Conclusion Secondary schools may now be key sites for the production of health-risk and emotional harms, and by which health inequalities are reproduced. We propose a logic-model to guide further research illustrating how, via the above pathways, market reforms might encourage increased violence, substance use, teenage pregnancy, physical inactivity, poorer mental health and health inequalities.

OP73

THE SECONDARY-SCHOOL 'MARKET' AND YOUNG PEOPLE'S HEALTH: QUALITATIVE CASE-STUDY RESEARCH IN SEVEN ENGLISH SECONDARY-SCHOOLS

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Background Secondary schools are increasingly subject to quasi-markets in the UK, Europe and North America, typified by: diversity of school types; parents choosing where to apply; and government publishing school performance data. There is a paucity of research examining these policies potential for harming young people's health.

Aim To develop a logic-model of mechanisms by which market-oriented education policies might influence students' health.

Methods Qualitative case-study research conducted in seven secondary-schools in London and south-east England between 2006 and 2010. Data collected via semi-structured interviews with students aged 11–16 (N=103), school leadership team members (N=12), classroom teachers (N=23) and non-teaching staff (N=4), and observations. Techniques associated with thematic content analysis and grounded theory were used to analyse the data.

Results Parental 'choice' of secondary-school, and complex admission policies, were associated with the dispersal of students' friendship groups when transitioning from primary to secondary school, with consequent loss of social support and emotional harms. Greater 'choice' was also implicated in some schools being regarded as 'dumping-grounds' for socially-disadvantaged students and potentially violent, intimidating environments in which students engaged in risk-behaviours such as drug use and violence to develop protective bonds with peers. All case-study schools were strongly focused on academic attainment due to the emphasis on this from the national school inspectorate and in performance 'league-tables'. Some schools sought to improve their league-table position by targeting resources on 'key-marginal' students on the threshold of achieving five exam passes, the key performance metric. Less academic students could become disaffected, engaging in smoking, drinking and other risk-behaviours as alternative markers of status and bonding, and with fewer reasons to avoid early parenting. The exam-focused environment also aroused anxiety among both high- and low-attainers, some of whom used drugs and solvents as self-medication. Schools also give low priority to any non-academic activities such as health education and sport in this performance-driven context.