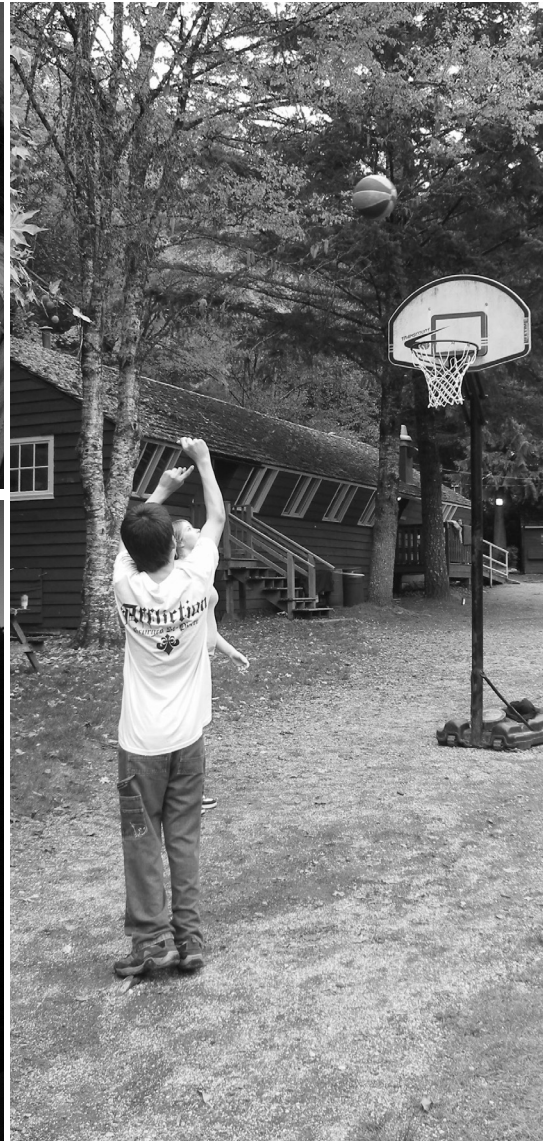


A Picture of Health



Fraser North
Results of the 2008 British Columbia Adolescent Health Survey

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Fraser North

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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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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.

Fraser North 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

The Fraser North area is located in the Fraser Health Authority region.

School Districts included in the Fraser North area are:

New Westminster (SD 40), Burnaby (SD 41), Maple Ridge-Pitt Meadows (SD 42), Coquitlam (SD 43). All school districts participated in the survey.

Fraser North Health Service Delivery Area



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.

Fraser North 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

- Similar to youth in the province as a whole, 84% of youth in this area reported that their health was good or excellent. More males than females rated their health as excellent (39% vs. 22%).
- Youth in this area were less likely to report a serious injury than youth in the province as a whole (26% vs. 29%). However, they were more likely to report being injured at a sports facility or field (48% vs. 39%).
- In the past year, 11% of youth did not get medical help when they felt they needed it. This was lower than the rate seen in the province as a whole (13%).
- Compared to the province as a whole, students in this area were less likely to have tried alcohol, to have drunk alcohol recently or to binge drink. They were also less likely to have used marijuana, mushrooms, and inhalants and to have ever injected a drug.
- A smaller percentage of youth in the Fraser North area were having sex compared to the province as a whole. In this area, 82% of youth reported that they had never had sexual intercourse, compared to 78% provincially. The percentage of youth who had engaged in oral sex was also lower than across the province (21% vs. 26%).
- The percentage of students who experienced sexual harassment was lower than the provincial rate. However, experience of racial discrimination was higher (14% in this area vs. 12% provincially).
- Cultural connectedness and having friends with healthy attitudes towards risk behaviours are two protective factors identified in the AHS. Youth in this area scored higher on cultural connectedness than the province as a whole. The overall level of healthy peer attitudes was also higher. For example, compared to BC as a whole, local students were more likely to think that their friends would be upset with them if they used marijuana (64% vs. 58%).

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 com-

mittee 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-affecting 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.

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.

This the first time there has been sufficient school district participation to allow for a report at the Fraser North area level. A separate report is now available for the Fraser South/Fraser East area. Although this means that trends over time cannot be reported, it does offer a comprehensive picture of youth health in this area.

A methodology fact sheet for the survey is available at 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 Fraser North area unless otherwise stated.

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

Participating School Districts

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

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 Fraser North and provincial estimates was statistically significant.

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

Fraser North Youth: Their Home & Family

Background

Students in this area (the Fraser North HSDA) identified with a broad range of ethnic and cultural backgrounds. Students most commonly indicated being of European heritage (46%). This was below the provincial rate of 54%. The second most common cultural identity in this area was East Asian (30%).

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

Thirty-five percent of students in this area were born outside of Canada, above the provincial rate of 18%. Eleven percent of students had lived in Canada between 2 and 5 years and another 6% had lived here for less than two years, the same as the provincial rate.

First Nations

Six percent of students reported Aboriginal heritage (compared to 10% for the province). Among these students, 28% had First Nations status, 28% were Aboriginal but did not have First Nations status, and 27% were Metis.

Spoke a language other than English at home

Never	42%
Sometimes	27%
Most of the time	31%

Ethnic or cultural background

European	46%
East Asian	30%
Southeast Asian	7%
Aboriginal/First Nations	6%
South Asian	6%
West Asian	5%
Latin/South/Central American	4%
African	3%
Australian/Pacific Islander	2%
Other (excluding Canadian)	1%
Don't know	6%

Note: Youth could choose more than one response.

Seven percent of Aboriginal students currently lived on a reserve, and 15% had lived on a reserve at some point in their life (5% for less than a year, 6% for a few years, and 3% for most of their life).

Sexual Orientation

Eighty-six percent of students identified as heterosexual, 7% as mostly heterosexual, 2% as bisexual, 1% as gay/lesbian and 6% were unsure.

Spirituality

Forty-eight percent of students reported that they were not at all religious or spiritual. The remainder were either somewhat (38%) or very much (13%) 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 (90%) and/or father (67%) most of the time; 13% 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 morn-

Who youth lived with most of the time (Youth could mark all that apply)

Mother	90%
Father	67%
Other adults related to me	9%
Stepfather	4%
Stepmother	2%
Other adults not related to me	2%
Do not live with any adults	1%

ing (76%) and went to bed at night (85%). However, 8% did not have a parent at home when they woke up in the morning and 4% did not have a parent at home when they went to sleep at night on any of the past five school days.

Unstable Home Life

A total of 2% 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. One percent of youth were in care in the last year.

Eight percent of students ran away from home in the past year, with females more likely than males to have done so (10% vs. 6%). These students were more likely than those who had

not run away to have experienced extreme stress and despair and to have attempted suicide in the last 12 months.

Frequently moving house can negatively influence young people's health. Seventeen percent of youth moved once in the past year, 5% moved twice, and 7% moved three or more times. Students who moved in the past year were more likely than those who did not move to have attempted suicide in the past 12 months (6% vs. 4%) 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.

Connectedness to mother and father figures was higher among younger than older students. Males reported higher levels of connectedness to their mother and father

figures than females. 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. Also, students who had one caregiver at home when they woke up in the morning or when they went to bed at night on all of the past five school days reported higher connectedness with their mother and father figures compared to students whose caregiver was absent on all five school days.

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

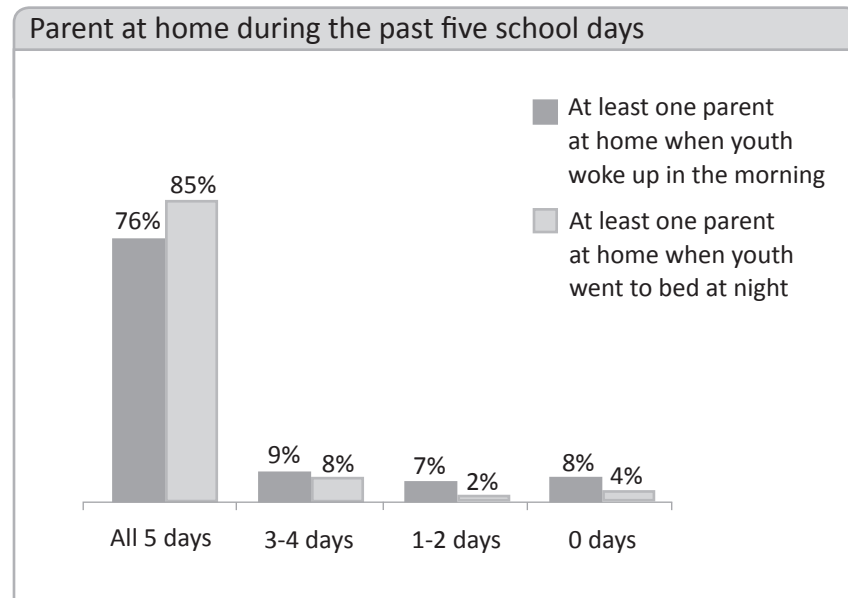
BC has the highest child poverty rate in Canada yet asking youth about their family's economic status can be challenging. Young people often do not know about their family's income, parent's occupation or other

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 (90%), did not share a bedroom (88%), have travelled on holiday with their family in the past year (80%), and that their family currently owned a computer (99%).

Eight percent of youth experienced hunger some of the time 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 (26% vs. 15%) and to have considered suicide (26% vs. 9%) and attempted suicide (16% vs. 3%) in the past year.

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



Physical Health

“ *I am in perfect condition.* ”

Eighty-four percent of youth in this area reported that their health was good or excellent. More males than females rated their health as excellent (39% vs. 22%). Ratings of health were similar between this area and the province as a whole. Males were less likely than females to report that they had physical complaints ‘a lot’ such as headaches (9% vs. 20%), stomach-aches (7% vs. 17%), backaches (10% vs. 17%) or dizziness (6% vs. 11%) in the past six months.

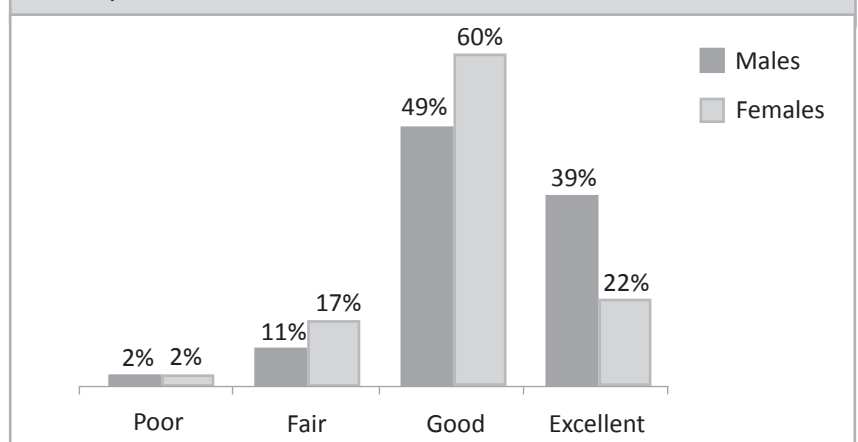
Eight percent of students (7% of males and 10% of females) in this area reported a debilitating health condition or disability. The most common conditions were a long-term illness (such as diabetes or asthma) experienced by 4% of youth and a mental or emotional condition (such as depression or eating disorder) reported by 3% of youth. Among youth with a health condition or disability, 26% took daily medication and 7% missed a lot of school due to their condition.

Accessing Medical Care

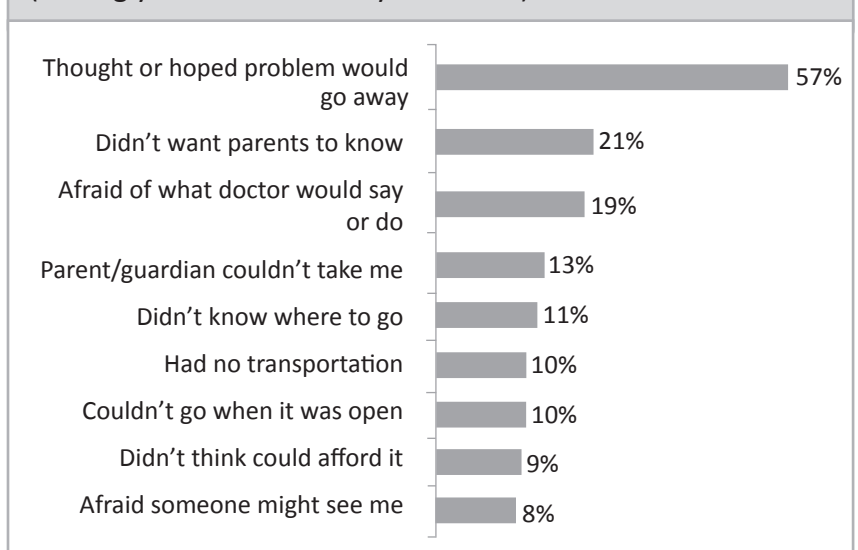
In the past year, 11% of youth (9% of males and 14% of females) did not get medical help when they felt they needed it. This was lower than the rate seen in the province as a whole (13%). Among those youth who did not access needed medical care, the most

common reason was because they thought or hoped the problem would go away (57%).

Self-reported health status



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



Injuries

“ I have a knee injury that prevents me from running or doing things. ”

Injuries are one of the most common health hazards facing BC youth. In the past year, 26% of students were injured seriously enough to need medical attention. This is below the provincial rate of 29%. Males were more likely than females to have been seriously injured (29% vs. 23%).

Females were more likely than males to have been seriously injured in their home or yard (20% vs. 8%). The most common location for getting injured was at a sports facility or field (48%, above the provincial rate of 39%). Fifteen percent of injuries were at school and 13% were at home.

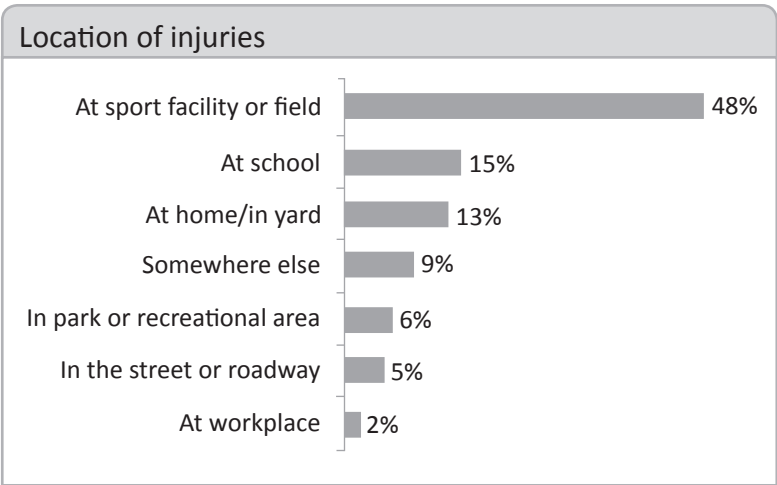
Most injuries occurred while students were playing or training for sports or doing other recreational activities (63%). Five percent

occurred when students were snowboarding or skiing (similar to the provincial rate), 6% occurred when students were riding a bike, and 8% took place during relatively low-risk behaviours (such as walking or cooking). Similar to the provincial rate, 2% of students were injured in a motor vehicle.

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-seven percent of students in this area always wore a seatbelt when riding in a motor vehicle, similar to the provincial rate.



Sixty-three percent of students rode a bicycle in the past year, below the provincial rate of 71%. Among these students, 25% always wore a bike helmet and 35% never wore one. As students got older, they were less likely to wear a helmet.

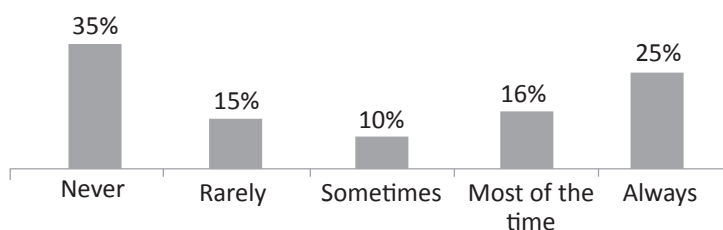
Driving and Substance Use

Motor vehicle accidents are the leading cause of death among BC youth. In this area, 6% of youth had driven after using alcohol or marijuana.

Four percent of students had ever driven after using alcohol (compared to 7% provincially). In the past month, 2% of students had driven after consuming alcohol and 17% of students had been a passenger in a vehicle with a driver who had been drinking (19% females and 14% males).



Helmet use among youth who cycled in the past year



Nutrition

“ *I am vegan and pay attention to my health greatly. I make sure that I include enough dietary requirements and to take supplements.* ”

The majority of youth reported consuming water, dairy, fruit and vegetables on the day before they took the survey, but also sweets (cookies, cake, etc.). Males were more likely than females to have had water (79% vs. 74%), dairy (59% vs. 44%), fast food such as pizza, hot dogs, chips and fries (13% vs. 6%), pop (15% vs. 6%), and energy drinks (4% vs. 1%) twice or more yesterday.

Despite increased awareness about the importance of consuming fruits and vegetables daily and the increased availability of healthier foods in schools, 24% of youth in this area (compared to 28% provincially) reported eating one or no portions of fruits or vegetables on the day before they completed the survey. At least 48% of youth (similar to the provincial rate) fell short of the recommended daily portions of fruits and vegetables.

What youth ate and drank yesterday

	No	Yes (once)	Yes (twice or more)
Water	5%	19%	76%
Milk, cheese, yogurt	11%	37%	52%
Fruit	17%	41%	42%
Green salad or vegetables	20%	46%	34%
Cookies, cake, donuts, chocolate bars	36%	48%	16%
Pizza, hot dogs, potato chips, french fries	54%	36%	10%
Pop/soda	59%	31%	10%
Hot or cold coffee or coffee-based drinks	76%	18%	6%
Energy drinks	91%	6%	3%

Note: Percentages do not always total 100% due to rounding.

Fifty-five percent of youth always ate breakfast on school days, while 15% never ate breakfast; these were similar to provincial rates. Males were more likely than females to always eat breakfast (59% vs. 52%).

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 or vegetables yesterday, but more likely to have consumed pop and energy drinks.



Always ate breakfast on school days

Males	59%
Females	52%

Note: Differences between Fraser North and provincial estimates were not statistically significant.

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

“ I eat A LOT of junk food. ”

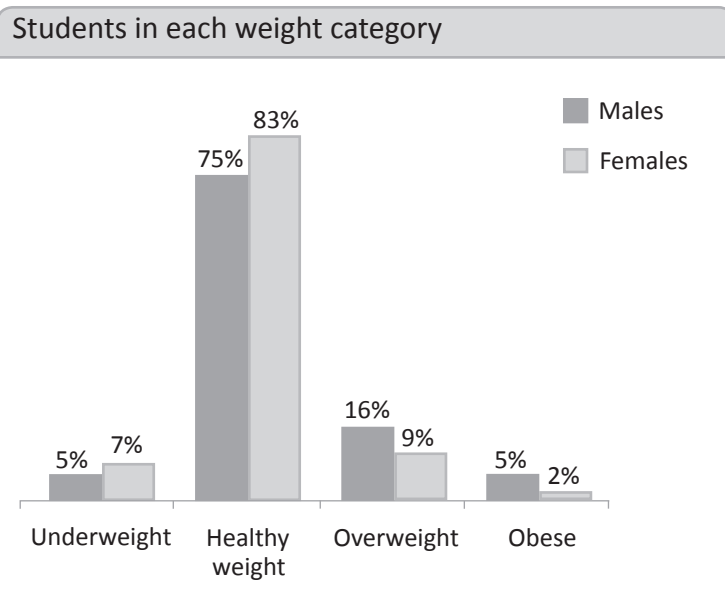
Weight & Body Image

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, 79% of students were considered to be a healthy weight for their age and gender, while 6% were underweight, 12% overweight and 3% obese.

Males were more likely than females to be overweight or obese. Provincial and local percentages for students falling into each of the BMI weight categories were similar.

Obesity is linked to health challenges at all ages. Students whose BMI indicated they were obese were less likely than healthy weight youth to rate their health as excellent. In addition, obese youth were more likely than healthy weight youth to have spent three or more hours on an average school day playing video games (29%* vs. 13%).



BMI weight categories	
Underweight	6%
Healthy Weight	79%
Overweight	12%
Obese	3%
Note: Differences between Fraser North and provincial estimates were not statistically significant.	

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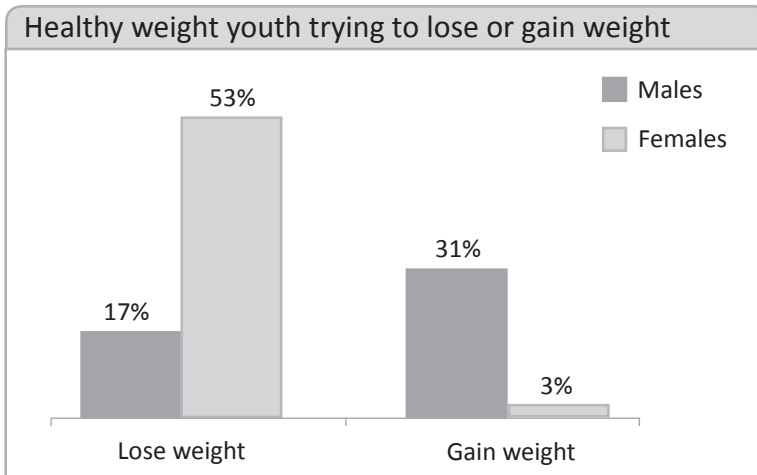
How can I lose weight but still stay healthy and look it?

”

Body Image

Similar to provincial rates, 18% of males rated themselves as very satisfied with their body image, compared to only 10% of females. The majority of youth (67%) felt they were about the right weight.

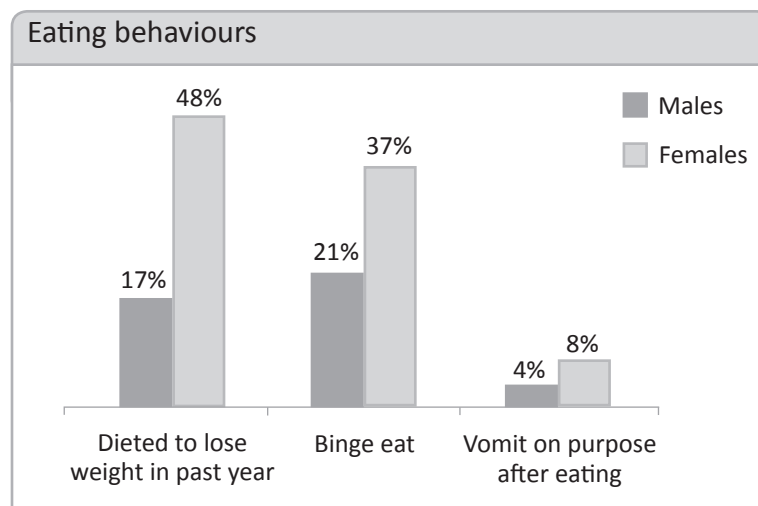
Looking at youth whose BMI indicated they were a healthy weight, 28% stated they were not trying to do anything about their weight and 21% were trying to stay the same weight. However, 53% of healthy weight females were trying to lose weight and 31% of healthy weight males were trying to gain weight.



“*Kids at school are always making fun of me cause they think I have an eating disorder, since I’m really skinny.*”

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. The rates of dieting, binge eating and purging did not differ between this area and the province as a whole.

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 3.7 and females 3.4.



Mental & Emotional Health

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 (88%) and their abilities (92%), they had much to be proud of (78%) and felt that their life was useful (87%). A total of 58% agreed or mostly agreed with all seven of the self-esteem questions on the survey, which was the same as the provincial rate.



“*My self esteem has gone up in the past 2 years.*”

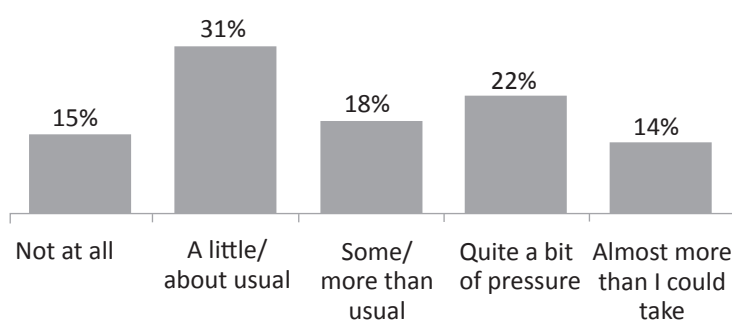
“*I’m on the edge of breaking down with no one there to save me.*”

Stress

As seen in the province as a whole, most youth (85%) reported feeling some stress or pressure in the past 30 days. A total of 14% of students indicated that the stress in their lives was almost more than they could take.

Females were twice as likely as males to report extreme levels of stress in the past month, to the point that they could not work or function effectively (18% vs. 9%). Older youth were more likely than younger youth to report extreme levels of stress.

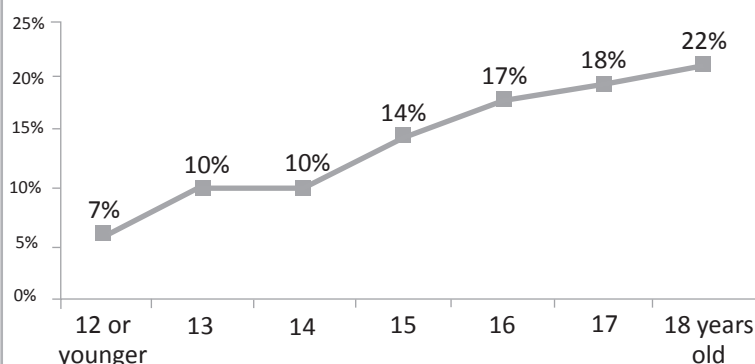
During the past 30 days, have you felt you were under any strain, stress or pressure?



Despair

Consistent with youth in the province as a whole, 6% 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 (8% vs. 3%).

Extreme stress by age



Self Harm

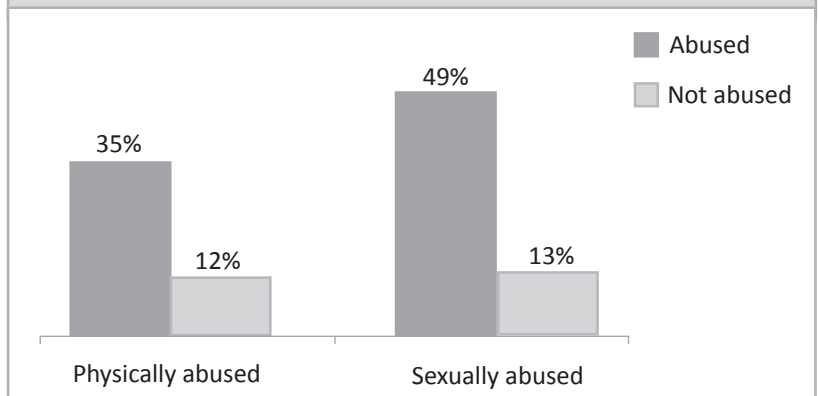
Sometimes youth will hurt themselves as a way of coping with stress and pain in their lives. Fifteen percent of students (20% of females and 10% of males) indicated cutting or injuring themselves on purpose without trying to kill themselves at some point in their lifetime, with 11% doing so once or twice and 5% 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, marijuana or hard drugs were more likely to self-harm compared to youth who never used these substances.

Suicide

Suicide is the second leading cause of death among youth aged 12-18 in British Columbia. In this area, 11% of students reported seriously considering suicide in the past year, which was comparable to the provincial rate of 12%.

Intentional self harm among youth who had been abused and not abused



“

I have considered suicide, because of all the bullying some people do to me. I don't know why. I haven't done anything to them.

”

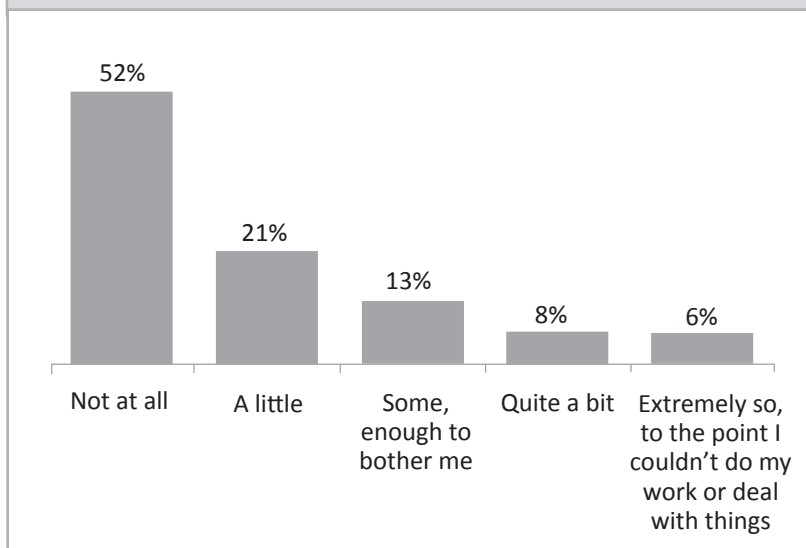
Four percent of students attempted suicide in the past year, which was similar to the provincial rate. Females were more likely than males to have attempted suicide (6% vs. 2%). Among youth who attempted suicide in the past year, 26% reported that their attempt was serious enough to require treatment 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. Twelve percent of youth reported that a family member had tried to commit suicide, with 3% doing so in the past year. Also, 19% of youth had a close friend who attempted suicide (10% in the past year). Students with a family member or close friend who had attempted or committed suicide in the past year were over nine times more likely to attempt suicide themselves, compared to students without these risk factors (19% vs. 2%).

Suicide attempts in the past year were also more likely among students who had ever been physically abused (13% vs. 3%) or sexually abused (18% vs. 3%) compared to students who had never been abused. Lesbian, gay and bisexual youth, and youth with

During the past 30 days, have you felt so sad, discouraged, hopeless or had so many problems that you wondered if anything was worthwhile?



a health condition or disability, were also at greater risk for attempting suicide.

Also, youth who had ever used alcohol, marijuana or other 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 (74%) or from adults outside their family (52%) if they were faced with a serious problem.

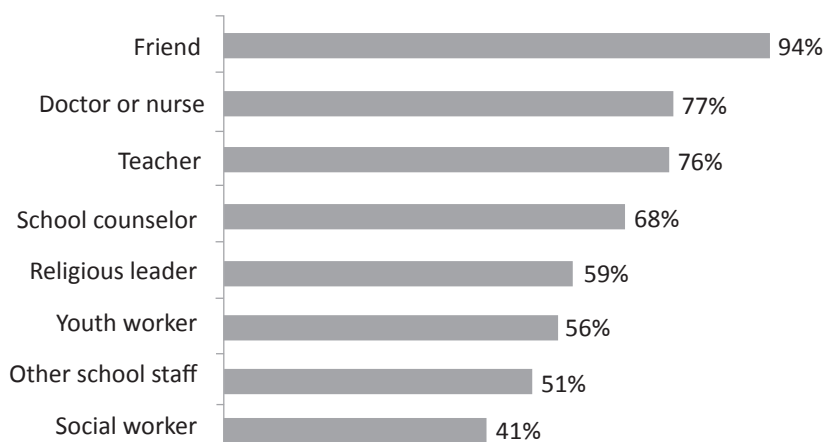
“*My dad has bi-polar and I’m afraid I might have it too.*”

Students reported approaching a variety of professionals for help in the past year, including teachers (45%), doctors or nurses (29%), school counselors (29%), other school staff (20%), religious leaders (19%), youth workers (17%), and social workers (13%). In addition to turning to adults for help, most students (82%) asked their friends for assistance. Students who sought support in the past year generally reported finding the assistance of both friends and professionals helpful.

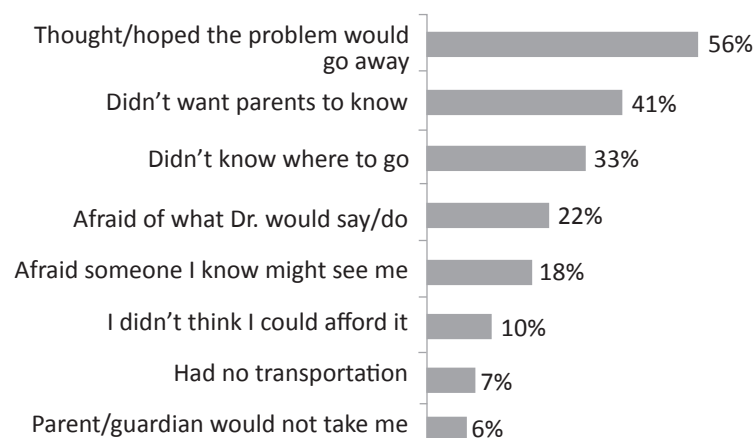
Accessing Mental Health Services

When asked specifically about accessing mental health services in the past year, 18% of females and 8% 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 (56%), students not wanting their parents to know (41%), and not knowing where to go (33%).

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



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



Smoking

Twenty-five percent of students in this area had ever tried smoking, similar to the provincial rate. Males and females were equally likely to have tried smoking.

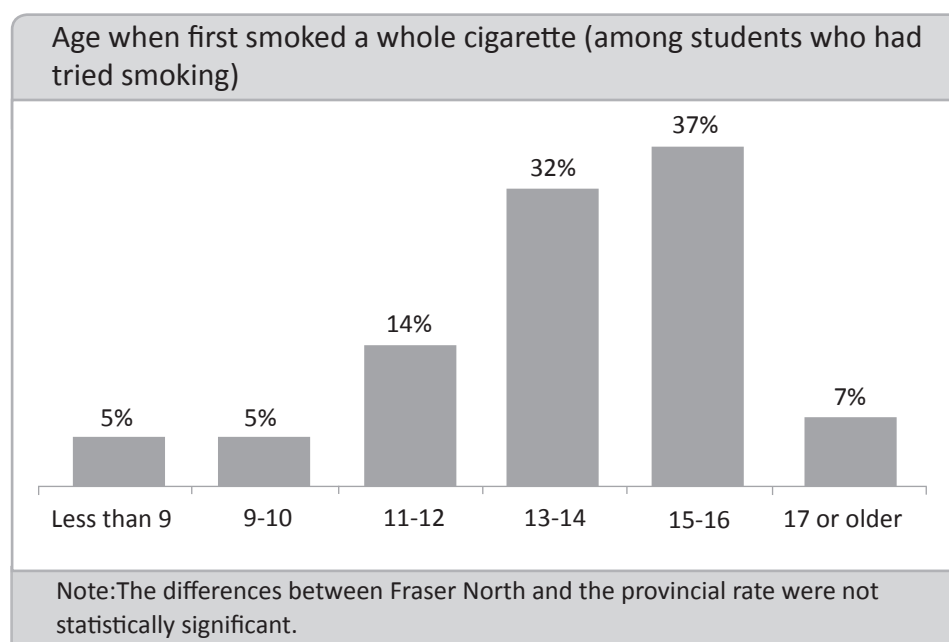
Among students who smoked, 14% had their first cigarette when they were 11 or 12 years old, compared to 37% who waited until they were 15 or 16 years old.

Less than half (45%) of students who had tried smoking had smoked in the past month. Those who did smoke, most commonly smoked 2 to 5 cigarettes a day (16% of all students who had tried smoking).

Similar to the provincial rate, 4% of young people had used chewing tobacco in the past month (6% of males vs. 2% of females).

Second-hand Smoke

Twenty-four percent of students in this area had been exposed to smoke inside their home or vehicle, below the provincial rate (28%). Eight percent of youth were exposed to smoke in their home or car almost every day.



Substance Use

“ *I think I drink too much. My friends say I do.* ”

Alcohol

Forty-nine percent of youth had tried more than just a few sips of alcohol. This was lower than the provincial rate of 54%. Males and females were equally likely to have tried alcohol.

Among students who had tried alcohol, the percentage of students who drank before they were 9 years old (7%) was similar to the provincial rate, as was the percentage who waited until they were 13 or 14 years old (39%).

Among students who drank in the past year, 16% had only had a sip, 41% drank once a month or less, and 23% drank two or three times a month.

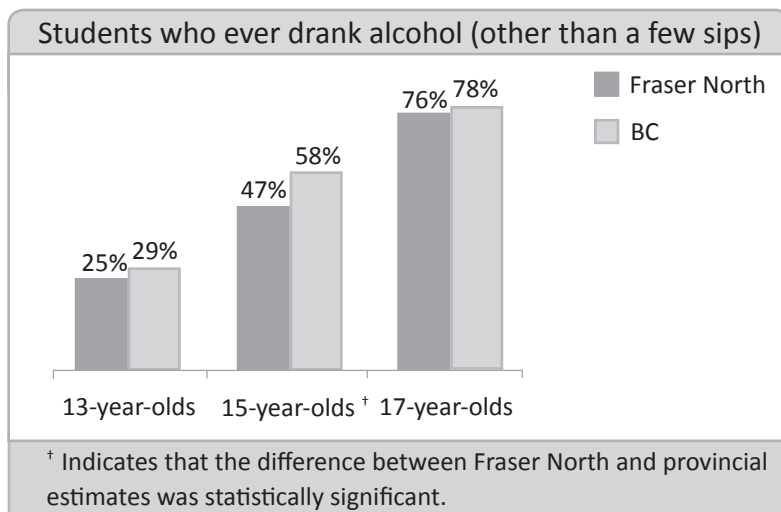
Around one third of students (33%) who had tried alcohol only drank on one or two days in the previous month. Local students who had tried alcohol were less likely to have been drinking in the past month than students in the province as a whole (62% vs. 67%).

Binge Drinking

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

Thirty-seven percent of local students who had tried alcohol binge drank in the past month, below the provincial rate of 44%.

Males and females were equally likely to binge drink in the past month. Two percent of students who had tried alcohol binge drank on ten or more days in the previous month.



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.

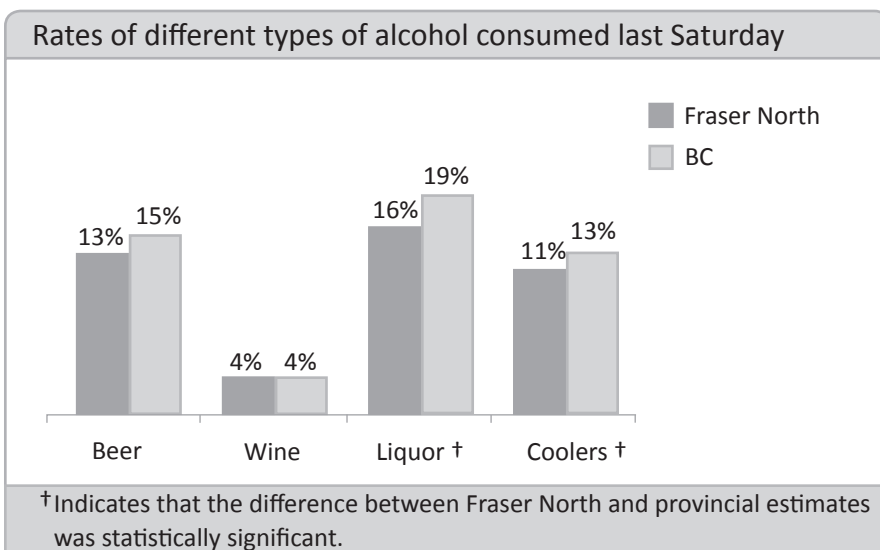
Twenty-two percent of students in this area drank alcohol last Saturday, which was lower than the provincial rate of 26%. There were no gender differences among those who consumed most types of alcohol, but females were more likely to have drunk coolers last Saturday (14% vs. 7%).

Marijuana

Twenty-two percent of students in this area had tried marijuana, below the rate of youth in the entire province (30%). There was no gender difference in the rate of marijuana use.

Among students who had tried marijuana, 3% had first used it when they were 10 years old or younger, compared to 6% across the province. The most common age for first trying marijuana was 13 or 14 years old (46%).

Fifty-two percent of those who had tried marijuana used it in the past month and 11% used it on 20 or more days in the past month (2% of all students).



“ *I don't do drugs anymore* ”

Last Saturday use

Below the provincial rate of 12%, 8% of students in this area used marijuana last Saturday. There was no gender difference.

Other Drugs

The percentage of youth in this area who had used most substances other than alcohol or marijuana was similar to the province as a whole. The exceptions were the rate of ever trying mushrooms, which at 5% was below the provincial rate, and inhalants, which was at 3% in comparison to 4% across the prov-

ince. Only 1% of students in this area injected an illegal drug, below the provincial rate.

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

There were no gender differences in the use of other drugs except females were more likely to use prescription pills (18% vs. 11%).

Consequences of Substance Use

In the past year, 3% of male and female students who had ever used alcohol felt they needed help for their alcohol use and 4% of those who had ever used drugs felt that they needed help for their drug use.

Forty-two percent of students reported using alcohol or drugs in the previous year. Among these students, over half 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.

Provincially, males were more likely than females to have reported damaging property,

Ever used other drugs

Prescription pills	15%
Any Hallucinogens	7%
Mushrooms	5% [†]
Cocaine	4%
Inhalants	3% [†]
Any Amphetamines	2%
Steroids	1%
Heroin	1%
Injected an illegal drug	1% [†]

[†] Indicates that the rates in Fraser North were statistically significantly lower than provincial estimates.

getting in trouble with police, and getting into a physical fight as a consequence of their substance use. This was not the case in this area, however; females were more likely than males to have argued with family members, and done something that they could not remember.

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

I used alcohol or drugs but none of these things happened	47%
Was told that I did something that I couldn't remember	40%
Passed out	29%
Argued with family members	17%
School work, marks, or behaviour at school changed	14%
Damaged property	11%
Got injured	10%
Got in trouble with the police	9%
Got into a physical fight	9%
Lost friends or broke up with a girlfriend or boyfriend	8%
Had sex when I didn't want to	7%
I overdosed	2%
Got into a car accident	1%
Had to get treatment for alcohol or drug abuse	1%

Sexual Behaviour

“ *Lot's of sexually active teens don't use proper forms of birth control because the resources aren't there, or they're too expensive.* ”

In this area, 82% of youth reported never having had sexual intercourse, which was higher than the provincial rate (78%). These students 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 (48%) and not being ready to have sex (47%).

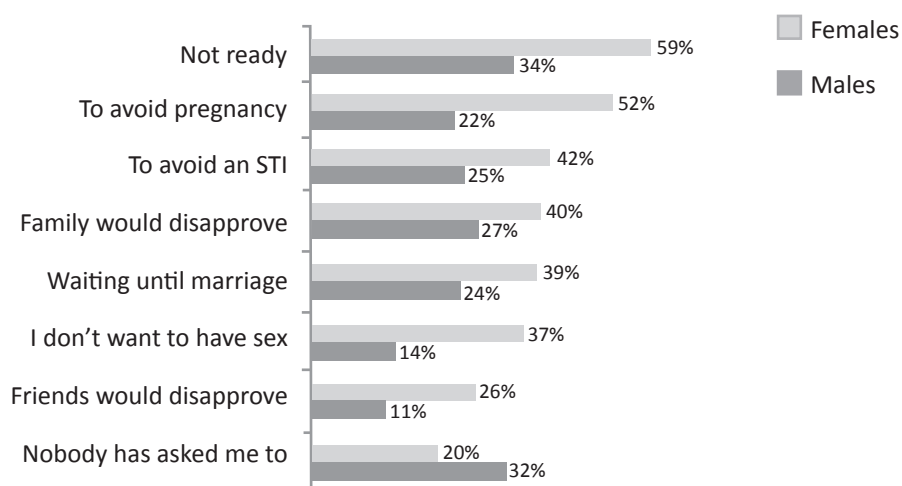
Males and females were equally likely to report never having sex because they were waiting to meet the right person, and because they thought most other students

in their school were not sexually active.

Females were more likely than males to endorse most other reasons, except males were more likely than females to indicate not having had sex because nobody had asked them to.

The percentage of youth that reported ever having sexual intercourse (18%) was comparable for males and females and increased with age. Among sexually active youth, the most common age for first having sex was 15. Eighteen percent reported first having had sex before age 14.

Some reasons for not having sex (among youth who never had sex)



Note: Youth could choose more than one response

Among students who have had sexual intercourse, 28% reported that they drank alcohol or used drugs before having sex the last time.

Oral Sex

Twenty-one percent of students reported ever having oral sex, which was lower than the provincial rate (26%). The percentages were comparable for males and females, and went up with age.

Sexually Transmitted Infections

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

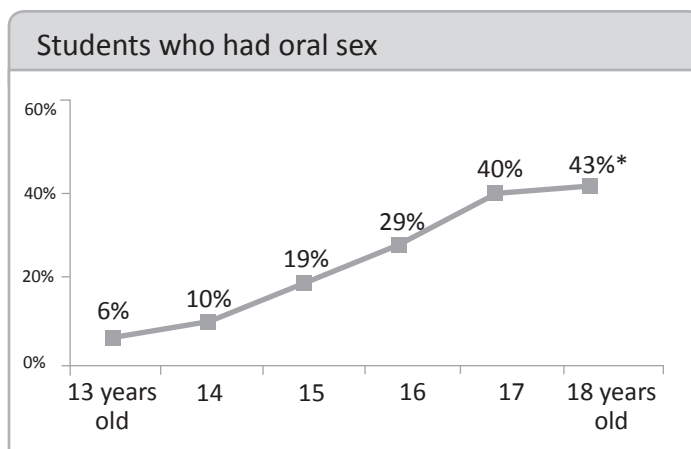
Among sexually active students, around half (53%) reported having had sexual intercourse with one person in the past year. Nine percent reported that they had sex with six or more people.

Birth Control and Pregnancy

Sixty-six percent of sexually active youth reported using a condom the last time they had sex, and 65% indicated that they had done so to prevent pregnancy.

Among sexually active youth, 43% used birth control pills to prevent pregnancy the last time they had sex. Twenty four percent used withdrawal which is an unreliable method of contraception, and 6% used only withdrawal. Four percent of students used no method to prevent pregnancy the last time they had sex and 4% used emergency contraception ("morning after pill").

Five percent of sexually active students reported that they have been pregnant or caused a pregnancy, which was comparable to the provincial rate of 7%.



Abuse & Violence

“Please come to my school and lecture about bullying.”

Physical and Sexual Abuse

The percentage of students who reported physical or sexual abuse was similar to the provincial rate. Sixteen percent reported that they had been physically abused, and 7% reported that they had been sexually abused. In total, 19% of students had experienced either form of abuse and 3% had experienced both types of abuse.

Consistent with rates across the province, 4% of students had ever been forced to have sex when they did not want to; 1% by an adult and 3% by another youth. Females were more likely to have had this experience than males (5% vs. 2%).

Sexual Harassment

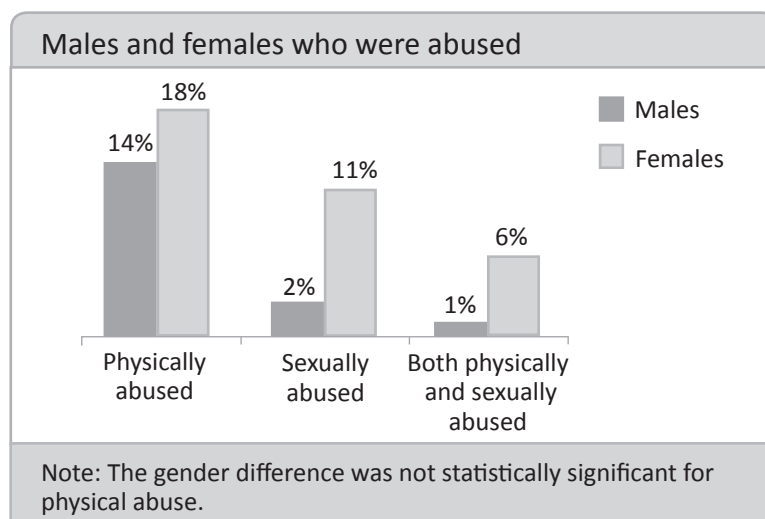
The percentage of students who experienced verbal (43%) or physical (24%) sexual harassment was lower than the provincial rates of 47%

and 27%, respectively. Female students were more likely to experience either form of harassment. In the past year, 52% of females had been verbally sexually harassed (compared to 34% of males) and 35% had been physically sexually harassed (compared to 13% of males).

Internet Safety

Comparable to the provincial rate, 11% of students (17% of females and 5% of males) had been in contact with someone on the Internet who made them feel unsafe. Nine percent of youth gave personal information to someone that they met on the Internet in the past year.

Fifteen percent of students were cyber-bullied in the previous year, similar to the provincial rate. Females were more likely than males to have been cyber-bullied (19% vs. 11%).



Physical Fights

Consistent with the provincial rate, 23% of students were involved in a physical fight in the past year. Males were more likely than females to have been in a fight (32% vs.14%). Three percent of students were injured in a fight to the point where they required medical attention (4% of males and 2% of females).

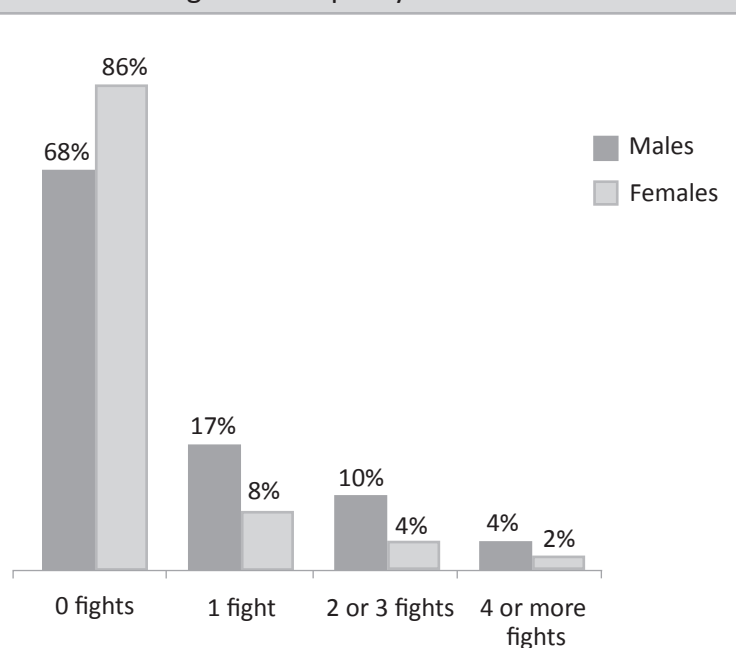
Relationship Violence

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

Discrimination

Similar to the provincial rates, 16% of students had been discriminated against because of physical appearance in the past year. However, 14% of students experienced racial discrimination, above the provincial rate of 12%. Three percent of students reported they had experienced discrimination because of their sexual orientation.

Number of fights in the past year



School & Work

“ I am excluded because I’m smart and in favor with the teachers.
They also reject me because I don’t participate in bullying. ”

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 AHS provincial results, the majority of students reported liking school somewhat (65%). Females were more likely than males to like school very much (24% vs. 19%) although reported a comparable sense of connectedness to school. Students in Grade 7 felt more connected to school compared to students in later grades.

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

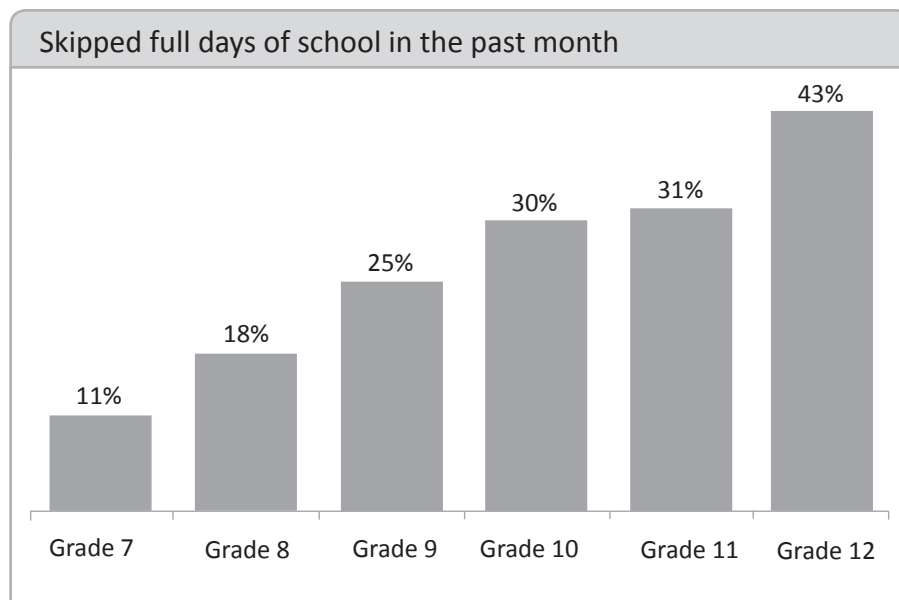
Students in higher grades were more likely than students in younger grades to skip school.

Youth who skipped school in the past month 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 nine percent of students reported always feeling safe at school, which was comparable to the provincial rate of 41%. The sense of always feeling safe was highest among students in Grade 7 (50%).

Students most commonly reported “always



“*At my work I had to breathe in smoke for 3 hours because the ventilation system was broken. My lungs felt very bad after.*”

or usually” feeling safe in the library (85%) or classroom (83%). They were least likely to report “always or usually” feeling safe outside on school property during school hours (53%).

Eight 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 (11% vs. 6%) but females were more likely to be victims of relational aggression (i.e., excluded from social groups or ignored; 36% vs. 23%) or to be verbally harassed at school (e.g., teased; 36% vs. 27%).

Rates of school-based physical, verbal and relational aggression in this area were comparable to the provincial percentages.

Weapon Carrying

A total of 6% of students carried a weapon to school in the past month (9% of males and 2% of females). Among those who carried a weapon, the majority (77%) carried a knife or razor.

Academic Aspirations

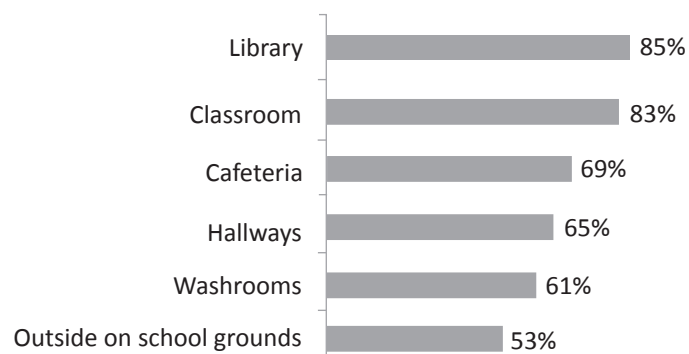
The vast majority of students expected to finish high school; only 1% anticipated finishing their education before graduating from high school. A total of 65% expected to complete their educa-

tion when they graduate from university, medical school, or law school; 16% when they graduate from community college or a technical institute; 5% once they complete high school; and 12% were not sure when they would complete their education.

Work

A total of 35% of students worked at a paid job during the school year, which was lower than the provincial rate (41%). Among students who worked, 28% worked less than 5 hours a week, 58% worked 5-19 hours and 15% worked 20 or more hours a week.

Students who always/usually felt safe at school



Sport & Leisure Activities

Exercise

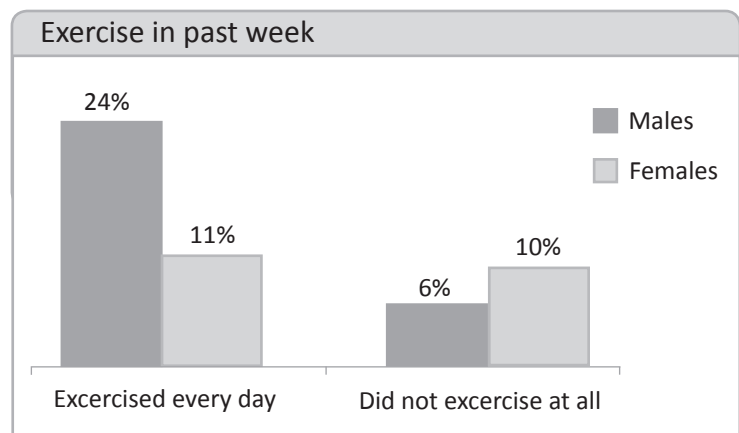
Health Canada recommends that youth participate in a minimum of 90 minutes of physical activity every day. Yet, when asked how often they exercised for at least 20 minutes a day during the past week, only 24% of males and 11% of females exercised every day, while 6% of males and 10% of females did not exercise at all. These rates were similar to provincial rates. On average, youth in lower grades exercised more often than those in later grades.

Extracurricular Activities

The majority of youth participated in extracurricular sports activities on a weekly basis: 60% of youth took part in sports activities with a coach (e.g., school teams, swimming lessons), and 67% participated in physical activities without a coach (e.g., biking, road hockey). Males were more likely to participate in both these types of sports activities, but 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, 61% did some form of

“ I do sports about 5 times a week. ”



volunteer work such as babysitting or helping a charity and 28% did this once a week or more. Other leisure activities youth participated in on a weekly basis included hobbies (54%), art (28%) and clubs (17%). Females were more likely than males to take part in these types of activities.

Participation rates for extracurricular activities did not differ between this area and the province as a whole, with the exception of sports activities without a coach where females were less likely to participate weekly compared to females in the entire province (55% vs. 60%).

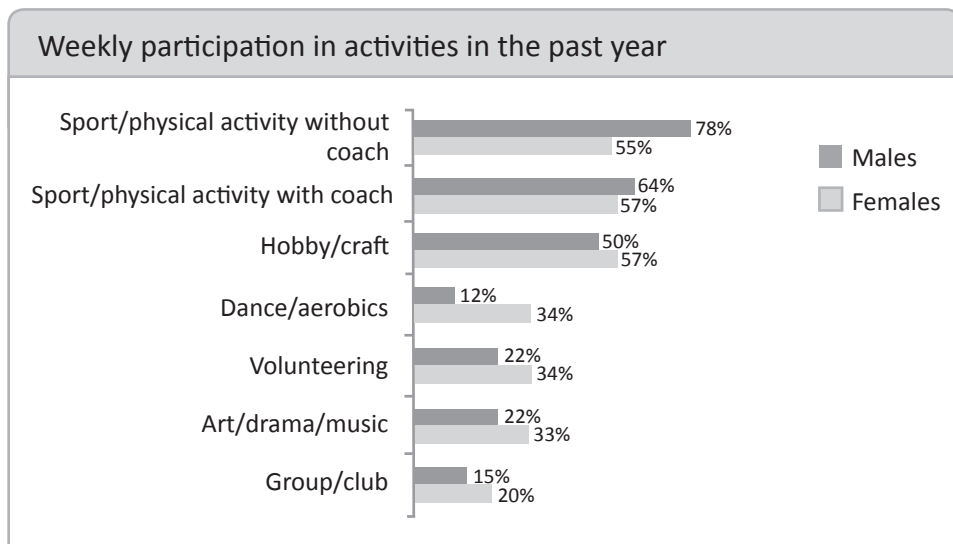
“ *I don't own video games and I only watch classics on TV...* ”

Screen Time

On an average school day, 89% of youth watched TV. As was the case for the province as a whole, 25% spent three or more hours watching TV on a typical school day. In this area there was no gender difference in TV watching.

On a typical school day, 90% of youth spent time on the Internet (excluding doing homework), 77% spent time on the phone or texting, and 57% played video games. Twenty-nine

percent of youth played on the Internet, 18% phoned or texted, and 15% 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 (26% vs. 4%), but were less likely to spend three or more hours texting or talking on the phone (11% vs. 24%) or on the Internet (25% vs. 33%). Furthermore, among females, playing video games was less common in this area than the province as a whole.



“What are you supposed to do when your mother is always at the casino?”

2010 Winter Olympics

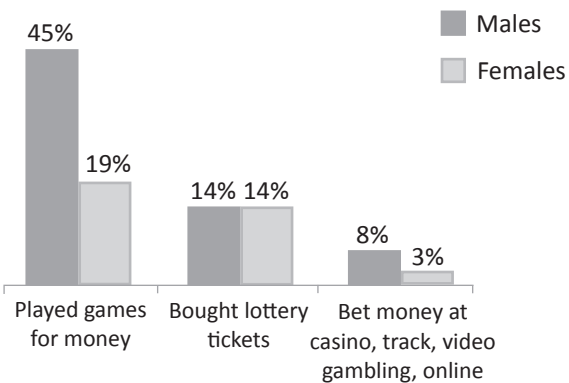
When asked about the effect of the upcoming 2010 Olympics in BC, 46% said it had not affected them, 43% of youth said they had not thought about it, 9% said they had become more physically active, 7% felt they had more job prospects, and 7% reported they had more sports opportunities.

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.

Thirty-nine percent of students reported gambling in the past year, comparable to the rate seen in the entire province. There was no gender difference in buying lottery tickets, but males were more likely than females to have played games for money and to have bet money at a casino, racetrack, on video games or on-line.

Gambling in the past year



Protective Factors

“Even if some kids get F’s or low marks, help them out, they are good at something, everyone is.”

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.

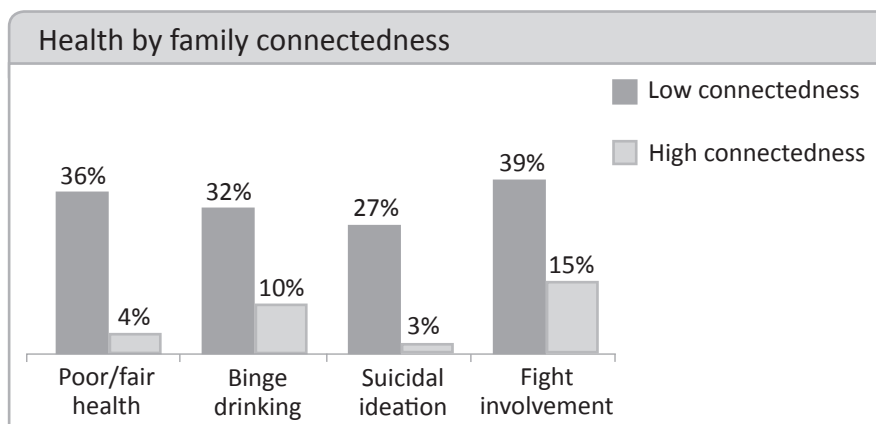
On average, students indicated relatively high connectedness to both family and

school. Family and school connectedness scores for this area were comparable to the province as a whole. While male and female students were equally connected to school, males were more highly connected to family than females.

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 issues pertaining to cultural connectedness, the one that received the most endorsement from youth was “I understand what my ethnic group means to me”, with



57% 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. Youth in this area, however, scored higher on cultural connectedness than the province as a whole.

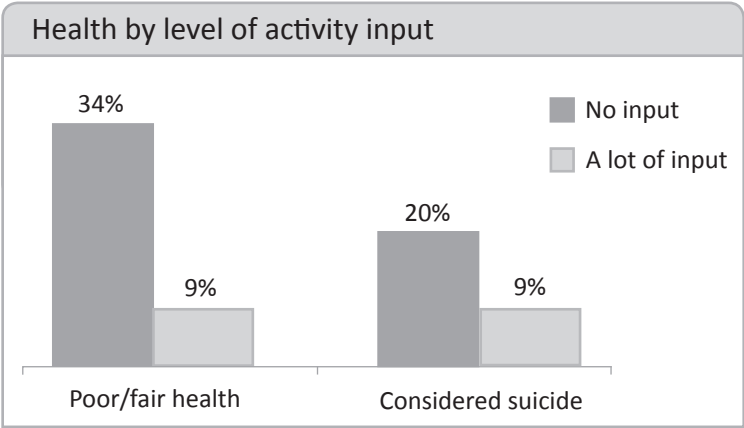
Youth Engagement

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.

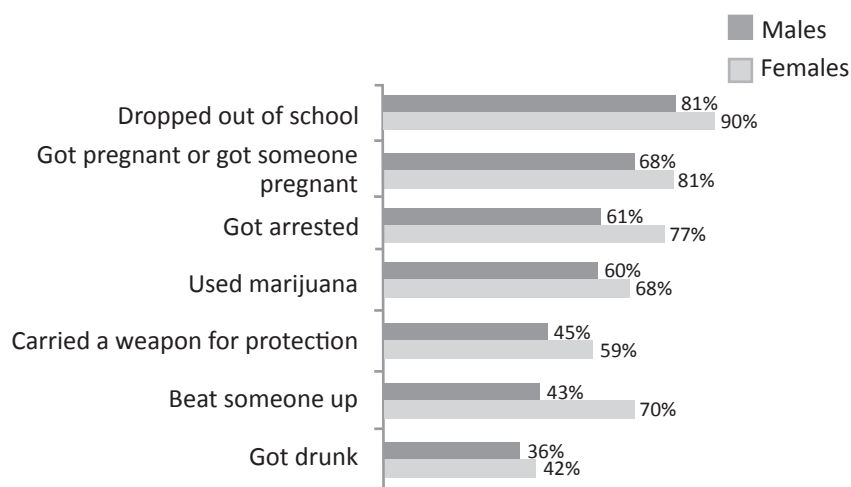
Five to seven percent of youth reported that the activities they were involved in were not at all meaningful to them or that they had no input into these activities. On the other hand, 35% were involved in activities that were very meaningful to them and 16% felt that they had a lot of input into their 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 each situation, with the exception of getting drunk, females were more likely than males to think their friends would be upset with them.



Friends would get upset if I ...



Note: The gender difference for 'got drunk' was not statistically significant.

The overall level of prosocial peer attitudes was higher in this area compared to the province in general. Compared to BC as a whole, local students were more likely to think that their friends would be upset with them if they used marijuana (64% vs. 58%); and males in this area were more likely to think their friends would be upset about getting arrested (61% vs. 56% provincially) or getting drunk (36% vs. 32% provincially).

The Value of Protective Factors

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

Protective factors

	Fraser North	BC
Family connectedness	7.9	7.9
School connectedness	6.9	6.8
Cultural connectedness	5.8	5.5 [†]
Youth engagement		
Meaningfulness of activities	7.1	7.2
Ideas listened to and acted upon	6.0	6.0
Prosocial peer attitudes about risk behaviour	6.3	6.0 [†]

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

[†] Difference between Fraser North 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 Fraser North area reported being victimized or bullied at school and 16% of these youth had seriously considered suicide in the past year. However, being connected to their family, school or cultural group, having input into their extracurricular activities and having peers with prosocial attitudes about risky behaviours 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% ^{N/S}	24% ^{N/S}
Involved in very meaningful activities	9%	23% ^{N/S}	9%	24% ^{N/S}
Have peers with more prosocial attitudes	13%	2%	8%	10%
Overall Provincial Rate	16%	24%	12%	24%
^{N/S} Not significantly different from overall provincial rate.				

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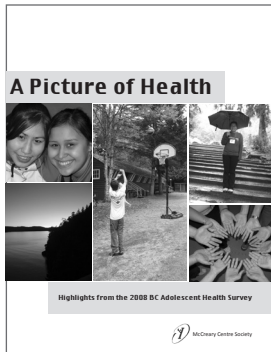


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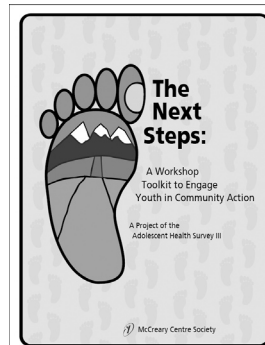
McCreary Resources

For any of these, or other materials by the McCreary Centre Society, visit our website www.mcs.bc.ca.



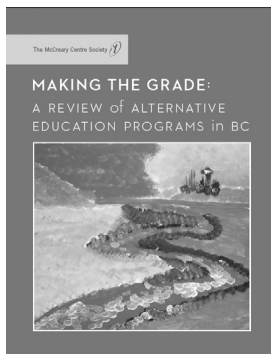
A Picture of Health: Highlights from the 2008 Adolescent Health Survey (2009)

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.



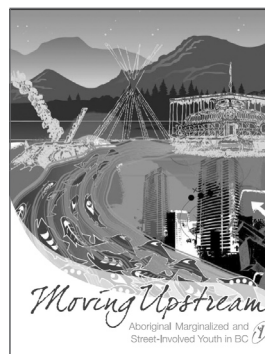
The Next Steps: A workshop toolkit to engage youth in community action (2005)

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.



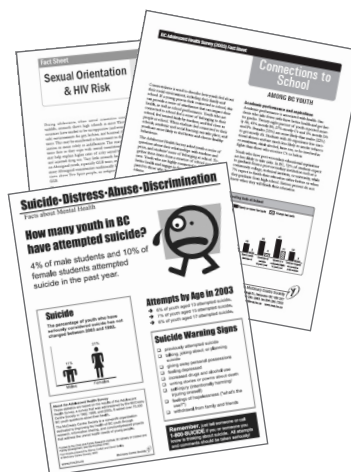
Moving Upstream: Aboriginal marginalized and street-involved youth in BC (2008)

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)

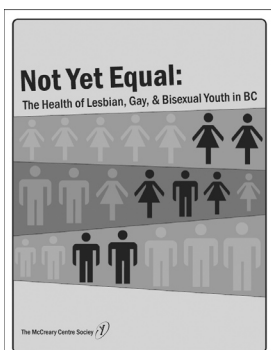
The lives of marginalized and street-involved youth are complex and filled with challenges, dangers and opportunities. This report summarizes the results of surveys with marginalized youth in the North, Interior, Fraser Valley, Vancouver Island and Vancouver.



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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