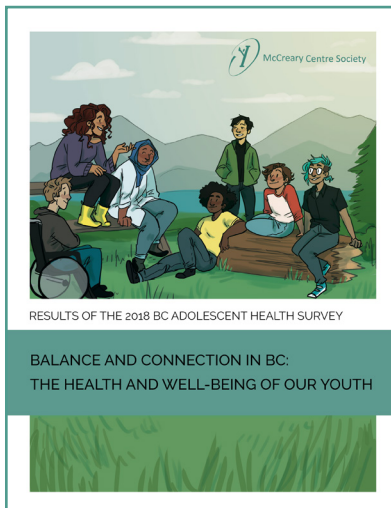


SUPPORTING POSITIVE MENTAL HEALTH AMONG REFUGEE YOUTH IN BC



A 2018 BC ADOLESCENT HEALTH SURVEY FACT SHEET



This fact sheet uses data from McCreary Centre Society's BC Adolescent Health Survey (BC AHS). The most recent BC AHS was completed in 2018 by over 38,000 youth aged 12–19. For more information about the survey methodology please visit <http://mcs.bc.ca/>.

The BC AHS is only available in English, which may have impacted the participation of some refugee youth.

Refugees are people who are unable to safely remain in their own country, or are outside their country, because of fear of persecution due to their ethnicity, nationality, religion, or social or political affiliations for example (Canadian Council for Refugees, n.d.). Refugees have often experienced trauma and have to adapt to a new country, culture, and education system (Immigrant Services Society of BC & The Fresh Voice Initiative of Vancouver Foundation, ISS/FVI, 2016).

The mental health of refugee youth tends to worsen the longer they are in Canada (Beiser & Hou, 2016; Rossiter et al., 2015).

However, connecting with teachers, peers, programs, and community groups have been found to support newcomer youth's mental health and create a sense of belonging (Johnson et al., 2017; ISS/FVI, 2016). Participation in sports, cultural, and volunteer activities have also been shown to improve mental health among refugees (Johnson et al., 2017; Rossiter et al., 2015).

This fact sheet briefly profiles refugee youth in BC, and considers supports associated with positive mental health.

BACKGROUND

Similar to five years earlier, 1% of youth who completed the BC AHS in 2018 had arrived in Canada as refugees. Among these youth, 27% had been in Canada for less than two years, 32% between two and five years, and 41% had been here for six or more years.

Youth who identified as refugees reported arriving in Canada from a variety of places including China, Iran, Syria, and the Philippines. They also reported a variety of family backgrounds including West Asian, East Asian, Southeast Asian, and African.

Eight percent of refugee youth identified as non-binary, 42% as female, and the rest as male. Most identified as straight (75%); while 5% identified as mostly straight; 5% as bisexual, lesbian, or gay; and 15% were not yet sure of their sexual orientation.

Current living situation

Almost all refugee youth (95%) were living in urban areas of BC, and most commonly lived in the Fraser region.

Refugee youth most commonly reported living with their mother or stepmother.

Thirty-nine percent of refugee youth reported caring for another relative (including a relative with a disability, a younger sibling or their own child) on an average school day.

Fourteen percent of youth who arrived in Canada as refugees had spent time in government care (vs. 5% of youth born in Canada), including 12% who had been in care in the past year (vs. 2% of youth born in Canada).

The majority of refugee youth (88%) spoke a language other than English at home, including 59% who did so most of the time.

MOST COMMON FAMILY BACKGROUND OF REFUGEE YOUTH	
West Asian	23%
East Asian	17%
Southeast Asian	17%
African	15%
European	11%
Latin/South/Central American	9%

Note: Youth could choose more than one response.

MOST COMMON PEOPLE REFUGEE YOUTH LIVED WITH	
Mother/stepmother	80%
Father/stepfather	67%
Sibling(s)/step-sibling(s)	62%
Grandparent(s)	9%
Other related adults	7%
Live with both parents at different times	6%

Note: Youth could choose more than one response.

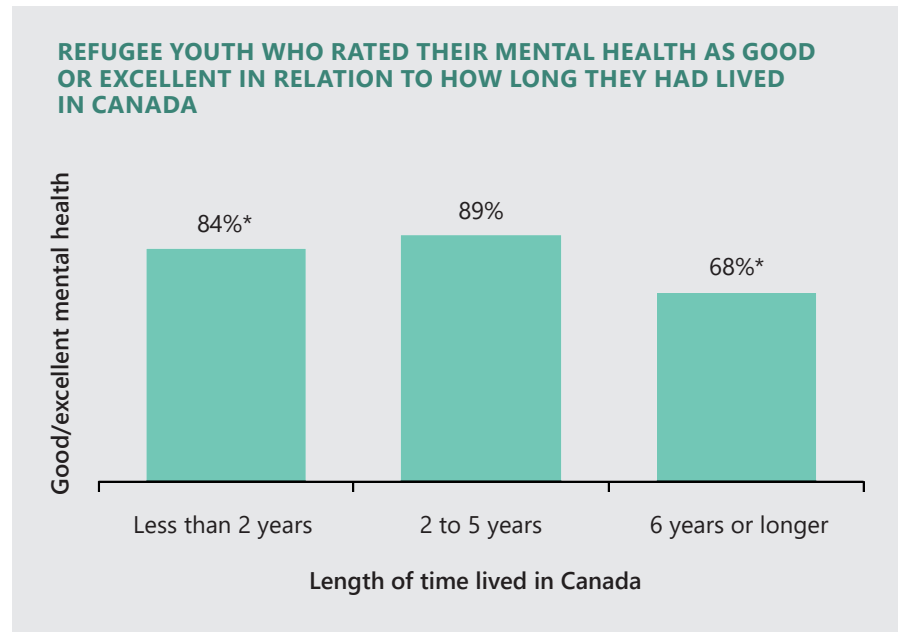
MENTAL HEALTH

Most refugee youth (79%) rated their mental health as good or excellent, as opposed to fair or poor. However, those who had lived in Canada for at least six years were less likely to rate their mental health as good or excellent.

When asked about mental health conditions, 14% of refugee youth reported having Depression and 9% had Anxiety Disorder/panic attacks. Youth who had lived in Canada for at least six years were more likely than those who had been in the country fewer years to report having Depression and/or an Anxiety Disorder/panic attacks.

Just under a third (31%) of refugee youth reported that they did not experience stress. Among those who experienced stress, most felt they managed their stress well (40%) or very well (20%), whereas the rest felt they managed it fairly well (29%) or poorly (12%). Around 1 in 10 reported experiencing so much stress (10%) or despair (11%) in the past month that they could not function.

Most refugee youth (68%) reported feeling happy most or all of the time in the past month, rated their quality of life positively, and felt good about themselves.



Note: The difference between 'Less than 2 years' and '2 to 5 years' was not statistically significant. *Percentage should be interpreted with caution as the standard error was higher than expected but is still within the releasable range.

QUALITY OF LIFE AND WELL-BEING (Refugee youth who agreed or strongly agreed)

I have a good life	76%
My life is going well	66%
I have what I want in life	60%
My life is going just right	60%
I wish I had a different life	19%
I usually feel good about myself	66%

SUPPORTING POSITIVE MENTAL HEALTH

Community supports

In the past year, 13% of refugee youth reported they had seriously considered suicide, and 7% had attempted suicide. Also, during this time, 17% had not accessed mental health services they felt they needed. The most common reason for not accessing services was not knowing where to go.

In the month before taking the survey, 16% of refugee youth had missed school because of mental health challenges, including 9% who missed three or more days for this reason. Also, 16% indicated they were too anxious or depressed to participate in sports or other extracurricular activities in the past year.

Around half (49%) of refugee youth felt like they were part of their community. These youth were more likely to report good or excellent mental health and to feel hopeful for their future than those who did not feel connected.

Most refugee youth reported having an adult in their life who helped them with their homework (52%), making appointments (77%), getting to appointments (76%), preparing for post-secondary (68%), and getting a job (66%). Youth who had these types of supports from an adult were more likely to report good or excellent mental health and to feel hopeful for their future.

Around two-thirds (65%) of refugee youth felt their teachers cared about them and just over half (52%) felt that other school staff cared about them. Those who felt they had these caring adults at their school were more likely to report feeling hopeful for their future and to experience positive mental health. For example, 76% of refugee youth who felt their teachers cared about them felt hopeful for their future, compared to 54%* who did not feel their teacher cared.

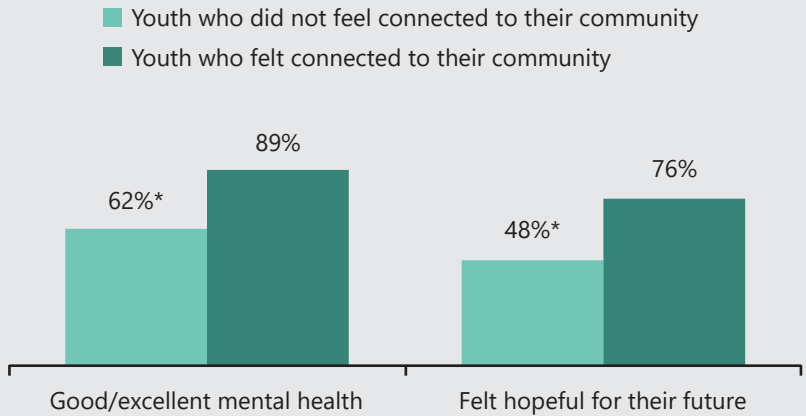
MOST COMMON REASONS FOR NOT ACCESSING MENTAL HEALTH SERVICES IN THE PAST YEAR (among refugee youth who felt they needed services)

Didn't know where to go	69%
Didn't want parents to know	55%*
Thought or hoped the problem would go away	47%*
Afraid of what the doctor would say or do	43%
Afraid someone I know might see me	39%*
Too busy to go	33%*
Didn't think I could afford it	25%

Note: Youth could choose more than one response.

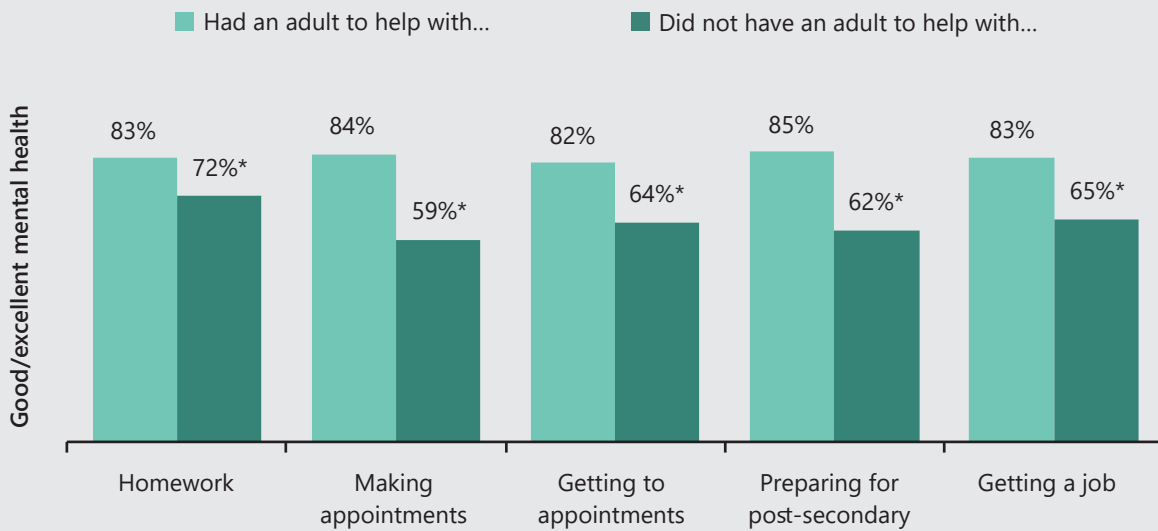
*Percentage should be interpreted with caution as the standard error was higher than expected but is still within the releasable range.

POSITIVE MENTAL HEALTH AND HOPEFULNESS IN RELATION TO HOW MUCH REFUGEE YOUTH FELT CONNECTED TO THEIR COMMUNITY



*Percentage should be interpreted with caution as the standard error was higher than expected but is still within the releasable range.

HAVING ADULT HELP IN RELATION TO REPORTING GOOD/EXCELLENT MENTAL HEALTH (among refugee youth)



Note: For 'Homework,' the difference between having an adult to help and not having an adult to help was not statistically significant.
*Percentage should be interpreted with caution as the standard error was higher than expected but is still within the releasable range.

PEOPLE REFUGEE YOUTH WENT TO FOR HELP IN THE PAST YEAR

Teacher	57%
School counsellor	36%
Sports coach	28%
Other school staff	28%
Youth worker	19%
Social worker	15%
Spiritual leader	14%
Mental health counsellor	12%

Note: Youth could choose more than one response.

Refugee youth asked a variety of people for help in the past year. They most commonly approached a teacher for help.

Among those who had reached out for help, most found the adult they approached to be helpful. For example, 91% found their teacher helpful; 84% found their school counsellor helpful; 79%* found a sports coach helpful; and 74%* found a youth worker helpful.

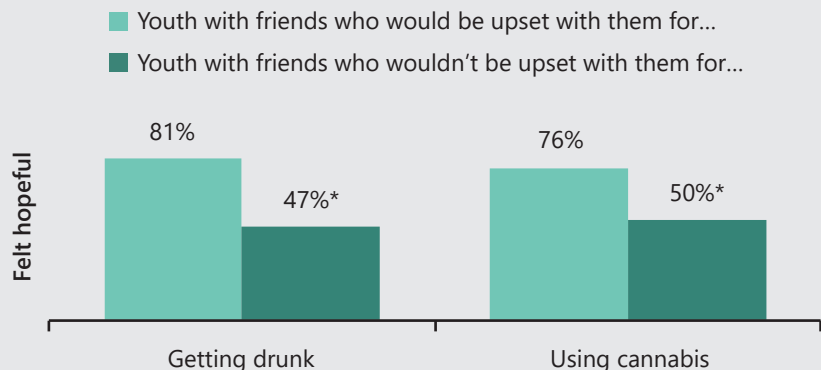
In total, 91% of refugee youth had found at least one adult they approached for support to be helpful, including 36% who had found three or more different types of adults to be helpful when approached (e.g., their teacher, school counsellor and sports coach).

Peers

Most refugee youth (83%) had at least one close friend in their school or neighbourhood, and 70% had three or more close friends. Also, 46% had at least one close friend online whom they had never met in person, and 29% had three or more such friends.

Students were asked about their friends' attitudes toward potentially risky behaviours. Refugee youth who had friends who would be upset with them for dropping out of school were more likely to feel hopeful for their future (69% vs. 51%* whose friends would not be upset with them for this reason), and those who had friends who would be upset with them for getting drunk or using cannabis were more likely to report good or excellent mental health and to feel hopeful for their future.

REFUGEE YOUTH WHOSE FRIENDS WOULD BE UPSET WITH THEM FOR GETTING DRUNK AND USING CANNABIS IN RELATION TO FEELING HOPEFUL FOR THEIR FUTURE



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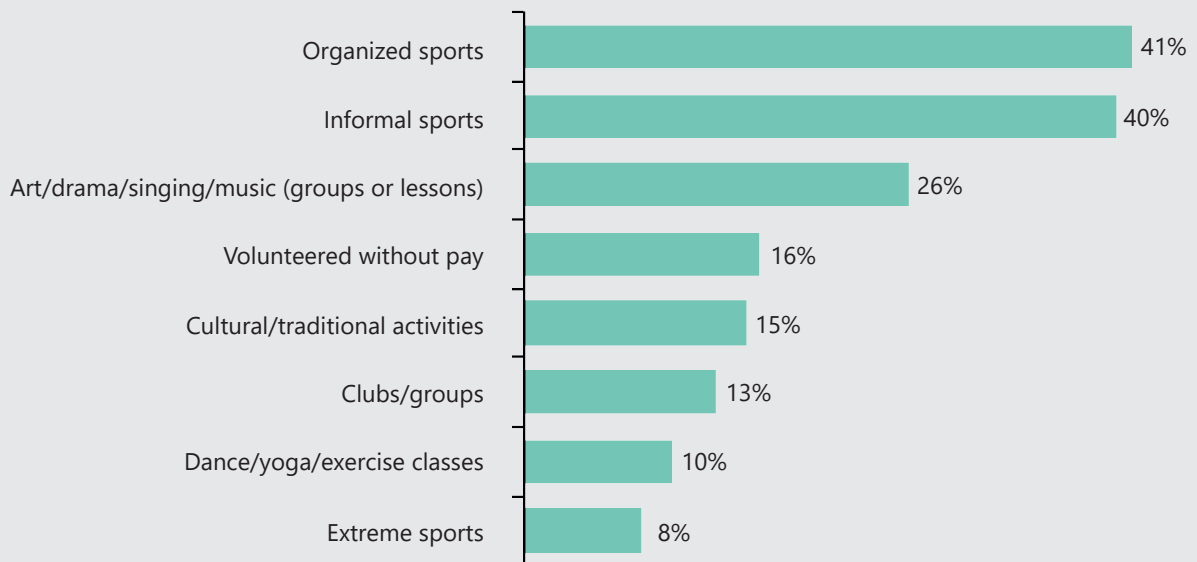
Extracurricular activities

In the past year, 87% of refugee youth participated in at least one extracurricular activity (such as sports, dance, clubs, or volunteering), and 74% did so at least weekly.

Males were the most likely to participate weekly in organized sports (e.g., 56% of males vs. 29% of females) and informal sports (50% of males vs. 31% of females), while females were more likely than males to participate weekly in volunteering activities (24% vs. 8%). Youth who participated in weekly activities were more likely to report feeling good about themselves (69% vs. 51%*).

Almost half (48%) of refugee youth felt that the activities they participated in were meaningful to them, and just over a third (34%) reported that their ideas were listened to. Youth who felt their activities were quite or very meaningful were more likely to report feeling good about themselves (72% vs. 52%* who felt their activities were less meaningful) and to be able to identify something they were good at (93% vs. 66%*).

AT LEAST WEEKLY PARTICIPATION IN EXTRACURRICULAR ACTIVITIES IN THE PAST YEAR (among refugee youth)



Note: Youth could choose more than one response.

SUMMARY

Data from the 2018 BC AHS shows that refugee youth can face challenges to their mental health. Supporting these young people to develop and maintain connections with their peers, school and community, and to feel valued and listened to can be associated with positive mental health and feeling hopeful for the future.

RESOURCES

Immigrant Services Society of BC offers essential newcomer services including multilingual wellness supports and a newcomer youth hub. Visit www.issbc.org/ for more details.

MOSAIC serves immigrant, refugee and migrant communities across BC, and offers a variety of youth programs and opportunities. Phone: 604 254 9626 Email: info@mosaicbc.org or visit www.mosaicbc.org/

The Canadian Paediatric Society has developed a mental health promotion guide aimed at adults working with refugee and other newcomer youth: *A guide for health professionals working with immigrant and refugee children and youth*, available at www.kidsnewtocanada.ca/mental-health/mental-health-promotion

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