

Against the Odds:

A profile of marginalized and street-involved youth in BC

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The McCreary Centre Society is a non-government non-profit organization 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 address unmet health needs of young people. Areas of interest include:

- Health risk and protective factors
- Health promotion
- Positive youth development
- Youth participation and leadership skills development

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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

McCreary project team

Annie Smith
Managing Director

Elizabeth Saewyc
Principle Investigator (PI)
Research Director

Marika Albert
Research Associate

Laura MacKay
Research Associate

Melissa Northcott
Research Assistant

Minda Chittenden
Research Associate

Alison Liebel
Communications Coordinator

Jennifer Cameron
Research/Administrative Assistant

Sarah Day
Research/Administrative Assistant

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Community researchers

Abbotsford/Mission

Jessica Heintz
Tara Hurley

Kamloops

Jessica Eadie
Sam Mather

Kelowna

Amanda Durham
Brad Sampson

Nanaimo

Sandy McLean

Prince George

Farrah Major
Sheila Rennie

Prince Rupert

Kim Godfrey
Miles Moreau

Surrey

Jannessa Eckman
David Sadler

Vancouver

Jennifer Cameron
Rebecca Jules
Lacey Rainer

Victoria

Morgan Boc
Naedean Davidson

All photographs included in this report were taken by the community research teams in Abbotsford/Mission, Kamloops and Kelowna.

Advisory committee

Renata Aebi
Director of Youth & Employment Services
Family Services of Greater Vancouver

Gwen Cardinal
Director of Social Programs
Prince George Native Friendship Centre

Mike Gawliuk
Area Director of Youth and Family Services
Central Okanagan Boys and Girls Clubs

Lynda Gray
Executive Director
Urban Native Youth Association

Jennifer Harrington
Director of Cultural and Social Development
Programs
Prince George Native Friendship Centre

Todd Haspect
Club Supervisor
Victoria Youth Empowerment Society

Rudy Kelly
Program Director
Friendship House Association of Prince Rupert

Simone Maassen
Youth Resource Centre Supervisor
Abbotsford Community Services

Neal Martin
Intake Coordinator, Special Youth Detox
Victoria Youth Empowerment Society

Sandy McLean, RN
Nurse, Nanaimo Area Street Outreach and
Needle Exchange Clinic
Nanaimo and Region Services for Families

Myles Moreau
Street Outreach Services Coordinator
Prince Rupert, BC

Paul Mulholland
Youth Services Consultant
Child Welfare Policy Team
Integrated Policy and Legislation Team
Ministry of Children and Family Development

Michel Pouliot
Manager of Youth Services (Fraser Region)
Pacific Community Resources Society

Laurel Scott
Team Leader
Interior Community Services Safe House
Interior Community Services

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Participating agencies

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Abbotsford and Mission

Cyrus Centre, Abbotsford
Youth Resource Centre, Abbotsford
Youth Resource Centre, Mission Community Services, Mission

Kamloops

Boys and Girls Club of Kamloops
The Youth Safe House, Interior Community Services
Twin Rivers Education Centre

Kelowna

Central Programs and Services (SD 23)
MCFD Youth Services and Youth Probation
Okanagan Boys & Girls Club - Downtown Youth Centre
Okanagan Boys & Girls Club - Westside Youth Centre
Okanagan Families Society

Nanaimo

Nanaimo Area Street Outreach and Needle Exchange Clinic
Nanaimo Youth Services Association
Youth Housing, Nanaimo Youth Services Association

Prince George

Elizabeth Fry Society Teen Map (Alt. Ed Program)
Prince George Native Friendship Centre: Reconnect and main facility

Prince Rupert

Community Enrichment Society
Community Futures (Treena Decker)
Salvation Army
Street Spirit and Planet Youth - Friendship House Association of Prince Rupert

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Newton Youth Resource Centre
Pacific Community Resources Society
Reconnect
SEY (Sexually Exploited Youth)

Vancouver

Britannia Teen Centre
Broadway Youth Resource Centre
Cedar Walk Alternate School Program
Directions Youth Services - Dusk Till Dawn, Family Services of Greater Vancouver
Hobbit House
Knowledgeable Aboriginal Youth Association
Roundhouse Community Centre Street Youth Arts Drop-In
Urban Native Youth Association
Vancouver Aboriginal Friendship Centre
Youth Union Gospel Mission

Victoria

ACCESS
Alliance Club
Artemis
Girls Alternative Program
KEYS (Kiwaniis Emergency Youth Shelter)
Langford Alternative School
SYD (Specialized Youth Detox)
Victoria Youth Empowerment Society (VYES)
VYES Downtown Office
Victoria Native Friendship Centre
Victoria Youth Clinic
YMCA

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Introduction

There are many misconceptions and stereotypes about marginalized and street-involved youth in our society. Conflicting and inaccurate ideas about why someone panhandles, or is disconnected from their family, can often obscure the real reasons youth become disenfranchised and/or street-involved. These ideas often contribute to the further alienation of the youth in question, and lead to their health needs being misunderstood, marginalized or ignored.

Research with these youth is essential to develop an accurate picture of their life experiences and current needs. This in turn can be used to ensure all youth get the opportunity to fully engage in their community and to develop the skills of citizenship.

“Open the eyes of people who look down on street kids.”

18-year-old female

The study presented here was conducted in nine communities across British Columbia (BC). The findings are based on the results of surveys completed by marginalized youth in the North, Interior, Fraser Valley, Vancouver Island and Vancouver. A false impression exists that marginalized youth only live in large urban centres but, as this report demonstrates, they are in communities all across BC and the issues affecting them are similar.

The youth who participated in this survey reside at the margins of our society, making it difficult to access information about their life experiences through conventional research methods. This can be further complicated by issues such as: the transient nature of the population; the instability of their living situations; their complicated home and school life; and their mistrust of adults. However difficult it is to access, it is vital to gather this information to ensure the needs of marginalized youth are included in the process of program and policy development.

In 2000, the McCreary Centre Society (MCS) conducted a health survey of marginalized and street-involved youth (street youth) in six communities across BC. The results of that study are presented in the report *No Place to Call Home: A profile of street youth in British Columbia*. This current study (2006) looks at many of the same issues, considers emerging trends and health challenges and, by comparing the results with those of the 2000 survey, reflects on what progress has been made over the past six years.

In response to the survey question, “If you could change anything in your community to help street youth, what would it be?” one of the youth wrote, “Open the eyes of people who look down on street kids.” This report aims to do just that.

“[We need] people who actually care about homeless or street kids.”

Female from Vancouver Island

The Context

Since MCS conducted the 2000 survey with street-involved youth, many policy and legislative changes have occurred that directly affected the health and well being of marginalized youth in British Columbia. These changes have occurred at the local level (civic policy) and at the provincial level (legislative changes, the re-organization of ministries and overall policy changes).

Since the 1980's, community and social service programs have felt the pressure from provincial government cut-backs, unstable funding and changing government priorities. Many community and social service programs were also seriously affected by budget cuts and governmental re-organization in 2001. Since then, BC's child poverty rate has increased, reaching a high of 24% in 2003. BC still had the highest child poverty rate in Canada – well above the national average of 18% (2004)¹.

1. This information is based on Statistics Canada Census 2001 data and presented by FirstCall BC

Homelessness

Homelessness in general, and among youth in particular, remains an international issue despite the Universal Declaration of Human Rights, which states: *“Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing, medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.”* The UN Declaration of the Rights of the Child aims to further ensure that all children (below the age of 18), receive special care and attention to ensure their human rights are protected.

In Canada, the federal government recognises that homelessness and risk of homelessness increases the likelihood of developing a range of health problems including psychological distress, mental health problems, chronic health conditions, poor management of health conditions and premature death. A person is considered homeless in Canada if they have no fixed address or security of housing tenure.



“[We need to] remove the apathy and replace it with empathy.”

18-year-old from Vancouver

In BC, a narrower definition of homelessness has sometimes been used. For example, to be included in the Greater Vancouver Homelessness Count, a person had to have no place of their own where they could expect to stay for more than 30 days or had to be in a situation where they were paying no rent. The count included people in emergency shelters, transition housing, those located who were couch surfing, and those who were without physical shelter.

Statistics provided by the Homeless Count and by the GVRD make depressing reading: affordable housing is a problem for one-third of households in this region; Aboriginal people are over-represented in the homeless population; Greater Vancouver has more working poor than any other major Canadian city; and from 2002 to 2005 the number of homeless doubled from 1,121 to 2,174.

This does not tell the full story for youth either in Greater Vancouver, or in the province as a whole. When the Homeless Count was completed in September 2005 the number of youth captured in the count had decreased as a percentage of the overall homeless population from 13% to 4%. However, many more youth were not included in the count as they did not come to the attention of those conducting the interviews. This was because

they were less likely to be in shelters and transitional housing than adults. Of those youth that were located: 33% were couch surfing; 30% were living elsewhere (unspecified); and 31% had no source of income. Youth also reported higher rates of addictions (56%) than adults (49%).

Aboriginal youth are over-represented among homeless youth and face many additional challenges as they aim to successfully navigate adolescence. As has been widely documented, the legacy of colonialism, including the inter-generational impacts of the residential school system, continue to negatively impact Aboriginal youth and their communities. These external forces have left Aboriginal youth at greater risk of experiencing negative health consequences related to poverty, discrimination, loss, trauma, and various forms of violence than their non-Aboriginal peers.

As a result of this, and of the increased numbers of Aboriginal youth who were found to be street involved in this survey (among communities that took part in 2000 and 2006) MCS, in collaboration with Aboriginal partners across the province, will conduct further analysis of the data provided by Aboriginal youth in this survey. A report of the findings will be published in late 2007.

At A Glance

The lives of marginalized and street-involved youth are complex and filled with challenges, dangers and opportunities. Many youth, despite having the odds overwhelmingly stacked against them, are working hard, attending school and looking for opportunities to change their lives for the better. However they cannot do it alone. The youth in this survey face unacceptable levels of sexual exploitation, violence, abuse and discrimination, which must be addressed in order to ensure their right to positive health outcomes and a successful transition into adulthood.

Key findings

- Aboriginal youth were disproportionately represented among youth who were marginalized and street-involved, and the percentage had increased sharply since 2000 (from 36% to 57%).
- Gay lesbian, bisexual and questioning teens were also over-represented among marginalized and street-involved youth: one in three females and one in ten males identified as gay, lesbian and bisexual.
- Forty percent of the youth had spent time in government care and almost one in ten (9%) were in a foster or group home at the time of the survey.
- Unlike in 2000, BC does not appear to be absorbing large numbers of youth from outside BC.
- Despite challenges with their parents and other family members, youth in the survey reported strong connections to their families.
- More than one in three youth who were staying in an abandoned building, tent, car, squat or on the street, were still attending school.
- One in three of the youth reported that they were working at a legal job.
- Smoking has declined since 2000 across the province, although three out of four of the youth were still current smokers.
- More than one in four of the youth had been exposed to alcohol or marijuana before they became teenagers.
- Marginalized and street-involved youth were three times more likely to be physically and sexually abused than youth the same age in school (AHS 2003).
- More than one in three of the youth reported that they had been sexually exploited.
- More than half of youth reported one or more mental or emotional health concerns.
- Youth/Outreach workers were identified as among the most helpful professionals.
- Youth, in each of the nine communities surveyed, identified job training and shelter as the most needed services.

About the Survey

The research design

This study was a population survey that used a participatory research design. It is based on the BC Adolescent Health Survey (AHS) – a study that examines the physical and emotional health of youth attending BC schools – and a previous MCS survey of marginalized and street-involved youth that took place in 2000.

The survey consisted of a paper and pencil questionnaire administered by teams of Community Researchers in nine communities across the province. The community research teams were made up of experiential youth, and staff and volunteers from local agencies. The Community Researchers and an Advisory Committee of government and community agency experts helped develop the sampling method and update the questionnaire through an interactive process, facilitated by MCS. Feedback from experiential youth, who participated in a pilot of the questionnaire, also helped to refine the wording and topics in the survey.

The implementation of the survey

Following this intensive process of community collaboration, the survey was administered by the Community Researchers in each of the nine communities. These local research teams proved highly successful in reaching and recruiting youth between the

ages of 12 and 18 to participate in the survey, as they were able to create a level of legitimacy and trust with the survey participants that may not have otherwise existed. This is particularly important when trying to access a population that demonstrates an overall wariness and mistrust of adults and of ‘outsiders’ in general. Frequently, survey participants felt that the survey was so important that they encouraged their friends to participate. In some cases youth, who were unable to participate because they were too old, actively recruited other youth who were within the age range.

Survey participants

In total, 762 youth across nine communities in BC participated in the survey between October and December 2006. Community Researchers varied the location, time and day they conducted the survey to ensure they accessed as many local marginalized and street-involved youth as possible. This included youth who did not access community services and youth who may not normally come to the attention of policy makers and program developers.

It is difficult to establish an overall population count of youth who fit the criteria for inclusion in this survey, because of the transient nature of the population, and because the level of street-involvement fluctu-

ates over the course of the year for many youth. Based on estimates given by service providers, Advisory Committee members, and the Community Researchers, the survey was completed by the majority of marginalized and street-involved youth available in most of the nine communities during the three months the survey was conducted. The percentage of youth who participated in the survey on Vancouver Island was lower than would typically be expected due to a number of factors, including an influenza outbreak and unusually bad weather. Refusal rates across the nine communities ranged from 0-3% among those youth who were eligible to complete the survey. Therefore, it appears that most marginalized youth within the targeted communities who were within the survey's age range (12-18 years) were represented.

This report not only describes the experiences of youth currently marginalized and street-involved, but also considers their experiences in relation to the information provided by similar youth in 2000. Where comparisons are offered between youth in 2000 and 2006, only those five communities that participated in both years are included. The comparisons are therefore based on the responses of youth in Vancouver, Victoria, Abbotsford/Mission, Surrey and Prince Rupert and do not include the specific experiences of the youth in Kelowna, Prince George, Nanaimo and Kamloops.

Participating Communities	
2000	2006
Vancouver	Vancouver
Victoria	Victoria
Abbotsford & Mission	Abbotsford & Mission
Surrey	Surrey
Prince Rupert	Prince Rupert
White Rock & Langley	Nanaimo
Sunshine Coast	Prince George
—	Kamloops
—	Kelowna

Number of Survey Participants in 2006 by Region	
North	148
Interior	150
Fraser Valley	135
Vancouver	212
Vancouver Island	117

For more detailed information about the research methods and analysis, please contact mccreary@mcs.bc.ca

A Word About Terminology

“[The thing I like best about my life is] who I am and what I am even tho’ I am not much.”

17-year-old from Vancouver Island

This study was originally targeted at “street youth” and aimed to survey a similar population of young people as those surveyed in 2000 (*No Place to Call Home*). However, as the survey administration began and youth completed the surveys, it became clear that there was a problem with the term “street youth.”

As in 2000, the first page of the survey explained that “street youth” was being used as the term to describe any young people involved in a street lifestyle. This included “being homeless, panhandling, involvement in the sex trade, selling or using drugs, or engaging in criminal activities.”

Some young people were concerned that the survey was not intended for them, for example, because they had recently moved into stable or relatively stable accommodation after living on the street, because they still lived with their parents and just “hung out” in the street scene, because they felt their situation was only temporary and they

would soon have a home, because they did not experience the situation they were living in as sexual exploitation (even though they may have been told that it was) and for many other valid reasons as unique as the youth themselves.

These youth were reassured that the survey was intended for them, that their voices were important and deserved to be heard, and that their experiences were as valid as any other youth. The results of the survey presented in this report, therefore, offer the experiences, thoughts and feelings of a wide range of marginalized and disenfranchised youth, some of whom were proud to be called “street-involved” and some of whom did not feel this label was appropriate or acceptable to them.

As a result, and at their request, the youth who completed this survey are referred to throughout this document simply as youth. At points where this is not possible – for example, when questions on the survey ask youth specifically about being street-involved (“Before you were street-involved did you...?”) – the terms street-involved, marginalized and disenfranchised are used interchangeably.

A Profile of the Youth

Age and gender

The youth surveyed ranged in age from 12 to 18 years, the average age was 16 years old and one third of the youth were 18 years old. Forty eight percent were male, 50% were female, 1% identified themselves as transgender and 1% did not specify their gender.

Regionally, there were some differences in the ages of the youth surveyed. Females were younger than males in the Fraser Valley (the average age for females was 16 compared to 17 for males) but in all other regions there were no significant differences in age between genders. Among males across all the regions, participants from the North and Interior were younger on average than males in the other regions. Among females, participants were younger on average in the North, the Interior and the Fraser Valley, than in Vancouver and on Vancouver Island.

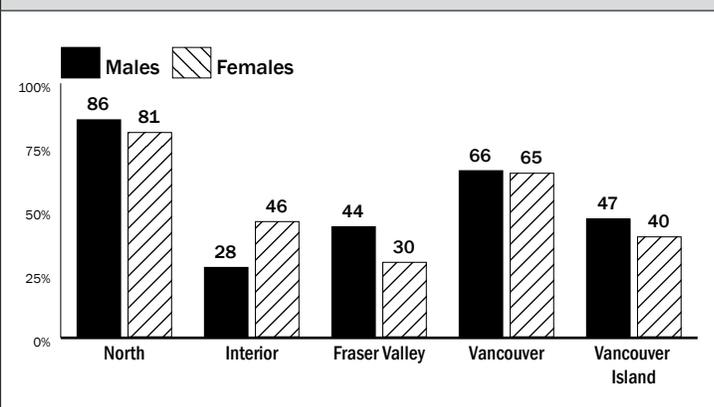
Aboriginal children are over-represented among children who experience poverty; 40% of off-reserve Aboriginal children are living in poverty. (Statistics Canada 2001 Census data.)

Ethnicity

Aboriginal youth were over-represented in the sample of youth surveyed. More than half of youth who were surveyed indicated some Aboriginal heritage (54%), compared to 7% of youth in school (AHS 2003). Of those who indicated only one ethnic background, 40% reported exclusively Aboriginal background. Of those who identified more than one ethnicity, the most common combination was Aboriginal and European.



Youth Reporting Aboriginal Heritage



This is a striking increase of Aboriginal youth surveyed in the communities that participated in both 2000 and 2006. As in 2000, the communities with the highest proportions of Aboriginal youth in 2006 were Prince Rupert and Vancouver. This percentage has risen in Vancouver from 37% to 65% and in Prince Rupert from 76% to 88%. Overall, the numbers of males who reported Aboriginal heritage rose from 34% to 58% and the number of females from 38% to 56%.

Among Aboriginal youth who participated in the survey, 58% said they had First Nation status, 29% were non-status, 11% were Metis, and 1% were Inuit. Less than half of the Aboriginal youth surveyed (45%) had ever lived on a reserve and 10% had lived on a reserve for most of their life.

Other ethnic groups represented in the survey included European, Hispanic, African, East Asian, South Asian and South East Asian. A number of youth reported that they did not know their ethnic background.

Ethnicity of Youth in the Survey

Aboriginal only	40%
European only	33%
Multi-ethnic	14%
Don't know	8%
Hispanic only	1%
African only	1%
East Asian only	1%
South East Asian only	1%
South Asian only	1%

“[The thing I like best about my life is that] I’m First Nations.”

17-year-old from Vancouver

Sexual orientation

Compared to youth who responded to the school based Adolescent Health Survey (2003), there are a disproportionate number of gay, lesbian and bisexual youth who become street-involved or in other ways disenfranchised. Fewer than 60% of the youth surveyed identified as exclusively heterosexual and more than one in five identified as gay, lesbian or bisexual. Lesbian and bisexual females were the most common sexual minority, with three times more female youth identifying as such than in 2000. Almost one in ten youth (9%) were unsure of their sexual orientation.

The percentage of gay, lesbian and bisexual youth who are marginalized or street-involved also appears to be increasing. When the communities who participated in both 2000 and 2006 were compared, the percentage of youth identifying as gay, lesbian or bisexual had risen from 18% to 25%.

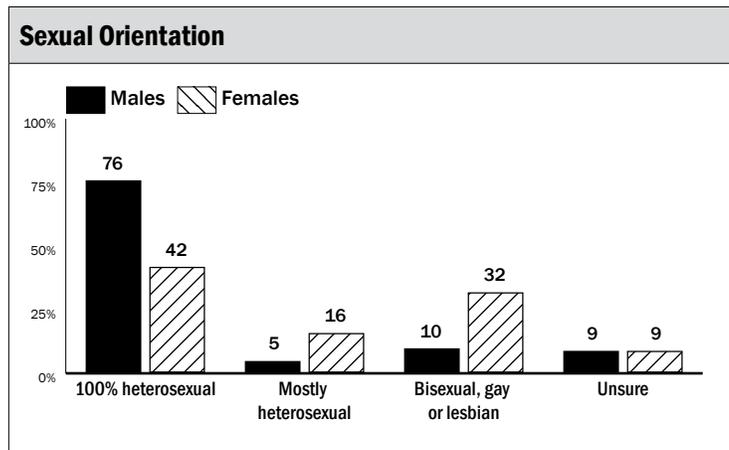
Place of origin

Twelve percent of male youth and 4% of female youth were born abroad. The highest percentage of youth originally from outside of Canada were in the Fraser Valley (10%) and the lowest percentage were in the Interior (2%). Only a small percentage (2%) had lived in Canada for five years or less.

Youth were asked “Before you started hanging out on the streets, where did you come from?” Half reported that they were from the same area they were surveyed in, 34% had come from somewhere else in BC, 14% had come from somewhere else in Canada and 2% had come from outside of Canada.

“I’m here, I’m queer and I’m used to it.”

18-year-old male



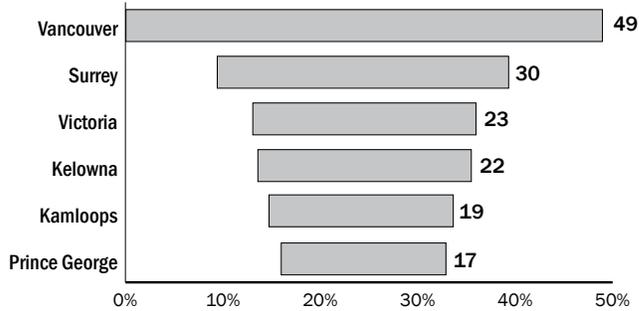
Most of the youth (61%) reported that they had spent time on the streets of one or more communities, in addition to the one in which they were surveyed, and 10% had “hung out” in 5 or more additional communities.

Unlike in 2000, BC does not appear to be absorbing a large number of youth from elsewhere in Canada. In 2000, 61% in Vancouver and 33% in Victoria were from elsewhere in Canada, but in 2006, only 20% of youth in Vancouver and Victoria were from outside of BC. However, this may be explained by the fact that the 2000 survey was conducted over a six month period, from June to December, so may have included a number of youth who migrated to BC for the summer.

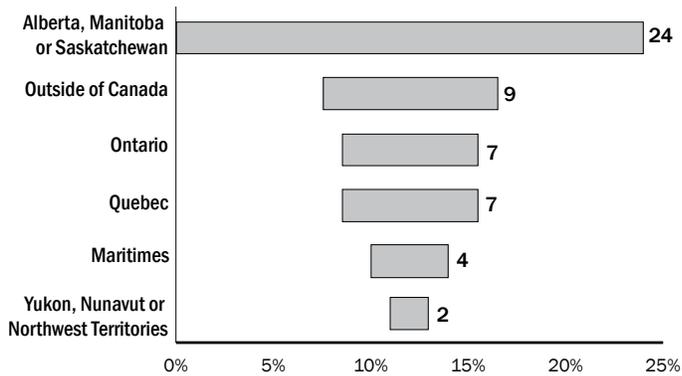
84% of youth surveyed were originally from BC.

Where Youth Spent Time on the Streets

Within BC



Outside of BC



Reasons for Hanging Out on the Streets

(Youth could choose more than one option)

	Males	Females
Friends on streets [†]	32%	49%
Do not get along with parents [†]	24%	34%
Feel accepted	25%	32%
Ran away [†]	18%	28%
Alcohol/drug addiction [†]	16%	25%
Kicked out	25%	19%
Violence/abuse at home	13%	17%
Didn't like foster/group home	7%	11%
No job	12%	9%
Travelling	9%	8%
No affordable housing	9%	8%
Sexual orientation [†]	2%	6%
Avoiding criminal charges	7%	4%
Other	11%	10%

[†] Significantly different between males and females

Reasons for hanging out on the streets

Youth were asked to choose among various reasons why they were currently street-involved (they could choose more than one reason). Almost half of the females (49%) reported that they hung out on the streets because their friends did, compared to 32% of males. One in three females (34%) also reported hanging out on the streets because they did not get along with parents, compared to 24% of males. Gay, lesbian and bisexual youth were more likely than others to report that they hung out on the streets not only because of conflict at home about their sexual orientation (12% gay/lesbian/bisexual vs 1% heterosexual), but also because they did not get along with parents (39% vs 27%) and because they felt accepted on the streets (39% vs 27%). Among all youth, the five most common reasons for hanging out on the street were the same in 2006 as they were in 2000.

Family & Home

Family

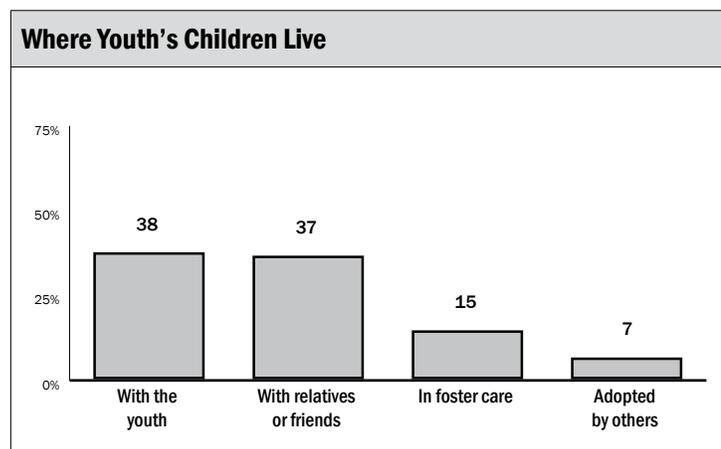
The survey included a series of questions about relationships with parents and family, which were also asked on the 2000 survey of street-involved youth and the province-wide school-based survey of 2003. Together these questions form a measure of family connectedness – strong family connectedness has been linked to positive health outcomes for youth, as well as lower risk of engaging in behaviours that can compromise health. For example, in the 2003 school-based Adolescent Health Survey, students with higher family connectedness were more likely to report good or excellent health and less likely to report suicide attempts, smoking, or risky sexual behaviours. In this survey, as in the school survey (AHS 2003), on average females report slightly lower connectedness to their families than males do.

Seventy-nine percent of males felt that members of their family understood them, compared to 74% of females. Nine out of ten youth (92% of males and 89% of females) felt that their mother cared about them and seven out of ten (72% of males and 73% of females) felt that their fathers cared about them. The majority were satisfied with their relationship with their parents at least some of the time. Youth were more dissatisfied in relationships with fathers (31% were not satisfied) compared to mothers (20%). Females were less likely to be as satisfied with their relationship to their mothers than males were (25% vs 16%).

Several youth made the comment that they recognized their “street family” as more supportive than their original or biological family, and were able to report strong connections and ties with the surrogate families they had created.

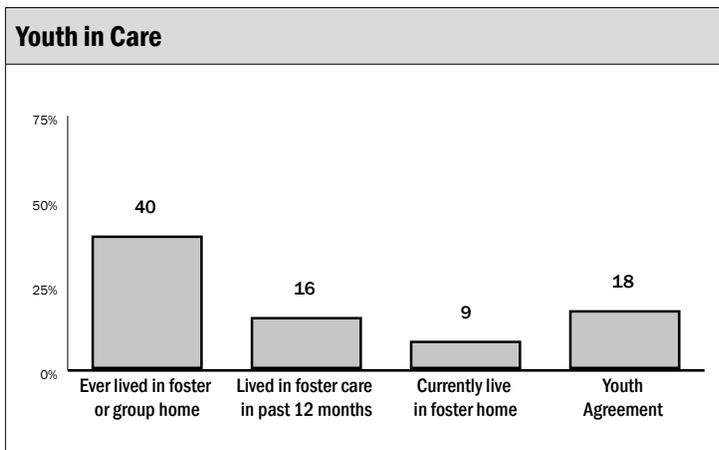
Youth as parents

Some of the youth in this survey were also parents – 13% reported that they had children. Among those with children: 38% said their children lived with them; 37% said their children lived with relatives or friends; 15% of their children lived in foster care; and 7% of their children had been adopted by others.



[What I like best about my life is] waking up in the morning [and] watching my son grow up.”

Female from Vancouver



“My dad was really good to me. He recently passed away and that had a huge negative effect on me.”

18-year-old female

Pets

More than half of youth (53%) reported having at least one pet. Although youth who lived in stable types of housing were more likely to report living with a pet, 38% of those who lived in the most precarious types of housing (on the streets, safe houses, hotels, squats, abandoned buildings, tents, cars and couch surfing) also reported having a pet. Among all youth, 14% had dogs, 20% had cats, 12% had multiple pets and 7% had other types of pets (including rats, fish and birds). Youth who had a pet were three times more likely to be currently attending school than those who did not. This was true even among youth in the most precarious housing situations (eg. living on the street or in a squat/abandoned building).

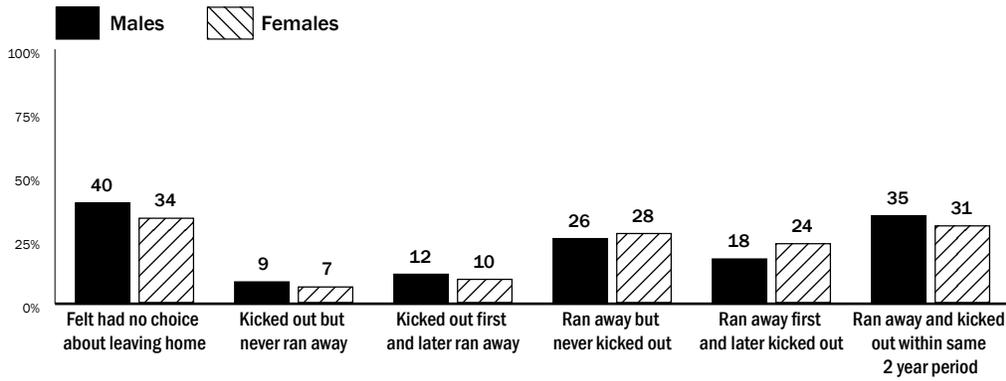
Home

Government care

Many of the youth had experienced living in government care – 40% reported that they had lived in foster care or a group home at some point in their life, unchanged from 2000. Sixteen percent had lived in a foster or group home in the past year and 9% were in a foster or group home at the time of the survey.

Overall, 18% of the youth also reported that they had entered into a Youth Agreement with the Ministry of Children and Family Development (MCFD) at some point in their lives. A Youth Agreement is a legal agreement between MCFD and a youth aged 16-18, which allows them to live independently if they have no parent or other person willing to take responsibility for them or if they cannot live with their family for reasons of safety. A youth agreement can provide residential, educational, financial or other support services.

Leaving Home



Leaving home

Most of the youth in the survey had a history of leaving home and being street-involved.

Sixty five percent of male youth and 74% of female youth reported that they had run away from home at least once, and 54% of males and 53% of females had been kicked out of home at least once.

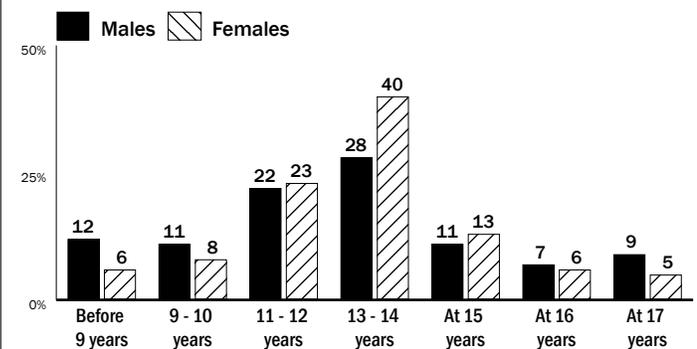
Youth were asked how old they were when they first became street-involved, as well as the first time they left home or ran away and the first time they were kicked out of their home.

The most common age of running away or being kicked out for both male and female youth was between 13 and 14 years old. Two out of three males (66%) and three out of four females (78%) had run away by the time they reached 14 years of age. Sixty percent of youth had been kicked out of their home by the age of 14. Youth were more likely to have run away than been kicked out, but two out of three youth experienced both. Forty percent of males and 34% of females felt that they had no choice in the matter. Approximately one in three youth had run away and been kicked out within a two year period.

“[What I like best about my life is] my street family.”

18-year-old male

Age At Which Youth Became “Street Involved”





“I have my own home, and I don’t have my parents stealing my stuff.”

Female from the Fraser Valley

Not surprisingly, those who reported witnessing family violence, or who had been the victims of physical or sexual abuse, were more likely to have run away or been kicked out than those who did not report such experiences.

Current accommodation

Youth were asked a series of questions about their current living situation. One in four reported living in the most precarious living situations in the past 12 months (on the streets, safe houses, hotels, squats, abandoned

“I like living at home with my mom.”

Male from Vancouver

buildings, tents, cars and couch surfing) and one in five (21%) were currently living in precarious housing. Approximately half of youth reported living with a parent at some point in the past 12 months.

The instability of housing among these youth is illustrated by the fact that less than one in three had lived in the same type of accommodation for the past 12 months (30%) – the majority of these lived with parents in a house or apartment, but 6% lived in foster homes, and 5% lived on the street, in shelters, squats, cars, or were couch-surfing. Another one in five lived in two types of places over the past year, often home and somewhere precarious, such as a hotel (8%), the street (6%), couch-surfing (7%), or shelters (7%).

Another 20% lived in three or four places, and the majority of those places included the most unstable types of housing, such as the streets (25%), hotels (22%), shelters (23%), couch-surfing (21%), squats (8%), abandoned buildings (6%), tents (6%), and cars (4%). Additionally, another one in five reported that they lived in five or more different types of places over the past 12 months, and 10% did not answer where they lived.

School & Work

School

Despite the instability in their lives, a large number of the youth reported a connection to school. Sixty-two percent of youth started school in September 2006, with 28% attending mainstream school and 34% attending alternate education programs. Thirteen percent of the youth who started school in September 2006 were no longer attending, three out of four had dropped out and one in four had been asked to leave by the time they completed the survey. Of those who reported dropping out, it was most often during or after Grade 8.

The link between school attendance and housing

Having a fairly stable living situation and living with a parent or guardian increased a youth's chances of attending school. However, a number of youth who were living in considerably precarious situations also reported attending school. For example, 27% who reported couch surfing, 26% who reported living on the street, 42% who reported living in an abandoned building and 53% who reported living in a squat were attending school at the time they completed the survey.

"I like school for support reasons."

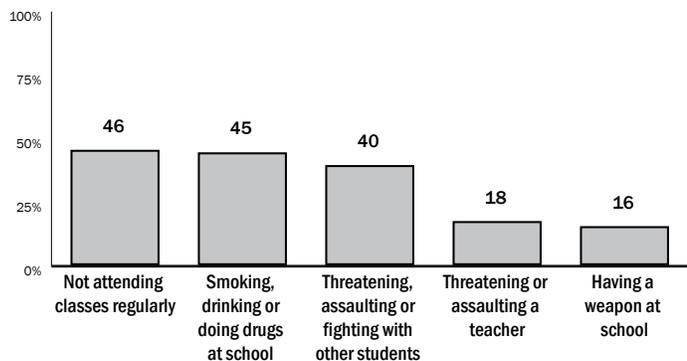
Female from Vancouver Island

"I'm thinking about my future and doing something about it - a chef's course."

18-year-old from the North

More than one in three youth who lived on the street, couch surfed, or lived in an abandoned building or squat were currently attending school.

Most Common Reasons for Being Asked to Leave School





Educational aspirations

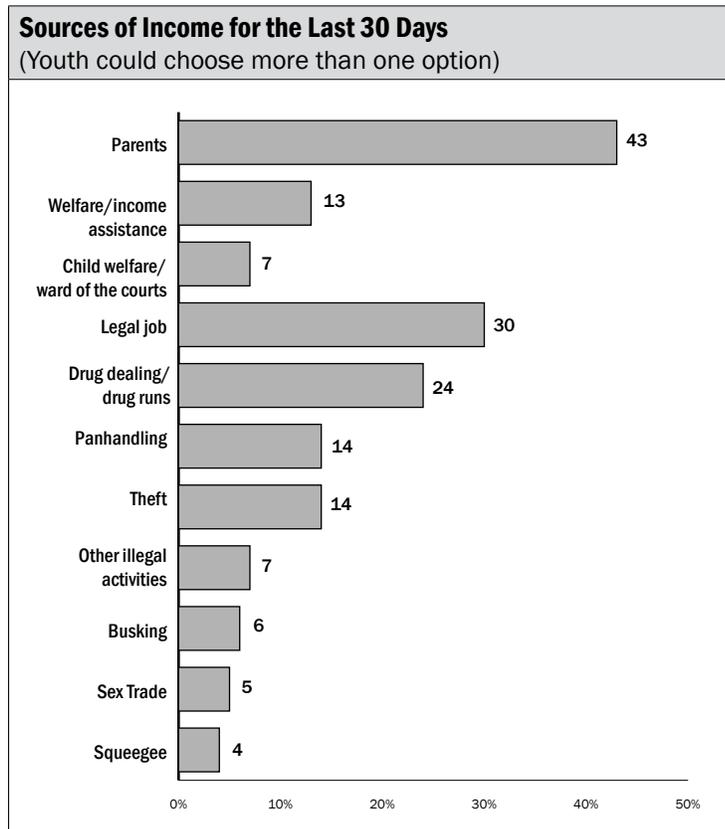
Even among youth who were currently disconnected from school, some still had educational aspirations beyond completing high school. Although 25% reported that they will have finished their education after they graduate from high school, more than one in four (26%) plan to graduate from a post secondary institution (14% from a community college or technical institute and 12% from university). The youth who participated in this survey shared similar educational aspirations to their peers in the 2000 survey.

Work

One of the frequently held misconceptions about marginalized youth is that they engage in a variety of illegal activities or rely on government assistance for income. Although youth did report illegal activities as a source of income, one in three youth (35%) had a legal job. Of those youth, 52% reported that they worked 20 hours or more per week in the past 30 days and another 32% reported they worked between five and 19 hours per week. Only 13% reported that they received income assistance.

“[What makes me happy is] working and getting a pay cheque.”

Male from the North



Sources of income

One in five youth reported that they had no income in the last 30 days and the rest of the youth received income from a variety of sources. Despite their often difficult relationships with their families, 43% of youth had received financial support from them in the past 30 days. Two in five youth reported having one source of income (e.g. parents, paid employment, drug dealer/drug runs or panhandling), one in five had two sources of income and one in five had three or more sources of income.

Health

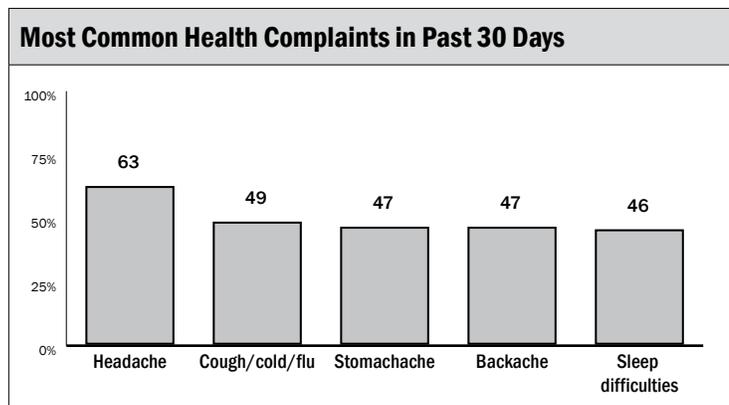
Physical

When youth were asked to rate their overall health, 61% rated it good or excellent. Youth were also asked about a variety of illness symptoms they may have experienced in the 30 days prior to completing the survey. Overall, 86% reported that they had experienced one or more physical problems such as backache, headache, stomachache, colds or skin problems. The most common recent health complaints were headache (63%), cough/cold/flu (49%), stomachache (47%), backache (47%), and sleep difficulties (46%).

Youth in the Fraser Valley were most likely to report excellent or good health (69%) and youth on Vancouver Island were least likely to report the same (53%). Youth in this study reported higher levels of disabilities and debilitating health conditions than those surveyed in school (AHS 2003). Twenty five percent of street-involved males and 36% of females reported one or more health conditions or disabilities, which limited their ability to do things others their age could do, compared to just 11% of youth in school. One in five street-involved youth reported they had a diagnosed learning disability.

“I wake up with a headache most days. It’s very annoying. I usually can’t sleep until 6 am. Simple things can really ruin your quality of life. I don’t even know how to fix this.”

18-year-old female



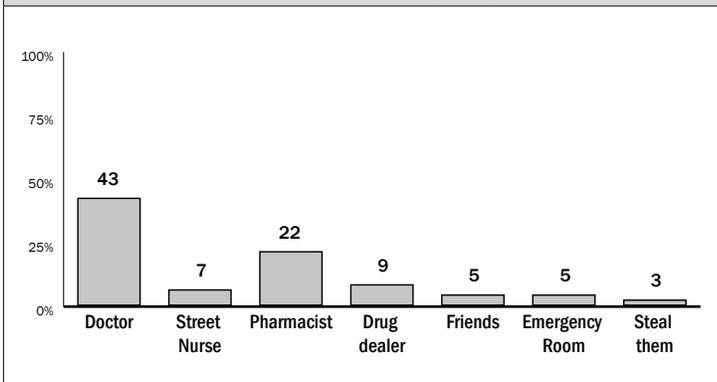


Risks to physical health

One in four youth used needles or other gear (crack pipes) after someone else had used them, and 17% had shared tattoo and body piercing equipment. These practices can increase a youth's risk of getting blood-borne diseases such as Hepatitis C and HIV/AIDS.

About half of youth reported they went hungry at least once a month because they or their parents did not have enough money to buy food. Going hungry occurred twice a week or more for 16% of street-involved youth.

Where Youth Obtain Prescription Medication
(Youth could choose more than one option)



Access to health care

The majority of youth (82%) reported that they could access health care when they needed it. However, 18% reported that they did not have an MSP Care Card and almost one in six (16%) indicated that they could not get prescription medications when they needed them. Among those who could get prescription medications, the most common sources were from a doctor or pharmacist, although some youth got their medication from friends, drug dealers, or by stealing them.

Mental and emotional health

Youth were asked if they had ever been told by a health professional that they had certain mental health problems or cognitive disorders that are more common among marginalized and homeless youth. These included a learning disability, Fetal Alcohol Syndrome (FAS), Attention Deficit Hyperactivity Disorder (ADHD/ADD), depression, addiction problems, and Post Traumatic Stress Disorder (PTSD). It is not possible to tell whether these youth had been properly assessed and diagnosed. Similarly, some of the youth may have had these conditions but not have been diagnosed.

The number of youth reporting a range of developmental disabilities, mental health conditions and emotional problems were high. Sixty-three percent of females and 50% of males reported one or more condition.

One in five of the youth reported that they had been diagnosed by a health professional as having a learning disability, almost one in four had ADHD/ADD, 8% reported that they had been diagnosed with FAS, approximately one in four had diagnosed problems with anger, and 14% of males and 25% of females had been told that they had addiction problems.

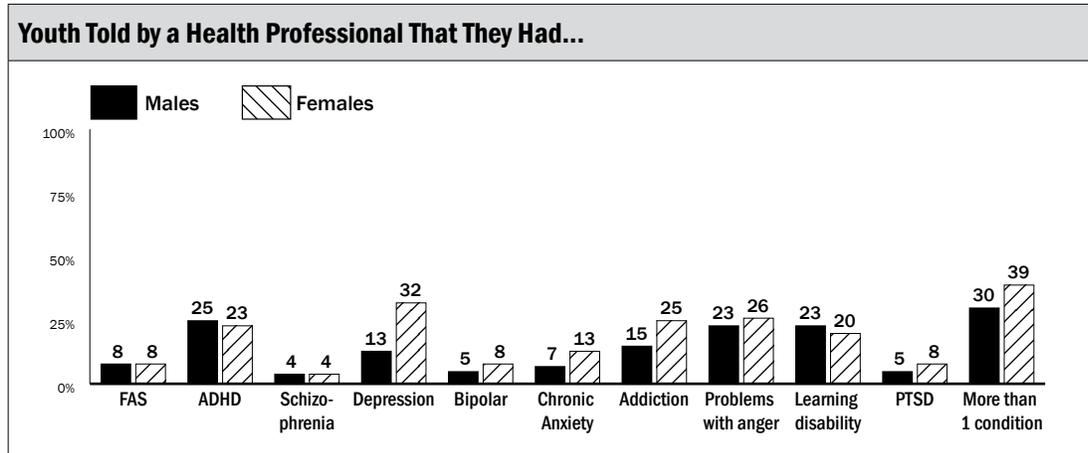
Female youth were much more likely to report mental and emotional problems than male youth. Twenty-four percent of females and 10% of males had been told by a health professional that they had a mental or emo-



tional condition. The differences were most noticeable among those suffering from depression, where only 13% of males but 32% of females reported being given such a label, and chronic anxiety, where twice as many females (13%) as males (7%) reported this. About one in ten of the youth reported that at least one of their parents had a diagnosed mental health problem.

“There is always death to look forward to.”

18-year-old male

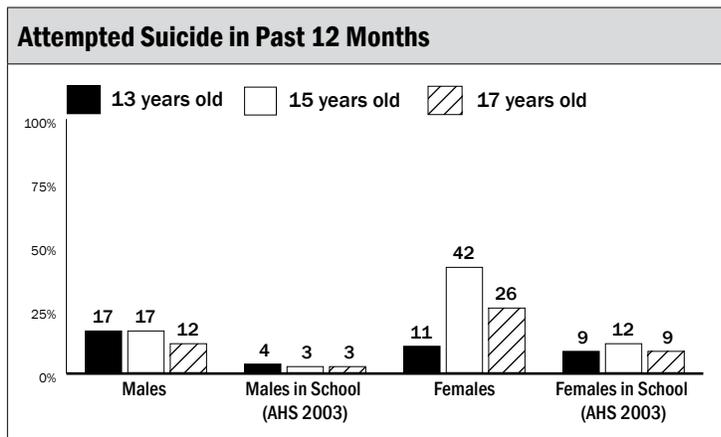


Emotional health

In addition to questions about recognized mental health conditions, youth were asked a series of questions that measured their level of emotional distress. Nearly one in four males and one in three females felt very sad, hopeless or discouraged in the past 30 days. Additionally, 35% of males and 55% of females reported being under high levels of stress in the same time period.

Attempted suicide and self-harm

Suicide is the second biggest killer of youth in BC, after motor vehicle accidents. Many young people often feel under tremendous emotional strain, at a time in their life when they may lack the life experience to know that many difficult and painful situations will not last forever. Male youth are up to four times more likely to commit suicide than females². However, although male youth are more likely to complete a suicide attempt, more female youth actually make an attempt. Fifteen percent of the males and 30% of the females in this study reported that they had made one or more suicide attempts in the past 12 months (compared to 4% of males and 10% of females in school). Youth aged 14 (44%) and 15 (40%) were the most likely to have made one or more suicide attempts in the past 12 months.



Youth who reported higher levels of family connectedness were 60% less likely to attempt suicide or self-harm than those who reported lower levels.

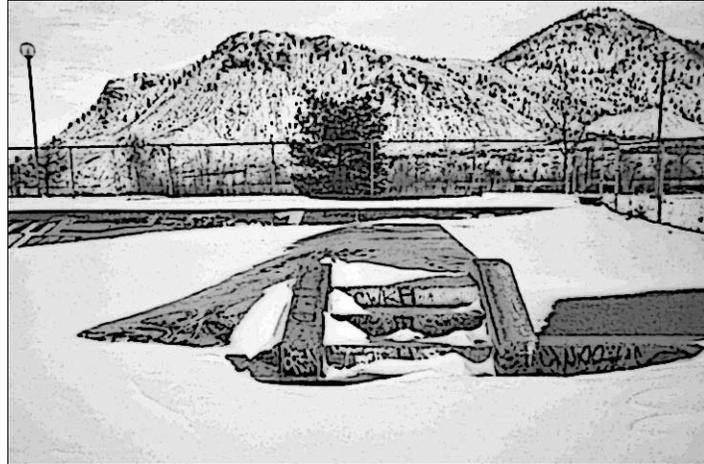
² Canadian Mental Health Association

Help seeking after suicide attempt

Only two thirds of female youth and less than half of male youth reported that they sought help following their last suicide attempt. Of those who did seek help, most turned to friends (39% of males and 57% of females) or parents (30% of males and 24% of females). One in four did seek help from a doctor or nurse and youth also reported seeking help from mental health workers, youth workers and social workers.

Self-harm

Self-harm is used to describe deliberately cutting or injuring oneself, without the intention of suicide. It is a potentially risky coping mechanism used by some youth to deal with stressful situations. Over half of the females (56%) and a third of the males (34%) reported that they had deliberately cut or injured themselves one or more times. Among females who had deliberately cut or injured themselves the most common reasons for doing so was because they were feeling stressed (34%) or angry (31%). Among males, the most common reasons were that they were feeling angry (12%) or bored (10%).



Youth who reported higher levels of family connectedness were 60% less likely to attempt suicide or self-harm.

Sport & Recreation



Sport and recreational activities

Youth in the survey reported varying levels of fitness – 57% reported their physical fitness level as good or excellent and 43% as fair or poor. As with overall physical health, there was a significant gender difference for fitness levels. Fifty three percent of female youth reported only fair or poor physical fitness compared to 33% of males. Youth on Vancouver Island perceived their fitness levels as the poorest (43% reported good or excellent levels of physical fitness) and youth in the Fraser Valley the best (66% reported good or excellent levels of physical fitness).

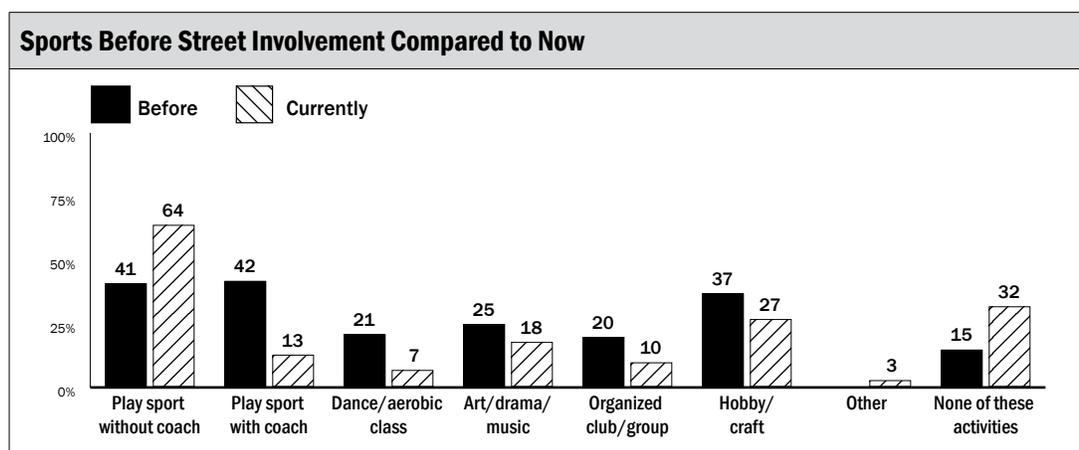
Not surprisingly, there was a substantial decrease in involvement in sports and recreational activities once youth became street-involved. Although this was small for hobbies and crafts, it was most noticeable among organized activities such as sports with a coach, which required regular session attendance and financial resources. However, many youth continued to participate in sporting activities. As youth's involvement in sports *with* a coach decreased (down from 42% before they were street-involved to 14% at the time of the survey) so playing sports *without* a coach increased (up to 64% from 41%).

Half of youth (51%) reported involvement in extreme sports in the past. Backcountry skiing and snow boarding (22%) were the most popular activities. Males (63%) reported greater participation in extreme sports than females (40%).

“Basketball [makes me happy], when I play I feel comfortable, and that’s all I think about, I have no worries!!”

Female from Vancouver

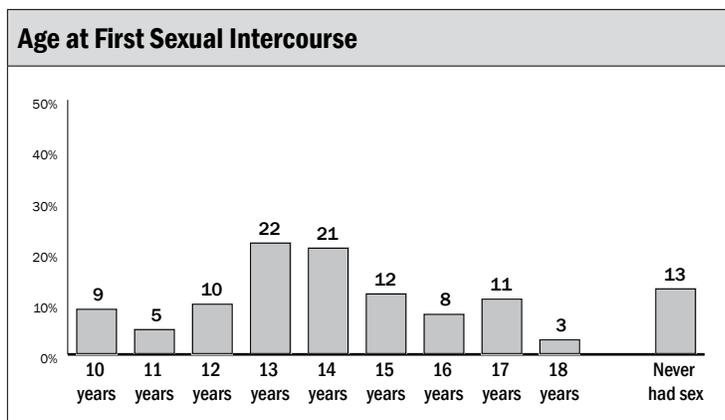
Youth were asked if they would be interested in trying a selection of sporting opportunities – 45% of youth reported that they would like the opportunity to participate in extreme sports; 30% were interested in joining a sports club; and 23% in learning a new sport.



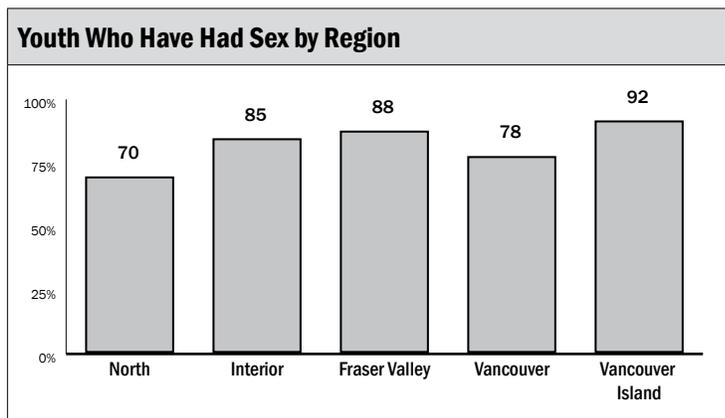
Involvement in Extreme Sports by Region

	North	Interior	Fraser Valley	Vancouver	Vancouver Island
No extreme sports	61%	39%	51%	45%	49%
Back country skiing/snowboarding	19%	33%	18%	20%	17%
High speed motorized sport	11%	13%	13%	11%	12%
Cliff and bridge jumping	5%	7%	17%	11%	6%
Rock climbing	14%	12%	21%	27%	23%
White water activities	8%	16%	13%	15%	1%
Downhill mountain biking	9%	20%	19%	16%	18%
Other	10%	18%	9%	14%	14%

Sexual Behaviour



Most of the youth who participated in the survey were sexually experienced. Three out of four (77%) reported that they had ever had oral sex and 82% reported that they had ever had sexual intercourse. Oral sex was more popular among older youth – 85% of youth aged 18 reported experience of oral sex compared to 29% of youth aged 12.

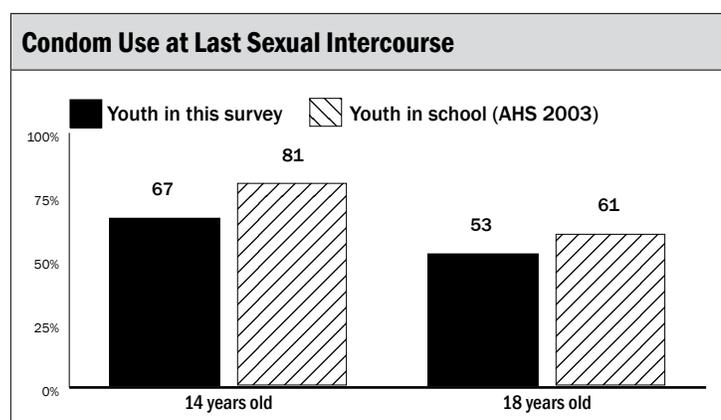


Among those who reported being sexually active, the average age of first sexual intercourse was 13.8 years old, the same as in 2000. Two out of three (66%) reported that they had first had sexual intercourse at age 14 or younger. Eight percent of the youth reported that the last time they had sex it was with a same sex partner. There were regional differences in the numbers of youth ever having sex, with the largest percentage among youth surveyed on Vancouver Island (92%) and the lowest percentage in the North (70%).

Sexually transmitted infections and pregnancy

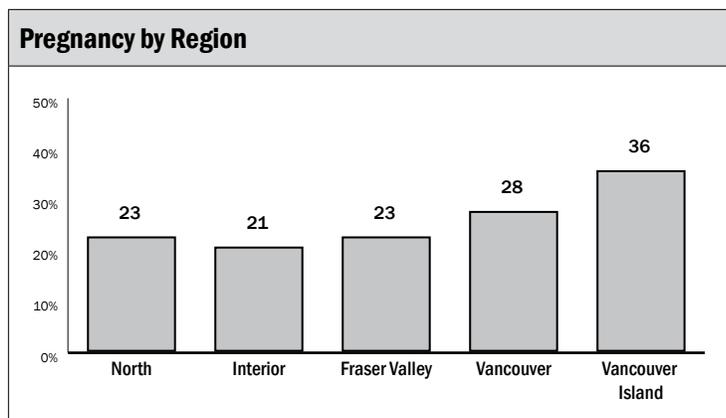
Seventy two percent of sexually active youth reported that the last time they had sexual intercourse they had used an effective method of contraception, similar to rates reported in 2000. Effective contraception methods included condoms, the patch, the ring, diaphragm/contraceptive sponge and birth control pills.

In addition to preventing pregnancy, condom use can also protect against sexually transmitted infections (STIs). Condom use at last sexual intercourse was lower among older youth than it was among younger youth in this survey, similar to youth in school (AHS 2003). However condom use was slightly lower among this population than it was among those in the 2003 school based survey. Two out of three 14-year-olds in this survey used a condom the last time they had sex, compared to 81% of 14-year-olds surveyed in school (AHS 2003). Among 18-year-olds, the rates were 53% compared to 61% (among those in school). Females (52%) were less likely than males (69%) to have used a condom the last time they had sex. They were also more likely than males to have used no method of contraception the last time they had sex (19% vs 11%).



One of the key risks that hinders effective contraception and condom use is being intoxicated. Over half of the youth (57%) reported they had used drugs or alcohol before they had sex the last time, similar to the rates in 2000. This is higher, however, than among youth in school (AHS 2003), where only 29% of sexually active youth reported using alcohol or drugs before they had sex.

Given the lower rate of condom use among these youth, it is not surprising that they report higher levels of STI's when compared to youth in school – 19% compared to only 3% of sexually active youth surveyed in school (AHS 2003).



Thirty-two percent of sexually active youth reported ever being pregnant or causing a pregnancy compared to only 8% of sexually active youth in school (AHS 2003). This rate is unchanged from 2000. Twenty percent reported pregnancy involvement only once and 12% had been pregnant or caused a pregnancy two or more times. Vancouver Island had the highest rates of pregnancy and had rates significantly higher than every region except Vancouver.

A history of sexual abuse is strongly linked to pregnancy involvement in the general population and this was also indicated with this group of young people. Among those youth who have children, 15% reported that they had their first sexual encounter by the age of 10, compared to 8% of those who did not have a child.



Substance Use



Alcohol and drugs are sometimes used as a way of coping with stress and violence, to manage mental health symptoms, or to blunt the pain from trauma and loss. Since youth in this survey reported much higher exposure to violence, abuse and loss than youth in the general population (AHS 2003), it is perhaps not surprising that they also reported higher rates of substance use, including recent and regular use of marijuana, tobacco and alcohol – the most commonly used substance was marijuana. However, although the rates were higher, they were not 100%, and a small but noteworthy percent of youth in the survey (3%) had never used any substances and 14% had not used in the past 30 days.

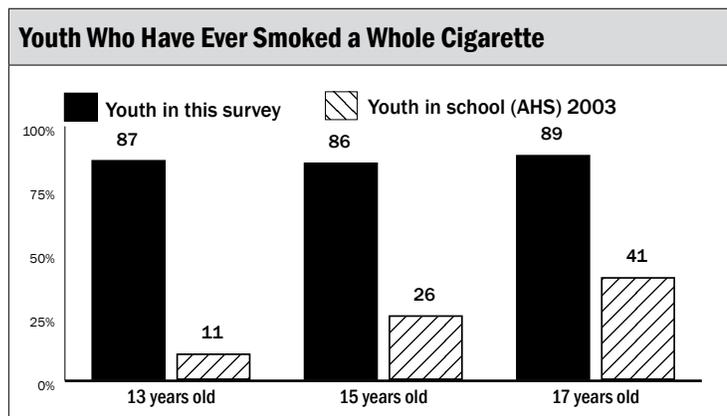
Research has shown that exposure to alcohol and other drugs at an early age increases the likelihood that a youth will develop substance abuse problems, when compared to their peers who try alcohol or other drugs later. One in three youth reported that they had drunk alcohol before the age of 11 and one in four had tried marijuana by the same age.

When asked about parental drug and alcohol use, one youth who completed the survey noted “I learned it from somewhere.” One in four reported that at least one of their parents had an alcohol problem and 18% reported that at least one of their parents had a drug problem.

Tobacco use

Youth were asked about their smoking habits over the past 30 days. Twelve percent reported they had never smoked and a further 10% had not smoked in the past month. Seventy eight percent had smoked in the past 30 days (compared to 13% of youth in school – AHS 2003). Sixty percent were almost daily, or daily, smokers compared to 68% in 2000.

Among youth in school (AHS 2003), older students are generally more likely to have ever smoked than younger students, i.e. 11% of 13-year-old students vs 41% of 17-year-old students. This was not the case for street-involved youth – 87% of 13-year-olds had ever smoked, compared to 89% of 17-year-olds.



Current Smokers		
	2000	2006
Vancouver	85%	75%
Victoria	88%	84%

The overall decline in smoking reported in the school based Adolescent Health Survey was also noticed with this population. In 2000, 83% reported being current smokers (smoked in the past month), while in 2006 this had decreased to 75%. In some communities, the decline in rates of current smokers was more marked than in others.

Aboriginal street-involved youth were less likely to be regular or daily smokers than their non-Aboriginal peers (57% vs 65%).



Alcohol

Eighty-five percent of youth had ever tried alcohol and one in three had tried it before they were 11 years old, rising to more than one in two (58%) before age 13. However, regular use of alcohol is not as widespread as regular use of marijuana. Three out of four youth had used alcohol within the past month, but only 27% reported that they had drunk alcohol yesterday.

Binge drinking (having five or more drinks within a couple of hours) can increase the risk of harm from alcohol use. Youth in the survey were much more likely to report binge drinking than their peers in school. Among those who drank, 76% reported binge drinking at least once in the past month, compared to 26% of youth in school (AHS 2003). Forty-six percent of those who drank yesterday had five or more drinks. A greater number reported binge drinking three or more times a month, compared to youth in school: nearly half of the youth reported this (46% males, 47% females) compared to only one in five youth in school (21% males, 18% females). Nearly one in ten of the youth reported binge drinking 20 or more days in the past month (7%).

Illegal Drug Use

Marijuana

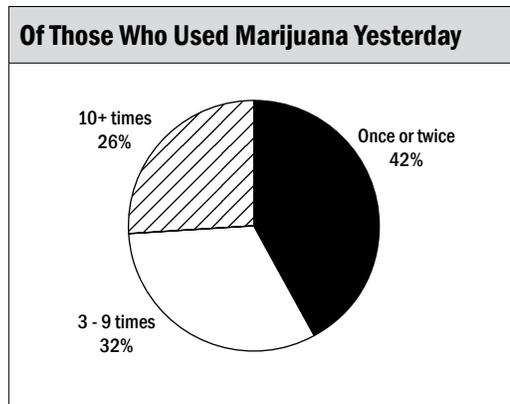
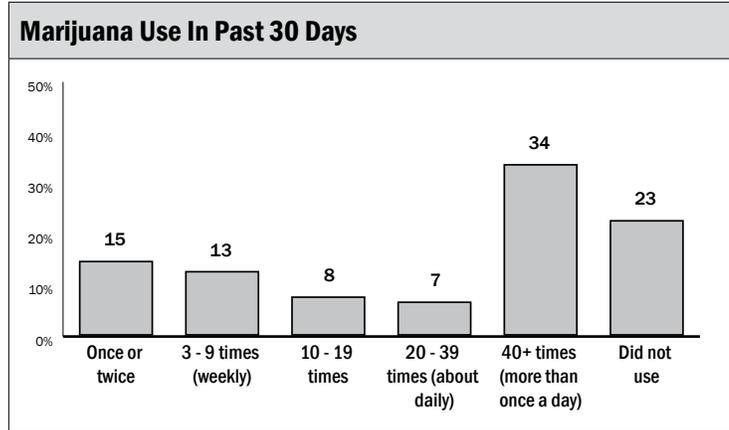
The majority of youth in the survey had tried marijuana (91%) and one in four had tried it before they were 11 years old. Seventy four percent reported using marijuana in the past month. When use was compared between the communities that participated in both surveys, marijuana use in the past month was unchanged (77%) from 2000 to 2006.

When youth were asked about their use yesterday, 60% had used marijuana at least once. Males were more likely than females both to report use yesterday (68% males vs 53% females) and in the past month (82% vs 73%).

Youth were introduced to marijuana early in life, often before they become street-involved. The average age of first marijuana use was between 11 and 12 whereas the average age of first becoming street-involved was between 13 and 14. More than one in four reported first using marijuana before age 11 (27%) and, by age 14, 82% had tried it.

Other drugs

Unlike youth surveyed in school (AHS 2003), the majority of youth also reported trying a variety of other illegal drugs. Among communities that participated in both 2000 and 2006, the use of some drugs decreased while others had become more popular. The table shows the change in the percent of youth who reported ever using a range of drugs in Vancouver and Victoria.



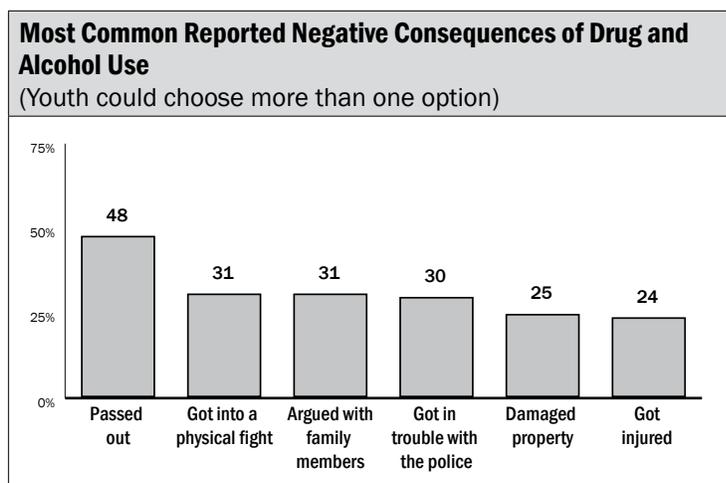
	Vancouver			Victoria		
	2000	2006	Change	2000	2006	Change
Cocaine	72%	59%	▼	73%	76%	—
Hallucinogens	86%	58%	▼	84%	74%	▼
Mushrooms	85%	63%	▼	89%	76%	▼
Prescription meds without Rx	53%	43%	▼	55%	57%	—
Inhalants	47%	43%	—	32%	56%	▲
Amphetamines & crystal meth	71%	56%	▼	59%	63%	—
Heroin	50%	44%	▼	43%	36%	▼
Injecting an illegal drug	30%	44%	▲	28%	36%	—

— No significant change between years

Drug Use		
	Used in past month	Used yesterday
Marijuana	77%	60%
Alcohol	74%	27%
Ecstasy	25%	3%
Cocaine	24%	7%
Mushrooms	21%	4%
Hallucinogens	15%	3%
Crystal meth	14%	8%
Other amphetamines	11%	5%
Prescription meds without a prescription	12%	4%
Ketamine	9%	3%
Heroin	8%	4%
Injection drugs	7%	4%
GHB	6%	3%
Inhalants	5%	2%
Steroids	4%	2%

While more than two in three youth (68%) reported using some type of illegal drug yesterday, multiple drug use was less common. Forty percent used only one drug yesterday, 18% used two drugs, another 5% used three drugs and 6% used four or more drugs. On average, youth reported ever using about seven different kinds of drugs, including alcohol and marijuana.

Youth also reported experiencing a variety of negative consequences as a result of their alcohol and drug use, including passing out (48%) and fighting (31%).



Drug and alcohol treatment

Twenty-five percent of youth reported that they had received drug and alcohol treatment and had accessed one or more of these treatments: detox services; outpatient treatment; a recovery home; and treatment centre. Eleven percent reported that they were refused the drug and alcohol treatment they felt they needed, with over half of these youth reporting they were turned away because the program was full. For those youth who had received treatment for their drug and alcohol problems, detox and out-patient treatment were the most frequently accessed.

“[We need] more help and recovery houses instead of just sending us to jail.”

16-year-old female



Violence & Abuse

Discrimination

Youth who reside at the margins of our society often face discrimination based on their ethnic heritage, sexual orientation and their lifestyle. Seventeen percent of youth in this survey reported being discriminated against because of their race or skin colour, 21% because of their physical appearance and 24% because of their lifestyle or reputation. Aboriginal youth were twice as likely to report discrimination on the grounds of race as non-Aboriginal youth (23% vs 10%).

Youth who reported being gay, lesbian or bisexual were over represented as marginalized youth in general and also experienced a higher level of discrimination than their peers. Twenty-six percent of gay, lesbian and bisexual youth reported being discriminated

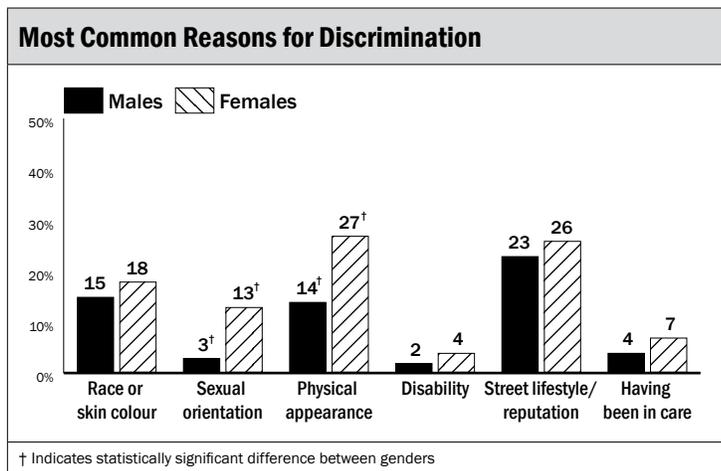
against because of their sexual orientation, as did 8% of youth who identified as mostly heterosexual and 4% of youth who were unsure of their sexual orientation.

Violence

Many marginalized youth live in dangerous or exploitative situations and fear for their personal safety. The survey asked how often youth felt safe where they slept at night. While the majority felt safe sleeping most or all of the time, more than one in four (26%) reported feeling safe only sometimes, rarely, or never.

For youth in school (AHS 2003), fear for their personal safety can be an unrealistic estimate of the risk of violence they face. However, for the youth in this survey, that fear is grounded in a harsh reality. Over half of youth (52%) had been threatened, 40% had been physically attacked or assaulted, and three out of five (62%) had been in a physical fight in the past 12 months.

Given the high levels of violence experienced by the youth it is not surprising that, although weapon carrying among youth in school has declined over the past decade (AHS 2003), many of the youth in this study reported carrying a weapon of some description in the past 30 days (41% of youth vs 8% of youth in school). The most popular weapon was a knife or a razor (33%).



“Stop racism.”

14-year-old from the Fraser Valley

“Stop violence.”

Female from the North

Abuse

Physical abuse

Experiences of physical and sexual abuse were commonly reported by youth. Sixty-one percent had witnessed family abuse and the same number had been physically abused, a far greater percentage than among youth in school (AHS 2003). One in four youth who completed this survey had been physically abused by their father, one in five by their mother and 15% by a step-parent.

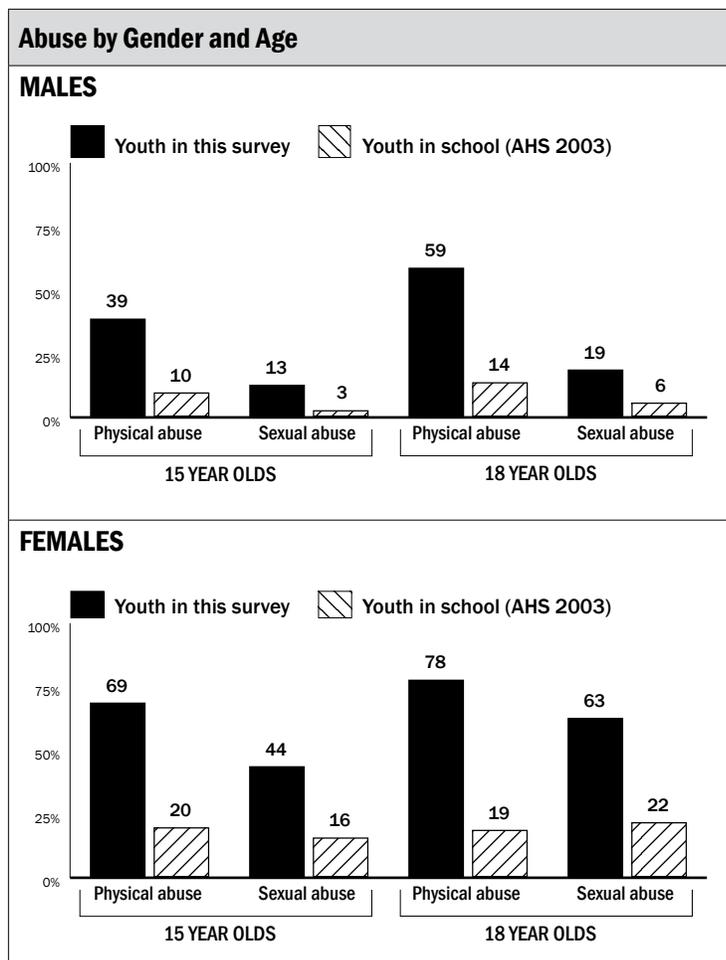
Many young people leave home to escape abuse, only to find themselves experiencing violence outside their family as well. While 38% reported abuse only by their family and 9% reported abuse only by people outside their family, one in four youth reported physical abuse from both family and non-family. Seventeen percent had experienced abuse by other relatives and the same percentage had been abused by a stranger, while 18% reported abuse by friends, 15% by romantic partners, 14% by police, 6% by foster parents, 4% by tricks/dates, 2% by pimps and 1% by other non-family acquaintances. Just under one in three youth reported physical abuse by two or more different kinds of people and 8% reported being abused by five or more kinds of people.



Source of Abuse: Males and Females

	Physical Abuse		Sexual Abuse	
	Males	Females	Males	Females
Family only	22%	33%	7%	27%
Outside the family only	11%	8%	8%	20%
Both family and others	21%	29%	1%	10%
No abuse	47%	30%	84%	43%

A higher percentage of females than males reported that they had been physically abused by all of the following: parents; step-parents; foster parents; friends; romantic partners; tricks; pimps; and strangers. However, male youth were more likely to have been physically abused by a police officer (17% of males vs 11% of females). For males, physical abuse from a police officer was second only to abuse from their fathers (23%).



Sexual abuse

As with youth surveyed in school (AHS 2003), females were much more likely than males to report that they had been a victim of sexual abuse (55% females vs 15% males in this study compared to 13% females vs 2% males surveyed in school). Female youth were also more likely to report having been forced to have sex by either another youth or an adult. One in four females (25%) had been forced to have sex by another youth compared to one in ten (10%) males. Thirty one percent of females and 7% of males had been forced to have sex by an adult.

Sexual exploitation

Sexual exploitation is the exchange of sexual activity for money, goods or resources such as shelter and food. The sexual exploitation of youth is a form of sexual abuse which adversely affects healthy adolescent development. Youth who have come from sexually abusive homes are particularly vulnerable to becoming sexually exploited.

Sexual exploitation occurs in many locations – the streets, massage parlours, trick pads, bars, private homes, the Internet and in many other places which are inaccessible to a research project such as this. The numbers below, therefore, are likely to represent only a percentage of those youth who are sexually exploited.

Although only 5% reported income in the last 30 days from the sex trade (see page 22) more than one in three youth surveyed had ever traded sex for money or goods (37%). Within the five communities that had also been surveyed in 2000, the overall rate was higher in 2006 (38% compared to 30%).

“[We need to] change child prostitution.”

13-year-old female

Males were more likely to report sexual exploitation than females (41% vs 32%). This rate was similar for males compared to 2000, but had risen for females from 23% to 32%.

Of those who had traded sex, the most common reasons for doing so were in exchange for drugs or alcohol (38%), for money (34%), and for shelter or a place to stay (23%). One in five had been living with their family when they first traded sex (20%) and 13% had been living on the street.

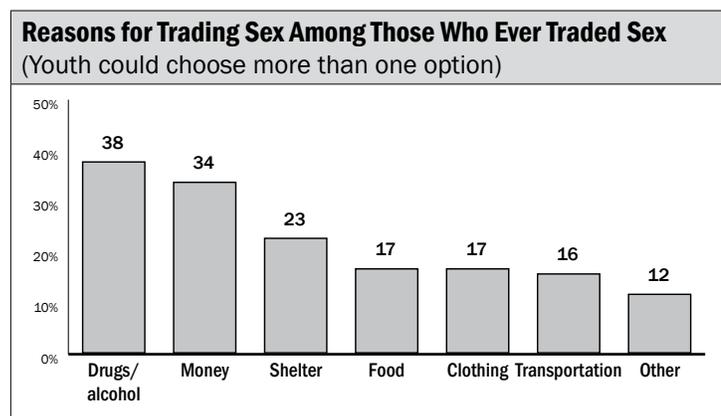
Across all nine communities, the greatest number of youth first traded sex at age 17 (43%), with the next most common ages being 14 (12%) and 13 (11%), although 4% of the youth had engaged in sexual activity for goods or money by the time they were 12 years old. Among the communities surveyed in 2000 and 2006, the average age at which youth first traded sex increased from 13.8 years to 15.6 years. Across all nine communities in the survey, the average age of those being sexually exploited was 15.3 years for both males and females.

Of those who reported that they had been involved in trading sex, 20% of males and 12% of females had done so for a pimp, 6% of males and 10% of females for an escort agency and 19% of males and 33% of females to support a friend, partner or relative. The most common location for trading sex was on the street (11% males, 24% females) or in a hotel (9% males, 26% females). Those living in the most precarious housing were more likely to have been sexually exploited than those in more stable accommodation (44% vs 32%).

Twenty-three percent of youth reported that they have “spotted” for someone. Spotting refers to watching over or looking out for someone who is working in the sex trade,

“Stop [the] sex trade, stop perus from manipulating girls.”

Male from the North



for example, noting the license plate of a stranger’s car when a youth gets in it to trade sex. Nearly two out of three youth who had spotted for someone also experienced sexual exploitation (62%).

Criminal activity

Forty-seven percent of youth had ever been charged or convicted of a crime. The most common crime they had been charged with was assault/uttering threats (41%).

As has been found in other studies, males were more likely to have spent time in a custody centre than females (51% of males vs 31% of females). However, females were more likely than males to have been charged or convicted of a crime (55% females vs 38% males).

Two-thirds (66%) reported that a member of their family had a criminal record and 42% reported that either their mother or father, or both, had been convicted of a crime.

Social & Community Supports

In this survey, youth were asked a variety of questions about who they turned to for help and the types of services they accessed in their community. They were also asked to identify the social and community supports that they accessed or did not access, whether they found the various sources of support helpful or not helpful, and to share whether they thought the services were available in their community.

“My friends are there for me 100%.”

Female from the Interior

Where Youth Went for Help with a Problem			
	Asked for help	Didn't ask for help	Helpfulness
Friends	68%	32%	●
Youth/outreach worker	55%	45%	●
Family	64%	36%	●
Doctor/nurse/street nurse	47%	53%	●
School counsellor	44%	56%	●
Probation officer	34%	66%	●
Alcohol and drug counsellor	34%	66%	○
Social worker	53%	47%	○
Housing worker	29%	71%	○
Family support worker	27%	73%	○
Mental health worker	31%	69%	○
Financial aid worker	31%	69%	○
Police	42%	58%	○

● Denotes over 60% of youth found helpful; ○ Denotes between 50% and 60% of youth found helpful

Help seeking

When asked “If you have asked the following people for help during the past 12 months, how helpful were they?” the greatest proportion of youth (85%) who asked for help, identified their friends as helpful. This is supported by the various responses to other answers that identify ‘friends’ as important sources of support. An almost equal proportion of youth (82%) identified Outreach/ Youth workers as helpful. Despite having difficult relationships with their families, 77% identified their family as helpful.

Youth identified other professionals as helpful, such as doctors, nurses and street nurses (76%) and school counsellors and teachers (65%). Among youth who asked for help from the police, 66% found them not at all helpful.

Accessing community services

Marginalized youth will often access an array of services when these are available to them. Youth were asked to identify which services they accessed in their communities and whether or not they found them helpful. The services that the largest proportion of youth described as helpful attended to critical human needs, such as food, shelter and employment. For example, of the almost 40% of youth who accessed food banks, 80% found

“My friends [make me happy], they are what make me how I am today.”

18-year-old female

them helpful. Likewise, 75% of youth who accessed job training programs found them helpful.

Food banks, shelters and youth clinics were the three most accessed services. The least accessed service was the safe injection site, but this is likely because only a small number of youth are regular injection drug users, it is a specialist service, and it is only available in Vancouver.

A number of safe houses across the province are threatened with closure and some have already been forced to close, primarily as a result of the loss of federal funding. Despite this, safe houses were the fourth most accessed service and were in the top five recommendations for needed services in four of the five regions surveyed.

Filling the gaps

Youth were also asked to identify services and programs they felt were needed in their community. The services in highest demand were: work and educational services (work experience/job training, education programs, life skills); housing services (including shelters and safe houses); and health services (youth clinic, alcohol and drug services, street nurses and dental care). The demand for these services reflect the same services that youth had identified as most helpful.

Accessing Services (Among all youth who responded)				
	Accessed	Didn't access	Not Available	Helpfulness
Food bank	38%	53%	9%	●
Shelter	37%	52%	11%	●
Youth clinic	36%	52%	12%	●
Safe House	35%	53%	12%	●
Dental services	35%	54%	11%	●
Soup kitchen	34%	56%	10%	●
Job training	33%	57%	10%	●
Work experience	32%	57%	11%	●
Youth agreement	30%	58%	14%	●
Alcohol and drug treatment/ counselling	29%	60%	11%	●
Services to obtain identifica- tion ID	29%	58%	13%	●
Street nurses	28%	60%	13%	●
Life skills training program	28%	61%	11%	●
School program for street youth	27%	61%	12%	●
Safe and affordable housing	26%	60%	14%	○
Youth detox	25%	64%	12%	○
Transitional housing	23%	66%	11%	○
Needle exchange	22%	66%	12%	●
Parent/teen mediation	22%	66%	13%	○
Affordable childcare/ babysitting	19%	68%	14%	○
Safe injection site	18%	69%	14%	○

● Denotes over 60% of youth found helpful; ○ Denotes between 50% and 60% of youth found helpful

“I was able to get off the streets and get the help I needed.”

17-year-old female

A number of youth identified services that are already available in their community. There are a number of possible explanations for this. For example, youth may be unaware of a service, it may be over-subscribed and therefore unable to meet their needs, it may be geographically located in a place inaccessible to them, or the existing service may have been designed for adults, making it intimidating or in other ways inaccessible to youth.

It was surprising that more youth did not identify transitional housing as needed in their community given the high numbers that reported a need for both emergency housing and more permanent housing. This may be due to a lack of understanding of the term transitional or because so few youth (23%) had accessed this type of housing and were therefore unaware of its role.

Suggestions for Services in the Communities	
Job training	47%
Shelter	40%
Work experience	39%
Affordable housing	38%
Safe House	37%
School program for street youth	32%
Life skills	30%
Alcohol and drug counselling	28%
Youth treatment and youth detox	27%
Street nurses	26%
Dental services	24%
Affordable childcare/babysitting	23%
Mental health services	22%
Services to obtain ID	22%
Safe injection site	20%
Needle exchange	19%
Transitional housing	19%

Top 5 Recommendations for Vancouver	
Job training	48%
Safe and affordable housing	44%
Work experience	42%
Shelter	41%
Safe House	40%

Top 5 Recommendations for Vancouver Island	
Job training	50%
Shelter	45%
Safe and affordable housing	43%
Work experience	43%
School program for street youth	34%

Top 5 Recommendations for Fraser Valley	
Job training	52%
Safe House	41%
Work experience	38%
Safe and affordable housing	36%
Alcohol and drug counselling	31%

Top 5 Recommendations for Interior	
Shelter	41%
Safe House	37%
Job training	37%
Safe and affordable housing	32%
Work experience	31%

Top 5 Recommendations for North	
Job training	50%
Safe House	42%
School program for street youth	39%
Work experience	39%
Shelter	38%

Job training and shelter were identified as the two most needed programs across BC

Youth were also asked to think about what kinds of changes in their communities would help marginalized youth. Some responses were broad such as “stop racism,” “stop violence,” “more general acceptance, tolerance and compassion” and “stop the sex trade” while others focused on the need for specific services in their communities. For example “make more safe houses,” “I would give a place where kids can stay all night” and “more 24 hour resources.” The question also prompted some youth to reflect on their own lives and experiences and express a need for “better parents.”

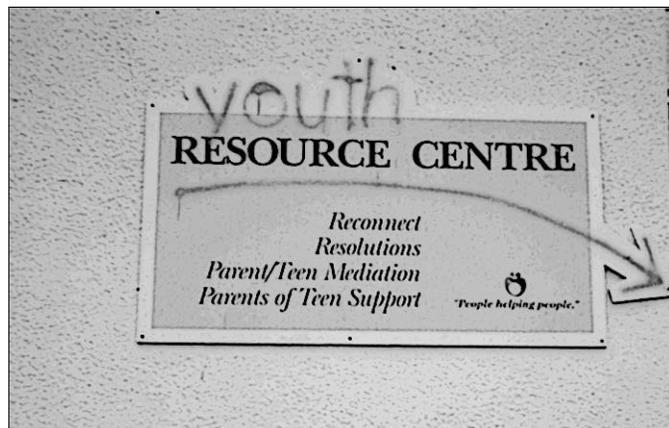
“[We need] more safe houses.”

Male from the Fraser Valley



“[We need more] programs that support training for work, and social programs.”

Male from Vancouver Island



Living Now & Looking to the Future

In response to a question that asked youth how they felt about their current life circumstance, 83% felt their circumstances were good or fair, while 17% reported their circumstances as poor or awful – similar to rates in 2000.

Space was also provided on the questionnaire for the participants to share their thoughts about their lives in their own words. The open-ended questions asked “What makes you happy?” and “What do you like most about your life?” The responses to these questions were thoughtful and insightful and offered a rich description of the various ways that youth have a sense of agency and connectedness to their families and communities.

Contrary to many misconceptions about marginalized youth, numerous survey participants stated that their families were one of the most important factors in their lives, including what made them happy. Their families included parents but also siblings and their own children. Many youth also shared their experiences of recovery, re-connecting with family and the amazing support of their friends. Some youth shared how activities such as music, art and sport were also important in their lives.

Selected responses to “What makes you happy?”

“Knowing my son is safe and happy.”

“Random acts of kindness done on behalf of total strangers.”

“My responsibility for my friends.”

“Being with friends and family, being in the school I’m in now & learning stuff I didn’t know.”

“Being alive.”

“Being back with my mom and not living on the street, feeling that someone actually cares. Not being used.”

Selected responses to “What do you like most about your life?”

“I don’t have to deal with my parents anymore.”

“Just glad to be alive.”

“I was able to get off the streets and get the help I needed.”

“Looking forward to seeing clearly with my new glasses.”

“What I like best about my life is that I still get to see my friends and family.”

“I can find beauty in many places and somehow stay afloat.”

“How strong everything made me.”

Looking to the future

The youth were asked to predict what they would be doing in five years from now. Almost one in ten (9%) reported that they expected they would be dead by then and 4% thought they would still be on the street. However, many of the youth had optimistic goals and dreams – one in three expected to have a home of their own and almost half (48%) expected to have a job.

Implications of the 2010 Olympics

Preparations for the 2010 Olympics have provoked fierce protest about the loss of low-cost housing and the number of homeless in Vancouver. Youth in the nine communities were asked whether or not they felt the Olympics had already had an effect on them in terms of increased or decreased access to housing, job opportunities and services. Youth in Vancouver and the Interior were more likely to have thought about the effect the Olympics would have on them than youth in the other regions. Twenty-eight percent of youth from Vancouver and 25% of youth from the Interior checked the response “I have not thought about it” compared to 36% to 48% of youth in the other regions.

As to be expected, youth in Vancouver were less likely to report that the upcoming Olympics had not already affected their lives. Only 26% of youth from Vancouver reported that the Olympics had not yet affected them, compared to 45% to 50% of youth elsewhere. In Vancouver, the Interior and on Vancouver Island, several youth wrote comments about increased problems with police that they attributed to the upcoming Olympics.



Impact of 2010 Olympics		
	More access	Less access
Housing	15%	27%
Services	5%	21%
Job prospects	14%	15%

“[Because of the Olympics] cops are even worse.”

17-year-old male

Final Word

Recommendations

This report clearly illustrates that the lives of marginalized and street-involved youth are complex and full of challenges, dangers, joys, and opportunities. Many youth, despite overwhelming odds, are working hard, attending school and looking for ways to not only survive, but to thrive.

Given the compelling information presented in this report about the challenges many of these youth face within their families, more funding should be directed towards helping families be safe, nurturing environments for young people. There is a demonstrated need for adequate services to address the needs of youth and their families. These should include accessible family counselling and practical educational and mentoring assistance to those parenting adolescents, as well as to the youth themselves.

Early adolescence appears to be a key time of vulnerability, when youth are at risk of negative impacts on their lives such as introduction to drugs, alcohol, sexual exploitation, and getting kicked out of home. Providing assistance and education to families of young adolescents may help to produce and maintain nurturing, safe and supportive environments in which young people can maximize their potential.

For those youth whose families cannot provide support or who need specialist support, access to substance use treatment, safe and supportive housing options, job training and education is vital.

Support must be provided for marginalized and disenfranchised youth to reach their goals and escape their current situations. For example, many youth have education aspirations beyond high-school but will need resources and understanding to make this happen.

The unacceptably high levels of sexual exploitation, violence, abuse and discrimination experienced by the youth in this survey must be addressed in order to uphold their right to live in an environment that is healthy, safe and nurturing.

While youth highlighted shelter, food and employment as most needed in their community, the data provided also suggests many have unmet mental health needs, therefore a focus on the specialist mental health and emotional needs of this population is vital.

Finally, the over representation of Aboriginal youth in this study, and the dramatic rise in the percentage of Aboriginal youth who are marginalized and street-involved since 2000, suggests schools and communities may not be providing enough culturally appropriate support for these youth and their families. Serious and timely consideration must be given to ensuring Aboriginal organizations are provided with the capacity and resources to offer prevention programs, safe housing and other supportive services which can meet the needs of these young people.

Recommendations

- Provide adequate services to address the needs of youth and their families
- Prioritize assistance and education for families of young adolescents
- Provide access to substance use treatment, safe and supportive housing options, job training, education and youth mental health services
- Provide additional supports to help youth reach their educational goals
- Address the unacceptably high levels of sexual exploitation, violence, abuse and discrimination experienced by youth
- Provide Aboriginal organizations with the capacity to offer culturally appropriate safe housing and other supportive services, in order to address the rising numbers of Aboriginal youth who are marginalized and street-involved

Research in action

It is hoped that, as with the 2000 report, this report will make a difference to the lives of the young people who took part and to those who may follow after them. Survey results from the school based and special population surveys, conducted by MCS since 1977, have been used by the provincial and federal government as evidence for policy and program decisions on youth issues. The evidence presented through this report can be used to track health trends, evaluate the impact of prevention and treatment services, identify protective factors and use them to design health promotion strategies for marginalized and disenfranchised youth.

Website

Copies of this report, and other MCS reports, fact sheets and information guides are available on the McCreary Centre Society website at www.mcs.bc.ca

Next Steps

The McCreary Centre Society developed the Next Steps workshop following the first Adolescent Health Surveys to involve youth in:

- Responding to the results
- Identifying priority issues in their community
- Making recommendations and planning for action to address these issues

MCS aims to do the same with the results of this survey - taking the research back to the youth who provided the data. With the assistance of the Community Researchers in each of the nine communities, workshops will be held involving marginalized youth in all aspects of their design, facilitation, participation and evaluation.

MCS will also conduct further in-depth analysis of specific issues for identified youth in this survey (including data provided by Aboriginal youth, which will be published in late 2007).

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

Building Resilience in Vulnerable Youth (2006)

Promoting Healthy Bodies: Physical activity, weight, and tobacco use among B.C. 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

Harassment & Discrimination Among BC Youth
Safety & Violence Among BC Youth
Injuries Among BC Youth
Emotional Health of BC Youth
Connections to School Among BC Youth
Sexual Activity Among BC Youth
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
Survey Methodology for AHS III
Sexual orientation and HIV risk for Aboriginal youth
Sexual orientation and HIV risk for Asian youth
Sexual orientation and HIV risk for European-heritage youth
Stigma and Sexual orientation for Aboriginal youth
Stigma and Sexual orientation for Asian youth
Stigma and Sexual orientation for European-heritage 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

Voices from the Inside: Next Steps with youth in Custody (2007)

The Next Steps: BC Youths' Response to the AHS III and Ideas for Action (2006)

The Next Steps: BC Youths' Response to the AHS III and Ideas for Action (2006)

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)