

New Brunswick Student Wellness Survey

Grades 6–12
2018–2019



Feedback Report Harvey High 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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New Brunswick Student Wellness Survey YOUR SCHOOL RESULTS AT A GLANCE

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. Provincially, over 38,000 grades 6–12 students have participated in each cycle of the initiative. The following table presents a comparison of results between the 2015–2016 and the 2018–2019 cycles for:

Harvey High School

	2015-2016 %	2018-2019 %
Number of students	223	160
INDIVIDUAL PROTECTIVE FACTORS		
Youth having a high level of pro-social behaviour	82	85
Youth eating 5 or more servings of vegetables or fruit	33	33
Youth having more than two hours per day of recreational screen time	62	62
Youth meeting the guidelines on 60 minutes of daily moderate or vigorous physical activity	22	25
Youth sleeping 8 hours or more every night	44	34
FAMILY/FRIEND PROTECTIVE FACTORS		
Youth with mental fitness needs highly satisfied by family	75	79
Youth with mental fitness needs highly satisfied by friends	73	76
Youth participating in activities or groups inside school	58	50
Youth participating in activities or groups outside school	51	50
COMMUNITY PROTECTIVE FACTORS		
Youth with mental fitness needs highly satisfied by school	54	46
Youth with high level of school connectedness	85	84
Youth taking part in volunteer activities in the last 12 months	65	68
Youth reporting being treated fairly in their community	35	32
Youth needing to see or talk to someone for a mental or emotional problem in the last 12 months	n/a	35
Youth who needed to see or talk to someone about their mental or emotional problem but did not see someone	n/a	15
OUTCOMES		
Youth reporting their learning needs are met at their school	76	76
Youth with high and moderate levels of resilience	67	65
Youth reporting that their health is “Very good” or “Excellent”	69	62
Youth with high and moderate levels of mental fitness	71	75
IMPACT/RISK FACTORS		
Youth smoking daily or occasionally	15	18
Youth having tried E-cigarettes (electronic cigarettes, vape)	32	27
Youth consuming alcohol heavily (5 or more drinks at one time, at least once a month)	26	16
Youth using cannabis in the last 12 months	21	28
Youth victims of dating violence in the last 12 months	17	19
Youth reporting symptoms of depression in the last 12 months	32	42
Youth reporting symptoms of anxiety in the last 12 months	29	35
Youth with high level of oppositional behaviours	19	16

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
<i>New Brunswick Student Wellness Survey</i>	<i>Grades 6 to 12</i>	Students	2006–2007 2009–2010 2012–2013 2015–2016 2018–2019
<i>New Brunswick Elementary Student Wellness Survey</i>	<i>Kindergarten to Grade 5</i>	Student version: <i>Students in Grades 4 and 5</i> Family version: <i>Parents of students in Kindergarten to Grade 5</i>	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. Gender
 - iii. Aboriginal/Indigenous (attending public school)
 - iv. Immigrants (foreign-born)
 - v. LGBTQ+
 - vi. Students with learning exceptionalities 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

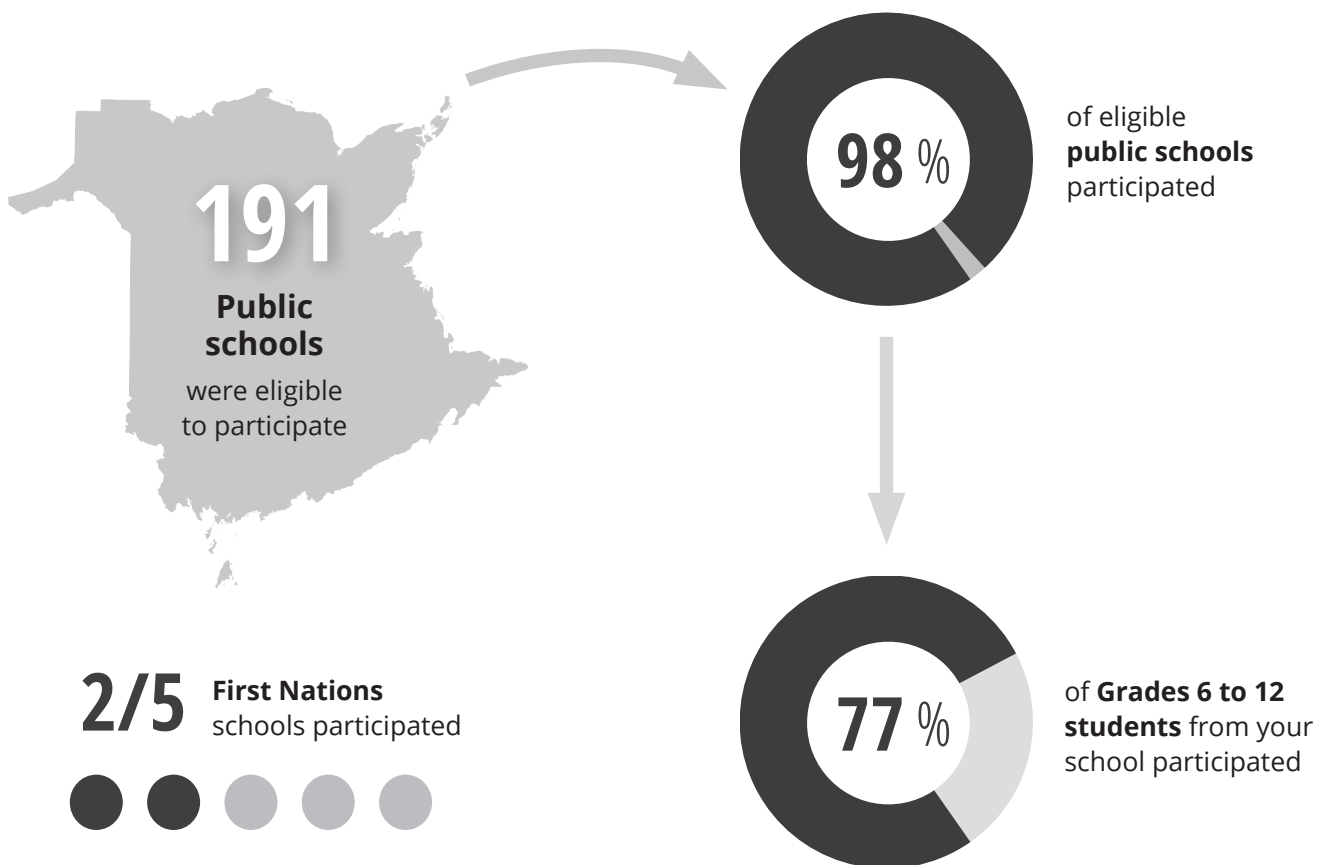
- The questionnaire used in the 2018–2019 *New Brunswick Student Wellness Survey* cycle underwent changes compared to that of the previous cycle. Some questions were removed or amended, other questions were added. As such, caution always needs to be exercised when attempting to compare the results of 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.

CONTEXT

What are the demographics of our population?

POPULATION DEMOGRAPHICS

It is important to understand the demographics of the youth we serve and keep that in mind when we want to understand their health status and identify how to address potential issues. Two populations of youth with different demographics will likely have different needs.

Figure 1: Youth with a learning exceptionality or special education need %

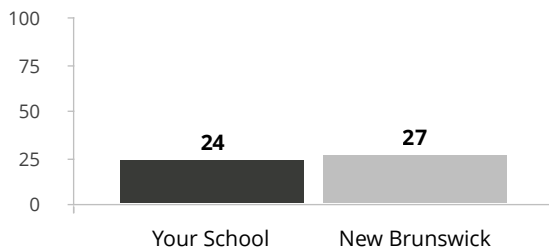


Figure 2: Youth identifying as LGBTQ+ %

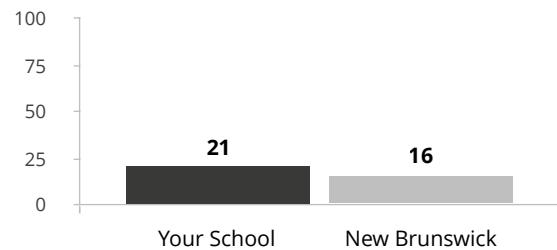


Figure 3: Aboriginal / Indigenous youth %

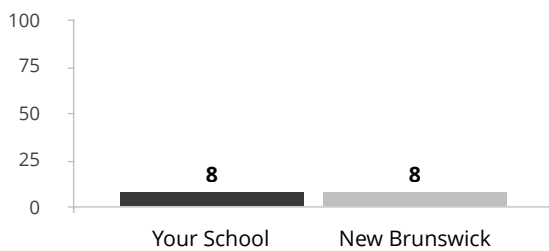


Figure 4: Immigrant youth %

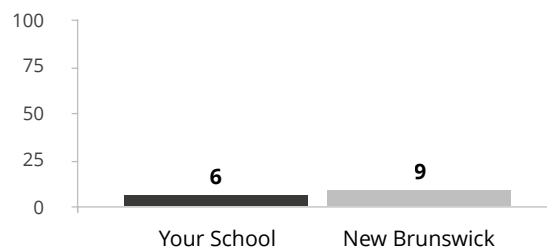
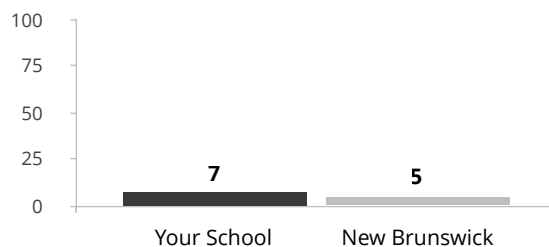


Figure 5: Youth living in low socio-economic conditions %



LEARNING

How do our students perceive learning?

ACADEMIC MOTIVATION AND ENGAGEMENT

Important aspects of academic motivation and engagement include the enjoyment of learning new things and the feeling that school is helping in that learning process (Quaglia Institute for Student Aspirations, 2014). In a report, the Centers for Disease Control and Prevention (2009) explains how academically motivated and engaged students have a higher sense of school connectedness, which is linked to positive health and education outcomes.

Figure 6: Youth reporting that learning new things is “Important” or “Very important” to them %

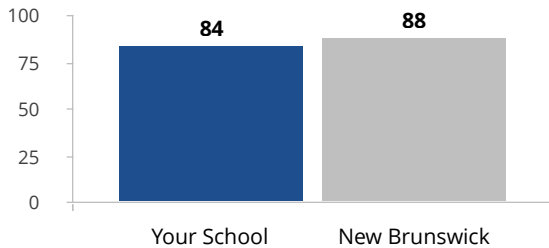
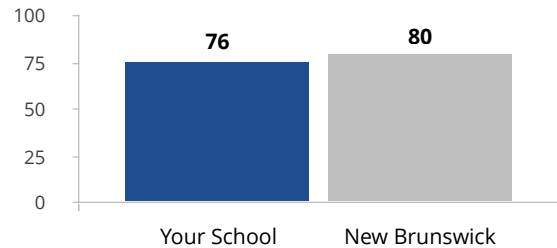


Figure 7: Youth who “Agree” or “Strongly agree” that their learning needs are met at school %



HOMEWORK AND LEISURE READING

In their review of prior research, Cooper, Robinson, and Patall (2006) conclude that homework can have a positive effect on students’ academic achievement, an impact that increases with increasing grade level. In line with Self-Determination Theory (Ryan & Deci, 2000), motivation to read can either be autonomous or controlled (De Naeghel, Van Keer, Vansteenkiste, & Rosseel, 2012). Leisure reading is driven by an autonomous motivation and provides youth with the opportunity to apply skills learned in school to authentic and interest-based texts.

Figure 8: Youth doing homework on an average day %

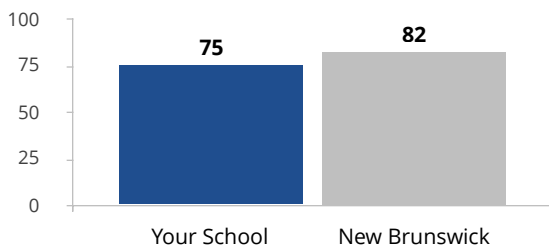
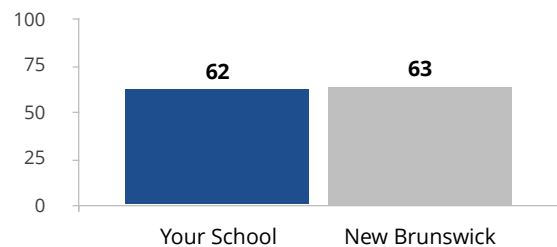


Figure 9: Youth engaging in leisure reading on an average day %



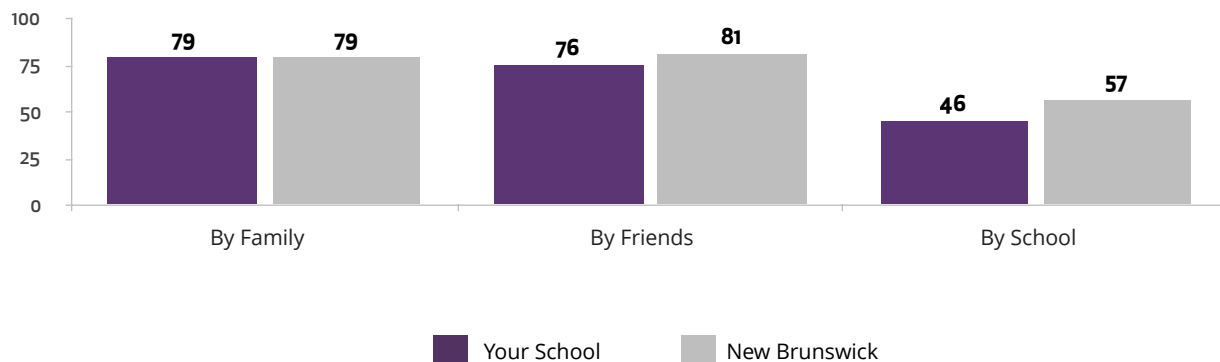
SOCIAL AND EMOTIONAL DEVELOPMENT

How do our students develop socially and emotionally?

MENTAL FITNESS

Mental fitness is defined as a state of psychological well-being that comes from the fulfilment of three basic psychological needs: autonomy (ability to make choices), competence (feeling capable and effective in important life contexts), and relatedness (feeling connected and close with others). It is important that all three needs be met for optimal mental fitness but it is also important that they be met in each life context, that is, at school, with the family and with friends (Ryan and Deci, 2017). The satisfaction of these basic psychological needs in each life context has a cumulative positive effect on the youth's mental fitness.

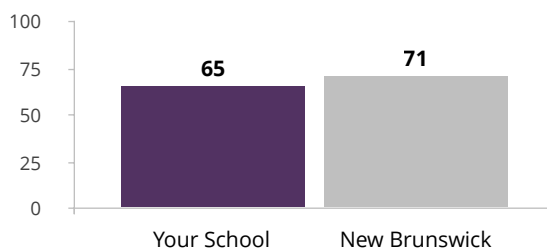
Figure 10: Youth with mental fitness needs highly satisfied %



RESILIENCE

Resilience is a strength that will help youth bounce back from adversity, but it is not solely something residing inside the individual. Rather, it is a socio-ecological model where individual strengths, along with one's caregivers and community, make it possible for a youth to find and access the right supports, programs and services for their needs (Ungar, 2008).

Figure 11: Youth with high or moderate levels of resilience %



AVAILABILITY OF AND ACCESS TO SUPPORT

Support for mental distress or mental health problems is key in addressing children and youths' needs before they grow into complex and urgent matters. Support can come from family, peers, teachers, programs, such as the LINK Program, or may require more formalized counselling or intervention. Over the last decade, the Province of New Brunswick has deployed a number of initiatives to improve the availability and access of mental and emotional support for children and youth (Health and Education Research Group, 2017).

Figure 12: Youth who needed to see or talk to someone about their mental or emotional health %

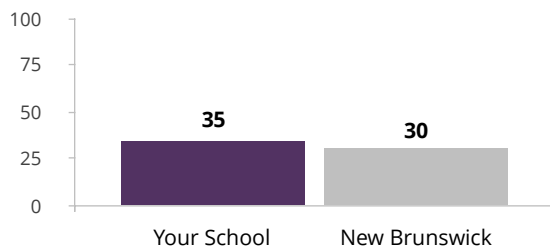
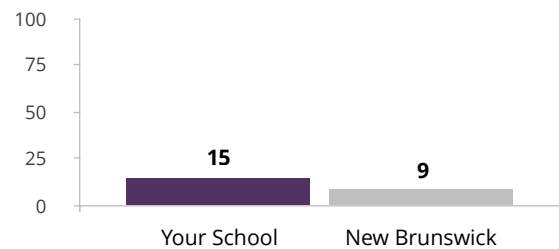


Figure 13: Youth who did not see or talk to someone about their mental or emotional health (among those who needed to) %



BULLYING

Bullying includes both direct and indirect aggressive behaviours that can be physical, verbal, relational (e.g. rumours), or directed toward the damage of property (Evans, Fraser, & Cotter, 2014). A proper definition of bullying also considers these three defining features: the intent to harm, a power imbalance (ex. physical strength, social power) and repetition.

Figure 14: Youth having been a victim of bullying at least once in the couple of months prior to the survey %

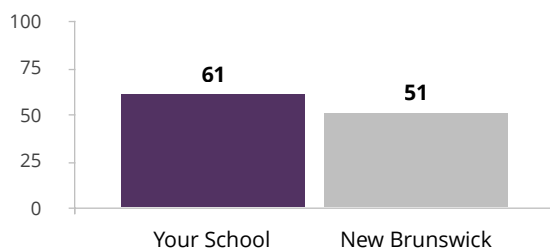
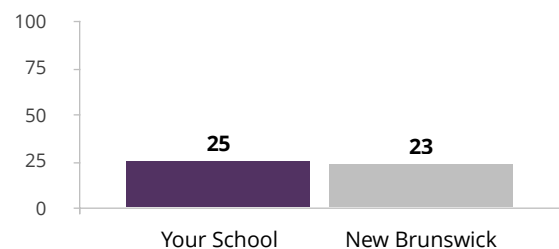


Figure 15: Youth having bullied another student at least once in the couple of months prior to the survey %



PARTICIPATION AND ENGAGEMENT

How do our students participate and engage in extracurricular activities?

EXTRACURRICULAR ACTIVITIES

Participation in organized leisure-time activities is associated with better physical and mental health in adolescents (Badura, Geckova, Sigmundova, van Dijk & Reijneveld, 2015). Volunteering and having a part-time job outside of school can bring benefits to youths' future careers; they can develop skills, work attitudes, and even make connections with an organization, or in an area, where they could one day work (Hientz, 2017). Hientz also report that for youths who volunteer, the personal and social benefits are also deep and impactful.

Figure 16: Youth participating in activities or groups %

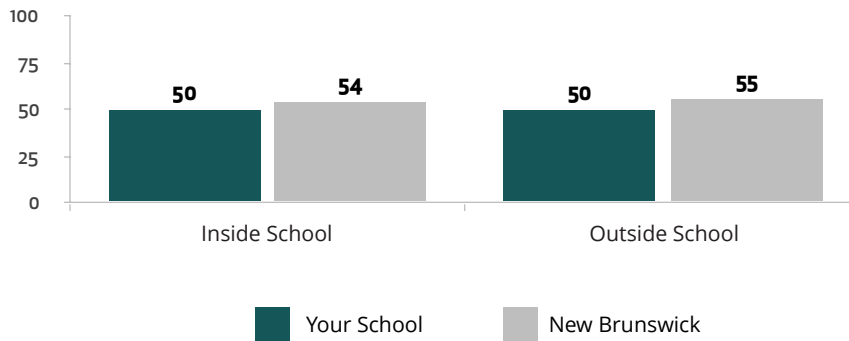


Figure 17: Youth having a part-time job outside of school %

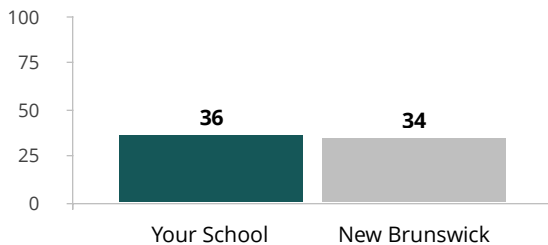
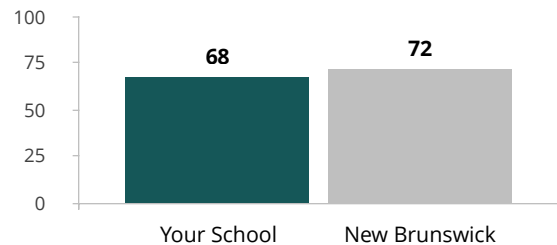


Figure 18: Youth taking part in volunteer activities in the 12 months prior to the survey %



HEALTHY LIFESTYLES

How healthy are our students' behaviours?

TOBACCO USE

A growing concern in Canada, and elsewhere, is the alarming increases in current use of tobacco products among students. In Canada, a dramatic 74% increase in vaping was observed among youth aged 16–19 between 2017 and 2018 (Hammond et al., 2019). Data from the *National Youth Tobacco Survey* indicate a similar situation in the United States. Prior to 2017, there had been a continuing decline in youth smoking; however, these concerning results indicate that youth smoking may now be increasing. Health Canada (2019) warns of the risks of vaping with nicotine and state that youth are particularly at risk of dependence and of developing nicotine addiction. The long-term health effects of vaping are unknown.

Figure 19: Youth who are daily or occasional smokers %

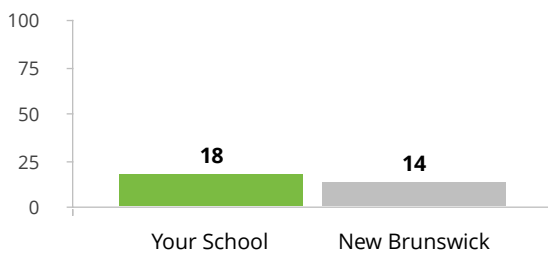
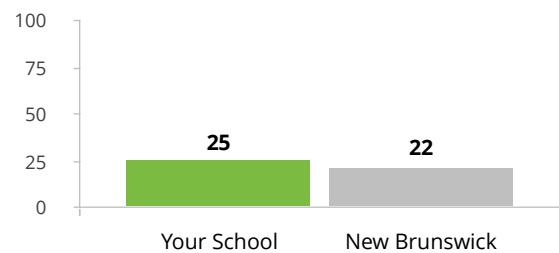


Figure 20: Youth having tried electronic cigarettes (vape) %



DRUG CONSUMPTION

In 2018, Cannabis was legalized in Canada for adults 18 years of age or older but its possession and use by youth under the age of 19 remains prohibited in New Brunswick. Although cannabis use by Canadian youth had been decreasing over the past decade, it is still the most commonly used illicit substance among said population (Leos-Toro, Rynard, Murnaghan, MacDonald & Hammond, 2019). Youth are more likely to experience harms from cannabis because their brains develop until about age 25; the earlier they start consuming cannabis, the more harm it can do (Chadwick, Miller, & Hurd, 2013).

Figure 21: Youth using cannabis in the 12 months prior to the survey %

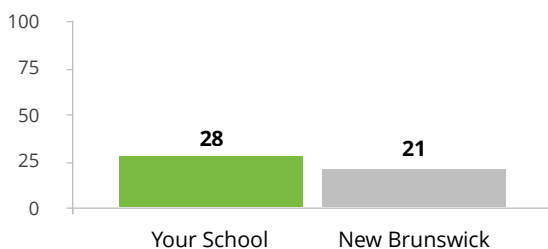
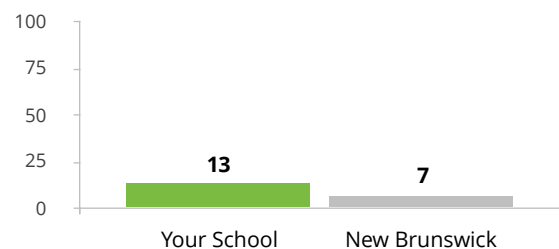


Figure 22: Youth consuming pain relievers or stimulants to get a high in the 12 months prior to the survey %



PHYSICAL ACTIVITY

The *Canadian 24-Hour Movement Guidelines for Children and Youth* recommend 60 minutes per day of moderate to vigorous physical activity (Canadian Society for Exercise Physiology, 2016). They also recommend that youth limit recreational screen time to no more than 2 hours per day. The *Active Healthy Kids Canada Report Card* (ParticipACTION, 2016) indicates that our children and youth spend an average of 7.8 hours a day in front of screens. But when we get youth to trade in screen time, they spend more time being physically active.

Figure 23: Youth meeting the guidelines on 60 minutes of daily moderate or vigorous physical activity %

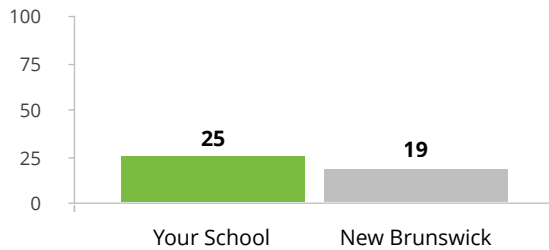
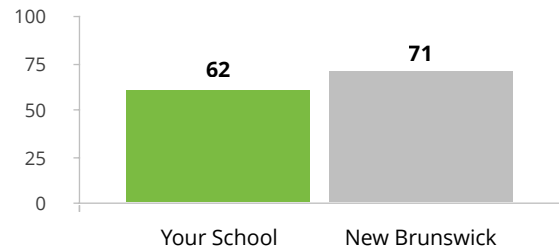


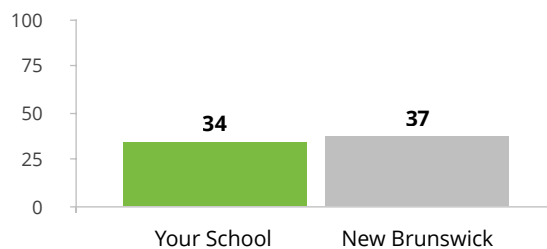
Figure 24: Youth having more than 2 hours per day of recreational screen time %



SLEEP

The current guidelines on adequate sleep time indicate that children (aged 5–13 years) should sleep 9–11 hours each night and that adolescents (ages 14–17 years) should sleep 8–10 hours each night. Insufficient sleep among children has been linked to impaired academic performance, increased risk of obesity, injuries and accidents, suicide ideation, and drug and alcohol use (Matricciani, Olds, Blunden, Rigney, & Williams, 2012). Increased screen time and sedentary activities and reduced physical activity are believed to contribute to poor sleep patterns (ParticipACTION, 2016).

Figure 25: Youth sleeping 8 hours or more every night %



HEALTHY EATING

Canada's Food Guide (Health Canada, 2019) has been recently revised and recommends eating a variety of healthy foods each day, including plenty of vegetables and fruits. It also recommends that Canadians make water their drink of choice. It is well known that healthy eating habits are essential for the brain to be ready to learn. Indeed, there are strong correlations between eating patterns during childhood and physical and cognitive development, academic achievement, and a reduced risk of chronic diseases later in life (Health Canada, 2012).

Figure 26: Youth consumption of vegetables or fruit %

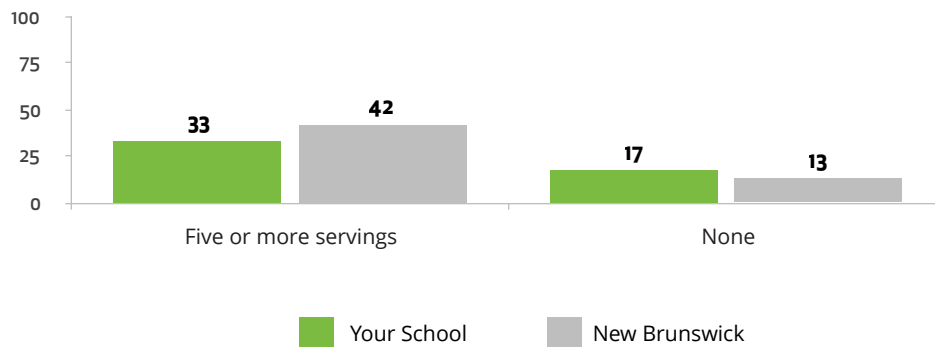
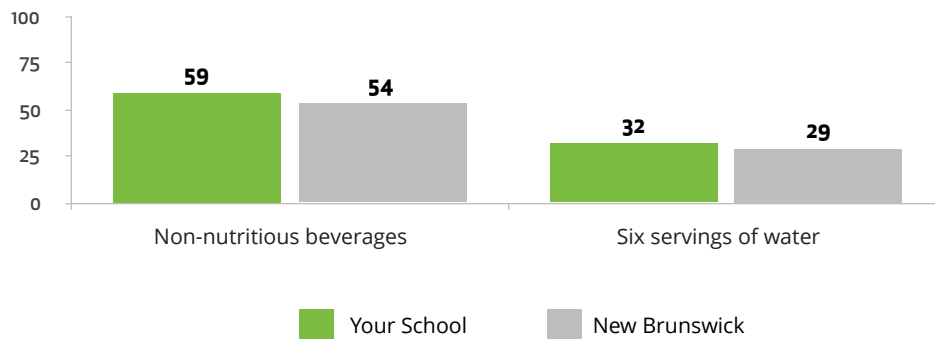


Figure 27: Youth choices of beverages %



SAFETY

How safe are our students?

INJURIES

The majority of youth injuries are preventable (Yancha, Warda, & Fuselli, 2012). In Canada, 38% of young people report having been medically treated for an injury each year and nearly one in four Canadian youth will require an overnight hospital stay or will lose more than one day of regular activities because of injury with potential emotional implications (Davidson, Russell, Piedt, Pike, & Pickett, 2013).

Figure 28: Youth having been injured and having to be treated by a doctor or nurse in the 12 months prior to the survey %

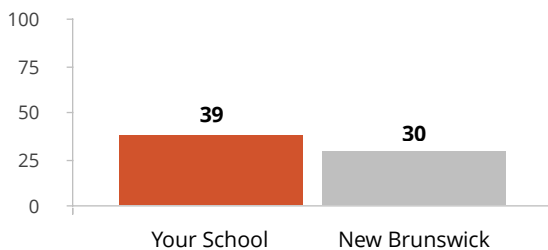
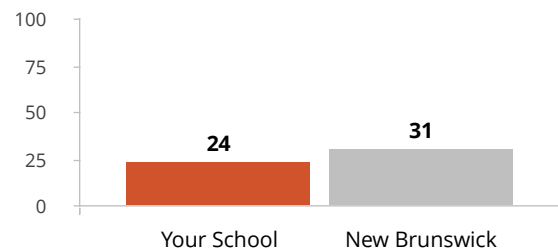


Figure 29: Youth always wearing a helmet when riding a bicycle in the 12 months prior to the survey %



SEXUAL VIOLENCE

The Convention of the Rights of the Child states as a universal standard, that every youth has the right to be free from sexual abuse. Child sexual abuse is a risk factor associated with disruptions in the development of a child's sense of self, leading to difficulty in relating to others, inability to control reactions to stressful events, as well as other interpersonal and emotional challenges increasing the risk of psychiatric disorders (Molnar, Buka, & Kessler, 2001). In this survey, sexually violated is defined as having anyone ever make you do any sexual activity (e.g. kissing, oral sex, intercourse) when you didn't want to (by pressuring you with their words or actions, or by using alcohol or drugs).

Figure 30: Youth reporting having been sexually violated %

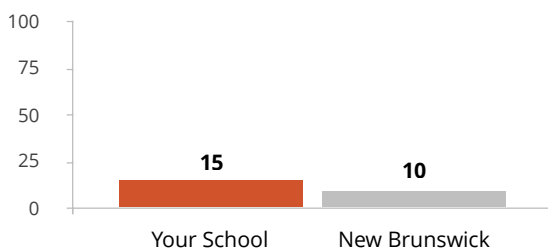
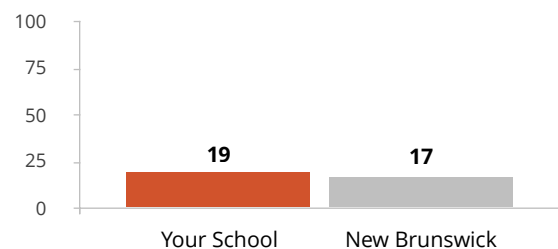


Figure 31: Youth reporting being victim of dating violence in the 12 months prior to the survey (among those who dated) %



HEALTH STATUS

How healthy are our students?

PERCEIVED HEALTH AND WELL-BEING

Many factors influence youth's perceived health, including the background of the family raising them (education level, income, family structure), their parents' health conditions, as well as early challenges they might have faced, such as physical abuse, disability, or parental alcoholism and smoking (Bauldry, Shanahan, Boardman, Miech, and Macmillan, 2012). Both self-reported physical health status and self-reported mental health status are linked to significant differences in the satisfaction an adolescent has with their family, friends, living environment, school experiences, self, and their global Quality of Life (Sawatzky, Ratner, Johnson, Kopec, & Zumbo, 2010).

Figure 32: Youth reporting that their health is "Very good" or "Excellent" %

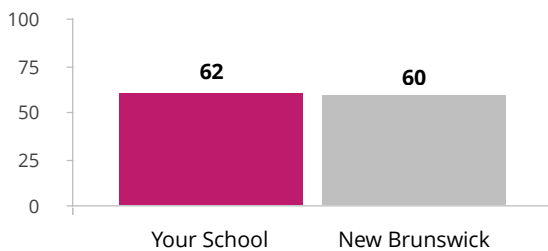
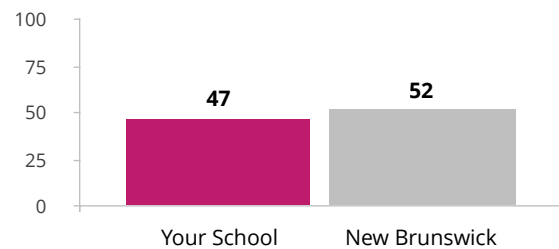


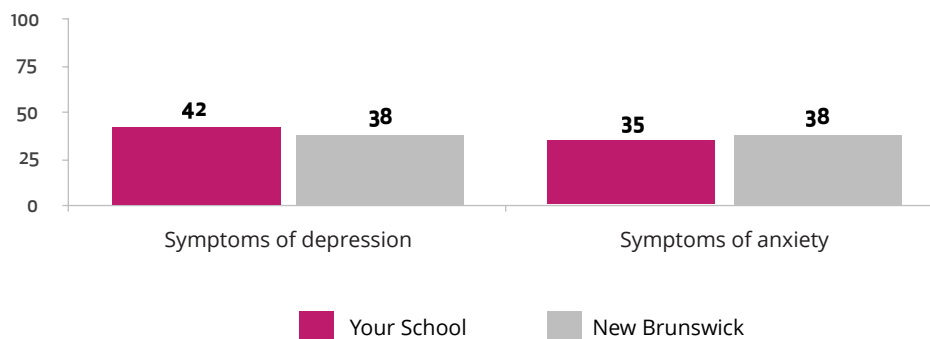
Figure 33: Youth reporting a high level of life satisfaction %



SELF-REPORTED SYMPTOMS OF DEPRESSION OR ANXIETY

Everyone will experience varying degrees of mental *distress* or *problems* in their life, but not everyone will experience mental illness (Kutcher and Wei, 2017). While not a diagnostic tool, youths' self-reported symptoms of depression or anxiety can provide our communities some insight on where strengthening protective factors can help our youths deal with the typical and normal stresses and mental states of life.

Figure 34: Youth reporting symptoms of depression or anxiety in the 12 months prior to the survey %



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New Brunswick Student Wellness Survey

Grades 6–12
2018–2019

Annex Tables



Feedback Report Harvey High School

ANNEX

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 annex tables summarize all the indicators from previous sections and they also provide additional data about 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.



Individual



Family



School



Community



Protective
Factor



Risk
Factor


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.


Harvey High School


ANNEX: CONTEXT

	Your School %	New Brunswick %
Number of students	160	38,982

 SEX AT BIRTH		
Female	49	50
Male	51	50

 GENDER IDENTITY		
Woman / girl	48	49
Man / boy	50	49
Other	1	1

 AGE		
10 years or younger	1	0
11 years old	19	12
12 years old	12	14
13 years old	13	14
14 years old	15	14
15 years old	14	14
16 years old	13	15
17 years old	10	14
18 years old	3	3
19 years or older	0	0

 GRADE		
Grade 6	18	14
Grade 7	13	14
Grade 8	13	14
Grade 9	16	14
Grade 10	15	15
Grade 11	12	15
Grade 12	13	15





Harvey High School


ANNEX: CONTEXT

	Your School %	New Brunswick %
Number of students	160	38,982

 LANGUAGE SPOKEN AT HOME		
English	97	68
French	0	18
Equally both French and English	1	9
Mi'kmaq	0	0
Wolastoqey	0	0
Another language(s)	3	4

 LANGUAGE SPOKEN WHEN NOT AT HOME		
English	95	71
French	1	17
Equally both French and English	3	10
Mi'kmaq	0	0
Wolastoqey	0	0
Another language(s)	1	2

 CULTURAL DIVERSITY		
Aboriginal / Indigenous youth	8	8
A visible minority (other than Aboriginal / Indigenous)	7	6
Immigrant youth	6	9

 SEXUAL ORIENTATION		
LGBTQ+	21	16
Gay or lesbian	4	2
Bisexual	6	6
Asexual	1	1
Unsure	8	5
Other	2	2
Heterosexual	79	84



Harvey High School

ANNEX: CONTEXT

	Your School %	New Brunswick %
Number of students	160	38,982



LEARNING EXCEPTIONALITY OR SPECIAL EDUCATION NEEDS

Any diagnosis	Your School %	New Brunswick %
Autism / Asperger Syndrome	1.9	2.3
Behavioural disorder	0.7	1.2
Blind or low vision	5.0	3.1
Deaf or Hard-of-Hearing	1.3	1.3
Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD)	4.9	9.6
Intellectual Disability	0.0	0.4
Language / Speech Impairment	0.7	1.6
Learning Disability	2.5	4.7
Physical Disability	1.3	1.0
Mental Health Disorder	7.0	6.1
Gifted	2.5	1.8
Other	5	4



SOCIO-ECONOMIC CONDITION

Youth reporting "Always" or "Often" going to school or to bed hungry because there is not enough food at home	7	5
---	---	---



Individual



Family



School



Community



Protective



Risk

Harvey High School

ANNEX: LEARNING

	Your School %	New Brunswick %
Number of students	160	38,982



DAILY HOMEWORK

None	25	18
Less than 1 hour a day	44	45
1 to 2 hours a day	23	29
More than 2, but less than 5 hours a day	7	7
5 or more hours a day	1	1



DAILY LEISURE READING

None	38	37
Less than 1 hour a day	35	38
1 to 2 hours a day	20	17
More than 2, but less than 5 hours a day	6	6
5 or more hours a day	1	2



STUDENT VALUES

Getting good grades *	92	93
Making friends *	80	87
Participating in school activities outside of class *	57	57
Getting to class on time *	81	87
Learning new things *	84	88
Expressing my opinion in class *	64	65
Getting involved in the student council or other similar groups *	31	36
Learning about my culture/heritage (e.g., Francophone, First Nations, Irish) *	51	58

* Youth reporting "Very important" or "Important."



STUDENT ENGAGEMENT

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



Individual



Family



School



Community



Protective















Risk

Harvey High School







ANNEX: SOCIAL AND EMOTIONAL DEVELOPMENT

	Your School %	New Brunswick %
Number of students	160	38,982

P RESILIENCE		
High and moderate levels of resilience		
	65	71
 I am able to solve problems without harming myself or others (for example by using drugs and/or being violent). *	59	55
 I know where to go in my community to get help. *	27	27
 Getting an education is important to me. *	56	61
 I try to finish what I start. *	46	45
 I have people I look up to. *	46	46
 My parent(s)/caregiver(s) know a lot about me. *	54	54
 My family stands by me during difficult times. *	56	54
 My friends stand by me during difficult times. *	38	44
 I have opportunities to develop skills that will be useful later in life (like job skills and skills to care for others). *	40	41
 I am treated fairly in my community. *	32	37
 I feel I belong(ed) at my school. *	23	27
 I enjoy my cultural and family traditions. *	55	49

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

P LINK PROGRAM		
Youth not aware of the program	68	60
Youth aware of the program but having never used it	32	39
Youth aware of the program and having used it	0	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. *	69	64
 It is safe for younger children to play outside during the day. *	88	83
 You can trust people around here. *	64	67
 There are good places to spend your free time (e.g., recreation centres, parks, shopping centres). *	61	66
 I could ask for help or a favour from neighbours. *	72	70
 Most people around here would try to take advantage of you if they got the chance. *	19	21

* Youth reporting "Strongly agree" or "Agree."



Harvey High School

ANNEX: SOCIAL AND EMOTIONAL DEVELOPMENT

	Your School %	New Brunswick %
Number of students	160	38,982



SCHOOL CONNECTEDNESS

	Your School %	New Brunswick %
High level of school connectedness	84	92
I feel close to people at my school. *	74	80
I feel I am part of my school. *	68	78
I am happy to be at my school. *	57	71
I feel the teachers at my school treat me fairly. *	72	83
I feel safe in my school. *	69	84

* Youth reporting "Strongly agree" or "Agree."



PRO-SOCIAL BEHAVIOUR

	Your School %	New Brunswick %
High level of pro-social behaviour	85	85
I often do favours for people without being asked. *	74	71
I often lend things to people without being asked. *	62	57
I often help people without being asked. *	74	74
I often compliment people without being asked. *	73	69
I often share things with people without being asked. *	64	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

	Your School %	New Brunswick %
High level of oppositional behaviour	16	15
I cut classes or skip school. *	14	13
I make other people do what I want. *	10	12
I disobey my parents. *	16	17
I talk back to my teachers. *	17	13
I get into fights. *	10	10
I often say mean things to people to get what I want. *	3	4
I take things that are not mine from home, school or elsewhere. *	4	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."



Individual



Family



School



Community



Protective



Risk

Harvey High School

ANNEX: SOCIAL AND EMOTIONAL DEVELOPMENT

	Your School %	New Brunswick %
Number of students	160	38,982

Mental Fitness



LEVELS OF MENTAL FITNESS

High level of mental fitness	21	23
Moderate level of mental fitness	53	55
Low level of mental fitness	25	22



MENTAL FITNESS NEEDS

Need for autonomy highly satisfied	63	67
Need for competence highly satisfied	76	75
Need for relatedness highly satisfied	73	78



LIFE DOMAINS OF MENTAL FITNESS

Mental fitness needs highly satisfied by family	79	79
I feel free to express myself at home. *	52	53
I feel like I have a choice about when and how to do my household chores. *	36	32
I feel I do things well at home. *	47	43
I feel my parents think that I am good at things. *	63	56
My parents like me and care about me. *	74	74
I like to spend time with my parents. *	55	51
Mental fitness needs highly satisfied by friends	76	81
I feel free to express myself with my friends. *	48	52
I feel I have a choice about which activities to do with my friends. *	42	44
I feel I do things well when I am with my friends. *	45	45
I feel my friends think I am good at things. *	40	40
My friends like me and care about me. *	47	49
I like to spend time with my friends. *	64	67
Mental fitness needs highly satisfied by school	46	57
I feel free to express myself at school. *	22	25
I feel I have a choice about when and how to do my schoolwork. *	33	35
I feel I do things well at school. *	39	34
I feel my teachers think I am good at things. *	30	31
My teachers like me and care about me. *	30	30
I like to be with my teachers. *	17	20

* Youth reporting "Really true for me."



Individual



Family



School



Community



Protective



Risk

Harvey High School

ANNEX: SOCIAL AND EMOTIONAL DEVELOPMENT

	Your School %	New Brunswick %
Number of students	160	38,982

Bullying



BULLYING VICTIMS

Youth having been a victim of bullying at least once in the last couple of months	61	51
Physical attacks	17	12
Verbal attacks	46	37
Cyber-attacks	15	17
Having someone steal or damage their things	20	16
Exclusion	38	32
Being bullied with mean comments about their race / religion / personal features	17	14
Other students made sexual jokes, comments, or gestures	21	17



BULLYING PERPETRATORS

Youth having bullied another student at least once in the last couple of months	25	23
Physical attacks	7	6
Verbal attacks	15	15
Cyber-attacks	5	6
Stealing from or damaging someone else's things	3	3
Exclusion	12	11
Bullying with mean comments about someone's race / religion / personal features	7	4
Making sexual jokes, comments, or gestures towards someone	5	6



RESPONSE TO BULLYING

Youth ignoring it	13	22
Youth telling their parents about it	25	22
Youth telling their teacher about it	15	18
Youth telling their principal or vice-principal about it	15	9
Youth telling an adult at the school about it	11	11
Youth joining in the bullying	0	1
Youth reporting that if a student complains to an adult at school about bullying, something is "Always" or "Often" done about it	24	43




















Harvey High School

ANNEX: SOCIAL AND EMOTIONAL DEVELOPMENT

	Your School %	New Brunswick %
Number of students	160	38,982

MENTAL AND EMOTIONAL SUPPORT

 	Youth needing to see or talk to someone for a mental or emotional problem in the last 12 months	35	30
 	Youth who needed to see or talk to someone about their mental or emotional problem but did not see someone	15	9
 	Help not available at school *	24	11
 	Help not available in community *	15	6
 	Help not available at home *	10	13
	Help not available among peers or friends *	14	9
 	Uncomfortable going for help *	71	70
 	Not knowing where to go to get help *	42	22
 	Other *	39	30

* Among those in need who did not see someone



Harvey High School

ANNEX: PARTICIPATION AND ENGAGEMENT

	Your School %	New Brunswick %
Number of students	160	38,982

EXTRACURRICULAR ACTIVITIES AT SCHOOL

	Your School %	New Brunswick %
Y Youth participating in any activities or groups inside school	50	54
A sports team (e.g., volleyball, hockey, soccer)	32	28
An individual sport (e.g., running, cycling, skating)	7	7
Volunteer work	12	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)	4	6
Church or other religious/spiritual group	1	2
Other activity or group (e.g., chess, math, debate)	11	11

EXTRACURRICULAR ACTIVITIES OUTSIDE SCHOOL

	Your School %	New Brunswick %
Y Youth participating in any activities or groups outside school	50	55
A sports team (e.g., volleyball, hockey, soccer)	26	28
An individual sport (e.g., running, cycling, skating)	11	14
Volunteer work	11	13
Arts groups (e.g., music, dance, drama)	8	9
Community groups (e.g., scouts, girl guides, 4-H, cadets)	4	4
Church or other religious/spiritual group	11	10
Other activity or group (e.g., chess, math, debate)	7	7

VOLUNTEERING

	Your School %	New Brunswick %
Y Youth taking part in volunteer activities in the last 12 months	68	72
Supporting a cause (e.g. food bank, UNICEF, Operation Christmas Child)	25	28
Fund raising (e.g. charity, school trips)	33	39
Helping in my community (e.g. coaching sports, volunteering at hospital)	33	31
Helping neighbours or relatives (e.g. cutting grass, babysitting)	50	54
Doing other organized volunteer activity	38	34

JOBS

	Your School %	New Brunswick %
Y Youth having a part-time job outside of school	36	34
Youth working on weekends	23	26
Youth working on weekdays	22	20
Youth working during school vacations	16	13



Individual



Family



School



Community



Protective



Risk

Harvey High School

ANNEX: HEALTHY LIFESTYLES

	Your School %	New Brunswick %
Number of students	160	38,982

Healthy Eating

HEALTHY EATING HABITS

	Youth eating 5 or more servings of vegetables or fruit *	33	42
	Youth eating plant-based proteins *	19	20
	Youth drinking at least 2 servings of milk *	35	36
	Youth drinking at least 6 servings of water *	32	29
	Youth eating non-nutritious foods (e.g. fries, chips, candy, donuts) *	83	85
	Youth drinking non-nutritious beverages (e.g. punch, pop, energy drinks, sports drinks) *	59	54
	Youth drinking high energy drinks *	9	8
	Youth eating breakfast daily	32	41
	Youth eating at a fast food place or restaurant at least once in the last 7 days	57	63
	Youth eating at a fast food place or restaurant 3 times or more in the last 7 days	8	14
	Youth eating an evening meal together with family, friend(s) or guardian(s) daily	41	46
	Youth eating meals while watching television at least once in the last 7 days	62	67
	Youth eating meals while watching television 3 times or more in the last 7 days	43	40

* The day before the survey

SCHOOL ENVIRONMENT FOR HEALTHY EATING

	Youth thinking that there is not enough variety in the food offered at their school	38	27
	Youth noticing a breakfast program in the last 12 months	1	44
	Youth noticing a fruit and vegetable snack program in the last 12 months	21	14
	Youth noticing healthy foods sold at sporting events or special food events (e.g., dances and movie nights) in the last 12 months	6	14
	Youth noticing healthy foods or non-food items sold for fundraising in the last 12 months	8	13
	Youth noticing healthy foods offered in vending machines and at canteens in the last 12 months	7	19
	Youth noticing healthy foods offered at cafeteria or in hot lunch program in the last 12 months	35	37
	Youth noticing information in their cafeteria about how to make healthier food choices in the last 12 months	7	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



Individual



Family



School



Community



Protective











Risk









Harvey High School

ANNEX: HEALTHY LIFESTYLES



	Your School %	New Brunswick %
Number of students	160	38,982

BARRIERS TO DAILY BREAKFAST		
  Not having time for breakfast	31	24
 The bus coming too early	10	10
 Sleeping in	14	14
 Not being hungry in the morning	32	27
 Feeling sick when eating breakfast	12	13
 Trying to lose weight	5	6
 Having nothing to eat at home	3	4

Physical Activity

PHYSICAL ACTIVITY HABITS		
  Youth having more than 2 hours per day of screen time	62	71
  Youth meeting the guidelines on 60 minutes of daily moderate or vigorous physical activity	25	19
  Youth commuting to and from school actively	2	7
  Youth commuting to and from school inactively	91	78
Youth commuting to and from school both actively and inactively	7	15

PHYSICAL EDUCATION CLASSES IN LAST 5 DAYS		
  0 physical education classes	39	43
1 physical education class	9	8
2 physical education classes	33	22
3 physical education classes	2	11
4 physical education classes	6	5
5 physical education classes	11	12

SCHOOL ENVIRONMENT FOR PHYSICAL ACTIVITY		
  Youth participating in before school, noon hour, or after school physical activities organized by their school	47	38
Youth participating in competitive school sports teams	53	36

SLEEP		
  Youth sleeping 8 hours or more every night	34	37







Harvey High School



ANNEX: HEALTHY LIFESTYLES



	Your School %	New Brunswick %
Number of students	160	38,982

Alcohol and drug consumption

 	ALCOHOL CONSUMPTION	
Youth having ever had a drink of alcohol that is more than just a sip	47	40
Youth drinking alcohol once a month or more in the last 12 months	30	24
Youth drinking 5 or more drinks at one time, at least once a month in the last 12 months	16	15

 	CANNABIS CONSUMPTION	
Youth having ever used or tried cannabis	29	24
Youth using cannabis in the last 12 months	28	21
Youth using cannabis every day in the last 12 months	8	3

 	OTHER DRUG CONSUMPTION	
LSD and other hallucinogens (e.g., PCP, magic mushrooms)	7	4
Pain Relievers (e.g., Fentanyl, Percs, Oxycontin)	14	6
Amphetamines (speed)	9	3
Ecstasy, MDMA (E, Xtc, Adam, X)	5	3
Cocaine (coke, crack, snow, rock)	7	4
Cough and cold medicines	23	16
Stimulants (e.g., Ritalin, Concerta, Adderall)	6	4
Sedatives / tranquilizers (e.g., Valium, Ativan, Xanax, GHB)	7	3
Methamphetamines / Crystal methamphetamine (ice)	7	2
Glue or solvents (e.g., gasoline, butane, model glue)	3	2
Heroin (horse, tar, junk)	3	1
Other	17	9

 	CONSUMPTION ONSET	
Average age at which grade 12 students tried cigarettes for the first time (years)	15	15
Average age at which grade 12 students drank alcohol that was more than a sip (years)	15	15
Average age at which grade 12 students first used or tried cannabis (years)	14	15



Harvey High School

ANNEX: HEALTHY LIFESTYLES

	Your School %	New Brunswick %
Number of students	160	38,982

Smoking



SMOKING SUSCEPTIBILITY

Youth of all grades having tried smoking	25	22
Grade 6 youths having tried smoking	0	4
Grade 7 youth having tried smoking	12	7
Grade 8 youth having tried smoking	17	11
Grade 9 youth having tried smoking	39	20
Grade 10 youths having tried smoking	30	27
Grade 11 youths having tried smoking	30	35
Grade 12 youths having tried smoking	53	42
Youth susceptible to smoking (among those who have never tried it)	26	28



SMOKING HABITS

Youth smoking daily or occasionally	18	14
Youth smoking daily	9	5



ALTERNATIVE SMOKING PRODUCTS

Youth having tried alternative smoking products	29	32
E-cigarettes (electronic cigarettes, vape)	27	29
Little cigars or cigarillos (plain or flavoured)	11	12
Cigars (not including little cigars or cigarillos)	6	9
Roll-your-own cigarettes (tobacco only, in rolling papers)	9	6
Smokeless tobacco (chewing tobacco, pinch, snuff, or snus)	4	4
Nicotine patches, gum, lozenges, or inhalers	2	3
A water pipe (hookah) to smoke shisha (herbal or tobacco)	8	5
Blunt wraps (a tube made of tobacco used to roll cigarette tobacco)	5	4
Bidis (little cigarettes hand-rolled in leaves, tied with string at the ends)	1	2



Individual



Family



School



Community



Protective























Risk

Harvey High School

ANNEX: HEALTHY LIFESTYLES

	Your School %	New Brunswick %
Number of students	160	38,982

EXPOSURE TO SECOND-HAND SMOKE

 	Youth having at least one person at home who smokes	15	15
 	Youth having at least one parent (or step-parent or guardian) who smokes	43	38
 	Youth having at least one sibling who smokes	19	16
 	Youth having at least one friend who smokes	29	26
	Youth riding in a car with someone smoking cigarettes in the last 7 days	26	18
 	Youth reporting no one is allowed to smoke in their home	73	81
 	Youth reporting only special guests are allowed to smoke in their home	4	2
	Youth reporting smoking is allowed only in certain areas in their home	19	13
 	Youth reporting smoking is allowed anywhere in their home	4	4
 	Youth reporting their school has a clear set of rules about smoking	83	89
 	Youth reporting that students get into trouble if they are caught breaking the smoking rules at their school	67	70



Individual



Family



School



Community



Protective







Risk

Harvey High School







ANNEX: SAFETY

	Your School %	New Brunswick %
Number of students	160	38,982

INJURIES

 Youth driving an off-road vehicle after drinking alcohol, using cannabis or other illegal drugs, in the last 12 months	17	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	20	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	39	30










SEXUAL VIOLENCE

  Youth reporting having been sexually violated	15	10
  Youth reporting being victim of dating violence in the 12 months prior to the survey (among those who dated)	19	17
  Youth reporting they know when they are legally able to consent to sexual activity	93	71



Harvey High School

ANNEX: HEALTH STATUS

		Your School %	New Brunswick %	
Number of students		160	38,982	
WEIGHTS (BODY MASS INDEX)				
	Youth that are of healthy weight	67	65	
	Youth that are underweight	8	7	
	Youth that are overweight or obese	25	27	
SELF-RATED HEALTH AND WELL-BEING				
		Youth reporting symptoms of depression in the last 12 months	42	38
		Youth reporting symptoms of anxiety in the last 12 months	35	38
		Youth reporting that their health is "Very good" or "Excellent"	62	60
LIFE SATISFACTION				
Rating of life satisfaction (Mean score, scale from 0-10)		7	7	
Youth reporting a life satisfaction score of 0-5 *		23	19	
Youth reporting a life satisfaction score of 6-7 *		31	29	
Youth reporting a life satisfaction score of 8-9 *		33	40	
Youth reporting a life satisfaction score of 10 *		13	12	

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



Individual



Family



School



Community



Protective



Risk

