

Making the Right Connections: Promoting positive mental health among BC youth

Focus on youth with a health condition or disability

In 2008, over 29,000 BC youth in Grades 7 through 12 completed the fourth BC Adolescent Health Survey (AHS). The AHS is a paper and pencil questionnaire that provides a current and accurate picture of the health of BC youth. The 2008 AHS was completed in 1,760 classrooms in 50 of BC's 59 school districts. Following the release of the results (*A Picture of Health*), focus groups and workshops were conducted, giving youth the opportunity to respond to the results.

Using data from the AHS and the youth focus groups and workshops, McCreary created a report entitled *Making the right connections* (2011). This report offers a detailed look at the mental health of BC youth, and the role of various protective factors in promoting positive mental health. This fact sheet summarizes the findings contained in the report for youth with a debilitating health condition or disability.



The percentage of youth in mainstream BC schools who reported any kind of debilitating health condition or disability declined over the past decade from 13% in 1998 to 9% in 2008 (10% of females and 7% of males). Youth who reported that they had a health condition or disability were asked about the nature of their disability. The most commonly reported conditions were long-term illnesses such as diabetes or asthma (5% of youth), and 3% reported having a mental or emotional health condition.

Having any sort of health condition or disability was associated with mental health challenges. Youth with a disability or health condition were at least twice as likely as their peers without these challenges to report extreme stress or despair, self-harm, or considering or attempting suicide. They were also less likely to feel safe at school, feel good about their body image or have post-secondary educational aspirations. Among those whose disability was a mental or emotional health condition, these rates were even higher.

Promoting positive mental health among youth with a health condition or disability

Support networks

Over half of youth with a debilitating mental or emotional health condition did not access mental health support services when they needed them. They were, however, just as likely as their peers to seek support from friends and teachers, and more likely to seek help from school counsellors, other school staff, youth workers, doctors or nurses, religious leaders and social workers. However, they were less likely than their peers to find teachers, other school staff and doctors or nurses helpful.

This summary profile of the mental health of youth with a health condition or disability is one of 8 fact sheets that accompany the report, *Making the right connections* (2011), all of which can be downloaded at www.mcs.bc.ca.

Extracurricular activities

Having any kind of health condition or disability limited youth's participation in some extracurricular activities such as weekly organized sports. However, involvement in activities had positive mental health benefits. For example, female youth with a chronic health condition or disability reported higher self-esteem if they participated in weekly dance/aerobics classes.

Skills and competencies

Youth with a chronic health condition or disability reported better physical and mental health if they felt that they had skills and competencies in areas such as school subjects and sports. Additionally, 9% of youth with a disability or health condition who felt that they were good at computer or video games reported attempting suicide, compared to 17% who did not report feeling skilled in this area.

Family, school and cultural connectedness

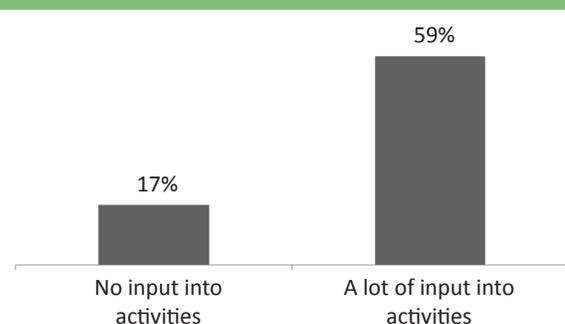
For females with a debilitating health condition or disability, feeling connected to their family or culture was strongly associated with having post-secondary goals. The more connected youth felt to school, the more likely they were to report higher self-esteem, and the less likely

they were to have considered suicide. Males with a health condition or disability were ten times more likely to have post-secondary aspirations if they were highly connected to school than if they were less connected to school (even after controlling for other protective factors in their lives).

Youth engagement

Being involved in meaningful activities was among the more important protective factors for good/excellent general health for youth who had a limiting health condition or disability. Having input into their activities also emerged as being protective against suicidal ideation for males.

Higher self-esteem by activity input
(among youth with a limiting health condition or disability)



Who youth with a mental or emotional health condition asked for help

	Asked for help	Was helpful (among those who asked for help)
Friend	84%	81%
Teacher	45%	59%
School counsellor	47%	63%
Other school staff	28%	36%
Youth worker	31%	51%
Doctor or nurse	44%	60%
Religious leader	23%	45%
Social worker	24%	40%

Youth's response to the data

Young people suggested increasing awareness about the different types of illnesses and disabilities and what it is like to live with them to reduce victimisation and discrimination.



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