

The Next Steps:

BC Youths'
Response to
the AHS III
and Ideas for
Action

A Project of the Adolescent Health Survey III



McCreary Centre Society

The Next Steps:

BC Youths' Response to the AHS III and Ideas for Action

A project of the Adolescent Health Survey III



Participants from Pemberton

© The McCreary Centre Society, 2006

ISBN: 1-895438-75-6

3552 East Hastings Street Vancouver, BC V5K 2A7

Tel: 604-291-1996 Fax: 604-291-7308

E-mail: mccreary@mcs.bc.ca

www.mcs.bc.ca

The McCreary Centre Society is a nongovernment, non-profit organization committed to improving the health of BC youth through research, education and youth leadership projects. Founded in 1977, the Society sponsors and promotes a wide range of activities and research to address unmet health needs of young people.

Areas of interest include:

- health risk behaviours
- health promotion
- youth participation and leadership skills development

Project Team

McCreary Centre Society

David Sadler

Youth Participation Coordinator

Aileen Murphy

Managing Director

Alison Liebel

Communications Coordinator

Minda Chittenden

Research Associate

Next Steps Primary Community Organizers

Whistler

Marilyn McIvor, Vancouver Coastal Health Juniper Gordon, Vancouver Coastal Health

Pemberton

Caprii Mohammed, Public Health Nurse, Vancouver Coastal Health

Squamish

Sue King, Vancouver Coastal Health

Sunshine Coast

Donna Jepsen, Vancouver Coastal Health/Community Youth Awareness Committee

Ely Weston, Vancouver Coastal Health

Eleonora Molnar, Community Developer, Vancouver Coastal

Leaugonn Starmen, Sunshine Coast Youth Outreach Worker Program

Broadway Youth Resource Centre (Vancouver)

Gail Winacott, Pacific Community Resources Society

Duncan

Patricia Anderson, Cowichan Valley Open Learning Cooperative

Powell River

Karen Peel, Vancouver Coastal Health Eleanor Sinclair, Vancouver Coastal Health

The Next Steps: BC Youth's Response to the AHS III and Ideas for Action was prepared by David Sadler.

Funding for this project was provided by:

The Government of Canada's National Crime Prevention Strategy

The Vancouver Foundation

The views expressed herein do not necessarily represent the official policy of the government of Canada.

Cranbrook

Tom Piros, School District #5
Corinne Gilchrist, School District #5

Creston

Claire Bouchard, Interior Health

Castlegar

Sherry Kelly, Interior Health
Carolyn Axent, Public Health, Interior Health
Denise Quenneville, Public Health, Interior Health
Lesley Austin, Nursing Student, Selkirk College
Jason Gora, Nursing Student, Selkirk College

Eastside School (Vancouver)

Natalie Rahr, Eastside School

Prince Rupert

Treena Dekker, Community Futures of the Pacific Northwest

Fernie

Brian Glover, Fernie Secondary School Tami Chechotko, Sparwood Secondary School Frances Kellington, Elkford Secondary School

The McCreary Centre Society acknowledges the support for the AHS III from the Province of British Columbia, Ministry for Children and Family Development, Ministry of Health, AHS Inter-Ministry Advisory Committee, AHS Project Advisory Committee, staff of participating school districts, and BC's public health nurses.

Table of Contents

Introduction	4
Next Steps III Story	5
Top 4 Health Priorities	7
Alcohol and Drug Use	8
Mental Health and Suicide	10
Racism and Discrimination	12
Sexual Health	14
Responding to the Research	16
Looking Back	21
Looking Ahead	22
Resources	23
McCreary Centre Society Publications	24

Participants from Pemberton



Introduction

Over the past year I have been very lucky to work on the *Next Steps* project. It has been an incredible experience. I have met youth from across the province, and have had the privilege of hearing their insightful ideas for promoting youth health in their community.

The Next Steps brought the results of the Adolescent Health Survey III back to the very group who provided the information—youth. This report is an opportunity to hear from young people—their perspectives on the research findings and their ideas for action. The report represents an overview of 13 Next Steps workshops that were held in communities all over BC from October 2005 to March 2006. It is a summing-up of the major themes and ideas that the youth participants had. The goal of these Next Steps workshops was to have youth identify health priorities and to stimulate them to get involved and get active in their schools and communities.

The recording of information from *Next Steps* workshops was not scientific. I facilitated 12 of the 13 workshops; discussion notes were recorded by a variety of people in the different communities so the level of detail recorded varied considerably. And also, as I am reporting on what youth had to say, the report is unavoidably affected by my unique lens. I want to acknowledge this lens. I also chose to take a more human, more personal, approach to this report, and at times I have added personal impressions or reflections.

Having facilitated most of the workshops, I saw themes emerge in some of the action projects that youth thought of. Here are some that are worth mentioning:

- Youth want to hear from peers or people who have overcome challenges. This is effective for many reasons: it is more inspiring; it gives them someone to identify with; and it is more real.
- Youth suggest starting health education earlier. They recommend preventative programs or information on a wide variety of issues be available for younger (elementary school) students.
- "Non-Judgemental" is a phrase that kept coming up again and again.
- Peer pressure can be used for good purposes. Youth identified that peer pressure can be a negative force, but many of their ideas for projects use peer pressure in a positive way. For instance, projects that use peer pressure to make racist comments uncool.
- Parents are important. Youth identified parents as a resource for helping to address problems.

The second *Next Steps* report from this workshop series, the *Next Steps Community Reports*, contains more detailed information from each workshop. If you are interested in reading more ideas for action projects, or what a particular community had to say about an issue, you can download these reports from McCreary's website.

For those people who read this and are inspired to organize a workshop in their own community, the toolkit is still available. You can find it on McCreary Centre Society's website at www.mcs.bc.ca.

David Sadler
Next Steps Coordinator

Next Steps III Story

Adolescent Health Survey

The Next Steps is a follow up to the 2003 Adolescent Health Survey (AHS III). The AHS is a questionnaire used to gather information about youth health status, health-promoting practices, and risk behaviours. The survey provides current, accurate information about what BC youth know, think, and do about their health. The AHS was administered to BC students in grades 7 to 12 in 1992, 1998 and 2003; over 70,000 students have participated in the AHS. Modified versions of the AHS have been conducted with special populations of youth, including street youth, gay youth and youth in custody. AHS IV is being planned for 2008.

Next Steps

The Next Steps is a workshop series that provides BC youth with an opportunity to discuss the results of the BC Adolescent Health Survey, make recommendations, and plan projects for improving the health of youth in their communities. There has been a Next Step project after each AHS.

Following AHS III, a workshop toolkit, the *Next Steps: A Workshop Toolkit to Engage Youth in Community Action*, was developed to assist groups in organizing a youth workshop in their community. This toolkit contains everything needed to hold a workshop. It has suggestions for planning, agendas, facilitator notes, handouts and theory on youth participation. This toolkit was distributed across BC, and 13 different groups or organizations took the initiative and organized a *Next Steps* between October 2005 and March 2006.

Previous *Next Step* projects conducted following AHS I and AHS II consisted of a single day long workshop. Feedback indicated that additional workshops would be something that the communities could use to keep the momentum go-



Participant from Broadway Youth Resource Centre in Vancouver displays the Group Contract (an agreement generated by the group on how they want to work together).

ing. The AHS III *Next Steps* responded to this feedback and was developed with materials for three workshops. This provincial summary report contains information only from the first workshop. So far, three of the 13 communities have gone on and conducted additional workshops. For agendas and more information about each of the workshops, download the *Next Steps* toolkit from McCreary's website: www.mcs.bc.ca.

All workshops, except Prince Rupert, were facilitated or co-facilitated by David Sadler, McCreary's Youth Participation Coordinator. Each workshop was very unique. In total, 440 youth and 70 adults participated in 13 workshops across BC. The average number of youth in attendance was 30, but numbers ranged from 9 youth to 121.

Workshops took place in:

- Whistler
- Pemberton
- Squamish
- Sunshine Coast (Workshop hosted in Sechelt)
- Broadway Youth Resource Centre (Vancouver)
- Duncan

- Powell River
- Cranbrook
- Creston
- Castlegar
- Eastside School (Vancouver)
- Prince Rupert
- Fernie

The stand alone first Next Steps workshop has three main components:

- 1) Discussing the AHS III research results
- 2) Exploring the meaning and importance of Protective Factors
- 3) Creating ideas for action



Discussing the AHS III research results

The day begins with a lively trivia game based on the results of the 2003 Adolescent Health Survey. Participants are broken into teams and each team competes to win the game. A series of questions asks things like "Who is more likely to seriously consider suicide: Boys or girls?" Through a variety of questions, the youth discuss health issues and share their perspectives with each other. After the trivia game, participants choose the issues that are most important to them and then rephrase the issues into goals. The youth then vote to identify which goals are the most important for promoting in their community.

Youth in Squamish discuss protective factors through the rock bucket activity.





Protective factors

Protective factors are factors that promote healthy development such as being connected to caring adults and having opportunities to develop skills. Risk factors are factors that may jeopardize youths' healthy development such as abusing alcohol and drugs or having suicidal thoughts. Although many youth have never heard the word "protective factor" before, most can recognize them when they see them. The Next Steps workshop uses a metaphor of rocks and a bucket to illustrate the effect that risk and protective factors can have in a young person's life. The rocks represent the weight that a young person carries because of risk factors and protective factors help remove some of this weight enabling youth to be more resilient. This activity is intended to make sure youth think about both reducing risk and increasing protective factors as ways of promoting youth health.



Action planning

After talking about the health priorities and protective factors, it is time to start creating action plans. The participants are given a straight forward action planning sheet to come up with a concrete project idea that will contribute to reaching one of the goals that was identified through the trivia game.

Youths' Top 4 Health Priorities

The four issues identified as Top Health Priorities were clearly top issues across the province in all communities. Many additional issues were identified, but were not included because they varied quite a bit from community to community.

For a complete list of health priorities identified by community, please see the *Next Steps Community Reports*.

Top Health Priorities, in no particular order:

Alcohol and Drug Use Mental Health and Suicide

Racism and Discrimination

Sexual Health

These health priorities will be explored in the following pages. For each priority area we review three things:

Youth perspective on the issue

 This is a summary of what youth had to say about the priority issue. This information comes from the notes that were taken during the trivia game portion of the workshop.

Action ideas

• The action ideas are a selection of the ideas that the youth had, grouped into major themes. These lists are meant to give an overview of the range of ideas that youth have to address the issues. It was sometimes difficult to put the action ideas into a single priority area, because many projects are not aimed at just one issue, and many build protective factors that could have an effect on many different issues. Keep this in mind while reading them.

Unique and creative projects

 For each theme I have selected two projects that I think are interesting and give a flavour of the creative ideas that youth had. These projects are presented in the same format as the worksheet that participants used to plan them out at the workshop, and for the most part, have not been edited.

Youth Perspective

The AHS III data shows that the rate of youth who have ever had a drink of alcohol has decreased from 65% in 1992 to 57% in 2003. Youth were surprised, as many youth feel as though lots of their peers are drinking alcohol and were more surprised that youth are also first trying alcohol at older ages as compared to a decade ago.

AHS Data Says: Youth are waiting longer to try alcohol

How did Youth Respond?

When asked why this might be true, participants said:

- Young people have goals and don't want to be alcoholics. They said that youth have goals in life and don't want to end up "down and out," therefore they are steering away from risky substance use.
- Alcohol is expensive and youth can't afford it. This effect of cost was brought up regarding many different health issues. Price stops youth from doing things—both positive and negative.

When asked why young teens might drink alcohol, they said:

 Younger kids see older people drinking and want to be like them.

AHS Data Says: Marijuana use has increased since 1992

How did Youth Respond?

None of the youth were very surprised at how much marijuana use has increased. Here are some reasons why.

- Pot is cool and fun.
- People are fighting to legalize it, therefore it can't be that bad.
- Pot is very easy to get.
- It is socially acceptable among most youth and, unlike other drugs, it doesn't seem like a big deal.
- It is glamorized by celebrities and culture.
- There is peer pressure to use it.

AHS Data Says: Drinking and driving among youth has decreased

How did Youth Respond?

When asked why drinking and driving has declined, youth said:

- It's harder to get your license now because of graduated licensing.
- Drinking and driving is much more unacceptable in society. In the past, there was more leniency, both legally and socially.
- Youth are more educated and aware. Youth know the dangers.
- The message is getting out there. There is lots of information from different sources so youth are more educated.

When asked why they feel drinking and driving is still a concern, youth said:

- Younger youth are not always able to make good decisions regarding alcohol and driving.
- There is still peer pressure to drink and drive.

Participants also discussed why girls are more likely to ride with a driver who had been drinking. Reasons include:

- Because boys are more likely to be the one driving on a date or to a party.
- Boys have pressure to be a "man," and feel that driving drunk is something that they have to do sometimes.
- Girls may be more susceptible to being pressured by their partner to get into the car.
- For girls, walking home at night is not a safe option either, and getting a ride with someone who has been drinking may seem safer.

Hmm...

Interestingly, the same youth participants who say drugs are a negative influence and are looking for ideas to reduce drug use, will happily cite with pride the quality of our famous BC Bud as a reason why marijuana use is increasing. This is not a particularly ground breaking observation, but when the same conversation plays out in many different communities, one begins to notice.

Action Ideas

Ideas giving youth positive alternatives include:

- Programs to help youth develop personal skills, such as becoming athletes or artists.
- More options in the range of sports teams or clubs for those who are not interested in the usual activities.
- Recreation or activity centre for youth that is free or has a reduced fee.
- Providing youth with information on activities that are available to do through a workshop, pamphlets, newsletters, or a fair showcasing different activities held at school. Keep youth busy.
- Organizing drug free events as an alternative to unsafe events.
- Partnering with local businesses to offer reduced fees for youth activities.
- Many communities need a better bus system or a program that offers free rides home.

Ideas that involve youth taking action include:

 Youth telling other youth about the dangers of drugs in memorable and creative ways (e.g. dress up like a marijuana leaf and hand out flyers).

Have older youth educate younger youth. They will serve as good role models, and create awareness among younger youth about drug issues so they are

better equipped to make healthy decisions as they grow up.Youth-on-youth discussions about drugs that are real and

Organizing a youth group that both promotes healthy activities and is anti-substance abuse.

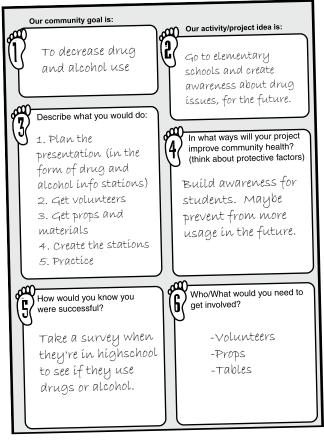
Ideas that involve adults taking action include:

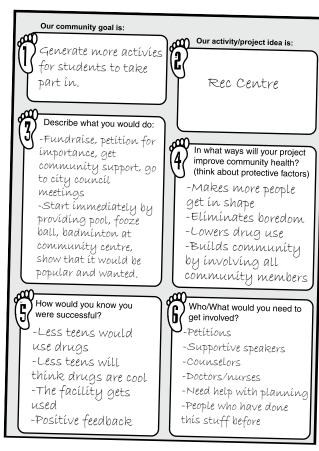
- Encouraging youth who are abusing substances to attend support groups.
- Facilitating workshops that stress the facts about drugs, not fear or hype. Do this before they do drugs, so they think twice.
- Creating anti-drug advertisements.
- Community efforts to make drug dealers feel unwelcome.

Ideas involving government taking action include:

- Making alcohol more expensive.
- Cracking down on repeat offenders.
- Creating designated areas for drug use.
- Free support groups and rehab.

Action Idea from Cranbrook





Youth Perspective

Suicide, mental health concerns and depression are themes that resonated with youth across the province. When asked if boys or girls were more likely to seriously consider suicide, the majority of youth were not surprised to find out that girls were more likely to. They felt that both boys and girls face pressures that could lead to suicide, but that pressures are different depending on your gender.

Youths' reasons for why girls may seriously consider suicide

- Girls take things more seriously than boys.
 They are more likely to feel emotionally distressed.
- Girls face more self-esteem issues. They
 have more pressure to look perfect, and the
 media makes girls have unreal expectations
 about how their body should look.
- Youth said that girls are more concerned about fitting in and are devastated when they don't.
- Youth also said that girls are meaner to each other as compared to boys. They gang up on each other and play mind games.

Youths' reasons for why boys may seriously consider suicide

- Boys don't talk about their feelings. They keep their problems bottled up because they have to be tough and not show emotion.
- Boys are more violent and, therefore, boys are more likely to consider killing themselves.
 Youth also thought that they would be more likely than girls to actually do it.
- Youth also said that there is not as much help available for boys as there is for girls.

The AHS has found that the percentage of youth who seriously consider suicide has not changed since 1992. When asked why the issue has not improved since 1992, many responded that "being a teenager hasn't changed." The things that lead to depression and suicide are still there. Youth still get bullied at school, the media still creates self-esteem issues... and so on.

Action Ideas

Ideas that take into account differences between males and females include:

- Separating mental health services and resources for boys and girls because they handle stress and emotions differently.
- Providing more support and acceptance for boys to feel comfortable expressing themselves.

Ideas that involve parents include:

- Giving information to parents so they can be more aware of the emotional health of their kids, and notice any warning signs.
- Encouraging parents to do activities with their kids—have fun and build trust.

Ideas that reduce stigma and raise awareness include:

- Decreasing the stigma associated with depression and other mental health problems by talking about the issues more openly at school and in the community.
- Teaching youth how to respond to peers that may be experiencing mental health issues.
- Providing non-judgemental places or support services so youth are more likely to seek help.
- Increasing awareness about "Peer Pressure."
- Having workshops with guest speakers who have first hand experience with this problem.

Ideas that address some of the causes of mental health problems include:

- Projects that tell youth that they don't have to be what they see on TV.
- Presentations in school on how silly and unrealistic the media is.
- · Harsher punishment for bullies.
- Create programs that prevent bullying such as school teambuilding activities.
- Initiatives that fight disrespect and racism.

Ideas that are informal daybrighteners include:

- "Pay it forward" Post-Its! Write nice things about people and put them around the school.
- Doing kindness projects around the community, in schools, and in the work place.
- Youth making a personal effort to do or say something nice to someone who looks lonely or depressed.
- Making a personal effort to recognize peoples' strengths more often.
- · Hugs.

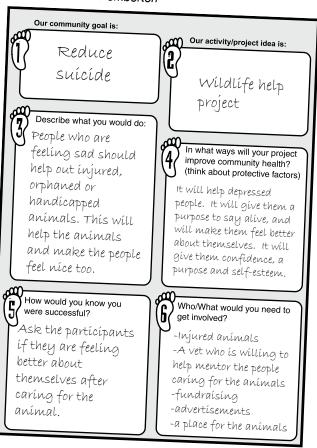
Ideas that provide youth with positive experiences include:

- More programs that build confidence.
- Having role models and mentors for youth to build positive relationships and self-esteem.
- A youth centre where youth can have fun, as well as receive support.
- A program in school where every week you get to try out something new, so you can discover something you find fun and rewarding.
- Activities for youth to release their frustration (for example, yoga, something to make you laugh, or more sports).

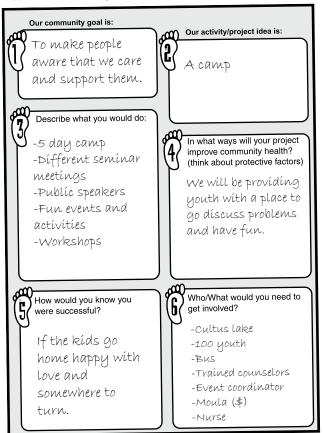
Ideas for providing help for youth with mental health problems include:

- Phone lines and support groups for youth.
- Identify safe places where youth can go to "just talk" or receive help.
- Provide safe people for youth to talk to.

Action Idea from Pemberton



Action Idea from Squamish



Youth Perspective

Youth in all communities felt that racism and discrimination are important issues. No youth anywhere said that racism was not a problem any more, but in more ethnically diverse communities where a majority of participants were visible minorities, youth felt that the percentage of youth who experienced racism was much higher. In communities that may not be as multicultural, there was still a lot of desire on the part of young people who may have never been the victim of racism or discrimination to take measures to address it. It was very heartening that no matter what the community or personal experience, it was always an issue that youth cared about. Youth were hopeful that it could be eliminated.

Here is what youth said about racism:

- Many people don't realize that they are being racist. Sometimes racist tendencies are learned by example and youth unintentionally act in a racist way. Youth also identified how some young people use racial slurs that they don't know are offensive.
- Younger people have less bigoted attitudes than adults. Youth felt as though young people are being raised not to be a racist and don't have some of the same tendencies that older people have.
- Youth feel that there is a lot of difference in the prevalence of racism from community to community, and the way in which it manifests itself is different as well.

Here is what youth said about homophobia

- No question in the trivia game dealt directly with homophobia. It did, however, come up in many discussions about discrimination. In one such workshop where homophobia was identified as an issue, participants mentioned that some of their volunteer experience had been around sexual health and it had increased their knowledge and awareness about different sexual orientations.
- Youth felt, as with racism, young people are being raised not to be homophobic and don't have some of the same tendencies that older people have.
- Youth in some communities talked about a general reluctance on the part of youth to stand up against homophobia, because youth who do are stigmatized.

Action Ideas

Ideas that bring people together include:

- Organizing a multicultural banquet where people bring food from different cultures.
- Organizing a "Fun Day" with games and sports and invite people from different cultural groups.
- Encouraging and promoting more community multicultural events.
- Creating a club at school that promotes diversity (for example, a gay/straight alliance).

Hmm..

It was also interesting how homophobia was not discussed in some communities while it was something that youth really cared about in others.

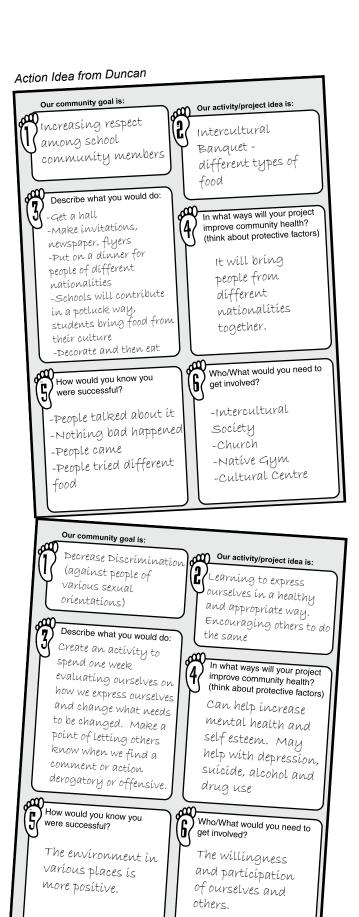
- Creating a program that does a "cultural swap" where people live with a family from a different culture for a period of time.
- Create peer support groups for those facing any sort of discrimination.

Ideas that raise awareness include:

- Creating a play that explores racism and reminds people that it is still a problem.
- Having anti-discrimination presentations at schools.
- Separating fact from fiction. Debunk ideas like "racial superiority"—all races have the ability to be good at things.
- Identifying then educating youth about myths that spread fear (example of a myth: men who have sex with men have AIDS).
- Informing others about how discrimination negatively effects individuals and communities
- Having speakers at school that youth can relate to. Youth will be more interested and understand what they are talking about.
- Creating media that raises awareness about racism—advertisements, posters or newspaper articles.
- Having more field trips to other countries.
- Programs that demonstrate to people how it feels to be discriminated against.

Ideas that support youth to take action include:

- Providing tools and skills to youth who are interested in creating positive change.
- Projects that challenge youth (and adults) to expand their comfort zones.



Action Idea from Cranbrook

Youth Perspective

If there was one topic in the trivia game that never failed to get the attention of participants, it was sex. The 2003 *Adolescent Health Survey* results show that the percentage of youth who are sexually active has decreased since 1992. This is a result which was very surprising to the majority of youth.

AHS Data Says: Fewer youth are having sex

How did Youth Respond?

Very surprised! Most youth thought sexual activity was on the increase. Here are some reasons why youth thought it had increased:

- Youth said that sex is everywhere in the mass media. Magazines, movies, TV and music videos glorify sex and commercials use sex to sell products.
- Youth said that girls dress to emulate what they see, which in turn makes people think that they are sexually active even if they are not. This then perpetuates the feeling that sex is everywhere.
- Peer pressure causes youth to consider having sex to fit in because of the feeling that everyone is having sex.
- People are more open about sex. In the past, sex was a big taboo. The youth said that this openness increases sexual health and safe sex practices, but at the same time can make sex less of a big deal to youth, and would make them more likely to engage in sexual activity.
- Also, there was much discussion about what activities are considered "sex" and what isn't.

Not everyone thought that sexual activity had increased. Here are some reasons why youth thought it has decreased.

- The same point of being "open about sex" was also an argument to say why sex had decreased. By being able to talk about sex honestly and openly, youth have a better idea of the physical and mental health outcomes of being sexually active. Also, having access to information and discussions about sex helps youth make informed decisions and wait to have sex.
- Three huge tiny letters: STI. Youth said all
 the attention on STI's has also contributed
 to lower sexual activity. Youth said, no one
 wants an STI and youth feel the danger of
 getting an STI makes their peers not engage
 in sexual activity.

AHS Data Says: More youth are using condoms

How did Youth Respond?

Youth were generally not surprised to hear that condom use had increased since 1998. Here are some reasons why:

- There is more awareness and education about STI's. More awareness leads to knowledge that STI's exist and education leads to knowing how to prevent getting one.
- Youth said that they were getting more sex education (and earlier), and that it is more likely that youth "get it."
- Society is more open about condom use. It is not difficult to find information about condoms, and how and why to use them. Youth thought it would have been more difficult in the past.
- Condoms are easy to come by now. Youth say there are many places where someone can go and get free condoms. This is a lot less stressful than going into a store to buy them, so youth are more likely to have them.

Action Ideas

Ideas that work against negative peer pressure and stereotypes include:

- Increasing critical thinking about the mass media. Equipping youth with the skills to think for themselves.
- Discouraging media from perpetuating negative stereotypes of how men and women should act.
- Developing programs for youth to counteract learned negative gender roles (for example, program to teach boys that it's okay to respect girls for who they are, not just for sex).
- Programs to help youth respond to peer pressure
- More programs to support teen parents, rather than just putting them down.

Ideas that demystify sex include:

- Having more open communication, dialogue, workshops and explanations in school. More education.
- The opportunity to ask anonymous questions so people won't feel too embarrassed to ask.
- Start Sex Ed. at a younger age, before youth are sexually active.
- Use "real" advertising campaigns about STI's that focus on the facts and let youth choose.
- Activities that demonstrate consequences of irresponsible sex (like taking a baby course so you see how hard it is to take care of a child).

Ideas that involve parents include:

- Having workshops or large meetings, through school, to teach parents how to talk to their kids about sex.
- Increasing communication between parents and school groups.
- Programs or events that build bonds between parents and children. Encouraging youth to talk to their parents, and vice versa.
- Family Sex Ed. Night: youth and families come out to be educated together. Have skits, prizes and fun!

Ideas that are "edu-tainment" include:

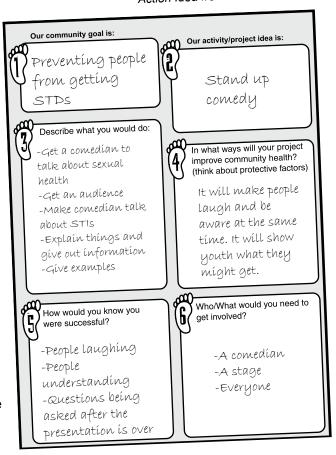
- Giving out sexual health info in a memorable way.
 Dress up like a condom and give out pamphlets.
 Hold a sexual health comedy night, or create a play about STI's and healthy choices.
- Holding a sexual health activity fair: have creative informational games and events all about sexual health topics.

Ideas that put the emphasis on youths' personal responsibility include:

- Making sure youth are informed about sex.
- Making sure youth are personally ready when they do have sex.
- Being aware of the risks of having sex while under the influence of alcohol or drugs.
- Asking experts lots of questions.
- · Talking about sex with parents.
- Have more things to do so youth don't have sex cause there's nothing else free to do.



Action Idea from Eastside School



Responding to the Research

The trivia game covered a wide range of topics from the AHS III data, and was very successful in drawing out youth perspectives on a variety of issues. This section provides a summary of the discussions from a sample of questions from the trivia game on topics that were not included in the Top Four Health Priorities (reported on pages 8-15). Also included are action ideas that were suggested by youth.

Try guizzing yourself. Are you thinking the same way as BC youth?

Playing the Trivia Game

The trivia game was a great opportunity for youth to examine their assumptions and stereotypes about their own health and the health of their peers. For the trivia game, the participants were divided into small groups. The facilitator asked a question to the whole group, such as "In what grade are students less likely to report feeling safe at school?" The small groups would then discuss the question amongst themselves and decide on an answer. Groups would report back, and share the reasons for choosing their answer.

School Safety Questions

In what grade are students less likely to report feeling safe at school?

A Option A) Grade 8 Option B) Grade 9 Option C) Grade 10 Option D) Grade 11

Correct answer: A) Grade 8

Majority of youth chose

Youth Say

- Grade 8 students are physically the smallest in the school (too small in the food chain).
- Grade 8 students may have left their friends behind and are entering a new school (have feelings of loneliness, feeling lost).
- Grade 8 is an emotional time—youth are figuring themselves out. They are also going through puberty.
- Youth feel least safe in grade 9 and above because youth at that time are meeting more people, and being exposed to more risky things like drugs.

Here are some Action Ideas (from grade 7 youth in Creston):

- Do more activities with all the grade 7s in the district, getting them together before going to grade 8.
- Encourage youth to join school clubs.
- Suggest youth start volunteering to get to know people.
- Create a buddy system between older and younger students in high school.

At school, where do students feel safest? In the...

▲ Option A) Classroom

Option B) Washrooms

Option C) Library

Option D) Outside on school property

Correct answer: C) Library

Youth usually chose A or C, only a few ever chose B or D.

Youth Say

About feeling safe in class:

- Students feel safe in class because the teacher is there supervising.
- It's safe because you are supposed to be doing work.
- Some said youth do not feel safe in the classroom because the teacher is the bully, or some teachers allow bullying to happen in front of them.
- Students don't feel safe in class because they are afraid of being shot down when they have the wrong answer.

About feeling safe in the washrooms:

Youth don't feel safe because it's a small unsupervised space.

About feeling safe in the library:

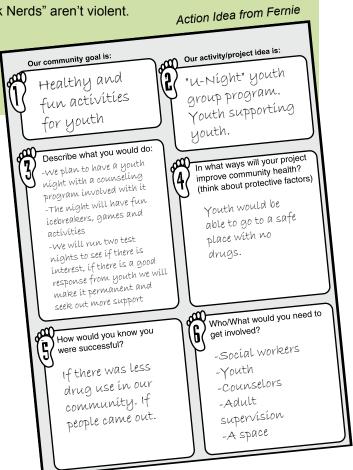
- Because it's quiet, disturbances are more easily noticed.
- Librarians are there and make youth feel safe.
- Library is safe because generally "Book Nerds" aren't violent.

About feeling safe outside on school property:

One youth said outside was safe because he could "run really fast."



Participants from Creston



Physical Health Questions

Q What percent of students exercise 3 or more days a week?

A Option A) 43% Option B) 66%

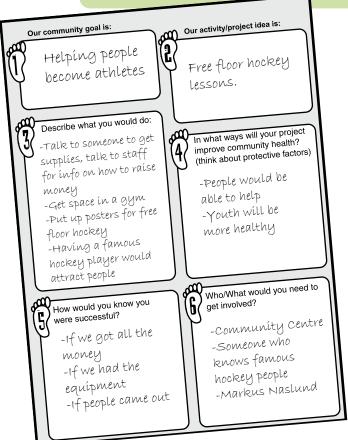
Correct answer: C) 71%

There was no noticeable consistent choice made by youth.

Youth Say

Option C) 71%

- It's high because there are so many daily activities that youth do that provide exercise: walking dog; riding bike to school; etc.
- · It's high because PE class is mandatory.
- It's high because there is pressure on youth to have a good appearance.
- It's low because people spend too much time watching TV and on the computer.



Action Idea from Broadway Youth Resource Centre

Action Idea from Castlegar Our community goal is: Our activity/project idea is: More youth activities in the Survey youth so community we can see what they want to do Describe what you would do: We would make a In what ways will your project school wide survey improve community health? asking what (think about protective factors) activities they would Everyone will be more be interested in. From active. It will help with there, we would make self-esteem. Hopefully and form the everyone will become activities that the more open to each school wanted. other. How would you know you Who/What would you need to were successful? get involved? If people became Teachers. more kind and students, coaches, open to others. after-school. directors

Q True or false: More students said they had tried smoking in the 2003 survey than in the 1998 survey.

A The correct answer is false. The vast majority of youth chose false.

Youth Say

- Fewer youth are smoking because there is not as much advertising of cigarettes.
- Smoking is not cool any more.
- The message is clear that, without a doubt, smoking is bad for you.
- There is more education about the harmful effects of smoking.
- It is cooler to smoke marijuana and it is cheap.
- There are better anti-smoking ads.
- Smoking is now more expensive.
- There are less places you are allowed to smoke.

Participants from Castlegar



Mental Health Questions

Q What percent of girls had unwanted sexual comments, jokes or gestures made to them in the past year?

△ Option A) 27% Option B) 40% Correct answer: C) 53%

Option C) 53%

Most youth chose C and many even commented that C seemed low.

Youth Say

- It's high because guys don't know what to say to girls. They have limited role models.
- It's high because the media influences boy's behaviour.
- It's high because guys are sexist (or some said socialized to be sexist).
- It's high because some youth said that "a lot of the girls actually like it." Other youth said that some guys just think that a lot of girls actually like it.

Action Idea from Powell River

Our community goal is:

Stopping negative media influence

Describe what you would do:

we would go to schools in a group of two, one person dressed in a skimpy dress, the other in a sophisticated manner. Ask people who they respect more.

How would you know you were successful?

if younger kids started wearing more appropríate clothes.

Our activity/project idea is:

warnina kids of the consequences of dressing a certain

In what ways will your project improve community health? (think about protective factors)

It will help people learn to not prejudge others on their clothes. It will help stop the spread of STI's and girls getting pregnant.

Who/What would you need to get involved?

- -Support from schools
- -Local Medía
- -Support from parents/community

What percentage of students said that they have an adult in their family who they would feel OK talking to if they had a serious problem?

△ Option A) 34% Option B) 52% Option C) 78%

Correct answer: C) 78%

The majority of youth chose either 34% or 53%.

Youth Say

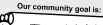
Youth guessed a low percentage because...

- youth don't want their parents to be disappointed in them, so they won't tell them things.
- youth are afraid of punishment, so they won't tell their parents things.
- parents don't know how to react to things: youth are dealing with problems parents know nothing about.
- many youth say they are more likely to feel comfortable talking to, and getting advice from, their friends.

Youth guessed a high percentage because...

people with larger families can talk to aunts or uncles.

Action Idea from Pemberton



To get kids to talk to their parents

Describe what you would do:

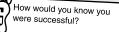
- -1 would ask them questions -Get them to talk.
- to each other -Describe the problems about their parents

Have a conference and invite kids and their parents in and get them to talk to each

Our activity/project idea is:

In what ways will your project improve community health? (think about protective factors)

It will help reduce stress on youth and parents.



Kids Will he more social and less dark and dím.

Who/What would you need to get involved?

- -Parents
- -Kíds/teens
- -Myself
- -A classroom or someone's help in finding a location

Volunteerism Question

What percent of students volunteered in the past year?

▲ Option A) 54% Option B) 63% Option C) 81%

Correct answer: C) 81%

Most often youth chose a lower number. In discussions it was apparent that many youth in the province hold negative stereotypes about their peers (and some youth even commented on this).

Participants from **Whistler and David** do some thinking.



Youth say:

Youth guessed a low percentage because...

- youth are lazy.
- youth need to work to make money.
- volunteering is seen as "uncool" a lot of the time.

Youth guessed a high percentage because...

- people are gaining experience for resumes.
- people are getting cap and grad credits

Looking Back

It is remarkable how the Top Four Health Priorities identified at the Next Steps III workshops in 2005-2006 are very similar to those identified by youth a decade ago. The appearance of the same issues illustrate their continuing importance in the lives of BC youth.

Next Steps III (2005/2006)

- Alcohol and Drug Use
- Mental Health and Suicide
- Racism and Discrimination
- Sexual Health

Next Step II (2001/2002)

- Substance Use
- Sexual Health
- Mental and Emotional Health
- · Drinking and Driving
- Abuse and Exploitation
- Discrimination
- Racism and Homophobia
- Involvement and awareness
- Violence
- Poverty and Resources
- Pressures

Next Step (1994)

- Emotional Health
- Alcohol and Drug Use
- Sexual Health
- Lack of Opportunities
- Violence and Abuse
- Discrimination



This is just a quick sample of some of the comments regarding the workshop. McCreary will be doing a more in-depth, youth led evaluation in the summer of 2006 on the experience and outcomes of the Next Steps workshops.

What Participants Said About the Next Steps

Feedback from participants on the workshop was overwhelmingly positive.

- "[I liked] Not going to school and doing something productive instead"—Youth, Sunshine Coast
- "I felt it was good and opened my eyes to how I could help"—Youth, Sunshine Coast
- "Youth from all regions were together –rare for the coast" —Adult. Sunshine Coast
- "I liked getting the free food and playing games" —Youth, Pemberton
- "My brain feels like it got some exercise from thinking" —Youth, Powell River
- "It was an opportunity for different youth and adults to intermingle" —Adult, Powell River
- "We were able to have a lot of fun, but at the same time learn lots" —Youth, Squamish
- "I loved how everyone put out their opinions to each other, so we could discuss issues openly and have fun doing it" —Youth, Castlegar
- "I liked working in groups with other local kids, knowing they wanted to make a difference too" —Youth, Fernie
- "Not enough participants—seemed schools/ teachers did not understand the importance of this. Imagine thinking some class is more important than health!" —Adult, Sunshine Coast
- "One more five minute break would help me stay on task better when I started to feel restless" —Youth, Powell River
- "Some of the icebreakers were corney"
 —Youth, Pemberton [David's note: that's why I do them!]

Looking Ahead

Some communities have already decided to follow-up on the Next Steps workshops and continue to support local youth.

- Duncan, Cranbrook and Fernie all decided to hold the second workshop in the Next Steps workshop series. Youth in these communities had the chance to explore their communities' strengths through community mapping, participating in skill building, and to further develop their action project ideas.
- The Next Step on the Sunshine Coast was used as a springboard to start Youth Advisory Councils in Pender Harbour, Sechelt, and Gibsons. As well, public health has contributed funds so that some of the projects that youth came up with can be carried out.
- Out of the Next Steps in Pemberton, Whistler and Squamish, there is now interest in organizing Youth Advisory Councils in each of the communities. Pemberton and Squamish are also planning the second Next Steps workshop. To help their groups get started, the workshop will include information about Youth Advisory Councils.
- Youth in Prince Rupert have taken information from the Next Steps workshops and presented it to different groups in the community, including the Rotary Club and school principals.

Currently in the works at McCreary

- During the summer of 2006, youth staff at McCreary will conduct a follow-up evaluation of these 13 Next Steps workshops to assess their impact on participants and communities.
- A Next Step process is being planned as part of two AHS surveys of special populations; one of
 youth in BC custody centres and another of street engaged youth. These Next Step workshops will
 be modified to fit the unique needs of these special populations.

68% of youth participants reported having "lots" of fun.

30% of youth participants reported having "some" fun.

63% of youth participants reported feeling "a lot" of respect from others.

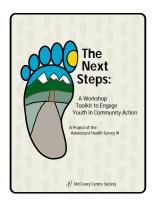
31% of youth participants reported feeling "some" respect from others.

Creston youth work on their community maps, an activity from the 2nd workshop.



Resources

Helpful McCreary resources for youth and youth groups

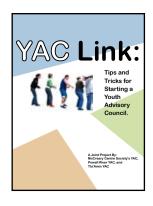


Next Steps Toolkit

The Next Steps: A Workshop Toolkit to Engage Youth in Community Action is the toolkit resource for the report you have just read. It was developed to assist groups in organizing a Next Steps workshop in their community. This toolkit contains everything needed to hold a workshop. It has suggestions for planning, agendas, facilitator notes, handouts and theory on youth participation. Mc-Creary also has a staff person available to assist communities in organizing or facilitating a Next Steps workshop.

The Next Steps toolkit is available for download free on Mc-Creary's website,

www.mcs.bc.ca.



YAC Link

McCreary's Youth Advisory Council, in partnership with the Powell River and Tla'Amin YACs, developed the YAC-Link resource. YAC-Link is a great resource for anyone who is interested in starting or sustaining a Youth Advisory Council (YAC). The resource includes useful history, information and best practices gathered from all three YACs. YAC-Link is a combination of a written guide and peer led workshop. This is an excellent resource for new Youth Advisory Councils to learn from their peers. McCreary, Powell River and Tla'Amin YAC members are available to facilitate this workshop.

The YAC Link booklet is available for download free on McCreary's website,

www.mcs.bc.ca. Or email mccreary@mcs.bc.ca for more information.



The B4 Conference

The Breaking Barriers and Building Bridges (B4) conference is organized annually by McCreary's Youth Advisory Council. This is a fun-filled weekend leadership conference for youth. All workshops are led by youth, and cover a wide variety of skill development and issue topics. The YAC is in its 10th year of running this conference.

For more information about the B4 check out www.mcs.bc.ca or email mccreary@mcs.bc.ca.

McCreary Centre Society Publications

Reports for AHS III

Healthy Youth Development: Highlights from the 2003 Adolescent Health Survey III (2004)

Adolescent Health Survey III
Regional Reports for: Northwest;
Northern Interior; Thompson
Cariboo Shuswap; Okanagan;
Coast Garibaldi/North Shore;
Kootenay Boundary; East Kootenay;
North Vancouver Island; Central
Vancouver Island; South Vancouver
Island; Vancouver; Richmond;
Fraser; and Fraser North. (2004)

Reports for AHS II

Healthy Connections: Listening to BC Youth (1999)

Adolescent Health Survey II: Regional Reports for: Kootenays Region; Okanagan Region; Thompson/Cariboo Region; Upper Fraser Valley Region; South Fraser Region; Simon Fraser/Burnaby Region; Coast Garibaldi/North Shore Region; Central/Upper Island Region; North Region; Vancouver/ Richmond Region; Capital Region; East Kootenay Region; Kootenay Boundary Region; North Okanagan Region; Okanagan Similkameen Region; Thompson Region; Cariboo Region; Coast Garibaldi Region; Central Vancouver Island Region: Upper Island/Central Coast Region; North West Region; Peace Liard Region (2000)

Reports for AHS I

Adolescent Health Survey: Province of British Columbia (1993)

Adolescent Health Survey: Regional Reports for: Greater Vancouver Region; Fraser Valley Region; Interior Region; Kootenay Region; Northeast Region; Northwest Region; Upper Island Region; and Capital Region (1993)

Special group surveys and topic reports

Promoting Healthy Bodies: physical activity, weight, and tobacco use among BC youth (2006)

Time Out II: A Profile of BC Youth in Custody (2005)

Raven's Children II: Aboriginal Youth Health in BC (2005)

British Columbia Youth Health Trends: A Retrospective, 1992-2003 (2005)

Healthy Youth Development: The Opportunity of Early Adolescence (2003)

Accenting the Positive: A developmental framework for reducing risk and promoting positive outcomes among BC youth (2002)

Violated Boundaries: A health profile of adolescents who have been abused (2002)

Violence in adolescence: Injury, suicide, and criminal violence in the lives of BC youth (2002)

Between the Cracks: Homeless youth in Vancouver (2002)

Homeless youth: An annotated bibliography (2002)

Time Out: A profile of BC youth in custody (2001)

The Girls' Report: The Health of Girls in BC (2001)

No Place to Call Home: A Profile of Street Youth in British Columbia (2001)

Making Choices: Sex, Ethnicity, and BC Youth (2000)

Raven's Children: Aboriginal Youth Health in BC (2000)

Lighting Up: Tobacco use among BC youth (2000)

Silk Road to Health: A Journey to Understanding Chinese Youth in BC (2000)

Mirror Images: Weight Issues Among BC Youth (2000) Being Out-Lesbian, Gay, Bisexual & Transgender Youth in BC: An Adolescent Health Survey (1999)

Our Kids Too-Sexually Exploited Youth in British Columbia: An Adolescent Health Survey (1999)

Adolescent Health Survey: AIDS-Related Risk Behaviour in BC Youth - A Multicultural Perspective (1997)

Adolescent Health Survey: Youth & AIDS in British Columbia (1994)

Adolescent Health Survey: Chronic Illness & Disability Among Youth in BC (1994)

Adolescent Health Survey: Street Youth in Vancouver (1994)

AHS III fact sheets

Physical Fitness Among BC Youth Body Weight Issues Among BC Youth

Alcohol Use Among BC Youth Illegal Drug Use Among BC Youth Marijuana Use Among BC Youth Tobacco Use Among BC Youth

AHS III youth fact sheets

Facts About Mental Health Facts About Physical Health Facts About Substance Use Facts About Sexual Health Facts About Smoking

Next Step

The Next Steps: A Workshop Toolkit to Engage Youth in Community Action. A project of the Adolescent Health Survey III (2005)

The Aboriginal Next Step: Results from Community Youth Health Workshops (2001)

Our Communities – Our Health: Young People Discuss Solutions To Their Health Issues. The Next Step Report (2001)

Adolescent Health Survey: Next Step - Community Health Action By Youth. Results from 1994 Youth Health Seminars in British Columbia (1995)