



Kootenay Boundary: BC Adolescent Health Survey IV Fact Sheet



This fact sheet provides a brief overview of the 2008 Adolescent Health Survey findings for the Kootenay Boundary area. School Districts included in this area are: Kootenay Lakes (SD 08), Arrow Lakes (SD 10), Kootenay-Columbia (SD 20) and Boundary (SD 51). All school districts in this area participated in the survey.

For a more detailed look at the results for this area see *A Picture of Health: Kootenay Boundary* available at www.mcs.bc.ca

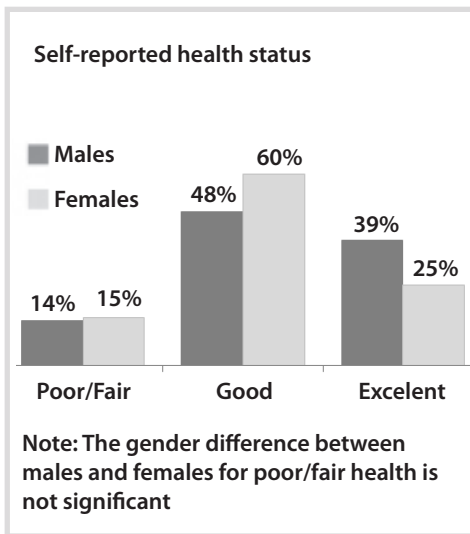


Students in this area identified with a broad range of ethnic and cultural backgrounds. The majority were of European heritage (74%). Thirteen percent identified as Aboriginal/First Nations. Four percent were born outside of Canada.

Physical Health

Most youth in this area are healthy; 86% reported that their health was good or excellent, which was consistent with both provincial results and results for this area in 2003.

In the past year, 12% of males and 18% of females did not get medical help when they felt they needed it; these were comparable to provincial rates. Among those youth who did not access needed medical care, the most common reason was because they thought or hoped the problem would go away (52%).



Substance Use

Smoking rates were similar to 2003 and more youth smoked locally than smoked in the province as a whole (37% vs. 26%). However, students who did smoke waited longer to start than in 2003.

Similar to the rate in 2003, 71% of youth had tried more than just a few sips of alcohol. As in 2003, over half (53%) of local students who had tried alcohol binge drank in the past month. Forty-four percent of students had tried marijuana.

Sexual Health

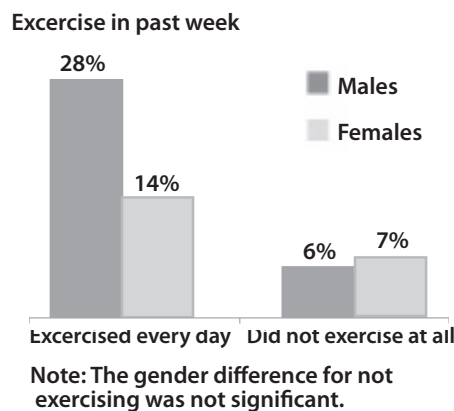
Thirty-one percent of youth had ever had sexual intercourse. The percentage of youth that reported ever having sexual intercourse was comparable for males and females and increased with age. Among sexually active youth, the most common age for first having sex was 15 years.



“ I am a vegetarian. I am very healthy. I plan on staying that way.”

Sports & Leisure

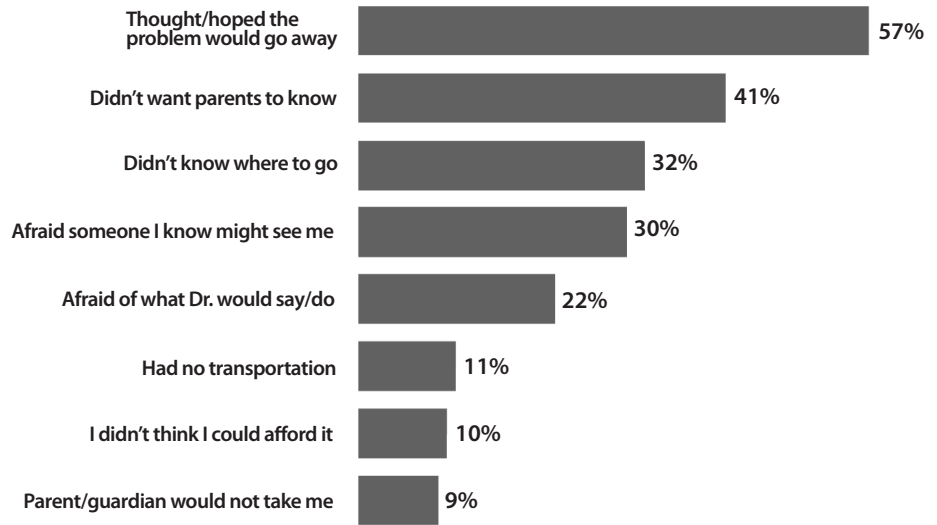
The majority of youth participated in extracurricular sports activities on a weekly basis: 61% of youth took part in sports activities with a coach (e.g., school teams, swimming lessons), and 77% participated in physical activities without a coach (e.g., biking, road hockey). The percentage of youth who watched TV for three or more hours dropped from 37% in 2003 to 22% in 2008. Youth in this area were also less likely than those in the province as a whole to be on the Internet for three or more hours a day (22% vs. 27%).



Mental Health

Eleven percent of students reported seriously considering suicide in the past year, which was comparable to the 2008 provincial rate and lower than the rate in this area in 2003 (18%). A quarter of female students and 13% of males indicated cutting or injuring themselves on purpose without trying to kill themselves at some point in their lifetime.

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



Injuries & Injury Prevention

In the past year, 34% of local students were injured seriously enough to need medical attention. Although this is above the provincial rate of 29%, it represents a local decrease from 42% in 2003. There was also some improvement in injury prevention behaviour. Sixty-six percent of students in this area always wore a seatbelt when riding in a motor vehicle, which was an increase from 55% in 2003. However, bike helmet use was lower among local cyclists than across the province (19% vs. 24%).

Abuse & Violence

Similar to youth across the province, 19% of students reported that they had been physically abused and 9% had been sexually abused (both these rates were unchanged locally from 2003). In total, 23% of youth had experienced either form of abuse and 5% had experienced both types of abuse.

Twenty percent of students were cyber-bullied in the previous year, similar to the provincial rate. Females were more likely than males to have been cyber-bullied (26% vs. 14%).

Protective Factors

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.

Protective factors can reduce the likelihood of experiencing negative outcomes even for vulnerable youth. For example, a number of youth in the Kootenay Boundary area reported being victimized or bullied at school and 15% of these youth had seriously considered suicide in the past year. However, being connected to their family, school or cultural group, being engaged in their extracurricular activities, and having peers with healthy attitudes about risk behavior were each associated with a lower risk of suicidal ideation.

This fact sheet was produced with information from 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.

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