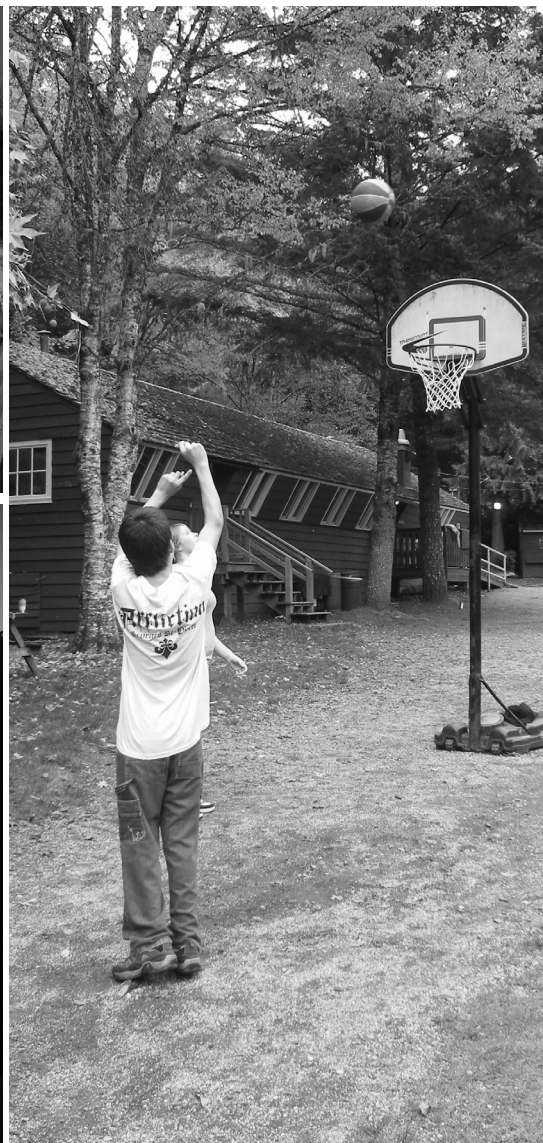


A Picture of Health



Okanagan
Results of the 2008 British Columbia Adolescent Health Survey

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Okanagan

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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.

Okanagan 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 Okanagan area is located in the Interior Health Authority region.

All school districts in this area participated in the survey.

School Districts included in the Okanagan area are:

Vernon (SD 22), Central Okanagan (SD 23), Okanagan Similkameen (SD 53), Nicola-Similkameen (SD 58), Okanagan Skaha (SD 67), North Okanagan-Shuswap (SD 83)

Okanagan 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.

Okanagan 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

- Eighty-six percent of youth in the Okanagan area reported that their health was good or excellent, which was consistent with results in 2003. More youth in this area reported excellent health compared to the province as whole (39% of males, 23% of females).
- Exercise rates for local male and female youth were greater than for the province as a whole. In addition, weekly participation in extracurricular coached sport activities increased between 2003 and 2008 (from 55% to 60%), and the percentage of students who watched TV for three or more hours a day decreased from 34% in 2003 to 23%.
- There were improvements in injury prevention behaviours; 70% of students always wore a seatbelt when riding in a motor vehicle (compared to 58% in 2003) and 29% of cyclists always wore a bike helmet (which was above the provincial rate of 24%).
- There was a decrease in the percentage of students who were injured seriously enough to need medical attention, from 41% in 2003 to 33% in 2008.
- Twelve percent of students reported seriously considering suicide in the past year, which was lower than the 2003 rate (17%). Five percent of students actually attempted suicide in the past year, which was also lower than the 2003 rate of 8%.
- Twenty-nine percent of students in this area had ever tried smoking, which was similar to the provincial rate, and represented a local decrease from 39% in 2003.
- The percentage of students who had tried alcohol was unchanged from 2003. However there was a decrease in the percentage who tried marijuana, from 45% in 2003 to 35% in 2008. Both rates remained above the overall provincial rates.
- Having friends with healthy attitudes about risky behaviours is a protective factor for youth. Compared to 2003, youth in 2008 were more likely to report that their friends would be upset with them if they got arrested (67% vs. 54%), beat someone up (53% vs. 46%), dropped out of school (88% vs. 84%) or used marijuana (55% vs. 45%).

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-impacting 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.

Four of the six participating school districts in this area changed consent procedures from 2003 for some or all grade levels - two changed from parental consent to parental notification and two did the reverse. This may have affected the results. For example, in school districts across the province where youth required 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. Additional analyses of key findings for this area were conducted to assess if the change in consent procedures had affected the results. All trends were found to hold despite the consent procedure changes.

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 local HSDA unless otherwise stated.

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

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.

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

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

Okanagan Youth: Their Home & Family

Background

Students in this area (the Okanagan HSDA) identified with a broad range of ethnic and cultural backgrounds. The majority of students (72%) indicated being of European heritage, which was above the provincial rate of 54% but reflected a local decrease from 80% in 2003. The percentage of students who reported Aboriginal or First Nations heritage rose from 7% in 2003 to 12% in 2008.

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

New Canadians

Seven percent of students in this area were born outside of Canada, below the provincial rate of 18%. Two percent of students had lived in Canada between 2 and 5 years and another 2% had lived here for less than two years.

The percentage of students who spoke a language other than English at home rose from 27% in 2003 to 32% in 2008.

First Nations

Among the 12% of students who reported Aboriginal heritage, 29% had First Nations

Ethnic or cultural background

European	72%
Aboriginal/First Nations	12%
Latin/South/Central American	4%
East Asian	4%
South Asian	3%
African	2%
Australian/Pacific Islander	2%
West Asian	1%
Southeast Asian	1%
Other (excluding Canadian)	1%
Don't know	15%

Note: Youth could choose more than one response.

Spoke a language other than English at home

Never	68%
Sometimes	26%
Most of the time	7%

status, 32% were Aboriginal but did not have First Nations status, and 27% were Metis.

Ten percent of Aboriginal students currently lived on a reserve, and 22% had lived on a reserve at some point in their life (6% for less than a year, 9% for a few years, and 7% for most of their life).

“*Music and God keep me sane
and grounded in this crazy
busy life.*”

Sexual Orientation

Eighty-nine percent of students identified as heterosexual, 5% as mostly heterosexual, 2% as bisexual, 1% as gay/lesbian and 3% were unsure.

Spirituality

Fifty-one percent of students reported that they were not at all religious or spiritual. The remainder were either somewhat (37%) 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 (89%) and/or father (66%) 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 (78%) and went to bed at night (85%). However, 6% did not have a parent at home when they woke up in the morning and 2% 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 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. One percent of youth were in care in the last year, which was not a significant change from 2003.

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

Mother	89%
Father	66%
Stepfather	7%
Other adults related to me	5%
Stepmother	2%
Other adults not related to me	2%
Do not live with any adults	1%

“*I chose to move out of my parents house, I wasn't running away or was not kicked out.*”

Ten percent of students 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 (40% vs. 12%) and despair (20% vs. 4%) and to have attempted suicide in the last 12 months (28% vs. 2%).

Frequently moving house can negatively impact young people's health. Seventeen percent of youth moved once in the past year, 5% 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 (19% vs. 13%) and extreme despair (9% vs. 4%), and to attempt suicide in the past 12 months (7% vs. 4%).

Family

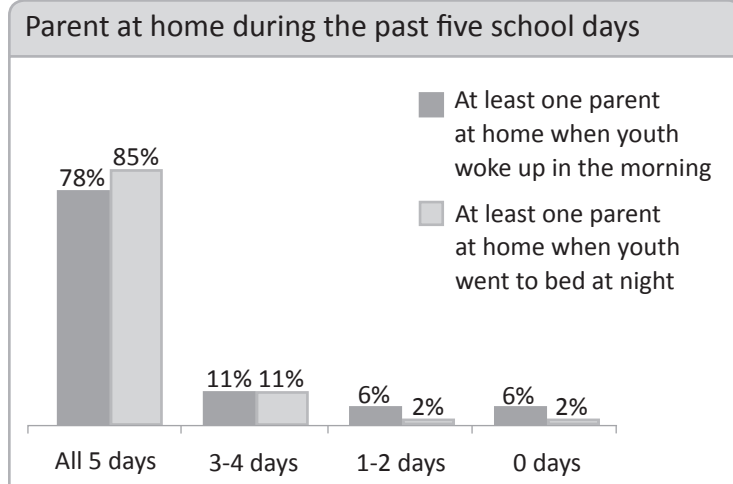
Family Connectedness

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 unrelated to age, unlike in the province as a whole where connectedness was higher for 12- and 13-year-olds than for students aged 14 to 18.

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. Females were less connected than males to their father figures but were as connected as males to their mother figures. Both males and females felt more connected to their mothers than to their fathers.

Students who had one caregiver at home when they woke up in the morning, when they ate their evening meal, or when they



went to bed at night on most 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 majority of students in this area reported that they never went to bed hungry (88%),

did not share a bedroom (94%), had travelled on holiday with their family in the past year (79%), and that their family currently owned a computer (99%).

Virtually no youth in this area reported all four indicators of poverty (i.e., always going to bed hungry, sharing a bedroom, their family not owning a computer, and not having a family holiday in the past year).

Ten 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 (31% vs. 12%), to have considered suicide in the past year (32% vs. 10%) and to have attempted suicide in the past 12 months (18% vs. 3%).

Family poverty affected youths' ability to participate in extra-curricular activities. For example, youth who experienced hunger or 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

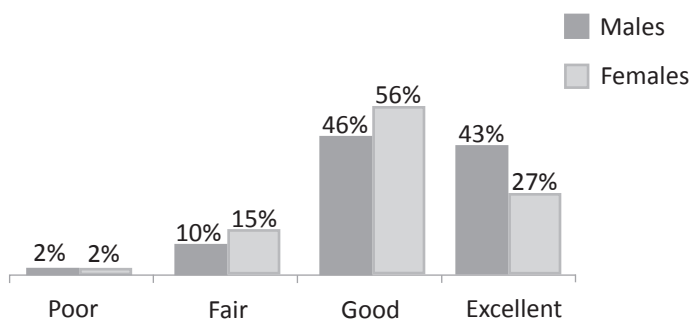
Eighty-six percent of youth in this area reported that their health was good or excellent, which was consistent with results for 2003. More males than females rated their health as excellent (43% vs. 27%) and both these rates were higher than those reported for the province as a whole (males: 39%; females: 23%). Males were less likely than females to report having had physical complaints 'a lot' such as headaches (12% vs. 25%), stomach-aches (7% vs. 17%), backaches (18% vs. 24%) or dizziness (9% vs. 14%) in the past six months.

Eleven percent of students in this area reported a debilitating health condition or disability. The most common condition was a long-term illness (such as diabetes or asthma) experienced by 6% of youth. Among youth with a health condition or disability, 34% took daily medication and 11% missed a lot of school due to their condition.

“*I am in top physical shape.*”



Self-reported health status



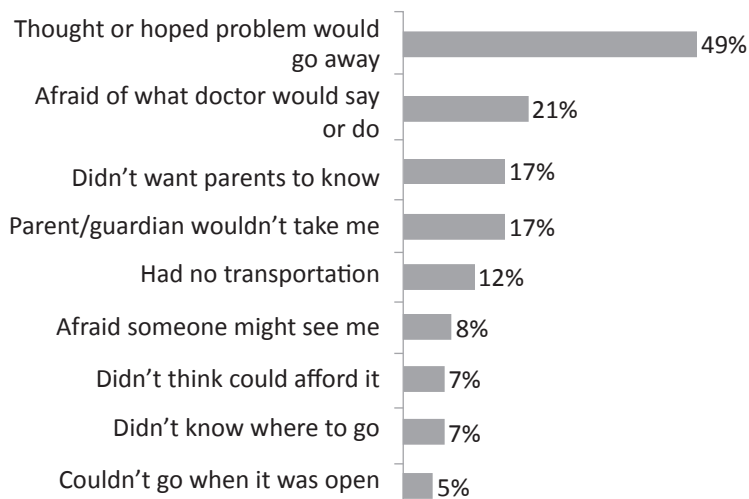
Note: The gender difference for poor health was not statistically significant.

Accessing Medical Care

In the past year, 14% of students did not get medical help when they felt they needed it, which was similar to the provincial rate. Among those youth who did not access needed medical care, the most common reason was thinking or hoping the problem would go away (49%), although female students in this area were less likely than those in the entire province to cite this reason (51% vs. 61%).

“I believe teenage girls should be informed about the importance of pap smears, many have not told their parents and may not know about the importance of the exams.”

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



Injuries

“*I have lots of problems with my shoulder muscles because of my heavy backpack.*”

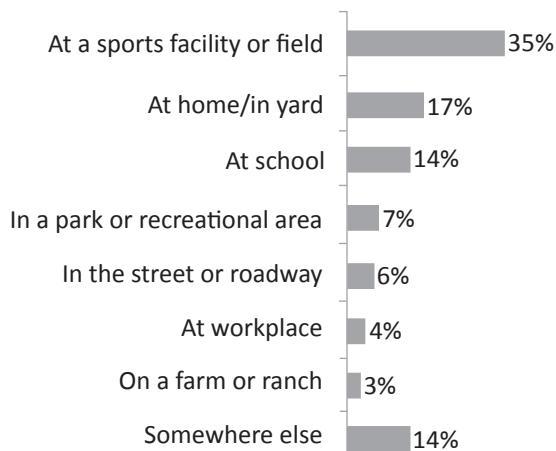
Injuries are one of the most common health hazards facing BC youth. In the past year, 33% of students were injured seriously enough to need medical attention. This percentage was above the provincial rate of 29%, but reflected a local decrease from 41% in 2003. Males were more likely than females to have been seriously injured (40% vs. 26%).

Similar to the experience of youth across the province, the most common location for getting injured was at a sports facility or field. Thirty five percent of Okanagan youth were injured at a sports facility or field, which was an increase from 27% in 2003. Seventeen percent of injuries were at home and 14% were at school. There were no gender differences in the locations at which youth got injured.

Most injuries occurred while students were playing or training for sports or doing other recreational activities (51%). Ten percent occurred when students were snowboarding or skiing, which was higher than the provincial rate of 6%. Seven percent occurred when students were riding a bike, and 6% took place during relatively low-risk behaviours (such as walking or cooking). Similar to the provincial rate, 4% of students were injured in a motor vehicle.

There were no gender differences in the activities students were taking part in when they got injured.

Location of injuries



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. Females were more likely to always wear a seatbelt (73% vs. 66%), but male and female students were equally likely to wear bike helmets.

Seventy percent of students in this area always wore a seatbelt when riding in a motor vehicle, which was higher than the rate for the province as a whole (66%), as well as a local increase from 58% in 2003.

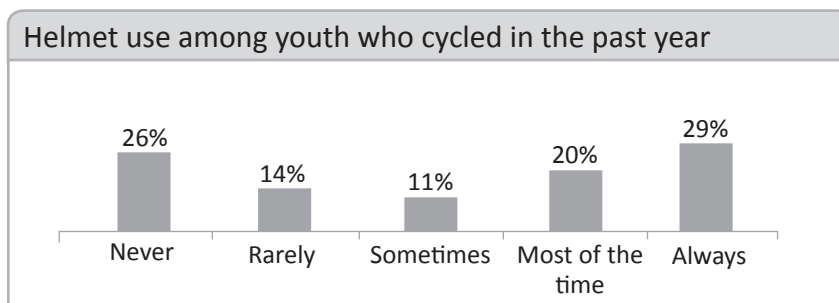
Seventy-seven percent of students rode a bicycle in the past year, which was above the provincial rate of 71%. Among these students, 29% always wore a bike helmet (which was above the provincial rate of 24%) and 26% never wore one (which was below the provincial rate of 35%). As students got older, they were generally 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, 12% of youth had driven a vehicle after using alcohol or marijuana, which was above the provincial rate (10%). There was no gender difference in driving after using alcohol or marijuana.

Eight percent of students had ever driven after using alcohol, similar to the provincial rate. In the past month, 5% of students had driven after consuming alcohol and 21% had been a passenger in a vehicle with a driver who had been drinking. Both rates were similar to the 2003 rates in this area and the provincial rates.

Although there were no gender differences in driving after drinking, females were more likely than males to have been riding in a vehicle with a driver who had been drinking in the past month (24% vs. 17%).



Nutrition

The majority of youth reported consuming water, dairy, and fruits 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 dairy (65% vs. 50%), sweets (18% vs. 12%), fast food such as pizza, hot dogs, chips and fries (15% vs. 6%), pop (15% vs. 6%) and energy drinks (6% vs. 2%) twice or more yesterday. However, males were less likely than females to have had vegetables twice or more yesterday (28% vs. 35%).

Despite increased awareness about the importance of consuming fruits and vegetables daily and the increased availability of healthier foods in schools, 8% of youth in this area reported eating no fruits or vegetables on the day before they completed the survey and 18%

had had only one serving. At least 49% of youth fell short of the recommended daily portions of fruits and vegetables, which was comparable to the provincial rate.

Similar to youth in the entire province, 54% of students in this area always ate breakfast on school days, while 15% never ate breakfast. The percentage of youth who reported eating breakfast was comparable to that seen in 2003.

Youth who reported going to bed hungry because there was not enough food at home were more likely than their peers who did not report hunger to miss breakfast every day and less likely to have had water, fruit, vegetables or dairy yesterday, but more likely to have consumed fast food, energy drinks and coffee.

What youth ate and drank yesterday			
	No	Yes (once)	Yes (twice or more)
Water	5%	20%	75%
Milk, cheese, yogurt	8%	35%	57%
Fruit	18%	41%	42%
Green salad or vegetables	21%	47%	32%
Cookies, cake, donuts, chocolate bars	37%	48%	15%
Pizza, hot dogs, potato chips, French fries	54%	36%	10%
Pop/soda	59%	31%	10%
Hot or cold coffee or coffee-based drinks	72%	20%	8%
Energy drinks	87%	9%	4%
Note: Percentages do not always total 100% due to rounding.			

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

Weight & Body Image

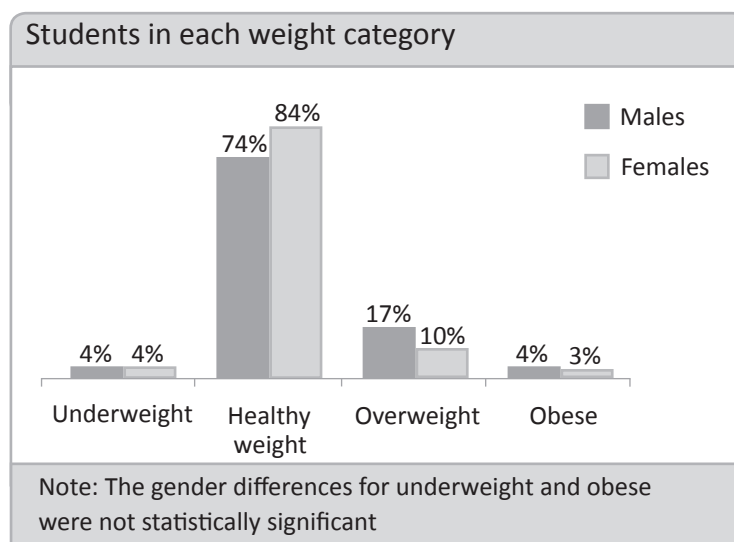
“*I am really self conscious of my body image, I am wanting to find out what would be an appropriate weight for me personally.*”

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 4% were underweight, 13% overweight and 4% obese. The distribution of youth in the various weight categories was comparable between this area and the province as a whole.

Males were more likely than females to be overweight. The percentage of students falling into each of the BMI weight categories was similar in 2003 and 2008.

Obesity is linked to health challenges at all ages. Compared to youth who were a healthy weight, overweight and obese youth were less likely to rate their health as excellent (23% vs. 37%). Furthermore, obese youth were more than twice as likely as healthy weight youth to spend three or more hours on a typical school day watching television (49%* vs. 20%).



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 3.4.

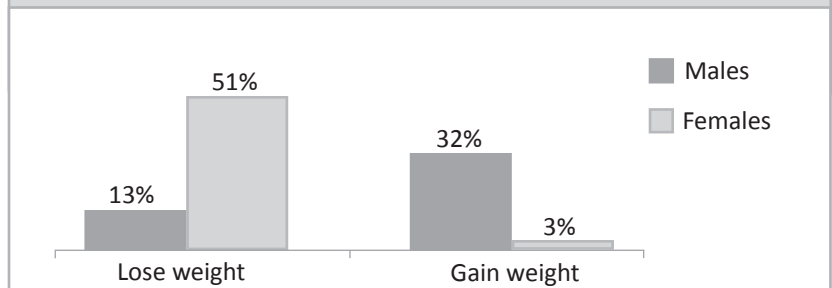
Body Image

Similar to provincial rates, 20% of males in this area rated themselves as very satisfied with their body image, compared to only 12% of females. Although the percentage of males who were very satisfied with their bodies did not change in this area from 2003 and 2008, there was an increase in the percentage of girls who reported being very satisfied with their bodies (from 8% to 12%). The majority of youth (70%) felt they were about the right weight.

Looking at youth whose BMI indicated they were a healthy weight, 29% stated they were not trying to do anything about their weight and 22% were trying to stay the same weight. However, 51% of healthy weight females were trying to lose weight and 32% of healthy weight males were trying to gain weight.

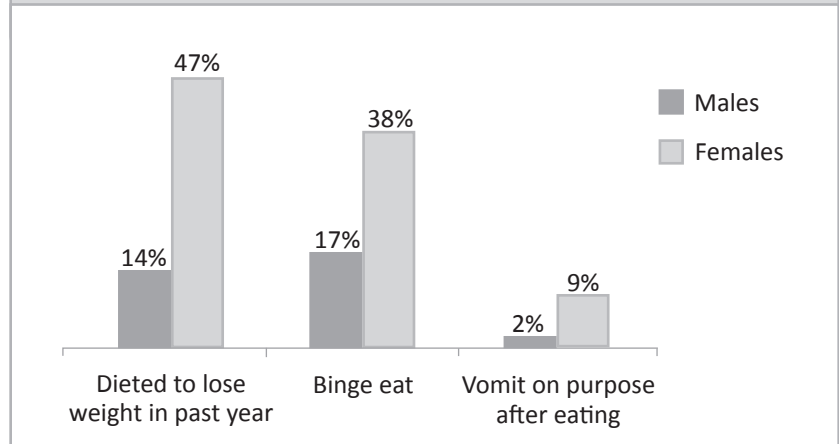
Females were more likely than males to report dieting to lose weight in the past year as well as binge eating and vomiting on purpose after eating. The rates of dieting, binge eating and purging did not differ between 2003 and 2008 or between this area and the province as a whole.

Healthy weight youth trying to lose or gain weight



“People tell me I have a very small body/figure but the way I see myself is very large. Overweight.”

Eating behaviours



Mental & Emotional Health

“*I am a very happy person, my life is exactly how I want it to be!*”

Adolescence is an important time for mental and emotional development. As youth mature, they 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 (87%) and their abilities (92%), they had much to be proud of (80%) and felt that their life was useful (87%). Sixty percent agreed or mostly agreed with all seven of the self-esteem questions on the survey, which was similar to the provincial rate.

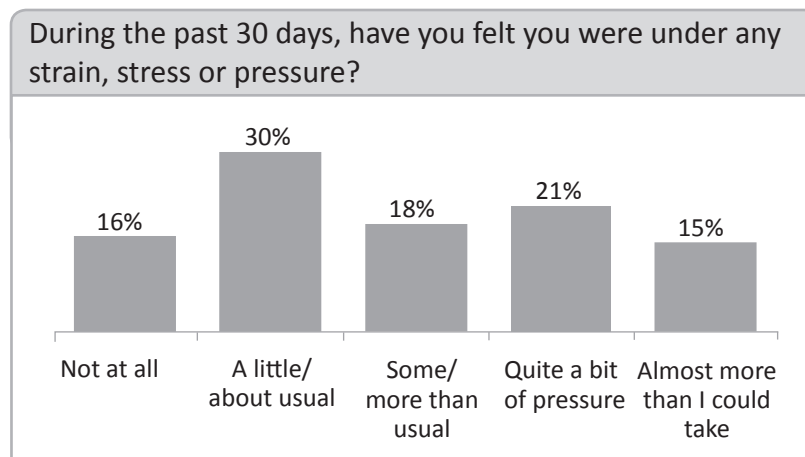
Stress

Eighty-four percent of youth reported feeling some stress or pressure in the past 30 days, and 15% of students indicated that the stress in their lives was almost more than they could take.

Females 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 (19% vs. 10%).

Despair

Five percent 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



“*My life is too full of things, which causes tons of stress.*”

males to report this level of extreme despair in the past month (8% vs. 3%). These results were all consistent with the provincial findings.

Self Harm

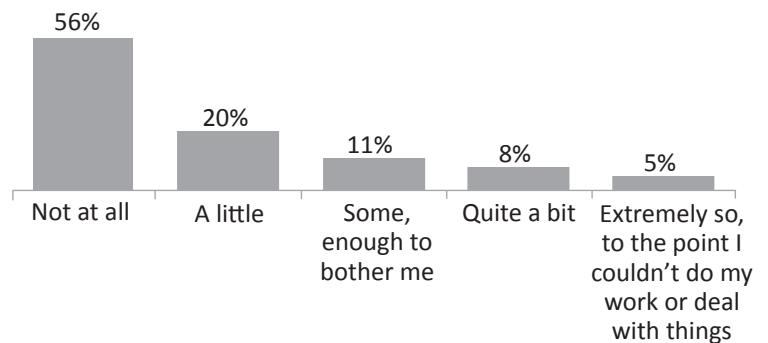
Sometimes youth will hurt themselves as a way of coping with stress and pain in their lives. Similar to the picture for youth in the province as a whole, 22% of local female students and 13% of males indicated cutting or injuring themselves on purpose without trying to kill themselves at some point in their lifetime, with 11% doing so once or twice, and 7% 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 were more likely to self-harm compared to youth who never used these substances.

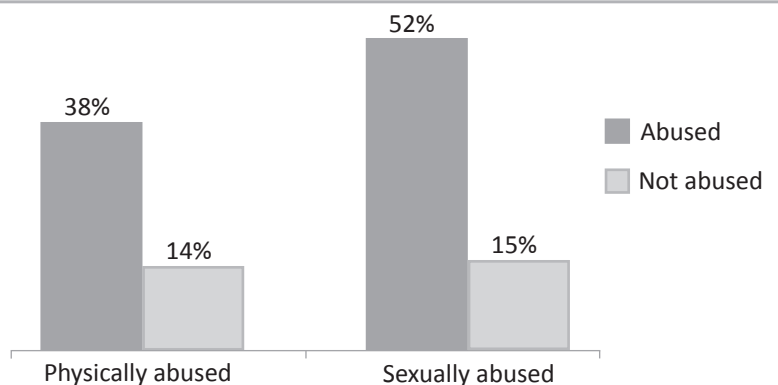
Suicide

Suicide is the second leading cause of death among youth aged 12-18 in British Columbia. In this area, 12% of students reported seriously considering suicide in the past year, which was the same as the provincial rate, and lower than the 2003 rate of 17% in this area.

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



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



“ I have thought about suicide...it would just make all the problems stop and drama stop. ”

Five percent of students attempted suicide in the past year, which was the same as the provincial rate and lower than the 2003 rate of 8% in this area. Females were over twice as likely as males to have attempted suicide (7% vs. 3%), although males generally have higher rates of suicide completion.

Among youth who attempted suicide in the past year, 25% reported that their attempt was serious enough to require treatment by a doctor or nurse.

Risk factors for suicide

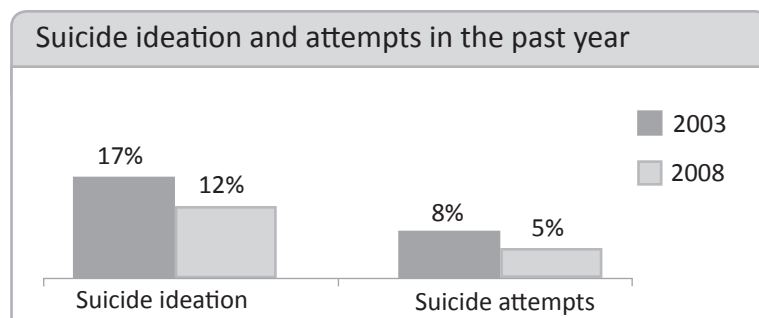
One of the known risk factors for attempting suicide is having a family history of suicidal behaviour. In this area, 17% of youth reported that a family member had tried to commit suicide, with 5% doing so in the past year. Also, 27% of youth had a close friend who attempted suicide (16% in the past year). Students with a family member or close

friend who had attempted or committed suicide in the past year were nine times more likely to attempt suicide themselves, compared to students without these risk factors (18% vs. 2%).

Suicide attempts in the past year were also more likely among students who had ever been physically abused (15% vs. 3%) or sexually abused (26% vs. 3%) compared to students who had never been abused.

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 or marijuana were more likely to have attempted suicide compared to students who had never used these substances.



“*I have an eating disorder, and I am now seeing a counselor for it.*”

Help Seeking

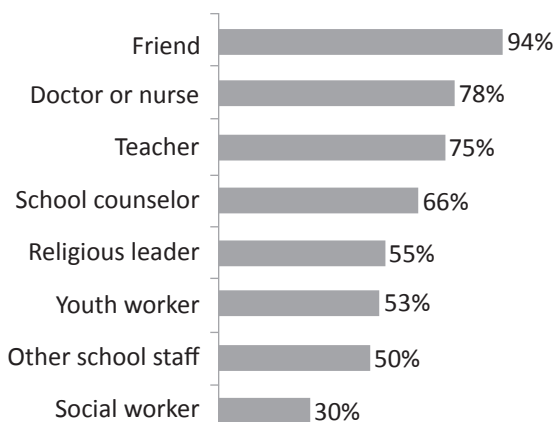
The majority of students felt they could seek support from adults in their family (78%) or from adults outside their family (59%) if they were faced with a serious problem.

Students reported approaching a variety of professionals for help in the past year, including teachers (45%), doctors or nurses (31%), school counselors (27%), other school staff (18%), religious leaders (17%), youth workers (16%), and social workers (11%). In addition to turning to adults for help, most students (81%) asked their friends for assistance. Students who sought support in the past year generally reported finding the assistance of both friends and professionals helpful.

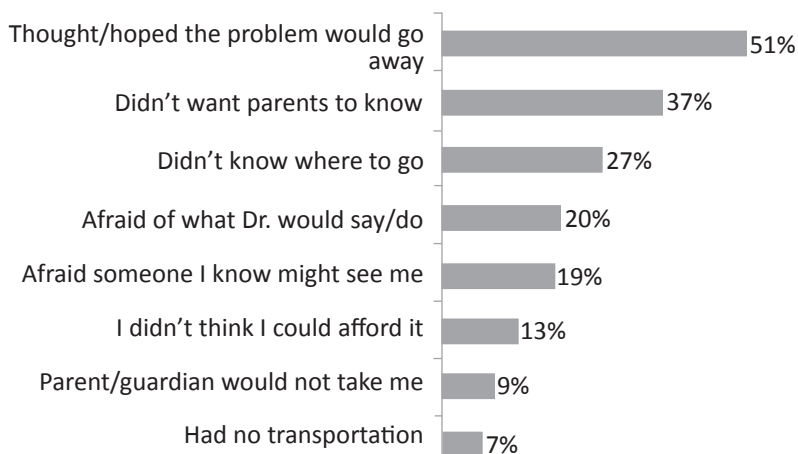
Accessing Mental Health Services

When asked specifically about accessing mental health services in the past year, 18% of females and 9% 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 (51%) and students not wanting their parents to know (37%).

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

“*I have smoked before and I sometimes even smoked 3 packs a day, but I quit 4 months ago.*”

Twenty-nine percent of students in this area had ever tried smoking, similar to the provincial rate, and a local decrease from 39% in 2003. Males and females were equally likely to have tried smoking.

Students who had tried smoking waited longer to first try cigarettes than students in 2003. Among students who smoked, 34% had their first cigarette when they were 12 years old or younger, compared to 41% in 2003. In contrast, 28% waited until they were 15 or 16 years old (compared to 17% in 2003).

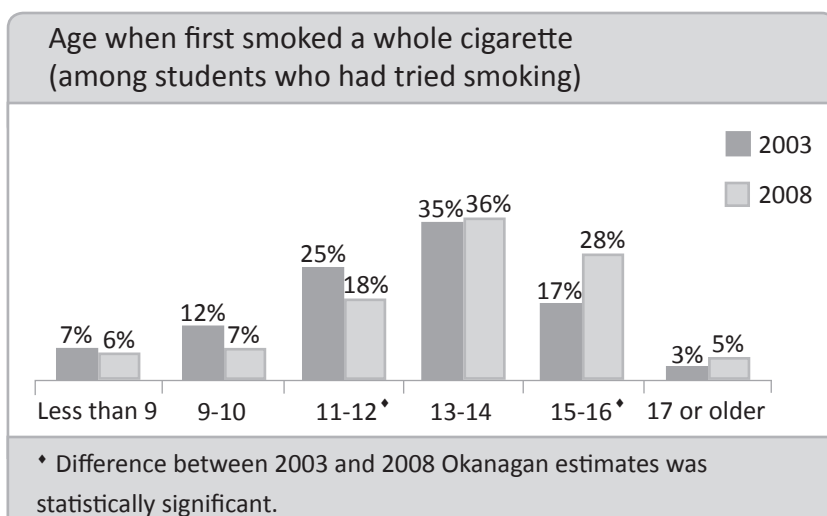
Forty-six percent of students who had tried smoking had smoked in the past month. Those who did smoke most commonly smoked 1 or 2 days in the past month (14% of all students who had tried smoking).

Similar to the provincial rate, 4% of young people had used chewing tobacco in the past month (7% of males and 2% of females).

Second-hand Smoke

Thirty percent of students in this area had been exposed to smoke inside their home or vehicle. This rate was similar to the rate across the province as a whole, and was unchanged locally from 2003. Twelve percent of youth were exposed to smoke in their home or car almost every day.

“*My dad is a smoker and he smokes wherever he wants.*”



Substance Use

“*I was pretty heavy on drugs and alcohol but I’ve cleaned up my act and quit.*”

Alcohol

Similar to the local rate in 2003, 62% of youth had tried more than just a few sips of alcohol. This was above the provincial figure of 54%. Males and females were equally likely to have tried alcohol.

The most common age at which youth first tried alcohol was 13 or 14 years; 40% of students who drank alcohol had their first drink then. Among students who had tried alcohol, the percentage who did so when they were 10 years old or younger (13%) was similar to the 2008 provincial rate, and to the rate in this area in 2003.

Among students who drank in the past year, 13% only had a sip of alcohol, 37% drank once

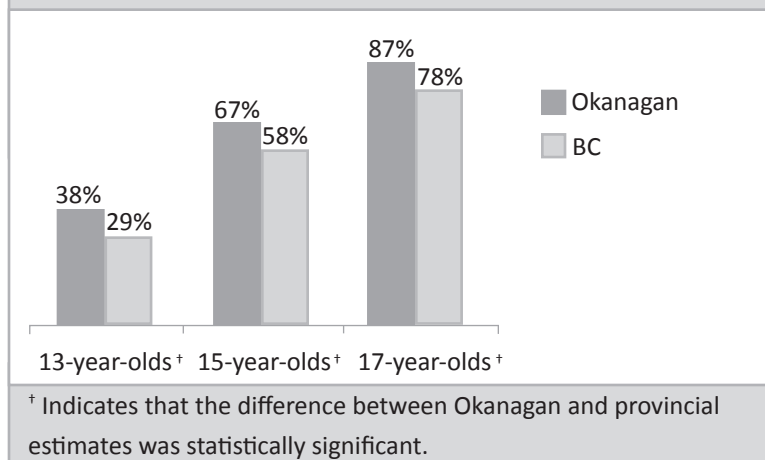
a month or less, and 24% drank two or three times a month.

Among students who had tried alcohol, the percentage of students who drank in the past month (68%) was unchanged from 2003 and was similar to the 2008 provincial rate.

Binge Drinking

Binge drinking is defined in the AHS as having five or more drinks within a couple of hours. Forty-seven percent of local students who had tried alcohol binge drank in the past month, consistent with the rate in 2003 and the 2008 provincial rate. Males and females were equally likely to binge drink in the past month. Four percent of students who had tried alcohol binge drank on ten or more days in the previous month.

Students who ever drank alcohol (other than a few sips)



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.

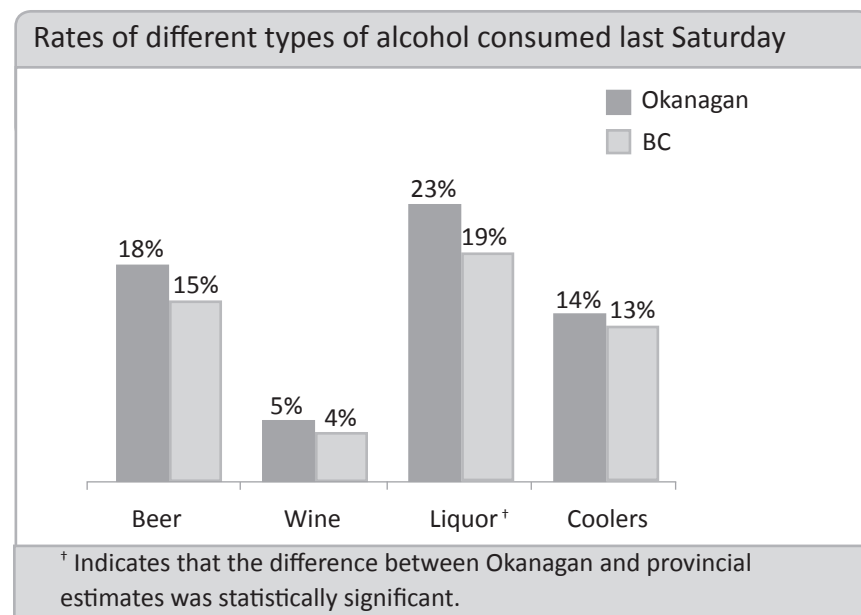
Thirty percent of students drank alcohol last Saturday, which was higher than the provincial rate of 26%. There were some gender differences in the type of alcohol youth consumed; females were more likely to have drunk coolers (18% vs. 10%) and males were more likely to have drunk beer (21% vs. 14%).

Marijuana

Thirty-five percent of students had tried marijuana, which was above the rate for youth in the entire province (30%) but below the local 2003 rate (45%). The most common age for first trying marijuana was 13 or 14 years old (45%).

Fifty-nine percent of those who had tried marijuana used it in the past month and 12% used it on 20 or more days in the past month (4% of all students).

“*I smoke weed everyday.*”



Last Saturday Use

Fifteen percent of students in this area used marijuana last Saturday (18% of males and 12% of females), which was higher than the provincial rate (12%).

Other Drugs

Rates of substance use other than alcohol and marijuana were generally similar to those in the province as a whole. The exception was the rate of ever trying hallucinogens, which was 11% locally compared to 9% provincially.

Between 2003 and 2008 there was an increase in the percentage of students who used prescription pills without a doctor's consent (from 11% to 16%). However, there were decreases in the use of cocaine, mushrooms, and amphetamines.

For the first time, students were specifically asked about their 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 similar to the provincial rates.

Consequences of Substance Use

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

Ever used other drugs	2003	2008
Prescription pills	11%	16% [♦]
Hallucinogens (including ecstasy)	9%	11% [†]
Mushrooms	18%	10% [♦]
Cocaine	7%	4% [♦]
Inhalants	5%	5%
Amphetamines (including crystal meth)	6%	3% [♦]
Steroids	1%	1%
Heroin	1%	1%
Injected an illegal drug	1%	1%
[†] Difference between 2008 Okanagan and provincial estimates was statistically significant.		
[♦] Difference between 2003 and 2008 Okanagan estimates was statistically significant.		
There were no gender differences in the use of these substances.		

use, and 2% felt they needed help for their drug use.

Fifty-five percent of students reported using alcohol or drugs in the previous year. Among these students, over half (58%) 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.

Females were more likely to have passed out, seen an impact on their school work, marks

and behaviour, argued with their family, lost friends, and done things that they could not remember. Males were more likely to have damaged property.

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	46%
I used alcohol or drugs but none of these things happened	42%
Passed out	36%
Argued with family members	19%
Got injured	14%
School work, marks, or behaviour at school changed	12%
Damaged property	11%
Lost friends or broke up with a girlfriend or boyfriend	9%
Got into a physical fight	9%
Got in trouble with the police	8%
Had sex when I didn't want to	8%
I overdosed	3%
Had to get treatment for alcohol or drug abuse	3%
Got into a car accident	1%

Sexual Behaviour

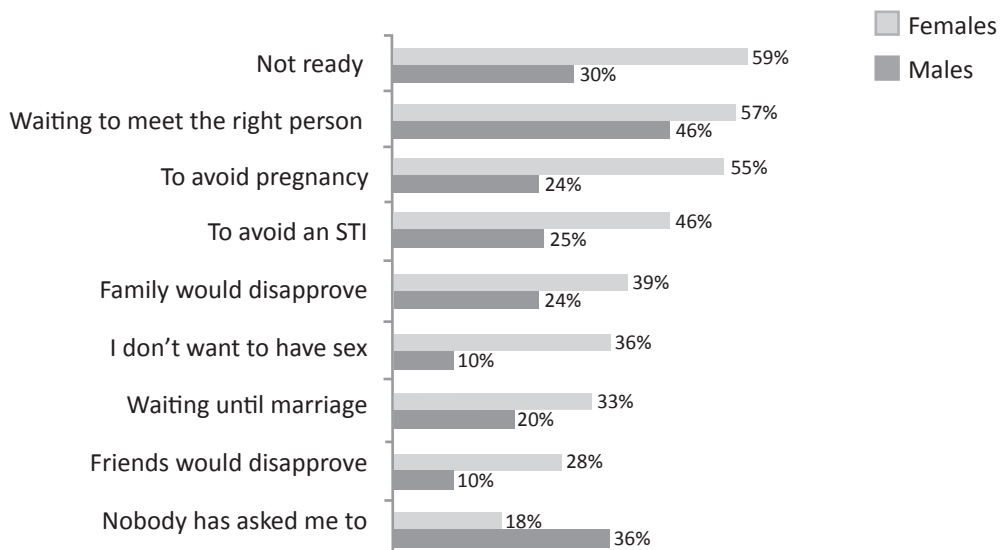
“*I've had sex once, and since then my boyfriend and I have taken a step back. We have both decided we are not ready for that step entirely.*”

The majority of youth reported never having had sexual intercourse (75%), which was comparable to the 2003 rate in this area. However, the percentage was lower than the 2008 provincial rate of 78%, meaning that students in this area were more likely to have had sex compared to students in the province as a whole.

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 (52%), not being ready to have sex (46%) and not wanting to get pregnant or cause a pregnancy (41%). When there were gender differences in rates of responding, females were more likely than males to endorse the reason, with the exception that males were more likely to indicate that they had not had sex because nobody had asked them to (36% vs. 18%).

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



Note: Youth could choose more than one response.

The percentage of youth that reported ever having sexual intercourse was comparable for males and females and increased with age. Among sexually active youth, the most common age for first having sex was 16 years, and 20% reported first having sex before age 14.

Among students who have had sex, 4% did not have sex with anyone in the past year; 48% had sexual intercourse with one person; 37% with 2 to 5 people; and 11% (17% of males and 6% of females) had sex with six or more people in the past year.

Oral Sex

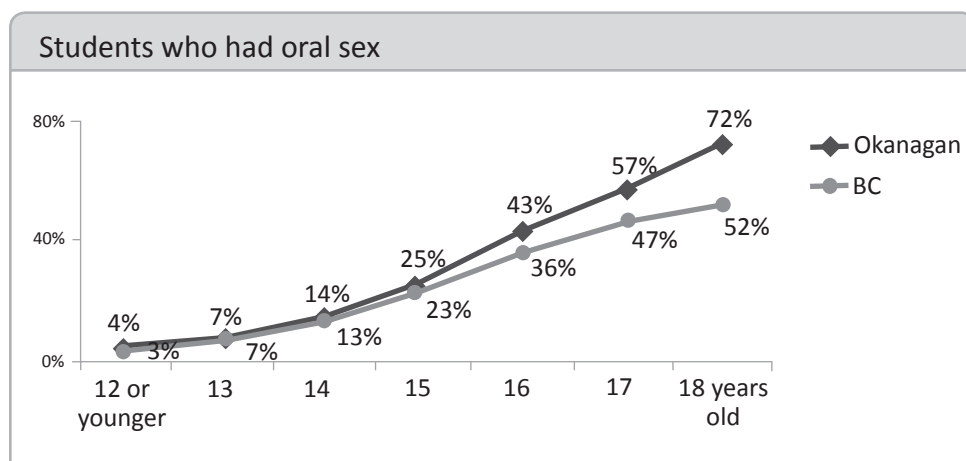
In this area, 30% of male and female students reported ever having oral sex, which was higher than the provincial rate of 26%. Rates of oral sex went up with age.

Among youth who ever had sexual intercourse, 8% of males and 11% of females reported having had sex with a same-sex partner.

Students aged 16 to 18 in this area were more likely to have had oral sex than same-aged youth in the province as a whole. For example, 72% of local 18-year-olds had oral sex compared to 52% provincially.

Sexually Transmitted Infections

Overall, 1% of students had been told by a doctor or nurse that they had a sexually transmitted infection (STI). The rate was 4% among sexually active students.



Birth Control and Pregnancy

Seventy-one percent of sexually active youth reported using a condom the last time they had sex, and 70% indicated that they had done so to prevent pregnancy.

Among sexually active youth, 51% used birth control pills to prevent pregnancy the last time they had sex. Twenty-two 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 the last time they had sex and 5% used emergency contraception (“morning after pill”).

Seven percent of sexually active students reported that they have been pregnant or caused a pregnancy, which was the same as the provincial rate.

Among students who have had sexual intercourse, 36% reported that they drank alcohol or used drugs before having sex the last time.

“*I don't know where to go to find out about STD's.*”

Abuse & Violence

“*I was sexually assaulted by a friend that I went to school with.*”

Physical and Sexual Abuse

Similar to youth across the province, 17% of students in this area reported that they had been physically abused and 8% had been sexually abused. These rates were similar to the 2003 rates in this area. In total, 21% of youth had experienced either form of abuse and 5% had experienced both types of abuse.

Five percent of students had been forced to have sexual intercourse when they did not want to. Four percent had been forced by another youth, and 1% by an adult. These rates were similar to both the 2008 provincial and 2003 local rates. Females were more likely than males to have been forced to have sex (8% vs. 2%).

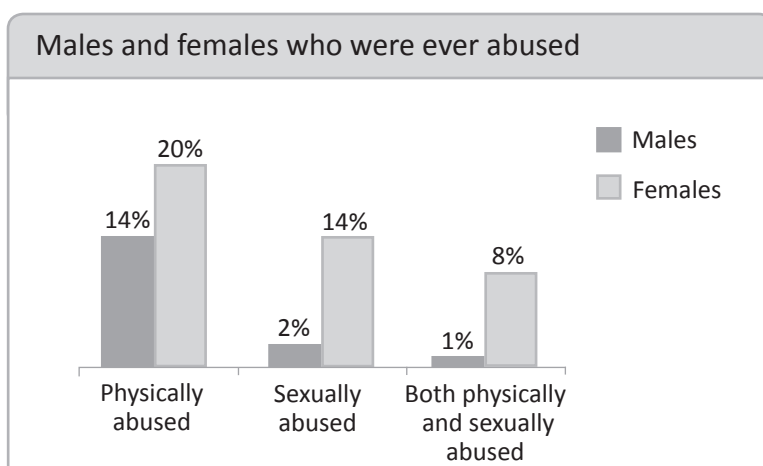
Sexual Harassment

The percentage of students who experienced verbal (50%) or physical (28%) sexual harassment was similar to both the provincial rate and the rate for this area in 2003.

Female students were more likely to experience either form of harassment. In the past year, 58% of females and 41% of males had been verbally sexually harassed, and 40% of females and 14% of males had been physically sexually harassed.

Internet Safety

Thirteen percent of students (18% of females and 6% of males) had been in contact with



“*My boyfriend is always there for me. I wish more couples had the relationship we do.*”

someone on the Internet who made them feel unsafe. This rate was similar to the 2008 provincial rate but represented a local decrease from 17% in 2003. Eleven percent of male and female students gave personal information to someone they had met on the Internet in the past year.

Twenty percent of students were cyber-bullied in the previous year, which was above the provincial rate (17%). Females were more likely than males to have been cyber-bullied (25% vs. 15%).

Physical fights

Similar to both the 2008 provincial rate and the local rate in 2003, 26% of students were involved in a physical fight in the past year, and 3% of students were injured seriously enough to require medical attention. Males were more likely than females to have been in a fight (36% vs. 17%).

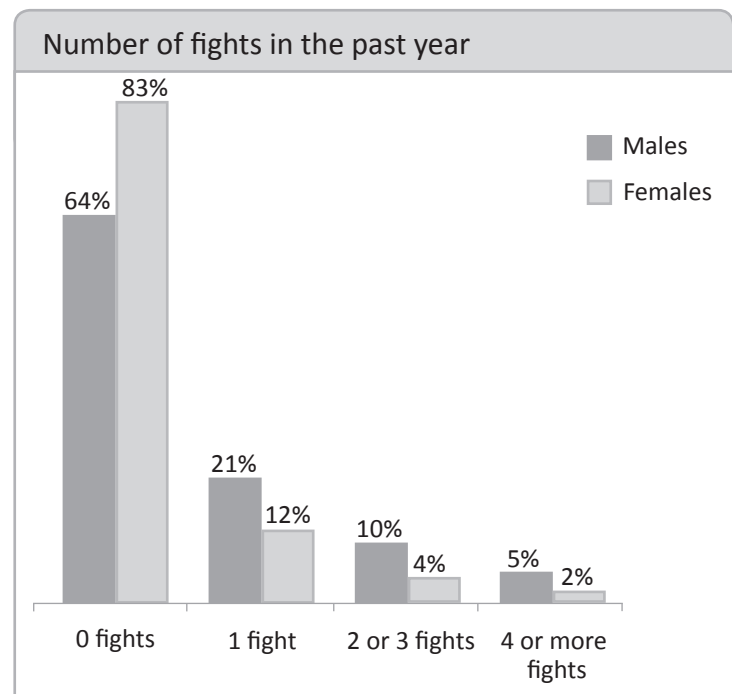
Relationship Violence

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

Similar to youth in this area in 2003, 20% of students experienced discrimination as a result of their physical appearance (compared to 18% provincially) and 7% had been discriminated against because of race or skin colour in the past year, (compared to 12% provincially).

Similar to youth across the province, 5% of students reported they had experienced discrimination because of their sexual orientation.



School & Work

“*I feel school is very important.
[It] is a way to challenge you
and teach you ideas.*”

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 (64%). Females were more likely than males to like school very much (23% vs. 17%) and to report a greater sense of connectedness to school.

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.

Twenty-six 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.

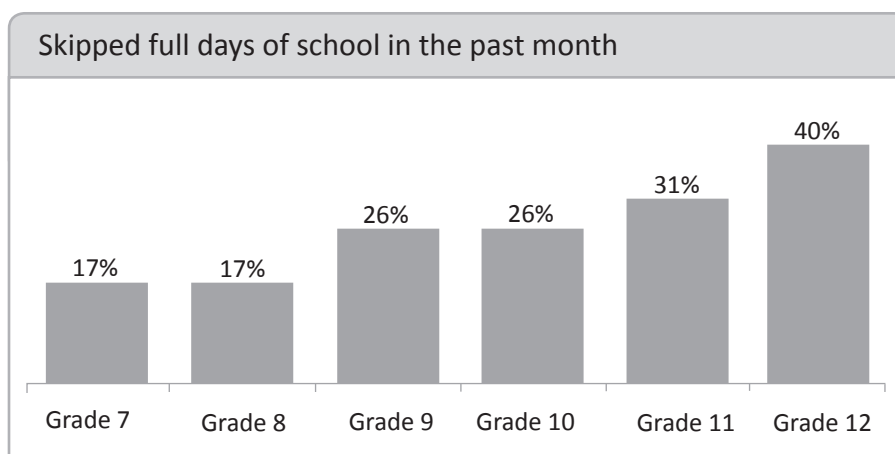
Youth who skipped school in the past month felt less connected to school and had more trouble getting along with teachers and peers compared to students who did not skip school.

Feeling Safe at School

Forty-five percent of students reported always feeling safe at school, which was comparable to the rate in this area in 2003 and higher than the 2008 provincial rate of 41%.

The sense of always feeling safe was higher for students in Grades 11 and 12 (53%-57%) than for students in Grades 7 through 9 (36%-42%).

Students most commonly reported “always or usually” feeling safe in the library (88%) or classroom (86%). They were least likely to report “always or usually” feeling safe outside on school property during school hours (60%).



Nine percent of students had been physically attacked or assaulted while at school or travelling to or from school in the past year. Males were twice as likely as females to be physically attacked (12% vs. 6%), but females were more likely to be victims of relational aggression (i.e., excluded from social groups or ignored; 40% vs. 24%) or to be verbally harassed at school (e.g., teased; 39% vs. 27%).

The rates of school-based physical, relational and verbal aggression were comparable to the provincial rates and to the 2003 percentages in this area.

Weapon Carrying

A total of 7% of students carried a weapon to school in the past month (12% of males and 3% of females). Among those who carried a weapon, the majority (82%) carried a knife or razor.

Academic Aspirations

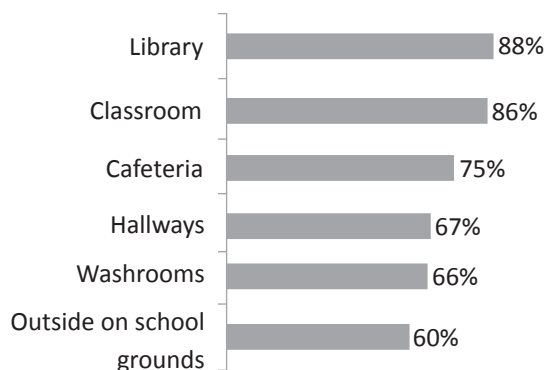
The majority of students expected to finish high school; only 1% anticipated finishing their education before graduating from high school. A total of 56% expected to complete their education when they graduate from university, medical school, or law school; 20% when they graduate from community

college or a technical institute; 8% once they complete high school; and 15% were not sure when they would complete their education.

Work

A total of 48% 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, 25% worked less than 5 hours a week, 60% worked 5-19 hours, and 16% worked 20 or more hours a week.

Where students always/usually felt safe at school



Sports & Leisure Activities

“I go to the gym every day.”

Exercise

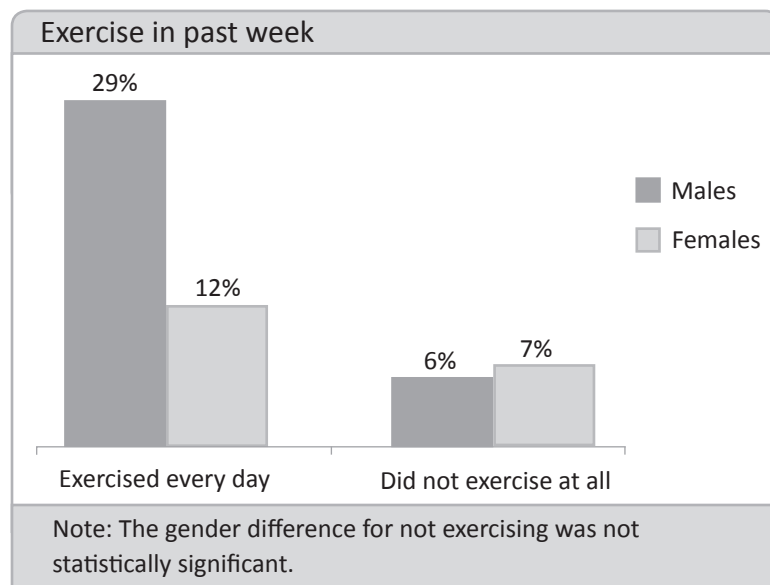
Health Canada recommends that youth participate in a minimum of 90 minutes of physical activity every day. Yet, when asked how often they exercised for at least 20 minutes a day during the past week, only 29% of males and 12% of females exercised every day, while 6% of youth did not exercise at all. Youth in lower grades exercised more often, on average, than youth in higher grades.

Exercise rates for local youth were greater than for the province as a whole. Only 7% of females did not exercise at all in the past week compared to 10% across the province.

Also, 29% of local males reported exercising every day, compared to 25% of males across the province.

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 76% participated in physical activities without a coach (e.g., biking, road hockey). While males and females were equally likely to participate in sports with a coach, males were more likely to participate in non-coached sports activities and females



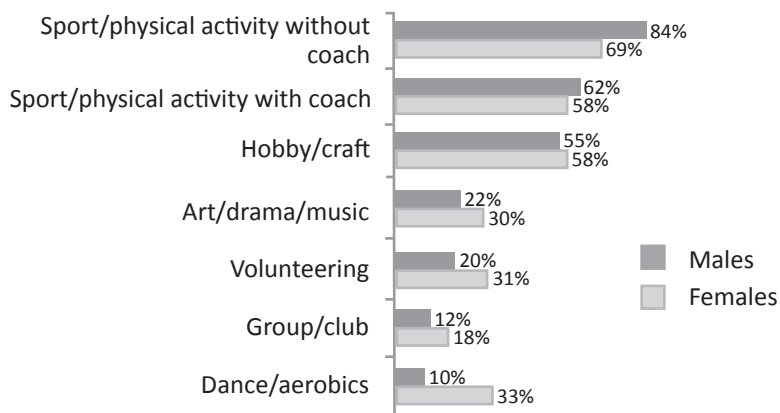
“Because physical activity is not mandatory from grade 9 I have felt a lack of push to exercise and get in shape, which I deeply want to do.”

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, 63% did some form of volunteer work such as babysitting or helping a charity and 26% did this once a week or more. Other leisure activities youth participated in on a weekly basis included hobbies (56%), art/drama/music (26%) and clubs (15%). Females were more likely than males to take part in art, drama and music activities; clubs or groups; and volunteer activities.

Compared to the province as a whole, youth in this area were more likely to participate weekly in non-coached sports activities (76% vs. 69%) and male students were more likely to participate weekly in hobbies (55% vs. 50%). In addition, weekly participation in extracurricular activities in this area increased between 2003 and 2008 for sports activities with a coach (from 55% to 60%) and hobbies (from 46% to 56%), but decreased for clubs/groups (from 20% to 15%).

Weekly participation in activities in the past year



Note: The gender differences for sports/physical activity with coach and hobby/craft were not statistically significant.



“*I am not healthy because I play too much x box.*”

Screen Time

Similar to the province as a whole, 89% of youth in this area watched TV on a typical school day. Twenty-three percent of students watched TV for three or more hours a day, which was a decrease from 34% in 2003.

The percentage of females who watched this amount of television was lower in this area than the province as a whole (21% vs. 25%).

On a typical school day, the majority of youth spent time on the Internet (excluding doing homework), talking or texting on the phone, or playing video games. While 23% of students used the Internet and 22% used the phone for three or more hours a day, 14% played video games for this amount of time.

Males were more likely than females to play video games for three or more hours on a typical school day (24% vs. 5%), but were less likely to spend this amount of time texting or talking on the phone (14% vs. 30%). Furthermore, female students in this area were less likely than those in the entire province to spend three or more hours on the Internet (25% vs. 31%).

Gambling

Although it is often seen as a fun activity, gambling in BC is illegal for youth under 19

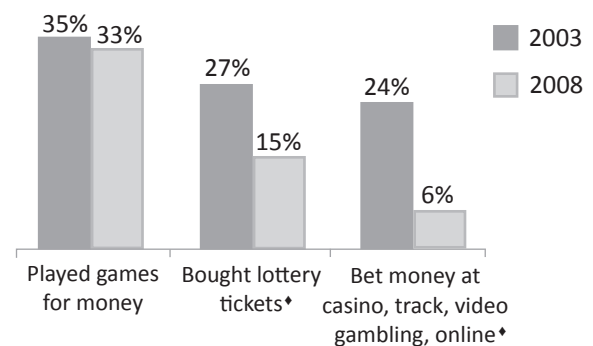
2010 Winter Olympics

When asked about the effect of the upcoming 2010 Olympics in BC, 47% of youth reported they had not thought about it, 45% indicated it had not affected them, 9% reported they had become more physically active, 6% felt they had more sports opportunities, and 4% felt they had more job prospects.

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.

Forty-one percent of students reported gambling in the past year (higher than the provincial rate of 39%). There was no gender difference in buying lottery tickets, but males were more likely than females to have played games for money (48% vs. 20%) and to have bet money at a casino, racetrack, on video games or on-line (10% vs. 3%). Decreases were observed in all three forms of gambling from 2003 to 2008, with the exception of playing games for money among male students.

Gambling in the past year



* Difference between 2003 and 2008 Okanagan estimates was statistically significant.

Protective Factors

“*I think a family that [is] there for you helps a lot.*”

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 family and school. Males were more highly connected than females to their families, whereas females were more highly connected than males to their schools. Family and school connectedness scores for this area were comparable to those seen in the province as a whole.

Cultural Connectedness

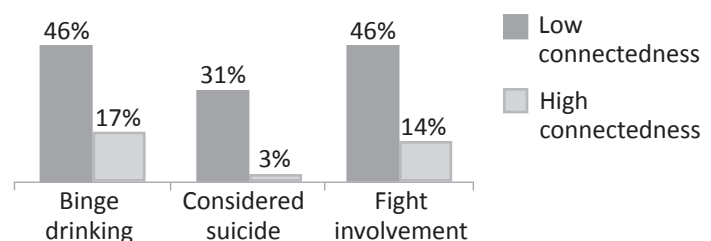
The 2008 AHS included items on ethnic or cultural connectedness which measured the extent to which youth made efforts to learn about their ethnic/cultural group and how

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 43% 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 28% of youth in this area reported participating in their group's cultural practices, 42% of youth in the entire province did so.

Health by family connectedness



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.

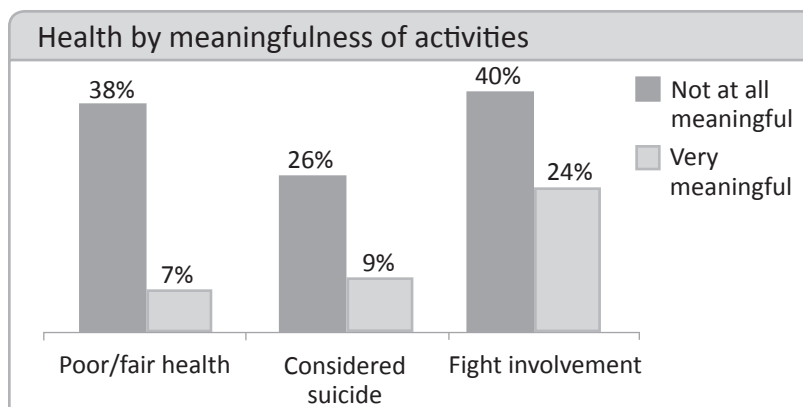
Five to seven percent of youth reported that the activities they were involved in were not at all meaningful to them or that they had no input into these activities. On the other hand, 40% were involved in activities that were very meaningful to them and 16% felt that they had a lot of input into their activities. Youth in this area reported their involvement in activities to be more meaningful compared to youth in the entire province.

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, females were more likely than males to think their friends would be upset with them.

Compared to 2003, youth in 2008 were more likely to report that their friends would be upset with them if they got arrested (67% vs. 54%), beat someone up (53% vs. 46%), dropped out of school (88% vs. 84%) or used marijuana (55% vs. 45%).

The overall level of prosocial peer attitudes in this area was comparable to the level in the province as a whole. A few differences



“*I wanted to drop out of school but my friends helped me out.*”

emerged on specific items: for example, compared to the entire province, youth in this area were less likely to indicate that their friends would be upset if they got drunk (30% vs. 35%).

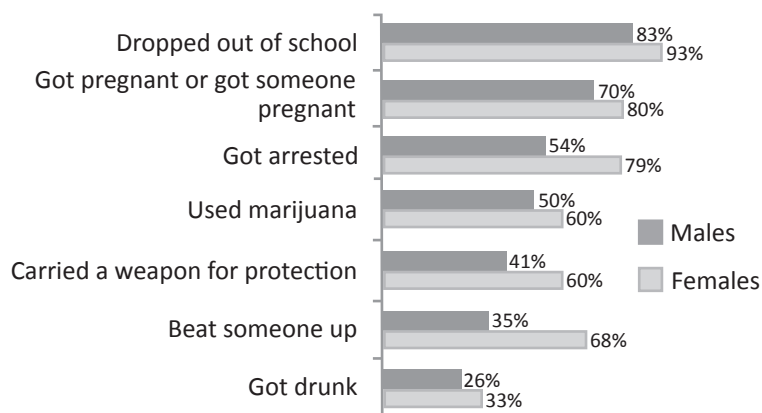
The Value of Protective Factors

Provincial AHS 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 fighting involvement compared to overall provincial rates. Similar associations were evident in the Okanagan area (see previous graphs on family connectedness and meaningfulness of activities).

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 Okanagan area reported being victimized or bullied at school and 19% of these youth had seriously considered suicide in the past year.

Friends would get upset if I ...



Protective factors

	Okanagan	BC
Family connectedness	7.9	7.9
School connectedness	6.8	6.8
Cultural connectedness	4.9	5.5 [†]
Youth engagement		
Meaningfulness of activities	7.4	7.2 [†]
Ideas listened to and acted upon	6.0	6.0
Prosocial peer attitudes about risk behaviour	6.0	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 Okanagan and provincial estimate was statistically significant.

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

However, being connected to their family or school, being engaged in their extracurricular activities and having peers with healthy attitudes about risk 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.



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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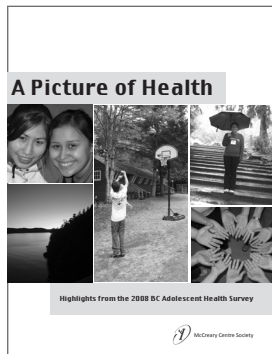
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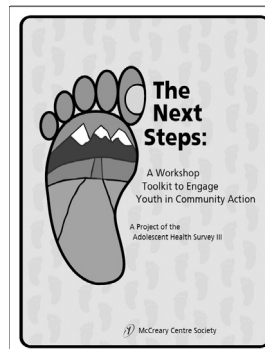
McCreary Resources

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



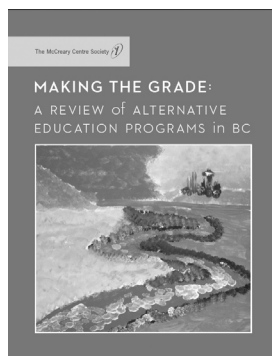
A Picture of Health: Highlights from the 2008 Adolescent Health Survey (2009)

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.



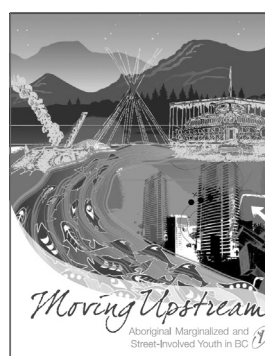
The Next Steps: A workshop toolkit to engage youth in community action (2005)

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.



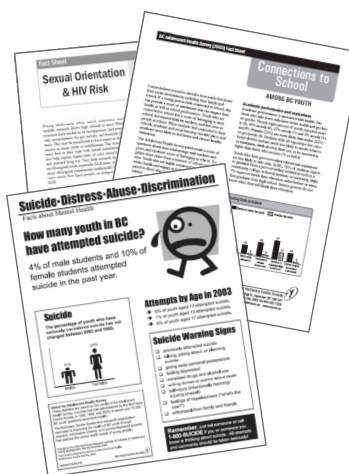
Moving Upstream: Aboriginal marginalized and street-involved youth in BC (2008)

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)

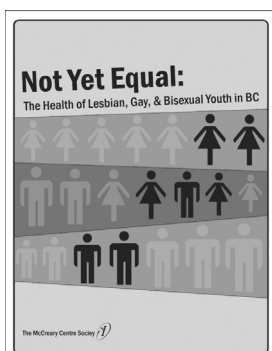
The lives of marginalized and street-involved youth are complex and filled with challenges, dangers and opportunities. This report summarizes the results of surveys with marginalized youth in the North, Interior, Fraser Valley, Vancouver Island and Vancouver.



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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