised as a result of intentional self-harm at a significantly **higher rate than male young people**, and this rate is increasing.

15 per cent of Australian girls aged 14 to 15 years self-harmed in 2016, compared to 4 per cent of boys the same age.

15%

4%
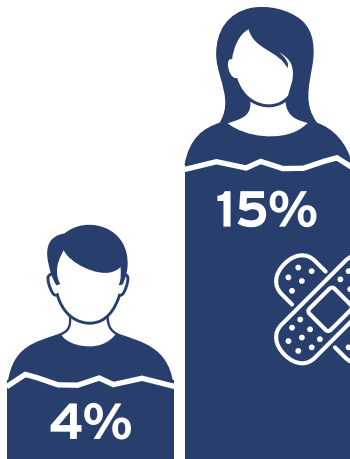
More female students than male students experience stress and anxiety at, or about, school and schoolwork.

Over one-third (36.8%) of sexually active female Australian students have had unwanted sex.
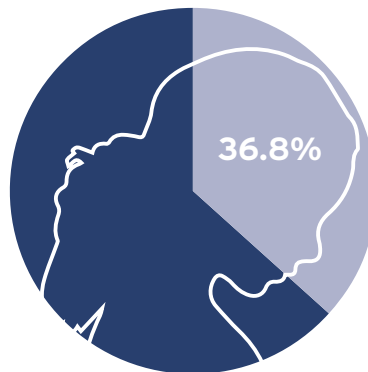
36.8%

Throughout childhood and into adolescence **on average girls do less physical activity than boys** and this gender gap increases throughout adolescence.

Across all forms of media (including movies, television, music videos and social media) girls and women continue to be presented in a way that prioritises their appearance over their abilities and objectifies and sexualises women's bodies.

Female young people are less likely than their male peers to feel safe at home, at school, in their community or on public transport.

Executive summary

A key finding of the Western Australian (WA) Commissioner for Children and Young People's (the Commissioner's) inaugural [Speaking Out Survey](#) conducted in 2019 was that female young people in WA rated their wellbeing less favourably than male young people. These findings were across multiple areas of wellbeing including mental health, self-perception, relationships, personal safety and experiences of independence.

In this large-scale survey, female young people were:

- twice as likely as male young people to report not feeling happy with themselves, feel unable to achieve their goals or to deal with things that happen in their life
- much less likely than male young people to feel like they belonged at their school
- significantly less likely than male young people to feel safe in their neighbourhood and on public transport.[1]

This is consistent with international data and research that shows adolescent female young people report poorer mental health and wellbeing than their male peers.[2,3,4] Further, overseas and Australian data shows that there has been a decline in adolescent emotional wellbeing in the past decade and that this gender gap is widening.[5,6,7,8] However, there is less agreement on why this is the case.

This paper applies the World Health Organisations definition of adolescent wellbeing: "Adolescents have the support, confidence, and resources to thrive in contexts of secure and healthy relationships, realising their full potential and rights."[9] This definition is broad and includes mental health, physical health, safety, support and engagement in the community, access to opportunities and equality.

The decline in female young people's wellbeing has been reported across these multiple areas, however literature that draws the research and data together and highlights and explores intersections between these disciplines is limited.

The purpose of this report is to outline current evidence regarding female young people's wellbeing to better understand the reasons for the wellbeing gap between male and female young people. The findings will be used to develop a program of work within the Commissioner's office, including detailed analysis of the 2021 Speaking Out Survey data and further consultations with children and young people to explore identified gaps in knowledge.

Further, this report builds the case for urgent action across government and non-government sectors and the community more broadly to focus on improving girls' wellbeing outcomes.

Approach

International and Australian literature was examined to identify current evidence of factors impacting female young people's wellbeing.

Executive summary

When reviewing the 2019 Speaking Out Survey (SOS19) results and other literature, the following broad questions were raised:

- Why are female young people more likely to experience anxiety and depression than male young people?
- Why are female young people more likely than male young people to experience a significant decline in their wellbeing during the transition to high school and/or the onset of puberty?
- Why has the gender gap in wellbeing increased substantially from 2012?

This report has used these questions as a starting point and expands to encompass the various wellbeing areas that align with the Commissioner's Wellbeing Monitoring Framework.

This paper considers a broad range of research into female young people's wellbeing, however, does not specifically explore the many inequalities and challenges faced by female children and young people who are Aboriginal, culturally and linguistically diverse (CALD), have disability and/ or those who identify as lesbian, gay, bisexual, transgender and/or intersex (LGBTI). These children and young people often experience additional challenges and further research considering their wellbeing outcomes is needed.

This review also does not directly consider male young people's wellbeing. This is not because male young people's wellbeing is not important and, in many cases, also declining, but because the purpose of this review is to explore female young people's wellbeing.

The research covers the following:

- mental health
- general health
- engagement and support in the school environment
- relationships, connection to community and support
- equity in everyday life
- social media, identity and body image
- sexual health and safe, respectful relationships
- feeling and being safe.

These topics overlap and intersect at various points, this report aims to highlight these intersections.

Barriers to female young people's wellbeing

The literature reviewed shows that female young people are significantly more likely to have poorer mental health than their male peers, and in recent years this gender gap is widening.

A large amount of research explores the disparity in wellbeing outcomes for male and female young people, however, each area of research is relatively discrete with less consideration of the intersecting impacts of various factors.

This report highlights a number of key barriers to wellbeing for female young people in Australia.

Gender stereotypes continue to influence the way girls are treated in everyday life and the way they see themselves. These include prioritising girls' appearance over their ability, sexualisation of girls' bodies and the ongoing prevalence of sexual harassment, sexual violence and intimate partner violence.

Research suggests that the increasing use of social media amplifies these gender-based norms, resulting in girls having a greater likelihood of anxiety about their appearance, feelings of shame, self-surveillance and disordered eating behaviours.

These gender-based factors have flow on effects to low self-esteem, low engagement in physical activity, reduced feelings of safety and independence, and decreased sense of belonging at school and in their community.

Self-esteem has been shown to be an important protective factor for mental health and wellbeing. Research across multiple areas finds that girls generally have lower self-esteem than boys and that various social processes, particularly a focus on girls' appearance, negatively impacts their self-conception. Research further shows that adolescents with lower self-esteem are less likely to do physical activity, more likely to experience health complaints and negative emotional responses to stress, and more likely to have feelings of anxiety and depression.

At the same time, a majority of girls are regularly experiencing period pain and other menstrual and health symptoms which impact their daily activities, for which they often do not seek help.

Girls are often held more responsible than boys for household chores, doing well at school, managing their online reputation, managing pregnancy and sexual violence risks and, as they get older, managing their expectations regarding having a career and a family. Accordingly, research suggests that many girls feel and are expected to act responsibly, while many of their male peers are more likely to be relaxed and happy to not take responsibility or are given greater latitude when they make transgressions (e.g. 'boys will be boys').

Many female children and young people are not always safe at school, in the community or at home and they do not always feel safe in these environments. Girls regularly experience street and sexual harassment, often experience sexualised bullying, are coerced into sexual activity they are not sure about, and many are sexually assaulted. Evidence to date suggests that the proliferation of pornography may increase the risk of these experiences.

Girls also often feel ashamed if an image or knowledge of their sexual activity becomes public without their consent.

Girls and young women have internalised the belief that it is their responsibility to manage their safety in public. For many, this increases their anxiety and stress and reduces their independence.

Finally, girls are more likely to experience internalising symptoms (anxiety and mood related disorders such as depression), while boys are more likely to experience externalising symptoms (behavioural issues, drug and alcohol issues). This results in girls' symptoms not always being visible to parents, teachers and other adults – who can think girls are doing well and focus on boys' behaviour. In addition, some of the externalising symptoms of boys (e.g. aggression and violence) negatively impact girls' safety and wellbeing.

Key findings

This section outlines the key findings from the literature detailed in the chapters of this report.

Data in this section has been specifically referenced, while sources for other key findings are detailed in the relevant chapters.

Mental health

- There has been a significant decline in adolescent emotional wellbeing since 2012, particularly among girls.
- Female young people are significantly more likely than their male peers to have anxiety and depression, to have lower self-esteem and, some evidence suggests, lower resilience.
- In 2015, 19.6 per cent of Australian female young people aged 16 to 17 years met the criteria for a major depressive disorder (compared to 8.2% of male young people of the same age).[10]
- 15 per cent of Australian girls aged 14 to 15 years self-harmed in 2016, compared to 4.0 per cent of boys the same age.[11]
- Australian female young people are being hospitalised as a result of intentional self-harm at a significantly higher rate than male young people, and this rate is increasing.[12]
- While male young people are more likely to die by suicide, the suicide rate for Australian female young people aged 15 to 19 years has almost doubled since 2010.[13]

General health

- From 11 years of age girls begin to have lower health-related quality of life than boys with greater experiences of headaches, stress and tiredness.
- Girls who have started having periods have a high likelihood to regularly experience period pain and other symptoms which impact their daily activities.
- Throughout childhood and into adolescence, on average, girls do less physical activity than boys and this gender gap increases throughout adolescence.
- Girls are less likely than boys to be overweight or obese but are more likely to be dissatisfied with their body. Girls are also more likely to be worried about their weight and to be trying to manage their weight with dieting, meal skipping or other weight control behaviours.
- Girls are more likely to feel less supported to continue to do physical activity than boys, they feel more self-conscious about physical activity and they often feel that it does not align with their developing identity.

Engagement and support in the school environment

- Girls are generally more engaged with school and do better academically than boys. At the same time, girls' sense of belonging at school has decreased considerably since 2003 and girls are now much less likely than boys to feel like they belong at school.
- More female students than male students experience stress and anxiety at, or about, school and schoolwork.
- Qualitative research also suggests that female young people feel more pressure to do well, even as they realise that their male peers are often more relaxed and confident.
- There is some evidence to suggest that girls feel they have to 'prove themselves', whereas boys are confident they will do okay without having to try too hard.

Relationships, connection to community and support

- Evidence suggests that female young people perceive a greater decline in the quality of their relationship with their parents than male young people as they transition from primary school to high school (or through puberty).
- Female young people generally have intimate and close friendships which provide them with critical support, however due to the emotional intensity of these friendships they are also more vulnerable to relationship breakdowns, increasing the likelihood of distress.
- Supportive relationships with other adults (particularly teachers) appear to be more important for girls' than boys' mental health and wellbeing.
- There is some evidence to suggest that female young people may feel less connected to their community (lower community belonging) than their male peers.
- Female young people are more likely to seek support than male young people, however they are also more likely to ruminate on problems, which has been shown to increase depressive symptoms.

Equity in everyday life

- Across all forms of media (including movies, television, music videos and social media) girls and women continue to be presented in a way that prioritises their appearance over their abilities and objectifies and sexualises women's bodies.
- Evidence shows a direct relationship between being exposed to media that objectifies girls and women and the internalising of beauty ideals, which in turn can lead to low self-esteem, self-objectification, body surveillance, depression and eating disorders.
- A significant proportion of male young people continue to hold gender-stereotypical views of women's and men's roles in society.
- Many girls continue to experience everyday sexism through the chores they are assigned at home, their parents' rules regarding going out at night, expectations about doing maths or science and being sexually harassed on the street.
- Girls often state that they believe gender equality has been achieved and their gender will not make a difference to their life choices – yet when asked specific questions about being treated equally they provide many examples of inequality and sexism.

Social media, identity and body image

- Children and young people today are online 'almost constantly'[14] which is a significant change from 10 years ago.
- Female young people appear to be more negatively affected by their technology use than male young people – including stronger associations with negative mental health outcomes such as anxiety and depression.
- Female young people are more likely than male young people to use social media, particularly imaged-based applications like Instagram and Snapchat – which have been associated with worse mental health outcomes.
- Girls feel particular pressure to focus on their appearance and gain 'likes' on social media to show their popularity.

- Girls' time spent on the internet is related to internalisation of the thin-ideal and body surveillance, which are associated with body shame and disordered eating practices.
- Young people commonly engage in sexting as part of being flirtatious. This is seen as a normal component of intimate relationships. However, female young people are often under pressure to provide sexual images, and male young people are under pressure to 'share' images they receive to gain popularity amongst their peers.
- If an image is shared non-consensually, female young people hold the reputation risk and are blamed and shamed.

Sexual health and safe, respectful relationships

- Many male and female young people do not appear to have a good understanding of enthusiastic consent in intimate relationships.
- Over one-third (36.8%) of sexually active female Australian students have had unwanted sex.[15]
- The sexual double standard is still prevalent: male young people are free to have multiple sexual partners without disapproval, while female young people with multiple sexual partners can be labelled as promiscuous and shamed. This continues to restrict girls' ability to feel comfortable being sexual.
- Girls continue to be deemed more at harm from sexual activity (both physically and morally) while also being held responsible for staying safe, practising safe sex and not getting pregnant.
- Viewing pornography is becoming increasingly common for children and young people, and some evidence suggests this contributes to boys and young men engaging in coercive or aggressive sexual behaviours and holding negative views of gender equality.

Feeling and being safe

- Female young people are less likely than their male peers to feel safe at home, at school, in their community or on public transport.
- Female young people are more likely than male young people to be sexually assaulted by a relative or family member, experience intimate partner violence, sexual harassment and sexual assault.
- Girls are more likely than boys to be cyberbullied, and when they are bullied it is often about their appearance and highly sexualised.
- Experiences of harassment, assault and violence and the fear of these experiences impacts female children and young people's daily activities, reduces their independence and increases feelings of anxiety.
- Many girls and young women have internalised the belief that it is their responsibility to manage their safety in public.

A way forward

The findings outlined in this paper are clear: female children and young people have significantly lower wellbeing outcomes than their male peers across a broad range of indicators. Critically, the gender wellbeing gap has increased in the last decade.

In 2021, public attention and debate on women's experiences of sexual abuse, harassment and assault has raised a range of issues around gender equality for girls and women in Australian society. This report further highlights that many female children and young people experience this inequality as a normal aspect of their everyday lives, and it has long-lasting impacts on their self-esteem, mental health and overall wellbeing.

Urgent action is required across all government and non-government sectors working to support children and young people. It is hoped that this report will be used to inform this action – to implement new, or change existing, policy, programs and services to improve girls' wellbeing outcomes.

The solutions are not only practical activities, such as increased services for mental health, programs to improve girls' belonging at school or more campaigns to engage girls in physical activity, but it is vital we also decrease gender inequality and gendered attitudes in Australian society.

While significant investment has been targeted towards reducing violence towards women and girls, it is evident that the required cultural shift is either not happening or not happening quickly enough. Young Australians do not hold more positive attitudes to gender equality than people aged 25 to 64 years, and a significant minority of young men hold more retrograde views than the general population, particularly in relation to intimate relationships. These views and related behaviours impact female children and young people's life experiences.

Although complex, further research is required to determine which programs and interventions actually improve gender equality and change attitudes.[16]

More Australian qualitative research with both female and male children and young people is essential. It is critical that policy and practice is informed by children and young people's views and experiences.

The Commissioner recently completed the fieldwork of the second Speaking Out Survey (SOS21) which surveyed more than 15,000 children and young people around WA about their health and wellbeing. The survey provides a rich and unique source of quantitative and qualitative data on WA children and young people's wellbeing. The Commissioner's office will use the findings of this literature review as the basis for in-depth analysis of the SOS21 quantitative and qualitative data.

The Commissioner will continue to work with government agencies, business and community leaders and organisations to advance the conversation on what must happen to address the complex causes of female young people's wellbeing disadvantage. To inform this process, the Commissioner is developing a program of work to ensure children and young people's opinions and experiences are part of this discussion.

Executive summary

Notes

1   Commissioner for Children and Young People WA 2020, *Data Insights: Female students' views on their wellbeing*, Commissioner for Children and Young People WA.

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8   Droogenbroeck F 2018, Gender differences in mental health problems among adolescents and the role of social support: Results from the Belgian health interview surveys 2008 and 2013, *BMC Psychiatry*, Vol 18, No 1.

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10   Lawrence D et al 2015, *The Mental Health of Children and Adolescents: Report on the second Australian child and adolescent survey of mental health and wellbeing*, Department of Health, Australian Government, p. 99.

11   Daraganova G 2017, Self-harm and suicidal behaviour of young people aged 14–15 years old, in *LSAC Annual Statistical Report 2016*, Australian Institute of Family Studies.

12   Australian Institute of Health and Welfare (AIHW) 2019, *Trends in hospitalised injury, Australia 2007–08 to 2016–17*, Table S2: Age-specific rates of intentional self-harm hospitalised injury, by age, and sex, Australia, 2007–08 to 2016–17, AIHW.

13   Australian Bureau of Statistics 2019, Causes of Death, Australia: 2019, Table 11.2 Intentional self-harm, Age-specific death rates, 5 year age groups by sex, 2010-2019, ABS.

14   It should be noted that in 2020, the WA Education Department implemented a no mobile phones in schools policy, which means that children and young people may have more hours where they are not connected. Research into the impact of this will be critical.

15   Fisher CM et al 2019, *National Survey of Australian Secondary Students and Sexual Health 2018*, ARCSHS Monograph Series No. 113, Australian Research Centre in Sex, Health & Society, La Trobe University, p. 39.

16   Jewkes R et al 2014, From Work with Men and Boys to Changes of Social Norms and Reduction of Inequities in Gender Relations: A Conceptual Shift in Prevention of Violence Against Women and Girls, *Lancet*, Vol 385.

Chapter 1
Introduction and background

In 2019, the Western Australian Commissioner for Children and Young People (the Commissioner) conducted the Speaking Out Survey, which sought the views of a broadly representative sample of 4,912 Year 4 to Year 12 students on factors influencing their wellbeing. A key finding of this survey was that female young people rated their wellbeing much less favourably than male students across almost all areas of wellbeing.

In recent decades, there has been considerable research and policy focus on gender inequality and disadvantage, and yet the Speaking Out Survey and other data and research suggests that many female young people continue to have more negative life experiences, lower self-perception and worse wellbeing outcomes than their male counterparts.

While there is a substantial body of evidence highlighting that many female young people struggle with poorer mental health than their male peers, there is less consensus on the factors that influence this.

Some broad questions that were raised when reviewing the 2019 Speaking Out Survey (SOS19) results and other literature were:

- Why are female young people more likely to experience anxiety and depression than male young people?
- Why are female young people more likely than male young people to experience a significant decline in their wellbeing during the transition to high school and/or the onset of puberty?
- Why has the gender gap in wellbeing increased substantially from 2012?

Current hypotheses include the increasingly pervasive impact of social media, particularly related to young women's body image and self-perception, the ongoing influence of sexism in society and the concerns around feeling and being safe from harassment, sexual assault and domestic violence.[1] In reality, each of these factors will be implicated in the prevalence of lower wellbeing for female young people.

Evidence shows that children and young people who experience anxiety and other mental health conditions in childhood and adolescence are likely to have mental illness in adulthood.[2] Estimates suggest that approximately three-quarters of adult mental illnesses were diagnosed in adolescence and one-half were diagnosed before 15 years of age.[3] Furthermore, Australian longitudinal research has determined that a mother who had mental health problems in adolescence is more likely to have an infant with behavioural problems.[4]

Improving female young people's wellbeing should be a focus for government, the non-government sector and the community more broadly.

This report synthesises current evidence regarding female young people's wellbeing across multiple domains and seeks to identify intersections and gaps in knowledge. It also highlights qualitative research exploring these topics with female young people – that is, what is their experience and how do they explain their wellbeing.

The findings will be used by the Commissioner to initiate a program of work to explore identified gaps in knowledge through in-depth analysis of the 2021 Speaking Out Survey data and further consultations with children and young people.

It is critical that children and young people's voices are central in developing the solutions to this complex issue.

Why focus on female young people's wellbeing?

In the 2019 Speaking Out Survey, female young people generally rated their wellbeing less favourably than male students, particularly in areas relating to mental health, self-perception, conflict, relationships, personal safety and independence.[5]

This is consistent with international data and research that shows adolescent female young people have lower mental health and wellbeing than their male peers.[6,7,8,9] Overseas and Australian data also shows that there has been a decline in adolescent emotional wellbeing over recent decades, particularly among girls.[10,11,12,13] Further, since 2012 there has been a sustained rise in the prevalence of mental health issues for young people aged 12 to 17 years, with a greater increase for girls.[14,15,16]

The most comprehensive analysis of the mental health of children and young people in Australia was the 2015 Report on the Second Australian Child and Adolescent Survey of Mental Health and Wellbeing (Young Minds Matter) conducted by the Telethon Kids Institute for the Australian Government. Based on the young people's responses, female young people aged 16 to 17 years were more than twice as likely to have a major depressive disorder as male young people (19.6% compared to 8.2%).[17]

Research suggests that self-harm behaviour is also increasing for girls. Australian female young people are hospitalised as a result of intentional self-harm at a significantly higher rate than male young people, and this rate is increasing.[18] A study in the United Kingdom (UK) reported a significant increase (68%) in rates of self-harm among girls aged 13 to 16 years, from 2011 to 2014.[19] Data from the US shows that the suicide rate for girls aged 10 to 14 years has at least tripled from 1999 to 2017.[20]

Australian data from the Longitudinal Survey of Australian Children (LSAC) estimate that 15.0 per cent of girls aged 14 to 15 years engaged in self-harm in the last 12 months, compared to 4.0 per cent of boys the same age.[21]

There is also evidence to suggest female young people have poorer outcomes across a number of areas:

- Engagement at school, including having a sense of belonging and feeling supported and stress regarding academic performance.[22,23]
- Supportive relationships and connection to community, including feelings about family conflict.[24,25]
- Equity in everyday life, including being treated equally and receiving the same opportunities.[26,27]
- Physical health, including physical activity, eating behaviours and sleep.[28,29,30]
- Identity development and body image, including online activities, experiences of sexualisation and objectification and weight perceptions.[31,32]
- Social media and online safety, including cyberbullying, sexualisation and objectification and self-presentation.[33,34]
- Sexual health and safety, including understandings of healthy relationships, consent and intimate partner violence.[35,36,37]

Literature review approach

This report is in the form of a scoping review, which aims to develop an overview of a body of literature (female young people's wellbeing) and identify knowledge gaps.[38]

To provide some structure to the literature search the following key words/topics were the initial focus:

- Female young people/adolescent/girls, wellbeing/mental health
- Young people/adolescent, wellbeing/mental health, gender.

These key words were crossed with many other terms, including supportive relationships, safety, violence, family, school engagement, belonging, single-sex education, academic outcomes, employment/career, bullying, sport, physical activity, social media, body image, sexual relationships, pornography, self-esteem, mental health, gender equality, sexism.

The following was taken into account:

- Recent literature was prioritised – generally limited to research from 2010.
- reference lists of selected articles/documents were reviewed to identify additional sources.
- It is known that female young people's wellbeing is influenced by culture, social norms and media, therefore research from Australia and other developed western nations with similar cultural backgrounds was prioritised.
- Primary qualitative research which asked female young people about their wellbeing was specifically searched for.
- The search scope included grey literature (e.g. publications from Mission Australia, Australian Institute of Family Studies etc.).
- Only research published in English was considered.

The primary search tools used were Google and Google Scholar which have been found to be highly effective search engines that identify most research available.[39]

Terminology and limitations of this review

Terminology for male and female children and young people varies across different academic fields, including female and male children and young people, girls and boys, female and male adolescents and young women and men. Throughout this report each of these terms is used in different contexts, often reflecting the literature being referenced.

The focus of this document is the reported decline in female young people's wellbeing across multiple domains. Therefore, this document starts from a deficit position where attention is given to female young people's negative experiences and outcomes, rather than their strengths and positive experiences. Yet, many female young people are doing well and are not experiencing poorer mental health and lower wellbeing outcomes than their male peers. Similarly, not all male young people are experiencing better mental health or wellbeing than their female peers.

Nevertheless, this review is in response to the voices of female young people reported through population-based data, which clearly show that there is an issue for a significant proportion of (although not all) female children and young people. Protective factors and strengths are considered where appropriate, however, in the main this review is necessarily focused on the negative.

This review also does not directly consider male young people's wellbeing. This is not because male young people's wellbeing is not important and, in many cases, also declining, but because the purpose of this review is to explore female young people's wellbeing.

There is some evidence to suggest that the data generally collected to report on mental health may not always reflect the experiences of boys and men.[40] In particular, it is recognised that women are more likely to experience internalising symptoms (anxiety, depression), while men are more likely to exhibit externalising behaviours (aggression, violence, substance misuse).[41,42,43] Yet, surveys on mental health are often focused on internalising symptoms and do not always ask questions about aggression, feelings of frustration or anger. Therefore, some theorists argue that mental health concerns in boys and men are not being identified, as their likely symptoms are not being measured.[44,45]

A key disadvantage of not considering data on male young people's wellbeing is that there is likely to be a relationship between any increase in male externalising behaviours and female experiences. That is, if externalising behaviours (aggression, violence, anger) are increasing in boys/young men then this will likely have a negative impact on many girls/young women's wellbeing through an increased experience of male aggression and violence. Further research on male young people's views and experiences would be valuable.

This paper considers a broad range of research into female young people's wellbeing and cannot address all the issues related to specific cohorts of female young people.

There is substantial evidence that shows that LGBTI young people can experience poorer mental health than their heterosexual/cis peers.[46,47] However, because the focus of this paper is (cis) female experiences often in comparison to (cis) male, much of the research cited in this paper is based on a heteronormative/cis perspective.

It is recognised that for many LGBTI children and young people the experiences outlined in this research will be similar or worse. The wellbeing of LGBTI children and young people is important and specific research in this area is needed.

This report also does not explicitly consider trans female-identifying young people. Evidence clearly shows that trans young people are likely to experience significant issues including bullying, sexual harassment, mental health issues and risk of suicide.[48,49] The language used in this report is girls, women, female young people, yet does not seek to exclude or dismiss the views and experiences of trans children and young people.

This paper does not explicitly consider female Aboriginal children and young people's wellbeing, although this is a topic that requires similar analysis. The Commissioner's SOS19 data highlighted that while Aboriginal children and young people were often faring less well than non-Aboriginal children and young people in areas such as material basics, family stability and education expectations, they generally reported high self-esteem and feelings of belonging. In addition, Aboriginal female young people reported more positive mental health and self-esteem compared to non-Aboriginal female young people. Further, female Aboriginal students did not report worrying as much as non-Aboriginal female students about their weight or how they looked and were more likely to feel good and happy about themselves.[50]

Finally, the wellbeing of female children and young people who are culturally and linguistically diverse or have disability are not specifically addressed in this report. Again, these children and young people often experience additional challenges and further research considering their wellbeing outcomes is needed.

Chapter 1 – Introduction and background

Notes

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Chapter 2
Mental health

- There has been a substantial decline in adolescent emotional wellbeing since 2012, particularly among girls.

- Female young people are significantly more likely than male young people to have anxiety and depression, to have lower self-esteem and some evidence suggests, lower resilience.

- In 2015, 19.6 per cent of Australian female young people aged 16 to 17 years met the criteria for a major depressive disorder (compared to 8.2% of male young people).[1]

- 15 per cent of Australian girls aged 14 to 15 years self-harmed in 2016, compared to 4 per cent of boys the same age.[2]

- Australian female young people are being hospitalised as a result of intentional self-harm at a significantly higher rate than male young people, and this rate is increasing.[3]

- The suicide rate for Australian female young people aged 15 to 19 years has almost doubled since 2010.[4]

Young people moving from childhood into adolescence often face mental health challenges that stem from the physical, behavioural, psychological and cognitive changes they are experiencing. Furthermore, there are significant social and environmental changes that occur during this period, including the transition from primary school to high school and the change in family and community responses to young people as teenagers as opposed to children.[5,6]

Positive mental health provides a critical foundation for young people to realise their potential, cope with stress, develop and maintain meaningful relationships with others and participate in community life.

In recent decades, data and research shows that female young people are significantly more likely to have poorer mental health than their male peers and that this gender gap is increasing. Yet, there is less agreement or robust evidence on why this is the case.

Research and data in Australia and internationally shows female young people have poorer mental health and wellbeing than their male peers.[7,8,9]

In the Commissioner's 2019 Speaking Out Survey, more female than male high school students in WA reported low life satisfaction (female: 17%, male: 11%) and feeling sad, blue or depressed for more than two weeks in the last year (female: 70%, male: 50%). Female students were also twice as likely to report not feeling happy with themselves (female: 38%, male: 17%), feel they are not able to achieve their goals (female: 14%, male: 7%) or deal with things that happen in their life (female: 12%, male: 5%).[10]

The 2015 Young Minds Matter survey used a number of diagnostic modules from the *Diagnostic Interview Schedule for Children Version IV (DISC-IV)*[11] to assess mental disorders in Australian

children and adolescents. During the survey, parents and carers completed certain modules of the DISC-IV questionnaire with a trained interviewer, and young people aged 11 to 17 years also completed a questionnaire which included the DISC-IV major depressive disorder module.

Based on parent/carer responses, the survey estimated the 12-month prevalence of mental disorders among Australian 12 to 17 year-olds for anxiety (female: 7.7%, male: 6.3%) and major depressive disorders (female: 5.8%, male: 4.3%). Therefore, parent and carer responses estimated that a greater proportion of female 12 to 17 year-olds had anxiety or major depressive disorder than their male peers, although a much lower proportion than suggested by the Commissioner's Speaking Out Survey.

In contrast, based on the young people's responses to the DISC-IV questionnaire, female young people aged 16 to 17 years were more than twice as likely to have a major depressive disorder as male young people (19.6% compared to 8.2%).[12] Anxiety-related questions were not asked of the young people in the Young Minds Matter survey, therefore this comparison is not available.

Prevalence of major depressive disorder for Australian young people: comparison of parent/carer responses and young person responses by gender and age group, 2015

	Parent/carer responses	Young person responses	
	12-17 years	**11-15 years**	**16-17years**
Male	4.3%	3.1%	8.2%
Female	5.8%	7.2%	19.6%

Source: Lawrence D et al 2015, *The Mental Health of Children and Adolescents: Report on the second Australian child and adolescent survey of mental health and wellbeing*

This discrepancy between parent/carer and young people's responses critically highlights that parents and carers may not always know how their children are feeling, particularly female children/young people who are more likely to be experiencing less visible internalising problems.

This data is supported by international evidence that shows that female young people have lower mental health and wellbeing than their male peers.

Results from the New Zealand (NZ) Youth19 Rangatahi Smart Survey (Youth19 survey) conducted with a large sample of 7,721 Year 9 to Year 13 students in 2019[13] found that female high school students were much more likely to have significant depressive symptoms (female: 29.0%, male: 16.5%), serious thoughts of suicide (female: 24.5%, male: 16.8%) and attempted suicide (female: 7.4%, male: 5.1%).[14]

The 2017–18 Health Behaviour in School-aged Children (HSBC) Survey in Europe and Canada across almost all countries, found that female young people at 15 years of age report poorer mental wellbeing than male young people of the same age.[15]

A recent study using multi-country data from the 2018 Programme for International Student Assessment (PISA) found that the 'gender gap in mental health in adolescence is largely ubiquitous cross-culturally'. This study also reported that higher GDP countries had worse average mental health outcomes and a larger gender gap across all mental health outcomes.[16]

Experiencing and managing stressful situations and stress is a normal part of life, however, adolescence is a particularly stressful time for a variety of reasons, including the onset of puberty and the transition to high school. While experiencing stress is normal, high levels of stress can lead to mental health problems, and existing mental health problems can heighten negative responses to stress.[17]

Female young people are more likely to feel stressed on a daily basis than male young people.[18,19]

Data from the Commissioner's SOS19 survey found that a significantly greater proportion of female Year 9 to Year 12 students than male students reported being affected by stress, with the top three stressors being school or study problems (female: 91.4% male: 77.7%), body image (female: 66.3%, male: 24.1%) and family conflict (female: 60.1% male: 31.1%).[20]

Similarly, the 2020 Mission Australia Youth Survey found that more than one-half (55.5%) of female young people (aged 15 to 19 years) reported coping with stress as a major issue of personal concern compared to one-quarter (24.8%) of male young people.[21]

Research has shown that adolescents who report higher levels of stress are more likely to report depressive and anxiety-related symptoms.[22]

Self-esteem has been shown to have a strong protective role against adverse stress and mental health outcomes.[23] Yet, research consistently shows that female young people are much more likely than male young people to have low self-esteem.[24,25]

Self-esteem is derived from self-concept, which is generally considered to have three components, personal views on one's academic ability, physical aspects (appearance and physical ability) and social aspects. These effectively can be equated to 'success, beauty and popularity'.[26] Therefore, young people who feel they 'lack competency or adequacy' in the domains that they think are important will generally have low self-esteem.[27]

Evidence shows that perceived appearance is the most critical component for children and adolescents' self-esteem.[28,29] Further, girls' self-esteem is more strongly linked to their appearance than boys – and boys are more likely to perceive their own appearance favourably.[30,31]

This is discussed in more detail in the section **Sexualisation of girls**.

Resilience is another critical component of mental health as it enables young people to cope and thrive in the face of negative events, challenges or adversity. Resilience is linked to self-esteem with research showing that high self-esteem is a predictor of higher levels of resilience.[32] Key attributes of resilience in young people include social competence, a sense of purpose or hope for the future, effective coping style, a sense of self-efficacy and positive self-regard.[33]

Analysis of data from Longitudinal Study of Australian Children (LSAC) considered the resilience of 16 to 17 year-old participants in 2016 using a scale asking 10 resilience-related questions. They found Australian female 16 to 17 year-olds report significantly lower resilience than their male peers. For example, 51.1 per cent of boys said they were not easily discouraged by failure compared to 36.8 per cent of girls. While almost 20 per cent (19.7%) of girls stated they could not usually handle unpleasant feelings, compared to 10.1 per cent of boys.[34]

Similarly, a cross-sectional sample of 1,183 Norwegian adolescents aged 13 to 18 years found that, consistent with many other studies, girls scored significantly higher on depression, anxiety, and stress levels; while boys scored significantly higher on the resilience factors of personal competence, structured style (e.g. 'I always make a plan'), and family cohesion.[35]

Self-compassion is also strongly associated with wellbeing in young people and evidence suggests that self-compassion can have a positive effect on resilience.[36,37,38] Self-compassion can be defined as being kind to yourself, recognising that negative experiences are part of being human and understanding that negative emotions will pass.[39]

A study in the United States (US) with 765 high school students (Years 7 to 12) reported that older female adolescents had the lowest level of self-compassion compared to younger female adolescents and all male adolescents. This study found that self-compassion was significantly associated with greater life satisfaction and lower levels of perceived stress among both male and female young people. Although in older female young people the association between self-compassion and lower anxiety was less strong.[40]

In summary, female young people have a greater likelihood than male young people of experiencing poorer mental health and a lower likelihood of having some key protective characteristics/beliefs such as self-esteem, resilience and self-compassion.

Mental health trends over time

Data shows that there has been a decline in adolescent emotional wellbeing over recent decades, particularly among girls.[41,42,43,44]

A 2013 systematic literature review into adolescent mental health trends over time found that the majority of studies reported an increase in internalising problems (e.g. anxiety, depression etc.) in adolescent girls, with mixed findings for boys.[45]

In Australia, the most comprehensive analysis of change over time was a comparison of the 2015 Young Minds Matter results with the 1998 National Survey of Mental Health and Wellbeing (based on parent/carer reporting not young people themselves). This comparison showed no change in depressive disorders between 1998 and 2013–14 for children aged 6 to 11 years, however showed that the prevalence of major depressive disorders for 12 to 17 year-olds increased from 2.9 per cent to 5.0 per cent.

This was disaggregated for male young people (1998: 2.7%, 2013–14: 4.3%) and female young people (1998: 3.1%, 2013–14: 5.8%), highlighting that there had been an increase in depressive disorders for both male (59.2% increase) and female (87.1% increase) young people since 1998.[46] This comparative analysis was not able to be performed for anxiety-related disorders as the 1998 survey did not capture this information.[47]

Analysis of the HILDA (Household, Income and Labour Dynamics in Australia) data shows a substantial increase in diagnosed depression and anxiety for all age groups from 2009 to 2017. In particular, for females aged 15 to 34 years, there was an increase from 12.8 per cent to 20.1 per cent (for males of the same age group: 6.1% to 11.1%).[48] This data was not disaggregated any further for younger age groups.

The Mission Australia Youth Survey is one of the few regularly conducted surveys of young people across Australia. While the survey is not representative of all Australian young people, it provides an indication of Australian young people's views and experiences over time.

The Mission Australia Youth Mental Health Report 2012–2018 highlights that the proportion of young people aged 15 to 19 years reporting psychological distress[49] increased from 18.7 per cent in 2012 to almost one-quarter (24.2%) in 2018.[50] Furthermore, in 2018 female young people were twice as likely as male young people to experience psychological distress (30.0% compared to 15.6%).

This data suggests there has been a steadily widening gap between the proportion of female and male young people experiencing psychological distress from 2012 to 2018 (female: increased from 22.5% in 2012 to 30.0% in 2018; male: increased from 12.7% to 15.6%).[51]

Psychological distress in young people aged 15 to 19 years, Australia, 2012 to 2018
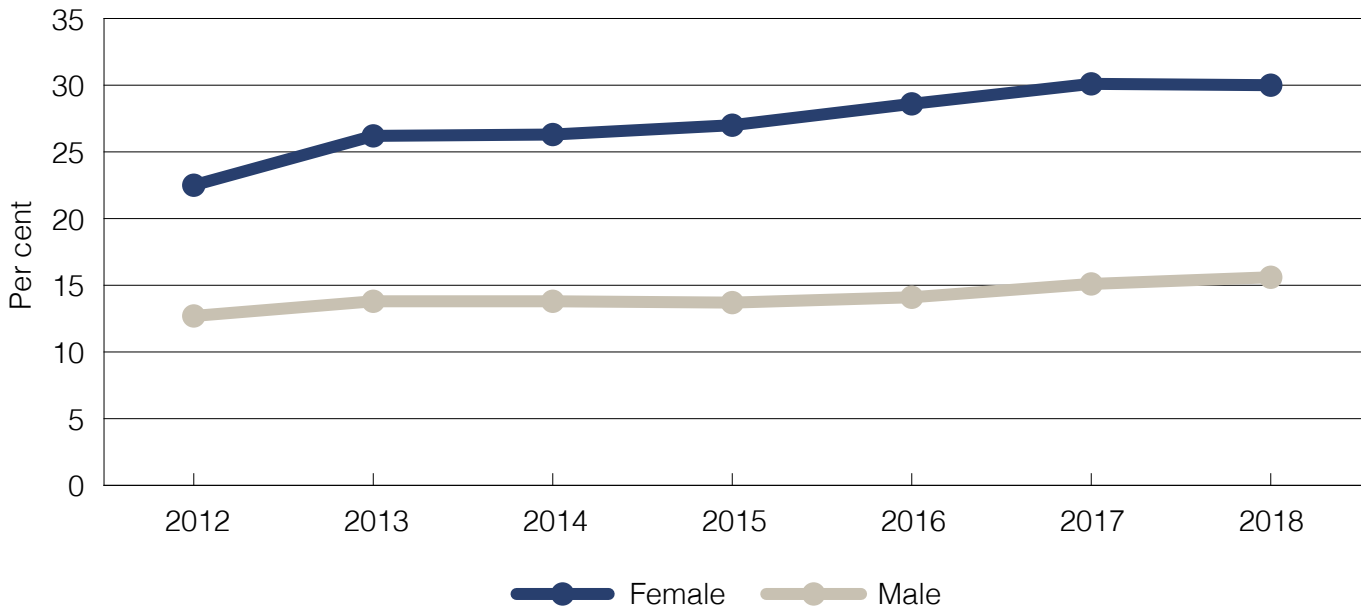
Source: Hall S et al 2019, *Can we talk? Seven Year Youth Mental Health Report: 2012–2018*, Mission Australia.

Similarly, results from the NZ Youth19 Survey suggest that young New Zealanders' emotional and mental health has significantly worsened since 2012.[52] The proportion of high school students reporting significant depressive symptoms increased steadily for girls from 2001 (14.5%) to 2012 (17.4%) and then increased significantly from 2012 (17.4%) to 2017 (28.9%). For boys, there was no increase from 2001 (8.7%) to 2012 (8.7%), but a similar increase from 2012 (8.7%) to 2019 (16.5%).[53]

A US study using data from annual surveys since 1991 of students in Years 8, 10 and 12 found that mental health problems and mental health related mortality have increased from 2011 to 2018, particularly for girls. This study reported that depressive symptoms for girls decreased from 1991 to 2011 and then reversed in 2012 to peak in 2018 (the final year of analysis). Increases were evident across all age groups. The trend was similar for boys, but less marked.[54]

Thus, evidence shows that since 2012 there has been a significant increase in mental illnesses and mental health distress for young people aged 12 to 17 years, with a particularly significant increase for girls.

Changes in mental health over the life course

Many mental health conditions have their initial onset (or diagnosis) in late childhood and early adolescence.[55]

The Australian Early Development Census (AEDC) is a national measure of early childhood development conducted as children enter their first year of full-time school (pre-primary in WA). The AEDC collects data on five domains: physical health and wellbeing, social competence, emotional

maturity, language and cognitive skills (school-based), and communication skills and general knowledge.[56]

Data from the AEDC shows that male children aged around five years are significantly more likely than female children to be developmentally vulnerable on one or more domains. In 2018 in WA, 25.3 per cent of male children were developmentally vulnerable compared to 13.4 per cent of female children.[57]

Research also shows that older female children generally have better socio-emotional and mental health than male children. The longitudinal Middle Childhood Survey (MCS), part of the New South Wales (NSW) Child Development Study, was conducted with a population cohort of 87,026 children. Analysis of the data for children at 11 years of age found that across most domains (including social integration, self-esteem and emotional symptoms) female children had better results than male children.[58]

However, as female children move into adolescence their mental health and wellbeing declines in comparison to male children.

In the 2015 Young Minds Matter Survey, parent/carers reported that female young people aged 12 to 17 years were more likely to experience mental health concerns (anxiety: 7.7%, depression: 5.8%) than female children aged 4 to 11 years (anxiety: 6.1%, depression: 1.2%). In contrast, male children and young people were less likely to be reported with anxiety disorders as they aged (4–11 years: 7.6%, 12–17 years: 6.3%) and had a similar increase in depression to female young people (4–11 years: 1.1%, 12–17 years: 4.3%).[59]

Australian research analysing the 1998 and 2007 National Surveys of Mental Health and Wellbeing suggests that young people (aged 16 to 24 years) experience higher rates of mental disorders than older age groups.[60]

However, analysis of the 2007 data[61] shows that the principal disorders that decrease with age are substance-use disorders (which are more prevalent for male young people).[62,63] In contrast, the proportion of females experiencing anxiety disorders was around 21 per cent from early adulthood through to middle-age (45–54 years), compared to the proportion of males experiencing anxiety disorders increasing from 9.3 per cent to 13.9 per cent.

Proportion of people experiencing 12-month mental disorders by disorder group, gender and age group, per cent, 2007, Australia

	Anxiety disorders		Affective disorders*		Substance Use disorders		Any Mental Health disorder	
	Males	Females	Males	Females	Males	Females	Males	Females
16–24	9.3	21.7	4.3	8.4	15.5	9.8	22.8	30.1
25–34	11.5	21.2	7.0	8.7	11.3	3.3	22.8	26.9
35–44	14.9	21.2	8.4	8.3	6.5	2.6	20.8	25.9
45–54	13.9	21.2	6.3	7.8	4.4	3.2	18.6	24.2

Source: Australian Bureau of Statistics (ABS) 2008, *National Survey of Mental Health and Wellbeing: Summary of Results, 2007*, Table 3 12-month mental disorders, by Age group (years)

* Includes depression and bipolar affective disorder.

Therefore, excluding substance use, the proportion of males with anxiety and affective disorders increases as they age, while the proportion of females with these disorders remains higher than for males, and relatively stable across all age groups.

The ABS conducted a similar survey of mental health conditions in 2014–15 and 2017–18 without the analysis of substance use disorders. This data shows an increase in anxiety and depression for male and female young people from 2007 and that a greater proportion of young people aged 15 to 24 years have mental health conditions than other age groups.

Almost one-quarter (24.6%) of female young people aged 15 to 24 years had an anxiety-related condition and 14.5 per cent had depressive symptoms in 2017–18 (compared to 13.9% and 9.3% of male young people).

Proportion of people with a mental health condition by disorder group, gender and age group, per cent, 2017–18, Australia

|	Anxiety-related conditions		Depression or feelings of depression		Any mental or behavioural condition disorder	
	Males	Females	Males	Females	Males	Females
0−14	7.3	4.7	1.0	0.9	13.7	8.2
15−24	13.9	24.6	9.3	14.5	21.3	30.0
25−34	10.2	20.1	10.2	11.8	17.1	25.1
35−44	11.3	16.2	12.0	11.6	18.2	22.9
45−54	12.5	18.3	12.5	17.0	20.5	26.6

Source: Australian Bureau of Statistics (ABS) 2018, *Mental Health – Mental and behavioural conditions*, ABS [online]

Thus, while female children (aged 0 to 14 years) are less likely than male children to be reported as having an anxiety or depressive disorder, there is a substantial increase in prevalence in adolescence and early adulthood.

Self-harm and suicide

The Australian Institute of Health and Welfare annually reports on hospitalisations due to intention self-harm. This data shows that female young people are hospitalised as a result of intentional self-harm at a significantly higher rate than male young people, and that this rate is increasing.[64]

Age-specific rates of intentional self-harm hospitalised injury, by age and gender, Australia, 2007–08 to 2016–17
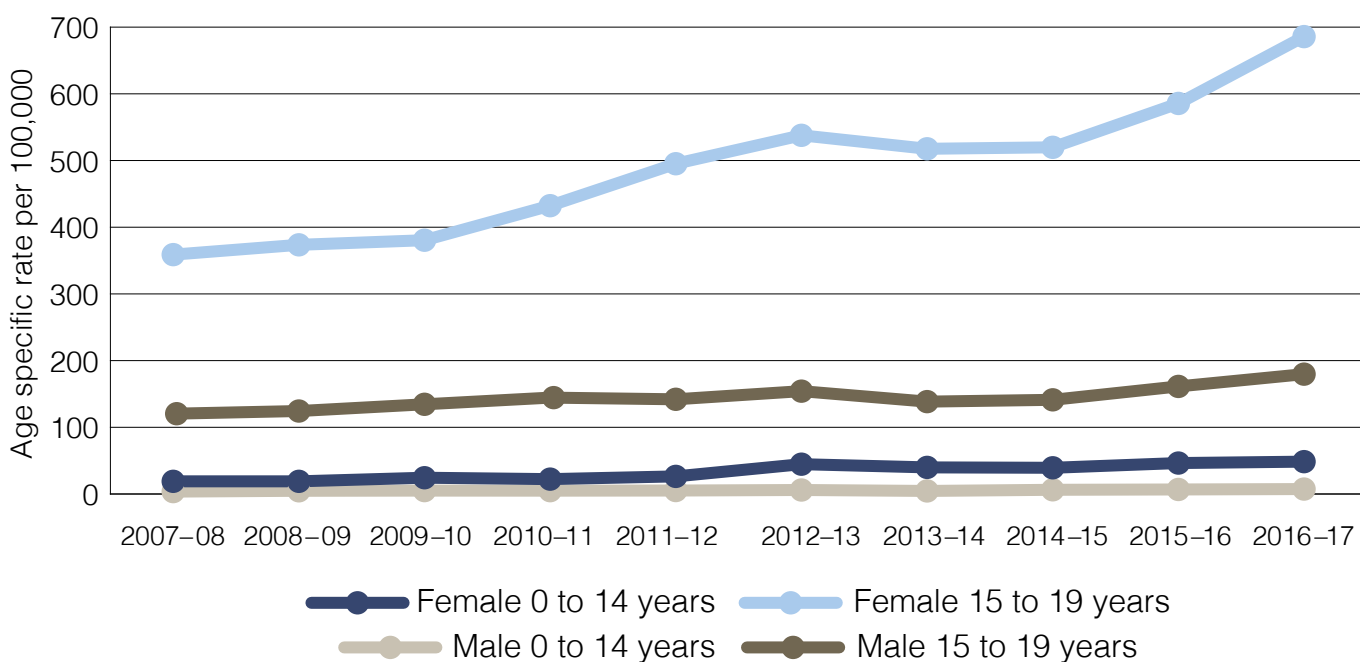
Source: AIHW, *Trends in hospitalised injury, Australia 2007–08 to 2016–17*, Table S2: Age-specific rates of intentional self-harm hospitalised injury, by age, and sex, Australia, 2007–08 to 2016–17

Data from LSAC estimates that girls are almost four times more likely to engage in self-harm than boys, with 15.0 per cent of girls aged 14 to 15 years engaged in self-harm in the last 12 months, compared to 4.0 per cent of boys the same age.[65]

Data from the 2013–14 Young Minds Matter survey found that 11.1 per cent of female young people aged 12 to 15 years had ever self-harmed compared to 5.7 per cent of their male peers. Of concern, more than one-in-five (22.8%) female young people aged 16 to 17 years had self-harmed compared to around one-in-10 (9.1%) male young people.[66]

The LSAC data also found that girls were much more likely to engage in suicidal behaviour than boys, including suicidal ideation (girls: 12%, boys: 6%), developing suicidal plans (girls: 9%, boys: 5%) and attempted suicide (girls: 6%, boys: 4%).[67]

The researchers concluded that 30 per cent of young people who self-harmed over a 12-month period attempted suicide. Although girls who attempt suicide more commonly engaged in self-harm (girls: 79.1%, boys: 36.4%).[68] This aligns with other research which suggests that male young people are more likely to attempt suicide without planning, as they exhibit a higher level of impulsivity.[69]

These results are similar to data from the NZ Youth19 Survey which reported that in 2019, 7.3 per cent of female high school students had attempted suicide, compared to 5.0 per cent of male high school students. There was an overall increase in the proportion of students attempting suicide from 4.8 per cent in 2007 to 6.2 per cent in 2019.[70]

Research in the UK has similarly found that girls aged 10 to 19 had a significantly higher annualised rate of self-harm (37.4 per 10000) compared with boys (12.3 per 10000) from 2001 to 2014. In particular, there was a significant increase (68%) in rates of self-harm among girls aged 13 to 16 years, from 45.9 per 10000 in 2011 to 77.0 per 10000 in 2014.[71] The cause of this significant increase was unable to be determined, however the possible impact of social media or more frequent help-seeking behaviour for this cohort was noted.[72]

While female young people are more likely to self-harm and attempt suicide than male young people, male young people are more likely to die through suicide.[73]

Yet, in recent years the suicide rate of female young people has increased at a much greater rate than for male young people. In Australia, the age specific death rate due to intentional self-harm for girls aged 15 to 19 years has increased by 1.8 times since 2010 (2010: 3.7 per 100,000 people, 2019: 6.6 per 100,000 people), while it has increased by 1.3 times for boys aged 15 to 19 years (2010: 12.1 per 100,000 people, 2019: 16.2 per 100,000 people).[74]

The age specific death rate for girls aged 0 to 14 years has doubled from 0.2 per 100,000 children in 2010 to 0.4 in 2019.[75] Data solely for the 10 to 14 years age group is not available in Australia.

Data from the US shows that the suicide rate for girls aged 10 to 14 years has at least tripled from 1999 to 2017.[76]

While this paper does not explicitly consider LGBTI children and young people, they have a significantly greater risk of experiencing mental health problems, including depression, anxiety disorders, self-harm and suicide.[77,78,79]

An Australian survey found that one-half (52.0%) of LGBTI young people (aged 14 to 21 years) report very high levels of psychological distress and 48.0 per cent had received a diagnosis for depression in their lifetime. Further, one-in-10 LGBTI young people had attempted suicide.[80] A study into the mental health of trans young people found that almost three-quarters (74.6%) of participating trans young people (aged 25 years or under) have at some point been diagnosed with depression and 72.2 per cent have been diagnosed with an anxiety disorder.[81]

What do female young people say about their mental health?

Limited qualitative research has been conducted in Australia asking female young people about their mental health. Some research has considered young people's experiences of stress.

An Adelaide-based study with 20 young people aged 13 to 20 years explored their positive and negative experiences of stress.[82] This study did not consider gender differences, the quotes below are from the female participants.

The participants described 'bad stress' as impacting their state of mind, self-esteem and their health:

> *"...the thought is constantly going through my head over, and over, and over again."*
>
> *"Well I was always... cos I was so stressed like I was always really sick like my... like physically sick."* [83]

The participants also described how they saw 'good stress' as productive and enabling:

> *"I just feel really confident... not in many situations do I feel really like happy with myself."* [84]

A Swedish study with 32 young women (aged 17 to 25 years) attending a stress management course found that they believed that their stress was 'more complicated in comparison with young men's stress'. The felt they had to manage complex social norms regarding 'perfect appearance, high achievement, and social status.' [85]

US-based longitudinal research with around 57 Year 6 to Year 12 female students in two affluent independent single-sex schools found that the participants were 'swimming in a sea of pervasive stress' and they considered this level of stress to be normal. This study found that the students, their parents and their teachers believed that the students needed to perform at the highest level to 'make it' in the world. [86]

In this study, some parents reported wanting to tell their daughters to 'ease up' but were worried they would fall behind their peers. The girls said they did feel some pressure from parents and teachers but a lot of it was from themselves. Both teachers and parents described many of the girls as 'perfectionists'. [87]

Teachers particularly attributed the girls' stress to overscheduling of extracurricular activities. Consistent with this, the girls spoke about feeling pressure to succeed not just academically, but also to excel at other activities (sport, music etc.). [88]

Research in Sweden asked fifteen 17 year-old girls what made them feel less stressed. Time alone with no responsibilities was important:

> *"Yes, a day when I feel that I don't have to do this and that and then something else later. That day is mine and I can take it easy, do nothing. Just be myself."* [89]

Having trusted relationships with supportive parents and friends were also essential:

> *"When I experience that something is difficult, I find talking with my mum very helpful and easy and it usually feels better afterwards."*
>
> *"How I'm feeling inside, I talk to my friends about that... it feels as if my friends... those who are really close to me, know me much better than my parents do..."* [90]

There has been less research considering adolescent mental health more directly.

A study with 29 focus groups with high school students in Sweden in the early 2000s found the male participants' more positive mental health was associated with feelings of being in a better social position compared to the girls and their low degree of responsibility taking.

> *"I think girls put a greater pressure on themselves. Maybe it's easier for guys to feel confident..."* (female)
>
> *"It seems like girls often have bad self-esteem and feel bad about their bodies. TV and media put pressure on them to all look the same. Guys don't care about their looks as girls do." (male)* [91]

A WA-based study in 2018 with 10 young people aged 16 to 24 years explored their views and experiences of presenting to a general practitioner (GP) and disclosing suicidal behaviour and/or self-harm.[92] The participants noted in particular that they wanted a collaborative dialogue and for the GP to initiate conversations about mental health.

> *"My iron's always low and they're like, 'That's why you're tired'... the mental health question's never been asked." (female)*[93]

They also discussed the need for the GP to be completely engaged in their story and really listening:

> *"You don't want to be ignored at that moment when you're telling your story" (female)*

And, that they do not dismiss their concerns:

> *"Sometimes the GP might say, for example... 'It happens to everybody, it's okay... you'll get over it'. You don't want to hear that, in a sense... it's actually kind of saying that it's nothing that you're going through... everybody goes through it, it's fine. It's not even an issue." (female)*[94]

These reflections on how these female participants viewed discussing mental health issues with their GPs provide an indication of what female young people want from their other support networks as well.

A London-based study asked 30 young people aged 15 to 16 years about self-harm. In this study, a purposive sampling technique was used to select young people who had self-harmed and some who had not, comprising 24 females (17 had self-harmed) and six males (three had self-harmed).[95]

When asked about why they self-harmed, most participants did not identify a single trigger, but a variety of stressors including difficult relationships, stress at school and feelings of anger.

> *"If I've been really stressed at school and I'm falling behind with schoolwork... but there's no-one like I could talk to about it, so I would either withdraw from everyone, or cut myself or something like that."* (female)
>
> *"It's like a way of getting your emotions out, it's focusing on something else, other than what's making you angry."* (female)[96]

This participant discussed self-harm as a means of expressing her anger, which she turned against herself rather than expressing it outwardly. In contrast, the following male participant (one of the few that had self-harmed) did so through an outward show of anger and aggression.

> *"I just punch stuff, innit? Like punch everything around me and then I get scars."* [97]

Another small UK-based study with nine female participants aged 13 to 17 years old explored their reasons for engaging in self-harm behaviours. Most of the participants identified difficulties with their personal relationships, including bullying or issues with their parents as a trigger for self-harm.[98]

A number of the participants discussed how self-harm distracted from emotional pain.

> *"It takes my focus away from another kind of pain, like the pain inside, like the way I feel. So, it overtakes that so I kind of forget about the other sort of pain."*
>
> *"I just felt that by cutting myself I was getting a release from all the anger, the guilt, the stress of everything that was going on."*

Some of the participants talked about self-harming as an addictive urge:

> *"It's addicting, so at first you do it because you are really sad and you do it because there is so much inside of you, and you need to let it go and each cut would let a bit of emotion go and it has become a part of my life. I guess I can't go without it, like I crave it."*

There was also discussion of how self-harm was used to reduce suicidal thoughts and emotions:

> *"I think it's a way of taking care of yourself, because I feel in a way like self-harm stops you thinking about suicide as well."* [99]

Some participants recognised that supportive relationships assisted them in reducing their self-harm behaviours.

> *"I don't always give in, I turn to something else, like especially my mum, she's like one of my biggest supporters in my life. We're very, very close... I'll go and sit with her and talk to her and it slowly goes away ...So I don't feel that way anymore. I might still feel like alone and upset and however, but I don't have that urge to hurt myself."* [100]

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Chapter 3
General health

- From 11 years of age girls begin to have lower health-related quality of life than boys with greater experiences of headaches, stress and tiredness.

- Girls who have started having periods have a high likelihood of regularly experiencing period pain and other symptoms which impact their daily activities.

- Throughout childhood and into adolescence on average girls do less physical activity than boys and the gender gap increases throughout adolescence.

- Girls are more likely to feel less supported than boys to continue to do physical activity, feel more self-conscious about physical activity and often feel that it does not align with their developing identity.

- Girls are less likely than boys to be overweight or obese but are more likely to be worried about their weight and be dieting, skipping meals or engaging in other weight control behaviours.

- Sleep quality and duration for both male and female young people appears to have decreased in recent years and there is evidence to suggest this may be related to technology use.

General physical health

Adolescence is a period during which young people experience significant physical, emotional and social changes.[1] Young people who have been healthy in childhood are more likely to remain healthy during adolescence, however the onset of puberty and transition to high school bring with it other changes which can influence physical and mental health. These changes are often different for male and female young people for both biological and social reasons.

Female young people are more likely to experience general health issues during adolescence than their male peers.

In the Commissioner's 2019 Speaking Out Survey, less than one-half (43.1%) of WA female students in Year 7 to Year 12 reported their health was very good or excellent, compared to 57.1 per cent of male Year 7 to Year 12 students. This was a significant change from Year 4 to Year 6 students where a greater proportion of female students than male students reported their health was very good or excellent (female: 65.3%, male: 62.2%).[2]

Female adolescents generally report lower health-related quality of life than male young people.[3,4] Health-related quality of life (HRQoL) measures wellbeing across multiple items including physical health, psychological health and social wellbeing.[5]

Recent data on the overall health of children and young people is limited. There often appears to be a significant lag-time from the date of the study to the publication date for this type of analysis.

A longitudinal NSW-based study across three years with 403 high school students (aged 12 to 15 years in 2011) considered HRQoL across five dimensions: physical wellbeing, psychological wellbeing and autonomy and parent relations, social support and peers and the school environment. They found that female young people reported lower HRQoL scores than male young people for physical wellbeing, psychological wellbeing and autonomy and parent relations in each of the three years. Furthermore, the female participants had a steady decline in psychological wellbeing from 2011 to 2013 and a decline across all five HRQoL dimensions between 2012 and 2013.[6]

Research with 1,583 young people aged 11 to 19 years in Victoria similarly found that female young people have a significantly lower health-related quality of life[7] than male young people. They also reported that overweight female young people (not overweight males) had lower HRQoL compared to healthy weight females.[8]

International research also finds that female young people have poorer general health outcomes than their male peers.[9,10]

A large-scale analysis of data from 12 European countries in 2003 reported that boys and girls at eight years of age had similar average HRQoL scores, which progressively decreased as they aged. Girls' scores decreased at a greater rate than boys across almost all measures, including physical wellbeing. Physical wellbeing comprised complaints of poor health, physical activity, energy and fitness.[11] By age 12, female young people reported a significantly worse health-related quality of life and the gender gap continued to increase throughout adolescence.[12]

Puberty, and in particular the onset of menstruation, can also cause specific health concerns for female children and young people and help explain the disparity between male and female adolescent health experiences.

The average age of the onset of puberty is estimated to have fallen by three years over the last century and is currently around 10 to 11 years for girls and 11 to 12 years for boys.[13,14] However, there is a broad range of ages for 'normal' puberty onset, from eight to 13 years for girls and nine to 14 years for boys.[15]

Data from LSAC shows that by age 12 to 13 almost all girls (92.9%) are showing definite signs of puberty compared to only two-thirds (65.8%) of boys.[16]

Proportion of children and young people showing definite signs of puberty by gender and age group, per cent, Australia

	Male	Female
8 to 9 years	6.5	16.1
10 to 11 years	52.8	73.9
12 to 13 years	65.8	92.9

Source: Warren D & Yu M 2016, *Pubertal status and emotional, school and social functioning*, in LSAC Annual Statistical Report 2015, Australian Institute of Family Studies

Further analysis showed that early onset of puberty in girls is associated with various difficulties including anxiety, experiencing bullying, taking time off school and behavioural issues.[17] Although there is some evidence to suggest that these relationships may be bi-directional with environmental stressors, family structure and anxiety increasing the likelihood of early puberty.[18]

For many female young people, the onset of menstruation is associated with cramps, headaches, nausea and fatigue. A recent meta-analysis of 38 studies found that 71 per cent of young women (younger than 25 years) experience painful periods and 41 per cent reported that this impacted on their studies.[19] Data shows that headaches and migraines in menstruating women and girls can be related to oestrogen levels.[20]

A survey of 1,051 Australian girls aged between 15 and 19 years, reported that 93 per cent of girls experience period pain, 71 per cent experience cramping and 96 per cent experience pre-menstrual symptoms. This study found that these symptoms significantly impacted on girls' daily activities with one-quarter of girls reporting school absences and moderate to high interference with other activities (social activities, exercise and relationships with family).[21]

An earlier WA-based study found that almost 80 per cent of female students in Year 11 and 12 had painful periods and 37 per cent said this impacted their school activities.[22] A recent online Australian survey of female students found that more than one-third of respondents had missed school or classes because of menstrual symptoms in the past three months.[23,24]

In 2020, the South Australian Commissioner for Children and Young People conducted a survey with 2,517 female young people about periods. They found that 26 per cent of the respondents had missed school because they did not have a sanitary product and 51 per cent reported not having access to period products or not knowing how to access them at school. They also reported being subject to bullying and teasing about their periods and feeling very self-conscious when they have their period.[25]

Both endometriosis and polycystic ovarian syndrome (PCOS) are relatively common, although underdiagnosed, and cause various symptoms including pain and period irregularity and are often associated with an increase in stress and mental health issues.[26,27,28]

Determining the prevalence of endometriosis and PCOS in female young people is challenging as the symptoms can mirror other symptoms related to the onset of menstruation, however estimates suggest that around one-in-10 females aged between 15 and 49 have endometriosis and/or PCOS.[29,30]

The onset of puberty involves changes in hormone levels which result in physical changes (e.g. menstruation, breast development, pubic hair), however also impacts cognitive and socio-emotional development with an increase in aggression, sexual feelings and risk-taking behaviour.[31,32]

The decrease in the age of onset of puberty therefore has implications for the social and emotional development of children and young people, and creates a possible mismatch between socio-cultural norms, such as the timing of parental discussions of sex and risk-taking behaviours, and the changes children and young people are experiencing.[33] Considering, female children and young people on average start puberty earlier than male, this possible mismatch may have a greater impact on girls.

Puberty for girls is also associated with changes in body shape (breast development and weight gain) which have a number of implications. In particular, puberty can result in unwanted sexual attention and harassment and through this body shame and self-surveillance.[34,35] Further, evidence suggests that early experiences of self-surveillance and shame place girls at risk of depression.[36]

Data that shows that the onset of puberty in girls increases the likelihood of experiencing anxiety disorders, mental health issues and depression.[37,38,39]

Many physical health issues reported in adolescence are psychosomatic complaints such as headaches, muscle pain and tiredness which can be associated with mental health concerns such as anxiety and stress. Girls are more likely to report these types of health conditions than boys, which aligns with girls experiencing poorer mental health and stress-related anxiety.[40,41]

A school-based survey of 1,027 16 to 18 year-old students in Sweden in 2007–08 found that two to three times as many female young people than male young people reported subjective health complaints, including headaches, tiredness, muscle pain and difficulty sleeping. Stress was also strongly correlated with these health complaints.[42]

A Norwegian study conducted in 2011 and 2013 found that female young people aged 14 to 16 years reported more subjective health complaints[43] than boys, and that gender differences increased from 14 to 16 years. This study also found that self-esteem and stress from schoolwork accounted for 61 per cent of the gender difference in health complaints for girls at 16 years.[44]

While developmental and emotional challenges during puberty are normal and have always been part of the process of growing up, these processes may have been exacerbated by social media and the concurrent increased focus on appearance and body image for adolescent girls.

High quality, non-stigmatising education about puberty and menstruation is essential to reduce the taboo of menstruation, and increase understanding and support for period pain and other symptoms.

Weight and nutrition

Being overweight or obese increases a young person's risk of poor physical health in both the short and long term. Being obese increases a young person's risk of a range of conditions such as asthma, Type 2 diabetes and cardiovascular conditions.[45]

Obesity in young people is also associated with a number of psychosocial problems, including social isolation, discrimination and low self-esteem.[46] Research shows that young people who are, or perceive they are, overweight and obese have a higher risk of self-esteem, body shame and mental health issues which are often associated with weight-related teasing and bullying.[47,48,49]

International research shows that female young people are more likely than male young people to report that they are overweight or be dissatisfied with their body, even when they are in the normal weight range.[50,51,52]

Approximately one-quarter of children and young people aged five to 17 years in Australia are overweight or obese (17.0% overweight and 8.1% obese).[53]

Rates of overweight and obesity fluctuate as children age. Data from the Australian National Health Survey suggests that there is a decrease in overweight or obesity for female young people as they move from childhood to adolescence. This reduction in the prevalence of overweight and obesity from childhood to adolescence is not as evident for male children and young people.

Proportion of young people in BMI categories by age group and gender, per cent, Australia, 2017–18

	Male			Female		
	8 to 11 years	12 to 15 years	16 to 17 years	8 to 11 years	12 to 15 years	16 to 17 years
Underweight	7.9	5.4	8.1	12.7	8.1	4.3
Normal weight	64.7	73.8	59.9	67.1	69.1	69.4
Overweight	22.0	14.0	20.2	13.3	15.2	16.9
Obese	6.9	7.2	10.7	6.7	5.7	8.7
Overweight / obese	28.0	20.4	32.3	20.0	21.4	24.7

Source: Australian Bureau of Statistics, *National Health Survey 2017–18*, Table 16.1 Children's Body Mass Index, waist circumference, height and weight, Proportion of persons

Similarly, a large study in France found that male young people aged 14 to 18 years were more often overweight and obese than female young people, and female young people were more likely than male to be underweight. At the same time, male young people had higher health-related quality of life scores than female young people.[54] This study found that mental HRQoL was higher for underweight girls and decreased with increasing BMI. In contrast, mental HRQoL was lower for thin, overweight and obese rather than normal-weight boys.[55]

An Australian study with 1,583 young people aged between 11 and 19 years found no association between weight status and self-reported HRQoL. However, when gender was considered, there was an association where overweight female young people had a significantly worse HRQoL than normal weight females but this association did not exist for male young people.[56]

Analysis of the Commissioner's 2019 Speaking Out Survey data found that WA female young people were more likely to perceive themselves as overweight than male students (35% compared to 23%) and were happiest if they considered themselves to be underweight.[57]

Data from LSAC found that one-quarter (24.6%) of girls aged 14 to 15 years said that their weight was very important to the way they feel as a person, compared to 11.1 per cent of boys. A further 36.7 per cent of girls felt that it was moderately important (27.3% of boys).[58]

Female young people's concerns about weight also lead them to be more likely to have unhealthy eating behaviours. There is some evidence that suggests that adolescent girls are more likely than boys to be eating healthy foods (although still not meeting recommended guidelines for fruit and vegetables), however they are also more likely to engage in unhealthy eating habits such as dieting, binging/purging or meal skipping.[59,60,61]

Data shows that the prevalence of eating disorders has increased over the past two decades.[62,63]

LSAC data reports that 54 per cent of Australian female young people aged 14 to 15 years were scared of gaining weight and 43 per cent expressed concern that they had lost control of their eating or had eaten too much in the last four weeks.[64]

Around one-quarter (23.1%) of girls (12% of boys) aged 14 to 15 years reported engaging in some sort of dieting behaviour.[65] Sixty per cent of the girls who were dieting were in the normal weight range (47% of the boys).[66] A small proportion of young people in this study met the diagnostic criteria for eating disorders (3.4% for female young people and 1.4% for male young people).[67]

Data from a national survey in the US found that dieting behaviours for adolescent girls increased as they aged, with 31 per cent of girls in Grade 5 reporting dieting behaviours compared to 62 per cent of girls in Grade 12. This linear relationship was not evident for boys. This study also found a strong association between unhealthy eating behaviours (binge/purge behaviours and dieting) and psychosocial issues, such as low self-esteem, high rates of depression and suicidal ideation.[68]

In another US-based study with 365 girls across 12 high schools, 45 per cent of the participants reported that their mother had encouraged them to diet and 58 per cent reported being teased about their weight by their family. Being teased about their weight was strongly associated with unhealthy and extreme weight control behaviours and binge eating. Parents talking about weight (either their own or their daughters), particularly mothers, also had a significant association with unhealthy weight control behaviours and binge eating.[69]

The LSAC data reported an association between dieting at 14 and 15 years and emotional problems, with 58 per cent of the girls who were dieting experiencing depressive symptoms and 47 per cent had elevated anxiety symptoms. Boys reported fewer symptoms of depression and anxiety, however dieting boys were also more likely than other boys to have these symptoms (32% symptoms of depression and 16% anxiety).[70]

Friends can have an impact on weight concerns and dieting behaviours. A WA-based study with 156 girls in four independent high schools (one single-sex and three mixed sex) found that girls in friendship cliques in the single-sex schools were more likely to have similar levels of body image concerns and dieting behaviours. Whereas girls in friendship cliques in the mixed sex schools did not have similar body image concerns and dieting behaviours.[71]

A qualitative study by the same authors with Year 10 students from a private all-girls school found that discussions about attractiveness were overwhelmingly focused on weight and thinness.[72]

A similar study in the UK found that while girls in a single-sex school and a co-educational school had internalised the 'thin-ideal' perspective, the students in the single-sex school perceived greater social support (from peers, family and significant others) which in turn increased their self-esteem, acting as a protective factor. The authors concluded that the thin-ideal perspective significantly contributed to reduced self-esteem but could be moderated by protective factors such as social support.[73]

Another study with 329 adolescents found that low self-esteem had a significant influence on young people's anxiety about their body, which increased the drive for thinness in girls and muscularity in boys. Further, this study reported that boys were less likely to have anxiety about their physique and more likely to have higher self-esteem.[74]

Sleep

Sleep is critical for young people's physical and mental health, at the same time, during adolescence sleep behaviours change for both biological and social reasons.[75] The recommended amount of sleep for teenagers aged 14 to 17 years is eight to 10 hours of uninterrupted sleep.[76]

Short sleep duration and low quality sleep has been linked to obesity and poor mental health in children and young people.[77,78,79]

Data from LSAC shows that over one-quarter of young people aged 12 to 13 years do not meet the sleep guidelines (boys: 24.5%, girls: 29.2%). A similar proportion of young people aged 14 to 15 years do not meet the guidelines, although the gender gap has widened (boys: 21.3%, girls: 30.9%). By age 16 to 17 years the proportion of young people not meeting the guidelines has increased to over 50 per cent and there is no significant gender gap (boys: 53.8%, girls: 50.3%).[80]

In this study more than one-in-10 (12.6%) girls aged 14 to 15 years reported poor quality sleep[81] (compared to 6.5% of boys this age) and almost one-in-five (19.5%) 16 to 17-year-old girls reported poor quality sleep (13.0% of boys).[82]

Similarly, a New Zealand survey with 692 young people aged 15 to 17 years found that girls had a higher prevalence of poor sleep quality (63.1%) than boys (44.5%).[83]

The LSAC data shows that the young people not meeting the minimum sleep guidelines were more likely to experience symptoms of anxiety and depression and less likely to be happy. Thus, the high level of young people not getting enough sleep at 16 to 17 years corresponded with a high level of young people experiencing anxiety, depression and not feeling happy.[84] This report did not analyse these variables by gender.

Another Australian study with 281 participants aged 13 to 19 years found that female participants were more likely to have insomnia than male participants and found a strong relationship between insomnia and vulnerability to stress for girls. This study reported that for the female participants vulnerability to stress accounted for the relationship between self-oriented perfectionism and insomnia severity.[85]

A large Swedish study explored children's sleep habits from 1985 to 2013 and found that sleep duration has reduced with a larger proportion of children and young people not meeting the recommended sleep duration guidelines in later years. This study showed a large increase in late bedtimes between 1985 and 2005 and a further increase from 2005 to 2013. They also reported a significant increase in sleep onset difficulties from 2005 to 2013. While they did not have supporting data for internet/social media use – the authors considered this a possible cause of these changes.[86]

In other research, technology use has been shown to influence sleep duration and quality.[87,88]

The LSAC study reported that where young people had access to the internet in their bedrooms, they were more likely to not meet the minimum sleep guidelines. More than one-quarter of young people aged 12 to 13 years (28%) and 14 to 15 years (27%) with internet access in their bedroom were not meeting the guidelines, compared to 23 per cent and 15 per cent without internet access in their bedroom.[89]

In addition, young people aged 16 to 17 years who spent more time on the internet were more likely to not meet the sleep guidelines. Almost two-thirds (63%) of 16 to 17 year-olds who spent more than eight hours on the internet (18% of all 16 to 17 year-olds) were not meeting the sleep guidelines. This analysis was not disaggregated by gender.[90]

A study with 467 Scottish adolescents (age 11 to 17 years) found that night-time social media use was associated with poorer sleep quality and higher levels of anxiety and depression.[91]

A survey of French students in middle school (Grade 6 to 9 – average age of 12 years) found that after bedtime 51.7 per cent of students used electronic devices for texts, social media, games or

streaming). They reported a clear association between access to screens and social media and sleep deprivation. In contrast to other research, this study found no significant difference between boys and girls for sleep duration, quality or performance during the day or mood (irritability or sadness).[92]

Similarly, a NZ study reported that an additional one hour of technology time significantly increased the likelihood of a young person having a poor quality sleep.[93]

Research suggests technology use is having a detrimental effect on young people's sleep duration and quality – which in turn can impact their physical and mental health.

Physical activity

Physical activity is essential for the health and wellbeing of children and young people.

Doing regular moderate and/or vigorous physical activity supports the development of healthy bones, muscles, joints and a healthy cardiovascular system and is an important element to achieving and maintaining a healthy weight, which reduces the risk of chronic disease.[94]

Young people who exercise more and engage in less screen time are more likely to have higher health-related quality of life.[95,96,97] However, with regard to physical activity and mental health the evidence is mixed, with some research suggesting the association is not straightforward and that the type of activity and intensity of activity are important.[98,99,100,101]

It is well established that as children go through adolescence their levels of physical activity often decrease.[102,103] Furthermore, research has consistently found female children and young people are less likely to do physical activity than male children and young people.[104,105]

Data from LSAC reported that the vast majority of Australian children aged 11 to 12 years do not meet the physical activity guidelines and more girls than boys were not meeting the guidelines.[106]

On weekdays, 93 per cent of girls and 76 per cent of boys were not doing the recommended amount of physical activity. On weekends, 89 per cent of girls and 79 per cent of boys were not doing enough physical activity.[107]

Similarly, the Lifestyle of our Kids (LOOK) Longitudinal Study reported that Australian girls were less physically active than boys at age 8 and at age 12.[108] There is also evidence to suggest that pre-school and toddler girls are less physically active than boys – therefore these gendered behaviours are potentially formed early.[109]

These results are consistent with international surveys which show that girls around the world do less physical activity than their male peers.[110,111]

While results are mixed, there is evidence to suggest that physical activity has a positive association with mental health for both female and male young people.[112,113] However, some research suggests that the associations differ with respect to the type of activity and the intensity.

Data from the Belgium National Health Survey suggests that the intensity of physical activity required for good mental health differs across genders, with women requiring a lower level of intensity than men.[114] This aligns with research that suggests that there is an optimal range of physical activity for good mental health and that too much physical activity can be detrimental to mental health.[115,116]

A study of a large sample of European adolescents found that the greatest differences in mental health were between young people who were the least active (60 minutes on 0 to 3 days in the

past 14 days) and somewhat active (60 minutes on 4 to 7 days in the past 14 days) – there was no additional benefit to mental health for those who were 'most active'.[117]

Furthermore, while moderate levels of physical activity were associated with good mental wellbeing for girls, the highest levels of activity were associated with higher levels of anxiety. This was not the case for boys.[118]

There is some evidence to suggest that excessive or compulsive exercise can be a problem for a small number of female young people due to the pressure to gain a 'thin-ideal' body.[119,120] A focus on excessive exercise and diet can be a symptom of anxiety-related disorders and/or eating disorders, which are more prevalent for female young people.[121,122]

Evidence also suggests that the type of physical activity (e.g. team sports, running, aerobics etc.) results in different mental health outcomes for males and females. For example, there is evidence that walking improves (adult) female emotional wellbeing (with no effect for males). The authors of this study surmised this may be because walking provides time for reflection and also can be done with a friend.[123]

There is strong evidence to suggest that team sports are good for mental health not only due to the physical activity component, but also the social aspect.[124,125] The above European study found that girls who participated in team sports had the lowest levels of anxiety and depression and the highest levels of wellbeing. The researchers concluded that 'team sports may confer particular mental health benefits for girls'.[126]

Similarly, a WA survey with 1,002 female Year 9 and Year 11 students found that those who participated in sports were more likely to have a 'functional' body-image (what the body can do), as opposed to an aesthetic perspective (how the body looks) than those who were physically active in non-sport activities (i.e. walking, gym etc.) or not physically active.[127]

Evidence suggests that moderate levels of regular physical activity, particularly team sports, are protective for female young people's mental wellbeing.

There are various reasons suggested for the lower levels of physical activity of girls and young women.

An analysis of studies into the motivations and barriers toward physical exercise for all ages, reported the most common barriers for teenagers and young women were negative experiences at school, peer pressure, identity conflict, physical education clothing, boys' dominance, competitiveness and a lack of teacher support.[128] A meta-analysis of studies specifically on girls' participation in physical activity found that girls felt self-conscious about their appearance, including wearing athletic clothes and getting sweaty.[129]

Longitudinal research with Australian girls recruited in Year 7 through to Year 11 found that in Year 11 lack of time and prioritisation of education and study were key barriers. In Year 7, perceived competence was influential. Support from peers and family were also important for girls in Year 7 and Year 11.[130]

These findings are supported by market research conducted in Australia with girls aged between 12 and 19 years as part of developing the Australian Government's 'Girls make your move' campaign. The participants reported the key barriers to physical activity included self-consciousness about

skills and appearance, social norms and identity development restricted their interest in sports, those with less capability felt unsupported by parents or schools to participate.[131]

There is substantial evidence to suggest that gender norms regarding appropriate feminine and masculine behaviour discourage girls from being physically active.[132,133,134]

A WA-based study found that individual barriers, such as a lack of time or feelings of not being very good at physical activity, were significantly associated with lower likelihood of engaging in physical activity for both boys and girls. This study reported that scores for girls were significantly greater for individual barriers and environmental barriers. Environmental barriers were 'there are no parks, or sports grounds near where I live or that I can get to easily' and 'it is too far for me to walk or ride my bike to school'.[135] This study suggests that access may be a greater issue for girls than boys, which aligns with other research regarding girls' level of unsupervised independence.

Focus group research in South Australia reported similar themes, with the female participants aged between 13 and 15 years saying they stopped playing sport because they lost interest, were not competent or had insufficient time.[136]

Australian survey research with 714 young people aged between 12 and 16 years found that adolescent girls were concerned about their appearance and body image during physical activity and that associated teasing can reduce their participation. This research found that both boys and girls experienced teasing, however boys only experienced same-sex teasing, whereas girls experienced more teasing and from both girls and boys.[137]

There is some evidence to suggest that girls are more likely to exercise at higher exertion rates in single–sex environments (classes or groups) than in mixed groups.[138]

Support from parents is also influential. Evidence suggests that many parents see sport as more critical for boys and financial costs are more likely to deter parents from engaging their daughters in organised sport.[139,140] Other research specifically found that girls' feelings of competence at age nine influenced parental support for physical activity at 11, which in turn influenced girls' participation at 11 years of age.[141]

Perceptions of competence or self-efficacy appear to be particularly important for girls.[142] A longitudinal study in Canada with approximately 2,000 children from Grade 4 to Grade 6 found that girls with lower perceived competence had a greater decline in enjoyment than boys with lower perceived competence.[143]

Thus, support and encouragement from schools and parents, regardless of body type or competency level, is critical for girls' ongoing engagement in physical activity.

Australian research also shows that period pain can be associated with a decrease in physical activity for girls.[144,145] Even though recent New Zealand research found that regular exercise significantly improved the intensity of period pain for women aged 18 to 43 years.[146]

Disability

The Australian Bureau of Statistics (ABS) Disability, Ageing and Carers, 2018 data reports that 9.6 per cent of all Australian children and young people aged five to 14 years and 9.3 per cent of young people aged 15 to 24 years have a reported disability.[147,148]

Male children and young people aged five to 14 years are more likely to be reported as having disability than female children and young people (male: 12.0% of all, female: 7.1% of all). This

pattern shifts for the 15 to 24 years age group where female young people are marginally more likely to have disability than male young people (male: 9.2%, female: 9.5%).[149]

Male children and young people are more likely to be reported as having behavioural conditions including autism and ADD/ADHD, while female children and young people are more likely to be reported with anxiety-related disorders.

Proportion of children aged 0 to 14 years with disability by condition type, per cent, Australia, 2018

	Male	Female	Total
Intellectual and developmental disorders	6.7	8.2	6.7
Autism and related disorders	32.5	16.7	26.8
Phobic and anxiety disorders	10.6	19.5	13.7
Mental intellectual disorders	3.7	4.2	3.6
Other developmental/learning disorders	13.5	15.5	14.0
Attention deficit disorder/hyperactivity (ADHD)	18.6	8.9	15.0

Source: Australian Bureau of Statistics 2019, *Disability, Ageing and Carers, Australia, 2018*: Table 4.3: Children aged 0-14 years with disability, living in households, Long-term health condition by Sex - 2012, 2015, 2018, Proportion of persons

The 2015 Young Minds Matter survey used parent/carer reports to estimate the prevalence of mental disorders for young people aged 12 to 17 years.

Prevalence of major depressive disorder for Australian young people aged 12 to 17 years by gender and mental health disorder category based on parent/carer responses, 2015

	Male	Female	Total
Anxiety disorders	6.3	7.7	7.0
Major depressive disorders	4.3	5.8	5.0
ADHD	9.8	2.7	6.3

Source: Lawrence D et al 2015, *The Mental Health of Children and Adolescents: Report on the second Australian child and adolescent survey of mental health and wellbeing*

It should be noted that as discussed in the Mental health chapter, the parent/carer estimates for depression were significantly different from the diagnosis based on the young people's responses.

In recent years there has been recognition that the diagnosis of some behavioural conditions, particularly autism and ADHD, can be biased towards symptoms experienced by male children and young people, while female children and young people's symptoms are not always recognised or identified correctly.[150,151,152]

This can manifest in two ways. Firstly, there is evidence to suggest that because boys are more likely to exhibit externalising behaviour, which is often disruptive, they are more often referred for a medical consultation by either teachers or parents.[153,154,155] Secondly, girls can display different

symptoms to boys or their symptoms are not recognised and therefore are not diagnosed when assessed.[156,157]

One study into children with an ADHD diagnosis found that low teacher ratings of hyperactivity for students was associated with higher stress for the student (boys and girls). The authors hypothesised that under-identification of ADHD in girls by teachers could increase the risk of not providing the right support, which in turn may increase girls' feelings of stress.[158]

There has been some research on the impact that under-diagnosis or late diagnosis of conditions may have on female children and young people. Various qualitative studies of women who were diagnosed with autism in adolescence or early adulthood provided accounts of the pressure of 'pretending to be normal'.[159,160] This 'camouflage' or 'masking' behaviour has been associated with increased stress and anxiety in adults with autism.[161]

Other research has found that girls and young women with ADHD are more likely than those without to have conflict with their mothers, be involved in fewer romantic relationships, experience more depressive symptoms and be at a higher risk of self-harm.[162,163]

Evidence suggests that other medical conditions and pain experienced by women and girls can be misidentified, underdiagnosed, or dismissed by the medical profession, for example, endometriosis, polycystic ovarian syndrome and heart attack.[164,165,166]

What do female young people say about their health?

There has been limited qualitative research in Australia asking female young people about their health, including dieting, weight or general health. There has been some research asking female young people about their participation in physical activity and experiences of menstruation.

In a 2020 online survey, the South Australian Commissioner for Children and Young People reported that many respondents felt the need to hide the fact that they had their period due to fear of teasing or feeling ashamed and embarrassed.[167]

> *"Sometimes it is difficult for a student to get permission to leave a class for the bathroom without having to publicly announce their menstruation."* [168]

A Melbourne-based qualitative study with parents of girls who had painful periods reported a need for greater awareness and education among parents and daughters, and health professionals and the broader community.[169]

There is some research asking young people about their body image with a focus on weight perceptions and any related eating behaviours.

A small Australian study about body image reported that the conversations about appearance at an all-girls' school were overwhelmingly about weight and thinness. The girls noted that friends would diet together and there was pressure to conform.[170]

> *"...being skinny and, like what you look like is really important, especially at an all girls' school, and everyone just cares a lot about what they look like."*
>
> *"Well... a lot of the school diets, like, together so then it's like the pressure that everyone else is doing it and then you might sort of feel left out."* [171]

Another focus group study with 41 young women aged 16 to 26 in the UK explored their views on the ideal body shape, in this study in all groups the women initially agreed that the ideal body was 'thin', although they did recognise that there was a body shape that was 'too thin'. At the same time, curves were seen as attractive, but only if they were on slim bodies.

> *"Still to be slim, but more curvy thin."*
>
> *"Even though [boys] go "oh curvy women" if you get in an argument with them they will call you something like "fat cow"."*
>
> *"I think men always want you to have big boobs and be really skinny, which is like completely unnatural."* [172]

An Adelaide-based study with 40 girls and 32 boys aged 14 to 15 years highlighted how bullying and sexual harassment with respect to weight could have serious implications.

> *"Yes, when people call me fat, I just want to like lose weight." (female)*
>
> *"I want to stick my fingers down my throat or something, which I started doing for a while." (female)* [173]

With regard to sleep behaviours, there is some research asking young people about their sleep patterns with a particular focus on the impact of social media.

UK-based research with 33 students aged 13 to 14 years explored their perceptions of their sleeping habits.[174] Most of the students noted that they were 'all tired' and that they caught up on sleep on the weekends. A number of the students said that 'distractions' inhibited their sleeping.

> *"Oh on average I think... that people our age should get on average nine hours sleep? But I think most people get probably less than that because of things like devices and apps and other distractions." (female)*

The girls in the study (16 girls) were more likely to be distracted by communicating on social media sites, while the boys were more likely to be watching videos or gaming.

> *"We're just [on our phones] chatting to friends. I just enjoy that in the evening" (female)*
>
> *"...you go on to YouTube and just look at videos. You get bored but then you just carry on watching them." (male)* [175]

A number of the girls, but not the boys, noted that they feel anxious if they do not have their phone in their room at night. The following is a conversation between two girls:

> *"My mum sometimes takes my phone out of my room, but I can't sleep if it's out of my room."*
>
> *"Yeah, same. I have to have my phone with me, it's my alarm or else I'll panic."*[176]

Other girls noted that they stay up late communicating with boys they like and that they also feel pressure to get up early to put makeup on ready for school:

> *"I think it's sad that we think we have to get up early to put make up on, and we're staying up late on social media when we should be doing other things."*

Both the girls and boys talked about stress about schoolwork keeping them awake:

> *"I think stress stops you from sleeping and then...not sleeping makes you more stressed." (female)*[177]

There has been considerable qualitative exploration of why girls are less likely to do physical activity than boys. Studies confirm that gender stereotypes regarding feminine behaviour are influential, as is a desire to look attractive, not sweaty and not be embarrassed by a lack of competence.

Focus group research with 13 girls aged 12 to 13 years in South Australia asked girls about doing physical activity during lunch break at school and found that they considered whether activities were gender appropriate:

> *"...I think 'cause guys always get muddy... I think their parents or something are used to it. But I think 'cause I've never gone home with like mud everywhere 'cause if I did my parents would be like, "What were you doing? If it's raining just sit around you know, or don't get muddy"."*[178]

They were also influenced by bullying by both boys and girls, particularly those girls who were less competent.

> *"... Some of the girls... when they're trying to be, trying to join in and trying to be good sports (mm) and people [boys] are teasing them about it, so it can affect them so they just don't..."*[179]

A number of the girls also noted that their school uniform (skirts) was not conducive to physical activity during lunch time.

> *"... if we had shorts I'd probably run more..."*
>
> *"The boys have their shorts so they can run around and that but the girls have this."* [180]

Focus group research with 49 girls aged between 13 and 15 years in Adelaide found that the reasons they stopped playing sport were because they lost interest, felt they were not good enough or did not have enough time. These girls also reported feeling concerned about being teased and worrying about their appearance.[181]

A Canadian study found that girls aged 12 to 14 years were more likely to enjoy physical activity and find it fun if it was with their friends and for many of them, if it was not competitive.

> *"I find if you're not keeping score a lot of people will play. If it's just for fun people will be like 'oh, ok, people aren't judging me right now because I just totally shot that right into the net'."* [182]

They were also less likely to enjoy physical activity if they didn't feel competent as this led to concerns about being embarrassed.

> *"If you're terrible at something, sometimes you feel like you're letting the team down if it's a team sport. You're just going to feel a lot of pressure because they're depending on you to be good."*

These participants also noted that they did not enjoy physical activity at school if there was not enough time to shower afterwards before their next class (this was equated with 'feeling gross').[183]

> *"At this age a lot of the girls are trying to impress guys, they don't want to look bad for guys, and they want to look good so the guys will pay attention. Some girls don't like to get sweaty because they think it is unattractive, they're worried about their hair and their makeup.*
>
> *At school we have to do a workout and then we have to go right back to class. I find I feel better when I can shower rather than just putting my clothes back on and going to the next class all sweaty."* [184]

In a Scottish study with 14 girls whose physical activity had declined as part of the transition from primary school to high school reported the participants also talked about feeling self-conscious about the way they looked and also their competence.

> *"... I didn't feel that comfortable like around, running about and that and I don't know why but I felt like everyone was looking at me and I just didn't really like it."* [185]

Similarly, a WA-based photovoice study asked Aboriginal young people (aged 12 to 16 years) in a regional town about participating in sport and other physical activity. A number of the Aboriginal girls reported feeling 'shame' if they were required to wear bathers in public and that they would prefer to miss the class rather than do this.[186]

In a Melbourne-based study, young women with depressive symptoms noted that their motivation to exercise was low when they were feeling down.

> *"If I'm a bit more upbeat I'm more likely to go to the gym, whereas if I'm feeling down, tired or stressed... I'm less likely to do exercise. If I get up and I've got a bit of energy, I think 'I'll get myself to the gym today'."*

While those without depressive symptoms were more likely to recognise how exercise impacted their mood:

> *"I think my mood's better when I do [physical activity]. I do find it relaxing. It kind of clears my thoughts if I go out for a walk or for a run."*[187]

Notes

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6   Meade T & Dowswell E 2016, Adolescents' health-related quality of life (HRQoL) changes over time: a three year longitudinal study, *Health and Quality of Life Outcomes*, Vol 14, No 1.

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16   Ibid, p. 134.

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18   Ibid, p. 129.

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Chapter 4
Engagement and support in the school environment

- Australian female students are generally more engaged and do better academically than male students.

- At the same time, Australian female students' sense of belonging at school is much lower than male students and has decreased considerably since 2003.

- More female students than male students experience stress and anxiety at, or about, school and schoolwork.

- Qualitative research suggests that female young people feel more pressure to do well, even as they realise that their male peers are often more relaxed and confident.

- While school engagement, academic results or 'turning up' is generally associated with some better outcomes, it is not necessarily an indicator that girls are doing well.

Education is a key influence on children and young people's lives. Research shows that school engagement, academic self-concept, supportive relationships at school and a sense of belonging all contribute to young people's wellbeing.[1] It is increasingly recognised that an education system is not just about academic achievement but should provide students with a 'balanced set of cognitive, social and emotional skills'.[2]

Engagement in school

Being engaged in learning is generally associated with better wellbeing outcomes for young people.

In 2015, the Commissioner engaged the Telethon Kids Institute to conduct a literature review on student disengagement. This review concluded that young people who are disengaged at school are more likely to leave school early, have worse employment outcomes over the longer term, lower socioeconomic status and greater risk of persistent disadvantage.[3] Evidence also suggests that young people who are disengaged from learning are also more likely to have mental health issues, including anxiety and depression and engage in risk-taking behaviour.[4,5]

Students are more likely to be disengaged if they come from families with low socio-economic resources, have families who do not value education, do not form connections within school and those students with frequent absences.[6]

However, many studies on disengagement risk factors and outcomes do not consider gender in their analysis. When gender is considered, research shows that girls are more likely to report higher levels of engagement in school, while also being rated more highly in academic achievement by their teachers.[7,8,9] Similarly, Australian data shows that female young people are more engaged in school and generally doing better academically than their male peers.[10,11]

These results contrast with concurrent findings that female students are more likely to be anxious

about school and study, more likely to have poor mental health, and less likely to feel like they belong at school.[12,13,14]

This highlights that the processes of engagement and disengagement for male and female students are likely to be different. This also highlights that being engaged at school does not necessarily mean a student does not have mental health issues, particularly for girls.

Studies into school engagement/disengagement generally define engagement as a multi-faceted concept, incorporating cognitive engagement, emotional (or affective) engagement and behavioural engagement.[15,16] Research suggests that female young people are generally more engaged than male young people, and in particular more cognitively and behaviourally engaged.[17,18] This aligns with the better academic outcomes for female students and the lower likelihood of behavioural issues, including a lower incidence of suspensions and dropping out.[19,20]

Similarly, behavioural disengagement is positively associated with an increased likelihood of early school-leaving[21] and female young people in Australia are more likely to complete Year 12 than male young people.[22]

Other research highlights that while male students are more likely to exhibit disengagement through disruptive behaviour, female students are more likely to internalise their disengagement which is then less noticed by teachers.[23,24]

Thus, while school engagement, academic results or 'turning up' is generally associated with some better outcomes, it is not necessarily an indicator that girls are doing well. This highlights that girls' lower wellbeing can be invisible in a classroom, particularly when compared with the more disruptive, disengaged behaviour often displayed by boys that requires more active management by teachers.

While there is some research on the intersection of gender with school engagement and wellbeing, there is a need for more detailed analysis of how boys and girls differ and whether girls who are emotionally disengaging are not being identified in classrooms and through school engagement and wellbeing programs.

Sense of belonging and feeling supported

One component of engagement is affective engagement, which is related to a student's social, emotional and psychological attachment to school. This is often equated to students' enjoyment of school, sense of belonging and feelings of connectedness.[25]

There is a considerable body of academic work focused on belonging and supportive relationships at school. Research suggests that a sense of belonging at school and the degree to which students report liking school has an important influence on student motivation, engagement, participation and academic outcomes.[26,27,28]

A sense of belonging at school is also associated with better mental health outcomes and lower likelihood of risk-taking behaviours, including drug and alcohol use.[29,30,31] Further, a UK-based study reported that a sense of belonging is associated with increased resilience.[32]

Canadian research has also found that school connectedness is protective against suicidal ideation for male and female students, and protective for suicide attempts for female high school students.[33]

International data shows that children and young people's sense of belonging has decreased since the early 2000s, and this decrease has been particularly large for female young people.[34] This also corresponds with the decline in female mental health and wellbeing.

A sense of belonging at school is generally derived through the school environment, positive and supportive teacher and peer relationships, and personal characteristics such as conscientiousness, optimism and self-esteem.[35]

Students' sense of belonging at school generally decreases as they transition from primary school to high school. This is unsurprising as the structure of high school is substantially different from primary school with a generally bigger school, multiple classrooms and teachers, new friends and often additional responsibilities and homework.[36]

Longitudinal Australian research by the Murdoch Children's Research Institute asked Year 6 students about their concerns regarding the transition to school (including getting lost, losing old friends, homework and remembering equipment). Across all measures, girls were on average more concerned than boys.[37] The students' level of concern reduced once they were in Year 7, however girls were still more concerned than boys.[38] These findings highlight that girls may have started to experience greater worries than boys while in primary school.

This research also found that parents and teachers both expected that boys would have more difficulties than girls settling into high school due to new routines and adjustment to new peers and teachers. However, with respect to settling into school academically, parents were slightly more likely to be concerned about girls than boys, while teachers were much more concerned about boys.[39]

While the process of transitioning from primary school to high school has not technically changed over time, various factors may have increased the pressure on children in recent years. These could include increased pressure on students to perform academically at high school, larger schools and greater mobility of families (therefore higher likelihood that students are going to a new school where they need to make new friends).[40]

Similar to engagement more broadly, data and research suggests that although girls are more likely to be behaviourally engaged and do better academically than boys, girls are less likely to feel like they belong and more likely to feel anxious about school.[41,42,43]

Globally, data shows that students' sense of belonging at school has declined significantly from 2003 to 2018.[44,45]

In 2018, 740 schools and 14,273 students in Australia participated in the PISA survey.[46] In this survey, Australian students had a significantly poorer sense of belonging compared to students across the OECD.[47] Australian students' sense of belonging has declined since 2003 when the proportion of students stating they 'feel like they belong at school' was higher than the OECD average.[48]

At the same time, there are significant gender differences within this decline. Consistent with other research, in 2018 Australian male students reported a greater sense of belonging at school than female students.[49] Thirty four per cent of female students did not feel like they belonged at their school, compared to 30 per cent of male students. Furthermore, 27 per cent of female students reported feeling like an outsider or left out of things at school, compared to 20 per cent of male students.[50]

When considering results over time, Australian female students have experienced a greater decline in their sense of belonging than male students from 2003 to 2018.[51] Female Australian students participating in PISA 2003 were more likely to feel like they belonged than their male peers. Since 2003, the proportion of 15 year-old female students reporting they feel like they belong at school has decreased by 23 per cent (male students: 17% decrease).[52]

This gender difference exists across all related questions except 'other students seem to like me' where there was a similar, although less marked decline for both genders.

Proportion of students responding to positive belonging questions from PISA 2003 to 2018 by gender, Australia
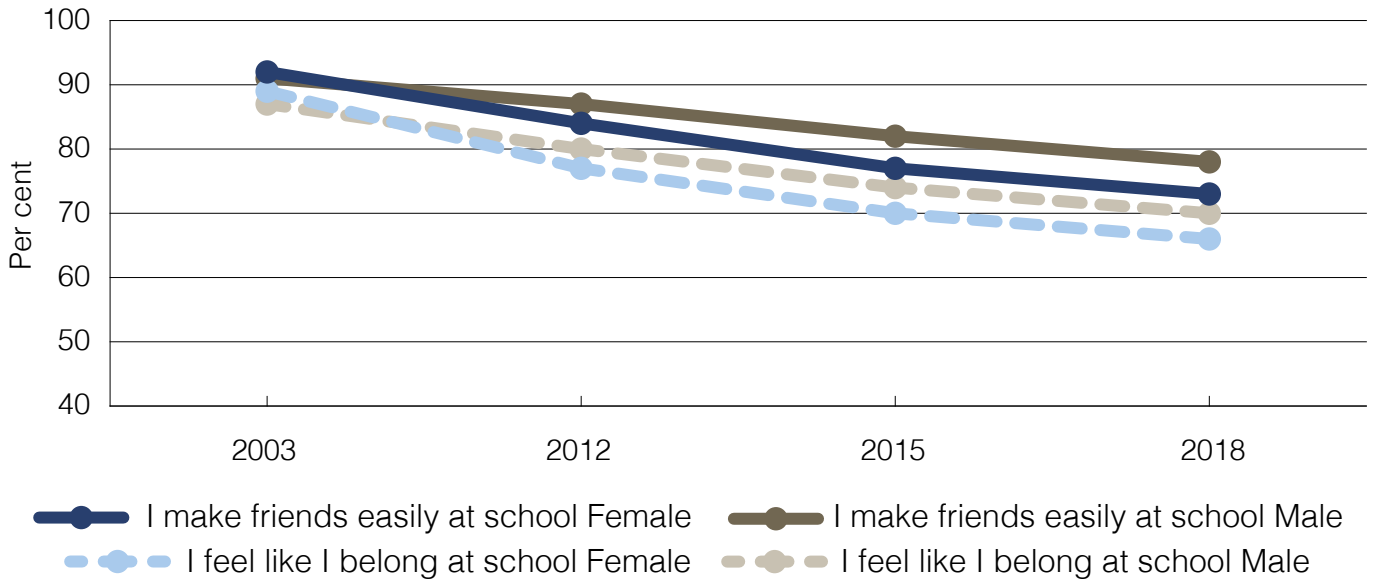
Source: ACER, *PISA 2018: Reporting Australia's Results. Volume II Student and School Characteristics: Data tables* and Bortoli L 2018, *PISA Australia in Focus Number 1: Sense of belonging at school*

Proportion of students responding to negative belonging questions from PISA 2003 to 2018 by gender, Australia
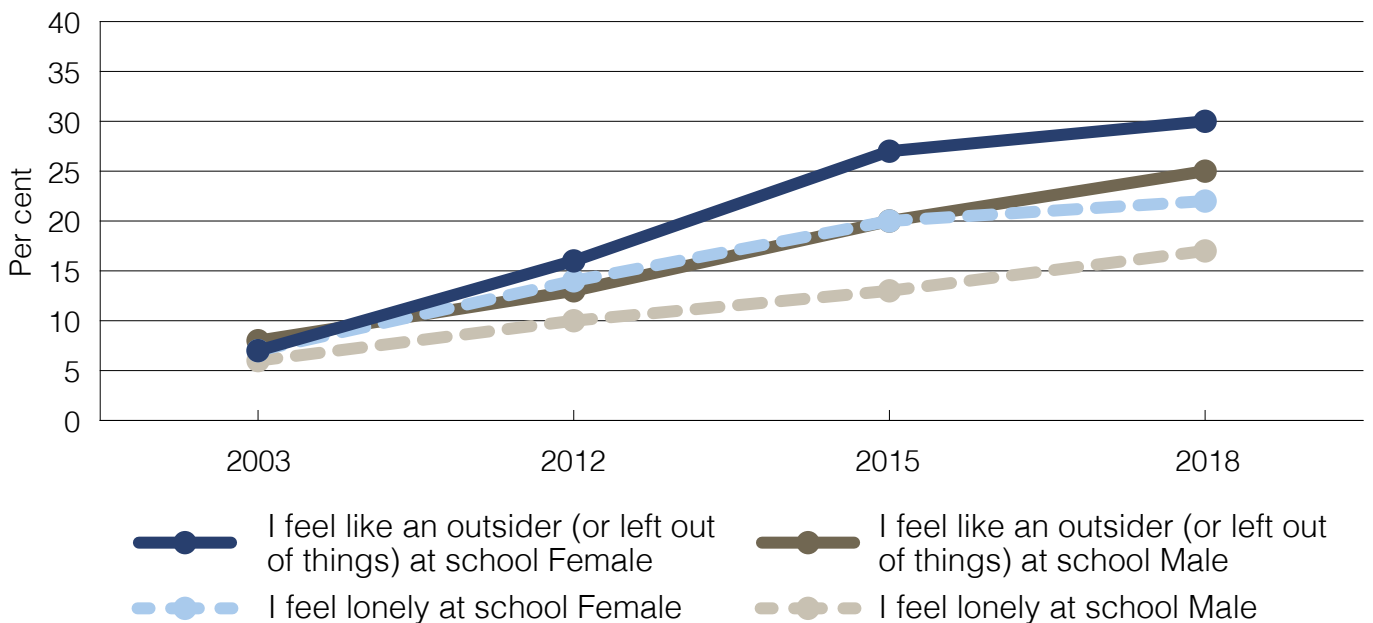
Source: ACER, *PISA 2018: Reporting Australia's Results. Volume II Student and School Characteristics: Data tables* and Bortoli L 2018, *PISA Australia in Focus Number 1: Sense of belonging at school*

Note: The values for 2003 in both graphs were determined from the graph in Bortoli L, PISA Australia in Focus Number 1: Sense of belonging at school and therefore may not be accurate within one percentage point. This does not alter the trajectory of the trend.

Therefore, in the last 15 years, 15 year-old Australian students have experienced a significant decline in their sense of belonging at school and female students have experienced a much greater decline than their male peers.

These findings are consistent with the PISA results for New Zealand, where girls show a similar decline over time and compared to boys.[53]

The decline in a sense of belonging at school corresponds with worsening mental health outcomes for female young people. Research shows that a sense of belonging at school is directly associated with mental health outcomes, although the causal direction of this association is not clear and the relationship may be bi-directional (that is, poor mental health may cause a lower sense of belonging and vice versa).[54,55]

While female students are more engaged and often doing better academically than their male peers, they feel a lower sense of belonging, greater stress and experience poorer mental health.

These contrasting findings are consistent with literature on adolescent female wellbeing more broadly, which finds that girls feel increasing pressure to do well academically while also conforming with various gender norms related to social behaviour and appearance.[56,57,58]

The reasons for a decrease in a sense of belonging at school for young people are unclear. There are a number of interrelated factors that influence a sense of belonging at school, in particular experiences of bullying, social media usage, supportive relationships with friends and teachers and personal characteristics such as self-esteem.[59]

The global PISA 2015 results show that students who were frequently bullied were more likely to feel like outsiders at school.[60] No analysis on the relationship between bullying and sense of belonging has been conducted of the Australian PISA results, however New Zealand has done this analysis, finding a significant association between being bullied and having a lower sense of belonging at school.[61]

Any increase in prevalence or changes in the nature of bullying could therefore partly explain a decrease in a sense of belonging.

Measuring the prevalence of bullying over time is problematic because definitions and mechanisms change over time, therefore there is conflicting data regarding whether experiences of bullying have increased over recent decades. However, the emergence of online or cyberbullying over recent years has clearly shifted the nature and processes of certain forms of bullying.

The data are not conclusive, however there is evidence to suggest that male young people are more likely to be physically bullied, while female young people are more likely to be bullied online.[62,63] At the same time, research suggests that mental health problems, including anxiety and depression, are more prevalent for young people who reported that they had been bullied online compared to those who had been bullied offline.[64,65]

There is also some evidence to suggest that female young people are more likely than male young people to internalise the negative effects from bullying and through this experience lower self-esteem and anxiety.[66,67]

There is limited research directly on the impact of online bullying on a sense of belonging at school. A large study in Israel, has found that online bullying through WhatsApp in the school environment can negatively impact a sense of belonging at school.[68]

Bullying more broadly is discussed in the **Bullying** section.

The recent increase in social media usage for teenagers is considered another possible factor in the decline in a sense of school belonging.

The Commissioner's 2019 Speaking Out Survey found that the majority (88.9%) of WA high school students have their own mobile phone.[69] This means that young people are not only more connected, but their social interactions are less visible to parents, carers and teachers.

The rate of change in social media forms and teenage usage is so rapid that it makes it difficult for peer-reviewed research to be conducted and published in a timely manner. Thus, many published studies have been conducted with data collected prior to 2015 limiting the current relevance of the conclusions.

Nevertheless, evidence to date suggests that social media has contradictory effects on a sense of connectedness, sometimes providing opportunities for enhanced connections and sense of belonging, but also increasing the risk of ostracism, loneliness and reduced self-esteem.[70,71]

Therefore, there is some evidence to suggest that girls are more likely to experience negative effects on belonging because they are more heavy users of social media.[72]

In PISA 2018, students in OECD countries who reported not being satisfied with life spent the most time on the internet outside of school. Furthermore, the more time students spent on the internet the more likely they were to report feeling sad or miserable. It was also found that there was a greater association between time spent online and negative emotions for girls than boys.[73]

Research based on the 2013 Ontario Student Drug Use and Health Survey found that moderate use of social media (less than 2 hours per day) was related to higher school connectedness, while heavy use of social media (more than 2 hours per day) was linked to lower school connectedness.[74] This study found no significant gender differences in the relationship between heavy use and connectedness. However, they found that one-quarter (25.8%) of female students spent five or more hours per day on social media, compared to 14.9 per cent of male students.[75] Thus, a greater proportion of girls were likely to have lower school connectedness.

Similarly, research in the UK in 2012 found that boys who used social media experienced a stronger sense of belonging to their friendship groups than boys who did not, however this was not the case for girls.[76]

Therefore, evidence suggests that social media may be negatively impacting girls' sense of belonging at school, although more research is needed.

Research shows that students' relationships with their teachers and peers support a sense of belonging at school. There has, however, been less research considering whether this effect is stronger for male or female students.

A meta-analysis of research considering what factors influence school belonging found that teacher support was one of the strongest predictors of school belonging, while parent and peer support were also important.[77] This study did not consider gender in any detail.

A recent analysis of the 2018 PISA results found that of school-level factors, teacher support had the strongest relationship with student wellbeing. This included, showing an interest in student's learning, giving extra help when students need it and continuing to explain until all students understood. These attributes were associated with better academic achievement, predisposition to cooperation and appeared to reduce anxiety. This data was not analysed by gender.[78]

A less recent review of 133 academic papers found that relationships with teachers and peers within school were the most critical component for student mental health, although this analysis did not consider gender.[79]

German research with 986 secondary students (aged 11 to 18 years) found that school support (in the form of school climate, teacher support and school attachment) was protective against peer victimisation and the protective effect of school support increases as young people age. In this study, parental support had the most protective impact on young (11 to 14 years) female adolescents.[80]

There has been little research considering whether girls' declining sense of belonging is perhaps related to their friendships or perceptions of social support. Research does show that girls' friendships have less stability than male friendships[81,82] – which may be affected by the transition to high school. Perhaps girls' relationships with their teachers or classmates have deteriorated over recent years due to other social processes (including social media and sexualised bullying)? These topics are outside the scope of this paper, however would be worth exploration.

Positive personal characteristics, such as conscientiousness, optimism and self-esteem, are also strongly associated with school belonging.[83] Therefore, if individual characteristics, particularly self-esteem, are being eroded through other social processes then a sense of belonging will likely also decrease. This will be explored further in the following sections.

Academic outcomes and stress

Research has shown that girls are more likely to do well in language-based subjects and humanities, while boys are more likely to do well in science and maths.[84] However, global PISA results have shown that in a number of countries girls (aged 15 years) are now doing better than boys in maths and science, although there is a significant disparity between countries.[85]

In Australia, girls consistently do better in reading, while boys do marginally better in maths and science. There has been little change in the gender gap across all three domains since 2009, although across all three domains there has been a drop in performance for both boys and girls.[86]

Similarly, recent National Assessment Program – Literacy and Numeracy (NAPLAN) results for WA show that a higher proportion of female than male Year 7 and Year 9 students achieved at or above the minimum standard in reading across all years since 2008. While in slight contrast to the PISA results, in numeracy a marginally greater proportion of female Year 7 and Year 9 students than male achieved at or above the minimum standard across most years from 2008.[87]

Other research considering the improvement in girls' academic performance from the 1980s to the 2000s found that the most important factor was the change in girls' expectations regarding attending post-secondary education.[88]

Thus, data and research show that female students are generally more engaged and do better academically than male students.[89] At the same time, more female students than male students experience stress and anxiety at, or about, school and schoolwork.[90]

In the Commissioner's 2019 Speaking Out Survey, a significantly higher proportion of WA female Year 7 to Year 12 students than male students reported feeling pressure due to their schoolwork, with 38.7 per cent of female students feeling a lot of pressure, compared to 20.6 per cent of male students.[91]

Results from the Mission Australia 2020 survey showed that female 15 to 19 year-olds were much more likely than their male peers to be concerned about coping with stress (55.5% of female young people were extremely or very concerned about coping with stress compared to 24.8% of male young people). Similarly, 40.5 per cent of female young people were extremely or very concerned about school or study problems compared to 21.4 per cent of male young people.[92]

Data from a longitudinal representative study in the Netherlands (from 2005 to 2017) found that an increase in academic stress was significantly associated with a decrease in emotional wellbeing – although it was not clear that the increase in stress caused the decrease in wellbeing.[93] This study did not report gender differences.

A study with 81 students in early adolescence (Years 7 and 8) found that perfectionism was correlated significantly with rumination and worry and depression.[94] This study was not able to analyse data by gender due to the lower sample size.

International evidence from a multi-country study suggests that schoolwork pressure has increased from 2002 to 2018 and that this is related to a small increase in psychosomatic health complaints and a reduction in life satisfaction for adolescents, particularly in higher income countries. This study found that girls had a higher risk of psychosomatic health complaints and lower life satisfaction than boys.[95]

There is little definitive data and research which explains why so many female young people feel anxious and stressed at and about school, even while they are doing well.

Qualitative research suggests that girls experience a higher level of stress than boys because they feel the contradictory pressure to succeed and perform academically, while at the same time conforming with gender roles which place significant burdens on girls regarding their appearance and behaviour.[96,97,98]

Survey research in the UK with 549 students aged 14 to 16 years considered the link between gender roles and engagement and achievement at school. The researchers concluded that the majority of academically at-risk girls conformed to current norms of femininity, which included the importance of looking good, being thin and desirable, while at the same time endorsing 'masculine' norms of being in control and exhibiting extreme self-reliance. The authors surmised that these girls felt pressure to conform to feminine beauty ideals, while 'striving for an appearance of strength by keeping problems to themselves and disconnecting from others emotionally'. This group of girls was found to be the most prevalent and represented almost one-half (49%) of the participants.[99]

Other research suggests that gendered social norms place greater pressure on girls to try hard and succeed. In particular, girls are more likely than boys to feel a sense of responsibility to succeed or be 'good enough'. In contrast, boys are more likely to display a low degree of responsibility-taking and to aim for 'effortless' achievement.[100,101]

In one study, both boys and girls agreed that girls took more responsibility, yet not taking responsibility was seen as an aspect of being confident, independent and relaxed.[102] In this study one boy noted: 'Guys take less responsibility in society than girls. They have better self-confidence just because they are guys and have been favoured. They kind of feel they are better'.[103]

School and classroom type

There has been ongoing discussion considering whether single-sex schools provide a benefit to female students with respect to academic achievement and general wellbeing.[104]

Determining whether single-sex schools have different academic and wellbeing outcomes for male and female students is complex, as single-sex schools are not only more likely to have students from higher socio-economic cohorts, but they are also often more prestigious, religious and/or selective in their intake and recruitment.[105]

Several studies have suggested that single-sex schools or classrooms are beneficial for girls' wellbeing and academic achievement, possibly because they potentially reduce the impact of gender stereotypes on student attitudes and engagement.[106,107,108] However, there is also contradictory evidence which shows no impact of single-sex schools on academic achievement.[109]

Australian research found that while students in single-sex schools are more likely to outperform students in co-educational classes (after controlling for socio-economic status), over time there was no value-add in mathematics achievement and a decline in the reading gap for single-sex schools compared to co-educational schools in Years 3, 5 and 7.[110] However, this data is primarily for primary school (and the first year of high school in some states at the time), where many students have not gone through puberty and are less exposed to the impact of gender-based stereotypes, behaviours or expectations.

A NSW study on the value-add effects of individual and school factors has found that single-sex schooling had positive effects on academic achievement, although they did no analysis regarding mental health and wellbeing.[111]

Research in South Korea took advantage of a natural experiment, whereby students are randomly assigned to schools, including single-sex and co-educational. This study found that pupils in single-sex schools outperformed their peers in co-educational schools in mathematics, English and Korean.[112] Furthermore, they analysed data from schools that had changed from single-sex to co-educational (by grade), finding that for girls, exposure to co-ed classrooms led to significant negative effect on achievement. While for boys, classroom exposure had negligible impact, however school-level exposure to a co-ed environment had a negative impact.[113]

Another natural experiment study was conducted at a high school in Switzerland, where the 'school board randomly assigns incoming female students to coeducational and single-sex classes'.[114] The data cover 808 students from the years 2001–02 to 2008–09. They also conducted a survey with 213 female students enrolled in 2010.[115]

This study found that single-sex classes had a positive effect for girls on mathematics achievement, but not languages (German). In addition, the positive effect was larger if the teacher was male. They also reported that girls in single-sex classes had greater confidence in their own mathematics skills than those in mixed classes.[116]

Recent research in Turkey found that school engagement was higher in single-sex schools for girls than in single-sex boys' schools and co-educational schools.[117]

Another study using data from the Longitudinal Surveys of Australian Youth found after controlling for individual and other factors, students from single-sex schools on average had higher tertiary entrance ranks (TER) than those from co-educational schools, although the analysis showed that student individual factors had the most impact on TER scores.[118]

There are fewer studies considering mental health and wellbeing as opposed to academic achievement.

Analysis of the 2018 PISA data for New Zealand found that 'boys at single-sex schools had the highest overall sense of belonging, then girls at single-sex schools followed by students attending coeducational schools'.[119]

Research in the UK reported that while female young people in single-sex schools had similar levels of self-esteem and body image perceptions to those in co-educational schools, they had a greater perception of social support which acted as a protective factor.[120] Although, another study found the strong relationship between self-esteem and body dissatisfaction was not moderated by school type (single-sex or co-educational).[121]

Australian research with 10,076 students from prestigious single-sex schools in Queensland found no significant difference between the self-confidence (self-efficacy) of the boys and the girls in these schools. This study also found that girls in single-sex schools 'derived just as much confidence from participating in team sports' as boys.[122] While this study did not consider co-educational schools, it suggests that girls in single-sex schools may have higher levels of self-confidence than girls in co-educational schools (as girls overall have been shown to have less confidence than boys).

Taking all these studies into consideration, the data remain inconclusive. This is driven by the many intersecting factors that appear to have a greater influence on academic and wellbeing outcomes, such as parental and school support for learning and wellbeing.

What do female young people say about school engagement?

There has been limited qualitative research asking female young people about school engagement or belonging.

A recent Australian study asked students in Year 6 about a sense of belonging at school and the project tracked 16 of these students for 18 months across the transition to high school. This study found that in Year 6 the students (both boys and girls) mostly associated school belonging with being part of the school, the classroom and friendship groups ('being sports captain', 'being a friend') and doing school activities ('doing jobs for teachers', 'helping other classes out').[123]

However, once the students moved to high school their sense of belonging focused on their friendships and the need to 'fit in'. For male students this was about what they do with their friends ('they play sport with you'), whereas for female students it was about emotional support ('being listened to and understood').[124]

The students also discussed what 'not belonging' felt like and talked about feeling lonely, worrying about what other people think and not being confident.

"...if you belong at a school you feel comfortable and feel safe and don't feel embarrassed...you feel comfortable talking to your friends about a problem and feel like they accept you, and that you belong." (female)

"You'd feel lonely – alone. Then you wouldn't have anyone to go to for help or to play with. You'd just be left alone." (female)

"You feel like you are the wrong one and don't fit in." (female)

"You worry a lot about what others think and say." (male) [125]

The authors concluded that students saw having a sense of belonging as critical for their wellbeing, both socially and academically.[126]

There has been some qualitative research internationally exploring students' experiences of schoolwork and stress.

A large Swedish qualitative study with 29 focus groups of male and female young people aged 16 to 19 years reported that both the boys and girls agreed that girls felt greater pressure from schoolwork. Some of the female respondents noted:

"I think girls put a greater pressure on themselves. Maybe it's easier for guys to feel confident..."

"It feels like we have to prove we're good all the time." [127]

When discussing a sense of responsibility and feelings of confidence, another female participant commented:

"Guys don't have to study as much as we have to. They will get a better wage in the end anyway." [128]

Similarly, a participant in a Canadian study with 51 self-identified 'smart girls' in high school stated:

"Teachers like smarter boys more than smarter girls, because they [smart boys] aren't expected." [129]

In a mixed methods study with 212, 14 to 15 year-old students in Sweden, 49 male and female students were interviewed. These students reported feeling stress when they were under time pressure at school, when they had tests or had lots of homework.[130] In the qualitative interviews, a number of the girls reported psychosomatic stress symptoms such as headaches, stomach aches and also low sleep quality. One girl noted:

"... it's more like I can't concentrate. But I sleep badly when I'm stressed. I woke up around 5am every day last week. Or I stopped waking up at 5 am because I began to take pills to sleep better." [131]

There was also general agreement by both boys and girls that girls get more stressed and that girls apply more effort to their schoolwork and boys were happier with lower grades.

"I guess we [the boys] have a cooler attitude, we can take it easy and be relaxed when looking at things, while all the girls are really stressed and make a test into a really big thing, which is so unnecessary since it's, well, just a test."

Another girl said:

> *"The girls, we can work as much as we want, but if the guys work too much then they are, like, swots. And they're supposed to be smart in general and know everything anyway..."* [132]

The views of the participants in this study support the findings of other research that boys are more likely to aim for 'effortless achievement' and can be less concerned about getting good grades. [133]

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Relationships, connection to community and support

- Research suggests that parental support (particularly maternal support) is most critical for both female and male young people's wellbeing, however female young people also rely very heavily on their close friends.

- Data suggests that female young people perceive a greater decline in the quality of their relationship with their parents than male young people as they transition from primary school to high school (or through puberty).

- Evidence suggests that girls have very close friendships, which also have a high risk of breaking down and a correspondingly high risk of distress when friendships do break down.

- Relationships with other adults (particularly teachers) appear to be more important for girls' than boys' mental health and wellbeing, although more research is needed.

- Female young people are also more likely than male young people to ruminate on problems which has been shown to increase depressive symptoms.

Research shows that positive and supportive relationships with family, friends and other adults, such as teachers, are essential for young people's wellbeing.[1,2,3]

A meta-analysis of 246 studies found a small but positive association between social support and wellbeing (academic achievement, conduct problems, psychological adjustment). This analysis found that social support was most strongly associated with self-concept (self-esteem, perceived competence etc.). The studies that considered gender suggested that the association between social support and wellbeing is stronger for female than male children and young people.[4]

Evidence suggests male and female children generally manage and develop relationships and seek support in different ways from a young age. Research shows that female children generally exhibit more pro-social behaviours and are more likely than male children to develop close communicative relationships with high levels of self-disclosure. These differences increase as children age and are likely influenced by both biology and the social environment.[5]

A large representative study in Belgium explored adolescents (15 to 19 years) social support and mental health across two timeframes (2008 and 2013). This study found that boys reported significantly less psychological distress, anxiety and depression than girls and, similar to other research, there was an increase in depression and anxiety from 2008 to 2013 for girls. The authors further concluded that young people who were dissatisfied with their social contacts and had poor social support experienced more psychological distress, anxiety and depression.[6] However, they did not analyse this relationship by gender.

A meta-analysis of multiple studies from 1983 to 2014 on the impact of social support on child and adolescent depressive symptoms concluded that general social support was associated with positive benefits in relation to depression. In addition, the authors determined that results were similar across male and female young people.[7]

In this meta-analysis, support from family members and peer groups had stronger benefits, followed by teachers and then close friends.[8] Although, other research has found that male young people find stronger support from peer groups and female young people from close friends, therefore, a gendered perspective may provide different results.[9]

Parenting

Communicative, warm and consistent parenting is associated with positive child and adolescent developmental outcomes.[10,11,12] As children enter their teenage years the relationships with their friends and peers become more central to their lives, however positive relationships with parents and carers are still essential.[13]

Increasing parent-child conflict is normal during adolescence as young people test boundaries put in place by parents, and the capacity of parents to maintain connection and communication even during conflict is critical to young people feeling supported.[14]

There is good evidence to suggest that parental support may be more important for mental health than peer relationships and school connectedness.[15,16]

Research using data from LSAC highlights that even as children age and strive for increased independence, parents remain an important support. The researchers asked the participants, "who would you seek help from if you had a problem and wanted to talk about it" with the following results.[17]

Proportion of children and young people seeking help from parents and friends by age group and gender, per cent, Australia

	10 to 11 years		14 to 15 years	
	Female	Male	Female	Male
Parents	92.0	92.0	63.0	70.0
Friends	68.0	54.0	83.0	63.0

Source: Gray S & Daraganova G 2017, Adolescent help-seeking, in LSAC Annual Statistical Report 2017, Australian Institute of Family Studies

Parents were a critical source of help for the majority of children aged 10 to 11 years, however by age 14 to 15 years, parents were no longer the most common source of help for girls (63% sought from parents compared to 83% sought help from friends). Further, at all ages, but particularly 14 to 15 years, girls were significantly more likely than boys to rely on friends for help with problems.[18]

Analysis of the Commissioner's 2019 Speaking Out Survey suggests that female young people in Years 7 to 12 experience a significant decline in the quality of their relationships with their parents, which is not apparent for male young people.

In primary school, 70 per cent of Year 4 to Year 6 children (male and female) say it is very much true that they can talk to their parents about their problems. In high school, there is a particularly large decline in the proportion of female students saying they can talk to parents about problems (female: 44.0%, male: 57.5%). Similarly, in primary school 56.9 per cent of female children say it is very much true that there is a parent or another adult where they live who listens to them (male: 52.7%), while

in high school this declines to 44.4 per cent of female young people, while for male young people it increases to 57.5 per cent.[19]

Data from the Young Minds Matter survey suggests that parents of female young people may often not be aware of their child's psychological state. In the Young Minds Matter survey, almost double the proportion of female young people aged 16 to 17 years met the diagnostic criteria for major depressive disorder based on their own responses, than on their parent/carer responses (19.6% compared to 10.6%). In comparison, there was a much lower discrepancy between male responses and parent/carer responses (8.2% compared to 5.4%).[20]

There is substantial evidence showing that warm and supportive relationships with parents positively impact young people's mental health and wellbeing, and a smaller subset of research reporting that these effects are stronger for female young people than male young people.[21,22] In particular, there is evidence to suggest that girls need greater intimacy and support from their parents than boys, particularly from their mothers.[23]

A large population-based study with 6,552 Australian participants (aged 10 to 14 years) found that female children and young people who reported 'low emotional closeness to their parents were 2.3 times more likely to report high depressive symptoms than females reporting high emotional connections with parents'. They were also significantly more likely to report depressive symptoms than male children with low emotional closeness.[24]

Analysis of data from the Longitudinal Study of Young People in England (13,539 households at wave two) found that girls with a good maternal relationship had less than half the likelihood of poor mental health than those without (boys had a third lower odds). Similarly, young people (both male and female) who had a good relationship with their father were half as likely as those who do not to have mental health issues. Eating together as a family more than three times a week was also strongly associated with better mental health and higher academic achievement for both boys and girls.[25]

A Canadian longitudinal study explored the impact of parental emotional support on young peoples' (aged 14 to 18 years) self-esteem and psychological distress. As with other studies, the female young people had lower self-esteem and higher psychological distress than the male young people.[26] The study found that maternal emotional support had a significant impact on self-esteem for both male and female young people, however this decreased with age. At the same time, both maternal and paternal emotional support reduced psychological distress at 14, 16 and 18 years.[27]

This study also considered parental coercive control, which they defined as overprotection, over control and abusive intrusion. They found that maternal coercive control had no effect at age 14 years, however had a significant negative effect on self-esteem at aged 16 to 18 years. Higher levels of parental coercive control at all ages increased psychological distress.[28] This study did not perform these analyses by gender.

In a study that did consider gender, German research with 986 secondary students (aged 11 to 18 years) exploring peer victimisation at school and parental support and found that parental support had the most protective impact on young (11 to 14 years) female adolescents. As female young people aged, the positive effect of parental support lessened.[29]

Parents can provide support and comfort, but can also be a source of anxiety, distress and conflict for children and young people. Parenting that is controlling, harsh or inconsistent has been shown to have negative impacts on young people's mental health and wellbeing.[30,31,32]

A meta-analysis of studies considering parenting styles concluded that parenting based on parental warmth, behavioural control (defined as parental monitoring but not harsh control) and autonomy granting was inversely associated with internalising problems in adolescents, particularly depression. The authors were not able to determine whether impacts were different for male and female young people due to the limited number of studies considering gender.[33]

Similarly, another meta-analysis considered the influence of parenting styles on externalising behaviour. The authors concluded that authoritarian parenting (e.g. coercive practices, physical punishment) and restrictive/psychological control were associated with young people developing externalising behaviours (e.g. aggressiveness, behavioural problems, bullying).[34]

The authors of both of these meta-analyses highlighted that additional studies considering whether parenting styles impact male and female young people differently are needed.[35,36]

In recent years, there has also been concern about the impact of 'helicopter parenting' on children and young people's wellbeing. There has been research with university students to suggest that helicopter parenting (variously defined as over-controlling, over-protective, low autonomy parenting) is associated with lower mental health and wellbeing.[37,38] However, there has been limited research conducted with children or adolescents or considering different impacts on male and female children and young people. This is an area that requires more research.

Family conflict also has a significant impact on children and young people's mental wellbeing and evidence suggests a stronger impact on female children and young people.[39,40]

A study with 6,552 Australian young people aged 10 to 14 years found that children living in a family experiencing high conflict were almost five times more likely than young people in other families to have high depressive symptoms.[41]

Another Australian study with 6,837 Year 6 and Year 8 students in 231 schools found that family conflict was associated with female young peoples' drinking alcohol at both age groups, but not male young peoples'.[42]

Further, research suggests that female children and young people may rely more heavily on personal relationships for their sense of wellbeing than male children and young people.[43,44,45] Thus, female children and young people may be more sensitive to parental and family conflict because it has a greater impact on their sense of security and wellbeing than for male children and young people.

There is substantial evidence that supportive parents are essential for young people's wellbeing, and the effect is stronger for female young people. Although more research that considers gender differences is needed.

Friendships

Friendships provide young people with social and emotional support and can be a protective factor against bullying and poor mental health.[46,47] At the same time, attitudes of friends can also have negative influences on a range of behavioural, social-emotional and school outcomes.[48]

Research suggests that young people with positive friendships are less likely to experience depressive symptoms and the effect is stronger for female young people than male.[49,50] In addition, negative affect friendships (friends are mean, wish you had different friends, don't feel safe with friends etc.) can have a detrimental effect on young people's wellbeing.[51]

Data from the LSAC found that the majority (80.0% to 90.0%) of Australian young people aged between 12 and 15 years reported having good friends who they trusted and who they felt respected their feelings and listened to them.[52]

Female respondents were more likely than male to report high levels of communication with their friends (female 12 to 13 year olds: 91.1%, male 12 to 13 year olds: 80.4%) and far more likely to have friends who encouraged them to talk about their difficulties (almost 70.0% of female young people compared to around 45.0% of male young people). A high proportion of female and male young people aged 14 to 15 years reported that they trust their friends (female: 84.7%, male: 86.2%).[53]

Multiple studies have concluded that male and female children and young people generally develop peer relationships via different processes. Boys often build friendships in large groups through "rough-and-tumble play, competitive activity, and organised play" while girls often build close friendships with "prosocial behaviour and cooperation, social conversation and self-disclosure".[54] Therefore, girls are likely to have a smaller number of intimate close friends, while boys are more likely to have a broader range of friends with less deep connections, which are fostered during activities such as sport.[55,56,57] Girls' peer relationships are generally founded on high levels of communication and disclosure of personal thoughts and feelings.[58,59]

The closeness of girls' friendships provides greater possibility of a breakdown in the relationship due to negative experiences or disappointments. Research suggests that girls have less friendship stability – that is, they experience friendship breakdowns more often. Further, girls often feel significant distress when these very close friendships break down.[60,61]

In the Commissioner's 2019 Speaking Out Survey, female high school students were significantly more likely than male high school students to report that they did not have enough friends (female: 17.8%, male: 11.7%). Female students were also significantly more likely to say that they were not so good at making and keeping friends (female: 11.2%, male: 6.2%). Additionally, this result was significantly different from female students in primary school (Years 4 to 6), of whom only 6.5 per cent reported being not so good at making and keeping friends.[62]

More recent research is needed exploring female young people's friendships – particularly considering the transition to high school and taking into account the impact of social media on their close relationships.

A study with 1,313 young people aged 12 to 15 years drawn from three South Australian high schools explored the relationship between bullying, friendships and mental health. This study found that the likelihood of young people involved in bullying (as victims or bullies) having emotional difficulties decreased with an increasing number of good friends.[63] This analysis could not determine the direction of the relationship.

Similarly, the LSAC study outlined above also reported that the likelihood of being bullied halved for young people with strong peer attachment, compared to those with low peer attachment.[64] This analysis was not reported by gender.

In a longitudinal US-based study which considered the impact of different types of social support on high school student's mental health, girls reported they perceived the highest level of support from close friends, then teachers, parents, school personnel and classmates. While boys reported teachers and parents as their highest level of support, followed by friends, school personnel and classmates.[65]

The authors concluded that over time all sources of support were associated with better mental health for girls, whereas the associations were less significant for boys, particularly support from adults.[66]

While evidence shows that friendships are critical for girls' wellbeing, some research also suggests that girls are more likely to use relational aggression in their friendships, including through social exclusion, rumour spreading and stealing friends.[67] More research on this topic is required.

Exclusion from friendship groups (cliques) may be related to a higher likelihood of anxiety or depression in adolescents.

A study in Israel found that adolescents who experienced peer rejection (including being ignored and bullied) were more likely to have psychological distress. Furthermore, girls who experienced rejection were more likely than boys who experienced rejection to have lower potency levels (defined as self-control, self-belief and trust in society/social support[68]).[69]

A Canadian longitudinal study, conducted in the early 2000s with 310 children (aged 11 to 14 years), found that children who were isolated from a clique at ages 11 and 13 years were more likely to experience depression at age 14 years. The researchers also reported that the relationship was mediated by loneliness, that is, children who were isolated from cliques were more likely to feel lonely, which led to feelings of depression. This study did not find any gender differences in these relationships.[70]

Another study using data from the US-based ADD Health longitudinal study (data from 1995/1996) explored whether young people experiencing emotional distress were more likely to be excluded from their friendship groups. They found that girls' friendship groups were 'tighter and more cohesive' and yet distressed girls had a higher risk than boys of being excluded from the group.[71]

Children and young people's friendships are not always a positive influence on their wellbeing.

A longitudinal study with 9,055 young people aged 11 to 16 years in Wales found that for young people with low levels of family support, support from friends was associated with greater likelihood of drug use and worse mental health outcomes, while for young people with high levels of family support, support from friends was associated with positive wellbeing outcomes.[72] The authors hypothesise that young people with a supportive and positive home environment are more likely to have the capability to develop positive and healthy relationships outside of the home environment.[73]

Relationship with other adults

Supportive and positive relationships with other adults outside of the immediate family are also important for young people's wellbeing.[74,75]

Research suggests that positive relationships with non-parental adults support young people's wellbeing by providing them with a sense of value, purpose, identity and attachment to their community. Conversely, negative relationships or experiences (such as discrimination, being treated unfairly or badly) with other adults can foster a sense of worthlessness, powerlessness and negative self-concept.[76]

A meta-analysis reviewing 246 studies into social support and wellbeing (a broad definition including physical health, academic achievement and mental health) found that support from teachers and other school personnel was strongly associated with wellbeing.[77] This analysis did not consider gender differences for this measure.

Similarly, the longitudinal study with young people in Wales found that positive relationships with family and teachers were consistently associated with better mental health outcomes and lower risk of alcohol and drug use. Further, teacher support was associated with a lower risk of mental health symptoms, particularly in those young people with less family support.[78] This study did not perform any analysis by gender.

A longitudinal study in England into school connectedness found that feeling cared for by teachers was associated with fewer depressive symptoms for both boys and girls, but the impact on girls was greater.[79]

In a longitudinal US-based study which considered the impact of different types of social support on high school student's mental health, school support (perceived support from all adult school personnel) was associated with higher self-esteem in girls but not boys.[80]

Another study in the US reported that various aspects of school climate were more strongly associated with wellbeing for girls, than boys. In particular, both parental involvement in school and student-teacher relationships were more strongly associated with better wellbeing for girls than boys.[81]

Thus, there is some evidence to suggest that relationships with other adults (particularly teachers) are more critical for girls' than boys' mental health and wellbeing, however more research is needed.

Connection to community

Feeling connected to community(ies) generates a sense of belonging, which is critical for young people during adolescence. Social and cultural connectedness can encourage a positive sense of identity, the development of respectful and responsive relationships and provides young people with additional support and role models within, and outside, of the family.[82,83,84]

Community connectedness can take different forms, including through sporting activities, religious communities, group activities such as scouts, social connections with people in the neighbourhood or connections to like-minded people on social media. Evidence is limited, but it suggests that different forms of community connectedness may have varying impacts on wellbeing outcomes in young people.[85,86]

Some research suggests that there are gender differences in community engagement and connection, whereby male young people are more likely than female young people to have community connections and a sense of belonging.[87,88]

In the Commissioner's 2019 Speaking Out Survey, WA female Year 7 to Year 12 students were significantly less likely than male to agree a lot with the statement: "I feel like I belong in my community" (female: 23.9%; male: 31.5%).[89]

A study with 1,871 high school students in Italy found that male young people were more likely than female young people to be participating in community social activities including sporting and political organisations. In addition, male participants scored higher than the female participants in having a sense of community.[90]

A study with 98 high school students in a lower socio-economic school in WA found that 28 per cent of female students did not participate in any extra-curricular activities, compared to eight per cent of male students. Two-thirds (67%) of female students did not participate in an individual sport

(athletics, swimming etc.), compared to one-third of male students. This study found that school belonging was higher for young people who participated in extra-curricular activities.[91] It did not assess community belonging.

There have been a number of studies in the UK on the topic of community belonging.

Analysis of the Health Behaviour in School Aged Children (HBSC) study in the UK found that young people with low involvement in their neighbourhood were almost twice as likely to report poor health. They defined 'neighbourhood involvement' as involved in youth clubs, sports, churches and other clubs or organisations.[92] They did not analyse this data by gender.

Another UK-based study asked young people whether they felt connected to the adults in their neighbourhood and found that young people with connections were more likely to have better subjective wellbeing. This analysis was not performed by gender.[93]

In contrast, a longitudinal study investigating the impact of social support on mental health and educational attainment found no relationship between community activities (participation in community groups/volunteering etc.) and mental health or academic achievement.[94]

A meta-analysis of 21 studies conducted from 1992 to 2012 considered whether community factors influenced depression in school-aged children (aged 4 to 18 years) and concluded that community connectedness was not directly associated with depressive symptoms.[95]

A longitudinal study in New Zealand with 1,774 children and young people aged nine to 16 years found that participants who were socially connected[96] at the beginning of the study were less likely to be lonely mid-way through the study, which then predicted a reduction in depressive symptoms at the end of the study. However, they also reported that the relationship between loneliness and depression was not significant for female young people.[97]

Another study explored whether neighbourhood social capital and general social trust was associated with psychosomatic health symptoms. The study found that young people (aged 13 to 18 years) who had low social trust were three times more likely than those with high social trust to be depressed and have a number of psychosomatic symptoms and twice as likely to have musculoskeletal pain. It should be noted this study could not determine causality.[98]

There is some evidence to suggest that female young people may feel less connected to their community (lower community belonging) than their male peers. And, while the data is limited, some evidence suggests that this may impact their mental health and wellbeing.

More research on this topic is needed.

Coping strategies and help-seeking

Seeking help and support is important for young people who have health issues or are managing stress and worries. Coping strategies are also important, and as children go through adolescence, they can shift from reliance on parental/adult support to increased self-reliance and support from friends or other services.[99,100]

Coping behaviours commonly used by young people include help-seeking, active-coping (e.g. addressing the issue directly), emotion-focused behaviours (including ruminating) and avoidance/distractive coping (e.g. ignoring the problem and doing something else).[101]

In general, research shows that women will seek help for mental health concerns more often than men.[102,103] Research with young people similarly suggests that female young people are more likely to seek help and use multiple sources of support.[104,105]

Asking for help can be informal, through quality interpersonal relationships including friends, neighbours and teachers or through formal systems, such as school psychologists or Kids Helpline.

Research using data from LSAC found that male and female children aged 10 to 11 years were most likely to seek help from their parents (92%) and friends (girls: 68%, boys: 54%). By age 14 to 15 years, friends were the most common source of support for girls (around 75%), while only 63 per cent of girls would seek help from a parent. In contrast, boys aged 14 to 15 years were still more likely to seek help from a parent (70%) than friends (around 58%).[106]

Of young people with symptoms of depression, girls were more likely than boys to seek help and a greater proportion of girls sought formal help, with 52 per cent of girls (45% of boys) seeking help from teachers, health professionals etc. and 37 per cent of girls (27% of boys) seeking help online or through phone helplines.[107]

In terms of influences on help-seeking, an Australian study of around 38,000 young people who had accessed headspace services for the first time between 2013 and 2014, reported that the influence of family on help-seeking behaviour was high, particularly for seeking in-person services, while the influence of friends was low. For female young people, the influence of friends was strongest when they were aged 12 to 14 years and declined with age.[108]

There is also some evidence that school-based health care is popular with students, particularly girls, and can provide important mental and reproductive health services.[109] At the same time, as discussed in the general health section, a small qualitative study with school professionals in three secondary schools in Sweden found that although girls were more likely to seek help within the school environment, boys' problems were more likely to be followed up with an investigation or referral.[110]

Importantly, research suggests that young people who have higher health literacy have greater health-related quality of life.[111] Therefore, support through education and access to high-quality information and services is essential.

Considering barriers to seeking help, there is limited data on whether female young people experience different barriers from male young people.

A meta-analysis of qualitative and quantitative studies considering barriers to mental health support for young people reported that in the quantitative studies the most common barriers seeking help for mental health concerns were worries about stigma, discomfort talking about mental health and a preference to rely on themselves. The top-rated concerns in the qualitative studies were stigma and concerns about confidentiality and trust.[112] This analysis did not consider gender.

Other coping behaviours include emotional responses (rumination) and distractive coping.

Female young people are more likely to seek support to cope with challenges through their relationships and/or to ruminate (brood, think or worry about the problem), whereas boys are more likely to use distractive coping methods which involve avoiding the issue and focusing on something else, like physical activity.[113,114]

There is some evidence to suggest that distractive coping may be better for mental health than emotion-based behaviours, such as rumination.[115] Rumination is strongly linked to depression, particularly for adolescent girls.[116,117,118]

Self-compassion and resilience are important protective factors in coping with stress. In particular, evidence suggests that self-compassion can moderate the relationship between rumination and stress in young people.[119,120] At the same time, research has found that female young people (particularly older adolescents) have less self-compassion and less resilience than male young people.[121]

Data suggests that female young people are more likely to seek help than male young people but are also more likely to ruminate on a problem and internalise their feelings.

There has been limited research considering whether support is provided when female young people seek help, or whether the support provided to female young people is effective.

What do female young people say about relationships and support?

There is limited qualitative research exploring female young people's views on their relationships, support networks and connections to community.

Focus group research in Northern Ireland explored 62 young people's (aged 13 to 17 years) views on family support in the context of illicit drug use.[122] These participants recognised the parent-child relationship has a major role in protecting young people from substance use.

> *"If it's good [the relationship], you're less likely to take drugs." (female)*

The participants particularly noted that parents and children spending time together was critical.

> *"Some people don't spend time with their parents really. They go into the house and just go straight to their room and they (the parents) don't be there, so they don't notice if there's anything wrong with them." (female)*

In this study, there was a general view that girls tend to have better relationships with their mothers than their fathers.

> *"Like, you can talk to your mum about like girly things but like, if it was just your Dad, I don't think, I couldn't actually tell my dad any of my problems. I'd just be sat there like, hiya. I dunno, you can tell your mum all the wee girly things and stuff but you couldn't, I couldn't talk to my dad about any of the problems I have. I just wouldn't know where to start."*

The participants more generally noted that fathers are more likely to be strict and over-protective – especially of daughters.[123]

The participants also noted that parenting that was 'aggressive, strict, controlling or abusive' may result in children being more likely to engage in substance use. At the same time, parenting that is 'too lenient' could also result in children getting "involved with the wrong sorts of people".

> *"They have to be halfway between; they can't be too lenient, they can't be too strict. They have to talk right to their kids and they have to offer them support."* (female)[124]

A study in Sweden asked fifteen 17 year-old girls what made them feel less stressed. They spoke about talking to someone they trusted, including parents, friends, siblings or a partner.

> *"When I experience that something is difficult, I find talking with my mum very helpful and easy and it usually feels better afterwards."*
>
> *"How I'm feeling inside, I talk to my friends about that... it feels as if my friends... those who are really close to me, know me much better than my parents do... one feels that if something happens, my friends are there to support me, they will pull me up again."*[125]

Few qualitative studies exploring young people's friendships were found.

A small qualitative UK-based study with 30 students considered their transition from primary school to high school. This study found that the girls were more fearful than boys of losing their 'best' friends during the transition:

> *"I don't know. I think she will make other friends but I don't think anymore that she'll leave me when we go to Parkside because she has been my best friend, one of my best friends since I was little. So I don't think she would do that."*[126]

Focus group research in Spain explored 80 young people's views of stress and social support. The participants were aged 15 to 16 years and the focus groups were both single gender and mixed gender. The participants discussed interpersonal relationships as being both a source of stress and also their main form of support.[127] The quotations below are from the female participants.

A number of girls noted seeking support from their family, including their sisters:

> *"I like, for example, asking for advice to my sister or my parents, you know? Because I know they are older and have probably been through similar things, then they help you even if they don't agree with you..."*

The type of support these participants valued was emotional support, being empathetic and being there.

> *"To me as long as you are by my side ... serves me and support me even if you know? if you have to cry I'm with you, if you wanna laugh, I laugh with you."* (female)

The responses that they did not see as supportive was when people try to minimise their feelings.

"If they don't really know how you feel and... you say 'I'm depressed I do not know why' and they answer: 'Come on, it's not a big deal!'" (female)[128]

In an Australian mixed methods study considering girls' experiences of support from friends, the researchers interviewed 14 girls in Year 7 and 17 girls in Year 9 and found that most were happy texting/contacting their friends online if they needed help with their homework, whereas many preferred to talk about emotional worries face-to-face.[129]

A number of the girls expressed concern about their ability to trust their friends in online conversations:

"I trust them but like, you never know when they might turn on you and use things against you."

"There's been times where people have told other people, because it's so easy to screenshot it and forward it to other people."

However, others reported that online communication with their friends strengthened their relationships, because 'you can talk to them more often'.[130]

There is limited other qualitative research which provides insight into female young people's experiences of social support and connection to community.

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Chapter 6
Equity in everyday life

- A significant minority of male young people hold gender-stereotypical views of women's and men's roles in society.

- Across all forms of media (including movies, television, music videos and social media) girls and women are commonly presented in a way that prioritises their appearance over their abilities and objectifies and sexualises women's bodies.

- Evidence shows a direct relationship between being exposed to media that objectifies girls and women and internalising beauty ideals, which in turn can lead to low self-esteem, self-objectification, body surveillance, depression and eating disorders.

- Many girls continue to experience everyday inequality through the chores they are assigned at home, their parents' rules regarding going out at night, expectations regarding doing maths or science and being sexually harassed on the street.

- Many boys and young men continue to see their future as encompassing a single goal of getting a good job to provide for their family, while girls and young women have more complicated ideas of how their future lives will work trying to have a career and manage a family.

Gender equity in Australia

While there has been significant progress in improving gender equity in Australia over the last 50 years, there are still many areas of everyday life where inequality remains for Australian women and girls.

Australia's World Economic Forum global ranking of gender equality has dropped from 15th in the world in 2006 to 50th in 2021.[1]

Some key statistics highlight that Australian women and girls do not yet have equal opportunities to realise their full potential:

- women aged 15 years and over are almost three times more likely than men to experience physical or sexual violence by a partner (17% of women compared to 6% of men).[2]
- one-half (53%) of women have experienced sexual harassment during their lifetime, compared to one-quarter (25%) of men.[3]
- the Australian gender pay gap remains high and is currently at 14 per cent. WA has the highest gender pay gap at 22.7 per cent.[4]
- women are still more likely than men to work casually (women: 27.9%, men: 22.2%), part-time (women: 32.0%, men: 10.9%) rather than full-time (women: 40.1%, men 66.9%).[5]

Gender inequality remains embedded in our social institutions, norms and practices.

In the World Economic Forum global rankings, Australia is ranked number one for women's educational attainment in 2021 (and in 2006). However, Australian women's economic participation and opportunity ranking has decreased from 12th in 2006 to 70th in 2021 and political empowerment has decreased from 32nd to 54th out of 156 countries.[6] Notably, New Zealand is ranked 4th overall.[7]

Much of the structural inequality and stereotypes within society are related to the traditional model of the heterosexual family that women are responsible for the caregiving and men responsible for providing financially for the family (breadwinning). There has been significant change to this model over time as women have entered the workforce, however the basic gendered assumptions about work and care remain. In particular, stereotypes regarding women's role as carers and men's role as breadwinners are still highly persuasive.[8,9 10]

These gendered norms also reflect the current reality that Australian mothers will still generally reduce their working hours when they have children, while fathers will often stay in paid work throughout their adult life.[11] Furthermore, even when both partners in a heterosexual couple are working full-time, the male partner is less likely to do the unpaid work around childcare and the home and will have more uninterrupted leisure time.[12]

In recent decades in Australia, the most common arrangement for heterosexual couple families with children is the 'modified' male breadwinner model,[13] where the father works full-time and the mother works part-time to enable her to still perform the majority of the caring and domestic work.[14,15]

Although most Australian women are doing paid work and can have highly successful and fulfilling careers, there is still a significant gender gap in how families manage care (including care of the elderly and people with disability).

These gendered understandings and social practices continue to limit girls' and young women's ability to participate fully and equally in society in comparison to boys and young men.[16]

In 2016, Plan International and Our Watch commissioned a survey of 600 young Australian women and girls aged 15 to 19 years. This survey found that:

- 69 per cent of respondents believed 'inequality between men and women (including girls and boys) is still a problem in Australia today'
- only eight per cent 'believed that they were always treated equally to boys'
- 56 per cent 'agreed with the statement that girls are sometimes, seldom or never valued for their brains and ability more than their looks'
- 14 per cent felt they 'always received the same opportunities' as their male peers
- 26 per cent of respondents agreed that 'girls always feel safe on the way to school'.[17]

Children are generally socialised into gendered behaviours from a very young age. This process is not simply about pink and blue clothes or different types of toys, but also how adults interact with children as they are growing up.

Research has highlighted how teachers in pre-school use gendered language and rules which normalise different behaviour for boys and girls. This can include reprimanding girls who are noisy or disruptive, while not reprimanding boys for similar behaviour; or telling girls to be 'nice' or not 'too rough', but letting boys play more boisterously; and complimenting girls on their appearance and boys on their strength.[18,19]

Similarly, early exposure to gendered activities or gender stereotypes in media (e.g. play with dolls or cartoon characters) have implications for children and young people's views on gender norms.[20,21] Media portrayals of stereotypically male and female characters in children's books and movies (i.e. superheroes and princesses) have been shown to increase gendered behaviour of children.[22,23]

A 2020 review of mainstream media's (television news and programs) impact on children and adolescents' views on gender, found that there is a small but significant effect between frequent television viewing and traditional gender roles attitudes, including the importance of appearance for girls and women.[24]

Thus, girls are socialised into a world where they are expected and rewarded if they behave in an appropriately 'feminine' manner, which includes not expressing anger, avoiding conflict, being 'nice' and looking attractive.[25] While boys are socialised to exhibit masculine traits of limiting emotional expression, being strong, tough and ideally dominant.[26]

These socialisation processes embed gender stereotypes and ideas of appropriate behaviour for boys and girls and men and women, which influence young people's attitudes to gender equality.

Attitudes to gender equality

In 2017, Essential Research conducted an Australian survey about gender equality with 817 girls aged 10 to 14 years and 925 girls aged 15 to 17 years. Further data was included from a separate cohort of young women aged 18 to 25 years.[27] The results show that in general, the majority of girls and young women do not feel girls are treated equally in society.

Girls aged 10 to 14 years are much more likely than young women to report that girls are always treated as equals across various locations.

Proportion of girls who believe that 'girls are always treated as equals' by location and age, Australia, per cent, 2017

	10 to 14 years	15 to 17 years	18 to 25 years
At home	61.0	36.0	34.0
At school	45.0	29.0	32.0
On TV	22.0	8.0	24.0
In magazines	16.0	7.0	22.0
In sports	16.0	6.0	18.0

Source: Plan International 2017, *The Dream Gap: Australian Girls' views on gender equality: Plan International Australia survey of girls aged 10 to 17 years old*, Plan International

In particular, girls aged 10 to 14 years are much more likely to feel that girls are treated as equals at home and at school than those aged 15 to 17 years (at home: 61% compared to 36%; at school: 45% compared to 29%).

This survey reported that 81 per cent of girls and young women agreed that there is more attention on girls' looks than boys' looks.[28] Further, the respondents' confidence generally decreased as they aged (10 to 14 years: 56%, 15 years: 48%, 16 years: 41%, 17 years: 44%).[29]

The National Community Attitudes towards Violence against Women Survey (NCAS) is a periodic representative survey of Australians over 16 years of age exploring community attitudes about violence against women and gender equality more broadly. The 2017 survey included 1,761 young people aged between 16 and 24 years and provides a detailed analysis of their attitudes.[30]

This survey found that most young people aged 16 to 24 years support gender equality, reject attitudes supportive of violence against women, and say they would act or like to act if they witnessed abuse or disrespect of women.[31] However, they also found that young people were more likely to support women's equality in public life, than in private life.

In questions regarding public life, a small, but not insignificant, proportion of young people still have views that are not supportive of gender equality. The proportion of young people who believe that men make better political leaders than women has decreased substantially since 2013 (2013: 24%, 2017: 13%). Although, in 2017, young men were more likely than young women to believe this (young males: 16%, young females: 10%). Male young people were also more likely to think that 'men generally make more capable bosses than women' (male: 17%, female: 8%).[32]

When considering questions about relationships, a much greater proportion of young people (both male and female) responded with attitudes that were not consistent with gender equity. For example, more than two-in-five young people (43%) supported the statement, 'I think it's natural for a man to want to appear in control of his partner in front of his male friends'. Male and female young people were equally likely to support this statement.[33]

Almost one-third (30%) of male young people agreed with the statement: 'I think there's no harm in men making sexist jokes about women when they are among their male friends', compared to 14 per cent of female young people. Over one-third (36%) of male young people and one-quarter of female young people (26%) believe that women prefer a man to be in charge of the relationship.[34]

Furthermore, more than one-half (52%) of male young people and more than one-third (37%) of female young people believe that 'many women exaggerate how unequally women are treated in Australia'.[35]

Overall, this survey found that while improvements have been made over time across all ages, young people do not hold more positive attitudes to gender equality than people aged 25 to 64 years, and in some instances young people hold more traditional views.[36] For example, only 59 per cent of young people disagreed that 'women prefer a man to be in charge of a relationship' compared to 70 per cent of the older cohort. While, as noted above, 43 per cent of young people supported the statement, 'I think it's natural for a man to want to appear in control of his partner in front of his male friends', compared to only 31 per cent of the older cohort.[37]

The authors remark that theorists' expectations that younger generations will have more liberal attitudes to gender is not proving to be the case, particularly regarding equality in relationships and the home.[38]

An Australian survey on gender equality in 2018 with 2,122 participants had similar findings regarding the traditional views of many young people (aged 16 to 25 years):

- 35 per cent of male young people and 21 per cent of female young people agreed that women are best suited to be the primary carer of children
- 33 per cent of male young people and 19 per cent of female young people agreed that it is important to maintain traditional gender roles so that families function well and children are properly supported

- one-quarter (24%) of male young people and 19 per cent of female young people agreed that men dominate sexual relations
- one-third (33%) of male young people and one-quarter (25%) of female young people agreed that girls should not be out in public places after dark.[39]

In 2019, VicHealth commissioned Queensland University of Technology to conduct research into masculinities in Australia. They conducted an online, nationally representative survey with the sample of 1,619 Australians (oversampling for 16 to 17-year-olds). The survey asked a number of questions about 'traditional masculinities' which was not formally defined but represents expectations regarding men conforming to masculine norms and endorsement of stereotypical masculine behaviours.[40]

Consistent with the NCAS report, this survey also found that a large minority of male young people supported the idea that men should dominate and control women in relationships. Over one-quarter (27%) of young men aged 16 to 17 years agreed that 'If a guy has a girlfriend or wife he deserves to know where she is all the time'.[41]

Evidence shows that "men who endorse stereotypical norms of masculinity are more likely than other men to perpetrate violence against women, perpetrate violence against other men and refrain from involved fathering".[42] However, gender inequality and gendered norms not only impact girls and women, but also have a significant impact on boys and men. This survey found that most Australians agree that gendered stereotypes contribute to traditional ideas about masculinity in Australia and 'constrain men and prevent them from living full lives'. Further, consistent with other research,[43,44] the participants recognised that gendered stereotypes can contribute to men's poor mental health, including their high rates of suicide.[45]

Thus, that gendered stereotypes and behavioural norms remain influential in young people's lives will not only impact female children and young people, but also male children and young people and their life experiences and opportunities.

In summary, while Australian young people generally believe that women have, or should have, equality in the public sphere and the workplace, around one-third of male young people continue to hold gender-stereotypical views of women's and men's roles in relationships and the home.

These views and the corresponding behaviours sustain existing inequalities and will continue to negatively impact many girls' and women's lives.

Sexualisation of girls

In 2007, the American Psychological Association (APA) was tasked to report on the sexualisation of girls via the media and other cultural messages. They defined sexualisation as occurring when any of the following is present:

- "a person's value comes only from his or her sexual appeal or behaviour, to the exclusion of other characteristics;
- a person is held to a standard that equates physical attractiveness (narrowly defined) with being sexy;
- a person is sexually objectified—that is, made into a thing for others' sexual use, rather than seen as a person with the capacity for independent action and decision making; and/or
- sexuality is inappropriately imposed upon a person."[46]

The taskforce reviewed evidence and submissions regarding the sexualisation of girls and concluded that women and girls are often objectified and sexualised across multiple media platforms (including television, magazines, advertising, music videos and the internet). They also found that girls will sometimes contribute to their own sexualisation by 'self-sexualising' through their clothes and behaviour.[47]

Self-sexualisation is where "girls learn that sexualized behaviour and appearance are approved of and rewarded by society and by the people whose opinions matter most to them, they are likely to internalize these standards" and behave accordingly.[48]

The review concluded that one of the consequences of the sexualisation of girls and women in the media is greater acceptance of gender-based stereotypes, conformity with a narrow beauty ideal and greater acceptance by boys and men of sexual harassment and violence.[49]

A recent review of evidence since the publication of the APA report found that multiple media forms continue to represent girls and women in gender-stereotyped or sexualised ways. Across all forms of media, girls and women continue to be presented in a way that prioritises their appearance over their abilities and often objectifies and sexualises women's bodies. These include portrayals of women in reality television shows, young women being represented in sexual ways in music videos, sexualised representations of female athletes and through pornography which is increasingly being viewed by young people (discussed in **Exposure to and consumption of pornography**).[50]

Evidence suggests that for girls there is a direct relationship between being exposed to media that sexually objectifies girls and women and internalising beauty ideals, which in turn leads to self-objectification and body surveillance.[51,52] Self-objectification is where girls come to see themselves as primarily "an object to be looked at and evaluated on the basis of appearance".[53]

A study based in Adelaide with 204 girls aged 11 to 12 years in Catholic primary schools[54] found that watching teen dramas and reality shows, reading teen and women's magazines and time on the internet were all related to self-objectification. They also found that self-objectification was associated with body shame, which was in turn associated with dieting and depressive symptoms.[55]

Research consistently shows that female young people are much more likely than male young people to have low self-esteem.[56,57]

A seminal study published in 1993 concluded that perceived appearance is the most critical component for children and adolescents' self-esteem.[58] They determined that while male children and young people's perception of their attractiveness declined marginally from 6th to 7th Grade, female children and young peoples' perception of their attractiveness declined substantially and continually from Grade 4 onwards.[59]

A recent German study with 2,950 students in secondary school (Grade 5 to 11) concurred with this older study, finding that students' self-esteem was most strongly related to how attractive they perceive themselves and that the influence of academic and social factors was much smaller. This study also found that girls' self-esteem was more strongly associated with appearance than boys, while for boys academic self-concept was somewhat more important than for girls.[60]

Therefore, data shows that perceptions of appearance are the main driver of self-esteem and that boys are more likely to have higher perceptions of their own appearance – thus, boys are more likely to (and do) have higher self-esteem.

The advent of social media has arguably intensified girls' exposure to appearance ideals, including sexualised images.

A NSW-based qualitative study conducted in 2013 and 2014 with 68 young people aged 14 to 18 years explored sexual content online (including pornography) through social media and found that exposure to sexualised content through social media was almost unavoidable and was often unintended. The participants reported seeing sexual advertisements (pop-up ads) or sexual content in their newsfeeds that a 'friend' has liked. Girls reported seeing more photos of women in sexually suggestive poses, while boys reported seeing more images that were sexually explicit.[61]

A study with 276 young women aged 18 to 25 years in Australia and the US found that spending more time on Instagram was associated with greater self-objectification and internalisation of the beauty ideal.[62] Similarly, a large cross-country study with 1,983 young people aged 12 to 16 years conducted in 2017 found that exposure to social media was positively related to self-sexualising behaviour in both boys and girls.[63]

A qualitative study with 157 young people aged 11 to 16 years in Italy, Spain and the UK found that girls posted photos that conformed to cultural beauty standards to fit in, in particular they carefully selected photos where they looked good and used photo-editing applications to manage their online appearance.[64] This study also reported that boys deride girls for trying to look sexy or attractive online, while girls who post sexy or provocative photos online are doing it to conform to sexualised stereotypes.[65]

Thus, girls are socialised into a culture that wants them to look desirable and sexually attractive. At the same time, they are subject to moral judgements about appropriate behaviour/dress by their peers (both male and female).[66]

The intersection of social media and sexualisation of girls is discussed more in the **Social media, identity and body image** section below.

Everyday experiences of inequality

There are some key areas where girls and young women may have everyday experiences of inequality, these include differential treatment by parents and other adults, sexual harassment and other discriminatory treatment based on gender stereotypes.

Experiencing a level of autonomy and independence is an important developmental phase for young people. Parenting behaviours are critical, including the way parents monitor children and young people's activities while also supporting their independence.[67,68]

Large-scale studies have historically focused on whether parental monitoring reduces risk-taking behaviours rather than how it impacts on autonomy and independence.[69,70] There has been less quantitative research considering whether parents restrict female young people more than male young people.

One large meta-analysis did consider this and found that there were no parenting differences between boys and girls. However, this analysis considered 126 studies from the 1970s through to the early 2000s and combined results for children and young people aged 0 to 18 years. Of these studies, fewer than five of the studies in the 2000s considered adolescents.[71]

A more recent study found that parenting that combines a high level of monitoring but was also supportive of autonomy[72] was associated with better life satisfaction and lower externalising and internalising problems in adolescents.[73] This study did not consider different effects by gender.

One area considering adolescents' independence that has been researched is parents' restrictions on independent mobility. Australian research conducted in 2004 and 2006, found that parents allowed boys greater levels of independence than girls at 8 to 9 years and 13 to 15 years of age. They also reported that more than one-half (57%) of the younger girls had no independent mobility, compared to 41 per cent of younger boys.[74]

This research also found that parents of adolescent girls were more likely to think their child would not be safe walking home from public transport at night (78% of parents of girls thought this, compared to 66% of parents of boys). And parents of younger girls were much more likely to be worried their child may be assaulted while out alone in the neighbourhood (64% of parents of girls compared to 40% of parents of boys).[75]

More recent research in Victoria also determined that parents were more fearful for their daughters, which meant that 'boys were allowed more freedom for independent play and travel than girls at all ages'.[76]

A study in the UK found that boys had more independent mobility than girls, however girls could mediate this by travelling in a group.[77] At the same time, a large-scale research project in the US determined that parents are more likely to limit adolescent girls' time with their friends than adolescent boys.[78]

Data from the Commissioner's 2019 Speaking Out Survey supports the proposition that female young people have less independence than male young people with regard to mobility. In this survey, female young people aged 12 to 17 years were significantly less likely to be allowed to go out alone at night (21.8% of female students and 33.6% of male students). This difference increased as young people aged, such that, in Year 12 only one-third (34.6%) of female students were allowed to go out alone at night, while more than two-thirds (68.4%) of male students were allowed to go out alone at night.[79]

Furthermore, female Year 7 to Year 12 students were less likely than male students to be allowed to cycle independently on a main road (43% compared to 61%) or go to places other than school on their own (74% compared to 83%).[80]

Australian research with 2,961 students aged 10 to 14 years from 231 Australian schools found that marginally more girls walked to school than boys (44.3% compared to 37.4%), however significantly fewer girls rode to school (8.3% compared to 22.4%).[81]

Focus group research with teenage girls in Christchurch, New Zealand found that girls were less likely to ride their bikes for a variety of reasons, including concerns about image, being feminine, lack of confidence and concerns about personal safety.[82]

Australian research with 10,076 students from elite[83] single-sex schools in Queensland found that unsupervised activities are a greater source of self-confidence than supervised activities.[84] Thus, if female young people are less often able to perform unsupervised activities, they are possibly less likely to have the opportunity to develop their self-confidence.

More research is needed into girls' experiences of unsupervised activities and sense of autonomy. However, these studies show that many girls are likely to have less autonomy during pivotal developmental stages and are therefore less likely to be able to access the same opportunities as their male peers.

While girls are less likely to be allowed to do unsupervised activities outside the home, they are also more likely to be doing household chores at home – reinforcing traditional gender roles.

Australian data from the Australian Bureau of Statistics Time Use Surveys (which were discontinued in 2006) showed that from 1992 to 2006, a greater proportion of female 15 to 19 year-olds performed domestic or childcare activities than their male peers. In 2006, female 15 to 19-year old daughters contributed almost three times the domestic work of their brothers/male peers.[85]

Research using data from LSAC in 2013 also found that female children aged 10 and 11 years spent more time on household chores than male children of the same age.[86] This study also found that girls generally had less free time than boys as they spent more time doing homework, chores and organised activities.[87]

Australian market research for Westpac with 1,000 online interviews of parents with children aged four to 18 years, reported that boys are more likely to do outdoor chores (take out the rubbish, fetch groceries, mow the lawn and wash the car) and girls indoor chores (do the washing up, help clean the house, hang out the washing).[88] Similarly, the Queensland with students from elite single-sex schools found that boys were more likely to do outdoor chores and girls indoor chores.[89]

This type of chore allocation reinforces gender roles and stereotypes.

The Westpac market research also reported that boys received more pocket money than girls, while at the same time doing fewer chores.[90] Another Australian survey of 10,000 primary and high school students conducted by the University of Melbourne in conjunction with the ABC Behind the News program found that girls were not only more likely to be doing more chores, but for those who were paid pocket money as a reward, girls were being paid less.[91]

International research reports similar findings. A Norwegian study found that girls tended to do more housework than boys. They also noted that when asked 'At home, how important is it that you help out in the house?' girls were more likely to think it was important than boys.[92] Thus, it could be interpreted that girls felt a greater sense of responsibility for household chores.

A German study considered whether the gender distribution of parent's household chores had an impact on their children's housework contribution as young adults (18 to 19 years). They reported that daughters were more likely to do housework independent of parental behaviour, whereas parental behaviour in childhood significantly influenced sons.[93] That is, girls felt a responsibility to do household chores irrespective of parental role models, while boys were more likely to do housework if they were brought up in a more gender-egalitarian household.

Therefore, even though in recent decades there have been significant improvements in gender equality for women, particularly in the workplace, gender roles in the home are still relatively static and certain social norms are being transferred to children through gendered household practices.

Gender stereotypes continue to influence male and female young people's choices of school subjects and future careers.

At school, even though girls are nearing parity with boys in achievement in science and maths related subjects, evidence shows that female students who see STEM (Science, Technology, Engineering and Maths) subjects as 'masculine' subjects,[94] are far less likely than male students to think they are good at science or maths,[95] and are less likely to choose STEM-related study for tertiary education.[96]

Gender-based stereotypes begin at an early age. With respect to subjects at school, research has found that children in primary school are likely to believe that maths is 'for boys'.[97] A study with Israeli primary school students found that they were more likely to think that a woman is working with

maths because she is a teacher, whereas a man is doing maths because he is smart/clever.[98]

Parents and teachers can often have biased expectations regarding children's maths competence, which can contribute to the maintenance of gender stereotypes regarding maths and science subjects.[99]

Other research highlights that for girls there is a conflict between doing well academically and presenting as gender-typical (e.g. feminine, sexy or pretty).[100,101]

A study with 99 female young people aged 11 to 14 years in schools in a low-to-mid socioeconomic area in the US found that girls who endorsed sexualised gender stereotypes (girls should prioritise appearance and attractiveness over other qualities) were more likely to have worse academic motivations and outcomes than other girls, and this association was strongest for girls who perceived themselves as gender-typical. Further, girls who were gender-typical and who endorsed sexualised gender stereotypes were more likely to downplay their intelligence in class.[102]

Other research highlights that people will judge girls and women based on their appearance – with girls who appear more gender-typical (feminine or sexualised) being judged as being less smart or capable.[103,104] Similarly, teachers, parents and young people tend to attribute girls' academic success to hard work, rather than natural ability.[105,106,107]

Gender-based stereotypes also influence female young people's involvement in sport and other physical activity. There is substantial evidence to suggest that gender norms regarding appropriate feminine and masculine behaviour discourage girls from being physically active.[108,109,110]

This is discussed in more detail in the **Physical activity** section.

Data also shows that female young people are more likely to not be safe or feel safe in their communities.

Data from the Australian Bureau of Statistics 2016 Personal Safety Survey estimates that more than one-third (38.3%) of female young people (aged 18 to 24 years) have experienced sexual harassment in the last 12 months (compared to 16% of young men).[111]

An online survey from the Australia Institute reported that the majority (87%) of Australian female respondents had experienced at least one form of verbal or physical street harassment in their lifetime.[112] In 2017, the Australian Human Rights Commission reported that one-quarter (25%) of female university students were sexually harassed at university (15% of male students).[113] This study also found that trans and gender diverse students were more likely to have been sexually harassed than young women or men.[114]

The Mission Australia report Gender gaps: Findings from the Youth Survey 2018 found that more than double the proportion of female than male young people (aged 15 to 19 years) feel unsafe or very unsafe walking alone after dark in their community (46.6% of female young people compared to 18.1% of male young people).[115]

These feelings continue from youth into adulthood, with the Australian Bureau of Statistics 2016 Personal Safety Survey reporting that one-quarter (26%) of WA women aged 18 years and over did not walk alone at night (in the last 12 months) because they felt unsafe (4% of WA men).[116]

Feeling safe in the community is discussed in more detail in the **Feeling and being safe** section.

Feeling unsafe in the community has a significant impact on girls and women's ability to be fully participating in their life and community. When girls and young women feel unsafe and restricted in some activities, they do not have the same opportunities as boys and young men.

Young people's expectations for the future

A key field of research into gender in society considers how young people imagine their future lives will be, particularly regarding their expectations for work and caregiving.[117,118] This research provides an insight into whether young people have gendered perspectives on how they will live their lives.

Internationally, this research has sometimes highlighted that young women have hopes and expectations of an egalitarian arrangement with their [male] partner, while young men are more likely to expect a more traditional arrangement.[119] This incongruence between young women's expectations of gender equality and their lived experience has been identified as possibly influencing the larger gender gap in mental health in wealthier countries.[120]

There has been limited research on Australian female young people's expectations and hopes for the future over the last 10 years.

A study based on 327 surveys of Year 12 female students in Queensland in the mid-2000s found that female students dismissed gender as important for their future plans. In response to the question, 'Is there anything you can tell us about how being a boy or being a girl in your community might influence your future plans?'. Most of the female respondents were clear that they saw gender as irrelevant:

> *"Your gender should have no impact ... if you really want something, you will do it anyway."*[121]

The female participants in this study had a clear sense of their own autonomy and that their gender would not impact them achieving what they wanted. They felt it was their choice and responsibility to manage their own life path, with no room for gendered social barriers.[122] The narrative that people are free and autonomous individuals is highly influential, however many people, particularly women, find that they are ultimately constrained by social norms particularly with respect to caring practices.[123,124]

Another study conducted in 2008 with students from 19 schools across Queensland analysed 819 short essays about their future life compiled by the students aged 14 to 16 years. The analysis found that female high school students imagined futures with successful careers and children, some recognising they would put family first and change their work arrangement to manage caregiving, while others were silent on how they would manage any conflicts. The majority of the male students did not mention how they would balance work and family, and those that did prioritised work.[125]

Similarly, research conducted in New Zealand found that young women (16 to 18 years) imagined a future where they had children and a career in a workplace that allowed them to work flexibly (e.g. part-time). While young men of the same age assumed a full-time career and a family, with no detail regarding how children would be cared for. Both the young women and men imagined the men as the future breadwinners and the women as primary caregivers.[126]

Survey research conducted in 2018 reported that the Australian female participants without children (aged between 16 and 40 years) see workplace flexibility and gender equality in the home as being critical for their future. However, Australian men without children of the same age had a very low level of awareness about how having children could impact on their work and did not consider gender equality in the home to be particularly important.[127] Similarly, qualitative research with young

adults (aged 18 to 34 years) in Melbourne found that men articulated future plans for their careers but not their personal lives, while the women considered their careers in the context of how to manage (future) children.[128]

This is an area for more research, particularly asking the current generation of young people how they understand gender equity when considering their future lives and whether this is a source of concern for them. These past 10 years are particularly critical as the significant influence of social media may have either changed or further embedded young people's understandings of gender roles.

While there is limited data on Australian young people's views on their future relationships and family formation, there is data on Australian young people's career aspirations.

Data from LSAC found that male and female young people aged 14 to 15 years had different career aspirations. The top careers nominated for female young people were medical profession, education professional, legal or social professional, while the top careers for male young people were engineering/transport professional, ICT professional or technical/trade.[129] The authors concluded that the career aspirations of young people in Australia continue to be influenced by gender stereotypes and the current gendered structure of particular industries.[130]

Research with students from elite Queensland single-sex schools similarly reported gendered career aspirations of the male and female participants, with girls choosing occupations related to 'meeting social needs', while boys' choices were more related to 'solving technical problems'. This study found that these gendered choices were consistently held from Year 7 through to Year 12.[131]

More research is needed, however this research suggests that girls see their future as encompassing the often-contradictory goals of having a successful career and managing a family, while boys simply focus on their work (and leisure).

Hence, male young people continue to have a primary goal of getting a good job to provide for their family, while female young people have more complicated ideas of how their future lives will work, which may add unrecognised stress and worry.

What do female young people say about gender equality?

There is limited qualitative research conducted in the last 10 years asking young people in Australia about gender equality.

In 2017, Essential Research conducted an Australian survey about gender equality with 817 girls aged 10 to 14 years and 925 girls aged 15 to 17 years.[132] As part of this survey there were opportunities to provide free text responses about equality generally:

> *"I would like it if, in the media (TV, magazines, etc.), girls were judged equally in intelligence, kindness and appearance. At the moment girls are mostly judged on their appearance."* [133]

A 2012 study based in New Zealand with 20 participants aged between 16 and 19 years explored everyday sexism at school. In this study, both the male and female participants recognised sexism occurred and could recount multiple episodes of everyday sexism towards girls and women.[134]

One of the girls remembers being quite young when she experienced gendered stereotypes first hand:

> "I didn't quite understand the concept of sexism, what do you mean men are better than women? So yeah when I was really little I used to get quite upset when people used to say I can't be a mechanic. Like the boys in my, like in my crèche or kōhanga used to be like you can't be a mechanic. Why not? Cause you're a girl. What do you mean, I don't understand, I know I'm a girl!"

One of the male participants noted that sexist comments about girls at school were quite common:

> "Typical comments, I think like, a lot of like objectifying girls and things like that, like not considering them as people, just talking about their body parts." [135]

Other research has highlighted how girls focus on their appearance and feel pressure to conform to stereotypical beauty standards.

A study with 68 Melbourne primary school students aged 8 to 10 years explored how the students compare themselves to each other. They found that girls made more appearance-related comparisons, while the boys made more comparisons regarding sports.[136] The boys looked up to sportsmen they admired (e.g. footballers), while the girls talked about female celebrities (e.g. Pink, Miley Cyrus).

When asked to make 'hypothetical' comparisons the girls generally spoke about feeling negative emotions ("jealousy", "how come I can't be that skinny"); while the boys spoke positively about comparisons as they were focused on ability and it gave them a goal ("I'm good at basketball, so I want to grow up to be a basketballer. So I think that will be me in 20 years' time").[137]

These quotes also highlight how boys and girls at this age are already showing different levels of self-esteem and confidence.

An English study with 22 female students aged between 13 and 15 years, highlighted that the participants felt that their peers judged them on their appearance:

> "Because you get judged. Like everybody judges you, wherever you walk really... I think just looking attractive so that people don't talk about you..." [138]

This study also found that the girls posting photos of themselves on social networking sites knew that they would be judged by their friends and broader social circle for attractiveness, which often left them feeling dissatisfied with their appearance.[139]

Similarly, in a study with 16 to 19 year-old students in Sweden, the female participants also noted that looking good was critical for girls' self-esteem:

> "I feel embarrassed if I am not pretty."

While the boys in the study also discussed how girls feel pressure regarding their appearance:

> *"It seems like girls often have bad self-esteem and feel bad about their bodies. TV and media put pressure on them to all look the same. Guys don't care about their looks as girls do."* [140]

A Canadian study with 51 self-identified 'smart girls' in high school reported that although the girls said they had not experienced 'sexism', they spoke about examples of everyday inequality related to appearance and body image:

> *"They [girls] will wear a lot of makeup and straighten their hair everyday... I feel like a guy can just roll out of bed and no one will say anything!"*
>
> *"A boy can get away with looking any way if he is funny or has a good personality, whereas girls' can't."* [141]

In a US-based study with 54 girls between 14 and 19 years of age who had experienced explicit discrimination related to either their gender or race/ethnicity,[142] some of the girls explained that they coped with gender discrimination by 'proving' they were just as good as the boys:

> *"I worked harder in the class until I could prove to them that I was supposed to be there and deserved the place in the class."*

Others simply avoided any response to harassment or bullying and internalised the emotions.

> *"After the experience I ignored the guys and pretended like they weren't bothering me even though deep inside I hurt really bad."*

At the same time, when girls are asked broad questions about experiences of sexism or gender inequality, they often express a view that boys and girls are treated equally, and that gender equality has principally been achieved.[143]

In the Canadian study with 51 'smart girls' the researchers asked about sexism and found that almost all of the girls in the study expressed the view that they do not experience gender inequality and that sexism was a thing of the past:

> *"No! We are in the twenty-first century."*

However, the researchers found that in further discussions, the girls did experience sexism – but they did not recognise it or did not have the language of feminism to contextualise it.[144]

Some of the girls noted differences in the way teachers treated girls and boys:

> *"From experience this semester, all my teachers pick boys as favourites. It's usually the boys who are silly and not focused in class. I don't like it at all; it's the kids who don't try hard at all that get noticed and the teacher gives them good marks."*

Similarly, another student rejected the idea of sexism and said boys and girls were treated equally at her school – but then noted that girls have a 'lot less self-esteem' and are teased/harassed by the boys in the school:

> *"I've seen so many people just being called ugly and being made fun of because of their weight or their race."* [145]

A survey of Year 12 female students in nine socio-economically diverse schools across Brisbane included open-ended questions on gender equality.[146] In response to the question: "In what way does being male or female influence your preferences?", many participants noted their gender made no difference:

> *"It doesn't, I'll do what I want whatever sex I am."*

In response to the question: "Is there anything you can tell us about how being a boy or being a girl in your community might influence your future plans" many participants were equally positive.

> *"NO! In this modern day and age there isn't much discrimination about gender."* [147]

When asked directly about whether they believe their gender will impact their future plans, these girls are clear that it should not make a difference. However, in reality, there are barriers that female young people recognise when asked more specific questions about their experiences and plans.

A PhD research project in Queensland in 2013 and 2014 conducted focus groups with 68 male and female high school students (15 to 18 years) to discuss their views on why women are less likely to work in a trade.[148] In this study, most of the female young people said they would feel intimidated and worry about being harassed in mostly male trade courses. Further, trades were understood by female young people as being 'not as good as uni'.

> *"Trades are jobs for the boys who don't do academic."*

A number of the girls also noted that going into a trade was not consistent with their feminine identity.

> *"If you go into those trades, you lose some of your femininity ... that's important to girls ... you get called butch or a tomboy."* [149]

In other research, when more specific questions were asked about managing family and career in the future, girls also had complex responses which recognised that they expect to be responsible for balancing work and care and hope they will be able to 'have it all'.

In the Canadian study with 51 'smart girls', the participants recognised that boys and girls see their future differently:

"Like, so, I have some guys in my English class. They were always goofing off, being like, 'Oh, I don't care, it's grades, who needs them!' and it does [not seem to matter] because they will get paid better and they won't need better grades than us!"

"I think later in life, you have different pressures. You have to have a job and be a mom and the dad is more there for support and not raising the children. Moms have to feed the children, take care of them, drive them around like a chauffeur." [150]

A large qualitative study in rural and urban Sweden found that a number of the female participants felt anxious about the future, in particular how they would achieve all their goals:

"There is so much I want to do, get a good job, family, house... there is not enough time. I feel pressure from people around me, to see me grow up, be successful, become the perfect wife with the perfect husband..."

The boys in this study did not express the same level of concern about their future work-family balance. [151]

More Australian qualitative research designed to understand female and male children and young people's views on gender equality and sexism is needed, including more qualitative research on girl's experiences of sexism and inequality.

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Chapter 7

Social media, identity and body image

- Young people today are online 'almost constantly'[1] which is a significant increase from 10 years ago and represents a substantial social change.

- Research consistently suggests that female young people are more negatively affected by social media – with stronger associations with negative mental health outcomes including anxiety and depression.

- Female children and young people are more likely to use social media, particularly image-based applications like Instagram and Snapchat – which have been associated with worse mental health outcomes.

- Passive digital media use has been shown to have worse outcomes than active use and female children and young people are more likely to use social media passively (viewing other people's accounts), while male children and young people are more likely to do online gaming (actively playing).

- Female children and young people are often under pressure to focus on their appearance and gain 'likes' to show their popularity. The appearance-based focus and pressure for likes is not evident for male children and young people.

- Female young people are often under pressure to provide sexual images through coercion, and male young people are under pressure to 'share' images they receive to gain popularity amongst their peers.

- If an image is shared non-consensually, female young people have a high likelihood of being blamed and shamed.

Children and young people now grow up with internet access and social media as an integral part of their lives. Furthermore, they have very different experiences from children and young people growing up only 10 years ago.[2]

Young people use the internet and social media applications to connect with friends, family, organisations and many other people. They can build a large network of online connections, many of whom they may not have met face-to-face.

In 2009, the Australian Bureau of Statistics reported that most children and young people (92%) accessed the internet at home. In this year, only four per cent of children and young people had used a mobile phone to access the internet.[3]

From 2010, the use of social media and other internet applications increased dramatically.[4] This is in part due to the ubiquity of mobile technology, including phones and tablets as well as the

improvements in speed and download capabilities. In the quarter ending June 2014 the volume of data downloaded by Australians on mobile phones increased by 97 per cent over the same quarter in June 2013.[5]

In 2020, the Australian Communications and Media Authority conducted an online survey to explore how children and young people aged six to 13 years use mobile phones. This survey has been conducted annually by Roy Morgan since 2015 and involves interviewing approximately 2,500 Australian children and young people.[6]

In 2020, 82 per cent of young people aged 12 to 13 years have or use a mobile phone (increased from 72% in 2015) and just under one-half (46%) of children aged 10 to 11 years have or use a mobile phone.[7]

For children aged 10 to 11 years, the most common uses were to play games (71%), to take photos and videos (67%), use apps (67%) and send or receive texts (64%). For young people aged 12 to 13 years, the most common uses for mobile phones were to send or receive texts (85%), to take photos and videos (80%), to use apps (78%), to take and receive calls from parents and family (77%), to play games (74%) and listen to music (72%).[8]

In September 2020, the Australian eSafety Commissioner conducted a survey of 627 young people aged 12 to 17 years asking them about their social media use. This survey showed that male young people are more likely to use YouTube, while female young people are more likely to use Instagram and Snapchat.[9]

Proportion of young people aged 12 to 17 years using social media services by gender, per cent, Australia

	Female	Male	Total
YouTube	70	75	72
Instagram	60	54	57
Facebook	50	53	52
Snapchat	51	39	45
Facebook Messenger	40	39	39
Tik Tok	43	32	38

Source: eSafety Commissioner 2021, *The digital lives of Aussie teens*

This survey also found that for overall online use, 87 per cent of male young people played multi-player games online compared to 66 per cent of female young people.[10]

It should be noted that these proportions are for usage, not time spent on the application.

Similarly, an Australian study with 528 children and young people aged between 10 and 12 years-old recruited to be part of the risks to Adolescent Wellbeing (RAW) Project found that male children and young people spent more time on YouTube and female children and young people spent more time on Instagram and Snapchat.[11]

Data from the US and the UK shows that girls aged 13 to 18 years are more likely than boys to spend more time on smartphones, on social media and texting, while boys were more likely to spend more time gaming and more time on all electronic devices (greater use of computers/gaming devices).[12]

In 2019, the applications most used by young people in the US were Instagram, YouTube, Snapchat and Facebook.[13] Research from the Pew Research Centre in 2018 reported that almost 95 per cent of US teenagers (aged 13 to 17 years) had, or had access to, a mobile phone, which was a 22 per cent increase from 2014–15 survey (73%).[14]

The 2018 survey found that 45 per cent of teenagers said they were 'online almost constantly', which had almost doubled from 2014–15 (24%).[15] In contrast, in the 2012 survey, 42 per cent of teenagers visited social media sites 'several times a day' (in this survey, Facebook was the primary social media site used by teenagers).[16] It is expected these statistics will be similar in Australia.

The implications of this shift are still being explored and are discussed in the next section.

The influence of social media on wellbeing

Many commentators and researchers report that a high level of social media use increases the risk of negative mental health outcomes, particularly for girls.[17,18] However, there are other academics who maintain that the evidence does not support this conclusion because the data is often not longitudinal and cannot show causation, only correlation.[19,20]

An additional complexity is that this field of research initially focused on the amount of time children and young people spent looking at screens and some studies using older data sets continue to include time spent watching television, DVDs etc. rather than a specific focus on social media/internet access.

However, as technology changes and social media is increasingly prevalent in young people's lives, a focus on the amount of time spent becomes less useful, as it is difficult to measure and 'all the time' is normalised. Instead, the type of media being viewed and how it is being used (that is, the social experience), rather than the time spent, is now being recognised as critical.[21,22,23]

A 2020 review of the field called for more studies that are better-placed to determine cause and effect, including experimental and longitudinal studies and also greater use of studies co-designed with young people to ensure a better alignment with their use and needs.[24]

This review also noted that population level data may be obscuring different impacts on different sub-groups, including adolescent girls. When considering the available data, they concluded that more research is still needed on the association between adolescent girls' mental health and social media, as the cause and effect has not yet been proven.[25]

Taking into account this overview of the field, this report is focused on more recent studies or those that explore a more specific area of social media/internet use and the implications for female young people's wellbeing.

A recently published longitudinal study using data from the Melbourne-based Childhood to Adolescence Transition Study explored social networking use and mental health for 1,156 young people from age 11 to 14 years. This study found that girls with high social networking use were significantly more likely to have depressive and anxiety symptoms in later years. Similar results were found for depressive symptoms for boys, although slightly lower odds.[26]

Another nationally representative longitudinal study from the UK with annual interviews from 2009–10 to 2014–15 considered social media and wellbeing with a specific gender focus. They found that female young people used social media more than male young people (the study did not ask about gaming). At age 13, one-half of female young people were chatting for more than one hour per day, compared to one-third of male young people.[27] The study showed that female young people who had greater interaction on social media at 10 years-old were more likely to have increasing socio-emotional difficulties over time. This relationship was not evident for male young people.[28]

Survey research with children and young people aged nine to 13 years found that for boys there was a significant relationship between using social networking services and a sense of belonging with their friendship group, whereas no significant relationships were found for girls.[29]

It is likely that the platform being used and the type of activity influence young people's experiences. In 2017, a UK-based organisation conducted an online survey of 1,479 14 to 24 year-olds asking them how they feel about Facebook, Instagram, Snapchat, Twitter and YouTube and how these platforms impact their wellbeing. This survey found that YouTube was rated as the most positive for wellbeing, while Instagram was the least positive (with Snapchat following).[30] Therefore, the gender differences in wellbeing outcomes may be related to boys being more likely to use YouTube and girls being more likely to use image-based applications, such as Instagram.

There is evidence to suggest that passive use of social media (viewing other people's posts, images etc.) may have more detrimental wellbeing impacts than active use (creating content including posting images, making comments etc.). For example, young people who engage in passive social use are more likely to negatively compare themselves to others, while active usage has been shown to increase social capital (social support through ties/networks) and feelings of connectedness.[31]

A longitudinal study with 671 Instagram users aged 12 to 17 years in Belgium reported that browsing Instagram (not posting) at Time 1, was related to depressed mood at Time 2. The relationships were similar for male and female participants.[32]

Similarly, a representative survey of Icelandic adolescents reported that passive social media use was related to depressive symptoms, although they reported the impacts were stronger for girls.[33]

Another US-based study used two different approaches: an experimental design with 84 university students who were instructed in a laboratory setting to engage with Facebook actively or passively; and a field-based setting where 89 university students completed multiple surveys at different times of the day over time about their Facebook usage and wellbeing. The authors concluded that passive Facebook usage led to declines in mental health due to an increase in envy.[34]

Envy is a function of social comparisons, where the viewer compares themselves to other people on social media unfavourably. Evidence suggests that social comparisons on social media are often focused on appearance or success.[35] Similar to envy, fear of missing out (FOMO) is also linked to social comparisons on social media and has been associated with using social media and lower wellbeing.[36]

A US-based study with 619 students aged between 12 and 16 years reported that female young people had higher average values than males for frequency of technology use, depressive symptoms, technology-based social comparison and feedback seeking, and excessive reassurance seeking. They found significant associations between technology-based social comparison and depression with the highest associations for those young people with lower popularity. This association was stronger for female young people.[37] This study could not determine the direction of the association.

A study with university students using Facebook found that those who had used Facebook for longer, and those who used it more often, felt that other people were happier than they were and had better lives.[38]

To explore the effect of reducing social media exposure, researchers in the US conducted an experimental study where they randomly assigned 143 university students to a low social media usage group or a control group (who did not alter their social media activities) for three weeks. They found that limiting social media use to 10 minutes per day for three weeks had a significant impact on wellbeing, with both loneliness and depressive symptoms declining. However, over this timeframe, they did not see any change in perceived social support, self-esteem or autonomy, or self-acceptance.[39]

Technology, including smart-phone applications, is now a normal aspect of young people's lives. Therefore, there is general agreement that using digital technologies can have both positive and negative outcomes, so the focus should be on whether young people are engaging in problematic use. Problematic use has been described as addiction-style behaviours such as neglect of other activities, loss of control and continued use despite evidence of harm.[40]

A meta-analysis of international studies concluded that approximately one-in-four children and young people exhibited problematic smartphone usage. Females were reported as more likely than males to experience problematic behaviours and female young people aged 17 to 19 years were the most likely to exhibit these behaviours.[41]

Across the selected studies, problematic smartphone usage for male young people was generally related to media applications and games, while for female young people it was related to communication and social networking applications.[42] This study concluded that problematic smartphone usage was associated with increased odds of depression, increased anxiety, higher perceived stress and poorer sleep quality.[43]

Poor sleep quality is a critical concern, particularly for children and young people who use technology or social media at night.[44]

In the Commissioner's 2019 Speaking Out Survey, almost one-in-five (18.3%) female young people in Years 7 to 12 reported that they very often (6.0%) or fairly often (12.3%) go without eating or sleeping because of their mobile phone. Female young people were more likely than male young people to go without eating or sleeping because of their mobile phone (very often: 3.6%; fairly often: 7.2%).[45]

Analysis of the 2019 Speaking Out Survey data shows a significant association between female young people in Years 7 to 12 not eating or sleeping because of their mobile phone and having low self-esteem (not feeling happy with themselves). This association was not evident for male young people in this age group.[46]

A study with 467 Scottish young people aged 11 to 17 years found that 97 per cent used social media, while 35 per cent reported they had sleeping difficulties. The authors concluded that greater social media use was associated with poor sleep. In particular, social media use at night and emotional investment in social media were more strongly related to poor sleep than overall use. In addition, young people who had high emotional investment in social media were significantly more likely to experience anxiety, depression and low self-esteem.[47] This study did not capture data by gender.

One aspect of problematic use of technology is not blocking or stopping use even though the user is experiencing harm due to negative experience such as cyberbullying or negative social comparisons.

A 2017 study with female Year 7 students in Brisbane found that girls were likely to block or report strangers who were inappropriate on social media. However, in the case of issues with friends or peers they were more likely to want to work it out for themselves. The girls also noted that if the problem involved boys or embarrassing content, they were more likely to talk to their friends as there was fear their parents would restrict their social media use.[48]

Positive communicative parental relationships and forms of parental monitoring can also be protective against negative wellbeing outcomes related to social media.[49,50] A Netherlands-based study with 440 students aged 12 to 19 years found that the association between social media use and body dissatisfaction was weaker among participants who reported a more positive relationship with their mother.[51] Other research has determined that active monitoring with co-use (parents actively engaging in the relevant technology with their children) was associated with less social media use and better behavioural outcomes.[52]

While research suggests that certain practices on social media can be harmful for female young people, there are also clear benefits of social media use. Australian female young people value social media as a critical part of their lives which allows them to stay connected with friends, find out about social events and explore things that they are interested in.[53]

Social media and digital technology more broadly provide children and young people with access to services and support that they may not have access to otherwise. In particular, it provides access to information on mental health that was not available to children and young people before the internet. For example, both headspace and Reachout provide online information and services on mental health.

An Australian mixed methods study with 186 girls in Year 7 and 9 in four independent girls' schools in Sydney found that seeking help from friends over social media or other technology was very common, with 74 per cent of girls discussing emotional problems with friends via this means and 85 per cent discussing schoolwork. In interviews with 14 girls in Year 7 and 17 girls in Year 9 they discussed texting/contacting their friends if they needed help with their homework, whereas many preferred to talk about emotional worries face-to-face.[54]

There is some evidence to suggest that social media can provide critical connections for children and young people who feel marginalised, including those who are culturally and linguistically diverse (CALD), have disability, or identify as LGBTI, amongst others.[55,56,57]

The intersection of social media, identity development and body image

Identity development is a key aspect of adolescence during which children move away from the values and attributes they have taken on through their family and significant others to reflect on their own values, abilities and interests and explore various identity alternatives. The process of identity development generally involves exploration, then commitment to an identity and then re-consideration of that commitment and more exploration.[58]

For the current generation of young people, social media is a significant aspect of that process. Social media and the internet more broadly is a space where young people can experiment with different identities and be creative with how they present themselves.[59] Some theorists argue that social media may have intensified the identity development process for many young people.[60]

All users of social media engage in a process of curation, whereby what people post online about themselves is often considered and seeks to make a certain impression or conform to certain social norms.[61] Like adults, young people can 'purposefully share content to appear interesting, well liked, and attractive' to their peers.[62]

A fundamental mechanism through which identity development occurs is social comparison and feedback-seeking.[63,64] Social comparisons can be related to appearance, ability or opinion.[65] Because gender-based stereotypes continue to encourage girls to prioritise appearance and attractiveness over other qualities,[66] female young people are more likely to make appearance-based social comparisons and to feel negatively about their appearance as a result of these comparisons.

In particular, for girls and women in contemporary western society, there is pressure to conform with a narrow beauty ideal of being pretty and attractive and often thin or ultra-thin.[67,68] In a 2016 survey with 600 young Australian women and girls aged 15 to 19 years, 56 per cent agreed that 'girls are sometimes, seldom or never valued for their brains and ability more than their looks.'[69]

Data from LSAC reported that almost one-third (30%) of girls aged 12 to 13 years were worried about their appearance, compared to 14 per cent of boys. Further, one-quarter (24%) of girls aged 12 to 13 years were worried about fitting in with their friends, compared to 14 per cent of boys.[70]

Critically, it appears that girls start to make these negative comparisons at a young age. The LSAC data shows that at age 10 to 11 years 20 per cent of girls were worried about the way they looked, compared to 15 per cent of boys. The proportion of the boys worried about the way they looked did not change from aged 10 to 11 years to age 12 to 13 years, whereas for the girls it increased from 20 per cent to 30 per cent.[71]

Similarly, in the Commissioner's Speaking Out Survey conducted in 2019, more than one-third (38%) of WA female students in Years 4 to 6 cared about how they looked, compared to 31 per cent of their male peers. In high school this gender difference had increased to more than one-half (55%) of female students in Years 7 to 12 caring about how they looked, compared to 32 per cent of their male peers.[72]

A qualitative study with children aged 8 to 10 years-old found that 'appearance-related comparisons were more common among girls, whereas sports/ability-related comparisons were more common for boys.' They found that boys saw these comparisons as inspiring, while girls reported negative emotions.[73]

These results highlight that, as outlined in the **Gender equity in Australia** section, the socialisation processes that promote appearance as critical for girls' self-esteem and sense of self-worth have already been established in primary school.

The 2020 Girlguiding survey[74] in the UK reported almost one-half (48%) of girls aged 7 to 21 years reported using apps and filters to adjust their appearance on photos in social media. Over one-third (34%) reported they wouldn't post a photo of themselves unless they changed certain aspects of their appearance.[75]

Focus group research in the US with 51 young people aged 12 to 18 years-old reported that 'appearing attractive' was important for girls when posting photos, whereas boys more often posted photos conveying masculinity (muscles, 'manly' faces). Yet, appearing attractive seemed to be a requirement for girls, while appearing masculine did not seem to be essential for boys.[76]

A number of the girls in this study explained that the process of posting photos was a lot of work, in particular the process of picking the photo, applying a filter, deciding on a caption – this was not the case for the boys. Further, the girls were focused on maximising the number of likes and expecting that their friends would like their posts – which was not a strong consideration for the boys.[77]

A qualitative study across Spain, Italy and the UK with young people aged 11 to 16 years-old also found that some girls associated the number of likes they receive as markers of social acceptance and approval.[78]

Similarly, a qualitative Australian study with 28 girls in Year 7 and 8 in independent schools in higher socio-economic areas found that when they posted on social media, they wanted immediate feedback via 'likes' and that the speed with which they receive likes impacted their emotional state.[79]

An Australian study with 528 children and young people aged between 10 and 12 years-old recruited to be part of the Risks to Adolescent Wellbeing (RAW) Project found that engaging in more appearance comparisons and perceiving others to be more attractive were both predictors of low body satisfaction, greater likelihood of eating disorders and higher anxiety. These associations were significant for both male and female children. However, they found that female children made more social comparisons, thought others looked more attractive, and posted more images of themselves on social media than male users.[80]

The authors found no relationship between the number of 'likes' on social media and mental health. They surmise that this may be a function of the participants' young age as they note that peer influences and the importance of popularity increases through adolescence.[81]

Weight concerns are at the forefront of body image worries for children and young people. Evidence suggests that social media is directly linked to body shame and disordered eating practices.[82,83,84] As outlined in the section **Weight and nutrition**, girls are much more likely to be concerned about their weight than boys and more likely to engage in unhealthy eating behaviours.[85,86,87]

Analysis of the EveryBody study, a longitudinal investigation of eating disorders among 5,075 Australian adolescents, reported that emotional investment in selfies, photo manipulation, investment in other people's selfies and avoidance of posting selfies were associated with a greater likelihood of having an eating disorder. This study found that the impact for boys and girls doing those activities was similar, although girls were more likely to do those activities.[88]

Another study with 101 Year 7 girls found that girls who regularly shared images of themselves on social media were more likely to have body dissatisfaction, dietary restraint and to have internalised the thin-ideal, than those who did not regularly share self-images.[89] A further Australian study from the early 2010s with 1,087 girls aged 13 to 15 years found that time spent on the internet was significantly related to internalisation of the thin-ideal and body surveillance.[90]

A number of studies have found that overall social media use is not necessarily linked to appearance-based concerns but viewing and posting appearance-oriented images (photos of self and others) is related to increased body dissatisfaction for girls and young women.[91,92]

Specifically with regard to Instagram, an Australian study with 259 young women aged 18 to 29 years found that following an 'appearance-focused account' (e.g. celebrity accounts or health and fitness accounts) was associated with internalising the thin-ideal and body surveillance, while following other accounts was not.[93]

Body image concerns for girls, particularly around weight have been of concern for many years. Various studies in the early 2000s reported that girls in primary school were worried about their weight.[94] However, research does suggest that social media may be intensifying these feelings.

As discussed in the section **Sexualisation of girls**, evidence shows that for girls there is a direct relationship between being exposed to media that sexually objectifies girls and women and internalising beauty ideals, including ideals regarding sexualised appearance. In addition, this internalisation and self-objectification leads girls to post suggestive and sexualised images online to gain peer approval and [for heterosexual girls] male attention.

Research with 2,626 students in Belgium found that girls were significantly more likely than boys to post sexualised images of themselves on Instagram. The study found that peer attitudes strongly influenced the desire and intent to post sexy images and that parental attitudes had no measurable effect.[95]

A qualitative study with 157 young people aged 11 to 16 years in Italy, Spain and the UK found that the participants criticised overly sexualised profiles and photos, particularly for their peers who they believe are misrepresenting themselves – even though they also recognised that they present their own image in ways that could be seen as inauthentic.[96]

A study with 660 German high school students across two time periods found that for sexualised Instagram images, female young people scored higher than male young people on social comparisons related to appearance, internalisation of the thin-ideal, valuing appearance over competence, and body surveillance; while male young people reported higher internalisation of the muscular-ideal body type. [97]

It should be noted that most of the research outlined above has not considered LGBTI children and young people, and to a certain extent assumes a heterosexual perspective. This is an area that requires further research.

While there is considerable evidence that social media can have detrimental impacts on female young people's body image and self-esteem, social media also provides female young people with an opportunity to explore their developing identity, including their sexuality. Research has found that young people often find flirtation on digital media 'pleasurable, exciting and fun'.[98]

A qualitative UK-based study with young people aged 14 to 16 years found that girls develop and present their sexual identity online and the process can be playful and creative, however they also need to negotiate and manage normative sexual standards (e.g. the sexual double standard) which regulates appropriate appearance and behaviour online.[99] Therefore, for girls the process of 'flirting' involved significant negotiation of moral standards, where they needed to balance being seen as attractive and desirable and yet managing their reputation.[100]

While there is a considerable amount of data and research on this topic, more studies demonstrating which activities on social media are more likely to cause reduced self-esteem, body image concerns and poor mental health is needed.

What do female young people say about social media, identity and body image?

There has been some qualitative research with children and young people regarding social media, although due to the time lag between conducting and publishing research, there is less data on more recent social media applications and experiences.

A study in the UK with 54 young people aged 11 to 18 years found that the young people viewed social media as problematic. In particular, they believed it could cause mental health issues for some people, that cyberbullying was prevalent and that you could get 'addicted' to it.[101]

The study asked broad questions about social media use generally, therefore the participants talked about their beliefs regarding social media in general, not necessarily their own experiences. This study did not distinguish between male and female participants.

> *"As well I think that like nowadays you're taught to have low self-esteem you know like with photo-shopped images and things like that..."*
>
> *"I feel like cyberbullying plays a huge part in everyday life. And that comes mainly from social media..."*
>
> *"I feel like, um, cos I, I did, I had an experience of that with WhatsApp where lots of people were messaging at the time I'd go to sleep at about 10 o'clock at night and then I felt the need, even when there was no-one messaging me just to keep checking and it did affect my sleep..."[102]*

A NSW study conducted in 2013 and 2014 with 68 students aged 14 to 18 years in culturally and economically diverse areas explored young people's experiences of exposure to sexual content in social media.[103] As part of this, the researchers asked the students about social media, more broadly:

> *"I have two thousand friends now... a lot of them I don't know." (male)*
>
> *"...literally, I'm checking it [Facebook] all the time... I'd say maybe a hundred times a day on the weekend.' (female)*

In this study, the girls particularly noted that 'likes' were important:

> *"...the goal would be to get 1,000 followers... so you are able to get more likes..."[104]*

Another qualitative Australian study with 28 girls in Years 7 and 8 in independent schools in higher socio-economic areas found that when they posted on social media, they wanted immediate feedback via 'likes', which they equated with popularity.

> *"... If you get lots of 'likes' it means you're popular."*

These girls also noted that if they didn't receive positive feedback pretty quickly, they would feel 'depressed', 'upset', or 'insecure'. If the photo did not get 'enough' likes they would delete it.[105]

Focus group research in the US with 51 young people aged 12 to 18 years-old also reported that the girls focused on maximising the number of 'likes' and expecting that their friends would 'like' their posts, yet this was not a strong consideration for the boys.[106] The girls in this study also noted that if they did not get immediate feedback, they would delete the post.

> "On Instagram, when you post something and sometimes you don't even get, like, nothing [likes or comments], it's better to just delete the photo." [107]

Thus, female young people recognise that posting on social media is linked to their sense of self-worth and self-esteem and if they do not get the desired responses (likes) this impacts their emotional state.

Girls also see feedback via likes on social media as being related to their appearance. That is, the more attractive they can make themselves, the more likely they will get positive feedback. In a European qualitative study, an Italian 13 year-old remarked:

> "My stepsister is as old as me but she is ... a bit overweight, fatty, has very curly hair, so she does not receive many likes. So sometimes she feels upset, "it is not fair, you receive many likes" – many, my maximum is 40 - "you receive 40 likes and I get only 10." So if you really are a good friend, you edit the pictures to make her look more beautiful. She has never had many pictures in which she looks beautiful, but her face is not so bad. So I took a picture of her, we edited together, and I posted on Facebook – because I have more friends so it is more likely I get likes – and we got 25! " [108]

In the study with 51 young people in the US, appearing attractive was important, particularly for the girls. The girls noted it was important to look 'good', 'glamourous' or at a minimum 'at least presentable'.[109] In this study, the girls put in a lot of effort to look as good as possible.

> "You have to go to your, like, your photos, and you have to pick up which, like, filter, and then you have to, like, pick a caption. It's just a lot of work." [110]

In an UK-based study with 22 female students aged between 13 and 15 years the students reported feeling pressure to be slim online and in real life:

> "I always just look at people's photos and think 'Oh my God they're just like so pretty'... I just remember last summer being on Facebook and just looking at people and when they come back from holiday and they upload their photos and they look so skinny in a bikini." [111]

At the same time, girls will often critique other girls for posting sexualised or suggestive images on social media:

"There's this girl in Year 9 she's like 13, 14, anyway, on these SNS, oh, my gosh, I'll have to show you after, she looks about 30 and she's so provocative with her photos and boobs out, bums out, belly out everything out, and all these boys who she doesn't even know will be coming to her, oh, you're so pretty." [112]

At the same time, social media and other online technology can also be useful to get support. An Australian mixed methods study with 186 girls in Year 7 and 9 in independent girls' schools reported that the girls commonly sought help and support from their friends over social media or other technology.[113]

"Just talking to my friends [online] usually makes me feel better than just thinking about things alone." [114]

Although, some of the girls reported that they preferred to discuss issues with someone online, when they did not want the conversation to get too emotional:

"I might prefer to talk online if I didn't want to be really emotional but I still wanted to talk to somebody." [115]

This section has highlighted many young people's voices to provide some insight into how they view social media. However, the world of technology and social media, and the social and cultural meanings that children and young people assign to it, is moving so quickly that children and young people today may not feel these views represent them.

It is essential that qualitative research and consultations continue with children and young people about this critical topic.

Notes

1   It should be noted that in 2020, the WA Education Department implemented a no mobile phones in schools policy, which means that children and young people may have more hours where they are not connected. Research into the impact of this will be critical.

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Chapter 8

Sexual health and safe, respectful relationships

- Many male and female young people do not appear to have a good understanding of active and enthusiastic consent in intimate relationships.

- Over one-third (36.8%) of sexually active female Australian students have had unwanted sex.

- Qualitative research suggests that the sexual double standard may continue to restrict girls' ability to feel comfortable being sexual and not feeling shame or fear of being labelled as promiscuous.

- Female young people in Australia are still highly likely to experience sexual harassment or sexual violence at some time in their life.

- Viewing pornography is becoming increasingly common for children and young people, and some evidence suggests that viewing pornography contributes to boys and young men engaging in coercive or aggressive behaviours and holding negative views of gender equality.

- Girls continue to be deemed more at harm from sexual activity (both physical and moral harm) while also being held responsible for staying safe, practising safe sex and not getting pregnant.

Safe and respectful relationships

Sexual development and experimentation is a normal and healthy part of adolescence. However, adolescence is also a time when young people can encounter issues related to gender stereotypes, sexual coercion and consent and sexual assault.

Female young people are particularly at risk of experiencing unwanted or coercive sexual experiences which can influence their self-esteem, mental health and wellbeing more broadly.[1,2,3]

Female young people are at greater risk of experiencing sexual harassment and sexual assault than male young people.[4] Young women are particularly affected by sexual harassment on the street, in other public places and online.[5] Furthermore, female young people aged 15 to 19 years are at a significantly higher risk of sexual assault than male young people in this age group.[6]

While evidence suggests male and female students experience similar levels of sexual harassment at school, the effects are more significant for female students.[7]

Engaging in intimate relationships and sexual activity is a normal part of adolescence, however if female young people are experiencing these relationships and activities as unequal, coercive and not safe this will likely impact their mental health and wellbeing.

Data suggests that since 2013 Australian young people are having sex at an earlier age. The National Survey of Australian Secondary Students and Sexual Health is a survey conducted every five years that collects the sexual attitudes, knowledge and experiences of high school students in Years 10 to 12 across Australia. The 2018 survey had a sample of 6,327 Australian students, including 563 WA students.

In the 2018 survey, almost one-half (46.6%) of Year 10 to Year 12 students reported having anal or vaginal intercourse. This corresponded to 34 per cent of Year 10 students, 46 per cent of Year 11 students and 56 per cent of Year 12 students.[8] This represents a substantial change from the 2013 survey, which reported that 34 per cent of Year 10 to Year 12 students had had sexual intercourse (Year 10: 23%, Year 11: 34%, Year 12: 50%).[9]

That is, one-in-three (34%) Year 10 students reported having had sexual intercourse in 2018, an increase from just under one-in-four (23%) in 2013.[10]

Studies have suggested that the early initiation of sexual activity may sometimes be unwanted or pressured, particularly for girls.[11,12] In the Australian National Survey sexually active Year 10 to Year 12 students were asked if they had ever had unwanted sex.[13] Results highlighted that over one-third (36.8%) of sexually active female students had had unwanted sex compared to 16 per cent of sexually active male students.[14] This data was not disaggregated by year group.

Of the students reporting they had had unwanted sex, 52 per cent said it was because they were influenced by their partner (female: 51.5%, male: 53.8%), while 34 per cent of both male and female young people reported they were drunk. Female young people were more likely to report that they were frightened (32.3% compared to 27.5%), while male young people were more likely to feel pressure from their peers (17.0% compared to 6.6%).[15]

Perth-based qualitative research found that adolescent females (aged 14 to 19 years) who were 'ready' to have sex, were more likely to delay sexual intercourse until it was with someone they were comfortable with, whereas common reasons for early or unwanted first experiences of sex were conforming to peer norms, coercion from partners and being drunk.[16]

Longitudinal data from large-scale surveys of 13 to 16 year-olds in England and Scotland has found that most heterosexual young people who become sexually active at ages 15 to 16 have positive experiences with sex. However, female young people aged under 14 years when they first had sex were at particular risk of having a negative experience (e.g. pressure, regret, lack of enjoyment).[17] Negative sexual experiences were associated with not having control over the situation (e.g. feeling pressure, being drunk or stoned or not planning sex) and with less intimacy (e.g. sex with a casual partner).[18]

Studies have considered whether early sexual initiation is related to behavioural or mental health issues, although the data is inconclusive.

A Dutch longitudinal study reported that girls who had sex earlier than their peers, were more likely to exhibit problem behaviours, although the level of problem behaviour was very low. This study did not find a relationship between early sexual initiation and self-esteem.[19]

Other data shows that children with behavioural issues are more likely to experience/engage in risky sexual behaviour as adolescents. The Western Australian Pregnancy Cohort (Raine) Study found that girls who exhibited childhood externalising behaviours are more likely than those who did not, to have unwanted sex by age 17, while boys exhibiting childhood externalising behaviours are more likely than those who did not, to have multiple sexual partners by age 17.[20]

A representative study of Australian women aged 16 to 59 years conducted in the early 2000s found that of the 9,134 women recruited for the study, 21 per cent had been forced or frightened into unwanted sexual activity (sexual coercion). The study determined that any experience of sexual coercion was associated with poorer psychological, physical and sexual health. This study also found that women first coerced when they were between 13 and 16 years reported poorer general physical health (but not psychological or sexual) than other age groups.[21]

There is evidence to suggest that the type of sexual experience is important for adolescent wellbeing outcomes. For example, research has found that women who were younger when they first performed oral sex on boys/men had a greater sense of inferiority and a devaluing of self than those who were older.[22] While other studies have reported that consensual sex in an intimate relationship does not have an association with negative outcomes for adolescents (male and female), but casual sex does.[23,24]

Data from the National Survey of Australian Secondary Students shows that most (64.6%) young people are having sex with their current boyfriend/girlfriend and only 6.4 per cent last had sex with someone they had only just met. However, around one-in-five Year 10 to Year 12 students (female: 18.7%, male: 19.4%) had had anal or vaginal sex with three or more partners in the last year.[25]

A study using data from a large US-based longitudinal project, considered whether young people who had relationships which were not consistent with their 'ideal relationship' (romantic relationship inauthenticity)[26] were at greater risk of mental health issues. This study found that romantic relationship inauthenticity was significantly associated with depression, suicidal ideation and suicide attempt among girls. There was no equivalent association for boys.[27]

Safe sex is not only about consent, but also about ensuring protection from sexually transmitted infections and pregnancy. With almost half (46.6%) of young people in Year 10 to Year 12 reporting that they have had sexual intercourse (vaginal or anal) and a similar prevalence for giving or receiving oral sex, contraception use is critical.

The National Survey of Australian Students found that only 38.4 per cent of sexually active young people reported always using a condom (male: 44.6%, female: 34.5%).[28] Furthermore, a high proportion of sexually active young people were not using an effective contraceptive method when they last had vaginal sex. Almost one-in-five (19.6%) young people used the withdrawal method when they last had vaginal sex and 7.6 per cent reported they used no contraceptive method during their last sexual encounter.[29]

Considering the risk of pregnancy is principally borne by female young people and they are more vulnerable to sexually transmitted infections,[30] these unsafe behaviours may have more impact on female young people's mental health and wellbeing.

There has been no research in Australia into whether female young people's mental wellbeing is impacted by their sexual experiences.

Sexting

Sending sexualised or explicit photos to another person (sexting) is an increasingly common practice for young people, although they also recognise that it can be risky, particularly for girls.[31]

It should be noted that sexting when you are under 18 years of age is an offence under the WA criminal code – this is not discussed in this section.[32]

Australian research suggests that young people engage in sexting to 'get attention from a dating partner' (89%), 'to be fun and flirtatious' (81%) and 'to be sexy or initiate sexual activity' (80%). In this study, 70 per cent of the participants also selected the reason 'they feel pressured to by friends or a dating partner'.[33]

Similarly, a Perth-based study with 40 heterosexual young people aged 18 to 25 years found that some of the young women engaged in sexting for fun and flirtation, although most saw sexting as risky and were more likely to only do it when they were in a committed relationship.[34]

Other research also found that adolescents sext for sexual purposes, however they found that this was more likely for adolescents whose self-esteem was linked to their body image.[35]

Questions on sexting were asked as part of the Sixth National Survey of Australian Secondary Students and Sexual Health conducted in 2018. In this survey, 44 per cent of both male and female young people had received a sexually explicit nude or near nude image of someone else, and 33 per cent of female and 31 per cent of male young people had sent a sexually explicit nude or near nude image of themselves.[36]

The survey also reported that almost two-thirds of boys (64%) had sent a sexually explicit nude or nearly nude photo or video of someone else to a friend (compared to 52% of girls). In addition, 30 per cent of boys had sent a sexually explicit nude or nearly nude photo or video of someone else to someone they had just met (11% of girls) and 14 per cent of boys had sent a sexually explicit nude or nearly nude photo or video of someone else to a stranger (7% of girls).[37]

In the Commissioner's 2019 Speaking Out Survey, more than one-half (53.6%) of WA female young people aged 12 to 17 years had been sent unwanted sexual material. In comparison, just over one-quarter (26.7%) of male young people had been sent unwanted sexual material.[38]

A study with 2,356 Spanish high school students aged 11 to 18 years found that the immediate effect of sexting was "active emotions (I feel lively, energetic, satisfied, ready, determined, active)". This finding did not differ between girls and boys. There is less longitudinal data considering the longer-term impacts of sexting on mental health. Some data suggests that sexting, in and of itself, is not necessarily related to lower mental wellbeing,[39] while other research finds that sexting is related to cyberbullying, depression and suicidal ideation.[40]

A US study with female adolescents reported an association between being sexually coerced (offline) and sending, and being asked to send, a naked image (online).[41] A separate meta-analysis of research concluded that adolescents who engage in sexting are more likely to use alcohol and drugs, experience anxiety and depression and to have sex with multiple partners (for males) and not use contraception, these associations were stronger in younger adolescents.[42]

Australian research highlights that male and female young people draw a clear distinction between consensual sexting and non-consensual sharing or circulation of images.[43] This also suggests that impacts will differ depending on whether the image was non-consensually shared.

While the data shows that both male and female young people engage in sending and receiving sexts, the impacts can be very different.[44,45]

For adolescent boys, getting someone to send 'special' sexualised photos directly to another person is seen as valuable currency. A UK study found that it provides the [generally male] receiver with proof of their popularity and power.[46] Similarly, Australian research found that boys perceived sexts from girls as "'trophies' that could be shared in order to demonstrate their sexual success to other males". [47]

Further, while boys will also send images of their own body this can have differential effects, including disgust on the part of the receiver (particularly where the image was unsolicited), or it can be seen as funny and relatively unexciting.[48,49,50]

However, for girls the risks of the image being shared are high, with the impact often resulting in shame and cyberbullying.[51] Evidence also suggests that girls can often be coerced into sending a suggestive or explicit image.[52]

Attitudes to relationships and sex

Young people's attitudes about sex and gender equality have a significant impact on the nature of girls' experiences of sex and intimate relationships.

The National Community Attitudes towards Violence against Women Survey (NCAS) was conducted in 2017 and reported on young people's (aged 16 to 24 years) attitudes to violence against women and gender equality. This survey found that most young people aged 16 to 24 years have a good knowledge of key aspects of violence against women, support gender equality, reject attitudes supportive of violence against women, and say they would act or like to act if they witnessed abuse or disrespect of women.[53]

However, the survey also found:

* one-quarter (24%) of young men thought that women find it flattering to be pursued even if they are not interested (compared to 13% of young women).
* 36 per cent of male young people and 26 per cent of female young people agreed that women prefer a man to be in charge of the relationship.
* 22 per cent of male young people and 12 per cent of female young people agree that men should take control in relationships and be the head of the household.
* approximately one-in-seven (14%) young Australians (male and female) believe a man would be justified to force sex if the woman initiated the intimacy, but then changed her mind and pushed him away.
* 15 per cent of male young people and 11 per cent of female young people agree that if a woman is raped while she is drunk or affected by drugs she is at least partly responsible.[54]

The authors highlight that based on this survey, theorists' expectations that younger generations will have more liberal attitudes to gender equality is not proving to be the case, particularly regarding equality in relationships and the private sphere.[55]

In 2019, VicHealth commissioned the Queensland University of Technology to conduct research into masculinities in Australia. They conducted an online, nationally representative survey with the sample of 1,619 respondents (oversampling for 16 to 17 year-olds). The survey asked a number of questions about 'traditional masculinities' which was not formally defined but represents expectations regarding men conforming to masculine norms and endorsement of stereotypical masculine behaviours.[56]

This survey found that only 36.8 per cent of male 16 to 17 year-olds agreed that 'traditional masculinity harms both men and women' compared to 75.6 per cent of female 16 to 17 year-olds. Twenty-seven per cent of male 16 to 17 year-olds agreed with the statement 'If a guy has a girlfriend or wife he deserves to know where she is all the time', compared to 20.7 per cent of their female peers. One-fifth (20.6%) of male 16 to 17 year-olds agreed with the idea that 'men should use violence to get the respect they deserve' (compared to 8.3% of female 16 to 17 year-olds).[57]

Similar to the ANROWS survey, for many of the questions regarding intimate relationships, a greater proportion of male 16 to 17 year-olds held traditional views than older men.

Another survey on gender equality with 2,122 Australians conducted in 2018 by Ipsos found that 21 per cent of younger Australians (Gen Z: 16 to 25 years) agreed that 'men dominate sexual relations', which was a similar proportion of other age groups (Millenials: 26%, Gen X: 20%).[58]

The 2020 report: Unpacking the Man Box: What is the impact of the man box on young Australian men's behaviour and well-being? collected the views of 1,000 male young people aged 18 to 30 years on masculinity. They used regression analysis to find a strong association between endorsement of rigid gender roles[59] and perpetuation of bullying, sexual harassment and violence.[60]

These recent Australian surveys highlight that female and male young people have very different and conflicting views about gender equality. In particular, a significant proportion of male young people in Australia have traditional views on gender equality which may be harmful to female young people and may impact female young people's relationships with their male peers, including boyfriends, more directly during the adolescent years. These views are likely to cause issues for girls and young women as they may try to conform to these gendered expectations and/or have relationships with male young people (or men) who may be coercive, domineering or violent.

These findings align with other research which has found that young women continue to be held to different standards than young men with regards to heterosexual sexual relationships, where men are free to have multiple sexual partners without disapproval, however women with multiple sexual partners can be labelled promiscuous or a slut.[61,62,63,64]

A qualitative focus group study with 43 girls in the US aged between 14 and 17 years reported that many of the participants discussed being fearful about being deceived by their male peers, pressured into sex and labelled as promiscuous.[65]

A longitudinal study in the US found that female adolescents who reported having sex had significant decreases in peer acceptance over time, while male adolescents had increased peer acceptance. In contrast, 'making out', that is not having sexual intercourse, had greater peer acceptance for females and lower peer acceptance for males.[66]

While there has been no recent Australian research considering young people's views on the sexual double standard, a qualitative study with 94 heterosexual women aged 16 to 49 years found that the double standard continued to have an influence on how they managed their relationships. In particular, the participants focused on their male partner's pleasure and ignored their own desires or wishes.[67]

Australian research considering young people's views on the sexual double standard is needed.

These gendered views conflict with female young people's perspectives that they are equal to their male peers and are able to be sexual and express desire. These views are also in conflict with the sexualised image that female young people sometimes portray, often to signify their equality and empowerment.[68]

Research suggests that this conflict is present for many female young people as they develop their identity and sense of self, and it requires that they strike a balance between expressing themselves authentically and risking being shamed.[69]

Exposure to and consumption of pornography

Increasing access to the internet has meant children and young people are now often able to access sexual content – both educational and sexually explicit and/or pornographic – without the mediation of their parents or other adults.

In recent years there has been an exponential increase in the quantity of porn available online and the type of porn available is increasingly violent and degrading.[70] A study in 2010 found that 88 per cent of the pornographic videos contained high levels of aggression and violence and in the majority of cases the person being aggressive was male and the recipients of the aggression were female.[71] Since that time, online porn sites have significantly increased the volume of videos available online.

A primary concern regarding the proliferation of pornography online is that it may impact young people's understandings and expectations of intimate relationships and sex. In particular, that young people may believe that the often violent and degrading activities and attitudes portrayed in porn are 'normal, acceptable and rewarding'.[72] In particular, research suggests that frequent or regular viewing of pornography may contribute to young men engaging in coercive or aggressive behaviours and holding negative views of gender equality.[73,74] These attitudes and behaviours may negatively influence female young people's experiences of sex and wellbeing more broadly.

In 2018, Our Watch conducted a survey of Australian young people aged 15 to 20 years and reported that the median age of first seeing pornography was 13 years for boys and 16 years for girls.[75]

Over one-half (56%) of boys surveyed said they viewed pornography at least once per week over the past 12 months, compared to 15 per cent of girls. Over 17 per cent of boys in the survey reported daily usage of pornography compared to one per cent of girls.[76] In this survey, 50 per cent of boys had deliberately sought out pornography when they first saw it, compared to 40 per cent of girls.[77]

A nationally representative survey of NZ young people aged 14 to 17 years reported that almost one-half (51%) of girls and two-thirds (68%) of boys had seen pornography by 14 years of age. By 17 years of age, two-thirds (68%) of girls and 81 per cent of boys had seen pornography.[78] This survey also found that 20 per cent of boys and 20 per cent of girls had seen pornography by age 11 or younger.[79]

In this study, the first time they saw pornography, 44 per cent of girls and 31 per cent of boys saw it by accident, while 30 per cent of girls and 38 per cent of boys said that someone showed it to them. In this survey, only 27 per cent of boys and 18 per cent of girls had searched for it themselves.[80]

Australian research in 2010 found that around 27 per cent of children aged nine to 12 years and 60 per cent of young people aged 13 to 16 years had seen sexual images either online or offline in the past 12 months.[81] Of the children aged nine to 10 years who had seen sexual images online (11%), almost all felt bothered by it.[82] This study did not ask about whether the viewing of sexual content was deliberate or accidental.

A 2015 study using data from an online survey of Victorians aged 15 to 29 years[83] found that 69 per cent of the male participants had first seen porn when they were 13 years or younger, compared to 23 per cent of female participants.[84] Another recent Australian online (panel-based) survey with 1,000 male young people (aged 18 to 30 years) found that 59 per cent had 'often' or 'very often' accessed pornography or sexually explicit material in the past month.[85]

Research considering whether viewing pornography has a negative impact on children and young people is not conclusive.[86] There are some obvious difficulties with researching the impact of porn on children and young people as it is critical that the research participants are not exposed to something harmful or a level of content they have not yet seen.[87]

However, it is clear that male children and young people are much more likely to view sexually explicit material than their female peers. Male young people are also more likely than female young people to deliberately access pornography either with friends or on their own. Female children and young people are more likely to be shown pornography by someone (often a boyfriend or older male friend).[88,89]

Evidence suggests that female and male young people view porn differently; where female young people are more likely to view porn negatively (e.g. as degrading or distasteful), male young people are more likely to see it as stimulating and exciting.[90]

A 2016 Senate Inquiry, Harm being done to Australian children through access to pornography on the Internet determined from multiple submissions that there was insufficient data on Australian children and young people's access to pornography.[91] The inquiry reported that many experts believe that exposure to pornography is likely to be increasing over recent years due to the ease of access to the internet and the proliferation of porn sites online. In particular, Associate Professor Michael Flood, an Australian expert on pornography, submitted that rates of unwanted exposure to pornography were significantly increasing in the US and were likely to be increasing here.[92]

The committee recommended the Australian government commission research into Australian children and young people's exposure to pornography. This recommendation was supported by the government, however has not yet been actioned.

Pornography has changed substantially in the last 50 years, where prior to the internet, children may have seen nudes in a magazine or sometimes seen an X-rated video (which were generally not commonly available). Now, violent and explicit pornography, that often shows women being dominated and degraded, is available online with little or no barriers to access.[93] There is significant concern, and some evidence, that this may be influencing children and young people's views on what is 'normal' when it comes to sex and giving them unrealistic understandings regarding sexual behaviours, consent and pleasure.[94,95]

A recent UK survey found that 44 per cent of boys (aged 11 to 17 years) and 29 per cent of girls reported that viewing pornography had given them ideas about sex they wanted to try out. Furthermore, 24 per cent of 13 to 14 year-olds and 16 per cent of 15 to 16 year-olds agreed that seeing pornography had led them to believe that 'women should act in certain ways during sex'. Similarly, 23 per cent of 13 to 14 year-olds and 18 per cent of 15 to 16 year-olds agreed that seeing pornography had led them to believe that 'men should act in certain ways during sex'.[96]

The NZ Classification Office survey reported that around 34 per cent of boys said that one way they learnt about sex was through pornography, compared to 17 per cent of girls. This also increased with age, with 44 per cent of 17 year-old boys saying that pornography is one of the ways they learn about sex, compared to 23 per cent of 17 year-old girls.[97]

A 2016 survey with 4,564 students aged 14 to 17 years in 45 schools in five European countries reported a clear association for boys between regularly viewing pornography and perpetrating sexual coercion and abuse, although they were unable to determine the direction of causality. This study also found that viewing pornography was related to sexting, which also appeared to be related to coercion and abuse.[98]

Other research has found that young men who view pornography are more likely to be concerned with their own pleasure and have less interest in their partner, and that they were less likely to take consent seriously.[99]

A study with 568 Flemish young people aged 15 to 18 years-old found that exposure to sexually explicit material online was associated with the adoption of sexist beliefs (the notion that women are sex-objects) which was then related to greater acceptance of rape myths (e.g. victim-blaming).[100]

A recent large nationally representative survey of adults (18 to 60 years) in the US reported a significant association between pornography viewing and specific sexual behaviours. They found that women and men who have sex with men were more likely to have been choked (21.4% women), been ejaculated on (32.3% women, 52.7% men who have sex with men) and experienced aggressive oral sex (34.0% women). The researchers conclude that there have potentially been changes in sexual behaviours in recent years, in particular a possible increase in aggressive sexual acts such as choking.[101] Although this research was with adults, these activities are possibly also increasing for sexually active young people.

Similarly, data suggests that anal sex is also becoming more prevalent for young people in Australia with 12.6 per cent of students in Years 10, 11 and 12 having had anal sex in 2018, compared to 8.7 per cent in 2013. In particular, the proportion of female Year 10, 11 and 12 students engaging in anal sex increased from 7.0 per cent in 2013 to 11.2 per cent in 2018.[102,103]

Qualitative evidence suggests that young women are often coerced into anal sex and many experience it as painful.[104] A large-scale qualitative study with young people aged 16 to 18 years in the UK found that the participants recognised that anal sex was expected to be pleasurable for the male, but potentially painful for the female, and risky for their reputation.[105] This study found that anal sex was generally initiated and executed by male young people in a coercive manner, often without consent. It also reported that male young people frequently cited pornography as the reason for trying anal sex, however competitive peer pressure was also a critical influence.[106]

These attitudes will have a significant impact on female young people's wellbeing, as they increase their risk of being coerced to do something they may not enjoy and may find painful and degrading and/or increase the risk of being sexually assaulted.

There is also some evidence to suggest that pornography can impact female young people's perspective on their bodies, in particular it can lead to viewing the 'pornstar' body as the ideal and to genital dissatisfaction.[107,108]

There is evidence that genital dissatisfaction has led to an increase in cosmetic genital surgery.[109] Over the past 15 years there has been an increase in female young people requesting cosmetic genital surgery.[110,111] A review of the Medicare Benefits Schedule in Australia found that the number of claims for vulvoplasty and labiaplasty increased from 744 in 2003–04 to 1,588 in 2012–13 and that one of the age groups with the largest increases was female young people aged 15 to 24 years.[112]

More research is needed to investigate any relationship between young people's viewing of pornography and their perspectives on gender equality and/or safe and consensual sex and how this influences female young people's safety and wellbeing.

Sexual risk and responsibility

Sexual activity brings with it the risk of pregnancy, sexually transmitted infections and sexual violence. Girls and women are generally held more responsible for managing pregnancy and sexual violence risks than boys and men.

Research using a large-scale study in the US found that parents of daughters talked more about sexual topics including the harmful consequences of sexual activity and were more disapproving regarding their child having sex at an early age than parents of sons.[113] Other research has also found that parents are more likely to communicate with daughters more often about sex and are more likely to highlight the negative consequences of sexual activity.[114]

Societal norms dictate that girls and women are more at harm from sex (through pregnancy, moral degradation and/or assault) while simultaneously holding them responsible for ensuring their own safety.[115,116] Although there is limited research on this topic, this additional requirement for girls to be more responsible and vigilant than boys may negatively influence their mental health and wellbeing.

Pregnancy is a significant risk for young people who are sexually active. The National Survey of Australian Secondary Students and Sexual Health reported that 20 per cent of Year 10 to Year 12 students used the withdrawal contraceptive method during their last experience of vaginal sex and eight per cent used no contraceptive method.[117] Considering, 48.9 per cent of female young people in Years 10 to 12 are having vaginal sex,[118] this corresponds to around 14 per cent who are at significant risk of pregnancy and may experience a level of anxiety about this risk.

In an Australian study conducted in 2017 and 2018, 78.6 per cent of 15 to 29 year-olds strongly agreed that people their age should use condoms with any new partner, however only 23.2 per cent strongly agreed that using condoms was common among people their age. Female young people were more likely to support the use of condoms.[119]

Although both participants are equally responsible for pregnancy, in the case of unwanted pregnancies, female young people bear the majority of the risk and, thus, often bear the responsibility for contraception. Qualitative research has highlighted that while male young people in heterosexual liaisons or relationships may intend to, they often do not take responsibility for contraception, leaving this responsibility to their female partners.[120,121,122]

A qualitative focus group study with 43 girls (aged 14 to 17 years) in the US in the late 2000s reported that participants were very concerned about the risk of pregnancy but also saw girls who had become pregnant as personally responsible and somehow deficient. The researchers found that most participants tended to 'place individual blame on girls for their own vulnerability to sexual risks'.[123]

Similarly, qualitative interview-based research with 17 young female university students (aged 18 to 28 years) found that the women performed work (labour) to ensure they were safe, including practising 'good contraceptive behaviour', 'waiting to have sex' and 'careful decision-making'. The researchers concluded that the young women were vigilant in ensuring their sexual relationships were safe, but they were often unaware of the effort this involved.[124]

Thus, many girls see themselves as personally responsible for managing risks related to relationships and sexual activity. This requirement for girls to be responsible and vigilant (in control) are similar to girls' experiences at school with respect to academic achievement – where girls often feel they need to work hard and boys prefer to show effortless achievement. It is important to note that being (and feeling) responsible requires mental and emotional effort that is perhaps not experienced as often by boys.[125]

With respect to sex education at school, a synthesis of qualitative studies across multiple countries including Australia, the UK and the US concluded that young people found sex and relationships education at school embarrassing, negative and heterosexist. The various studies generally found that the sex and relationship education at school did not take into account that many of the students are already sexually active and may have diverse experiences.[126]

In the Commissioner's Speaking Out Survey 2019, only 43.6 per cent of Year 7 to Year 12 students found sex education at school very or extremely relevant, while almost half (47.3%) found sex education at school somewhat relevant.[127]

Multiple studies noted that sexual feelings and the emotional aspects of relationships are not adequately discussed.[128]

It is critical that young people are able to openly and comfortably communicate boundaries and concerns with sexual partners, and establish strong and supportive social connections, which allows for the reduction in unsafe or unwanted sexual activity.

What do young people say about sex and relationships

There has been some qualitative research on sex and relationships in Australia, although little in recent years.

An Australian study in the early 2000s with 40 young people aged 15 to 19 years (25 female and 15 male) found that a significant majority of the female participants felt pressure to be in a relationship so that they could avoid being excluded from peer conversations about sex and relationships.

> *"You're sitting there going 'Well I haven't done this or I don't have a boyfriend or a girlfriend, so what am I going to do?' So, I think it's you sitting there and you don't know. But if you don't know, if you haven't had a relationship then it's, 'Oh, god, what do I do' and 'I can't say anything' you get really quiet." (female)* [129]

For around one-half of the male participants there was similar pressure, although it was focused on having sexual experience rather than relationships (relationships 'tie you down').[130]

This study also found that the female young people romanticised their relationships, including interpreting male control (e.g. using the term 'ownership' for girlfriends and male jealousy) as signs of love.[131]

A majority (15 of 25) of the female participants in this study had experienced harassment or unwanted attention from males; six of the 25 young women had experienced violence and abuse in a dating relationship.

> *"We were at a mate's house and it was his 21st and my boyfriend had heaps to drink and decided to like another girl and I said, 'that's it' and I went to walk away. He grabbed my arm and twisted it all the way and broke my bone up here so I walked."*

At the same time, many of the young women did not like to define their boyfriends as violent or abusive and would come up with excuses and would ultimately blame themselves for making a bad choice.

> *"No violence. A bit of sternness that borderlines on something that's a bit uncomfortable. Yes, it probably is violence but I don't like to call it violence because when I think of that I think why would I personally want to be in a relationship where there is violence. It probably is violence now that I think about it but I don't want to think about it because it will make me see what's happening and it might change my thoughts a bit."* [132]

Quantitative research has highlighted that technology has changed the way many young people interact with each other. In a NSW-based qualitative study with 68 young people aged 14 to 18 years exploring sexual content online, a number of girls noted that they, or one of their friends had been asked to send nudes by 'random guys'.[133]

> "When I was in Year 8, I got Facebook and accepted everyone even randoms as friends then got all these weird guys messaging me and asking for nudes and I blocked them." (female)
>
> "...there was a page [on Facebook] for my school, specifically of naked girls..." (male) [134]

In this study, sexting during relationships was also discussed as being something consensual yet risky:

> "I have a friend who recently broke up with his girlfriend and during their relationship to express their love they would send those types of photos and he saved those photos and was like 'look at this stupid bitch' and sent me the photos... it was gross." (female)

Focus group research conducted in Melbourne in 2013 with 39 young people aged 16 to 25 years reported that sexting is common amongst young people.[135]

> "It's become now like a normal thing. I feel like it's a milestone for teenagers, you know: you have sex, you get drunk, you go to a party, you sext for the first time." (female)

The participants noted that gender norms and expectations were different for males and females and that this influenced the implications, where a male who had sexted was considered a 'legend', where girls who did so were considered 'sluts'.

> "Guys will – when drunk – might whip out their dick for a laugh; girls aren't apt to do the same. So, when girls send a message and it gets distributed, there's more of a social shame to it because we still live in that kind of unequal society where... girls get a lot more shame about their body than guys do." (male) [136]

In another Australian study with 68 high school students in 2013 and 2014, a number of the female participants had been asked for nudes or knew someone who had been asked:

> "I personally know lots of girls who have been asked to send nudes on Snapchat. It's kinda made for that – if you're on it you either see it or some random guy is asking you for it." [137]

In a UK-based study the boys explained that collecting nude images of girls gained them the respect of their peers, while one of the girls noted that for the boys it is seen as a competition:

> "Basically with the boys it is a competition, who can get the most revealing picture or the biggest breasted girl or basically them pictures are just a competition..." [138]

At the same time, the participants often blamed other girls, rather than the boys, if their nude or explicit images were distributed amongst their peers:

> "Girl 1: I think it is the girl's fault most of the time. They shouldn't be taking the pictures in the first place.
>
> Girl 2: And then the boys make it worse by spreading it.
>
> Girl 3: The boys don't really care.
>
> Girl 4: No, but if you don't want to get exposed you don't take it. If you are going to have sex with your boyfriend you don't take pictures of it or videos of it..." [139]

Therefore, although young people recognise that forwarding a sexual image to a third person without consent is not appropriate – rather than blame the boys who do this, they will generally blame the girls for taking and sending the photo in the first place.

A Perth-based study in the mid-2010s with 40 heterosexual young people aged 18 to 25 years explored young adults' experiences of sexting. In this study, a number of the female participants had received unsolicited sexual images from male young people on online dating sites:

> "Getting them is uncomfortable for me, and it can even feel threatening in a way. I've gotten guys' pictures like of their willy. People will be like here's one of me, now you give me one back, and I just don't like that, I don't want to see that."

In the same study, some male young people talked about sending locker room photos of their penis to their (generally male) friends as a joke.[140]

Dating applications (e.g. Tinder, Yubo and others) provide an additional platform for young people to meet, however also open up additional risks, including sexual harassment and sexual violence.

Australian PhD research explored the experiences of 17 young women aged 18 to 30 years using the dating application Tinder.[141] These young women recounted multiple occasions where they received highly intrusive sexualised messages.[142]

The participants also reported that sometimes when they did not respond in a positive way to someone's advances, they would receive abusive messages in return:

> *"...if I don't send pictures or if I refuse to meet up with someone, with the intention of having sex, and I say "no" it's always like "you're a bitch. You're a slut. I can hook up with girls 10 times hotter than you."* [143]

A number of the participants in this study also reported receiving unsolicited 'dick pics' from men they were talking to:

> *"...it would just be middle of the day, 2pm and I would be at uni and he was a tradie and I would just open up my Snapchat and it would be of a video of him just going to the bathroom touching himself. And I don't know why he got the impression that that's something I would wanna see. Yeah, so that's definitely something and I guess other guys, if they ever got my number, they added me on Snapchat, like, kind of similar thing, they'd just send a dick pic."* [144]

While these are the experiences of young women, rather than adolescent girls – they demonstrate how 'toxic' forms of masculinity can create an unsafe place for women and girls online.

In an online survey with 600 Australian young women aged 16 to 19 years, many of the participants raised pornography as an issue in relationships. They called for school sex education to include discussions of pornography.

> *"Schools should introduce pornography as part of the education as young boys are accessing it and thinking this is normal in relationships."* [145]

In contrast, NZ research with 52 young people aged 14 to 17 years did not find widespread concern about how pornography may impact relationships, although there was some concern about consent and coercion.

> *"Well, before in porn, they don't really say, "Are you okay with this" or, "Do you want to try this out?" They just start. They might think, I don't need to ask, I'll just go ahead." (female)* [146]

Social media also provides a mechanism for surveillance and control in relationships. US-based focus group research with 39 young people aged between 14 and 19 years found a number of the male participants kept a close eye on their girlfriend's social networking activity as they felt this way they could keep control and not lose her to another boy.[147]

> *"You're gonna want to do that [check their phone] and then you're gonna want to like know everything about 'em just cause after you've been with this girl for so long that you're ...It's weird to think, but you're scared ... [softer] you're scared. You don't want them to learn that you're scared." (male)*
>
> *"He's really jealous and gets really overprotective. He asks for my password... to see who I am talking, chatting with." (female)* [148]

The girls in this study also reported monitoring their boyfriends' social networking activity – although the girls described this as worrying about their boyfriends' safety and wellbeing.[149]

Research in the US conducted in the mid-2000s with students around the age of 16 found that both boys and girls articulated the double-standard that it was 'natural' for boys to be sexually aggressive, while girls who engaged in sex with multiple partners or showed desire were denigrated. The participants often recognised this double-standard and some saw it as unfair, however they felt that 'that's just how it is'.

> *"Some of my guy friends compete with each other to see who has more girls and who has slept with more girls... Like they'll make bets sayin' how much—how—how many girls in one month... I feel bad for some girls that are tramps 'cause they're really nice girls... And then like after that, all the boys know that, "Oh she's—she'll—well you know she's—she—she's easy or whatever." (male)* [150]

This study also found that the girls subordinated their desires and needs to the boys, while boys did not consider the girls' desires or needs, other than as a barrier to be managed.[151]

Similarly, a focus group study in the US with girls aged 14 to 17 years in the late 2000s found that girls were fearful of being seen as promiscuous after a sexual encounter:

> *"They'll say something bad about you, and once you get that reputation in school [as a slut]... then I don't know what to tell you (laughing)"* [152]

A small Perth-based qualitative study in mid-2010 explored sexual consent with eight female university students and found that they believed that girls and women needed to say 'no' if they expect a male to stop – that is active enthusiastic consent (saying yes) was not expected:

> *"...you have to verbalise it and if you don't it's not the guy's fault."* [153]

Some of the participants in this study recognised that young women can be coerced/persuaded into sex, however believed that this was not assault and it is the women's responsibility to be firm.

> *"I know you can be pressured into having sex: I don't think that's an assault... so if you get worn down you're still consenting"*
>
> *"If you go home with someone you don't know, you're putting yourself in that position... [if] you're too gutless to say 'I don't want to do this' I wouldn't class that as sexual assault: I would class that as a weakness on your part."* [154]

A number of the participants felt that once they've been flirtatious or suggestive, they have no choice but to follow through with having sex – even when they no longer want to – as it would be inappropriate to say no. As a result, the participants described multiple situations where they did not say no even though they did not want to have sex and/or were not enjoying it.[155]

More qualitative research is needed into Australian young people's intimate relationships, in particular, gender equity within these relationships.

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Chapter 9
Feeling and being safe

- Female young people are less likely than their male peers to feel safe at home, at school, in their community or on public transport. This can impact their daily activities, reduce their independence and increase feelings of anxiety.

- Data suggests that girls are more likely than boys to be cyberbullied and when they are bullied, it is often about their appearance and highly sexualised.

- There is no data on the prevalence of sexual harassment for Australian female young people aged between 12 and 17 years, however more than one-third (38.3%) of female young people aged 18 to 24 years experienced sexual harassment in a 12-month period.

- One-in-10 (10.7%) women report being sexually abused before the age of 15 years, with around 50 per cent of these being abused by a relative or family member.

- Young women aged 15 to 19 years have the highest risk of physical and sexual assault across all age groups – research suggests this is most commonly sexual assault (including rape) and/or intimate partner violence.

- Girls and young women have internalised the belief that it is their responsibility to manage their safety in public.

Feeling and being safe in your home and community is a basic right without which girls and women are unable to fully participate in their own lives.

Female young people are more likely than male young people to experience sexual assault and intimate partner violence in the home, everyday harassment on the street and sexual assault in their communities. Everyday experiences of sexism that contribute to women and girls not feeling safe are endemic, as have been highlighted in recent years with the #MeToo movement and recent discussions regarding sexual harassment and assault in Australia.[1,2]

Safety at home

All young people have the right to live with a family who cares for them and keeps them safe, however for some children and young people home is not a safe place and this can have a profound impact on their wellbeing. The consequences can include poor physical health, learning and developmental problems, substance abuse, mental health issues and homelessness.[3]

Results from the Commissioner's 2019 Speaking Out Survey found that only 54 per cent of WA female high school students reported always feeling safe at home compared to 68 per cent of their male peers. In contrast, 66 per cent of Year 4 to Year 6 female students felt safe at home all the time, suggesting that girls may experience a significant decline in feelings of safety at home from primary school to high school. One-in-10 (9.9%) female high school students feel safe at home only sometimes or less.[4]

While some children and young people do not feel safe at home because they are experiencing abuse and neglect, other young people may not feel safe at home due to parental conflict, sibling bullying, parental rejection of their LGBTI status and/or excessive parental control being exerted over their lives.[5,6,7]

There is very little research asking female young people why they feel unsafe at home. However, data shows that female children and young people are at greater risk of assault in their home than male children and young people.

The ABS 2016 Personal Safety Survey (PSS) estimates that approximately 16 per cent of women experienced physical and/or sexual abuse before the age of 15 (compared to 11% of men).[8]

Reported rates of physical abuse are similar between male and female children and young people, however female children and young people are more than twice as likely as male children and young people to experience sexual abuse before the age of 15 years (10.7% of females compared to 4.6% of males).

Proportion of adults reporting physical and/or sexual abuse before the age of 15 years, per cent, Australia, 2016

	Male	Female	Total
Sexual abuse	4.6	10.7	7.7
Physical abuse	8.1	8.8	8.5
Total abuse	11.0	15.8	13.4

Source: Australian Bureau of Statistics, *Personal Safety Survey: 2016*, Table 31.3 Experience of abuse before the age of 15, Characteristics of abuse by sex of respondent, Proportion of persons

Around 50 per cent of sexually abused female children and young people reported being abused by a relative or family member, compared to approximately 21 per cent of male children and young people.[9]

Similarly, the ABS Recorded crime collection shows that girls are four-times more likely to be sexually assaulted by a family member than boys (107.0 sexual assaults per 100,000 girls compared with 28.3 sexual assaults per 100,000 boys). Girls aged 10 to 14 years have the greatest risk of sexual assault by a family member.[10]

Although data is limited, research suggests that fathers, stepfathers and siblings are the most common familial perpetrators of sexual abuse on girls.[11,12]

It should be noted that the recorded crimes data are based on crimes recorded by jurisdictional police forces and therefore will underestimate the prevalence of assault, particularly sexual assault for young women.[13,14]

While prevalence data is limited, research suggests that certain groups of girls and young women are at greater risk of experiencing violence in the home. In particular, Aboriginal girls and young women and girls and young women with disability.[15]

Data from the ABS 2014–15 National Aboriginal and Torres Strait Islander Social Survey (NATSISS) shows a higher rate of family and domestic violence in Aboriginal families than non-Aboriginal families across Australia.[16] Aboriginal Australians are also three times more likely to be sexually assaulted than non-Aboriginal Australians.[17]

Aboriginal Australians are more likely to have increased risk factors for family violence such as poor and overcrowded housing, higher levels of poverty, lower education and higher unemployment.[18] This should be understood in the context of a history of colonisation, forced child removal, social disadvantage and intergenerational trauma.[19]

Female young people with disability are also at a high risk of experiencing physical and sexual violence. Young women (aged 18 to 29 years) with disability are twice as likely to experience sexual violence over their lifetime as young women without disability.[20]

The data that is available on women from culturally and linguistically diverse backgrounds suggests that they experience similar levels of physical and sexual violence in the home to women who are not from CALD backgrounds. However, there is some research which suggests the data may underestimate the prevalence in these communities.[21]

Limited data is currently available on the overall prevalence or incidence of experiences of abuse in childhood and adolescence. It is expected that this gap will be at least partially addressed by the Australian Child Maltreatment Study funded by the National Health and Medical Research Council. This study will involve a national survey of 10,000 randomly selected participants to determine the prevalence of child maltreatment in Australia.

There are numerous barriers to disclosing sexual assault for children and young people including a lack of support, self-blame, shame and guilt and belief there may be negative consequences for the family.[22] According to the ABS Personal Safety Survey the majority of adult women (9 out of 10) who are sexually assaulted do not contact the police after the incident.[23]

Thus, a small but significant proportion of female children and young people will likely have experienced sexual abuse in their home environment and not told anyone.

Female young people who have experienced sexual assault are also more likely to run away and experience homelessness (which in turn increases the risk of sexual assault). In 2018–19, 768 young people aged 15 to 17 years presented alone to homelessness services in WA, of these 60 per cent were female young people.[24]

A large US-based longitudinal study with 5,387 female young people aged 11 to 18 years found that nearly one-quarter (23%) of the participants who had run away from home had experienced a prior sexual assault, compared to five per cent of those who had not run away.[25]

Female young people are also at risk of violence and sexual assault from intimate partners. Overall, from 15 years of age, women in Australia are at greatest risk of violence from a cohabiting partner, while men are more likely to experience violence from a stranger or an acquaintance or neighbour than a family member.[26]

The majority of Australian female victims of family-violence-related sexual assault (recorded by police) were under 19 years of age (52.0%).[27]

WA young women aged 15 to 19 years are significantly more likely than young men to be reported as victims of physical assault as a result of family and domestic violence (1,282 female young people compared to 365 male young people in 2019).[28]

Although there is no data reporting on intimate partner violence experienced by young people aged 15 to 19 years. Data from the Australian Institute of Health and Welfare 2019, Family, domestic and sexual violence in Australia: continuing the national story 2019 reports that young women aged 15 to 24 years are significantly more likely to be hospitalised for family violence-related assaults than young men.[29] Further, the ABS Personal Safety Survey shows that women are three times more likely than men to have experienced violence by an intimate partner since the age of 15 years.[30]

At the same time, a recent Australian survey has reported a decline in the number of Australian young people who believe that women are more likely than men to suffer harm from domestic violence (from 90% in 2009, 87% in 2013 and 75% in 2017) or that men more often commit acts of domestic violence (71% in 2009, 75% in 2013 and only 60% in 2017).[31]

Adolescent girls are experiencing intimate partner violence across the world. A multi-country study of intimate partner violence among young women aged 15 to 19 years in disadvantaged communities estimated that 28 per cent of ever-partnered young women in Baltimore and 36 per cent in Johannesburg had experienced intimate partner violence. This study also found that one in eight (12%) young women in Baltimore and Johannesburg had experienced non-partner sexual violence.[32]

There has been no equivalent study with this age group in Australia.

The Victorian Royal Commission into Family Violence considered literature that investigated the causes of family and intimate partner violence and concluded that the issue was complex but was "deeply rooted in power imbalances that are reinforced by gender norms and stereotypes."[33]

Female young people can also feel unsafe at home if they experience sibling bullying.[34] Again prevalence data is limited, however research suggests that sibling bullying is widespread.[35,36]

Some data has found that girls are more likely to experience sibling bullying than boys, although other research suggests that boys and girls experience similar levels of sibling bullying (victimisation).[37,38,39] Research does suggest that boys are generally more likely than girls to be the perpetrators of sibling bullying, particularly physical bullying.[40,41]

Research has reported associations between experiencing sibling bullying and lower self-esteem, life satisfaction and internalising problems.[42] A longitudinal study in the UK found that children (aged 12 years) who were frequently bullied by siblings were more likely to experience depression, anxiety and self-harm (at age 18 years) than those who were not bullied. This study found the association between bullying and wellbeing outcomes were not gender-specific.[43] More research is needed on this topic.

There has been limited research into sibling bullying in Australia and considering a significant minority of female young people say they do not feel safe at home, this is an area that requires further exploration.

A safe home underpins young people's sense of identity and independence and provides feelings of security and belonging which support young people's social and emotional wellbeing.[44,45] If many female young people do not feel safe in their homes this will have an impact on their wellbeing.

Bullying

One of the primary causes of children and young people not feeling safe is bullying, either 'traditional' (offline) bullying or cyberbullying (online).

Young people who experience bullying have a significantly higher risk of mental health issues including self-harm and suicide than children and young people who do not experience bullying.[46] This section considers whether the increase in mental health and wellbeing issues for female young people could be related to an increase or change in bullying practices over recent years.

Bullying can take many forms including physical bullying which involves physical threats and harm, verbal bullying which includes teasing and name-calling and relational bullying which includes exclusion from activities and rumour-spreading.[47]

Technological change and in particular social media have transformed the social landscape for young people today.[48,49] This creates opportunities for greater social connectedness and belonging, however it also makes young people more vulnerable to online or cyberbullying. Online or cyberbullying often takes the form of relational bullying (i.e. rumour spreading and exclusion), however can also include threats, teasing and name-calling.

The emergence of social media and mobile devices also contributes to difficulties measuring the prevalence of bullying over time, as processes and therefore definitions of bullying change.

The Commissioner's 2019 Speaking Out Survey found that male young people in Years 7 to 12 were significantly more likely than their female peers to report that they had never been bullied (offline or online) by students from their school (male: 53.6%, female: 42.7%). Around one-quarter of male (25.2%) and female students (22.4%) reported experiencing traditional (offline) bullying, while female students were significantly more likely to have experienced both face-to-face bullying and cyberbullying (male: 10.2%, female: 17.2%).[50]

Australian research using 2014 data (Wave 6) from LSAC found that female young people (15 years of age) were more likely to be victims of bullying than their male peers (58.2% of victims were female, 41.8% male).[51]

This study reported that female young people were more likely than male young people to have experienced relational bullying (e.g. exclusion or rumours being spread) (67.1% female and 32.9% male), while male young people were more likely to experience physical bullying (79.2% male and 20.8% female).[52]

These findings are consistent with international research which shows that male adolescents are more likely to experience physical bullying while female young people are more likely to experience other types of bullying (relational, cyberbullying etc.).[53,54]

Similarly, in PISA 2018, male Australian 15 year-old students reported greater exposure to bullying at school than female students and a greater proportion of male students than female students reported being made fun of, being threatened, things being taken away or destroyed and being hit or pushed around. While marginally greater proportions of female students reported being left out of things on purpose and have nasty rumours spread about them.[55]

The PISA bullying questions asked about bullying at school (left out, made fun of, hit or pushed, threatened, nasty rumours etc.) and did not incorporate any specific questions on online (cyber) bullying.[56]

A 2017 systematic review and meta-analysis of Australian studies on bullying of children and adolescents found 46 studies that reported on the prevalence of bulling from 1990 to 2015. Through their analysis, the authors concluded that traditional bullying lifetime prevalence was 25 per cent and the prevalence of cyberbullying (only) was seven per cent. This analysis did not include studies that considered young people who had experienced both bullying and cyberbullying, hence based on the study above this likely underestimates cyberbullying experiences.[57]

A longitudinal study from 2010 to 2012 in Perth with students aged 13 to 15 years in 35 non-government metropolitan high schools found that students who were cyberbullied generally also experienced 'traditional' bullying. Between 22 and 25 per cent of students reported being both cyber and traditionally bullied each year. This study found that male and female students were equally likely to report only traditional bullying (around 40%), but girls were significantly more likely to report being both cyberbullied and bullied (girls around 30% compared to boys around 17%).[58]

In 2020, the eSafety Commissioner conducted a survey with 627 Australian young people aged 12 to 17 years, asking them about their online experiences. The study reported that 30 per cent of 12 to 17 year-old respondents had received unwanted contact from a stranger, 20 per cent had received unwanted inappropriate content such as pornography or violent content and 16 per cent said they experienced social exclusion online.[59]

This study also found a greater proportion of female young people aged 12 to 17 years than male had at least one negative experience online (47% of female young people compared to 41% of male). In particular, female young people were more likely than male young people to have been contacted by a stranger (female: 35%, male: 26%).[60]

US-based research has reported that the prevalence of bullying, including cyberbullying, decreased significantly from 2005 to 2014.[61] However, highlighting the definitional issues that come with bullying studies, cyberbullying in this study was defined as email and blogs – which may have been appropriate in 2005, however was likely a restrictive definition in 2014.

The US National Crime Victimization Survey has found the incidence of face-to-face bullying at school decreased from 2005 to 2017, although the reduction was less for female students (male students from 27 to 17 per cent; female students from 30 to 24 per cent).[62]

Data from the Youth Behaviour Risk Survey, a representative survey of Year 9 to Year 12 students in the US, found that in 2017 around 15 per cent of Year 9 to Year 12 students experienced cyberbullying in the previous 12 months. There were again significant gender differences, with 20 per cent of female students having experienced cyberbullying, compared to 10 per cent of male students.[63] These results are very similar to the results of the 2019 Speaking Out Survey.

The Youth Behaviour Risk Survey indicated that the incidence of cyberbullying had remained stable from 2011 to 2017. In this study, the definition of cyberbullying was changed in the 2017 survey to account for the rise of social media platforms.[64]

There is less data on the perpetrators of bullying, although with regard to traditional bullying, boys are generally more likely than girls to be perpetrators. The Australian covert bullying prevalence study conducted in 2007 with children and young people aged 8 to 14 years reported that 11 per cent of boys reported they bullied others every few weeks or more often and seven per cent of girls.[65] This study did consider cyberbullying, however as it was conducted in 2007 prior to the existence of mobile devices, the results are likely not relevant to the current period.

In contrast, research using data from the LSAC with young people aged 14 to 15 years, reported that male 15 year-olds were more than twice as likely to be bullies than their female peers (69.2% of bully perpetrators were male, 30.8% were female). Again, this study did not specifically consider cyberbullying although the questions stated: 'include texts, Facebook etc. as well as face-to-face contact'. [66]

With regards to cyberbullying only, evidence is mixed regarding perpetration. While researchers theorise that girls are more likely to perpetrate cyberbullying than physical face-to-face bullying (because they generally prefer indirect forms of aggression), the data is not conclusive.[67] The authors of a meta-analysis considering cyberbullying and gender determined that the evidence to date suggests that, unlike in traditional bullying, there are no clear differences between male and female young people in perpetrating cyberbullying.[68]

Research shows that there are gender differences in how bullying impacts the victim. Evidence suggests that female young people are more likely than male young people to internalise the negative effects from bullying and experience lower self-esteem and anxiety.[69,70]

A South Australian study with 1,313 young people aged 12 to 15 years explored the relationship between bullying, friendships and mental health. This study found the female bully-victims were more likely than male to experience emotional symptoms, while male bully-victims were more likely than female bully-victims to have behavioural difficulties.[71]

A study in Israel concluded that young people who had experienced peer rejection (including being ignored, bullied or assaulted) were more likely to have psychological distress than those who had not experienced peer rejection. In addition, girls who experienced peer rejection were more likely than boys to have lower potency levels (self-control, self-belief and trust in society/social support[72]).[73]

A US-based study with a nationally representative sample of young people in Years 6 to 10 reported that the association between bullying and internalising problems was significantly stronger for girls than for boys. This study also found that both male and female young people with high levels of parental communication were less likely to experience internalising symptoms.[74]

Thus, data suggests that female young people are more likely to experience relational bullying and cyberbullying than male young people. Further, although the data is not conclusive, with the advent of social media and mobile devices, cyberbullying is likely to have increased in prevalence in the last decade.

At the same time, mental health problems, including anxiety and depression are believed to be more prevalent for young people who reported relational bullying or cyberbullying.[75,76]

Hence, research to date suggests that female young people are more likely to experience the types of bullying that are associated with poorer mental health.

Sexual and street harassment

Female young people are more likely than male young people to not be safe or feel safe in their communities. Female young people are more likely than male young people to experience sexual and street harassment – they are also more likely to fear harassment and sexual violence and change their behaviour accordingly.[77]

Sexual harassment covers a broad range of experiences including harassment at school, workplaces and in public places; while street harassment generally occurs in a public setting and the perpetrator is usually a stranger – street harassment can be sexual in nature or not.[78]

The Australian Bureau of Statistics considers sexual harassment to have occurred 'when a person experienced or had been subjected to one or more selected behaviours which they found improper or unwanted, which made them feel uncomfortable, and/or were offensive due to their sexual nature'.[79]

There is limited data on the overall prevalence of sexual harassment experienced by female young people aged between 12 and 17 years.

In the Commissioner's 2019 Speaking Out Survey almost 40 per cent (38%) of female high school students felt safe in their local area only sometimes or less (compared to 26% for male young people). Almost one-in-10 (9.2%) female high school students never feel safe on public transport (compared to 4.4% of male high school students).[80]

Analysis from LSAC data found that one-half (49%) of female young people aged 16 to 17 years had experienced some form of unwanted sexual behaviours. This included one-third (33%) of girls being "told, showed or sent sexual pictures, stories or jokes that made me feel uncomfortable" and almost one-third (30%) reported that "someone made sexual gestures, rude remarks, used body language, touched, or looked at me in a way that embarrassed or upset me".[81]

Data from the Australian Bureau of Statistics 2016 Personal Safety Survey estimates that more than one-third (38.3%) of female young people (aged 18 to 24 years) have experienced sexual harassment in the last 12 months (compared to 16.0% of young men).[82]

In 2017, the Australian Human Rights Commission reported that one-quarter (25%) of female university students were sexually harassed at university compared to 15 per cent of male students.[83] This study also found that trans and gender diverse students were more likely to have been sexually harassed than young cis-women or men.[84]

An online survey conducted in 2014 by the Australia Institute reported that the majority (87%) of Australian female respondents had experienced at least one form of verbal or physical street harassment in their lifetime.[85]

In the 2018 Ipsos study with 500 young women aged 18 to 25 years living in Sydney, almost one-quarter of the participants reported that they experience street harassment at least once a month. More than one-third were harassed when they were aged between 11 and 15 years.[86]

Other data suggests that a significant proportion of both male and female children and young people are subject to sexual harassment, particularly at school. There is also evidence to suggest that as they age, girls experience more forms of sexual harassment than boys.[87]

Research suggests that teachers may often classify gendered/sexual harassment at school as bullying.[88] However, sexual harassment is different from bullying as it reinforces social inequalities and stereotypes and is generally linked to male power and dominance.[89,90]

An Australian survey conducted with 3,571 government and non-government co-educational high school students (aged 11 years to 19 years) in NSW found that 42.5 per cent of male students and 40.0 per cent of female students experienced sexual harassment. They found overall a larger proportion of male students experienced more forms of sexual harassment and that male students experienced sexual harassment more often.[91]

The most common forms of sexual harassment were: making sexual comments, jokes, gestures, or looks at you (male: 29.9%, female: 32.3%); calling you 'gay' or similar in a mean way (male: 25.2%, female: 11.2%); poking, grabbing, or pinching you in a sexual way (male: 20.1%, female: 14.8%); brushing up against you on purpose in a sexual way (male: 17.6%; female: 12.9%).[92] This study did not include data on the gender of the perpetrators[93] – although other studies have found that male students are more commonly the perpetrators.[94,95]

This study also found that as young people aged, female students experienced more forms of sexual harassment than male students.[96] The study did not ask about sexual assault.

US-based research also reported that similar proportions of male and female students experienced sexual harassment (male: 37%, female: 44%).[97] This study reported that male students were generally the perpetrators of sexual harassment. That is, male and female students experiencing sexual harassment were generally being harassed by male students.[98]

This study also determined that sexual harassment was more upsetting than bullying and that girls were more upset than boys by the same type of harassment.[99]

Other US-based research found that white male students were more likely than white female students to be sexually harassed by someone of the same sex and someone who is currently their friend.[100]

Sexual harassment (including homophobic name-calling) in adolescence is a way for male young people to demonstrate traditional masculinity and gendered dominance.[101] Thus reinforcing traditional gender norms and stereotypes. That younger boys are just as likely, if not more likely, than younger girls to experience harassment that is sexualised from their peers, highlights the process through which boys are initiated into a form of masculinity that is aggressive, status-oriented and heterosexist.

Research exploring male middle school students' experiences of sexual harassment found that male students who were victims of sexual harassment and endorsed concepts of gender inequality (male dominance) were more likely to be perpetrators.[102]

An older US-based study with 1,086 students found high levels of sexual assault from peers at school. Almost 40 per cent of Year 7 and Year 8 girls reported being sexually assaulted by their peers, this increased to over one-half (53%) of girls in Year 9 to Year 12 being sexually assaulted. Approximately, one-half of these reported being 'kissed, hugged or sexually touched, while many reported being forced to perform oral sex (6%), being raped (12%) or something else sexual (11%).[103]

Girls were significantly more likely to report sexual harassment and assault than boys. Further, female students were significantly more likely to be somewhat or very upset by the harassment or assault (female students: 47.2%, male students: 13.2%).[104]

While there has been no Australian research considering the prevalence of sexual assault in schools, anecdotal evidence from a 2021 petition for earlier sex education in schools started by a former Sydney student suggests that experiences of sexual assault during high school are widespread.[105]

Research has also found that both bullying and sexual harassment impact school engagement and achievement, however the effect is significantly stronger for girls than boys. In particular, one study found that the negative impact (effect size) of sexual harassment on school satisfaction for girls was double that for boys. In addition, the impact of sexual harassment on school satisfaction for girls was double that of bullying.[106]

In the chapter on school engagement, it was noted that female young people have experienced a significant decline in school engagement over the last 10 years. Although there is no data correlating this decline with an increase in sexual harassment, this study highlights one possible factor in this decline.

This data highlights that school-based anti-bullying programs and training should recognise that high school students also engage in sexual harassment and that this may require different approaches to prevention and management.

The Plan International survey with young women in Sydney found that experiences of street harassment impacted many of the participants' mental health and wellbeing, with more than one-third of the participants (35%) who had been harassed once a month or more reporting they felt anxiety, depression or ongoing mental health as a result of the harassment.[107]

Almost one-half (46%) of participants said they feel unsafe on public transport during the day when they are on their own. This increased to 92 per cent feeling unsafe at night. Only 10 per cent of participants said they always feel safe to go out at night.[108] More than two-thirds (69%) of the survey participants said they sometimes avoid going out because they are worried about being safe.[109]

Another longitudinal study found that the likelihood of male and female students experiencing depressive symptoms and substance use at age 17 increased if they were involved in sexual/gendered harassment from age 13 to 17 years (as perpetrators or victims). This study found that on average, female students reported higher levels of depressive symptoms, while male students reported more substance use.[110]

A longitudinal study in Sweden concluded that for girls, sexual name-calling was likely to lead to depressive symptoms, whereas this was not the case for boys. Instead, boys with a higher level of pre-existing depressive symptoms (greater vulnerability) were more likely to be subject to sexual harassment victimisation.[111]

A further longitudinal study found that the likelihood of male and female students experiencing depressive symptoms and substance use at age 17 increased if they were involved in sexual/gendered harassment from age 13 to 17 years (as perpetrators or victims). This study found that on average, female students reported higher levels of depressive symptoms, while male students reported more substance use.[112]

Other US-based research has found adolescent girls' (aged 15 to 19 years) experiences of sexual harassment were significantly associated with binge drinking and marijuana use and feelings of depression and anxiety.[113]

Thus, evidence suggests that male and female students may experience multiple forms of sexual harassment in similar proportions. However, female students are more likely to experience internalising symptoms as a result of the harassment, while boys who experience harassment are more likely to experience the behaviour as less upsetting or turn to substance abuse and aggression/perpetration of harassment.

These different effects on male and female young people are likely related to existing societal stereotypes and norms; for girls, sexual harassment reinforces gender inequality and male dominance, while for many boys, harassment experiences are part of the initiation into traditional (toxic) forms of masculinity.

This section has not specifically considered LGBTI students' experiences of sexual harassment, although evidence suggests that LGBTI students will experience higher levels of sexual harassment than non-LGBTI students.[114,115]

Sexual and physical violence

Female young people not only experience a high level of sexual and street harassment but are also at greater risk of experiencing sexual and physical violence in the community and in intimate relationships.

Female young people in WA aged 15 to 19 years are almost twice as likely as male young people of the same age to be physically assaulted and are 10 times more likely to be sexually assaulted.[116]

Young people aged 15 to 19 years recorded as victims of physical assault and sexual assault by gender, number per 100,000, WA, 2019

	Female	Male
Physical assault	2,380.0	1,233.4
Sexual assault	796.0	81.1

Source: ABS, *Recorded Crime - Victims, Australia, 2019*, Table 7 Victims, Age by selected offences and sex, States and territories, 2019

In 2017, young women aged 15 to 19 years had the highest rate of sexual assault of any age across genders (763 per 100,000 victims), girls aged 10 to 14 years had the second highest reported rate of victimisation (549 per 100,000 victims).[117]

The 2016 Personal Safety survey found that an estimated 17 per cent of all women in Australia have experienced sexual assault in their lifetime (since they were 15 years of age) compared to 4.3 per cent of men.[118] Young women are particularly at risk with 4.5 per cent of young women aged 18 to 24 years reporting they had been sexually assaulted in the 12 months prior to the survey.[119]

Further, women and girls with a disability or long term health condition are more likely to be sexually assaulted than those without a disability.[120] Aboriginal women and girls are also more likely to experience sexual violence, although there is no national prevalence data available.[121]

Critically, male young people aged 15 to 19 years have the highest offender rate for sexual assault across all age groups (102.9 per 100,000).[122]

It should also be noted that according to the ABS Personal Safety Survey the majority of women (9 out of 10) who were sexually assaulted did not contact the police after the incident, therefore female young people's experiences of assault are significantly underestimated.[123]

In 2011, the US-based National Survey of Children's Exposure to Violence was conducted with 4,503 children and young people aged one to 17 years. The survey was completed with parents of children aged one to nine years and with the young person when they were aged 10 to 17 years

and found that 10.7 per cent of female young people aged 14 to 17 years had experienced sexual abuse or sexual assault in the preceding year (1.9% of males). This included 8.2 per cent of female 14 to 17 year-olds reporting attempted or completed rape.[124]

As discussed in **Safety at home**, a significant proportion of female young people under 18 years of age are assaulted by intimate partners.

Notably, while total violence against any person in Australia has declined significantly from 2005 to 2016, rates of partner violence and sexual violence have remained stable.[125] Furthermore, between 2010 and 2018 rates of sexual assault violence recorded by police increased by more than 30 per cent, although it is not known how much of this increase is due to an increase in sexual assault or an increase in reporting to police.[126]

Experiencing sexual harassment and sexual violence during the adolescent years will impact female young people's health and wellbeing.

The Personal Safety survey reports more than one-half (57.3%) of female victims of sexual assault by a male experienced anxiety or fear for personal safety in the 12 months after most recent incident. A slightly greater proportion (58.5%) of women who experienced sexual threat experienced anxiety or fear for personal safety in the 12 months after the most recent incident.[127]

The Mission Australia report Gender gaps: Findings from the Youth Survey 2018 found that more than double the proportion of female than male young people (aged 15 to 19 years) feel unsafe or very unsafe walking alone after dark in their community (46.6% of female young people compared to 18.1% of male young people).[128]

The analysis of intimate partner violence in both Baltimore and Johannesburg found that the victims were more likely to have poor health across multiple areas including substance use, sexual and reproductive health, mental health, and self-rated health.[129]

A UK-based longitudinal study of girls (aged 13 to 17 years) who had been sexually assaulted found that they had high levels of pre-existing socio-economic disadvantage and vulnerability, and within the first six weeks after the assault they had extremely high levels of depressive, anxiety, and post-traumatic stress symptoms, which largely persisted at the four to five month follow-up. One-in-12 participants experienced another assault within four to five months of the initial presentation.[130]

A representative study with adolescent students in the US found that those students with a history of sexual assault were significantly more likely than those without a history of sexual assault to have attempted suicide at least once in the past year.[131]

Experiences of street harassment and fear of being physically attacked or sexually assaulted impacts how girls and young women go about their daily lives.

A Canadian study with 3,997 school students who lived in close proximity to their school found that female students were less likely to walk or cycle to school than male students (female: 57.9%, male: 67.6%), and that female students were more likely to be worried about being bullied or attacked if they walked or rode to school (female: 73.5%, male: 62.1%).[132]

The Mission Australia report Gender gaps: Findings from the Youth Survey 2018 found that more than double the proportion of female than male young people (aged 15 to 19 years) feel unsafe or very unsafe walking alone after dark in their community (46.6% of female young people compared to 18.1% of male young people).[133]

These feelings continue from youth into adulthood, with the Australian Bureau of Statistics 2016 Personal Safety Survey reporting that one-quarter (26%) of WA women aged 18 years and over did not walk alone at night (in the last 12 months) because they felt unsafe (4% of WA men).[134]

Research shows that women generally have a greater fear of crime than men, even though crime rates report that women are less likely to experience 'crime' than men. There are various theories proposed to explain this, one of which is that the crime rates do not reflect the reality of women's and girls' experiences as many crimes against women and girls are not reported (e.g. intimate partner violence, sexual harassment, rape).[135]

Other theories are that many women feel a greater sense of vulnerability as a result of their physical size/power and that socialisation processes encourage women to feel like they need protection and that public spaces can be dangerous for them.[136,137]

Some research suggests that women's greater fear is specifically related to a fear of sexual assault.[138,139]

Supporting this 'shadow of sexual assault' hypothesis for young women (although not adolescents), a Swedish study with 2,853 university students found that the young women in the study were consistently more fearful of crime victimisation than the young men. In addition, women were not worried about general physical harm, but about sexual offences and sexual violence.[140]

Another study with 1,212 young people aged 14 to 18 years in Belgium found that girls were significantly more fearful of crime and felt more unsafe than boys.[141] This study reported that girls with parents who were actively engaged in organising leisure activities felt less fear, in contrast to boys who experienced less fear when they had parents who encouraged independence and freedom. Active (stimulation) engagement in activities was differentiated from parental supervision – which increased feelings of fear for both boys and girls. Additionally, girls who had a leisure pattern aligned with being sporty (included playing sports and doing technical hobbies and gaming) were less likely to be fearful.[142]

Girls and young women often experience harassment when in public places and do not feel safe in their communities. At the same time, many girls and women feel it is their responsibility to not put themselves at risk.

Plan International's 2016 study on everyday sexism with 15 to 19 year-old Australian girls reported that almost one-third of the participants felt that "girls should not be out in public places after dark" and 23 per cent thought that "girls should not travel alone on public transport".[143] Thus, a high proportion of girls and young women have internalised the belief that it is their responsibility to manage their safety in public places.

Girls' understanding that it is their responsibility to not put themselves in harm's way is consistent with the enduring culture of victim-blaming in sexual assault cases and family violence procedures in Australia and around the world.[144,145,146]

While the data shows that sexual harassment and assault are not uncommon for young women and girls, they are also often not believed or blamed for the assault, referencing their own behaviour, including drinking alcohol or whether they said 'No' forcefully enough.

Data shows that around 10 per cent of women and girls who experience sexual assault will report it to police and even fewer will go to trial and result in a conviction.[147] It has been estimated that

in 2017 the alleged offender was proceeded against in only 14.9 per cent of investigations into sexual assault in WA.[148] In the WA Parliamentary *Inquiry into the Prosecution of Assaults and Sexual Offences*, the committee determined that only nine per cent of reported cases resulted in a conviction.[149]

At the same time, questioning the alleged victim about their own behaviour before the assault is common. This questioning is conducted by the police as part of their investigation and then again, if the case goes to court, by the prosecution.[150] Evidence suggests that this process of questioning often re-traumatises the victim.[151]

Violence against women and girls occurs within the broader landscape of gender inequality and stereotypical conceptions of masculinity and femininity.[152,153] As outlined in the chapter on **Equality in everyday life**, a significant minority of Australian male young people (and some female young people) continue to hold gender-stereotypical views of women's and men's roles in society.

Evidence shows that men who agree with 'sexist, patriarchal, or sexually hostile attitudes' are more likely to use violence against women.[154] Further, many boys and men's peer relationships are embedded in a form of masculinity which can support 'aggression and disrespect' towards girls and women.[155] These attitudes and behaviours not only negatively impact girls and women, but also pressure boys and men to conform to a specific pattern of masculinity that often negatively impacts their own mental health and wellbeing.[156]

Alcohol, drugs and safety

Consumption of alcohol and drug use can not only impact young people's physical health and mental health, but also their safety. Young people who drink alcohol or use drugs are at a greater risk of experiencing aggressive behaviour and physical and sexual assault.[157,158,159]

Alcohol use, in particular, is associated with increased risks of harm including risky sexual behaviour, experiences of sexual coercion and sexual violence, anti-social behaviour, aggression and self-harm.[160,161] Binge drinking is associated with increased risk of sexual assault.[162] Recent Australian research has also reported that female young people have a higher risk than male young people of experiencing alcohol-related blackouts.[163]

Alcohol is also a contributing factor to the three leading causes of death among adolescents – unintentional injuries, homicide and suicide.[164] Alcohol and illicit drugs can also be used by young people (and adults) to self-medicate as a means of coping with poor mental health, stressful experiences or trauma.[165,166]

The Australian Secondary Students' Alcohol and Drug (ASSAD) survey is a national survey of young people's substance use conducted in high schools around Australia every three years. This survey shows that high school students' use of alcohol and tobacco has decreased over recent decades,[167] while illicit drug use has generally stayed constant since 2011.[168] These changes were generally similar for both male and female students.

Alcohol and analgesics are the most common substances used by high school students (ever drank alcohol: 66%, ever used analgesics: 95%).[169] Female young people were more likely to use analgesics than male young people (female: 52%, male: 42%). Girls most commonly used analgesics for headaches (44%) and easing menstrual pain (25%).[170]

The ASSAD survey shows that alcohol use among adolescents is declining over time, however risky drinking remains a significant issue.[171] One-third (33%) of all students reported risky drinking[172] on at least one occasion in their lifetime. Male young people were more likely than female young people to drink alcohol at risky levels.[173]

Australian research with young people aged 14 to 19 years who were the most risky drinkers of their age group (riskiest 25%) explored experiences of harm by others who were drinking. This study found that the female participants were more likely than the male participants to experience multiple harms characterised by fear and harassment. While male participants were more likely to experience harms related to aggression and acts of physical violence.[174]

The following table highlights some of the common experiences with statistically significant differences between male and female respondents.

Selected harms experienced due to others' drinking by gender, per cent, Australia

	Female	Male
Fear and harassment		
Give you unwanted sexual attention	70.8	47.0
Made you afraid when you encountered them on the street	44.3	30.0
Harassed or bothered you at a party or some other private setting	40.8	33.8
Harassed or bothered you on the street or public place	42.5	35.9
Left you alone in an unsafe situation	31.5	15.1
Put you in fear	32.8	20.4
Aggression		
Yell at, criticize or verbally abuse you	32.7	38.4
Pushed or shoved you	28.0	42.4
Physically hurt you	11.3	17.4

Source: Lam T et al 2019, *From eye rolls to punches: experiences of harm from others' drinking among risky-drinking adolescents across Australia*

Note: In this survey, risky drinking was categorised as five or more drinks on a single occasion, at least twice a month.

This data highlights that female young people who are around peers drinking at risky levels have a high risk of experiencing sexual harassment and worries about being unsafe.

Research suggests that alcohol-related sexual assault of female university students is relatively common.[175,176] However, there has been limited research with female high school students.

A study with 3,784 female students aged 15 to 18 years in Norway found that female students who were frequently drunk or severely intoxicated were more likely to have experienced sexual assault. This study found that five per cent of all female students had been sexually assaulted while too drunk to resist during the past year.[177]

There is no data on the prevalence of experiences of sexual assault for Australian high school students and its relationship with alcohol consumption, although anecdotal evidence from a 2021 petition for earlier sex education in schools suggests that these experiences may not be uncommon.[178]

What do female young people say about feeling and being safe

There has been some qualitative research considering Australian female young people's feelings of safety or experience of violence with a focus on bullying and cyberbullying. There has been limited research exploring girls' feelings of safety at home or their direct experiences of violence and sexual violence.

The Commissioner's 2019 Speaking Out Survey found that female young people are much less likely to feel safe at home than male young people, yet there has been limited qualitative research asking female young people about what makes them feel unsafe at home.

An Australian focus group study with children and young people aged four to 17 years explored how the participants think about and experience safety.[179] A number of the older participants explained that they can feel unsafe and vulnerable when they feel powerless, particularly when adults are being intimidating or threatening.[180]

Participants also highlighted that they are not always listened to when they do raise concerns. A group of young people had explained how they had raised concerns about a 'creepy' teacher, however their concerns were dismissed as there was no concrete evidence, although later that teacher was let go for inappropriate behaviour. This study did not differentiate between male and female participants.

"They need to trust our gut feelings because it's real... and even if it's not if a kid feels unsafe adults have to take notice because it's real to them... yeah adults shouldn't ignore it or say 'don't worry, settle down' just because it's a kid." [181]

A number of the participants noted that sometimes adults made them feel unsafe due to their warning and cautions.

"Kids are all worried about adults these days — that every adult is going to be a paedophile or is going to throw them in the back of a white van... Like Stranger Danger... That means that kids don't trust adults anymore and they won't have anyone to go and get help from if something's wrong or if they've been abused or something. How does that make them safer? I think they feel less safe because adults have tried to make them safer." [182]

Aboriginal girls and women are particularly at risk of experiencing sexual assault and intimate partner violence, although there has been little qualitative research into their experiences.[183,184] A study exploring 40 Aboriginal young people's (aged 12 to 18 years) views on their health and health topics more broadly, found that many of the male and female participants experienced bullying and racism and reported that alcohol and drugs made them feel unsafe.

> *"I learnt about drinking by doing it and having a hangover. I was bullied at school; boys were very nasty at school. Alcohol makes people mental and violent. I'd like to change being bullied at school, being abused... There should be more help out here. Government should come out here themselves and look."* [185]

For some young people, home can be very unsafe due to family violence and physical and sexual assault causing them to leave the family home and try to find alternate accommodation.[186] This sometimes results in young people couch surfing (with friends or other family members) or falling into homelessness.[187,188]

In 2017, the Commissioner funded a research project with WA young people under 15 years of age who had experiences of homelessness. In this study, some of the female participants talked about experiencing sexual abuse from family members.

> *"Me and mum, we didn't really get along and then I was a bit like (pause) so she kicked me out when I was twelve and when I was about eleven I went and stayed with my dad for a while and he was really abusive, like physically, sexually and mentally towards me and I went back to my mum about six months later and I told her everything and she told me I was lying, that it wasn't true, that he would never do something like that but I couldn't be in that house knowing that she held that against me thinking I was lying."* [189]

More qualitative research is needed which asks young people about feeling safe or unsafe at home.

Bullying and negative online experiences can lead to female young people feeling unsafe at school, at home or in their community.

In 2008, a study based in Adelaide conducted focus groups with 40 girls and 32 boys aged 14 to 15 years exploring bullying and sexual harassment.[190] The female participants reported being verbally abused by the boys, almost always in a sexual way ('slut', 'whore', 'bitch', 'lezzo') or about their appearance. The authors concluded that girls' experiences of being bullied at school were often sexual in nature.

> *"They pay you out if you're not the picture perfect long blonde hair, big boobs, long legs."* (female)
>
> *"Yeah, they say it to the person, they go up to you and go, you know, 'you're a slut.'"* (female)

Additionally, most of the boys recognised that bullying can have a significant impact on girls' mental health.

> *"If like, there's a girl that keeps getting paid out because she's like fat and ugly and intelligent and stuff, then she could become sort of disturbed mentally." (male)* [191]

Some of the male participants said there was 'not much' verbal harassment, however a number agreed that boys would make derogatory comments about girls. The boys generally justified the behaviour as 'just joking'. In this study a number of the girls reported that they felt intimidated by the boys at school, to the extent they were "afraid to walk across the quadrangle alone in case something was said to them".[192]

US-based research with 22 young people aged 10 to 18 years who were victims of bullying explored their coping strategies.[193] In this study, emotion-focused reactions to bullying included experiencing fear and sadness:

> *"I'm scared, I mean I used to be happy to go to school, wake up every morning and come to school and then it just got to the point where I just didn't feel like it... because I knew I'd get bullied every day." (female)*
>
> *"I used to sit in my room in the dark and just cry...[the bully] really did get to me...whenever I actually get sad or my self-esteem is down I do repeat the things he said to me." (female)* [194]

Another Australian qualitative study into bullying and sexual harassment at school with 10 students aged 15 to 18 years contrasted traditional bullying and cyberbullying, with a number of the students discussed how the feel cyberbullying is worse than traditional bullying:[195]

> *"Cyberbullying is worse. Because, umm, people can join in and the person getting bullied can leave their Facebook and probably go and do something else but the bullying is still happening and that's not right." (female)* [196]

In this same study, one of the girls described how her sister had been cyberbullied – and yet this same girl cyberbullied others, explaining she might say:

> *"Like yuck you're a slut, or you're a huge nerd or that dress is fucking gross."*

The study highlighted that young people, including girls, will bully other people to increase their own social capital:

> *"It's really easy. Plus, it's a good way to make yourself look good, like people think you're funny and that, especially if you're doing it to someone no one likes at school over Facebook or something." (female)* [197]

This study also found that the participants highlighted that the lack of face-to-face confrontation was an attractive feature for girls who were bullying.

> *"Well boys are more likely to bully at school and physically fight the person they are picking on... [Girls] are more likely to do it over Facebook... Because sometimes they are too scared to say it to your face... girls kind of hide behind Facebook more, and do it in ways that are bitchy." (female)*[198]

The participants also discussed how once something had been posted it was difficult to remove:

> *"Well last year a photo of me was stolen off my Facebook profile, it was a picture of me in my bikini and someone stole it, edited it and added words above it saying "School X's local slut." It was so embarrassing so I reported it and had it removed but it was too late. Facebook removed it but everyone had already saved it to their own phones and even now it still gets uploaded again and again to different meme pages, online sites and people's profiles." (female)*[199]

Dating applications have also been shown to have particular risks related to sexual harassment, abuse and violence. Australian PhD research asked 17 young women aged 18 to 30 years about their experiences of using the dating application Tinder. In this study, the women recounted multiple experiences of sexual harassment, abuse and being sent inappropriate sexual content (dick picks).[200] A number of the women also recounted how some of the men would get angry and abusive if they felt rejected.

> *"I had a guy come over to my house just for a drink. We weren't doing anything and then he got really handsy. And I was like "okay, we're not doing this anymore" and he left and just started spamming me up and just blew up my phone on Tinder calling me a whore, that I was all this and it was like "cock tease" cause I invited him over..."*

A number of participants reflected on how this had changed their views on men and their own safety in the physical (offline) world:

> *"...I generally am wary when, like, meeting new guys about- could they be a guy that sends girls messages like this on Tinder? Could they be a guy who is violent, you know, when they drink? So, I do think that I carry that kind of wariness with me that's reflected about how I feel on Tinder into the outside world. So yeah, I guess it just reinforces attitudes that I have about how unsafe or safe women are around men. But especially ones that they don't know."*[201]

These experiences demonstrate how men's attitudes towards women and male aggression and violence can result in female young people feeling unsafe in the world more broadly.

As part of the Ipsos survey with 500 young women in Sydney, additional in-depth interviews were conducted with female young people aged 16 to 22 years.[202]

> *"Even for a 16 year-old, it's expected that if you go out by yourself, or with others, you will probably get whistled at, maybe a man will try to touch you, or you'll be propositioned on the street. Street harassment has become so normalised that too often women don't speak up about it, for fear of being labelled an 'over-reactor' or worse, having the blame laid on us: it's what we're wearing, how we behave, maybe even just because we're out on the street we're asking for it."*
>
> *"I was in Year 4 the first time I was catcalled. I was walking home after ballet practice, only a few streets away from home, when a car with P-plates slowed down next to me. In it was a group of men who started honking, wolf-whistling and shouting comments I didn't understand. I was alone and terrified and ran the rest of the way home. Still I am scared to walk the streets of Sydney. When I hear footsteps behind me, I speed up. When a car slows down next to me my heart skips a beat. When I see someone approaching me, I make a mental plan of what to do if something goes wrong."* [203]

In an online survey conducted with 1,426 Australians in 2014 many of the female participants reported experiencing street harassment.

> *"I'm 17 and I was wearing my school sports uniform waiting for a bus with my friend where four or five other people were sitting around, when an adult man told us how sexy we looked, asked his friends to look how sexy we are and how hot our school sports uniforms were."*
>
> *"I was walking home one night on a relatively busy street and from a passing car a young man yelled "I'm gonna rape you". They didn't come back and I made it home safely, but I was alone and it frightened me."* [204]

A study in Melbourne with 292 adult participants (80% women) explored experiences of street harassment. In this study, the participants noted the systemic gender inequality issues associated with street harassment.[205]

> *"I don't even know if what most of the harassers I've had have done is even a crime really? Is being annoying and not leaving someone alone at a pub a crime? How would one get justice for that (make him attend a really tedious lecture or something??) I'm not interested in justice I'm interested in a cultural shift and an end to rape culture."* (female)
>
> *"I would like to see education stamp out street harassment as much as possible through targeted education specific to male entitlement to women's bodies and to macho ideas of masculinity versus femininity and its associated negativity."* (female) [206]

These participants also discussed responses from people when they disclosed experiences of street harassment, these ranged from shock and disbelief from male friends, support from (mostly) female friends to dismissive or blaming responses:

> *"Sometimes people tell me to learn to take a compliment, or "why didn't you walk away/ move to a different part of the tram." Some people say: "Well you are pretty damn gorgeous, it comes with the territory." (female)* [207]

Fear of being physically attacked or sexually assaulted impacts how girls and young women go about their daily lives.

A survey with 123 female university students in the US reported open text views on fear of crime, with some female students reporting being most fearful of rape or sexual assault:

> *"I am more afraid of someone taking away my most prized possession, which would be my sense of self and safety, than any of my material things. Being assaulted means that my wounds will heal in time, but being raped, my wounds would never heal from that." * [208]

A research project into Sexual Violence in WA highlighted experiences of victims of sexual violence, including the following:

> *"He was my first proper boyfriend. I met him when I was 17 and was with him for five years. Most the time the sex was really rough. He'd often put his hands around my neck. Last time I was with him he held me against my will for over a day and physically and sexually assaulted me over and over again. It was really extreme. Really violent. He also tried to strangle me with my tights. I managed to escape. I was actually in the front yard when someone saw me. I ended up in hospital for a bit because the injuries were so bad." * [209]

While the data shows that sexual harassment and assault are not uncommon for young women and girls they are also often not believed or blamed or questioned about their own behaviour.

A qualitative study with 15 Australian university students aged 18 to 25 explored their understandings of alcohol-involved rape by presenting them with a scenario of non-consensual sex (rape) at a party. The study found that many of the students, including the young women, were disinclined to call it rape.

> *"...you can say no and then just like not do anything but if you're physically trying to get someone off kind of thing and push them away and... or like you're crying or something, then that's... I would consider that rape..." (female)*
>
> *"...it's not a good thing but it's a learning step I guess, and, hopefully next time she wouldn't drink as much or hopefully, next time, she'd be able to say no... more forcefully." (female)*
>
> *"She'd probably feel ashamed just for letting herself get into that situation because once it's happened, you can blame them as much as you want, but like when you think back to the actions beforehand, like, she did lead herself into that situation kind of thing." (female)*

In the focus group discussions throughout this study there was generally implicit agreement that it was the victim's role to prevent the rape and that the victim's behaviour should change (drink less,

say No more forcefully) to stop it from happening again. There was much less discussion of the male perpetrator and his responsibility to listen and stop.

Similarly, US-based qualitative research with female survivors of sexual assault aged 14 to 19 years found that many felt the police made them to feel like they had done something wrong. They were treated with scepticism and judged on their own behaviour.[210]

"And it... wasn't even like he was asking me... "Are you sure you tried to put up a fight?" You know, like asking me. It was like more, like, you know, you can tell in someone's tone like more accusing... He might as well have just said, "I don't really think that these kids raped you. I think you wanted it and you let them and that's it.""

"[The officer] was just like, "Well, why are you with a 25 year old? Well, why were you drinking?" You know, why this, why that? I'm like, I know it is wrong, but, you know, it happens, so let's get past this and try to do something about it. Like, you don't have to tell me what I did wrong; I know what I did wrong."[211]

A WA parliamentary review into the prosecution of sexual assault cases also received multiple submissions from victims of sexual assault, including the following:

"When I finally made a time to arrange a statement, the officer told me that being drunk meant that I could have given consent and just not remember. I told her that my drink was spiked, but got a similar response. She told me that a woman just recently was raped by five different men, and because she was drunk, of her own accord, the charges she had laid against the men couldn't lead to prosecution because she had brought it on herself. This was crushing to say the least. A rape, with witnesses, is un-prosecutable because of the victim purchased and consumed alcohol? I was so confused and disillusioned that I put off making a statement for a little while longer."[212]

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Chapter 10
Conclusion

The data and research explored in this review clearly highlights that female young people are significantly more likely to have lower mental health and wellbeing than their male peers, and in recent years the gender wellbeing gap is increasing.

The decline in mental health and wellbeing for female children and young people in comparison to male children and young people commences around puberty and at the time of the transition from primary school to high school. However, the foundations for this wellbeing gap may have been laid earlier through gendered stereotypes embedding normative understandings of appropriate behaviour for girls and boys.

At the onset of puberty, many girls experience poorer physical health than their male peers with various menstrual-related symptoms including period pain and headaches. Evidence suggests that the onset of puberty also increases the risk of anxiety-related disorders and subjective health complaints (e.g. abdominal pain, tiredness, nervousness). In addition, many girls (and boys) are going through puberty at a younger age than previous generations.

With puberty comes social and physical changes that impact girls' experiences at school and in their communities, which may be amplified with the influence of social media. The research shows that, particularly from puberty, girls continue to be under pressure to be attractive and slim and many experience street harassment and unwanted appearance-based (and often sexualised) attention and bullying. These experiences are supported by the continued prevalence of hyper-sexualised images of girls' and women's bodies in the media and online. All of these processes have been shown to increase the likelihood of self-surveillance, low self-esteem, shame and anxiety.

Shame and self-surveillance are also reasons given by many girls for not enjoying or not doing physical activity and sports. Qualitative research suggests that many girls feel pressure to 'look good' and be competent while exercising, and those that feel they do not meet these requirements do not enjoy it and stop doing it. Yet, research shows that moderate levels of physical activity are good for mental health.

Evidence also suggests that boys often cope with poor mental health by distraction, often with physical exercise and this can reduce their risk of experiencing longer-term mental health issues. However, girls are more likely to ruminate – which increases the likelihood of experiencing ongoing mental health issues.

Girls' relationships with family and friends are vital. They rely on close and supportive relationships with their parents, particularly their mothers, and their friends. However, the intensity of female friendships also means they are more vulnerable to disappointments and breakdowns – this in turn increases girls' likelihood of experiencing distress as a result of these difficulties. In these times, girls' need for supportive family relationships increases.

Many young people's sense of belonging at school declines when they move from primary school to high school. However, girls' sense of belonging at school has declined at a significantly greater rate than boys since 2003. While girls are often doing well academically, the move from primary school to high school can be stressful. In particular, it often requires saying goodbye to old close friends and building new intimate friendships. Unlike boys, girls often do not use sports or group-based

activities as a mechanism to build friendships and therefore may find it more difficult to make new friends. Teacher support during this period is essential.

Since 2012 there has been a significant increase in mental health issues for young people aged 12 to 17 years, with a particularly large increase for girls. This coincides with the increasing prevalence of social media usage by children and young people.

Research has found that in 2018, 45 per cent of US teenagers were 'online almost constantly', in contrast to 2012 when 42 per cent of US teenagers visited social media sites 'several times a day'.[1] Children and young people now grow up with devices as an integral part of their lives and this has changed dramatically in a very short space of time.

While many academics point to social media as a possible cause of the increasing mental health problems for young people today – the data is not [yet] conclusive. This may be because technology changes much more quickly than research projects can be delivered (with both ethics approval and publication timelines sometimes taking years). However, there are a number of discrete findings from research that suggest social media may be a significant factor in girls' lower wellbeing.

Evidence from various fields[2] suggests that female young people feel pressure to do well, take responsibility and/or 'prove themselves'; while male young people are more likely to be relaxed, confident and feel they will still achieve their goals without trying too hard. In qualitative research, young people (male and female) have noted that this is how society works – women need to work harder to do as well as men.

Gender inequality and sexism in society continues to impact on girls' and women's experiences in everyday life. Girls are still more likely to do more housework, more likely to be paid lower amounts of pocket money, less likely to be allowed to travel independently or do unsupervised activities and less likely to feel like they are good at maths and science.

A number of recent Australian surveys with young people have found that a significant proportion of male young people have traditional and retrograde views on gender equality, particularly regarding intimate relationships and unpaid work in the home. These views likely cause issues for some girls and young women as they may try to conform to these gendered expectations and/or have relationships with male young people (or men) who may be coercive, domineering or violent.

Evidence also suggests that the growing proliferation of pornography may increase the likelihood that male young people will be sexually aggressive and coercive and that it encourages negative views of gender equality.

Female young people continue to be at a high risk of sexual harassment and assault both at school and in their communities.

Protective factors

The research outlined in this report also highlights a number of factors that can support female young people and improve their overall wellbeing.

Supportive family relationships, including open and honest communication with parents and other adults is critical. Close, positive maternal relationships are particularly important for female young people. Parenting that provides female young people with the same opportunities for independence that their brothers and male peers experience is vital.

Positive and supportive friendships are essential for girls: girls rely on their friends for support more than boys, and are in regular contact with them, often through social media.

Social media is a critical component of many female young people's lives. It enables vital and supportive connections with friends and other supportive adults. However, evidence suggests it can also have a negative influence on female young people's self-esteem, sleep behaviours and mental health. Parents who regularly engage in open and non-judgemental discussions regarding social media and other online interactions are more likely to provide their daughters (and sons) with the confidence to discuss any concerns or worries they may have.

A school environment that supports school belonging and connectedness, with teachers and staff who are caring and relationship-based is essential. This is particularly critical as female young people transition from primary school to high school.

All young people have the right to be safe and feel safe in their neighbourhoods and communities. This allows them to develop their confidence and independence by engaging in community-based activities or just through walking, cycling or catching public transport alone without fear – something their male peers are generally able to do.

Female children and young people who engage in regular moderate physical exercise, particularly team sports, have been shown to have better self-esteem and mental and physical health. Evidence shows that parents and schools that are enthusiastically supportive of physical activity and sport, regardless of competence, are important.

High quality, non-stigmatising education about puberty and menstruation is critical. A high proportion of girls experience period pain and other menstrual symptoms in silence – it is important that parents and schools provide a space for open dialogue about puberty and the potential health impacts. Good health literacy more broadly is an essential foundation for girls' wellbeing – knowing that what they are experiencing is not uncommon and that support and treatment is available is invaluable.

Research suggests that encouraging girls to be self-compassionate and kind to themselves is crucial. This requires parents, teachers and other adults to also display kindness and less judgement of female children and young people – girls should not be held to a higher standard than boys in regulating their own behaviour, doing well at school or managing their appearance.

Finally, girls require a more equitable society where gender stereotypes regarding appropriate behaviour and activities for girls and boys are a thing of the past. Pervasive norms of femininity and masculinity continue to influence the way girls (and boys) are treated in everyday life and the way they see themselves. This also requires a world where young people see themselves as equal partners in intimate relationships, where they do not seek to dominate or bully and where they can explore their sexuality with openness, consideration, respect and enthusiastic consent.

Gaps in knowledge

This report highlights a number of gaps in knowledge, in particular, there has been limited qualitative research on many aspects of Australian girls' experiences.

Asking female young people about their views and experiences in the following areas is particularly critical:

- Although there is considerable data and research that shows female young people have worse mental health than male young people and that it has declined in the past 10 years, there has been limited research asking Australian girls how they feel and why.

- There is a clear correlation between the decline in female young people's mental health and the increase in social media use, yet evidence is still mixed regarding causation. Talking to female young people about their experiences with social media and whether they feel it impacts on their mental health and wellbeing is essential.

- A good relationship with parents has been shown to be one of the most important protective factors for both girls and boys and data suggests that during puberty/the transition to high school, girls feel that parental support declines. More qualitative research exploring girls' relationships with their parents is needed.

- Close friendships have been highlighted as being essential for girls' wellbeing. At the same time, evidence suggests girls' friendships are more vulnerable to breakdown and more experiences of peer exclusion and trust issues. Further qualitative research into girls' friendships in late primary and early high school is critical.

- A greater understanding of girls' experiences of intimate relationships including a discussion of consent and coercion, views on pornography and experiences of psychological, physical and sexual violence is required.

- While there have been a number of survey-based projects exploring Australian young people's views on gender equality, there has been very limited qualitative research. It is essential to hear how Australian children and young people (both male and female) experience, understand and exhibit gender equality.

This report has explored qualitative and quantitative research into female young people's wellbeing but has not specifically included data and research related to different cohorts of female children and young people. More data and research is required to better understand the experiences of diverse groups of female children and young people, such as Aboriginal children and young people, gender diverse and those with disability.

Next steps

This report highlights that female young people are significantly more likely to have worse wellbeing outcomes than their male peers, and how in recent years this gender gap is increasing.

It is hoped that these findings will be a call to urgent action across all government and non-government sectors working to support children and young people, and to inform policy, programs and services to improve wellbeing outcomes for girls.

Government, the non-government sector and the WA community must work together to address the challenges facing many female children and young people. A key aspect of this process is listening to female children and young people and hearing their concerns and worries. It is critical that policy and practice is informed by children and young people's views and experiences of their own wellbeing.

More Australian-based quantitative analysis that explores gender differences is needed, particularly in the fields of school engagement and belonging and supportive relationships. In addition, data on the prevalence of sexual harassment and assault for Australian female young people under 18 years of age is essential.

More Australian qualitative research with both female and male children and young people is critical.

The Commissioner recently completed fieldwork for the 2021 Speaking Out Survey, which surveyed approximately 16,000 children and young people around WA. This survey provides a rich and unique source of quantitative and qualitative data on WA children and young people's wellbeing. A detailed analysis of this data will include examining female children and young people's wellbeing. This will inform further consultations with children and young people to ensure their voices are heard and their views are given serious consideration.

Monitoring and reporting on female young people's wellbeing will continue through the Indicators of Wellbeing, which includes data on a range of measures including mental health, physical health, safety and education.

The Commissioner will continue to work collaboratively with government and non-government organisations and advocate for further action to address the complex causes of female young people's wellbeing disadvantage.

The solutions to these complex issues are not only programs and services aimed at improving female children and young people's wellbeing but must also be focused on decreasing gender inequality and gendered attitudes in Australian society.

While significant investment has been targeted at reducing gendered inequality (particularly violence against women and girls), societal change is slow. Recent Australian surveys show that many male and female young Australians do not hold more positive attitudes to gender equality than older generations. Further, a significant minority of young men hold more regressive views on gender equality than the general population, particularly in relation to intimate relationships. These views and related behaviours impact female children and young people's life experiences.

Early, age-appropriate education on gender, consent and respectful relationships is critical. However, this will not be enough; children learn not only through explicit instruction but through watching adults' behaviours. Gendered understandings and expressions of masculinity and femininity influence girls' and boys' beliefs and actions. While these are not always negative expressions – they can often reinforce stereotypes and perpetuate inequality.

More research, debate and social change is needed to make the shift towards a more gender-equal society that allows all children and young people to grow up safe, happy and strong.

Notes

1   Madden M et al 2013, *Teens, Social Media and Privacy*, Pew Research Centre, P 22.
2   The key areas discussed in the literature review are academic engagement and effort, chores and housework, and responsibility for staying physically safe and practising safe sex.

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