New Brunswick Student Wellness Survey

Grades 6–12 2018–2019



Feedback Report Results by Sex





The New Brunswick Student Wellness Survey: Feedback report provides highlights of major findings related to key provincial indicators that are considered crucial for monitoring student wellness behaviours and for developing a culture of well-being in our province.

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The New Brunswick Student Wellness Survey is a provincial initiative of the Department of Social Development – Wellness Branch, in co-operation with the Department of Education and Early Childhood Development. Data collection and analysis is conducted by the New Brunswick Health Council. The purpose of the survey is to examine the health and wellness attitudes and behaviours of students. The data was collected from 39,000 students of 187 (98%) public schools in New Brunswick. Data was also collected from two First Nations Schools to prepare a report specific to the First Nations schools' context.

Please visit www.nbhc.ca/errata to see if there are corrections or updates to this document.



Engager, Évaluer, Informer, Recommander



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INTRODUCTION

Regarding the New Brunswick Student Wellness Survey

The New Brunswick Student Wellness Survey was initiated in 2006–2007 to support the implementation of the Wellness Strategy (Province of New Brunswick, 2014). The survey initiative aims to collect information directly from the perspective of children and youth and their parents, and to mobilize action on well-being. The surveys have followed a 3-year cycle, as illustrated in the table below.

SURVEY	GRADES	SURVEY COMPLETED BY	SURVEY PERIOD
New Brunswick Student Wellness Survey	Grades 6 to 12	Students	2006-2007 2009-2010 2012-2013 2015-2016 2018-2019
New Brunswick Elementary Student Wellness Survey	Kindergarten to Grade 5	Student version: Students in Grades 4 and 5 Family version: Parents of students in Kindergarten to Grade 5	2007-2008 2010-2011 2013-2014 2016-2017 2019-2020

These surveys provide the foundation for *New Brunswick's Wellness Strategy 2014–2021: The Heart of our Future* (Province of New Brunswick, 2014), which aims to enhance quality of life for all. Two key outcomes were identified in New Brunswick's Wellness Strategy:

- · Healthy and resilient people
- · Healthy and resilient environments

The New Brunswick Student Wellness Survey addresses six key themes related to those outcomes: learning, social and emotional development, participation and engagement, healthy lifestyles, safety, and health status. The information contained in this report is provided to assist with the prioritization, development and implementation of initiatives that promote wellness attitudes and behaviours among students.

This Year's New Brunswick Student Wellness Survey

In 2018–2019, 39,000 students from 187 (98%) public schools participated in the survey. This compares to over 38,000 students from 181 (94%) public schools in the last edition of the survey. Two First Nations schools have also participated in the current cycle. Data collected from First Nations schools is only included in those schools' reports.

Why Student Wellness Is Important to Academic Development

The relationship between wellness and education is a mutually supportive one. Wellness is more than the absence of illness and refers to a healthy physical and emotional state, especially as an actively pursued goal (Oxford Dictionaries). Pursuing wellness includes but is not limited to engaging in behaviours such as being physically active, healthy eating, getting proper sleep, and nurturing social and emotional needs. Extensive research has linked these aspects of wellness to educational outcomes such as academic readiness, engagement and success. Ultimately, healthy students are better learners.

A Comprehensive Approach to School Health

The Joint Consortium for School Health (JCSH) promotes the Comprehensive School Health Framework to address both the academic development and wellness of students. The framework emphasizes the need for planning and implementing whole school approaches that incorporate key wellness perspectives and practices across four domains:

- Social and physical environment
- Teaching and learning
- Healthy school policy
- Partnerships and services

To learn more about the Comprehensive School Health Framework and the Joint Consortium for School Health, please visit www.jcsh-cces.ca.

The New Brunswick Student Wellness Survey reports are a valuable source of information for planning initiatives using a Comprehensive School Health Framework. The survey outcomes detailed in those reports may assist in identifying areas of strength on which to build, as well as priority wellness areas that require further attention or promotion. Students, parents, communities and school staff can all be involved in improving student wellness.

Students can use the results to:

- Relate the results to curriculum concepts being taught in the classroom
- Engage in dialogue about the results to seek solutions and create student-driven action plans
- Participate in planning activities for programs related to the School Wellness Grant
- Organize a school-based action team or student wellness club
- Help organize new initiatives (e.g., start an intramural program, hold a health fair, create a video, develop a presentation, or explore health behaviours of another country)
- Share and use the data in class, at home and in the community

Parents and communities can use the results to:

- Plan activities with students, staff, community members and the Parent School Support Committee (PSSC) or Home and School Association (HSA)
- Model healthy behaviours and support the adoption of healthy behaviours
- Share their skills, talents and expertise to support the school and the community
- Work with community groups to help address identified issues

Educators can use the results to:

- Communicate outcomes with students and staff and the Parent School Support Committee (PSSC) Home and School Association (HSA) or community partners
- Incorporate wellness objectives into Improvement Plans
- Develop class assignments and activities
- Engage students in planning and delivering wellness activities
- Create opportunities for staff to model healthy behaviours
- Support requests for funding (e.g., School Wellness Grant)
- Support the development, monitoring and implementation of healthy policies
- Enhance delivery of services or programs for students (e.g., counselling, breakfast program)
- Form new partnerships with parents and the wider community to take collective action
- Implement and evaluate actions to promote wellness

THE NEW BRUNSWICK STUDENT WELLNESS SURVEY DATA IN ACTION

The results of the New Brunswick Student Wellness Survey are shared through various means:

- 1. **School Feedback Reports:** Reports provided to participating public schools comparing their results to the New Brunswick public schools' average.
- 2. **First Nations Schools Feedback Reports:** Reports provided to participating First Nations schools comparing their results to the New Brunswick average among First Nations schools.
- 3. **Educational Districts Feedback Reports:** Reports provided to participating school districts comparing their results to the New Brunswick public schools' average.
- 4. **Educational Districts Data:** Detailed data files provided to participating school districts with information for each school within their jurisdiction.
- 5. **Group Reports:** Disaggregation of the indicators by groups:
 - i. Anglophone and Francophone sectors
 - ii. Sex
 - iii. Aboriginal/Indigenous (attending public school)
 - iv. Immigrants (foreign-born)
 - v. LGBTQ+
 - vi. Students with learning exceptionality or special education needs
 - vii. Students of lower socio-economic status
- 6. **"At a Glance" Provincial Summary Report**: A one-pager provincial overview of key indicators from the *New Brunswick Student Wellness Survey* with comparison to results from the last survey cycle.

Provincial Strategies and Action Plans, such as the 10-year Education plans (Province of New Brunswick, 2016) also use the data to set targets and to monitor progress on initiatives.

At a more local level, key indicators from the *New Brunswick Student Wellness Survey* are embedded within the *My Community at a Glance* (New Brunswick Health Council, 2017) profiles, which provide important information for local governments, Non-Government Organizations, and Regional Health Authorities, as they plan for services and projects to support community needs.

Important considerations

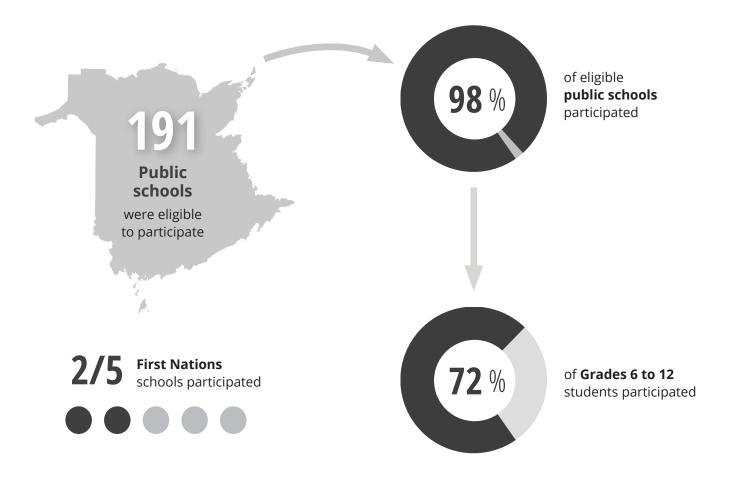
- The questionnaire used in the 2018–2019 *New Brunswick Student Wellness Survey* cycle underwent changes compared to that of the previous cycle. Some questions were removed or amended, other questions were added. As such, caution always needs to be exercised when attempting to compare the results of the survey with results from prior survey cycles because of some differing methodologies or definitions.
- In order to give schools enough time and flexibility to administer the survey, the time frame was over a 7-month period, from November 2018 to May 2019. As a result, the responses to some questions (e.g. modes of commuting to and from school) might have been influenced by seasonality.

SURVEY PARTICIPATION

Who takes part in the New Brunswick Student Wellness Survey?

PARTICIPATION RATES

In 2018–2019, a total of 98% of eligible public schools and 2 First Nations schools have participated in the New Brunswick Student Wellness Survey. Such high level of school participation provides high credibility to the district and provincial results. To ensure quality information, it is equally important for an adequate number of students from the participating schools to complete and return their survey. In 2018–2019, 72% of students from participating public schools across New Brunswick returned their completed survey.*



METHODOLOGICAL NOTE

All efforts are made to encourage the participation of students. However, in some cases, the number of respondents within a given school may be lower than anticipated. Caution should be exercised when interpreting results, especially in those cases where there are a relatively small number of students responding to the survey. In cases where the number of respondents is deemed too low, data was suppressed as a precaution. In such cases, schools may opt to use their district level value as the next closest reference point.

^{*} This year, our survey was conducted concurrently with the Canadian Student Tobacco, Alcohol and Drugs Survey, for which 1 in 9 students from grades 7 to 12 from most schools were sampled to take part in. Those students are not included in our participation rates.

TABLES

The New Brunswick Student Wellness Survey is a provincial initiative of the Department of Social Development – Wellness Branch, in co-operation with the Department of Education and Early Childhood Development. Data collection and analysis is conducted by the New Brunswick Health Council. The purpose of the survey is to examine the health and wellness attitudes and behaviours of students. The data was collected from students of 187 (98%) public schools in New Brunswick. Data was also collected from two First Nations Schools to prepare a First Nations schools' specific report.

The following tables present relevant indicators that can help identify areas of strength to build on, as well as areas of improvement that can be targeted to help empower students to adopt healthy lifestyles. The tables cover the following themes:

- Context
- Learning
- Social and emotional development
- Participation and engagement
- Healthy lifestyles
- Safety
- Health status

Legend

Wherever possible, icons are used to identify whether the indicators touch on risk or protective factors.



Understanding Risk and Protective Factors

Wellness outcomes are determined by the contribution of both risk factors and protective factors. While risk factors contribute to the development or worsening of undesirable conditions, protective factors act as a shield against them. For example, while a high amount of sedentary activity is a risk factor for obesity, healthy eating is a protective factor against it. To maintain the health and well-being of students, it is essential to manage risk factors, as well as foster protective factors. In fact, focusing on protective factors can help manage risk factors and reduce the development of health conditions.

EXT		Female %	Male %	New Brunswick
	Number of students	19,363	19,323	38,982
SEX AT BIRTH				
Female		100	0	50
Male		0	100	50
GENDER IDENTITY				
Woman / girl		97	1	49
Man / boy		1	98	49
Other		1	1	1
AGE				
10 years or younger		0	0	0
11 years old		12	12	12
12 years old		14	14	14
13 years old		14	13	14
14 years old		13	14	14
15 years old		15	14	14
16 years old		15	14	15
17 years old		14	14	14
18 years old		3	3	3
19 years or older		0	0	0
GRADE				
Grade 6		14	14	14
Grade 7		14	14	14
Grade 8		14	13	14
Grade 9		13	15	14
Grade 10		15	14	15
Grade 11		15	15	15
Grade 12		15	14	15













Family

School Community Protective

EXT		Female %	Male %	New Brunswick
	Number of students	19,363	19,323	38,982
LANGUAGE SPOKEN AT HOME				
English		67	68	68
French		18	18	18
Equally both French and English		10	8	9
Mi'kmaq		0	0	0
Wolastoqey		0	0	0
Another language(s)		4	5	4
LANGUAGE SPOKEN WHEN NOT AT HOME				
English		69	72	71
French		17	17	17
Equally both French and English		12	9	10
Mi'kmaq		0	0	0
Wolastoqey		0	0	0
Another language(s)		2	2	2
CULTURAL DIVERSITY				
Aboriginal / Indigenous youth		8	9	8
A visible minority (other than Aboriginal / Indigenous)		5	6	6
Immigrant youth		9	8	9
SEXUAL ORIENTATION				
LGBTQ+		21	11	16
Gay or lesbian		2	2	2
Bisexual		10	3	6
Asexual		1	1	1
Unsure		6	4	5
Other		2	2	2













Heterosexual

EXT		Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
LEARNING EXCEPTIONALITY OR SPECIAL EDUCAT	ION NEEDS			•
Any diagnosis		26	27	27
Autism / Asperger Syndrome		1.1	3.5	2.3
Behavioural disorder		0.8	1.5	1.2
Blind or low vision		3.6	2.5	3.1
Deaf or Hard-of-Hearing		1.3	1.4	1.3
Attention Deficit Hyperactivity Disorder (ADHD) or Attention	Deficit Disorder (ADD)	6.9	12.3	9.6
Intellectual Disability		0.3	0.5	0.4
Language / Speech Impairment		1.4	1.8	1.6
Learning Disability		4.4	5.0	4.7
Physical Disability		1.1	1.0	1.0
Mental Health Disorder		9.7	2.4	6.1
Gifted		1.2	2.3	1.8
Other		4	4	4

SOCIO-ECONOMIC CONDITION			
Youth reporting "Always" or "Often" going to school or to bed hungry because there is not enough food at home	4	5	5











Family

School

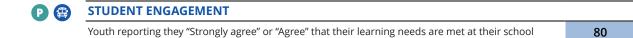
Community Protective

LEARI	NING	Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
P O	DAILY HOMEWORK			
	None	12	25	18
	Less than 1 hour a day	44	46	45
	1 to 2 hours a day	34	24	29
	More than 2, but less than 5 hours a day	9	4	7
	5 or more hours a day	1	1	1

DAILY LEISURE READING			
None	29	45	37
Less than 1 hour a day	41	35	38
1 to 2 hours a day	20	15	17
More than 2, but less than 5 hours a day	7	4	6
5 or more hours a day	3	2	2

D O	STUDENT VALUES			
	Getting good grades *	96	91	93
	Making friends *	87	86	87
	Participating in school activities outside of class *	59	55	57
	Getting to class on time *	89	85	87
	Learning new things *	89	88	88
	Expressing my opinion in class *	63	66	65
	Getting involved in the student council or other similar groups *	39	32	36
	Learning about my culture/heritage (e.g., Francophone, First Nations, Irish) *	60	55	58

^{*} Youth reporting "Very important" or "Important."















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80

Family

Community

L AND EMOTIONAL DEVELOPMENT		Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
RESILIENCE				
High and moderate levels of resilience		73	69	71
I am able to solve problems without harming myself or others (for example by using drugs and/or being violent). *		59	51	55
I know where to go in my community to get help. *		26	28	27
Getting an education is important to me. *		69	53	61
I try to finish what I start. *		46	44	45
I have people I look up to. *		48	44	46
My parent(s)/caregiver(s) know a lot about me. *		55	54	54
My family stands by me during difficult times. *		55	52	54
My friends stand by me during difficult times. *		48	39	44
I have opportunities to develop skills that will be useful later in life (like job s and skills to care for others). *	kills	42	41	41
I am treated fairly in my community. *		39	36	37
I feel I belong(ed) at my school. *		27	28	27
l enjoy my cultural and family traditions. *		53	44	49

^{*} Youth reporting that this statement describes them "A lot."

P O	LINK PROGRAM			
	Youth not aware of the program	57	63	60
	Youth aware of the program but having never used it	41	36	39
	Youth aware of the program and having used it	1	1	1

COMMUNITY SUPPORT			
Mean score of community support (values ranging from 5 to 25)	19	19	19
People say 'hello' and often stop to talk to each other in the street. *	65	63	64
It is safe for younger children to play outside during the day. *	83	83	83
You can trust people around here. *	65	70	67
There are good places to spend your free time (e.g., recreation centres, parks, shopping centres). *	64	68	66
I could ask for help or a favour from neighbours. *	70	71	70
Most people around here would try to take advantage of you if they got the chance. *	18	23	21

^{*} Youth reporting "Strongly agree" or "Agree."











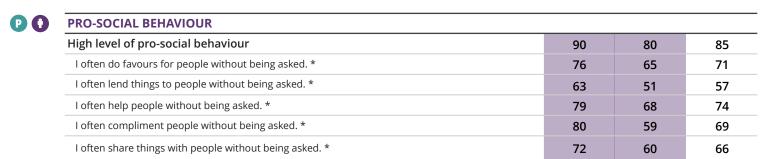


Family

Community School

SOCIA	AL AND EMOTIONAL DEVELOPMENT	ND EMOTIONAL DEVELOPMENT	Female %	Male %	New Brunswick %
		Number of students	19,363	19,323	38,982
P	SCHOOL CONNECTEDNESS			!	
	High level of school connectedness		92	92	92
	I feel close to people at my school. *		78	83	80
	I feel I am part of my school. *		77	79	78
	I am happy to be at my school. *		71	72	71
	I feel the teachers at my school treat me fairly. *		84	82	83
	I feel safe in my school. *		84	83	84

^{*} Youth reporting "Strongly agree" or "Agree."



^{*} Youth reporting 4, 5 or 6 on a scale ranging from 1 to 6, where 1 is "Definitely not like me" and 6 is "Definitely like me."

OPPOSITIONAL BEHAVIOUR			
High level of oppositional behaviour	12	18	15
I cut classes or skip school. *	13	13	13
I make other people do what I want. *	10	13	12
l disobey my parents. *	16	17	17
I talk back to my teachers. *	9	16	13
I get into fights. *	6	13	10
I often say mean things to people to get what I want. *	3	6	4
I take things that are not mine from home, school or elsewhere. *	3	5	4

^{*} Youth reporting 4, 5 or 6 on a scale ranging from 1 to 6, where 1 is "Definitely not like me" and 6 is "Definitely like me."













Family

School

SOCIA	AL AND EMOTIONAL DEVELOPMENT	Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
	Mental Fitness			
P O	LEVELS OF MENTAL FITNESS			
	High level of mental fitness	25	21	23
	Moderate level of mental fitness	53	56	55
	Low level of mental fitness	22	23	22
PO	MENTAL FITNESS NEEDS			
	Need for autonomy highly satisfied	68	66	67
	Need for competence highly satisfied	75	76	75
	Need for relatedness highly satisfied	80	76	78
	LIFE DOMAINS OF MENTAL FITNESS			
P	Mental fitness needs highly satisfied by family	78	80	79
	I feel free to express myself at home. *	55	51	53
	I feel like I have a choice about when and how to do my household chores. *	33	31	32
	I feel I do things well at home. *	43	44	43
	I feel my parents think that I am good at things. *	57	56	56
	My parents like me and care about me. *	76	73	74
	I like to spend time with my parents. *	55	47	51
P	Mental fitness needs highly satisfied by friends	82	81	81
	I feel free to express myself with my friends. *	56	49	52
	I feel I have a choice about which activities to do with my friends. *	46	42	44
	I feel I do things well when I am with my friends. *	48	42	45
	I feel my friends think I am good at things. *	42	39	40
	My friends like me and care about me. *	54	43	49
	I like to spend time with my friends. *	71	62	67
P 😩	Mental fitness needs highly satisfied by school	59	54	57
	I feel free to express myself at school. *	25	25	25
	I feel I have a choice about when and how to do my schoolwork. *	37	33	35
	I feel I do things well at school. *	36	32	34
	I feel my teachers think I am good at things. *	33	30	31
	My teachers like me and care about me. *	32	28	30

I like to be with my teachers. * * Youth reporting "Really true for me."













Family

School Community

20

23

18

SOCIAL AND EMOTIONAL DEVELOPMENT

	Female %	Male %	New Brunswick %
Number of students	19,363	19,323	38,982

Bullying





BULLYING VICTIMS			
Youth having been a victim of bullying at least once in the last couple of months	57	44	51
Physical attacks	9	15	12
Verbal attacks	41	34	37
Cyber-attacks	22	12	17
Having someone steal or damage their things	15	17	16
Exclusion	40	24	32
Being bullied with mean comments about their race / religion / personal features	15	14	14
Other students made sexual jokes, comments, or gestures	19	15	17



BULLYING PERPETRATORS

Youth having bullied another student at least once in the last couple of months	22	24	23
Physical attacks	3	9	6
Verbal attacks	14	17	15
Cyber-attacks	6	6	6
Stealing from or damaging someone else's things	2	5	3
Exclusion	11	11	11
Bullying with mean comments about someone's race / religion / personal features	2	5	4
Making sexual jokes, comments, or gestures towards someone	4	8	6

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RESPONSE TO BUILLYING

RESPONSE TO BULLTING			
Youth ignoring it	17	28	22
Youth telling their parents about it	30	14	22
Youth telling their teacher about it	22	14	18
Youth telling their principal or vice-principal about it	11	7	9
Youth telling an adult at the school about it	14	8	11
Youth joining in the bullying	1	2	1
Youth reporting that if a student complains to an adult at school about bullying, something is "Always" or "Often" done about it	41	45	43

















Family

School

Community

SOCIA	AL AND EMOTIONAL DEVELOPMENT	Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
	MENTAL AND EMOTIONAL SUPPORT			
R O	Youth needing to see or talk to someone for a mental or emotional problem in the last 12 months	41	19	30
R O	Youth who needed to see or talk to someone about their mental or emotional problem but did not see someone	12	6	9
R 😩	Help not available at school *	10	12	11
R 🏤	Help not available in community *	6	7	6
R	Help not available at home *	15	10	13
R	Help not available among peers or friends *	9	9	9
\mathbb{R}	Uncomfortable going for help *	74	61	70
R 🏤	Not knowing where to go to get help *	23	21	22
(R)	Other *	29	31	30

^{*} Among those in need who did not see someone











School Community

IPATION AND ENGAGEMENT	Female %	Male %	New Brunswick
Number of students	19,363	19,323	38,982
EXTRACURRICULAR ACTIVITIES AT SCHOOL	<u>.</u>	!	!
outh participating in any activities or groups inside school	58	50	54
A sports team (e.g., volleyball, hockey, soccer)	27	28	28
An individual sport (e.g., running, cycling, skating)	7	7	7
Volunteer work	15	7	11
Arts groups (e.g., music, dance, drama)	16	7	11
Student Clubs or Groups (e.g., peer helper, yearbook, TADD)	16	5	11
Science or Technology (e.g., science fairs, school website)	6	6	6
Church or other religious/spiritual group	3	2	2
Other activity or group (e.g., chess, math, debate)	10	12	11
EXTRACURRICULAR ACTIVITIES OUTSIDE SCHOOL			
outh participating in any activities or groups outside school	57	53	55
A sports team (e.g., volleyball, hockey, soccer)	25	32	28
An individual sport (e.g., running, cycling, skating)	14	13	14
Volunteer work	17	9	13
Arts groups (e.g., music, dance, drama)	14	4	9
Community groups (e.g., scouts, girl guides, 4-H, cadets)	5	4	4
Church or other religious/spiritual group	11	8	10
Other activity or group (e.g., chess, math, debate)	6	8	7
/OLUNTEERING			
outh taking part in volunteer activities in the last 12 months	77	66	72
Supporting a cause (e.g. food bank, UNICEF, Operation Christmas Child)	32	23	28
Supporting a cause (c.g. 100a bank, officer, Operation Christinas Chila)	45	33	39
Fund raising (e.g. charity, school trips)	43		
	36	26	31
Fund raising (e.g. charity, school trips)			31 54
Fund raising (e.g. charity, school trips) Helping in my community (e.g. coaching sports, volunteering at hospital)	36	26	
Fund raising (e.g. charity, school trips) Helping in my community (e.g. coaching sports, volunteering at hospital) Helping neighbours or relatives (e.g. cutting grass, babysitting) Doing other organized volunteer activity	36 57	26 51	54
Fund raising (e.g. charity, school trips) Helping in my community (e.g. coaching sports, volunteering at hospital) Helping neighbours or relatives (e.g. cutting grass, babysitting) Doing other organized volunteer activity OBS	36 57 39	26 51 29	54 34
Fund raising (e.g. charity, school trips) Helping in my community (e.g. coaching sports, volunteering at hospital) Helping neighbours or relatives (e.g. cutting grass, babysitting) Doing other organized volunteer activity OBS Youth having a part-time job outside of school	36 57 39	26 51 29	54 34 34
Fund raising (e.g. charity, school trips) Helping in my community (e.g. coaching sports, volunteering at hospital) Helping neighbours or relatives (e.g. cutting grass, babysitting) Doing other organized volunteer activity OBS	36 57 39	26 51 29	54 34













Family

Community

HEALTHY LIFESTYLES		Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982

Healthy Eating

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^{*} The day before the survey



SCHOOL ENVIRONMENT FOR HEALTHT EATING			
Youth thinking that there is not enough variety in the food offered at their school	26	28	27
Youth noticing a breakfast program in the last 12 months	49	39	44
Youth noticing a fruit and vegetable snack program in the last 12 months	15	13	14
Youth noticing healthy foods sold at sporting events or special food events (e.g., dances and movie nights) in the last 12 months	15	14	14
Youth noticing healthy foods or non-food items sold for fundraising in the last 12 months	13	12	13
Youth noticing healthy foods offered in vending machines and at canteens in the last 12 months	21	17	19
Youth noticing healthy foods offered at cafeteria or in hot lunch program in the last 12 months	44	30	37
Youth noticing information in their cafeteria about how to make healthier food choices in the last 12 months	10	8	9
Youth noticing lower prices for healthier foods in the last 12 months	4	5	4
Youth noticing school staff show a positive attitude towards healthy living and health-related issues in the last 12 months	33	26	29













Family

School Community Protective

Τ.	THY LIFESTYLES	Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
	BARRIERS TO DAILY BREAKFAST	•		
	Not having time for breakfast	28	20	24
	The bus coming too early	11	9	10
	Sleeping in	14	13	14
	Not being hungry in the morning	32	22	27
	Feeling sick when eating breakfast	19	7	13
	Trying to lose weight	8	3	6
	Having nothing to eat at home	4	3	4
	Physical Activity PHYSICAL ACTIVITY HABITS Youth having more than 2 hours per day of screen time	71	71	71
	Youth having more than 2 hours per day of screen time	71	71	71
	Youth meeting the guidelines on 60 minutes of daily moderate or vigorous physical activity	14	25	19
	Youth commuting to and from school actively	6	8	7
	Youth commuting to and from school inactively	80	76	78
	Youth commuting to and from school both actively and inactively	14	16	15
	PHYSICAL EDUCATION CLASSES IN LAST 5 DAYS			
	0 physical education classes	45	40	43
	1 physical education class	7	8	8
	2 physical education classes	22	23	22
	3 physical education classes	11	10	11
	4 physical education classes	4	5	5
	5 physical education classes	11	14	12
	SCHOOL ENVIRONMENT FOR PHYSICAL ACTIVITY			
	Youth participating in before school, noon hour, or after school physical activities organized by their school	36	40	38
	Youth participating in competitive school sports teams	35	37	36
	SLEEP			



Youth sleeping 8 hours or more every night











٩LT	THY LIFESTYLES	Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
	Alcohol and drug consumption			
	ALCOHOL CONSUMPTION			
	Youth having ever had a drink of alcohol that is more than just a sip	42	39	40
	Youth drinking alcohol once a month or more in the last 12 months	24	24	24
	Youth drinking 5 or more drinks at one time, at least once a month in the last 12 months	13	16	15
	CANNABIS CONSUMPTION			
	Youth having ever used or tried cannabis	24	25	24
	Youth using cannabis in the last 12 months	20	22	21
	Youth using cannabis every day in the last 12 months	2	4	3
0	OTHER DRUG CONSUMPTION			
	LSD and other hallucinogens (e.g., PCP, magic mushrooms)	3	6	4
	Pain Relievers (e.g., Fentanyl, Percs, Oxycontin)	5	7	6
	Amphetamines (speed)	2	4	3
	Ecstasy, MDMA (E, Xtc, Adam, X)	2	4	3
	Cocaine (coke, crack, snow, rock)	3	5	4
	Cough and cold medicines	16	16	16
	Stimulants (e.g., Ritalin, Concerta, Adderall)	2	5	4
	Sedatives / tranquillizers (e.g., Valium, Ativan, Xanax, GHB)	2	4	3
	Methamphetamines / Crystal methamphetamine (ice)	1	3	2
	Glue or solvents (e.g., gasoline, butane, model glue)	1	3	2
	Heroin (horse, tar, junk)	1	2	1
	Other	9	10	9
	CONSUMPTION ONSET			
		45	1.1	45
	Average age at which grade 12 students tried cigarettes for the first time (years)	15	14	15
	Average age at which grade 12 students drank alcohol that was more than a sip (years)	15	14	15













Family

HEAL	THY LIFESTYLES		Female %	Male %	New Brunswick %
	Nu	mber of students	19,363	19,323	38,982
	Smoking				
\mathbb{R}	SMOKING SUSCEPTIBILITY				
	Youth of all grades having tried smoking		21	22	22
	Grade 6 youths having tried smoking		3	5	4
	Grade 7 youth having tried smoking		6	7	7
	Grade 8 youth having tried smoking		11	12	11
	Grade 9 youth having tried smoking		20	20	20
	Grade 10 youths having tried smoking		26	28	27
	Grade 11 youths having tried smoking		34	36	35
	Grade 12 youths having tried smoking		39	46	42
	Youth susceptible to smoking (among those who have never tried it)		27	29	28
R ()	SMOKING HABITS				
	Youth smoking daily or occasionally		12	15	14
	Youth smoking daily		3	6	5
\mathbb{R}	ALTERNATIVE SMOKING PRODUCTS				
	Youth having tried alternative smoking products		31	33	32
	E-cigarettes (electronic cigarettes, vape)		29	29	29
	Little cigars or cigarillos (plain or flavoured)		10	14	12
	Cigars (not including little cigars or cigarillos)		6	11	9
	Roll-your-own cigarettes (tobacco only, in rolling papers)		6	7	6
	Smokeless tobacco (chewing tobacco, pinch, snuff, or snus)		2	7	4
	Nicotine patches, gum, lozenges, or inhalers		2	4	3
	A water pipe (hookah) to smoke shisha (herbal or tobacco)		4	6	5
	Blunt wraps (a tube made of tobacco used to roll cigarette tobacco)		3	5	4

Bidis (little cigarettes hand-rolled in leaves, tied with string at the ends)











2

THY LIFESTYLES		Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
EXPOSURE TO SECOND-HAND SMOKE				
Youth having at least one person at home who smokes		14	16	15
Youth having at least one parent (or step-parent or guardian) who smokes		39	38	38
Youth having at least one sibling who smokes		16	16	16
Youth having at least one friend who smokes		26	27	26
Youth riding in a car with someone smoking cigarettes in the last 7 days		18	19	18
Youth reporting no one is allowed to smoke in their home		82	79	81
Youth reporting only special guests are allowed to smoke in their home		2	3	2
Youth reporting smoking is allowed only in certain areas in their home		12	13	13
Youth reporting smoking is allowed anywhere in their home		4	5	4
Youth reporting their school has a clear set of rules about smoking		90	88	89
Youth reporting that students get into trouble if they are caught breaking the rules at their school	e smoking	69	71	70











Family

	Female %	Male %	New Brunswick %
Number of students	19,363	19,323	38,982
INJURIES	-		
Youth driving an off-road vehicle after drinking alcohol, using cannabis or other illegal drugs, in the last 12 months	5	13	9
Youth riding in an on-road vehicle driven by someone who had been drinking alcohol, using cannabis or other illegal drugs, in the last 12 months	17	18	17
Youth always wearing a helmet when they rode a bicycle in the last 12 months	34	29	31
Youth injured and having to be treated by a doctor or nurse in the last 12 months	29	32	30
SEXUAL VIOLENCE			
Youth reporting having been sexually violated	13	7	10
Youth reporting being victim of dating violence in the 12 months prior to the survey (among those who dated)	21	12	17
Youth reporting they know when they are legally able to consent to sexual activity	70	73	71











Family

School Community Protective

H STATUS		Female %	Male %	New Brunswick %
	Number of students	19,363	19,323	38,982
WEIGHTS (BODY MASS INDEX)				•
Youth that are of healthy weight		67	64	65
Youth that are underweight		9	6	7
Youth that are overweight or obese		24	30	27
SELF-RATED HEALTH AND WELL-BEING				
Youth reporting symptoms of depression in the last 12 months		46	29	38
Youth reporting symptoms of anxiety in the last 12 months		49	26	38
Youth reporting that their health is "Very good" or "Excellent"		59	62	60
LIFE SATISFACTION				
Rating of life satisfaction (Mean score, scale from 0-10)		7	7	7
Youth reporting a life satisfaction score of 0–5 *		22	15	19
		22 31	15 28	19 29
Youth reporting a life satisfaction score of 0–5 *				

^{*} Scale ranging from 0 to 10, where 0 is the "Worst possible life" and 10 is the "Best possible life."











Family

Protective Community

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