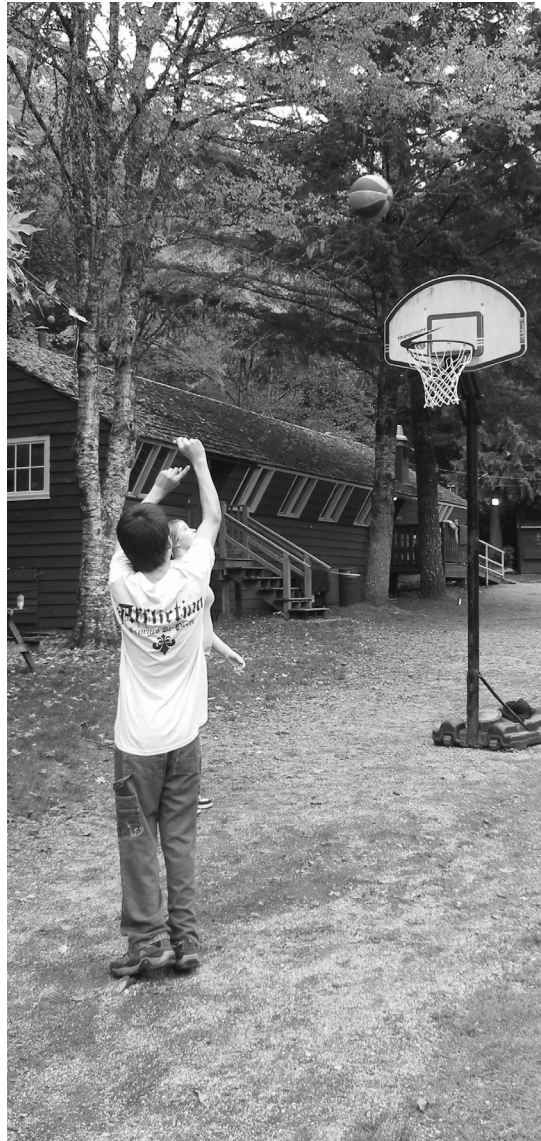


# A Picture of Health



**East Kootenay**  
**Results of the 2008 British Columbia Adolescent Health Survey**



# A Picture of Health

## East Kootenay

### Results of the 2008 British Columbia Adolescent Health Survey

The McCreary Centre Society is a non-government not-for-profit committed to improving the health of BC youth through research, education and community based projects. Founded in 1977, the Society sponsors and promotes a wide range of activities and research to identify and address the health needs of young people in the province.

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# Table of Contents

<i>Introduction</i>	4
<i>Provincial Key Findings</i>	5
<i>East Kootenay Key Findings</i>	7
<i>About the Survey</i>	9
<i>East Kootenay Youth: Their Home and Family</i>	12
<i>Physical Health</i>	16
<i>Injuries</i>	18
<i>Nutrition</i>	20
<i>Weight and Body Image</i>	21
<i>Mental and Emotional Health</i>	24
<i>Smoking</i>	29
<i>Substance Use</i>	30
<i>Sexual Behaviour</i>	34
<i>Abuse and Violence</i>	36
<i>School and Work</i>	38
<i>Sports and Leisure Activities</i>	40
<i>Protective Factors</i>	43
<i>Acknowledgements</i>	47
<i>McCreary Resources</i>	48

# Introduction

This report is part of a series of reports from the 2008 Adolescent Health Survey (AHS IV), conducted by the McCreary Centre Society. The Adolescent Health Survey is the largest survey of its kind in Canada and provides the most comprehensive picture of the physical and emotional health of BC youth, including risk and protective factors. The results are used by government, schools, health professionals and community organizations to assist in the planning and evaluation of services, policies and programs for youth.

East Kootenay is one of 16 regional administrative areas, called Health Service Delivery Areas (HSDAs), to participate in the survey. Data collection was sufficient across the province to allow 14 AHS IV area reports to be published. A provincial report (A Picture of Health: Highlights from the 2008 BC Adolescent Health Survey) is also available at [www.mcs.bc.ca](http://www.mcs.bc.ca).

The East Kootenay area is located in the Interior Health Authority region.

## **School Districts included in the East Kootenay area are:**

Southeast Kootenay (SD 05), Rocky Mountain (SD 06) and Kootenay Lake (SD 08). All school districts participated in the survey

## **East Kootenay Health Service Delivery Area**



■ East Kootenay

# Provincial Key Findings

The provincial report of the fourth Adolescent Health Survey (AHS) conducted since 1992 offers us key information about the current health picture of BC youth. It also offers a provincial picture of youth health trends and the effect of programs and policies implemented over the past 15 years.

The 2008 AHS has again shown us that the majority of BC youth are in good health, feeling connected to their family, school and community; and are engaging in health promoting behaviours, which will assist them to transition into a healthy adulthood.

However, the results also show that there are some youth in our province who are more vulnerable than others. These youth are engaging in risky behaviours which are not only negatively affecting their lives now but are likely to do so for years to come unless we develop interventions to assist them.

## Key Findings

- The majority of students (84%) reported that their health was good or excellent, and the number who reported a debilitating health condition or disability continued to decline, from 13% in 1998 to 11% in 2003 to 9% in 2008.
- The percentage of students who were injured to the point of requiring medical attention declined from 39% to 29% in a decade. The majority of those who were seriously injured were injured playing or training for sports or recreational activities (55%).
- There was an increase in the number of students who always wore a seatbelt when they were riding in a vehicle (66% in 2008 vs. 54% in 2003).
- 18% of female students and 7% of male students across the province reported that they had not accessed mental health services when they felt they needed them; and 15% of females and 11% of males did not get medical help when they needed it.
- Half of BC youth fell short of the recommended daily portions of fruit and vegetables. However, more youth reported eating fruit in 2008 compared to a decade earlier (81% vs. 72% in 1998).
- As in 2003, only 25% of males and 11% of females exercised daily, while 7% of males and 10% of females did not exercise at all.



- For the first time since 1992, the percentage of youth who seriously considered suicide dropped, from 16% to 12% in 2008. The percentage who actually attempted suicide also decreased from 7% to 5%.
- More than one in five females and one in ten males reported that they had deliberately self harmed (cut or injured themselves) without the intention of committing suicide.
- Fewer youth in BC smoked cigarettes than in 2003, and those who did waited longer to start smoking. Three quarters of students (76%) had never tried even a puff of a cigarette, compared to 66% in 2003. However, those who had tried smoking were smoking more regularly than their peers in 2003.
- Alcohol and marijuana use declined over the past decade, as did the use of some drugs such as cocaine, amphetamines and mushrooms. However, the use of other drugs, including hallucinogens, rose.
- Relationship violence has not decreased since 2003. The survey also found that some youth were particularly vulnerable to being physically assaulted by their boyfriend or girlfriend, including youth who had been sexually abused, students with a disability or chronic illness, and gay, lesbian and bisexual students.
- Pregnancy rates have remained stable with fewer than 2% of students reporting pregnancy involvement. However, 6% of sexually active youth reported using withdrawal as their only method to prevent pregnancy the last time they had sex, a slight rise from 5% in 2003.
- In 2008, there was an increase in youth who had experienced physical abuse (from 15% in 2003 to 17%). The percentage of youth reporting sexual abuse (8%) and both physical and sexual abuse (5%) did not improve between 2003 and 2008.
- The AHS showed that building protective factors such as family, school and cultural connectedness can assist even the most vulnerable youth to overcome negative experiences, can assist young people to make healthier choices and can contribute to more positive health outcomes for all youth in BC.



# East Kootenay

## Key Findings

The purpose of the 14 HSDA reports is to assist those who work with youth to have information specific to their local area. It is intended that the information will be used to recognize health promotion and prevention efforts that are working well and to identify issues which may need further attention. The reports are not intended to be compared with each other.

### Key Findings

- Consistent with youth across the province and unchanged from 2003, 83% of youth in the East Kootenay area reported that their health was good or excellent.
- In the past year, 38% of students in this area were injured seriously enough to need medical attention. This was similar to the rate in 2003, but was higher than the provincial rate of 29%.
- Sixty-one percent of students in this area always wore a seatbelt when riding in a motor vehicle. This was an increase from 2003 when only 47% of local students always wore a seatbelt.
- Forty-one percent of students had been exposed to second-hand smoke inside their home or vehicle, compared to the provincial rate of 28%. Nineteen percent of youth were exposed to smoke in their home or car almost every day.
- Although still above the provincial rate of 26%, there was a decrease in the percentage of youth who had ever tried smoking, from 49% in 2003 to 38% in 2008.
- Similar to 2003, 69% of youth had tried more than just a few sips of alcohol. This was higher than the provincial rate of 54%. One in three (34%) of youth reported drinking alcohol last Saturday, which was also higher than the provincial rate of 26%.
- Forty percent of students had tried marijuana. This was a local decrease from 50% in 2003, but was higher than the provincial rate (30%). However, recent use was comparable to the provincial rate, as 15% of students used marijuana on the Saturday prior to taking the survey.
- The percentage of youth who had used most substances other than alcohol or marijuana was similar to the province as a whole. When compared to youth in this area in 2003, there was a decrease in the percentage of students who had used amphetamines, but an increase in the percentage of students who had used prescription pills without a doctor's consent.
- Students were more likely than students in the province as a whole to have had oral sex or sexual intercourse. However, the majority of youth reported never having had sexual intercourse (68%), and this was comparable to the 2003 figure.

- Students in this area were more likely than those in the entire province to report weekly participation in non-coached sports activities (75% vs. 69%)
- Since 2003, the number of hours spent watching TV dropped, with 22% spending three or more hours watching TV (compared to 37% in 2003)
- Protective factors can reduce the likelihood of experiencing negative outcomes even for vulnerable youth. For example, a substantial number of youth in the East Kootenay area reported being victimized or bullied at school and 24% of these youth had seriously considered suicide in the past year. However, being connected to family or school, having input into their extracurricular activities and being involved in activities which were meaningful to them were each associated with a lower risk of suicidal ideation.
- Cultural connectedness is an important protective factor for youth. Compared to the entire province, youth in this area reported lower levels of cultural connectedness. Additionally, 21% of students could not identify their ethnic or cultural background (compared to the provincial rate of 10%).
- Having peers with healthy attitudes towards risky behaviour is another protective factor for youth. Compared to 2003, youth in 2008 were more likely to think that their friends would be upset with them if they got arrested (61% vs. 47%) or used marijuana (51% vs. 43%).

# About the Survey

This is the fourth BC Adolescent Health Survey conducted by the McCreary Centre Society. Over 29,000 BC public school students in grades 7-12 completed the survey between February and June 2008. Previous surveys were conducted in 1992, 1998 and 2003. With each survey, there has been increased participation from school districts and this year 50 of the 59 participated, up from 45 in 2003.

## Survey Design

The survey is designed to consider emerging youth health issues, and to track trends over time. The majority of questions have been asked since 1992. The 2008 AHS included 147 questions asking youth about their perceptions of their current physical and emotional health, risky behaviours and health promoting practices. Healthy development for youth includes many contributing factors and the survey also asks about broader issues such as family connectedness, school safety and peer relationships.

To ensure the 2008 survey captured current and emerging youth health issues, new questions were added following consultation with a BC government inter-ministerial committee and an advisory institute made up of community agencies, public health personnel and other leading figures in youth health.

The new questions reflected concerns about health-influencing behaviours such as internet safety, caffeine consumption and oral sex.

The survey includes questions used in similar surveys across Canada to allow for comparisons between provinces, and questions which have been used successfully with youth in grades 7-12 internationally. The pencil and paper survey was pilot tested with a diverse range of youth in grades 7-12 to ensure it was easily understood and could be completed within a single class period.

## Survey Administration

Public school classes were randomly chosen from participating school districts to provide a representative sample of youth across the province. Participation was voluntary and parental consent procedures were determined at the school district level. Public Health Nurses, nursing students and other trained personnel administered the confidential and anonymous survey to 29,440 students in 1,760 classrooms.

## Survey Analysis

Statistics Canada weighted the data to ensure it was representative of all BC youth in grades 7-12.

Surveys which contained contradictory, incomplete or joking answers were identified and eliminated before analysis began. (These surveys comprised less than 1% of all students surveyed).

All comparisons and associations reported in this study have been tested and are statistically significant (at  $p < .05$ ). This means that there is a 5% likelihood that the area results presented occurred by chance.

Graphs and charts show frequencies that are not necessarily statistically significant at every point. For example, a graph showing differences by age may not necessarily be significantly different at every age point.

Percentages do not always total 100% due to rounding.

## Limitations

All surveys have limitations and this is no exception. The survey can only provide information on youth who are in school. For administrative reasons, alternative and independent schools were not included in the 2008 survey. McCreary has recently conducted surveys with youth whose health picture is not captured in this report: youth in alternative education programs, as well as youth who are street involved and marginalized, and youth in custody.

The survey was administered in English. This may have affected those youth who were new immigrants and/or those who did not have the language or literacy skills to complete the questionnaire.

There was a change in consent procedures from 2003 within one of the participating school districts, which may have affected the results. For example, in school districts across the province where youth required signed parental consent to participate, students were less likely to report ever having had sex (19% vs. 25%). However, the impact on the results in this area is minimized by the fact that there is a mixture of consent procedures in place and by the small percentage of students affected by the change. Additional analyses of key findings for this area were conducted to assess if the change in consent procedures had affected the result. It is noted in the report where these changes appear to have affected the results, but it is recommended that all trend results are interpreted with caution.

A methodology fact sheet for the survey is available at [www.mcs.bc.ca](http://www.mcs.bc.ca) as is a detailed fact sheet discussing the sources and rationale for the questions used in the survey.

References for research cited in this report are also available on the website.

Statistics presented in this report are for students in the local HSDA unless otherwise stated.

Quotes from youth in this area who participated in the survey appear throughout the report.

## Aboriginal Youth

Due to historic and current discrimination, Aboriginal youth face additional and unique challenges to achieving healthy development. Following the AHS in 1998 and 2003, additional analysis of the data provided by Aboriginal

students was conducted by an Aboriginal research team. The results were published in *Raven's Children* (2000) and *Raven's Children II* (2004). McCreary is committed to producing an Aboriginal specific report, with the 2008 survey results, when funding has been secured.

### Next Steps Workshops

As with previous McCreary Adolescent Health Surveys, the results of the 2008 survey will be used by government agencies, schools and communities to plan and assess youth programs and services.

Through its 'Next Steps' workshop series, McCreary will also ensure that youth who participated in the survey get the opportunity to learn about the results, comment on them and use them to develop community projects to improve young people's health in their local area.

To discuss youth and adult workshops in your community contact [mccreary@mcs.bc.ca](mailto:mccreary@mcs.bc.ca)

#### Symbols used in the report

- \* Indicates that the percentage shown should be interpreted with caution as it may represent only an approximation due to the sample size.
- Indicates that the difference between 2003 and 2008 HSDA estimates was statistically significant.
- † Indicates that the difference between 2008 HSDA and provincial estimates was statistically significant.

#### Participating School Districts

05 Southeast Kootenay	54 Bulkley Valley
06 Rocky Mountain	57 Prince George
08 Kootenay Lake	58 Nicola-Similkameen
10 Arrow Lakes	61 Greater Victoria
19 Revelstoke	62 Sooke
20 Kootenay-Columbia	63 Saanich
22 Vernon	64 Gulf Islands
23 Central Okanagan	67 Okanagan Skaha
27 Cariboo-Chilcotin	68 Nanaimo-Ladysmith
35 Langley	69 Qualicum
36 Surrey	70 Alberni
37 Delta	71 Comox Valley
38 Richmond	72 Campbell River
39 Vancouver	73 Kamloops/Thompson
40 New Westminster	74 Gold Trail
41 Burnaby	75 Mission
42 Maple Ridge-Pitt Meadows	78 Fraser Cascades
43 Coquitlam	79 Cowichan Valley
44 North Vancouver	82 Coast Mountains
45 West Vancouver	83 North Okanagan-Shuswap
46 Sunshine Coast	84 Vancouver Island West
47 Powell River	85 Vancouver Island North
48 Howe Sound	91 Nechako Lakes
51 Boundary	92 Nisga`a
52 Prince Rupert	
53 Okanagan-Similkameen	

# East Kootenay Youth: Their Home & Family

## Background

Students in this area (the East Kootenay HSDA) identified with a broad range of ethnic and cultural backgrounds. The majority indicated being of European heritage (70%). This was above the provincial rate of 54% and was similar to the local rate in 2003. The second most common cultural identity in this area was Aboriginal (15%). This percentage rose from 10% in 2003. Twenty-one percent of youth could not identify their ethnic or cultural background, which was more than the provincial rate of 10%.

If students did not feel the categories represented their background they could choose to write in their own identity, and 2% wrote “Canadian.”

## New Canadians

As in 2003, 4% of students in this area were born outside of Canada (compared to the provincial rate of 18%). One percent had lived in Canada for less than two years, which was below the provincial rate of 3%.

## First Nations

Among the 15% of students that reported Aboriginal heritage, 20% had First Nations status, 31% were Aboriginal but did not have First Nations status, and 39% were Métis.

### Ethnic or cultural background

European	70%
Aboriginal/First Nations	15%
East Asian	2%
Latin/South/Central American	2%
Australian/Pacific Islander	2%
South Asian	1%
Southeast Asian	1%
African	1%
Don't know	21%

Note: Youth could choose more than one response.

### Spoke a language other than English at home

Never	70%
Sometimes	28%
Most of the time	3%

Six percent of Aboriginal students currently lived on a reserve, and 13% had lived on a reserve at some point in their life (4% for less than a year, 4% for a few years, and 5% for most of their life).

## Sexual Orientation

Eighty-seven percent of students identified as heterosexual, 7% as mostly heterosexual, 3% as bisexual or gay/lesbian, and 4% were unsure.

Spirituality

Over half of students reported that they were not at all religious or spiritual (57%). The remainder were either somewhat (32%) or very much (12%) religious or spiritual.

Home

Living Situation

Students in this area reported a number of different living situations. However, the majority of youth lived with their mother (87%) and/or father (67%) most of the time; 15% lived with both parents but at different times.

For most students, at least one parent was at home with them every day during the past five school days when they woke up in the morning (76%) and went to bed at night (83%). However, 6% did not have a parent at home when they woke up and 3% did not have a parent at home when they went to sleep on any of the past five school days.

Unstable Home Life

A total of 3% of students had lived in government care at some point in their lives, meaning they had lived in a foster home or group home, or had been on a youth agreement. As in 2003, 2% of youth were in care in the last year.

Who youth lived with <u>most</u> of the time (Youth could mark all that apply)	
Mother	87%
Father	67%
Stepfather	8%
Other adults related to me	4%
Stepmother	3%
Other adults not related to me	3%
Do not live with any adults	1%

Eleven percent of male and female youth ran away from home in the past year. These students were more likely than those who had not run away to have experienced extreme stress (46% vs. 12%) and despair (25% vs. 4%) and to have attempted suicide in the last 12 months (42% vs. 4%).

Frequently moving house can negatively influence young people’s health. Seventeen percent of youth moved once in the past year, 6% moved twice, and 5% moved three or more times. Students who moved in the past year were more likely than students who did not move to experience extreme stress (24% vs. 13%), to attempt suicide in the past 12 months (15% vs. 6%), and to feel less connected to school.



## Family

### Family Connectedness

Family relationships can have an important effect on youth health and development.

The survey asked questions about students' relationships with their caregivers, including feelings of closeness, how much they felt their caregivers were warm and loving toward them, and their satisfaction with these relationships.

Levels of connectedness to mother and father figures were generally similar for all age groups. However, females were less connected than males to both their mother and father figures. Both males and females felt more connected to their mothers than to their fathers.

Youth who ran away from home in the past year or who had lived in government care reported lower connectedness than youth who did not have these experiences.

Students who had a caregiver at home when they woke up on the past 5 school days reported higher connectedness with their mother figure compared to students whose caregiver was absent. Additionally, students who had a caregiver at home when they ate their evening meal or when they went to bed

on the past five school days reported higher connectedness with both their mother and father figures compared to students whose caregiver was absent.

Also, students who felt their family members understood them and paid attention to them and felt they and their family had fun together reported higher connectedness with their mother and father figures compared to students who did not have these positive feelings about their family.

### Family Poverty

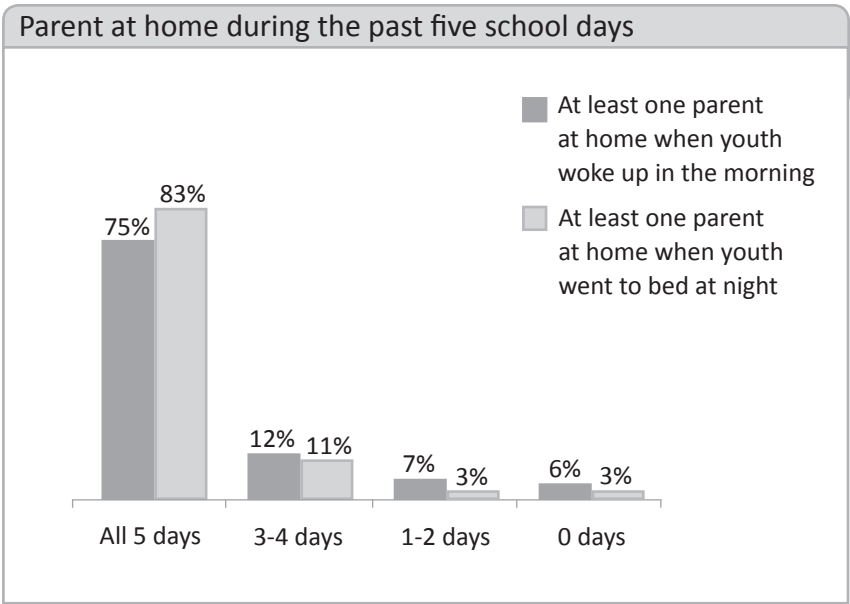
BC has the highest child poverty rate in Canada yet asking youth about their family's economic status can be challenging. Young people often do not know about their family's income, parent's occupation or other conventional measures that can indicate poverty. In an attempt to address this, the AHS asked youth four questions that have been used in international studies to learn about family resources: whether youth went to bed hungry because there was not enough food at home, the number of computers their family owned, whether they shared a bedroom, and if they took family holidays.

The vast majority of students in this area reported that they never went to bed hungry

(87%), did not share a bedroom (93%), had travelled on holiday with their family in the past year (83%), and that their family currently owned a computer (99%).

Almost no youth reported all four indicators of poverty. However, 11% of youth sometimes went hungry because there was not enough money for food and 2% went to bed hungry often or always. Hunger can affect health in many ways. For example, youth who indicated going to bed hungry were more likely than their peers who did not go to bed hungry to report poor/fair health (35% vs. 14%) and to have attempted suicide in the past year (22% vs. 6%).

Family poverty affected youths' ability to participate in extra-curricular activities. For example, youth who experienced hunger or those who did not go on a family vacation in the past year were less likely than their peers to engage in organized sports such as playing on school teams or taking swimming lessons.



“ I am alone a lot. I don't usually eat. ”

# Physical Health

Eighty-three percent of youth in this area reported that their health was good or excellent, consistent with local results from 2003 and with results from youth in the entire province in 2008. More males than females rated their health as excellent (39% vs. 18%). Also, fewer females rated themselves to be in excellent health compared to the province as a whole (18% vs. 23%).

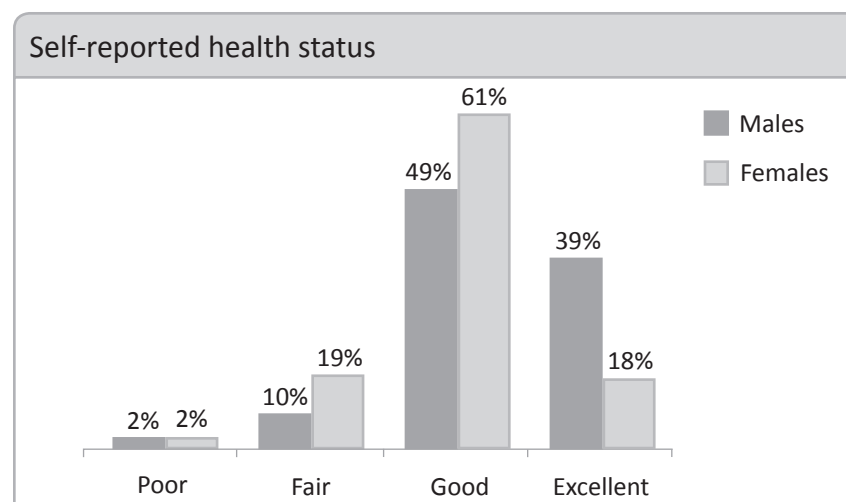
Males were less likely than females to report health complaints 'a lot', such as headaches (11% vs. 32%), stomach aches (7% vs. 22%), backaches (14% vs. 27%) or dizziness (10% vs. 19%) in the past six months.

Twelve percent of students (8% of males and 15% of females) reported a debilitating health

condition or disability. The most common conditions were a long-term illness (such as diabetes or asthma) experienced by 5% of youth and a mental or emotional condition (such as depression or eating disorder) reported by 5% of youth. Among youth with a health condition or disability, 32% took daily medication and 10% missed a lot of school due to their condition.

## Accessing Medical Care

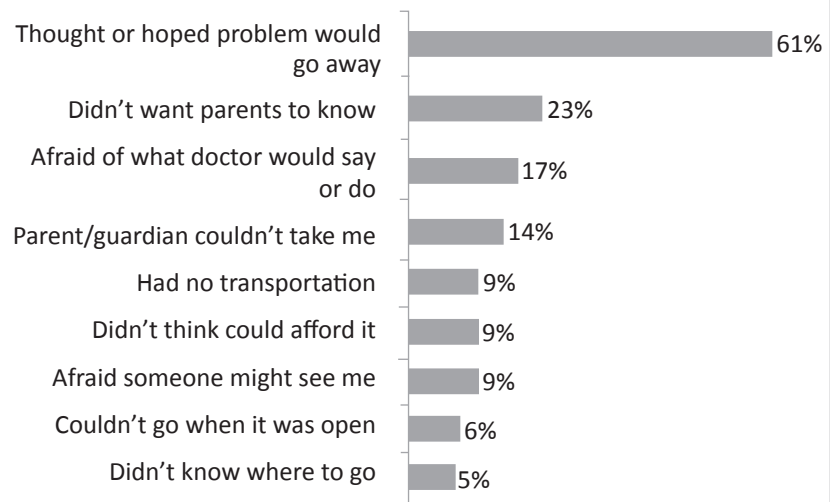
In the past year, 16% of youth did not get medical help when they felt they needed it. Although the rate for males in this area (12%) was comparable to the provincial rate, females in this area were less likely than those



in the province as a whole to get needed medical help (19% vs. 15%). Among those youth who did not access needed medical care, the most common reason was because they thought or hoped the problem would go away (61%). Female youth were more likely than males to say they did not get care because they did not want their parents to know or they were afraid of what the doctor would say or do.



Some reasons for not accessing medical care in the past year  
(among youth who felt they needed it)



“ I am hearing impaired, but some people think of me a handicap and that ticks me off a lot. ”

# Injuries

“ I have a back problem from a ski accident a few years ago. ”

Injuries are one of the most common health hazards facing BC youth. In the past year, 38% of students were injured seriously enough to need medical attention. This was similar to the rate in 2003, but was higher than the provincial rate of 29%. Males were more likely than females to have been seriously injured (44% vs. 34%).

The most common location for getting injured was at a sports facility or field (and this happened to 45% of males and 27% of females). Twelve percent of youth were injured at school, which is below the provincial rate of 17%.

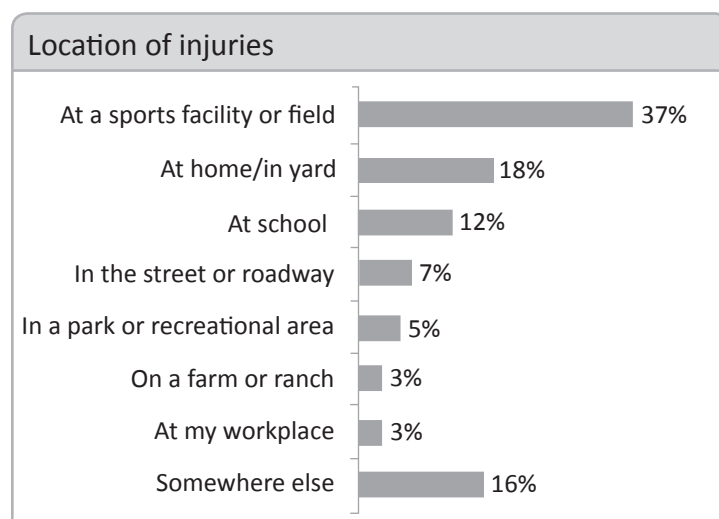
Most injuries occurred while students were playing or training for sports or doing other recreational activities (42%). This was below the provincial rate of 55%. Student in this area were more likely than those in the province as a whole

to be injured snowboarding or skiing (12% vs. 6%), or in a motor vehicle (7% vs. 4%). Seven percent of youth reported getting seriously hurt doing relatively low-risk behaviours (such as walking or cooking). There were no gender differences in how youth got injured.

## Injury Prevention

Many injuries are preventable. The use of motor vehicle seat belts and bicycle helmets are two key ways in which youth injuries can be prevented. There were no gender differences in seatbelt use or helmet use.

Sixty-one percent of students in this area always wore a seatbelt when riding in a motor vehicle. This was below the provincial rate, but was an increase from 2003, when only 47%



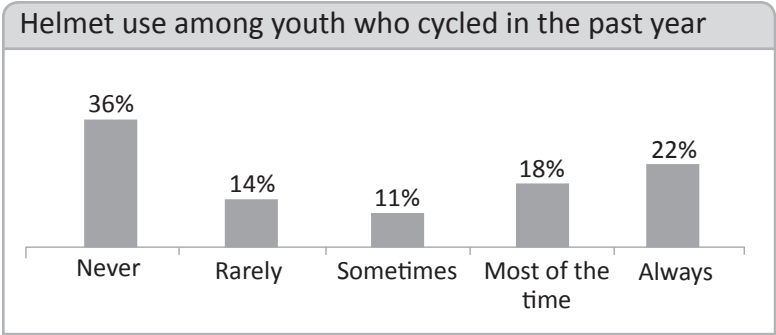
of local students always wore a seatbelt. However, when only school districts that did not change consent procedures for the survey between 2003 and 2008 were compared, the percentage of students who wore a seat belt was the same as the provincial rate.

Seventy-eight percent of students rode a bicycle in the past year, similar to the rate in 2003, but above the provincial rate (71%). Among cyclists the rates of helmet use were comparable with 2003 and with the provincial rate; 22% always wore a bike helmet and 36% never wore one. As students got older they were less likely to wear a helmet.

### Driving and Substance Use

Motor vehicle accidents are the leading cause of death among BC youth. In this area, 15% of youth had driven after using alcohol or marijuana.

Ten percent of students had ever driven after using alcohol (compared to 7% provincially). In the past month, 5% of students had driven after using alcohol and 26% of students had been a passenger in a vehicle with a driver who had been drinking. There was no gender difference in drinking and driving or riding in a vehicle with a drunk driver.



# Nutrition

The majority of youth reported consuming water, dairy, and fruits and vegetables on the day before they took the survey, but also sweets (such as cookies or cake) and fast food (such as pizza, hot dogs or chips). Males were more likely than females to have had pop (15% vs. 5%), dairy (61% vs. 49%), energy drinks (7% vs. 3%), sweets (19% vs. 11%) and fast food (14% vs. 6%) twice or more yesterday, but less likely to have had vegetables twice or more yesterday (25% vs. 33%).

Despite increased awareness about the importance of eating fruits and vegetables daily and the increased availability of healthier foods in schools, 9% of students reported having no fruits or vegetables on the day before they completed the survey and 21% had consumed them

only once that day. At least 53% of youth fell short of the recommended daily portions of fruits and vegetables, comparable to the provincial rate.

Similar to 2003 and comparable with the province as a whole, 50% of students in this area reported always eating breakfast on school days while 16% never ate breakfast. Males were more likely than females to always eat breakfast (57% vs. 44%).

Youth who reported that they went to bed hungry because there was not enough food at home were more likely than their peers to miss breakfast every day and less likely to have had fruit, vegetables or dairy yesterday, but more likely to have consumed coffee.

What youth ate and drank yesterday			
	No	Yes (once)	Yes (twice or more)
Water	6%	22%	72%
Milk, cheese, yogurt	9%	36%	55%
Fruit	20%	42%	38%
Green salad or vegetables	24%	48%	29%
Cookies, cake, donuts, chocolate bars	37%	49%	15%
Pizza, hot dogs, potato chips, French fries	48%	42%	10%
Pop/soda	57%	34%	10%
Hot or cold coffee or coffee-based drinks	72%	19%	9%
Energy drinks	83%	12%	5%
Note: Percentages do not always total 100% due to rounding.			

Canada’s Food Guide recommends female youth age 14-18 have 7 servings of fruit and vegetables daily and male youth have 8.



# Weight & Body Image

## Weight

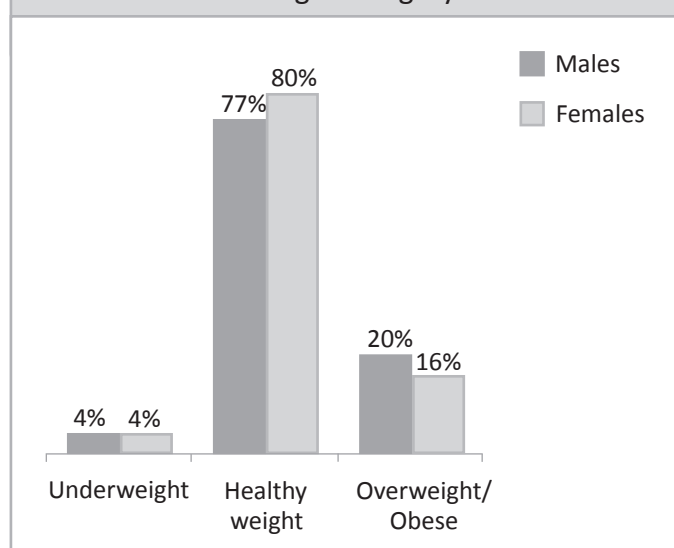
Although it has been criticized for not measuring body fat or fitness levels, and is not the ideal measure for all ethnic groups, youths' body mass index (BMI) still helps track rates of obesity. The BMI was calculated from the height and weight measurements youth provided on the survey. Based on this measure, 78% of students were considered to be a healthy weight for their age and gender, while 4% were underweight, 15% overweight and 3% obese.

There were no gender differences in BMI weight categories. A greater percentage of females in this area were overweight or obese compared to the province as a whole (16% vs. 12%). There were no changes in BMI weight categories from 2003 to 2008.

Obesity is linked to health challenges at all ages. Students whose BMI indicated they were overweight or obese were less likely than healthy weight youth to rate their health as excellent (15% vs. 32%). Obese

“ I am very healthy and fit but still I am unhappy with my body ”

Students in each weight category



youth were more likely than healthy weight youth to have spent three or more hours on an average school day playing video games.

BMI weight categories - Females

	East Kootenay 2003	East Kootenay 2008	BC 2008
Underweight	3%	4%	5%
Healthy Weight	81%	80%	83%
Overweight/Obese	16%	16%	12% <sup>†</sup>

Note: Differences between 2003 and 2008 HSDA estimates were not statistically significant.

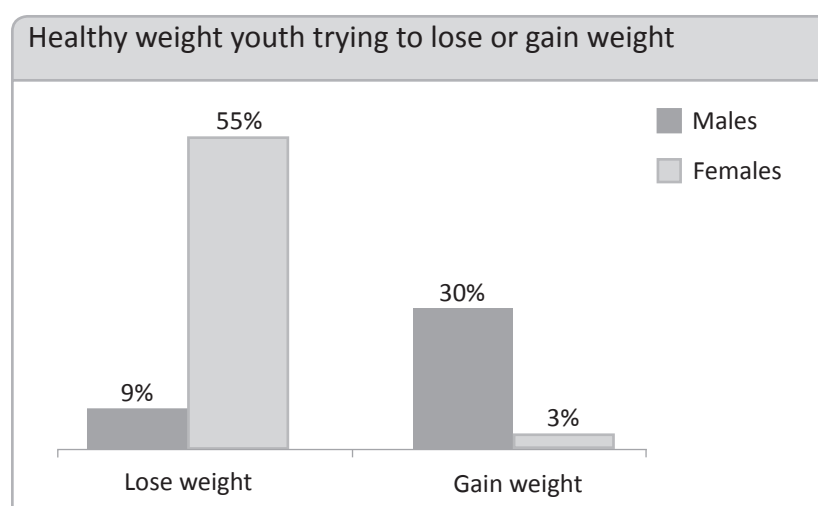
† Difference between 2008 HSDA and provincial estimate was statistically significant.

## Body Image

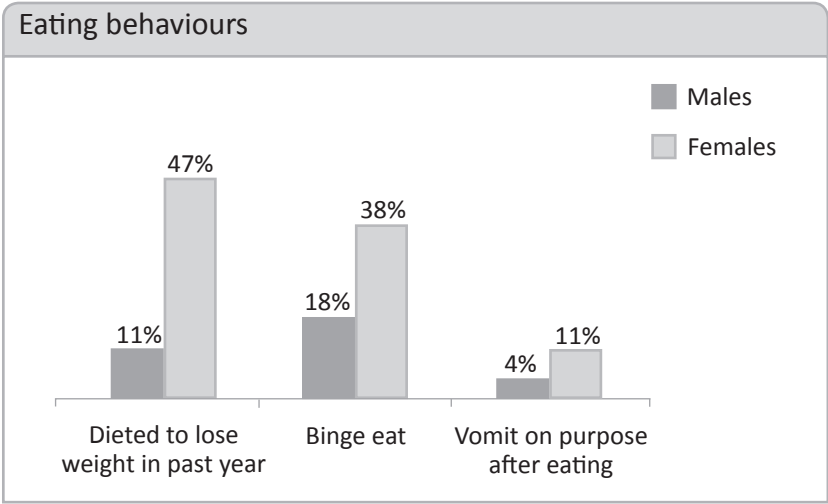
Similar to 2003, 22% of males rated themselves as very satisfied with their body image, compared to only 9% of females. The majority of males (75%) and females (61%) felt they were about the right weight.

Looking at youth whose BMI indicated they were a healthy weight, 31% stated they were not trying to do anything about their weight and 21% were trying to stay the same weight. However, 55% of healthy weight females were trying to lose weight and 30% of healthy weight males were trying to gain weight.

When asked to rate how satisfied they were with their body, on a scale from 1 to 5, with 1 being not at all satisfied and 5 being very satisfied, male youth scored an average of 3.8 and females 3.2.



Females were more likely than males to report dieting to lose weight in the past year, as well as binge eating and vomiting on purpose after eating. Rates of dieting, binge eating and vomiting on purpose after eating did not change from 2003 to 2008 for either males or females. Compared to the entire province in 2008, males in this area were less likely to diet (11% vs. 15% provincially) and females in this area were more likely to vomit on purpose after eating (11% vs. 8% provincially).



# Mental & Emotional Health

“*I feel overwhelmed like I have so much on my mind, I can't take it.*”

Adolescence is an important time for mental and emotional development. As they mature, youth have increased abilities to think about abstract ideas and are more aware of their emotions. However, it can also be a time when mental health problems first emerge.

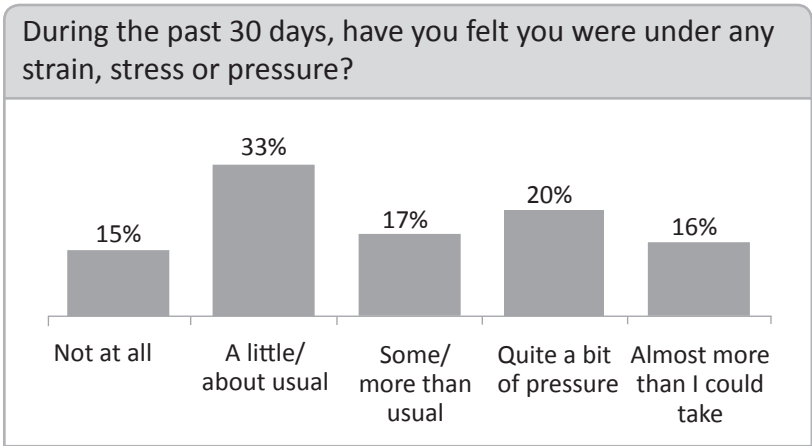
## Self Esteem

Measuring self-esteem can tell us about how youth view themselves. The majority of youth in this area reported high self-esteem; they agreed or mostly agreed that they felt good about themselves (84%) and their abilities (90%), they had much to be proud of (78%) and felt that their life was useful (85%). Around 58% agreed or mostly agreed with all seven of the self-esteem questions on the survey, which was equal to the provincial percentage.

## Stress

Most youth (85%) reported feeling some stress or pressure in the past 30 days. A total of 16% of students indicated that the stress in their lives was almost more than they could take.

Female youth were more likely than males to report extreme levels of stress in the past month to the point that they could not work or function effectively (24% vs. 8%). There were no differences in rates of extreme stress among older and younger youth, unlike in the province as a whole, where older students were more likely than younger students to report extreme stress.



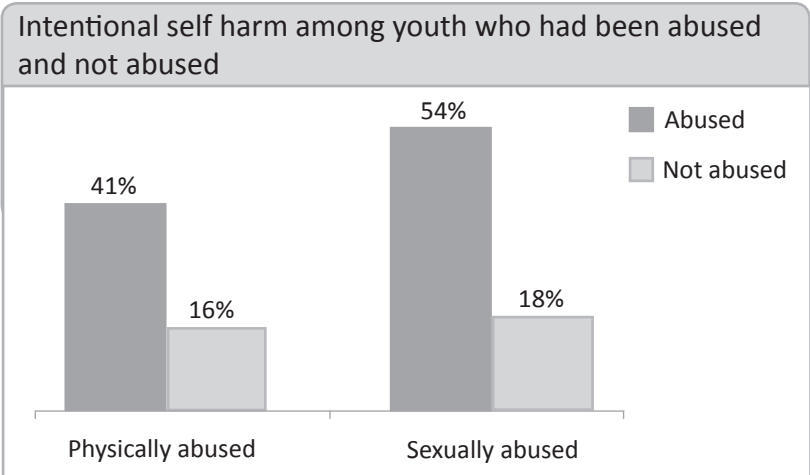
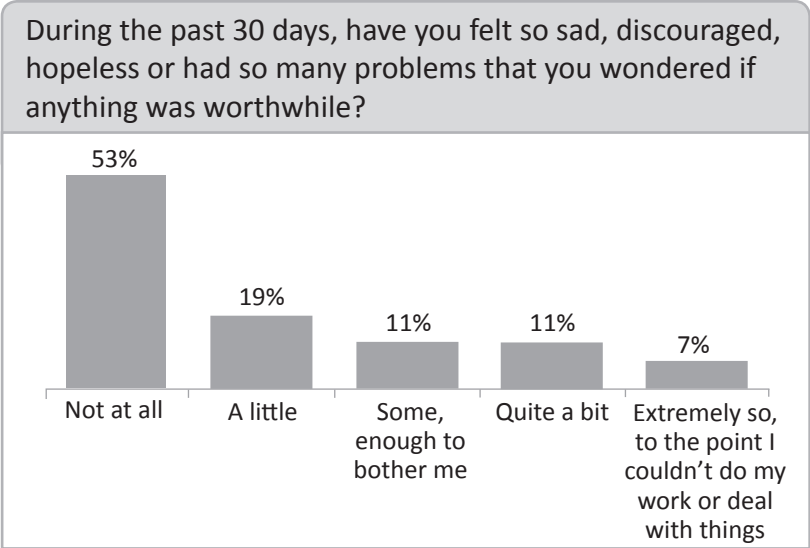
Despair

Consistent with youth in the province as a whole, 7% of students indicated feeling so much despair (feeling sad, discouraged or hopeless) that they wondered if anything was worthwhile and had difficulty functioning properly. Females were more likely than males to report this level of extreme despair in the past month (9% vs. 4%).

Self Harm

Sometimes youth will hurt themselves as a way of coping with stress and pain in their lives. In this area, 31% of female students and 11% of males indicated cutting or injuring themselves on purpose without trying to kill themselves at some point in their lifetime, with 12% of students doing so once or twice, and 9% doing so three or more times.

Students who had been physically abused or sexually abused were more likely to self-harm than students with no abuse history. Also, youth who had ever used alcohol or marijuana more likely to self-harm compared to youth who never used these substances.



“When I’m sad, hurt, feeling unwanted I cut myself”

## Suicide

Suicide is the second leading cause of death among youth aged 12-18 in British Columbia. In this area, 16% of students reported seriously considering suicide in the past year, which was higher than the provincial rate of 12%, and not significantly different from the rate in this area in 2003. However, when only school districts that did not change consent procedures between 2003 and 2008 are compared, the rate of youth who considered suicide in this area is not significantly different from the province as a whole.

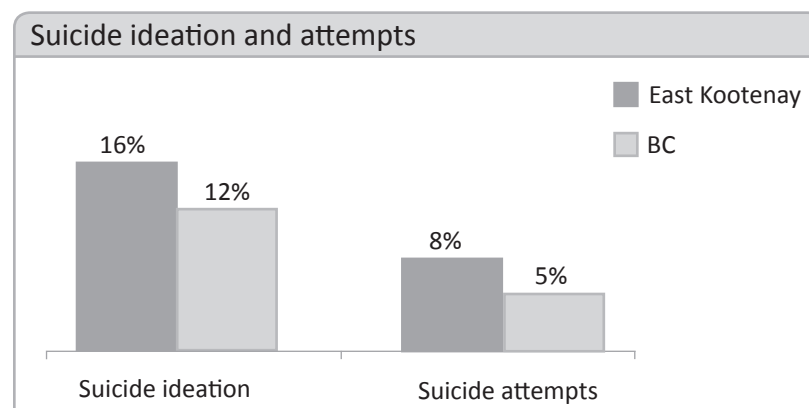
Eight percent of students attempted suicide in the past year, which was higher than the provincial rate of 5% and not significantly different from the rate in 2003. Females were more likely than males to have attempted suicide (12% vs. 4%), although males generally have higher rates of suicide completion.

Among youth who attempted suicide in the past year, 26% reported that their attempt was serious enough to require treatment by a doctor or nurse.

## Risk factors for suicide

One of the known risk factors for attempting suicide is having a family history of suicidal behaviour. In this area, 21% of youth reported that a family member had tried to commit suicide, with 7% doing so in the past year. Also, 34% of youth had a close friend who attempted suicide (18% in the past year). Students with a family member or close friend who had attempted or committed suicide in the past year were six times more likely to attempt suicide themselves, compared to students without these risk factors (24% vs. 4%).

Suicide attempts in the past year were also more likely among students who had ever been



physically abused (20% vs. 4%) or sexually abused (24% vs. 6%) compared to students who had never been abused.

Aboriginal youth were over twice as likely as non-Aboriginal youth to have attempted suicide in the past year (16% vs. 7%). Lesbian, gay and bisexual youth\*, and youth with a health condition or disability were also at greater risk for attempting suicide.

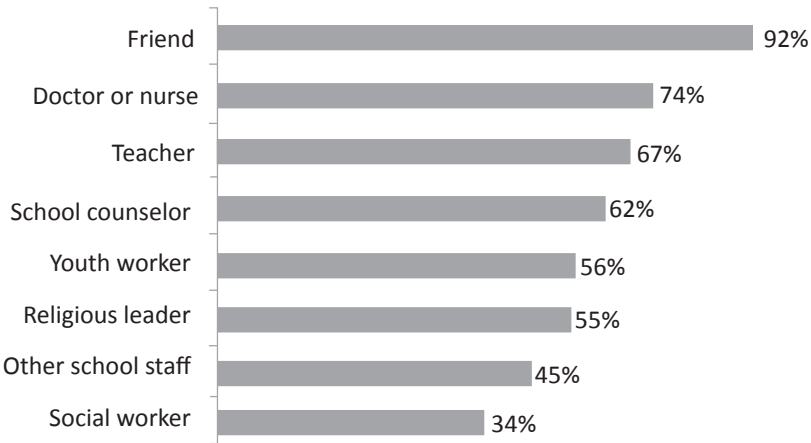
Also, youth who had ever used alcohol, marijuana or some of the hard drugs were more likely to have attempted suicide compared to students who had never used these substances.

Help Seeking

The majority of students felt they could seek support from adults in their family (75%) or from adults outside their family (62%) if they were faced with a serious problem.

Students reported approaching a variety of professionals for help in the past year, including teachers (37%), doctors or nurses (30%), school counselors (25%), other school staff (19%), religious leaders (18%), youth workers (18%), and social workers (14%). In addition to turning to adults for help, most students (79%) asked their friends for assistance. Students who sought support in the past year generally reported finding the assistance of both friends and professionals helpful.

Students who found others’ assistance to be helpful (among youth who sought help in the past year)





“

*I think counseling should be made more widely available,  
including grief counseling*

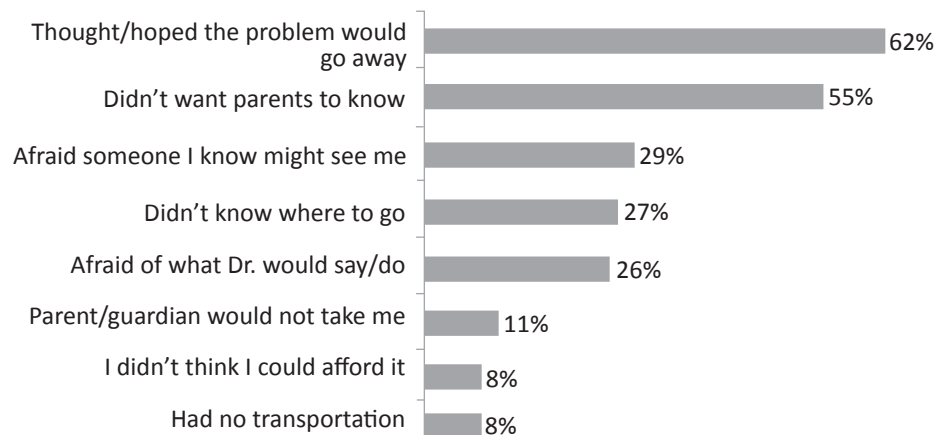
”

## Accessing Mental Health Services

When asked specifically about accessing mental health services in the past year, 23% of females and 7% of males reported that they had not accessed services when they felt they needed them. The most common reasons for not accessing mental health services included hoping the problem would go away (62%) and students not wanting their parents to know (55%).



### Most common reasons for not accessing mental health services (among youth who felt they needed them)



# Smoking

Mirroring the situation across the province, there was a decrease in the percentage of youth who had ever tried smoking, from 49% in 2003 to 38% in 2008. However, this is still above the provincial rate of 26%. Males and females were equally likely to have tried smoking.

Among students who smoked, 11% had their first cigarette when they were ten years old or younger, although the most common age was 13 or 14 years old (41%).

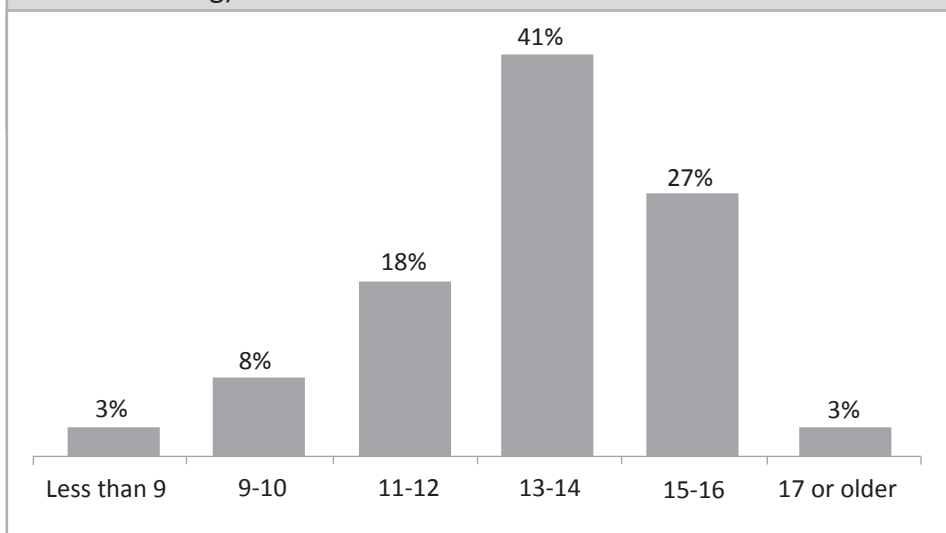
More than half (56%) of students who had ever tried smoking had smoked in the past month, above the provincial rate.

Similar to the provincial rate, 8% of young people had used chewing tobacco in the past month (13% of males and 3% of females).

## Second-hand Smoke

Forty one percent of students had been exposed to second-hand smoke inside their home or vehicle. This was unchanged from 2003 and higher than the provincial rate of 28%. Nineteen percent of youth were exposed to smoke in their home or car almost every day.

Age when first smoked a whole cigarette (among students who had tried smoking)



# Substance Use

## Alcohol

Similar to 2003, 69% of youth had tried more than just a few sips of alcohol. This was higher than the provincial rate of 54%. Males and females were equally likely to have tried alcohol.

Compared to the provincial rate, students in this area who had tried alcohol started drinking earlier, with 9% having their first drink when they were 9 or 10 years old (above the 7% provincial rate), and 15% waited until they were 15 or 16 years old (compared to 23% provincially).

Among students who drank in the past year, 12% had only had a sip, 33% drank once a month or less, and 27% drank two or three times a month.

## Binge Drinking

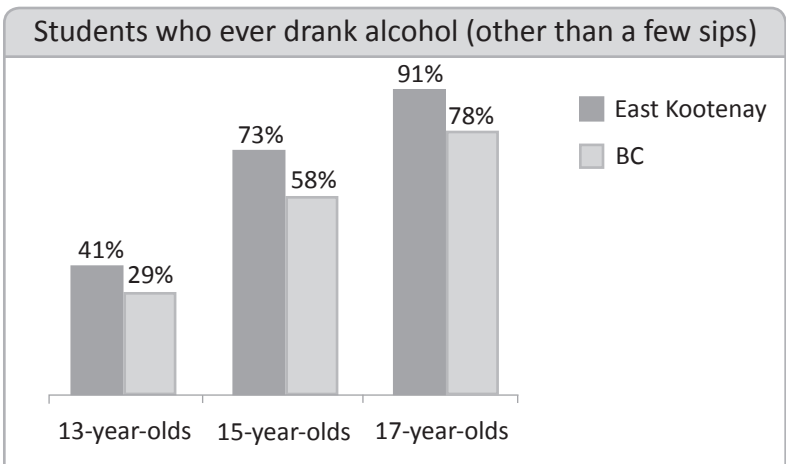
Binge drinking is defined in the AHS as having five or more drinks within a couple of hours.

As in 2003, almost half (49%) of local students who had tried alcohol binge drank in the past month and 6% binge drank ten or more times in the previous month. Males and females were equally likely to binge drink.

## Last Saturday Use

The AHS IV included new questions asking about substance use “last Saturday.” Students were instructed to specifically think of the Saturday that had just passed, even if it was not a typical Saturday for them.

Thirty-four percent of students drank alcohol last Saturday, which was higher than the



provincial rate of 26%. There were no gender differences among those who consumed beer, wine and liquor but females were more likely to have drunk coolers last Saturday (23% vs. 11%).

### Marijuana

Forty percent of students in this area had tried marijuana. This was a local decrease from 50% in 2003, but was still higher than the provincial rate (30%). Males and females were equally likely to have tried marijuana.

Among students who had tried marijuana, 8% had first used it when they were 10 years old or younger, although the most common age for first trying it was 13 or 14 years old (45%).

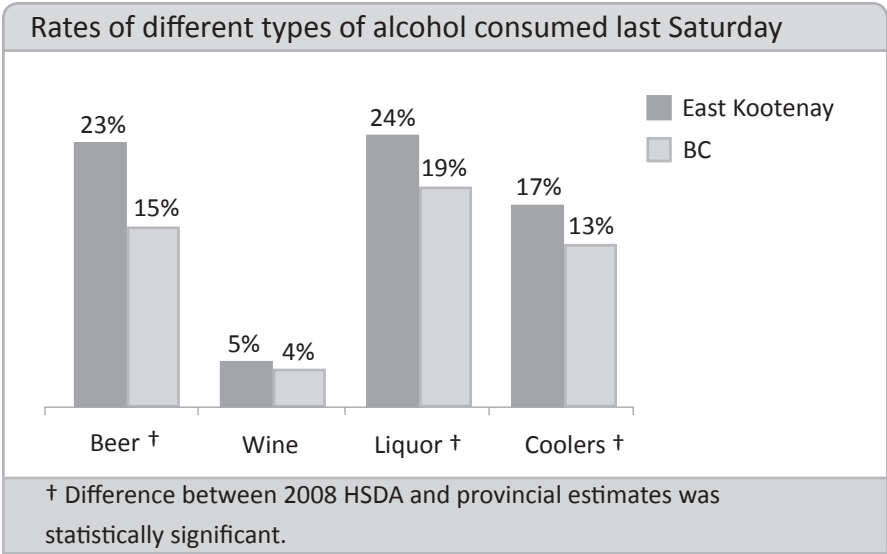
Fifty-six percent of those who had tried marijuana used it in the past month and 11% used it 20 or more days in the past month, which was similar to the 2003 rates. Among those who had used marijuana, males were more likely than females to report this extreme use (18% vs. 6%).

### Last Saturday use

Comparable to the provincial rate, 15% of students used marijuana last Saturday, with no differences between males and females.

### Other Drugs

The percentage of youth who had used most substances other than alcohol or marijuana



was similar to the province as a whole. However, students in this area were more likely to have tried mushrooms (13% vs. 8%), hallucinogens (8% vs 5%) and inhalants (7% vs. 4%). When compared to youth in this area in 2003, there was a decrease in the percentage of students who had used mushrooms and amphetamines, but an increase in the percentage of students who had used prescription pills without a doctor's consent.

However, it is worth noting that the decrease in mushroom use was not seen when comparing only school districts which had not changed their consent procedures for participating in the survey between 2003 and 2008.

For the first time, students were specifically asked about the use of ecstasy and crystal meth. Eight percent of students in this area had used ecstasy, and 1% had used crystal meth. Both percentages were comparable to the provincial rate.

### Ever used other drugs

	2003	2008
Prescription pills	11%	17% <sup>♦</sup>
Hallucinogens	8%	11%
Mushrooms	20%	13% <sup>†♦</sup>
Cocaine	8%	5%
Inhalants	7%	7% <sup>†</sup>
Amphetamines	5%	3% <sup>♦</sup>
Steroids	2%	1%

<sup>†</sup> Difference between East Kootenay and provincial estimates was statistically significant.

<sup>♦</sup> East Kootenay difference between 2003 and 2008 estimates was statistically significant.

## Consequences of Substance Use

In the past year, 3% of male and female students felt they needed help for their alcohol use, and 2% felt they needed help for their drug use.

Sixty-one percent of students reported using alcohol or drugs in the previous year. Among these students, 62% experienced a variety of negative consequences as a result. The most common included being told they had done something they could not remember, passing out and arguing with family members.

Males were more likely to report damaging property, while females were more likely to have done something that they could not remember, to have lost friends or broke up with a boyfriend or girlfriend, and to have argued with family members.

“ I have a heart problem from drugs ”

#### Consequences of substance use among those who used alcohol or drugs in the past year

Was told that I did something that I couldn't remember	49%
I used alcohol or drugs but none of these things happened	38%
Passed out	35%
Argued with family members	20%
Damaged property	14%
Got injured	14%
School work, marks, or behaviour at school changed	14%
Got in trouble with the police	12%
Got into a physical fight	12%
Lost friends or broke up with a girlfriend or boyfriend	11%
Had sex when I didn't want to	8%
I overdosed	3%
Had to get treatment for alcohol or drug abuse	3%

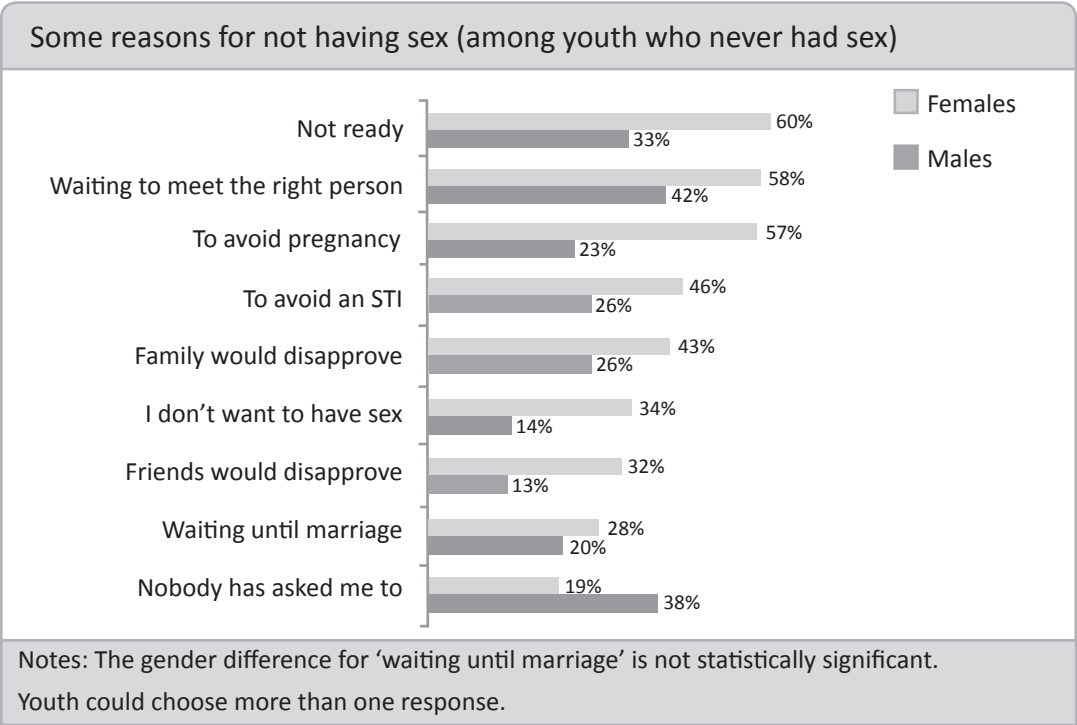
# Sexual Behaviour

The majority of youth reported never having had sexual intercourse (68%), and the rate was comparable to the 2003 figure in this area. However, the percentage who never had sex was lower than the provincial rate (78%), meaning that students in this area were more likely to have had sexual intercourse.

Students who never had sexual intercourse provided a number of reasons for not having sex (they could choose more than one reason). The most common were wanting to wait until they met the right person (51%), not being ready to have sex (47%) and not

wanting to get pregnant or cause a pregnancy (41%). Females were more likely than males to endorse most reasons, except males were more likely to report that they had not had sex because nobody had asked them to (38% vs. 19%).

The percentage of youth that reported ever having sexual intercourse (32%) was comparable for males and females and increased with age. Among sexually active youth, the most common age for first having sex was 15 years, and 21% reported first having sex before age 14.





“ *I am sexually active and I am worried about STD's* ”

Among sexually active students, 47% had sexual intercourse with one person in the past year, and 8% had sex with six or more people.

## Oral Sex

Thirty five percent of male and female students reported ever having oral sex, which was higher than the provincial rate of 26%. Rates of oral sex went up with age.

## Sexually Transmitted Infections

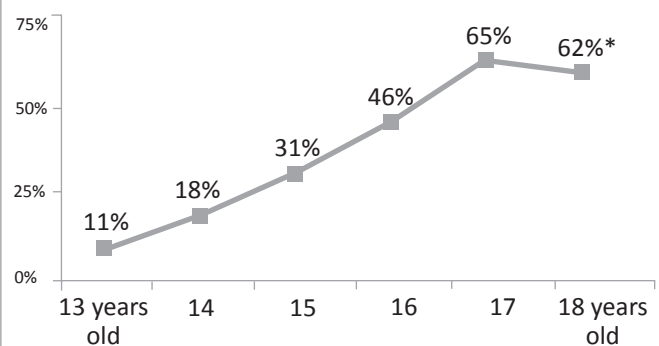
Overall, 1% of students reported they had been told by a doctor or nurse that they had a sexually transmitted infection (STI). The rate was 3% among sexually active students.

## Birth Control and Pregnancy

Unchanged from 2003, 70% of sexually active youth reported using a condom the last time they had sex, and 68% indicated that they had done so to prevent pregnancy.

Among sexually active youth, 48% used birth control pills to prevent pregnancy the last time they had sex. Twenty-one percent used withdrawal, which is an unreliable method of contraception, and 4% used only withdrawal. Six percent of students used no method to prevent pregnancy and 6% used emergency contraception (“morning after pill”) the last time they had sex.

Students who had oral sex



Notes: \* The rate for 18-year-olds should be interpreted with caution

The decrease between ages 17 and 18 is not statistically significant.

Six percent of sexually active students reported that they have been pregnant or caused a pregnancy, which was comparable to local rate in 2003 and the 2008 provincial rate of 7%.

Among students who have had sexual intercourse, almost a third (31%) reported that they drank alcohol or used drugs before having sex the last time.

# Abuse & Violence

## Physical and Sexual Abuse

The percentage of students who reported physical or sexual abuse was higher than the provincial rate but was unchanged from 2003. Twenty-two percent reported that they had been physically abused, and 11% had been sexually abused. In total, 27% of youth had experienced either form of abuse and 6% had experienced both types of abuse.

As in 2003, 7% of students reported that they had been forced to have sex when they did not want to either by an adult or another youth, or both. This was above the provincial rate of 5%. Females were more likely to have been forced to have sex than males (9% vs. 4%).

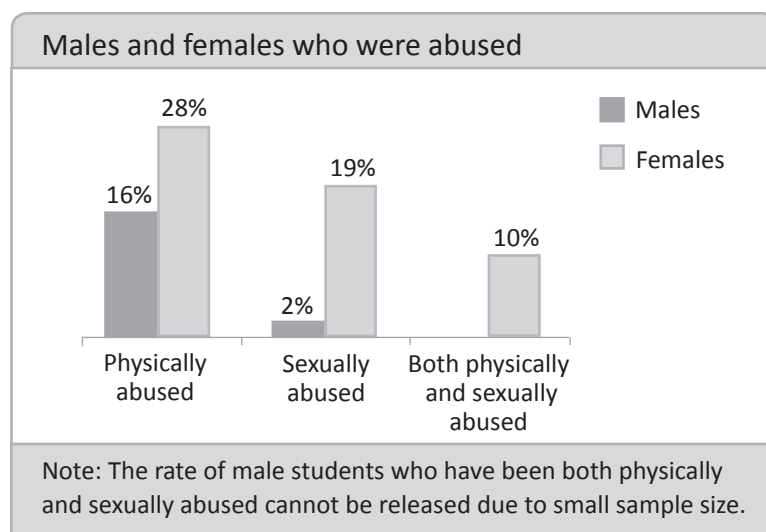
## Sexual Harassment

The percentage of students who experienced verbal (54%) or physical (35%) sexual harassment was above the 2008 provincial rate, but similar to the rate for this area in 2003.

Female students were more likely to experience either form of harassment. In the past year, 64% of females had been verbally sexually harassed (compared to 41% males) and 49% had been physically sexually harassed (compared to 19% of males).

## Internet Safety

Sixteen percent of students (24% of females and 7% of males) had been in contact with someone on the Internet who made them



feel unsafe. This was similar to the 2003 local rate, but above the 2008 provincial rate. Thirteen percent of students gave personal information to someone they had met on the Internet in the past year.

Twenty percent of students (25% of females and 14% of males) were cyber-bullied in the previous year, the same as the provincial rate.

Physical fights

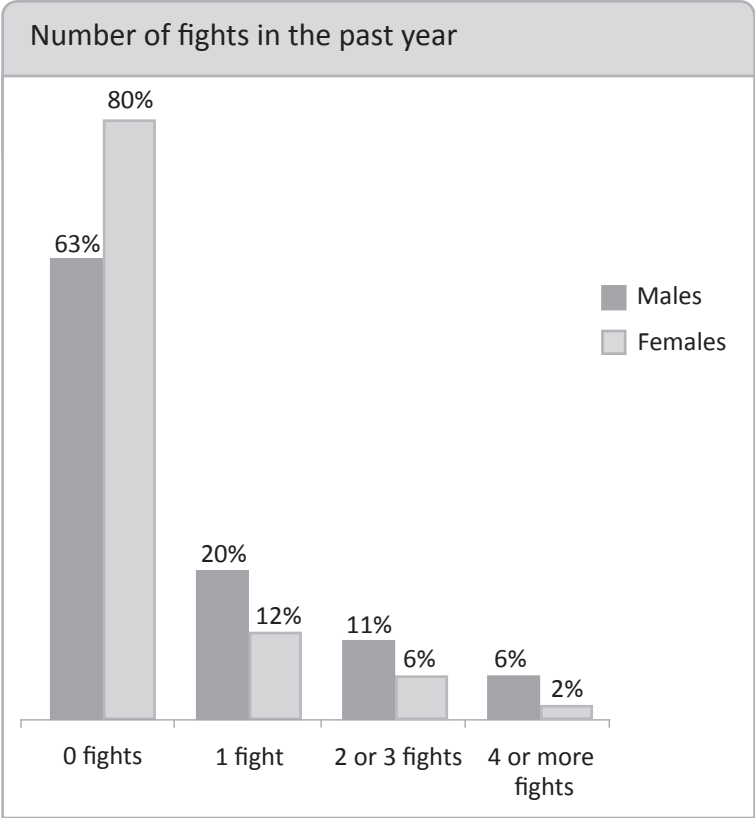
Consistent with the provincial findings and with the local findings in 2003, 28% of students were involved in a physical fight in the past year. Males were more likely than females to have been in a fight (37% vs. 20%). Similar to 2003, 4% of students were injured in a fight to the point where they required medical attention.

Relationship Violence

Eight percent of male and female students who were in a relationship reported that their boyfriend or girlfriend had hit, slapped, or hurt them in the past month.

Discrimination

Below the provincial rate, but similar to the rate for this area in 2003, 8% of students experienced racial discrimination. The rate of students who were discriminated against



because of their sexual orientation (6%) has also remained at the 2003 rate and is consistent with the provincial rate.

However, the rate of students who had been discriminated against because of physical appearance in the past year was higher than in the province overall. Twenty-three percent of students reported they had experienced discrimination because of their physical appearance, no change from 2003.

# School & Work

## School Connectedness

Feeling connected to school is linked to better physical and emotional health and to reduced risk taking. In this area and consistent with the provincial results, the majority of students reported liking school somewhat (68%). Males were more likely than females to dislike school (22% vs. 13%).

Feelings of connectedness to school were unrelated to grade level, unlike in the province as a whole where connectedness was highest among Grade 7 students.

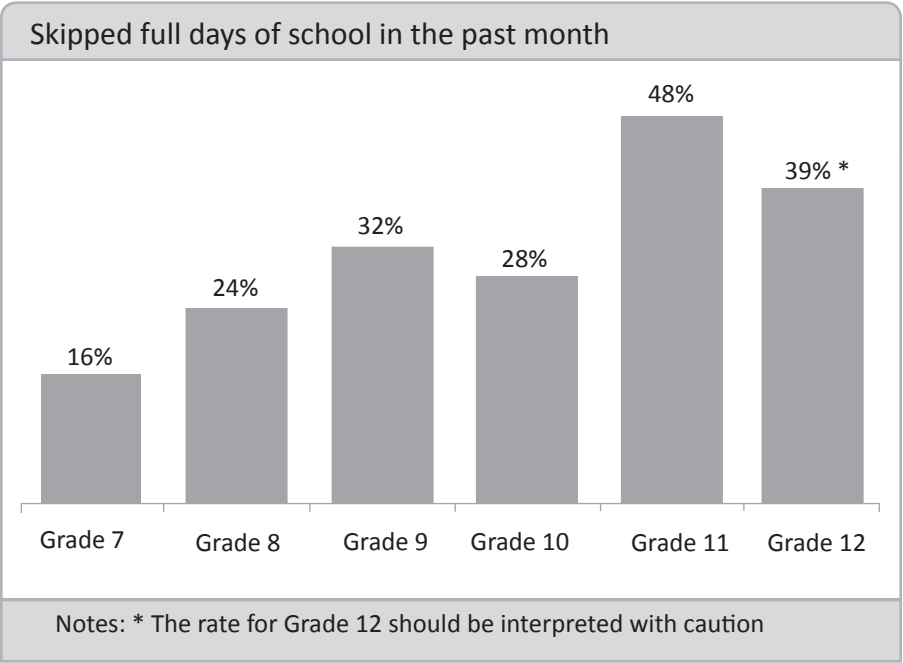
Thirty-two percent of students skipped at least one full day of school in the past month.

Youth who skipped school felt less connected to school and had more trouble getting along with teachers and peers compared to students who did not skip school.

## Feeling Safe at School

Thirty-eight percent of students reported always feeling safe at school, which was identical to the rate in this area in 2003 and comparable to the 2008 provincial rate of 41%. The sense of always feeling safe was not associated with grade level, and ranged from 32% of students in Grade 10 to 48% in Grade 11.

Students most commonly reported “always or usually” feeling safe in the library (80%)



or classroom (78%). They were least likely to report “always or usually” feeling safe outside on school property during school hours (51%).

Eleven percent of students had been physically attacked or assaulted while at school or traveling to or from school in the past year. Males were more likely than females to be physically attacked (14% vs. 8%), but females were more likely to be victims of relational aggression (i.e., excluded from social groups or ignored; 46% vs. 26%) or to be verbally harassed at school (e.g., teased; 46% vs. 31%).

Rates of school-based physical, verbal and relational aggression in this area were all higher than the provincial percentages, and did not reflect a local change from 2003.

Weapon Carrying

A total of 8% of students carried a weapon to school in the past month (12% of males and 5% of females). Among those who carried a weapon, the majority (83%) carried a knife or razor.

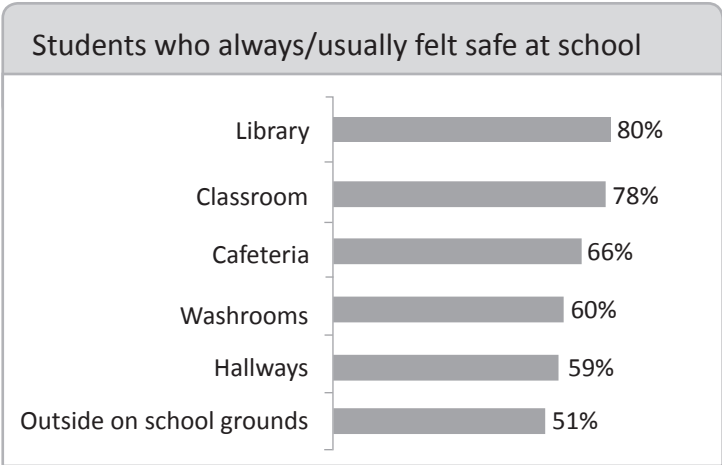
Academic Aspirations

The vast majority of students expected to finish high school; only 1% anticipated finishing their education before graduating from high school. A total of 50% expected to complete their education when they graduate from university, medical school, or law school; 22% when they

graduate from community college or a technical institute; 11% once they complete high school; and 15% were not sure when they would complete their education.

Work

A total of 54% of students worked at a paid job during the school year, which was comparable to the 2003 rate and higher than the 2008 provincial rate (41%). Among students who worked, 28% worked less than 5 hours a week, 55% worked 5-19 hours, and 17% worked 20 or more hours a week.



# Sport & Leisure Activities

## Exercise

Health Canada recommends that youth participate in a minimum of 90 minutes of physical activity every day. Yet, when asked how often they exercised for at least 20 minutes a day during the past week, only 25% of males and 11% of females exercised every day, while 7% of youth did not exercise at all. These rates were similar to those in 2003 and to the provincial rates.

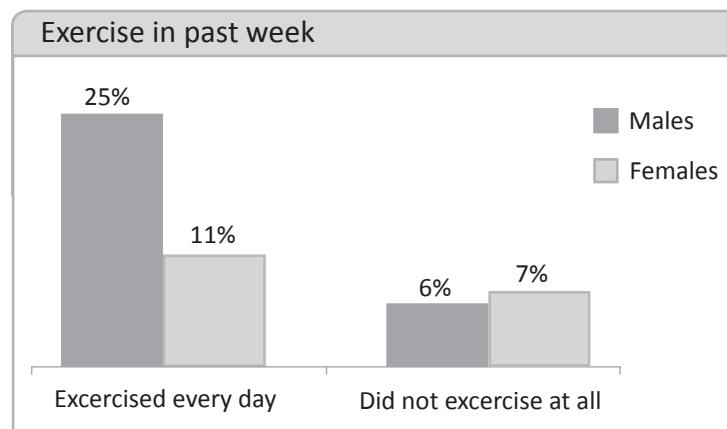
On average, youth in Grades 7 to 10 exercised more often than those in Grade 12. There was no change from 2003 to 2008 in the number of days youth in each grade reported exercising.

## Extracurricular activities

The majority of youth participated in extracurricular sports activities on a weekly basis: 61% of youth took part in sports activities

with a coach (e.g., school teams, swimming lessons), and 75% participated in physical activities without a coach (e.g., biking, road hockey). Students in this area were more likely than those in the entire province to report weekly participation in non-coached sports activities such as biking, skateboarding and hiking (75% vs. 69%). Furthermore, while male and female youth in this area were equally likely to participate weekly in sports activities with a coach, males were more likely to participate in sports without a coach and females were more likely to take part in dance/aerobic classes.

In addition to participating in sports activities, youth engaged in a range of other activities outside of school hours. For example, in the past 12 months, 62% of youth did some form of volunteer work such as babysitting or helping a charity and 26% did this once



“ I love doing sports/running or jogging I do one of them every day ”

a week or more. Other leisure activities youth participated in on a weekly basis included hobbies (56%), art (28%) and clubs (17%). Females were more likely than males to take part in these types of activities.

## Screen time

On an average school day, 88% of youth watched television. Since 2003, the number of hours spent watching TV dropped, with 22% spending three or more hours watching TV (compared to 37% in 2003) and 12% of youth reporting they did not watch TV on an average school day (compared to 7% in 2003).

Around 8 out of 10 youth spent time on the Internet (in addition to time they spent doing their homework) or on the phone or texting, and 6 out of 10 played video games. On a typical school day, 22% of youth played on the Internet, 32% phoned or texted, and 13% played video games, for three or more hours. Males were more likely than females to play video games for three or more hours a day (23% vs. 5%), but were less likely to spend three or more hours on the Internet (18% vs. 26%) or texting or talking on the phone (19% vs. 43%).

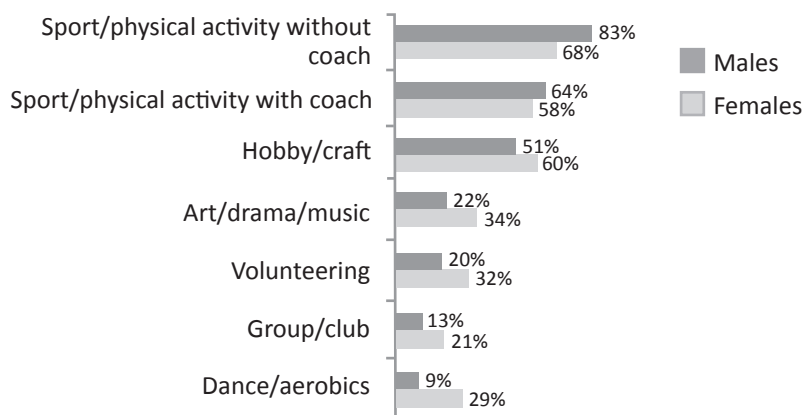
### Weekly participation in extracurricular sports activities

	East Kootenay 2003	East Kootenay 2008	BC 2008
<b>Males</b>			
With a coach	56%	64% *	62%
Without a coach	84%	83%	78%
<b>Females</b>			
With a coach	54%	58%	57%
Without a coach	66%	68%	60% †

\* Difference between 2003 and 2008 was statistically significant.

† Difference between 2008 East Kootenay area and provincial estimates was statistically significant.

### Weekly participation in activities in the past year



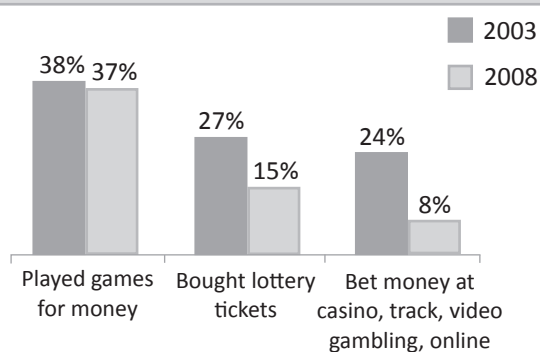
## Gambling

Although it is often seen as a fun activity, gambling in BC is illegal for youth under 19 years of age. Some young people turn to gambling as a way to escape from their problems, and it is often linked to risky behaviours such as alcohol use and smoking. Gambling at an early age also increases the risk of developing an adult gambling problem.

The percentage of local students who reported gambling in the past year decreased from 53% in 2003 to 43% in 2008. Specifically, there were decreases in the number of youth who purchased lottery tickets and bet money, but there was no change in playing games for money.

There was no gender difference in buying lottery tickets, but males were more likely than females to have played games for money (51% vs. 25%) and to have bet money at a casino, racetrack, on video games or on-line (12% vs. 5%).

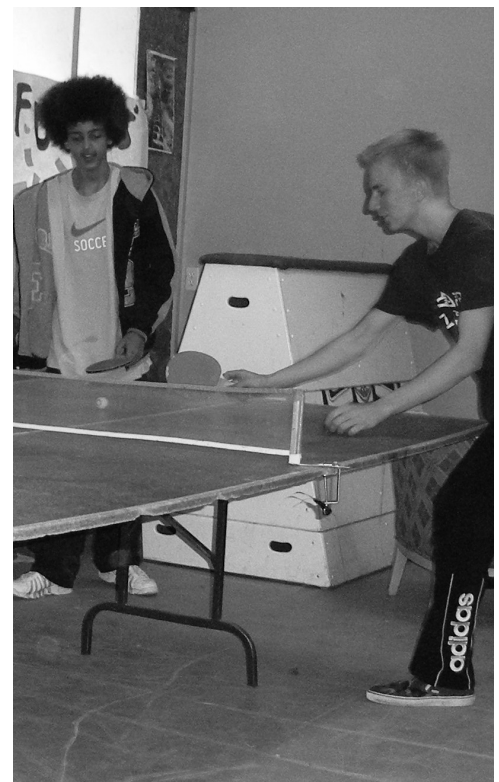
### Gambling in the past year



Note: The difference was not statistically significant for 'played games for money'.

## 2010 Winter Olympics

When asked about the effect of the upcoming 2010 Olympics in BC, 47% of youth said they had not thought about it, 45% said it had not affected them, 9% said they had become more physically active, 7% reported they had more sports opportunities and 4% felt they had more job prospects.





# Protective Factors

The survey included a number of questions that have been shown to reflect protective factors for youth. By looking at these protective factors we can point to areas of health promotion, education and awareness which can improve the lives of all youth, including the most vulnerable.

## Family and School Connectedness

Family connectedness includes youths' feelings of closeness, caring, warmth, satisfaction and understanding toward their parents and family. School connectedness refers to students' relationships with their teachers and their sense of belonging at school.

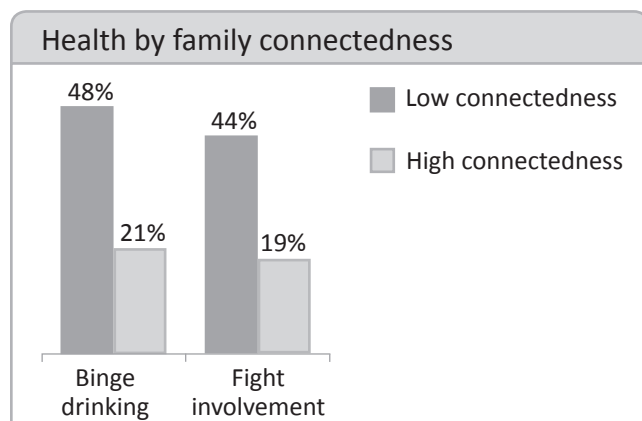
On average, students indicated relatively high connectedness to their family and moderately high connectedness to school. While male and female students in this area were equally connected to school, males were

more highly connected to family. Family connectedness scores in this area were similar to the province as a whole but school connectedness scores were lower.

## Cultural Connectedness

The 2008 AHS included items on ethnic or cultural connectedness which measured the extent to which youth made efforts to learn about their ethnic/cultural group and how strongly they belonged to or felt attached to their group.

Of the six items about cultural connectedness, the one that received the most endorsement from youth was "I understand what my ethnic group means to me", with 34% agreeing with the statement. Fewer youth agreed with other statements regarding learning about their ethnic group, feeling a strong sense of belonging or attachment to the group or participating in cultural practices.



There were no gender differences in level of cultural connectedness.

Compared to the entire province, youth in this area reported lower levels of cultural connectedness. For example, while 24% of youth in this area reported participating in their group's cultural practices (such as special food, music or customs), 42% of youth in the entire province did so.

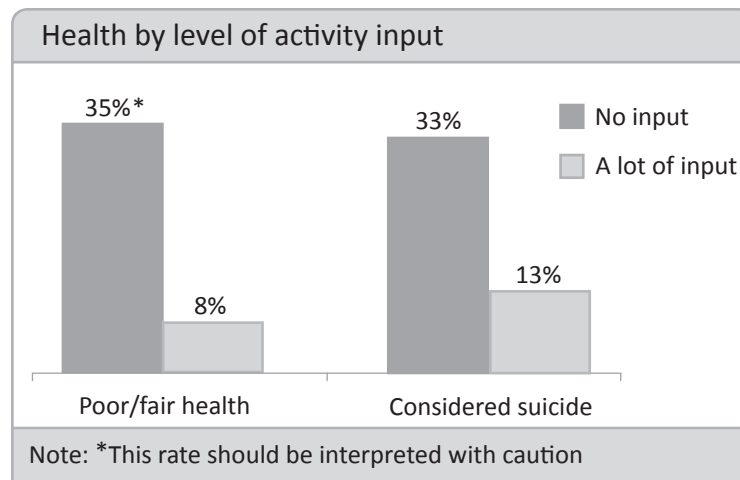
## Youth Engagement

In addition to being asked about their involvement in extracurricular activities, youth were asked to rate how meaningful their activities were to them and how much they felt their ideas were listened to and acted upon in these activities. Youth in this area were engaged in their activities to a similar degree as those in the province as a whole.

Five percent of youth reported that the activities they were involved in were not at all meaningful to them and 7% said they had no input into these activities. On the other hand, 37% were involved in activities that were very meaningful to them and 14% felt that they had a lot of input into their activities.

## Positive Peer Relationships

Youth were asked whether their friends would be upset if they engaged in a number of behaviours, including getting arrested, beating someone up or dropping out of school. For most situations, females were more likely than males to think their friends would be upset with them, except there was no gender difference in friends disapproving of them getting drunk or using marijuana.



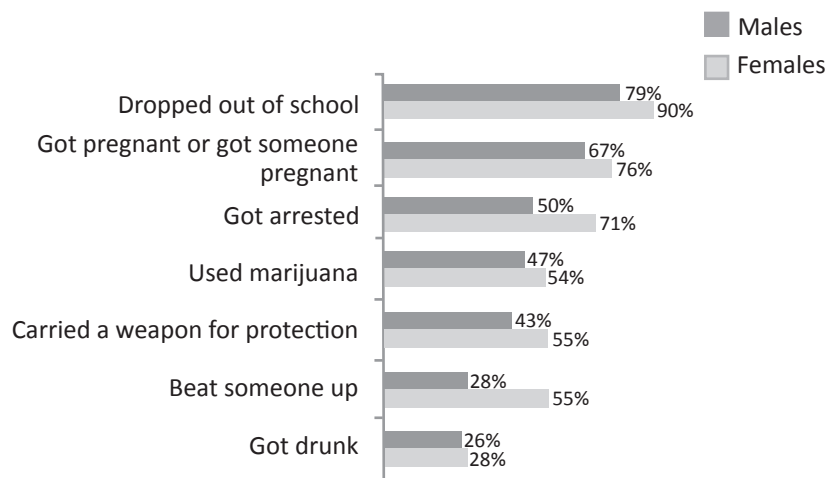
“ I only have 1 friend... we talk on the phone every night. Without him, I would likely go insane ”

Compared to BC as a whole, local students were less likely to indicate that their friends would be upset if they got arrested, beat someone up, got drunk or used marijuana. However, when compared to East Kootenay youth in 2003, youth in 2008 were more likely to think that their friends would be upset with them if they got arrested (61% vs. 47%) or used marijuana (51% vs. 43%).

## The Value of Protective Factors

Results from provincial data depict the value of promoting protective factors. The table on the next page indicates that the presence of protective factors was generally associated with lower rates of poor/fair health, binge drinking, suicidal ideation, and fight involvement compared to overall provincial rates. Similar associations were evident in the East Kootenay area (see previous graphs on family connectedness and activity input).

### Friends would get upset if I ...



Note: The gender differences for 'got drunk' and 'used marijuana' were not statistically significant.

### Protective factors

Protective factors	East Kootenay 2008	BC 2008
Family connectedness	7.7	7.9
School connectedness	6.4	6.8 <sup>†</sup>
Cultural connectedness	4.6	5.5 <sup>†</sup>
Youth engagement		
Meaningfulness of activities	7.3	7.2
Ideas listened to and acted upon	5.8	6.0
Prosocial peer attitudes	5.5	6.0 <sup>†</sup>

Note: All protective factor scores range from 0 to 10, with a higher score indicating higher levels of the protective factor.

<sup>†</sup> Difference between East Kootenay and provincial estimates was statistically significant.

## Building Resilience in Vulnerable Youth

Protective factors can reduce the likelihood of experiencing negative outcomes even for vulnerable youth. For example, a substantial number of youth in the East Kootenay area reported being victimized or bullied at school and 24% of these youth had seriously considered suicide in the past year. However, being connected to family or school, having input into their extracurricular activities and being involved in activities which were meaningful to them were each associated with a lower risk of suicidal ideation.

These findings show us that building protective factors can assist youth, even those who are vulnerable, to overcome negative experiences, can help young people to make healthier choices and can contribute to more positive health outcomes.

Even a small improvement in a protective factor, such as school or family connectedness, will improve outcomes for youth in many areas.

Protective factors and reduction of health risk behaviours for BC youth				
Protective Factor	Poor/fair health	Binge drinking	Considered suicide in past year	Involved in fight
Highly connected to family	4%	14%	4%	15%
Highly connected to school	5%	11%	5%	12%
Highly connected to cultural/ethnic group	13%	18%	10% <sup>N/S</sup>	24% <sup>N/S</sup>
Involved in very meaningful activities	9%	23% <sup>N/S</sup>	9%	24% <sup>N/S</sup>
Have peers with more prosocial attitudes	13%	2%	8%	10%
<b>Overall Provincial Rate</b>	<b>16%</b>	<b>24%</b>	<b>12%</b>	<b>24%</b>
<sup>N/S</sup> Not significantly different from overall provincial rate.				

# Acknowledgements

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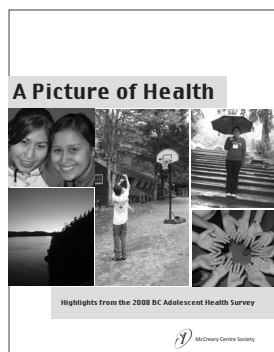
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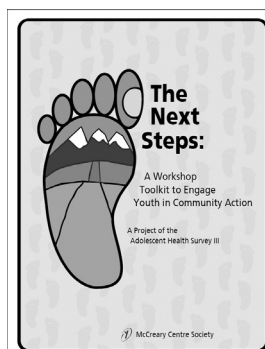
# McCreary Resources

For any of these, or other materials by the McCreary Centre Society, visit our website [www.mcs.bc.ca](http://www.mcs.bc.ca).



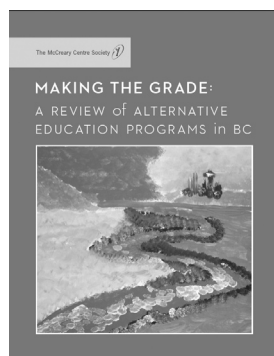
## ***A Picture of Health: Highlights from the 2008 Adolescent Health Survey (2009)***

Over 29,000 students in grades 7-12 across the province participated in the Adolescent Health Survey. It is the largest survey of its kind in Canada and provides valuable health status and risk behaviours of BC adolescents.



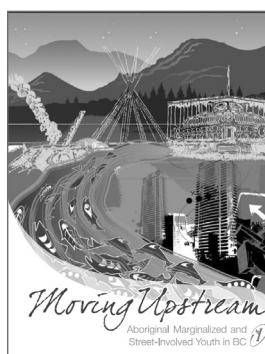
## ***The Next Steps: A workshop toolkit to engage youth in community action (2005)***

The Next Steps is a workshop series that provides youth, along with supportive adults, an opportunity to: discuss the results of the Adolescent Health Survey; identify priority issues; and plan projects for improving the health of youth in their communities.



## ***Making the Grade: A review of alternative education programs in BC (2008)***

A review of alternative education programs in BC, involving youth attending alternative education programs for “at-risk” and “high risk” youth across the province, and adult stakeholders. The review documents the positive impact of these programs for youth.



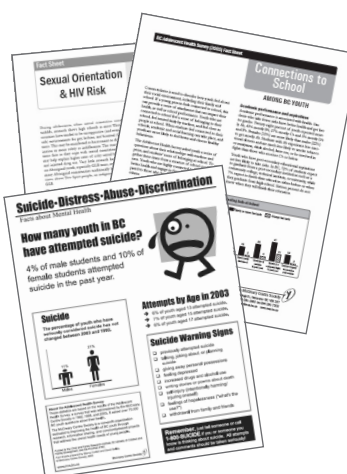
## ***Moving Upstream: Aboriginal marginalized and street-involved youth in BC (2008)***

This report analyzes the experiences in nine BC communities of homeless, inadequately housed, street-involved and marginalized Aboriginal youth. The report is a further analysis of McCreary's Marginalized and Street-Involved Youth Survey.



## ***Against the Odds: A profile of marginalized and street-involved youth in BC (2007)***

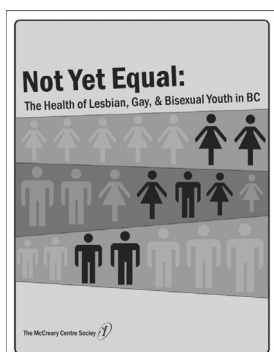
The lives of marginalized and street-involved youth are complex and filled with challenges, dangers and opportunities. This report summarizes the results of surveys with marginalized youth in the North, Interior, Fraser Valley, Vancouver Island and Vancouver.



## ***Fact Sheets***

Fact Sheets offer research results on a variety of topics using the most recent Adolescent Health Survey data. Fact Sheets include:

- Sexual behaviour & sexuality
- Connections to school
- Safety and violence
- Harassment & discrimination
- Emotional health
- Injuries



## ***Not Yet Equal: The health of lesbian, gay & bisexual youth in BC (2007)***

This report takes a closer look at the health of LGB youth, their life experiences and risk behaviours across the first three AHS surveys. It reveals both hopeful and worrying trends.





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