New Brunswick Student Wellness Survey

Grades 6–12 2018–2019



Feedback Report

Results for Aboriginal/Indigenous (attending public school)





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.





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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

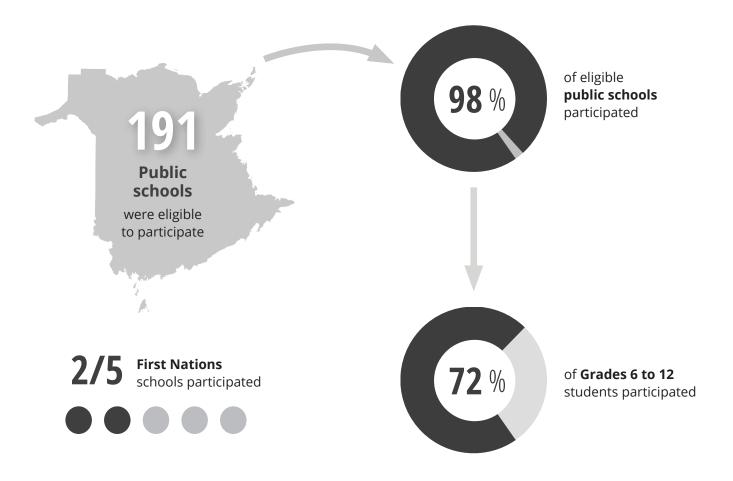
- The questionnaire used in the 2018–2019 *New Brunswick Student Wellness Survey* cycle underwent changes compared to that of the previous cycle. Some questions were removed or amended, other questions were added. As such, caution always needs to be exercised when attempting to compare the results of 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	Aboriginal/ Indigenous %	New Brunswick %
Number of students	2,979	38,982
SEX AT BIRTH	'	
Female	48	50
Male	52	50
GENDER IDENTITY		
Woman / girl	46	49
Man / boy	52	49
Other	2	1
AGE		
10 years or younger	1	0
11 years old	14	12
12 years old	15	14
13 years old	13	14
14 years old	13	14
15 years old	14	14
16 years old	13	15
17 years old	12	14
18 years old	3	3
19 years or older	1	0
GRADE		
Grade 6	17	14
Grade 7	16	14
Grade 8	12	14
Grade 9	14	14
Grade 10	14	15
Grade 11	14	15
Grade 12	12	15











Family

School Community Protective

EXT		Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
LANGUAGE SPOKEN AT HOME			!
English		79	68
French		8	18
Equally both French and English		8	9
Mi'kmaq		1	0
Wolastoqey		1	0
Another language(s)		3	4
LANGUAGE SPOKEN WHEN NOT AT HOME			
English		80	71
French Equally both French and English		7	17
Equally both French and English		9	10
Mi'kmag		1	
· ·		1	0
Wolastoqey		1	0
Mi'kmaq Wolastoqey Another language(s)			
Wolastoqey Another language(s)		1	0
Wolastoqey Another language(s) CULTURAL DIVERSITY		1	0
Wolastoqey		1 2	2



LGBTQ+

Bisexual

Asexual

Unsure

Other

Heterosexual

Gay or lesbian











22

2

10

2

6

3

78

16

2

6

1

5

2

84

Individual Family

School

Community

EXT		Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
LEARNING EXCEPTIONALITY OR SPECIAL EDUCATION NEEDS			
Any diagnosis		36	27
Autism / Asperger Syndrome		3.6	2.3
Behavioural disorder		2.2	1.2
Blind or low vision		4.9	3.1
Deaf or Hard-of-Hearing		2.3	1.3
Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD)		13.0	9.6
Intellectual Disability		0.8	0.4
Language / Speech Impairment		2.6	1.6
Learning Disability		5.8	4.7
Physical Disability		1.2	1.0
Mental Health Disorder		8.2	6.1
Gifted		2.8	1.8
Other		5	4





Youth reporting "Always" or "Often" going to school or to bed hungry because there is not enough food at home









Family

School

5

Aboriginal/ Indigenous

81

86

62

39

73

87

88

65

36

58

LEARI	NING	Indigenous %	New Brunswick %
	Number of students	2,979	38,982
P O	DAILY HOMEWORK	•	•
	None	25	18
	Less than 1 hour a day	40	45
	1 to 2 hours a day	27	29
	More than 2, but less than 5 hours a day	7	7
	5 or more hours a day	2	1
	None	39	37
PO	DAILY LEISURE READING None	30	37
	Less than 1 hour a day	35	38
	1 to 2 hours a day	17	17
	More than 2, but less than 5 hours a day	6	6
	5 or more hours a day	3	2
P O	STUDENT VALUES		
	Getting good grades *	90	93
	Making friends *	82	87
	Participating in school activities outside of class *	56	57

Getting involved in the student council or other similar groups *

Learning about my culture/heritage (e.g., Francophone, First Nations, Irish) *





STUDENT ENGAGEMENT

Getting to class on time *

Expressing my opinion in class *

Learning new things *

Youth reporting they "Strongly agree" or "Agree" that their learning needs are met at their school 76 80











Family

School Community

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

L AND EMOTIONAL DEVELOPMENT		Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
RESILIENCE			•
High and moderate levels of resilience		64	71
I am able to solve problems without harming myself or others (for example by using drubeing violent). \star	gs and/or	46	55
I know where to go in my community to get help. *		28	27
Getting an education is important to me. *		54	61
I try to finish what I start. *		43	45
I have people I look up to. *		43	46
My parent(s)/caregiver(s) know a lot about me. *		49	54
My family stands by me during difficult times. *		48	54
My friends stand by me during difficult times. *		39	44
I have opportunities to develop skills that will be useful later in life (like job skills and skil	ls to care for others). *	39	41
l am treated fairly in my community. *		33	37
I feel I belong(ed) at my school. *		24	27
I enjoy my cultural and family traditions. *		50	49

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

P O	LINK PROGRAM		
	Youth not aware of the program	65	60
	Youth aware of the program but having never used it	33	39
	Youth aware of the program and having used it	1	1

COMMUNITY SUPPORT		
Mean score of community support (values ranging from 5 to 25)	19	19
People say 'hello' and often stop to talk to each other in the street. *	64	64
It is safe for younger children to play outside during the day. *	78	83
You can trust people around here. *	58	67
There are good places to spend your free time (e.g., recreation centres, parks, shopping centres). *	66	66
I could ask for help or a favour from neighbours. *	66	70
Most people around here would try to take advantage of you if they got the chance. *	31	21

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













Family

Aboriginal/

64

78

78

71

83

84

Indigenous New SOCIAL AND EMOTIONAL DEVELOPMENT % **Brunswick %** Number of students 2,979 38,982 **SCHOOL CONNECTEDNESS** High level of school connectedness 89 92 I feel close to people at my school. * 76 80 I feel I am part of my school. * 78 72

I feel the teachers at my school treat me fairly. *

I am happy to be at my school. *

I feel safe in my school. *

0	PRO-SOCIAL BEHAVIOUR		
	High level of pro-social behaviour	79	85
	I often do favours for people without being asked. *	62	71
	I often lend things to people without being asked. *	50	57
	I often help people without being asked. *	68	74
	I often compliment people without being asked. *	63	69
	I often share things with people without being asked. *	62	66

^{*} 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	21	15
I cut classes or skip school. *	20	13
I make other people do what I want. *	12	12
I disobey my parents. *	19	17
I talk back to my teachers. *	18	13
I get into fights. *	15	10
I often say mean things to people to get what I want. *	7	4
I take things that are not mine from home, school or elsewhere. *	6	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."











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

SOCIA	AL AND EMOTIONAL DEVELOPMENT	Aboriginal/ Indigenous %	New Brunswick %
	Number of studer	nts 2,979	38,982
	Mental Fitness		
P O	LEVELS OF MENTAL FITNESS		
	High level of mental fitness	17	23
	Moderate level of mental fitness	53	55
	Low level of mental fitness	31	22
P O	MENTAL FITNESS NEEDS		
	Need for autonomy highly satisfied	59	67
	Need for competence highly satisfied	67	75
	Need for relatedness highly satisfied	72	78
	LIFE DOMAINS OF MENTAL FITNESS		
P (#)	Mental fitness needs highly satisfied by family	73	79
	I feel free to express myself at home. *	47	53
	I feel like I have a choice about when and how to do my household chores. *	29	32
	I feel I do things well at home. *	40	43
	I feel my parents think that I am good at things. *	50	56
	My parents like me and care about me. *	68	74
	I like to spend time with my parents. *	46	51
P	Mental fitness needs highly satisfied by friends	76	81
	I feel free to express myself with my friends. *	45	52
	I feel I have a choice about which activities to do with my friends. *	38	44
	I feel I do things well when I am with my friends. *	40	45
	I feel my friends think I am good at things. *	34	40
	My friends like me and care about me. *	44	49
	I like to spend time with my friends. *	61	67
P (#)	Mental fitness needs highly satisfied by school	47	57
	I feel free to express myself at school. *	21	25
	I feel I have a choice about when and how to do my schoolwork. *	28	35
	I feel I do things well at school. *	23	34
	I feel my teachers think I am good at things. *	24	31
	My teachers like me and care about me. *	25	30

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













20

18

SOCIAL AND EMOTIONAL DEVELOPMENT

Aboriginal/ Indigenous %	New Brunswick %
2,979	38,982

Number of student

Bullying



BULLYING VICTIMS		
Youth having been a victim of bullying at least once in the last couple of months		51
Physical attacks	18	12
Verbal attacks	43	37
Cyber-attacks	23	17
Having someone steal or damage their things	23	16
Exclusion	38	32
Being bullied with mean comments about their race / religion / personal features	23	14
Other students made sexual jokes, comments, or gestures	24	17

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BULLYING PERPETRATORS		
Youth having bullied another student at least once in the last couple of months		23
Physical attacks	10	6
Verbal attacks	20	15
Cyber-attacks	9	6
Stealing from or damaging someone else's things	6	3
Exclusion	14	11
Bullying with mean comments about someone's race / religion / personal features	7	4
Making sexual jokes, comments, or gestures towards someone	8	6

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RESPONSE TO BULLYING		
Youth ignoring it	23	22
Youth telling their parents about it	22	22
Youth telling their teacher about it	19	18
Youth telling their principal or vice-principal about it	10	9
Youth telling an adult at the school about it	14	11
Youth joining in the bullying	2	1
Youth reporting that if a student complains to an adult at school about bullying, something is "Always" or "Often" done about it	35	43

















School

CIA	AL AND EMOTIONAL DEVELOPMENT	Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
	MENTAL AND EMOTIONAL SUPPORT		
0	Youth needing to see or talk to someone for a mental or emotional problem in the last 12 months	36	30
0	Youth who needed to see or talk to someone about their mental or emotional problem but did not see someone	10	9
	Help not available at school *	15	11
ñà	Help not available in community *	9	6
	Help not available at home *	12	13
	Help not available among peers or friends *	9	9
0	Uncomfortable going for help *	62	70
ñà	Not knowing where to go to get help *	21	22
Ō	Other *	30	30

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











Family

School Community

10	CIPATION AND ENGAGEMENT	Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
	EXTRACURRICULAR ACTIVITIES AT SCHOOL		
	Youth participating in any activities or groups inside school	51	54
	A sports team (e.g., volleyball, hockey, soccer)	26	28
	An individual sport (e.g., running, cycling, skating)	6	7
	Volunteer work	9	11
	Arts groups (e.g., music, dance, drama)	9	11
	Student Clubs or Groups (e.g., peer helper, yearbook, TADD)	8	11
	Science or Technology (e.g., science fairs, school website)	5	6
	Church or other religious/spiritual group	3	2
	Other activity or group (e.g., chess, math, debate)	10	11
	EXTRACURRICULAR ACTIVITIES OUTSIDE SCHOOL		
	Youth participating in any activities or groups outside school	51	55
	A sports team (e.g., volleyball, hockey, soccer)	25	28
	An individual sport (e.g., running, cycling, skating)	11	14
	Volunteer work	11	13
	Arts groups (e.g., music, dance, drama)	7	9
	Community groups (e.g., scouts, girl guides, 4-H, cadets)	4	4
	Church or other religious/spiritual group	8	10
	Other activity or group (e.g., chess, math, debate)	8	7
	VOLUNTEERING Vouth taking part in volunteer estimation in the last 12 months	67	70
	Youth taking part in volunteer activities in the last 12 months Supporting a cause (e.g. food bank, UNICEF, Operation Christmas Child)	67	72
	Fund raising (e.g. charity, school trips)	26 35	28 39
	Helping in my community (e.g. coaching sports, volunteering at hospital)	30	31
	Helping neighbours or relatives (e.g. cutting grass, babysitting)	50	54
-	Doing other organized volunteer activity	34	34
	Doing other organized volunteer activity	34	34
	JOBS		
	Youth having a part-time job outside of school	33	34
	Youth working on weekends	24	26
	Youth working on weekdays	19	20
	Youth working during school vacations	12	13













Aboriginal/ Indigenous New **HEALTHY LIFESTYLES** % **Brunswick %**

Number of students

2,979 38,982

42

20

36

29

85

54

8

41

63 14

46

67

40

39

22

35

33

85

65

14

31

65

17 42

70

45

Healthy Eating

HEALTHY EATING HABITS

Youth eating plant-based proteins *

Youth drinking high energy drinks *

Youth eating breakfast daily

* The day before the survey

Youth drinking at least 2 servings of milk *

Youth drinking at least 6 servings of water *

Youth eating 5 or more servings of vegetables or fruit *

Youth eating non-nutritious foods (e.g. fries, chips, candy, donuts) *

Youth eating at a fast food place or restaurant at least once in the last 7 days

Youth eating at a fast food place or restaurant 3 times or more in the last 7 days

Youth eating an evening meal together with family, friend(s) or guardian(s) daily Youth eating meals while watching television at least once in the last 7 days

Youth eating meals while watching television 3 times or more in the last 7 days

Youth drinking non-nutritious beverages (e.g. punch, pop, energy drinks, sports drinks) *

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Youth thinking that there is not enough variety in the food offered at their school	29	27
Youth noticing a breakfast program in the last 12 months	43	44
Youth noticing a fruit and vegetable snack program in the last 12 months	11	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
Youth noticing healthy foods or non-food items sold for fundraising in the last 12 months	12	13
Youth noticing healthy foods offered in vending machines and at canteens in the last 12 months	17	19
Youth noticing healthy foods offered at cafeteria or in hot lunch program in the last 12 months	31	37
Youth noticing information in their cafeteria about how to make healthier food choices in the last 12 months	8	9
Youth noticing lower prices for healthier foods in the last 12 months	6	4
Youth noticing school staff show a positive attitude towards healthy living and health-related issues in the last 12 months	25	29











Family

School Community Protective

HY LIFESTYLES	Aboriginal/ Indigenous %	New Brunswick %
Number of students	2,979	38,982
BARRIERS TO DAILY BREAKFAST	•	
Not having time for breakfast	25	24
The bus coming too early	13	10
Sleeping in	14	14
Not being hungry in the morning	28	27
Feeling sick when eating breakfast	14	13
Trying to lose weight	9	6
Having nothing to eat at home	5	4
Physical Activity PHYSICAL ACTIVITY HABITS		
Youth having more than 2 hours per day of screen time	73	71
Youth meeting the guidelines on 60 minutes of daily moderate or vigorous physical activity	21	19
Youth commuting to and from school actively	7	7
Youth commuting to and from school inactively	79	78
Youth commuting to and from school both actively and inactively	14	15
DUVELCAL EDUCATION CLASSES IN LAST E DAVE		
PHISICAL EDUCATION CLASSES IN LAST 5 DAYS		42
PHYSICAL EDUCATION CLASSES IN LAST 5 DAYS 0 physical education classes	37	43
	37 11	8
0 physical education classes		
0 physical education classes 1 physical education class	11	8
0 physical education classes 1 physical education class 2 physical education classes	11 22	8 22
0 physical education classes 1 physical education class 2 physical education classes 3 physical education classes	11 22 12	8 22 11
0 physical education classes 1 physical education class 2 physical education classes 3 physical education classes 4 physical education classes 5 physical education classes	11 22 12 5	8 22 11 5
0 physical education classes 1 physical education class 2 physical education classes 3 physical education classes 4 physical education classes	11 22 12 5	8 22 11 5



Youth sleeping 8 hours or more every night











34

37

HEAL	THY LIFESTYLES	Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
	Alcohol and drug consumption		
(R)	ALCOHOL CONSUMPTION		
	Youth having ever had a drink of alcohol that is more than just a sip	43	40
	Youth drinking alcohol once a month or more in the last 12 months	28	24
	Youth drinking 5 or more drinks at one time, at least once a month in the last 12 months	19	15
(R) (1)	CANNABIS CONSUMPTION		
	Youth having ever used or tried cannabis	37	24
	Youth using cannabis in the last 12 months	31	21
	Youth using cannabis every day in the last 12 months	8	3
R ()	OTHER DRUG CONSUMPTION		
	LSD and other hallucinogens (e.g., PCP, magic mushrooms)	8	4
	Pain Relievers (e.g., Fentanyl, Percs, Oxycontin)	11	6
	Amphetamines (speed)	6	3
	Ecstasy, MDMA (E, Xtc, Adam, X) Cocaine (coke, crack, snow, rock)	5	3
	Cough and cold medicines	7	16
	Stimulants (e.g., Ritalin, Concerta, Adderall)	6	4
	Sedatives / tranquillizers (e.g., Valium, Ativan, Xanax, GHB)	5	3
	Methamphetamines / Crystal methamphetamine (ice)	4	2
	Glue or solvents (e.g., gasoline, butane, model glue)	4	2
	Heroin (horse, tar, junk)	3	1
	Other	15	9
\mathbb{R}	CONSUMPTION ONSET		
	Average age at which grade 12 students tried cigarettes for the first time (years)	14	15
	Average age at which grade 12 students drank alcohol that was more than a sip (years)	14	15
	Average age at which grade 12 students first used or tried cannabis (years)	14	15













Family

HEALTHY LIFESTYLES	Aboriginal/ Indigenous %	New Brunswick %
Number of students	2,979	38,982

Smoking

	Jillokilig
\mathbb{R}	SMOKING

SMOKING SUSCEPTIBILITY		
Youth of all grades having tried smoking	32	22
Grade 6 youths having tried smoking	9	4
Grade 7 youth having tried smoking	13	7
Grade 8 youth having tried smoking	22	11
Grade 9 youth having tried smoking	35	20
Grade 10 youths having tried smoking	46	27
Grade 11 youths having tried smoking	51	35
Grade 12 youths having tried smoking	53	42
Youth susceptible to smoking (among those who have never tried it)	33	28

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SMOKING HABITS		
Youth smoking daily or occasionally	23	14
Youth smoking daily	9	5

ALTERNATIVE SMOKING PRODUCTS

Youth having tried alternative smoking products	41	32
E-cigarettes (electronic cigarettes, vape)	34	29
Little cigars or cigarillos (plain or flavoured)	16	12
Cigars (not including little cigars or cigarillos)	11	9
Roll-your-own cigarettes (tobacco only, in rolling papers)	10	6
Smokeless tobacco (chewing tobacco, pinch, snuff, or snus)	8	4
Nicotine patches, gum, lozenges, or inhalers	5	3
A water pipe (hookah) to smoke shisha (herbal or tobacco)	9	5
Blunt wraps (a tube made of tobacco used to roll cigarette tobacco)	9	4
Bidis (little cigarettes hand-rolled in leaves, tied with string at the ends)	3	2













HEAL	THY LIFESTYLES	Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
	EXPOSURE TO SECOND-HAND SMOKE	•	
R (1)	Youth having at least one person at home who smokes	27	15
R 🚺	Youth having at least one parent (or step-parent or guardian) who smokes	55	38
R (1)	Youth having at least one sibling who smokes	27	16
R	Youth having at least one friend who smokes	37	26
R	Youth riding in a car with someone smoking cigarettes in the last 7 days	29	18
P (1)	Youth reporting no one is allowed to smoke in their home	71	81
R) (I)	Youth reporting only special guests are allowed to smoke in their home	3	2
R	Youth reporting smoking is allowed only in certain areas in their home	19	13
R) 🚺	Youth reporting smoking is allowed anywhere in their home	7	4
	Youth reporting their school has a clear set of rules about smoking	87	89
P	Youth reporting that students get into trouble if they are caught breaking the smoking rules at their school	73	70











Community Protective

	Aboriginal/ Indigenous %	New Brunswick
Number of students	2,979	38,982
INJURIES	'	
Youth driving an off-road vehicle after drinking alcohol, using cannabis or other illegal drugs, in the last 12 months	14	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	23	17
Youth always wearing a helmet when they rode a bicycle in the last 12 months	24	31
Youth injured and having to be treated by a doctor or nurse in the last 12 months	36	30
Youth reporting having been sexually violated	14	10
Youth reporting being victim of dating violence in the 12 months prior to the survey (among those who dated)	22	17
routi reporting being victim of duting violence in the 12 months prior to the survey (among those who duted)	22	17











Family

School Comr

TH STATUS		Aboriginal/ Indigenous %	New Brunswick %
	Number of students	2,979	38,982
WEIGHTS (BODY MASS INDEX)			
Youth that are of healthy weight		59	65
Youth that are underweight		8	7
Youth that are overweight or obese		33	27
SELF-RATED HEALTH AND WELL-BEING Youth reporting symptoms of depression in the last 12 months		48	38
Youth reporting symptoms of anxiety in the last 12 months		45	38
Youth reporting that their health is "Very good" or "Excellent"		52	60
LIFE SATISFACTION			
Rating of life satisfaction (Mean score, scale from 0-10)		7	7
Youth reporting a life satisfaction score of 0–5 *		27	19
Youth reporting a life satisfaction score of 6–7 *		30	29
Youth reporting a life satisfaction score of 8–9 *		31	40
Youth reporting a life satisfaction score of 10 *		12	12

 $[\]star$ Scale ranging from 0 to 10, where 0 is the "Worst possible life" and 10 is the "Best possible life."











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