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### Original research article

# Risky behaviour in older school children

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#### ABSTRACT

The aim of the study is to introduce selected characteristics of risky behaviour associated with addictive substances within all urban primary schools in the regional capital České Budějovice in order to capture the development of these pathologies in the population of older school children. The research was carried out as a quantitative survey designed as a descriptive and comparative study. The data (N = 1172) were obtained using a mass-administered questionnaire for all the pupils of the 6th and the 9th grades of primary schools in České Budějovice run by the municipality. The study focuses on the consumption of alcohol, nicotine, illegal drugs, energy drinks, medical drugs (especially analgesics), and the impact of a risky environment - risky behaviour in the family and visits to night parties and discos by the teenagers. The survey describes the current status of this subpopulation, the development within the sixth and ninth-grade pupils, compares the results with nationwide studies, and tests the relationships between risky behaviour and leisure activities. It was found that the described group as a whole showed a lower level of risky behaviour than in the comparative study conducted within the South Bohemian Region and the whole of the Czech Republic. Within the sub-variables, a growing trend was found in the use of analgesics and energy drinks by age. The results also show the relationship between substance abuse and leisure activities (especially discos) and higher smoking prevalence, as well as between the time spent on a computer and the consumption of energy drinks.

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Currently, a lot of attention is being paid to studies focusing on the risky behaviour of children and adolescents in the context of substance abuse, yet it is a subject whose character is changing as quickly as our society. For this reason, it is appropriate to periodically investigate the current situation, i.e. the extent to which these risk phenomena are manifested, how they evolve and how frequent this risky behaviour is

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Introduction

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within specific areas. The research survey focused on the current state in pupils of second stage of primary schools in the city of České Budějovice (South Bohemia Region, Czech Republic). In addition to descriptive statistics of experience and substance abuse, the article focuses on the relationships between the elements of this risky behaviour and the exposure to risky environment. At the application level, this survey allows the contracting authority of the research to identify individual risk areas, including the results of individual schools, which can be used as a basis for preventive programme planning. The article summarizes the results for the whole research file, which are to provide information on the current state of the use of addictive substances in pupils at second stage of primary schools in this city and to compare them with other national and South Bohemian surveys.

#### Risky behaviour

Risky behaviour is an umbrella term for activities that directly or indirectly result in potential psychosocial or health impairment of the originator, other people, property, or the environment in a broader sense [1], resulting in a demonstrable increase in health, social, educational or other risks for individuals and society [2]. This category commonly includes experiments and substance abuse, impulsive behaviour, risky sexual behaviour, crime, etc. This behaviour, unlike hazardous behaviour (extreme sports), often contains an unconscious or denied aspect [3].

Risky behaviour is characteristic of a group of adolescents with regard to its psychosocial specifics [4]. The tween school age (or pubescence) that we are focusing on in our research is, in the wider sense, the age of 11–15 years, which represents the first part of adolescence. It is a period marked by secular acceleration in both directions – shorter childhood and postponing full adulthood [5]. As Helus [6] states, an individual often resolves conflicts with his or her parents, teachers, develops new social relationships, and begins to perceive himself/herself differently. He adds that pubescent often becomes difficult for their neighbours and even themselves. It is a period of uncertainty and doubt [7]. Therefore risky behaviour is based on the relationship between three components: personality, perceived environment and behaviour.

Gullone and Robinson [4] categorized risky behaviour by focus into four groups: behaviour oriented on search for excitement, irresponsible behaviour, rebellion, and antisocial risky behaviour. Behaviour oriented on search for excitement includes appeals that contain a challenge but are also relatively socially accepted. An example of this category might be sexual experimentation. The category of irresponsible behaviour includes activities that carry greater social and health risks and are not socially accepted (e.g. consumption of addictive substances). Rebellious behaviour raises the sense of independence and autonomy that is common in the process of adolescence, and usually does not lead to more significant damage, while antisocial behaviour (e.g. bullying) has a significant negative social impact.

However, the development perspective is certainly not the only source of risky behaviour. According to Jessor [8], it is also an interaction between an individual and the environment.

Family environment naturally plays a crucial role. Although the institute of the family undergoes a number of specific changes, it is still the basic socializing element and determinant of the child's development. The quality of family life has a major impact on cohesion, adaptability, and family communication [9]. Nielsen Sobotková et al. [10] point out that delinquent youth often grows up in incomplete families where such characteristics are absent. Not only the pathological environment is a catalyst of pathological behaviour, but also the influences of families, where parents are enormously busy [11]. However, close social relationships have a bi-directional, hence positive potential. Langmeier and Krejčířová [12] say that the peers help overcome emotional instability and feelings of uncertainty and finding oneself. Vágnerová [13] claims that pubescents identify with their peer group, which becomes the source of their necessary emotional and social support. Since this period is very demanding from the point of view of the formation of attitudes towards the environment and oneself, this "search" can also produce attitudes or actions that bring signs of risky behaviour, since the peer group often requires a high compliance. For this reason, it is important to be aware of the status of social pathologies among adolescent peers, both within local surveys and within their social groups, such as educational facilities.

#### Statistical data

The Czech Republic is at the forefront of the European Union in terms of the substance abuse among youth [14]. Concerning the available data on the risk behaviour of primary school pupils in the context of addictive substances, there has been a significant decline in the prevalence of smoking, alcohol consumption and substance abuse among the 16-year-olds in recent years. According to the 2014 HSBC study [15] 8% of 5th grade pupils (aged 11), 28% of 7th grade pupils (aged 13) and 52% of 9th grade pupils (aged 15) have experience with smoking cigarettes. The ESPAD study of 16-year-olds has already recorded an increase in prevalence up to a total of 66%, with the average age of first cigarette experience being 11.9 years [14]. Regular smoking (at least once a week or more often) was reported by 2% of 11-year-olds, 5% of 13-year-olds and 16% of 15-year-olds [15]. Experience with smoking in the 5th and 7th grade is more common among boys, but more girls smoke in the 9th grade. Hrubá and Žaloudíková [16] indicate that the motive is primarily the desire to look older. In the Czech Republic, smoking among 13-15-year-olds is above the EU average [17]. However, as part of the ESPAD study [14], the age of the first experience with a cigarette, which has been monitored since 2007, has been steadily rising. As far as alcohol is concerned, the results are far more alarming. The 2014 HSBC study [15] reports regular alcohol drinking (at least once a week) in 20% of the 15-year-olds. Regular drinking of alcohol in the 5th and 7th grade is more common among boys. In the 9th grade the proportion is balanced. It has been shown that a significant increase in smoking and alcohol consumption occurs between the ages 13 and 15 years. According to Kastnerová [18], only 16% of 10-16-year-olds have no experience with alcohol. An overwhelming majority (90% of children) try alcohol for the first time in the family [17]. According to HSBC [15], 24% of the respondents in the 9th grade (boys and

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