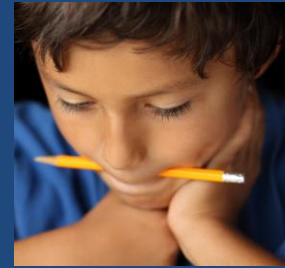


Provincial Fact Sheets: 2013 – 2014

*New Brunswick Student Wellness Survey
Kindergarten to Grade 5*

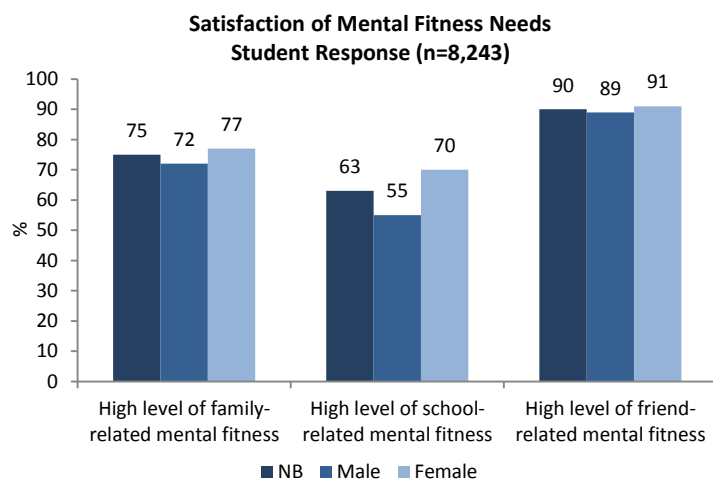
Social Relationships and Environments



Introduction

Social Relationships and Environments are two key determinants of health. Studies show that social relationships have short- and long-term effects on health, for better and for worse. These effects emerge in childhood and cascade throughout life to nourish cumulative advantages or disadvantages in health.

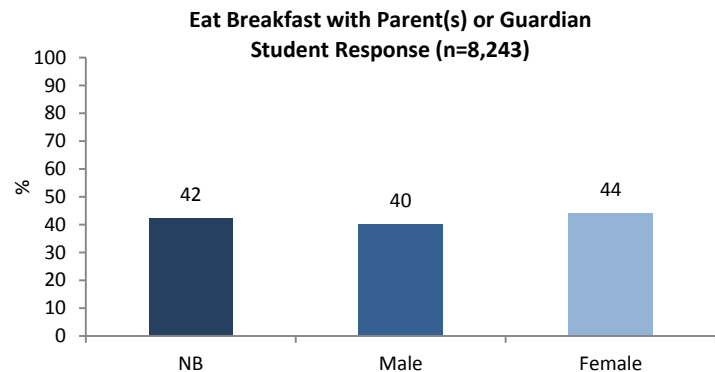
A child’s social environment such as family, school, or community, plays a central role in his or her developmental process. The satisfaction of the basic psychological needs for Competence, Autonomy, and Relatedness (CAR), lead the way to reach and maintain a healthier lifestyle. It is important for these needs to be met in every context or environment and at all ages.



A cultural shift towards wellness will occur when the large majority of people and settings have adopted positive changes. Healthy and resilient environments sustain, embed and support wellness, and protect people from health conditions and environmental conditions that can threaten good health. They foster participation and help people grow and develop. When our environments are more supportive and healthy choices are more accessible, people experience higher levels of health and wellness. Healthy and resilient environments can help make our choices in wellness easier.¹

Healthy Eating and Social Influences

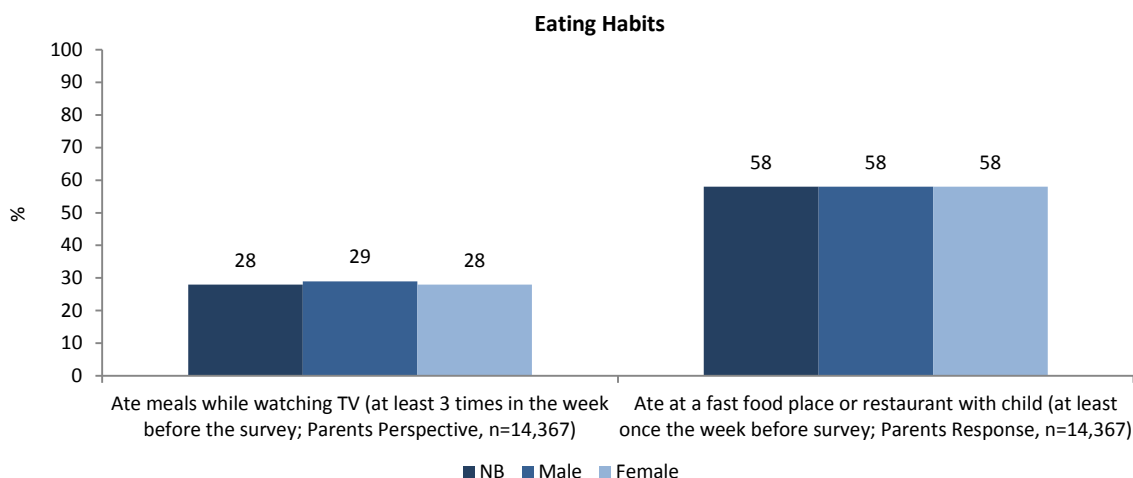
Family members influence students’ eating routines and choices. Parents may play an important role in helping students develop healthy attitudes toward food through establishing consistent meal-time routines and modelling healthy food choices. A lower risk for being overweight is associated with increased frequency of family meals, and eating together as a family seems to provide protection from eating disorders.²



Healthy Eating and Environments

Environments can shape eating behaviours. For example, watching television while having a meal has been linked to high calorie intake. Development of a sedentary lifestyle can lead to the development of overweight or obese individuals.^{3,4}

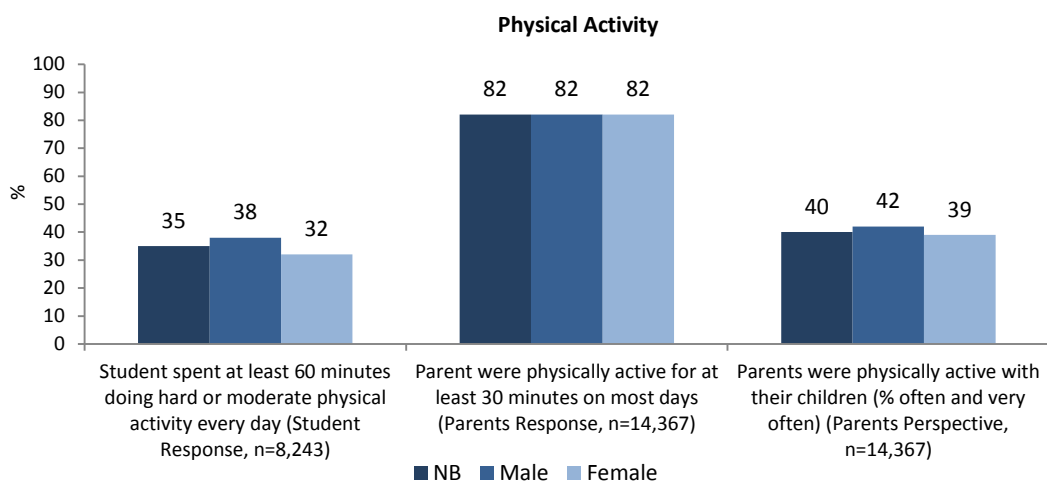
- 28% of students from kindergarten to Grade 5 ate meals while watching television at least 3 times in the week preceding the survey as reported by the parents.
- 58% of students from kindergarten to Grade 5 ate at a fast food place or restaurant with parents at least once in the week preceding the survey as reported by the parents.



Physical Activity

The average recommended time young people should spend doing moderate-to-vigorous physical activity is 60 minutes per day.⁵ Parents can model healthy behaviours through participation in regular physical activity. Active parents often have active kids.⁶ According to Grade 4-5 students, 35% of them spent at least 60 minutes doing hard or moderate physical activity per day.

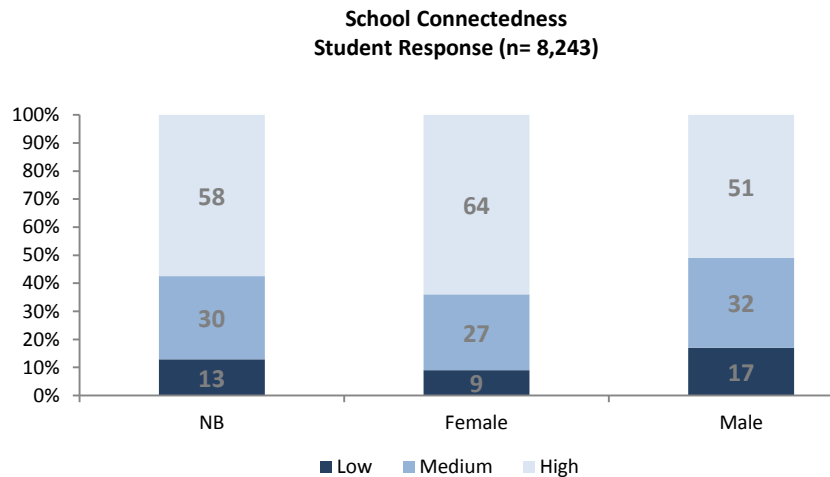
- Although 82% of parents were physically active for at least 30 minutes on most days, only 40% reported being physically active with their children (often to very often)



School Connectedness

School Connectedness has been shown to be associated with mental fitness and well-being.⁷ Connectedness or relatedness refers to a child’s perception of belonging to a social sphere which may include peers, family, school, or community.⁸ School connectedness is second in importance, after family connectedness, as a protective factor with respect to emotional distress, eating disorders, and suicides.^{9,10}

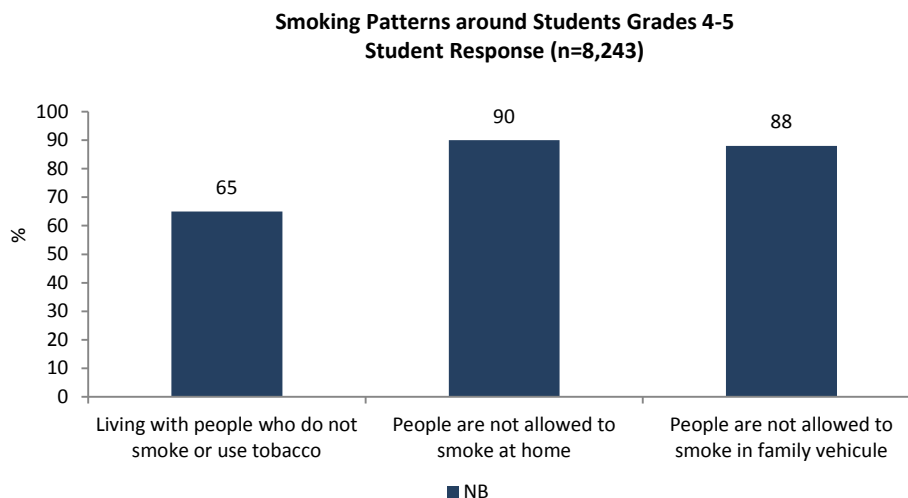
- 58% of New Brunswickers Grade 4 and 5 rate their school connectedness as being high, 30% medium, and 13% low. Low levels of school connectedness has also been associated with poor school attendance, poor mental fitness, oppositional behaviours as well as bullying.¹¹



Tobacco Use

The average age that a young New Brunswicker smokes his or her first whole cigarette is 14.¹² Exposure to smoking in a child’s surroundings can influence susceptibility in becoming a future smoker. In addition, second-hand smoke can have serious health effects. Smoking within the home is also related to the uptake of smoking behaviours - the greater the number of smokers inside the home, the more likely a student is to smoke. Second-hand smoke-related particulates can deposit into people’s lungs causing the development of serious diseases such as lung cancer or breathing disorders over the course of a child’s life.¹³

- 35% of elementary students continue to live with people who smoke or use tobacco, as reported by students Grade 4 to 5.



Key or selected wellness indicator results and progress from the New Brunswick Elementary Student Wellness Survey

Wellness Indicator	2010-2011 Results	2013-2014 Results	Progress
Satisfaction of mental fitness needs			
- High level of family-related mental fitness needs met	70%	75%	👍
- High level of school-related mental fitness needs met	65%	63%	👎
- High level of friends-related mental fitness needs met	84%	90%	👍
Children exposed to tobacco smoke in vehicles (as reported by students)	14%	12%	👍
Children who feel connected to their school	83%	88%	👍

* In the 2013-2014 academic year, a provincial sample of 136 (62%) elementary schools completed the student wellness surveys. In total, 8,243 students Grade 4 & 5 and 14,367 parents participated in the survey.

The *New Brunswick Student Wellness Survey (NBSWS)* is a provincial initiative of the New Brunswick Department of Social Development (SD) in cooperation with the Department of Education and Early Childhood Development. Data collection and analysis is carried out by the New Brunswick Health Council (NBHC) according to their requirements. The purpose of this survey is to examine the health and wellness attitudes and behaviours of students in Grade 4 and Grade 5 and of parents of students in kindergarten to Grade 5.

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