

## **MEDIA RELEASE | March 2012**

### ***Raven's Children III- new McCreary Centre Society report on the health of Aboriginal youth in BC***

The McCreary Centre Society has released its latest report about the health of Aboriginal students in BC. Using data from the 2008 Adolescent Health Survey, the report shows that the majority of Grade 7-12 students in BC who identify as Aboriginal report being in good or excellent health, have plans to graduate high school and are showing some improved health risk and injury prevention behaviours compared to their peers in 2003.

The report also found that Aboriginal youth who felt they had skills, were engaged in their activities, and were connected to their culture, family and school all reported better health than youth without these factors present. These connections were particularly important to the healthy development of youth facing multiple challenges in their lives, as were the presence of supportive adults and friends.

In addition to the survey results, the report includes the perspectives of over 100 Aboriginal youth and adults who took part in community consultations to identify the priority youth health issues for inclusion in the report. Concerns about the discrepancies in the health picture of youth living on and off reserve were noted in every consultation across the province as was the importance of cultural connectedness to the healthy development of Aboriginal youth.

While the report noted many positive aspects of Aboriginal youth health, it also highlighted areas of concern, such as high rates of abuse and experiences of a family member or friend attempting or committing suicide. Community members consistently pointed out that these results should not be viewed without acknowledging the ongoing impact of colonization and the transgenerational trauma from residential schools and other practices and policies that have led to the marginalization of Aboriginal peoples.

Samantha Tsuruda, one of the authors of the report said, *"Our intention with Raven's Children III was to present a balanced picture of Aboriginal youth health in BC, by highlighting what is going well for these youth and drawing attention to issues that should be addressed. Community members we met around the province consistently demonstrated their efforts to promote the wellbeing of this incredibly resilient population, and shared that learning and practicing their culture is a way for Aboriginal youth health to improve."*

The report also includes some examples of good practice in school and community policies and programs which young people felt were positively impacting the health of Aboriginal children and youth. The importance of these programs was highlighted by Tanya Gregoire, a Tahlitan youth from Iskut First Nations who was a member of the advisory committee for the report. She notes the need for culturally sensitive and specific programs for young people. *"From my own experience of these programs the Urban Aboriginal community of the Ki-Low-Na Friendship Society has become my second home. There are many significant people there who have believed in me. I cannot tell you how much support from organizations such as this has helped me realize I have a voice, I can make change, I am a part of the youth movement and I should be proud to be Aboriginal."*



*The McCreary Centre Society is a non-government, non-profit organization committed to improving the health of B.C. 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.*

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## BACKGROUNDER

This report presents findings from the 2008 BC Adolescent Health Survey (AHS). The BC Adolescent Health Survey provides the most comprehensive picture of the physical and emotional health of BC youth. The survey was administered by Public Health Nurses in 50 of BC's 59 school districts, and included 147 questions asking youth about their perceptions of their current physical and emotional health, risky behaviours and health promoting practices.

This is the fourth BC Adolescent Health Survey conducted by the McCreary Centre Society. Over 29,000 BC public school students in grades 7-12 completed the survey between February and June 2008. Previous surveys have been conducted in 1992, 1998 and 2003.

In addition to the results from the survey, the report includes the views and experiences of approximately 100 people, including youth, adults and Elders, in Aboriginal communities across the province who took part in focus groups.

The results of this report will be used by government agencies, schools and communities to plan and assess programs and services directed towards Aboriginal young people. It provides comprehensive information on the health picture of Aboriginal youth in BC, as well as essential information on health trends, and about risk and protective factors for Aboriginal youth.

### Key findings

- Aboriginal students who reported high levels of cultural connectedness were more likely to report feeling connected to school and to exercise regularly. Aboriginal youth who spoke a language other than English at home were more likely to report a sense of cultural belonging and were more likely to be taking part in cultural practices.
- The majority of Aboriginal youth expected to graduate high school (76%) and most had not skipped school in the past month. They were also more likely to enjoy school than in 2003 (80% vs 76%). There were different protective factors for males and females which increased the likelihood that they planned to go on to post-secondary education.
- The percentage of Aboriginal youth who reported they had experienced racial discrimination decreased since 2003 (From 20% to 17%).
- Twenty-seven percent of Aboriginal female youth had been sexually abused (similar to 2003). The percentage of males who had been sexually abused rose from 2003 to 2008. The percentage of young people reporting physical abuse rose from 20% to 25% between 2003 and 2008.
- There were differences in the health picture of youth growing up on reserve when compared to youth off reserve, such as youth currently living on reserve were more likely to miss out on needed medical care than those living off reserve, and had higher rates of recent government care experience than youth off reserve. However, youth living on reserve were more likely than youth off reserve to be speaking a language other than English at home, and to be participating in cultural practices.
- Rates of often or always going to bed hungry because of a lack of food at home ranged from 3% in the Interior to 14% in Vancouver Coastal.
- Rates of trying alcohol remained stable between 2003 and 2008, and over a third of Aboriginal youth had never tried it. Compared to 2003, fewer students tried marijuana or smoking cigarettes in 2008.

- There were gender differences in accessing services: 21% of females and 15% of males reported that they had not accessed medical help in the past year when they needed it, and 24% of females and 10% of males had not accessed needed mental health services.
- Most Aboriginal youth reported that they had friends, adults in their family and adults outside their family that they could turn to for help when they needed it. Youth with supportive doctors, nurses, teachers, or school staff reported better health than those who approached these people for support but did not find the experience helpful.
- Aboriginal youth who enter the care of the government have faced many challenges, yet if they had access to supportive peers and adults the majority reported being in good or excellent health, having high self-esteem such as feeling good about themselves and their abilities, and having plans to continue their education.
- Youth who felt they had skills, were engaged in their activities, and were connected to their culture, family and school all reported better health than youth without these factors present; this was true even for youth facing multiple barriers to healthy development.

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*The report was funded by the BC Ministry of Children and Family Development. Additional funding was provided by the Office of the Representative for Children and Youth. McCreary also gratefully acknowledges the support of the Canadian Institute of Health Research*

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*The report can be downloaded at [www.mcs.bc.ca](http://www.mcs.bc.ca).*

*A schedule of Webinar presentations of the results is available at [www.mcs.bc.ca](http://www.mcs.bc.ca).*