



YOUTH IN AND FROM GOVERNMENT CARE IN VANCOUVER COASTAL REGION:

Profile and trends from the BC Adolescent Health Survey

HOUSING

MEANINGFUL CONNECTIONS

EDUCATION

EMPLOYMENT

HEALTH, WELLNESS, AND CULTURE



McCreary
Centre Society

Prepared for TRRUST Collective Impact by McCreary Centre Society

We acknowledge that McCreary Centre Society is located on the ancestral, traditional, and unceded territory of the Coast Salish Peoples, including the territories of the xwməθkwəyəm (Musqueam), Skwxwú7mesh (Squamish), and Səl ilwətaʔ/Selilwitulh (Tseil-Waututh) Nations. We also acknowledge the ancestral and continuing connection to this land of the Métis Nation.

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KEY FINDINGS

TRRUST Collective Impact is aiming to improve outcomes for youth with government care experience in Vancouver in the areas of housing; meaningful connections; education; employment; and health, wellness, and culture.

Data from the BC Adolescent Health Survey collected in 2008, 2013, and 2018 for the Vancouver Coastal region shows that although the health picture of youth with care experience aged 12–19 is generally poorer than for their peers without care experience, there have been some improvements in these domains since TRRUST was formed in 2014.

Housing

In 2018, youth in Vancouver Coastal with care experience were less likely than a decade earlier to have moved multiple times (13% had moved three or more times in the past year vs. 26% in 2008). They were also less likely to have run away in the past year (24% vs. 43% in 2008).

In 2018, 3% of youth with care experience often or always went to bed hungry because there was not enough money for food at home. Although still higher than youth without care experience (1%), this was less than half the rate of five years earlier (7% in 2013).

Meaningful connections

Youth with care experience were more likely to feel an adult in their community cared about them compared to five years earlier (55% vs. 44% in 2013). They were also more likely to find the adults they approached for help to be helpful than in previous years. For example, 69% of those who approached their social worker for help found it helpful, compared to 38%* in 2008.

Education

The percentage of youth with care experience who did not expect to finish high school decreased from 10% in 2008 to 3% in 2018. There was no increase between 2013 and 2018 in youth planning to attend post-secondary. However, they were more likely to plan to attend than a decade earlier (72% vs. 61%).

Employment

Working in excess of 20 hours a week during the school year has been linked to poorer health and well-being among youth. In 2018, 1 in 10 youth with care experience who worked at a paid job worked this often, compared to 4 in 10 in 2008.

Health, wellness, and culture

Youth in and from care were less likely than in previous survey years to experience extreme stress (e.g., 13% in 2018 vs. 21% in 2008) and extreme despair (e.g., 12% in 2018 vs. 20% in 2013) in the past month. Also, despite an increase in suicidal ideation among youth with care experience, they were half as likely as a decade earlier to have attempted suicide in the past year (11% vs. 22% in 2008).

Youth with care experience were half as likely as a decade earlier to have missed out on needed medical care in the past year (16% vs. 32%).

BACKGROUND

About TRRUST

TRRUST is a Collective Impact initiative which began in April 2014. TRRUST is composed of over 350 members, including representatives from non-profit organizations, government agencies, and young people with lived experience in care. The common goal of TRRUST is to achieve system-wide improvements in outcomes for youth transitioning out of government care in Vancouver, British Columbia.

TRRUST is guided by its Strategic Advisory as well as the Collective Young Leaders, who are a group of youth with lived experience in care. McCreary Centre Society has acted as TRRUST's backbone agency since 2016, providing logistical support to the initiative. There are five clusters (working groups) within TRRUST. Each cluster focuses on one of the priority areas identified by young people as needed for a successful transition from government care. Findings in this report are organized based on these clusters, specifically housing; meaningful connections; education; employment; and health, wellness, and culture. More information about TRRUST can be found at mcs.bc.ca/trrust.

About the BC Adolescent Health Survey (BC AHS)

The BC Adolescent Health Survey (BC AHS) is one of the population-level data sources available to TRRUST to measure progress in improving outcomes for youth in and from government care. The survey has been carried out every five years since 1992. Over 38,000 students in Grades 7–12 completed the 2018 BC AHS in public schools across British Columbia, including more than 1,600 students who had ever been in government care or an alternative to care. Students answered 139 questions about their health and about the risk and protective factors in their lives. More information about the BC AHS can be found at mcs.bc.ca.

Data from the BC AHS is considered representative of students in Grades 7–12 attending mainstream schools in BC. It does not include youth who were in most alternative schools, independent schools, were homeschooled, or were not in school on the day the survey was administered. Some youth may also have been excluded because the survey was only available in paper form and in English.

Data is also considered representative at the regional level. The results in this report focus on youth aged 12–19 in the Vancouver Coastal Health region. The report includes data from around 800 youth with care experience who participated in the BC AHS in this region over the past decade.

The question wording asking about government care experience has changed slightly over time to reflect changes in legislation. For example, the question in 2018 includes reference to Delegated Agencies and included the option Kith and Kin Agreements. For this reason, percentages for trends (changes across survey years) were among youth with experience in the types of government care that were asked about on all three BC AHS surveys over the past decade (2008, 2013, and 2018)—specifically, foster care, group homes, and Youth Agreements.

The 2018 BC AHS asked whether youth had experienced any of the following types of care or alternatives to care: foster care, group home, Youth Agreement, Agreement with Young Adults (AYA), kith and kinship agreement, or custody centre. For analyses within the 2018 BC AHS, youth with any of these experiences (“ever in care”) were compared to youth who had none of these experiences (“never in care”).

Analyses in this report

All reported comparisons are statistically significant at least at $p < .05$. This means there is less than a 5% likelihood the results occurred by chance.

Any percentage that is marked with an asterisk (*) should be interpreted with caution, as the standard error was higher than others but is still within the releasable range.

The report provides associations, and does not imply causation or the direction of the relation.

For more details about the methodology, sample, and limitations of the BC AHS, please visit mcs.bc.ca.

FINDINGS

HOUSING



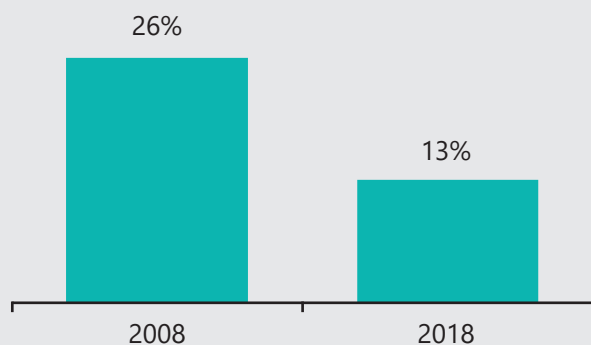
TRRUST's housing cluster is focused on ensuring that youth transitioning out of care have access to safe and affordable housing in a neighbourhood of their choice. For example, the cluster has worked with the City of Vancouver and other housing providers in the Vancouver Coastal region to have youth from care considered a priority group for social housing.

In 2018, youth with care experience were more likely than those never in care to have moved in the past year (48% vs. 22%), and to have moved multiple times. However, they were less likely to have moved three or more times compared to a decade earlier. Similarly, youth with care experience were more likely than those never in care to have run away in the past year (25% vs. 7%), but were less likely to have run away than 10 years earlier (43% in 2008).

Going to bed hungry

Youth with care experience were three times more likely than those never in care to have gone to bed hungry often or always because there was not enough money for food. However, there was a decrease from five years earlier in youth with care experience going to bed hungry this frequently.

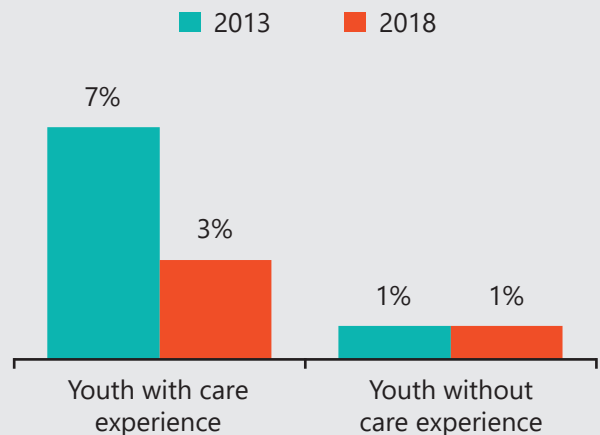
YOUTH WHO MOVED THREE OR MORE TIMES IN THE PAST YEAR (among those with care experience)



A very small percentage of youth with care experience reported living alone in the past year, which was similar to the percentage among youth never in care.

In 2018, youth with care experience were less likely than those never in care to feel safe in their neighbourhood during the day (81% vs. 93%) and at night (54% vs. 65%), which was similar to 2013.

YOUTH WHO WENT TO BED HUNGRY OFTEN OR ALWAYS BECAUSE THERE WAS NOT ENOUGH MONEY FOR FOOD



MEANINGFUL CONNECTIONS

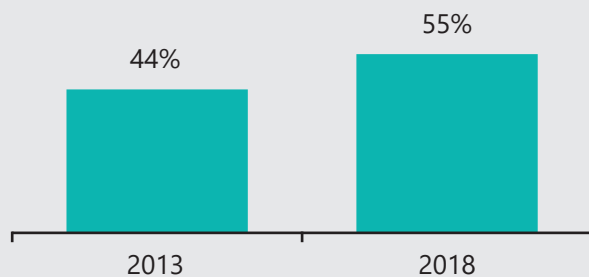


The meaningful connections cluster aims to foster supportive relationships and offer meaningful experiences to youth in and from care. The cluster hosts regular socials and events, and provides funding for young people to pursue experiences that are meaningful to them.

Supportive adults

While youth with care experience were less likely than those never in care to feel that an adult in their community cared about them (55% vs. 63%), they were more likely to feel an adult cared about them compared to five years earlier.

YOUTH WHO FELT AN ADULT IN THEIR COMMUNITY CARED ABOUT THEM (among those with care experience)

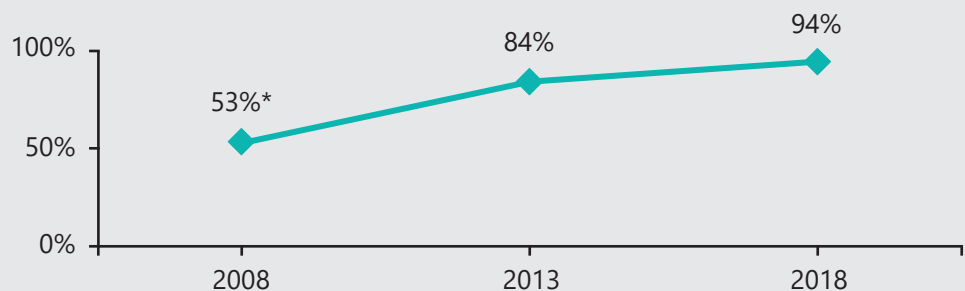


Around one in four youth with care experience (23%) had an adult outside their family whom they felt they could talk to if they were having a serious problem. This was comparable to five years prior, and was also similar to the percentage among youth without care experience.

The survey asked youth if they had approached various people for support in the past year and if they found the assistance helpful. Reflecting patterns among youth never in care, the majority of youth with care experience (71%) had asked a family member for help, and just over half (56%) had approached a teacher. Youth with care experience were more likely than those never in care to have asked a school counsellor (47% vs. 34%), youth worker (23% vs. 8%), and social worker (28% vs. 5%) for help.

Among youth with care experience who had approached a social worker for help in the past year, 69% found it helpful. This was an increase from a decade earlier (38%* found a social worker helpful in 2008). Similarly, youth with care experience were more likely to find their teacher helpful in 2018 than in previous survey years. Further, in 2018 they were as likely as youth never in care to find their teacher helpful, unlike a decade earlier when they were less likely than youth never in care to feel this way.

YOUTH WHO FOUND A TEACHER HELPFUL (among those with care experience who asked a teacher for help in the past year)



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

Peers

Most youth with care experience had at least one close friend (92% vs. 97% of youth never in care), including 72% who had three or more close friends (vs. 84% among youth never in care). Percentages were similar to those five years earlier.

In the past year, almost four in five youth with care experience (79%) had approached a friend for help whom they knew in person. The majority of these youth (93%) found the experience helpful (percentages were similar among youth never in care).

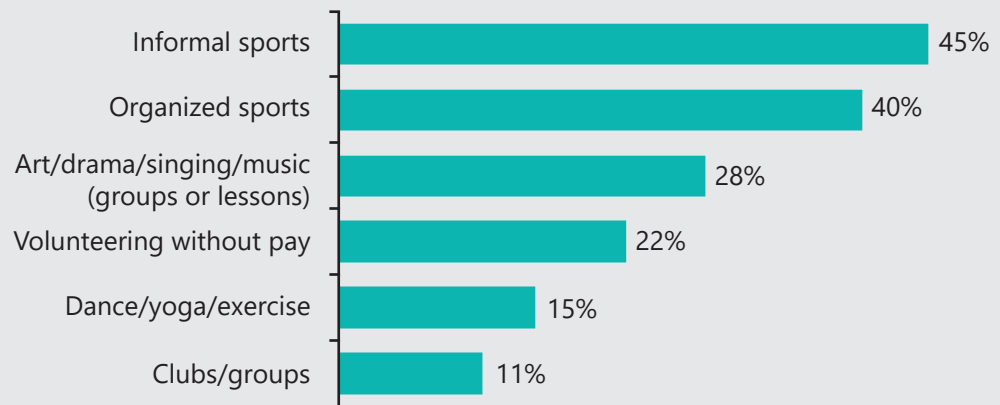
Youth with care experience were more likely than their peers never in care to have online friends they had never met in person (43% vs. 30%), including three or more online friends (25% vs. 15%). Around a third (36%) had asked their online friends for help in the past year (vs. 17% of youth never in care), and most of these youth (83%) found it helpful.

Involvement in community activities

Overall, youth with care experience participated in extracurricular activities at similar rates as they had five years earlier, and at similar rates to their peers without care experience. One exception was they were less likely than youth never in care to have participated in organized sports on a weekly basis in the past year (40% vs. 56% among youth never in care).

Youth with care experience were less likely than those never in care to feel their community activities were meaningful to them (49% vs. 67%) and that their ideas were listened to within these activities (29% vs. 45%). They were also less likely to feel like a part of their community (35% vs. 44%). Percentages were comparable across survey years.

PARTICIPATION IN EXTRACURRICULARS AT LEAST WEEKLY IN THE PAST YEAR (among youth with care experience)



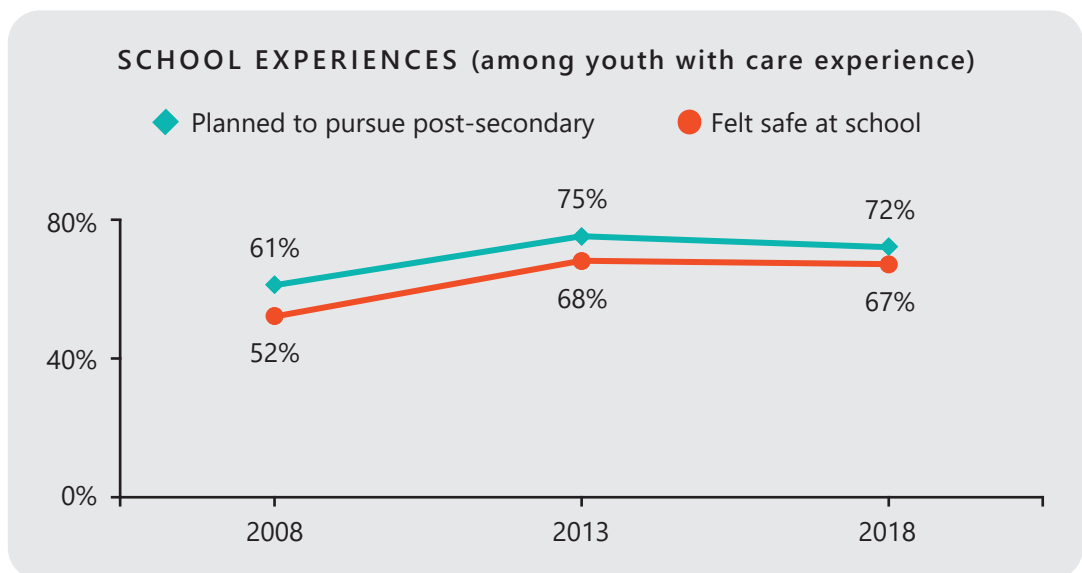
EDUCATION



The TRRUST education cluster is focused on ensuring youth in and from care have the financial and other supports necessary to graduate high school and access post-secondary opportunities.

In 2018, 3% of youth with care experience did not expect to finish high school, which was lower than a decade earlier (10% in 2008). Although youth with care experience were less likely to plan to continue their education after high school compared to those never in care (72% vs. 86%), they were more likely than a decade earlier to plan to pursue post-secondary education.

Around half of youth with care experience (53%) felt like a part of their school (vs. 63% of youth never in care) and 55% felt happy at school (vs. 63% among youth never in care), with similar percentages across survey years. Also, youth with care experience were less likely than those never in care to feel safe at school (77% among those never in care), but were more likely to feel safe than a decade earlier.



Note: For both experiences, the difference between 2013 and 2018 was not statistically significant.

EMPLOYMENT



TRRUST's employment cluster supports youth in and from care to access employment opportunities with employers who are understanding and flexible.

Around a quarter of youth with care experience (26%) had worked in the past year, and 10% of those who worked at a paid job had worked more than 20 hours each week (percentages were comparable among youth never in care).

Working in excess of 20 hours each week has been linked to poorer health and well-being among youth. In 2018, youth with care experience who worked at a paid job were less likely to have worked an excessive number of hours each week compared to a decade earlier (40%* in 2008).

HEALTH, WELLNESS, AND CULTURE



The health, wellness, and culture cluster is the newest cluster and was formed after the 2018 BC AHS data was collected. This cluster was created to increase coordination of TRRUST's focus on supporting the mental, physical, and cultural health of youth with care experience.

Mental health and well-being

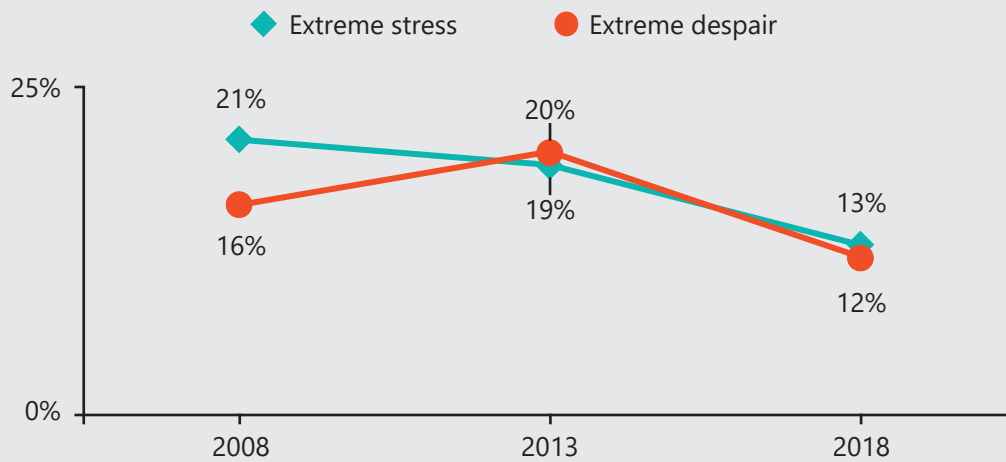
Youth with care experience were less likely than those never in care to report good or excellent mental health (62% vs. 75%). However, there was a decrease in the mental health ratings of youth never in care from five years earlier (from 82% in 2013), while this reduction was not seen among youth from care.

Youth from care were less likely than in previous survey years to experience extreme stress and despair in the past month. In contrast, among youth without care experience, there were increases in extreme stress (from 8% in 2013 to 11% in 2018) and despair (from 6% in 2008 to 7% in 2013 and 2018).

Youth with care experience were more likely than those never in care to report having a mental health condition, including depression (29% vs. 12%) and anxiety (22% vs. 14%). Percentages for youth from care were not significantly different across survey years.

Most youth with care experience (71%) could identify something they were good at. This percentage was similar to previous survey years and to the rate among youth never in care.

EXPERIENCES OF EXTREME STRESS AND DESPAIR IN THE PAST MONTH (among youth with care experience)



Note: For extreme despair, the percentage in 2008 was not significantly different from that in 2013 or 2018. For extreme stress, the percentage in 2013 was not significantly different from that in 2008 or 2018.

Self-harm and suicidality

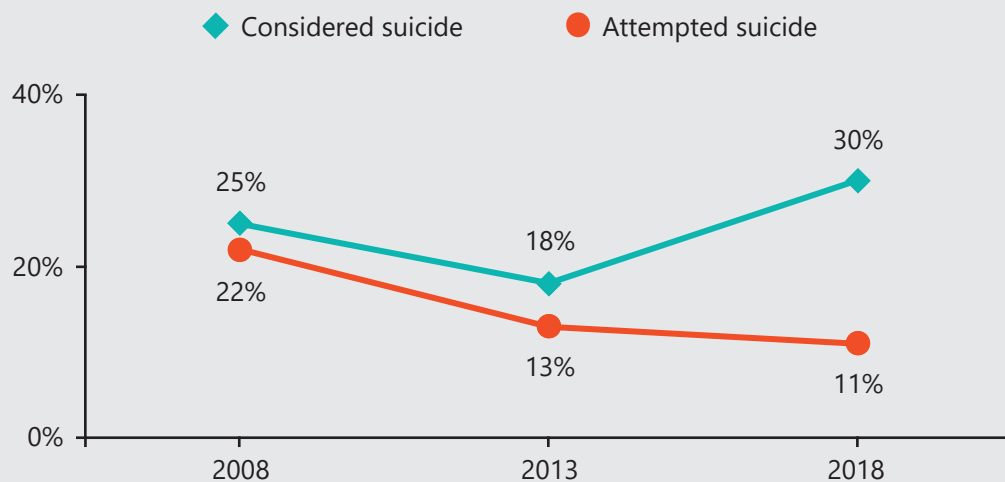
Around a third of youth from care had cut or injured themselves on purpose in the past year (vs. 15% of youth never in care). Rates of self-harm were higher than five years previously (32% in 2018 vs. 20% in 2013), which was also the case among youth never in care.

Also, 30% of youth from care had seriously considered suicide in the past year (vs. 14% among youth never in care). As with youth never in care, rates of suicide ideation went up from five years earlier. However, youth with care experience were half as likely as a decade earlier to have attempted suicide in the past year, although rates were still higher than among youth without care experience (11% vs. 3%).

Overall health

Similar to the pattern for mental health ratings, youth with care experience were less likely than those never in care to describe their overall health as good or excellent (73% vs. 82%); however, the percentage remained relatively stable across survey years, whereas there was a decrease among youth never in care (from 87% in 2013).

YOUTH WHO HAD CONSIDERED AND ATTEMPTED SUICIDE IN THE PAST YEAR (among those with care experience)

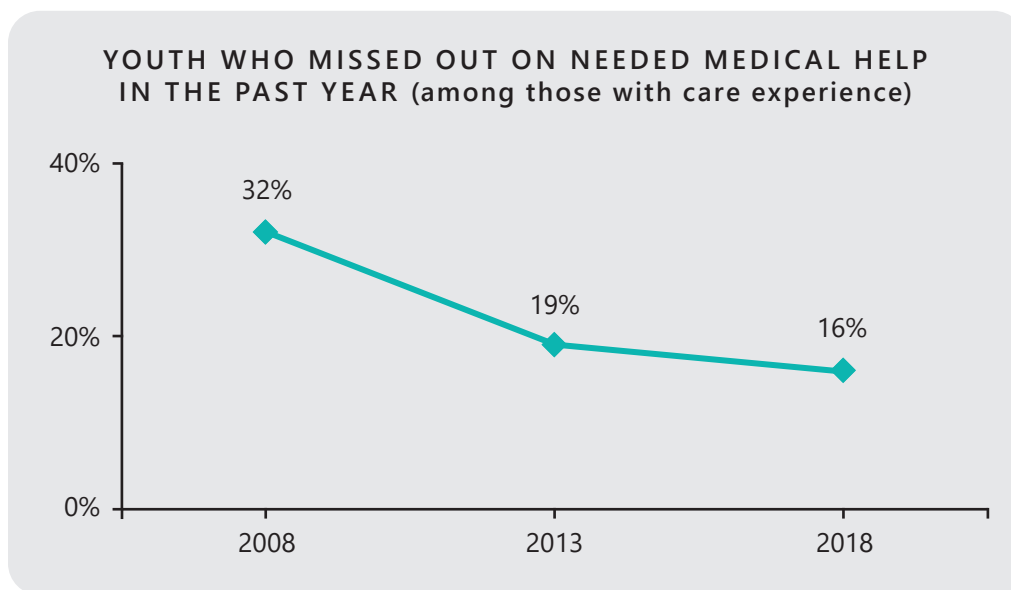


Note: For considered suicide, the percentage in 2008 was not significantly different from that in 2013 or 2018. For attempted suicide, the difference between 2013 and 2018 was not significant.

Missed out on needed services

While youth with care experience were more likely than those never in care to have missed out on needed medical help in the past year (16% vs. 7%), they were half as likely as a decade earlier to have missed out on these services.

Around a quarter of youth (26%) had missed out on needed mental health services in the past year, which was comparable to previous years.



Note: The difference between 2013 and 2018 was not statistically significant.

NEXT STEPS

The findings in this report show that overall youth with care experience in Vancouver Coastal continue to experience poorer outcomes than their peers never in care. However, there are notable improvements in each of the areas that TRRUST is working to address, and a few previous disparities between youth with care experience and those never in care were no longer present in 2018.

The results are encouraging but also highlight the areas where work is needed to ensure that youth in and from care experience the equity of opportunity each cluster is striving to achieve. It is hoped that through the work of TRRUST and others seeking to improve outcomes for youth in and from care, the next BC AHS in 2023 will show further improvements.

The BC AHS is aimed at youth in mainstream school and therefore misses those not attending, and those who have transitioned out of care at 19. For this reason, McCreary's Youth Research Academy are conducting a longitudinal study of youth aging out of care in BC which aims to survey youth at six-month intervals from six months before their 19th birthday through into their mid 20's. To learn more about this study, please contact Karen@mcs.bc.ca or visit mcs.bc.ca. Any young person wishing to participate can complete a survey (please see below):

For youth currently in government care in BC, or an alternative to care (e.g., on a Youth Agreement), who are 18 and for those who have turned 19 or 20 and have had their supports extended due to the COVID-19 pandemic: form.simplesurvey.com/f/l/YouthTransitionTIME1.

For youth with care experience who turned 19 or 20 within the past year and have aged out care in BC: form.simplesurvey.com/f/l/YouthTransitionTIME2.

To learn more about TRRUST visit: mcs.bc.ca/trrust or contact Erica at erica_trrust@outlook.com.





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