Youth Development Instrument

SCHOOL DISTRICT 71 | **Comox Valley**

SCHOOL DISTRICT REPORT

2021/2022 YDI PILOT PHASE 3

SFU FACULTY OF HEALTH SCIENCES

CHART CAPTURING HEALTH AND RESILIENCE TRAJECTORIES

ACKNOWLEDGEMENTS

We gratefully acknowledge that we live and work on the unceded, ancestral, and traditional territories of the xʷməθkwəy̓əm (Musqueam), Skwxwú7mesh (Squamish), Stó:lō, Səl̓ílwətaɬ (Tsleil-Waututh), and kʷikʷəƛ̓əm (Kwikwetlem) Nations on the Burnaby Mountain Campus of Simon Fraser University.

The Youth Development Instrument (YDI) pilot is primarily supported by funding provided to Dr. Hasina Samji from the British Columbia Center for Disease Control and Simon Fraser University and the Social Sciences and Humanities Research Council.

The YDI follows in the footsteps of the Middle Years Development Instrument (MDI) and other child development monitoring tools developed by the Human Early Learning Partnership (HELP) at the University of British Columbia. We thank HELP, and the HELP Aboriginal Steering Committee, for their support and guidance in building and implementing the YDI. We would also like to extend our sincere gratitude to YDI Co-Investigators Drs. Martin Guhn and Kimberly Schonert-Reichl for their ongoing collaboration and guidance, and to Drs. Naomi Dove, Kim Thomson, Michael Warren, Jessica Trach and Ms. Michelle Pang for their contributions to the project.

We are grateful for the insight and guidance from the YDI Provincial Policy and Practice Advisory Board which is composed of individuals from education, health and policy sectors including school district staff, public health and adolescent medicine practitioners, and representatives from the BC Ministries of Health, Education and Childcare, and Mental Health and Addictions. We are also grateful to the YDI Youth Advisory Council, composed of youth aged 15-18 years from across the province, which provides a youth lens to the development, implementation, and knowledge translation of the YDI.

We thank all the school districts and independent schools for their participation in the YDI pilot across its three phases. The support and hard work of the education staff, teachers, and school administrators in all our participating schools is immensely valued.

And finally, we want to share our warmest appreciation to the many students who took the time to share their insights with us.

YDI research is led by Principal Investigator Dr. Hasina Samji, Director of the Capturing Health and Resilience Trajectories (CHART) lab, Assistant Professor in the Faculty of Health Sciences at Simon Fraser University and Senior Scientist in Population Mental Well-being at the BC Centre for Disease Control.

The Youth Development Instrument was approved by the Behavioural Research Ethics Board, University of British Columbia, ID#: H20-02544.

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Suggested Citation
Samji H, Low B, Badar S, del Casal JM, Wu J, Long D. (2022). Youth Development Instrument School District Report, 2021-2022. SD71: Comox Valley. Burnaby, BC: Simon Fraser University.

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INTRODUCTION TO THE YDI

WHY DOES YOUTH MATTER?

Late adolescence is an important developmental period that defines future health, social, and well-being trajectories. During this time, youth experience remarkable physical, neurodevelopmental, and social changes. In turn, these changes impact how youth think, feel, and behave in the world (Dahl & Hariri, 2005; World Health Organization, 2021). For instance, youth's abilities to think abstractly, engage in more complex problem solving, and process information and stimuli in more nuanced ways are all a reflection of significant cognitive changes that occur during this developmental period (Zarrett & Eccles, 2006).

Youth also experience important changes in their social relationships, marked by growing autonomy from parents and caregivers to other influential relationships such as peers, romantic partners, and other adults in the community (Zarrett & Eccles, 2006). At the same time, new social roles and responsibilities are adopted (Scales et al., 2016). While these new roles may be challenging, early conditions that propel young people on positive trajectories can also help them navigate this challenging transition (Scales, 2016). As such, youth can achieve positive developmental outcomes when they are provided with opportunities, resources, and structures that enable them to establish healthy behaviours and build skills to overcome adversity.

WHAT IS THE YOUTH DEVELOPMENT INSTRUMENT?

Building on the work of the Early Development Instrument (EDI) and the MDI, the YDI is a self-report questionnaire that measures the health and well-being of Grade 11 students in British Columbia (BC). Data collected from the YDI offer insight into the health and well-being of young people through the survey's strengths-based approach and emphasis on developmental assets such as thriving, positive childhood experiences, and positive mental health. These assets, also known as 'cross-cutting domains', span the YDI's five dimensions: *Social and Emotional Development, Social Well-being, Learning Environment and Engagement, Physical and Mental Well-being, and Navigating the World.* Each of these dimensions is divided into several domains and subdomains that ask questions about myriad emotions, thoughts, perspectives, behaviours, and experiences.

These five dimensions strategically identify individual and contextual resources, opportunities, and practices that foster or hinder positive youth development. In addition, using data linkages, researchers can monitor how responses change over the life course and map out how current youth experiences effectively shape trajectories into emerging adulthood. In this way, the YDI provides a means to inform actionable policies and practices that support healthy trajectories across the lifespan.

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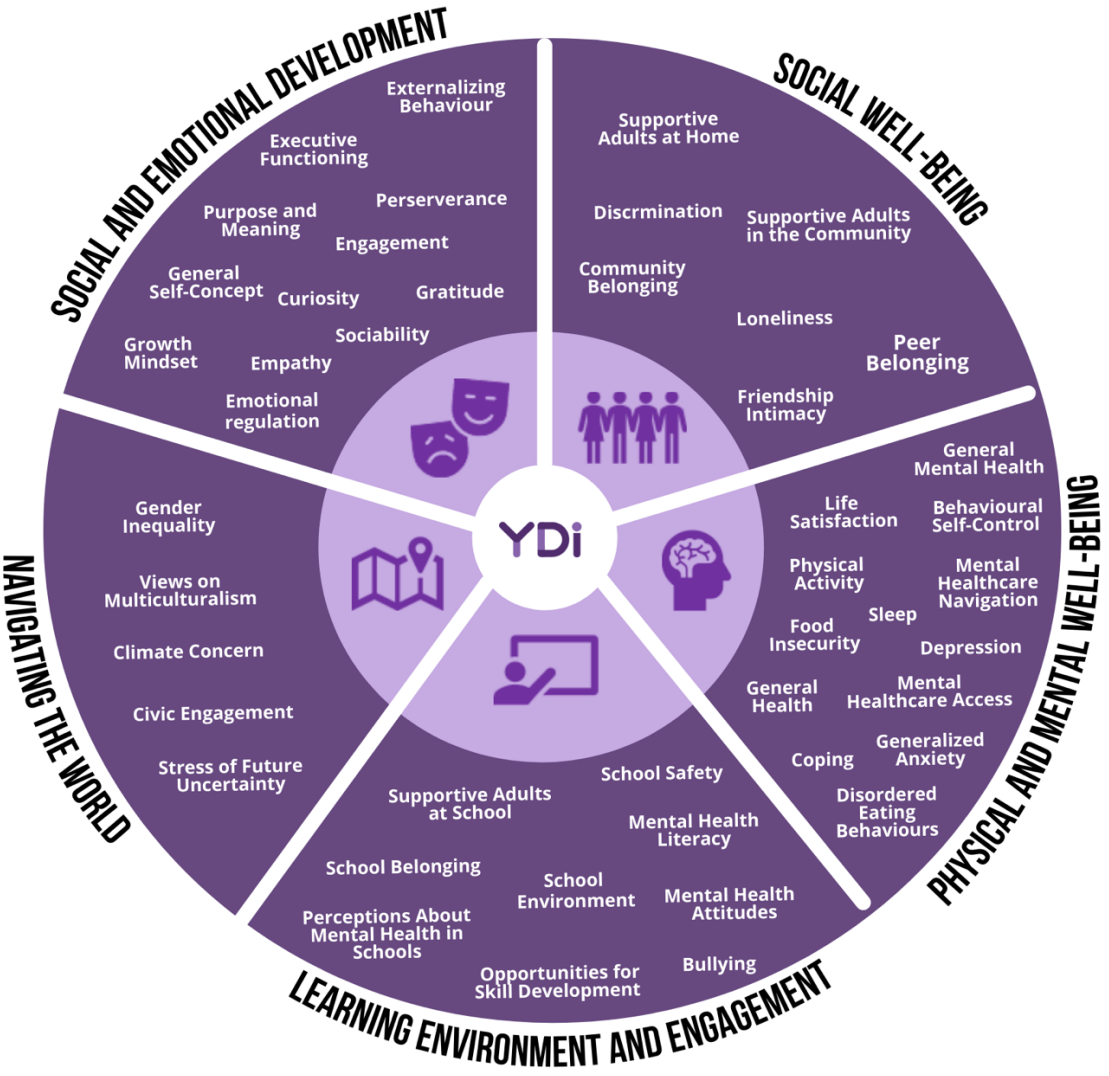
YDI DIMENSIONS & SUBDOMAINS*



CROSS-CUTTING DOMAINS

Positive Childhood Experiences* | Positive Mental Health* | Impacts of COVID-19*

*selected subdomains included in the report

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CONNECTING THE YDI TO THE BC CURRICULUM

The YDI illuminates both youth development and well-being, complementing BC's approach to learning.

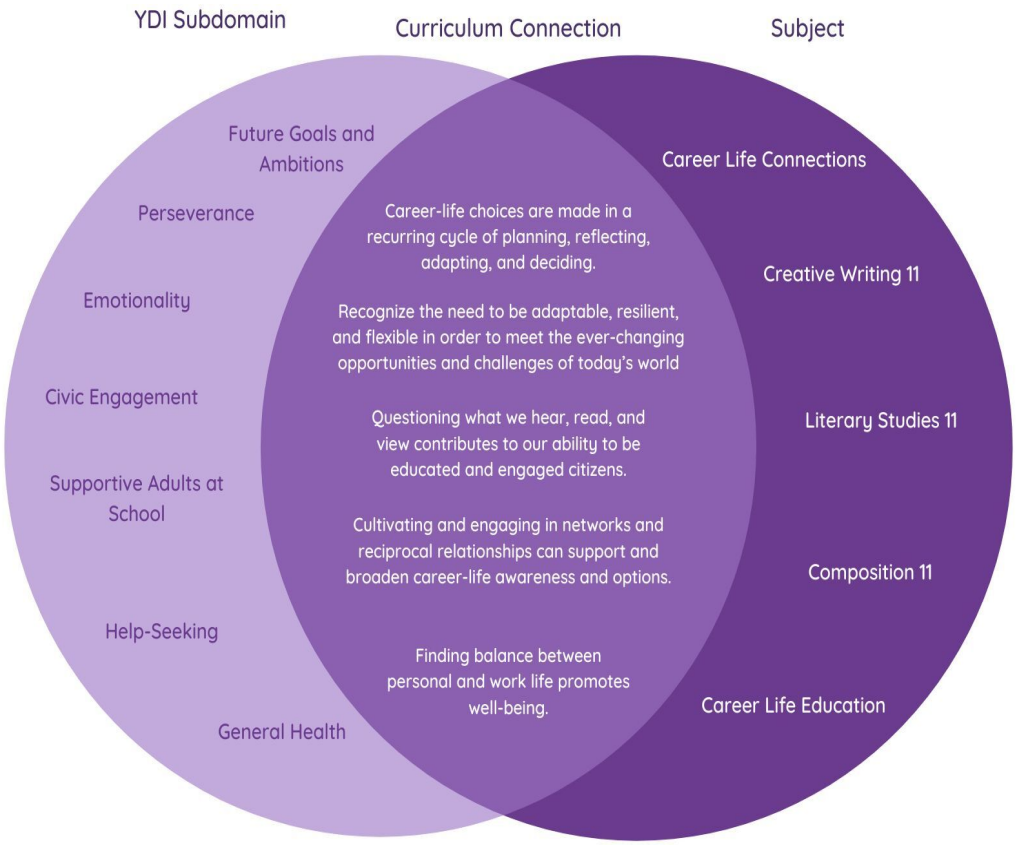

Figure 1. Examples of YDI construct connections to BC Curriculum

The YDI aligns with the BC Ministry of Education's Mental Health in Schools Strategy. By sharing YDI findings on youth's development, health, and well-being through these school district reports, we believe YDI indicators can support schools in assessing student health and well-being, further working with students to implement health and well-being improvement strategies, and can be used to inform budgeting, planning, and allocating of resources for the next school year.

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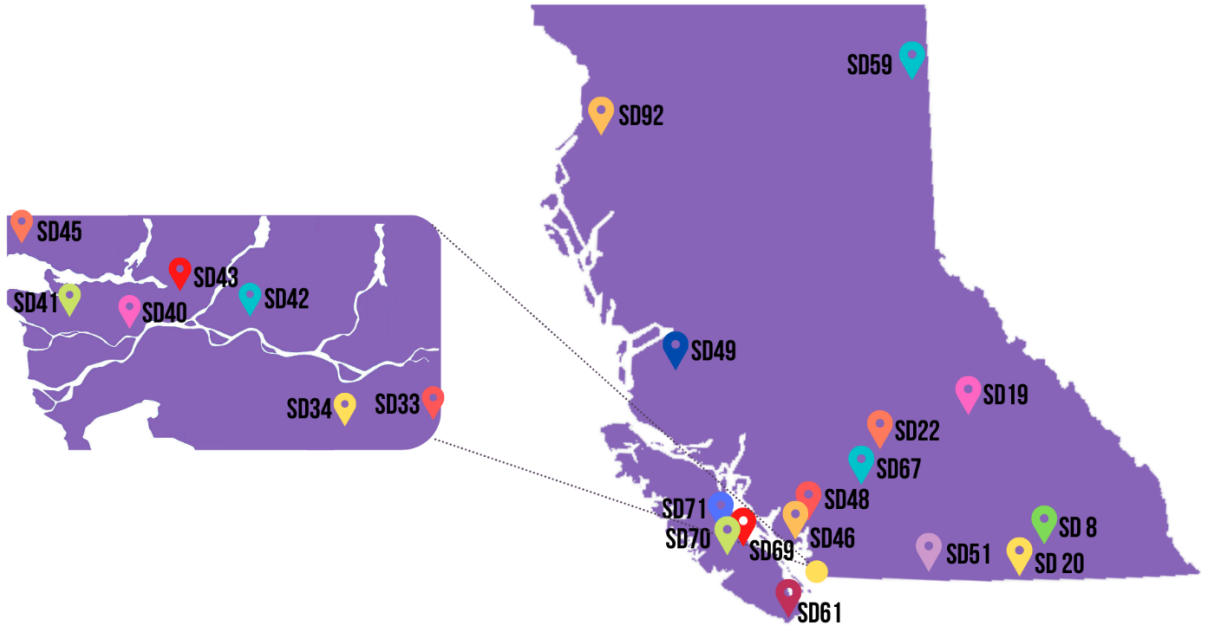
SCHOOL DISTRICT RESULTS

ABOUT THE DATA

This report contains data from Grade 11 students from 22 school districts and five independent schools that participated in the 2021/2022 YDI Pilot Phase 3. These participating districts are listed below. Please note that these data are from a select number of districts and are not representative of all BC students.



8	Kootenay Lake	**42**	Maple Ridge & Pitt Meadows	**61**	Greater Victoria
19	Revelstoke	**43**	Coquitlam	**67**	Okanagan-Skaha
20	Kootenay-Columbia	**45**	West Vancouver	**69**	Qualicum
22	Vernon	**46**	Sunshine Coast	**70**	Pacific Rim
33	Chilliwack	**48**	Sea to Sky	**71**	Comox Valley
34	Abbotsford	**49**	Central Coast	**92**	Nisga'a
40	New Westminster	**51**	Boundary	**99**	Independent Schools
41	Burnaby	**59**	Peace River South		

Many subdomains on the YDI are measured using a set of several questions called a "scale." Youth's responses within these subdomains are summarized by 1) converting their answers to each question into a numeric score and 2) adding these scores across the questions included in the scale. Each report includes subdomain results for youth in a particular district as well as youth in all participating districts.

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Larger districts' results will be closer to overall results because their students represent a higher proportion of the total YDI sample. The results for each measure exclude data from students who did not respond to the specified item and/or indicated 'not applicable' as a response. To maintain student confidentiality, statistics calculated from the data of five or fewer students are not included in the report, and average statistics for all reported districts are displayed instead.

Selected subdomains chosen in collaboration with our school/district stakeholders are included in this report. Changes in YDI subdomains from the 2020/2021 YDI Phase 2 Pilot such as renaming some subdomains (e.g., general self-concept) and changes to survey items for certain subdomains (e.g., empathy) are flagged in the Technical Notes section. YDI subdomains that also appear on the MDI are marked with an asterisk (e.g., general self-concept*); a note is included for subdomains that also appear on the MDI, but are named slightly differently (e.g., school environment) or if the subdomain is similar but not the same (e.g., reduced number of items).

HOW THE RESULTS ARE SCORED

The YDI uses three primary categories of questions to measure subdomains: *Agreement Questions, Rating Questions, and Frequency Questions.* Subdomains containing unique question types are described in the results section.

Agreement Questions
For the majority of the questions on the YDI, youth indicated their level of agreement with a given statement. For example, students were presented with the following in the Loneliness subdomain:
Please indicate your agreement or disagreement with each of the following statements:

1. *"I feel lonely"*
2. *"I often feel left out"*
3. *"There is no one I feel close to"*

AGREEMENT OPTIONS

5 = 'Agree a lot'
4 = 'Agree a little'
3 = 'Don't agree or disagree'
2 = 'Disagree a little'
1 = 'Disagree a lot'

Rating Questions
Some subdomains contain questions that ask youth to provide a rating. For example, youth were asked the following in the General Health subdomain:
In general, how would you describe your health?

RATING OPTIONS

5 = 'Excellent'
4 = 'Very good'
3 = 'Good'
2 = 'Fair'
1 = 'Poor'

Frequency Questions
Other subdomains include questions that ask how frequently youth engage in certain activities or behaviours. These subdomains each contain their own frequency-specific scale that is reported accordingly. For example, youth answered the following in the Physical Activity subdomain:
Over a typical week, on how many days do you engage in moderate to vigorous physical activity for a total of at least 60 min?

EXAMPLE FREQUENCY OPTIONS

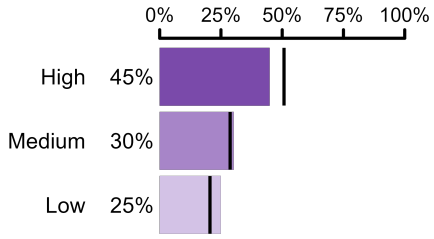
0 days
1 day
2 days
3 days
4 days
5 days
6 days
7 days

HOW TO INTERPRET THE RESULTS

Students' subdomain scores are categorized as 'High', 'Medium' or 'Low'.

SCORING

- ***High***: Scores ≥80% of the scale's max value (e.g. ≥12 out of 15)
- ***Medium***: ≥60% and <80% of max value (e.g. ≥9 to <12 out of 15)
- ***Low***: Scores <60% of max value (e.g. <9 out of 15)



e.g., self-esteem

Example interpretation:
45% of youth reported that they have high self-esteem. (Filled purple bars indicates school-specific results; black vertical line indicates average of reported districts). In the case that sample sizes are insufficient to report individual district results, a plot for the average of reported districts is displayed instead, in grayscale.

DEMOGRAPHICS

POPULATION			
Total Sample			422
GENDER IDENTITY			
Boy or man	52%	Nonbinary	2%
Girl or woman	45%	In another way	≤2%
SEXUAL ORIENTATION			
Straight or heterosexual	75%	LGBTQIA	25%
ETHNICITY			
Indigenous	11%	East Asian	7%
White	87%	Southeast Asian	3%
Black	2%	South Asian	≤2%
Latino	2%	West Asian	≤2%
Arab	≤2%	Other	3%
IMMIGRATION			
Born in Canada	83%	Born outside of Canada	17%
LANGUAGES			
English only			79%
English and other language(s)			6%
Other language(s) only			14%
PARENT/GUARDIAN EDUCATION			
Graduate or Professional Degree (e.g., Masters, PhD)			25%
University Degree (e.g., Bachelors)			31%
College Program (e.g., diploma, certificate, apprenticeship)			23%
High school or less			12%
I don't know			9%
FAMILY AFFLUENCE			
High			36%
Medium			47%
Low			17%

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DEMOGRAPHICS DESCRIPTIONS

Population:
Total number of students whose data are included in this report.

Gender Identity:
Youth selected which best describes their current gender identity. If youth do not identify as "boy or man" or "girl or woman," they may select "nonbinary" or "in another way" and then specify their gender identity.

Sexual Orientation:
Youth selected which best describes their sexual orientation and could select more than one category. LGBTQIA includes those who identified as gay or lesbian; bisexual, pansexual, or queer; asexual; questioning/unsure; and other.

Ethnicity:
Youth selected the ethnicity with which they self-identify. Youth of mixed descent can select more than one category. *Indigenous* includes those that identify as First Nations, Métis, or Inuit descent. *Arab* includes but is not exclusive to those that identify as Egyptian or Lebanese descent. *Black* includes but is not exclusive to those that identify as African, Afro-Caribbean, or African Canadian descent. *East Asian* includes but is not exclusive to those that identify as Chinese, Korean, Japanese, or Taiwanese descent. *Latino* includes but is not exclusive to those that identify as Latin American or Hispanic descent. *South Asian* includes but is not exclusive to those that identify as Indian, Pakistani, Punjabi, Bangladeshi, Sri Lankan, or Indo-Caribbean descent. *Southeast Asian* includes but is not exclusive to those that identify as Filipino, Vietnamese, Cambodian, Thai, or Indonesian descent. *West Asian* includes but is not exclusive to those that identify as Afghan, Iranian/Persian, or Turkish descent. *White* includes but is not exclusive to those that identify as European descent. *Other* represents those who identify with categories not listed above.

Immigration:
Youth indicated whether they were born in Canada or outside of Canada.

Languages:
Youth selected their first language(s) learnt at home from a variety of options. Responses were categorized into "English only," "English and other language(s)," and "Other language(s) only."

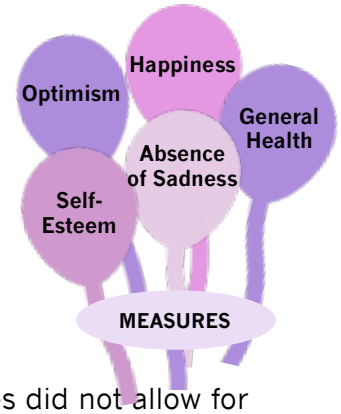
Parent/Guardian Education:
The highest level of education at least one parent has completed (e.g., if one parent has a master's degree and another parent has a bachelor's degree, parents are counted as part of the graduate level).

Family Affluence:
Family affluence was measured using a validated scale that contains youth-friendly indicators of socioeconomic status (e.g., owning a vehicle, number of family vacations per

year, etc.). Family affluence is categorized as low, medium, and high based on the sum score across all socioeconomic indicators.

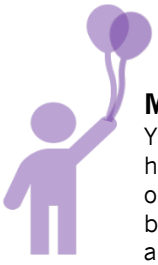
WELL-BEING INDEX

Adolescent well-being can be defined as "[having] the support, confidence, and resources to thrive in contexts of secure and healthy relationships, realizing their full potential and rights" (Ross et al., 2020). The YDI report includes a well-being index similar to the MDI to encourage trajectory mapping, but they are not directly comparable. Specific differences are listed in the Technical Notes section at the end of the report. Scores from these five measures are summed and categorized into three levels: High, Medium, and Low.



Please note that participants who had incomplete or invalid responses did not allow for their Well-Being Index to be computed and were therefore excluded. For example, while the total sample for all participating districts was 9,255 participants, 466 participants had incomplete or invalid responses which did not allow for their Well-Being Index to be computed.

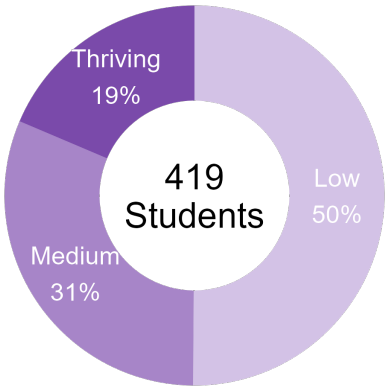
High Well-Being (Thriving)
Youth who indicated high scores in a minimum of four measures and have no low scores.



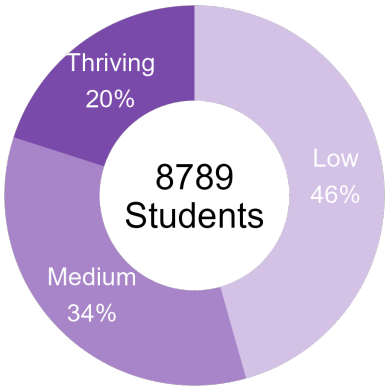
Medium Well-Being
Youth who indicated high scores in three or fewer measures, but still did not have any low scores.

Low Well-Being
Youth who indicated a low score in one or more measures.

Comox Valley



All Participating Districts



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ASSETS INDEX

In contrast to the individual-level nature of the well-being index, assets are more contextual. They are considered experiences or relationships that contribute to healthy trajectories (HELP, 2021). What makes assets especially important is that they can be modified through changes in youth's environments (HELP, 2021). As such, schools have been identified as a key player in cultivating and enhancing students' assets.

This Assets Index is reproduced from the MDI and uses virtually the same indicators; specific differences are listed in the Technical Notes section at the end of the report, along with details of how the assets index is defined. The Assets Index is comprised of peer relationships, adult relationships, nutrition and sleep, and after-school activities. Subdomains within each asset are listed below.

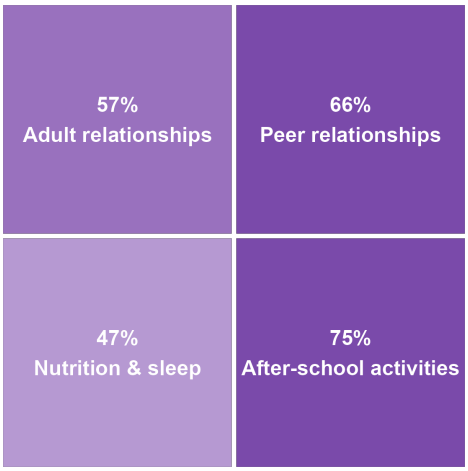
Peer Relationships
Peer Belonging
Friendship Intimacy

Adult Relationships
Supportive Adults at Home, at School and in the Community

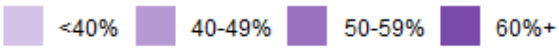
Nutrition & Sleep
Sleep
Eating Breakfast
Eating with Adults

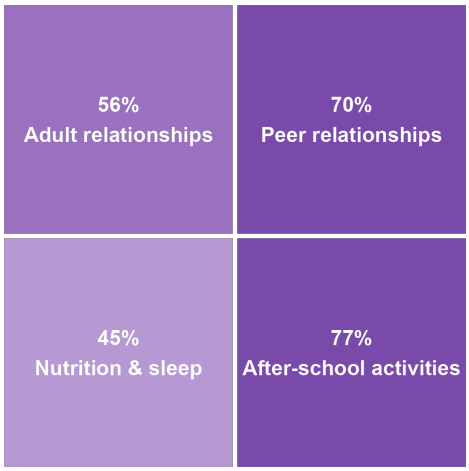
After-school activities
Extracurricular activities

Comox Valley



All Participating Districts





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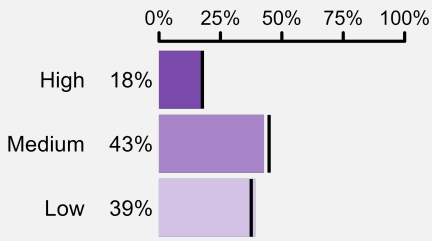
SOCIAL AND EMOTIONAL DEVELOPMENT

Social and emotional development encompasses the knowledge, attitudes, and skills involved in emotional management, positive goal setting, healthy relationship development, responsible decision-making, and effective problem-solving. These competencies are necessary for successfully navigating the social and emotional challenges that accompany the period of youth and emerging adulthood.

EMOTIONAL REGULATION

Youth's level of agreement with statements about how they regulate and express their emotions.

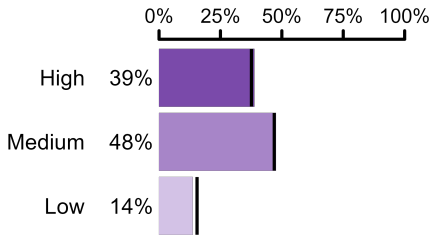
e.g., "When I want to feel more positive emotion, I change the way I'm thinking about the situation"



SOCIABILITY

Youth's level of agreement with statements about their social awareness, assertiveness, and emotional interactions with others.

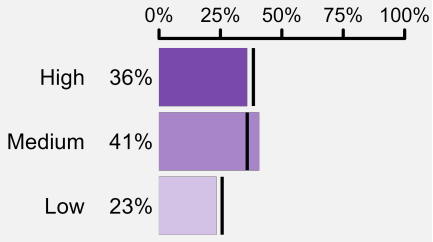
e.g., "I'm good at getting along with my classmates"



EMPATHY

Youth's level of agreement with statements about their ability to recognize and understand someone else's emotions and experiences.

e.g., "After being with a friend who is sad about something, I usually feel sad"



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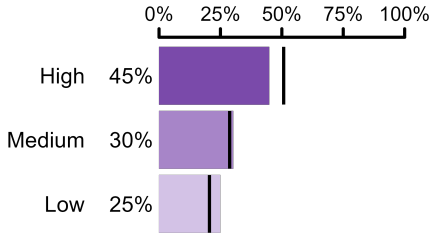
GENERAL SELF-CONCEPT*

Youth's level of agreement with statements about how they see and value themselves.

e.g., "A lot of things about me are good"

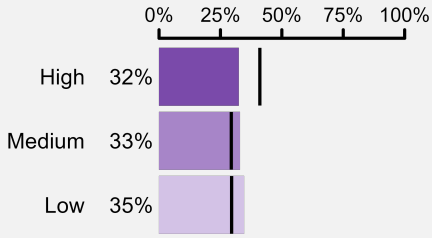
*called Self-Esteem on MDI



PURPOSE AND MEANING

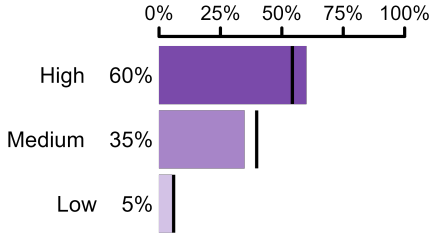
Youth's level of agreement with statements about having a meaningful life.

e.g., "My life has a clear sense of purpose"



GROWTH MINDSET

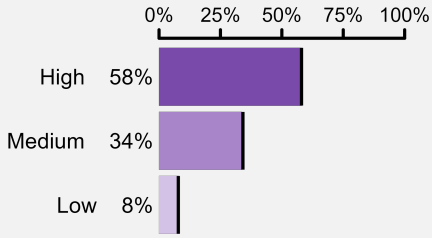
Youth's level of agreement with the statement "Your intelligence is something about you that you can't change very much"



PERSEVERANCE*

Youth's rating of their sense of self-discipline and work ethic.

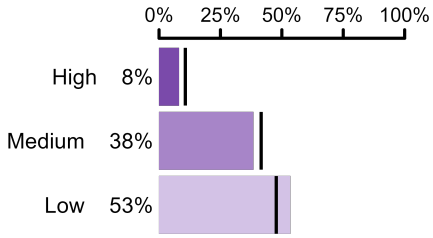
e.g., "I finish whatever I begin"



EXECUTIVE FUNCTIONING

Youth's level of agreement with statements about task-oriented skills such as planning, problem-solving, and self-monitoring.

e.g., It is easy for me to come up with a different solution if I get stuck when solving a problem"



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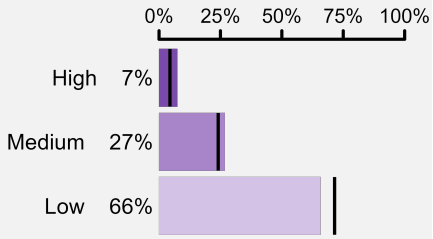
EXTERNALIZING BEHAVIOUR

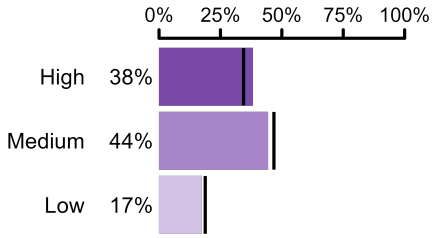
Youth's level of agreement with statements about exhibiting externalizing behaviour such as lack of rule-following and physical aggression.

e.g., "I break rules whenever I feel like it"



ENGAGEMENT

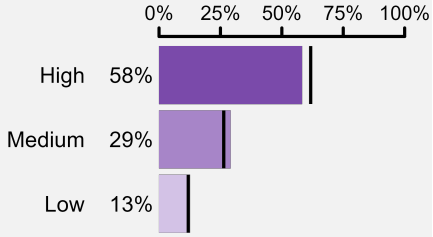
Youth's level of agreement with the statement "In most activities I do, I feel energized"



GRATITUDE

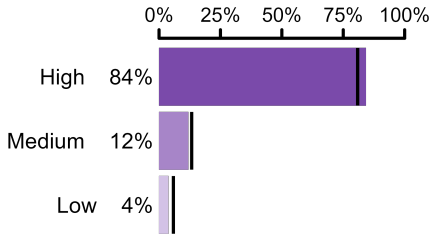
Youth's level of agreement with statements about feeling grateful about things in their lives.

e.g., "I feel thankful for everyday things"



CURIOSITY

Youth's level of agreement with the statement "I am curious, I want to know how things work"



RESEARCH HIGHLIGHTS

Social competence, including interpersonal skills and executive functioning, in early childhood is a significant predictor of positive outcomes in adult functioning. (Jones et al., 2015)

Empathy is positively associated with psychological well-being by being associated with perspective and bolstering positive self-identity. (Vinayak & Judge, 2018)

Social-emotional development is not separate from academic achievement; they are interrelated and necessary for children's development and success beyond the school context. (Aviles et al. 2006)

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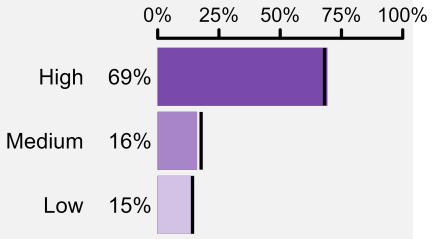
SOCIAL WELL-BEING

Social well-being assesses the quality of relationships with peers, family, and community members. Positive and healthy social relationships play an important role in promoting physical, mental, and emotional health during and beyond youth.

FRIENDSHIP INTIMACY*

Youth's level of agreement with statements about the closeness of their friendships.

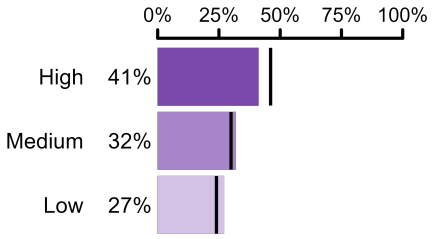
e.g., "I have at least one really good friend I can talk to when something is bothering me



PEER BELONGING*

Youth's level of agreement with statements about their sense of belonging to a social group.

e.g., "I feel part of a group of friends that do things together"

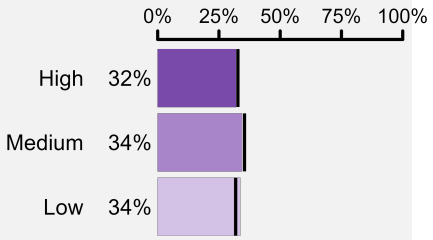


SUPPORTIVE ADULTS IN THE COMMUNITY*

Youth's level of agreement with statements about how supported they feel by the adults in their community.

e.g., "In my neighbourhood/community, there is an adult who really cares about me"

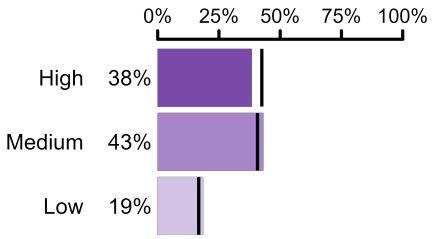
*called Supportive Adults in the Neighbourhood on the MDI



COMMUNITY BELONGING

Youth's rating of their sense of belonging to their community, including geographic community, cultural community, etc.

e.g., "How would you describe your sense of belonging to your local community?"



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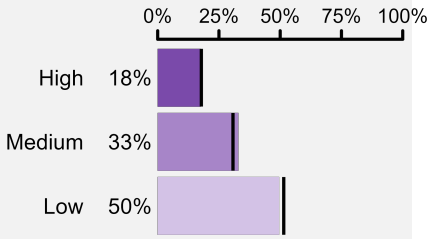
LONELINESS

Youth's level of agreement with statements about experiencing feelings of exclusion and social isolation.

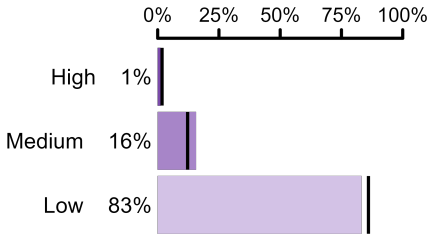
e.g., "I often feel left out"



DISCRIMINATION

How frequently youth reported experiencing discrimination.

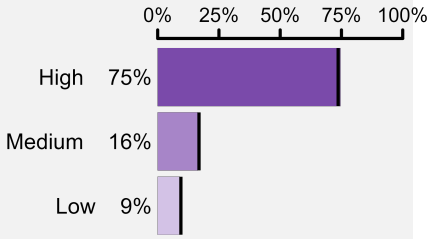
e.g., "In your day-to-day life, how often are you are treated with less courtesy or respect than other people?"



SUPPORTIVE ADULTS AT HOME*

Youth's level of agreement with statements about how supported they feel by the adults at home.

e.g., "In my home, there is a parent or another adult who really cares about me"



RESEARCH HIGHLIGHTS

Social relationships are important for children's health and life satisfaction. Positive relationships with adults at home, school, and in communities are associated with children's perceived health. (Gadermann et al, 2016)

Neighbourhood cohesion in adolescence can be protective for youth, especially for those who have experienced adversity. (Kingsbury et al., 2020)

Parenting practices have implications for academic achievement, psychosocial development, emotional stability, and successful transitions into adulthood. (Madden et al. 2015)

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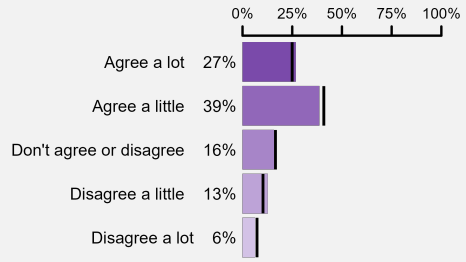
LEARNING ENVIRONMENT AND ENGAGEMENT

The learning environment and engagement dimension seeks to understand youth's experiences at school, including their feelings and experiences regarding their academic work, the school environment, and the broader school community.

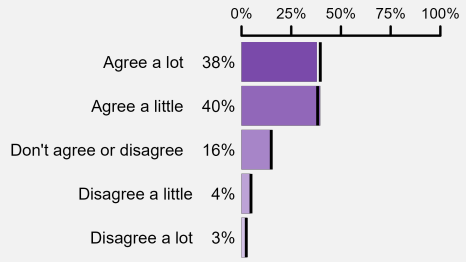
OPPORTUNITIES FOR SKILL DEVELOPMENT

Youth's level of agreement with the statement "I have opportunities to develop skills that will be useful later in life (like job skills and skills to care for others)...

...in school"

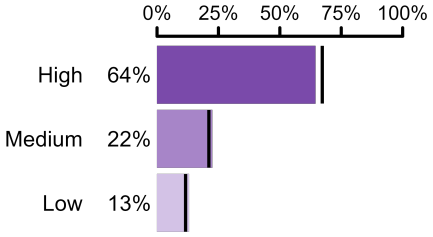


...outside of school"



SCHOOL SAFETY

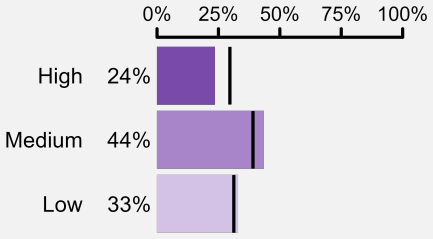
Youth's level of agreement with the statement "I feel safe at my school"



SCHOOL BELONGING*

Youth's level of agreement with statements about their sense of belonging at school.

e.g., "I feel like I belong in this school"



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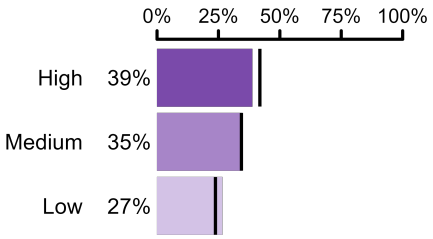
SUPPORTIVE ADULTS AT SCHOOL*

Youth's level of agreement with statements about how supported they feel by the adults at their school.

e.g., "At my school, there is an adult who really cares about me"

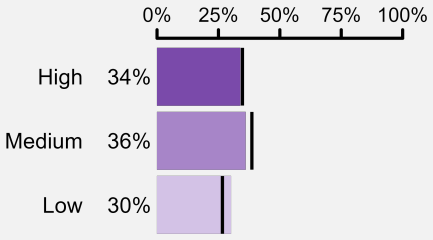


SCHOOL ENVIRONMENT*

Youth's level of agreement with statements about the social atmosphere of the school, including the relationships and interactions between and amongst students and staff.

e.g., "Teachers and students treat each other with respect in this school"

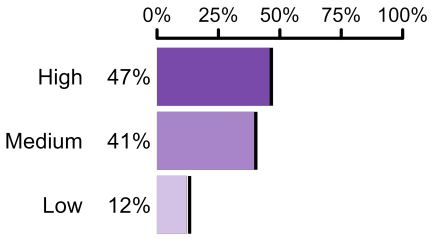
*called School Climate on the MDI



PERCEPTIONS ABOUT MENTAL HEALTH IN SCHOOLS

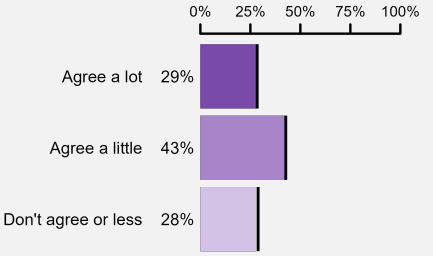
Youth's level of agreement with statements about their school's supportive climate surrounding mental health.

e.g., "People at my school talk openly about mental health"



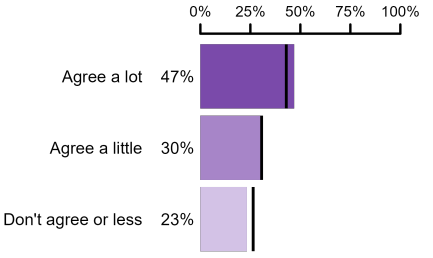
MENTAL HEALTH LITERACY

Youth's level of agreement with the statement "I would know how to help a friend who is constantly feeling worried, nervous, or down all the time."



MENTAL HEALTH ATTITUDES

Youth's level of agreement with the statement "I would be happy to develop a close friendship with someone who has a mental health issue."



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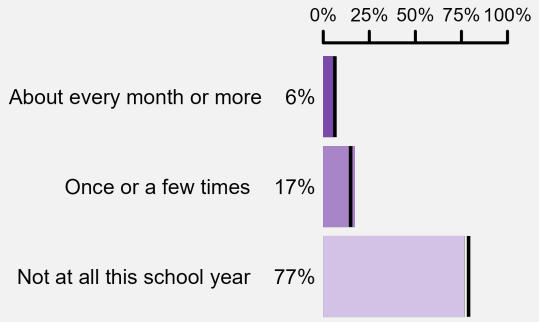
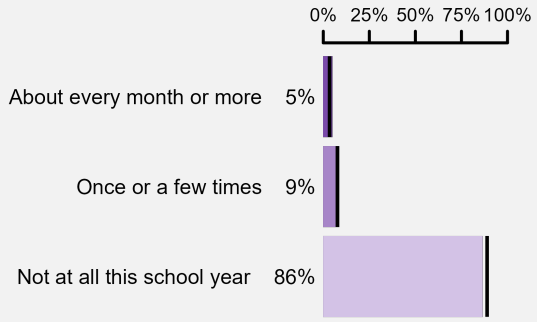
BULLYING*

How frequently youth reported experiencing bullying or harassment during the school year, including physical, social, verbal, and/or cyberbullying.

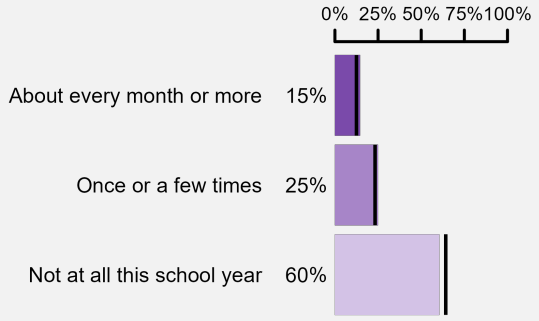
Cyberbullying (e.g., online messaging)



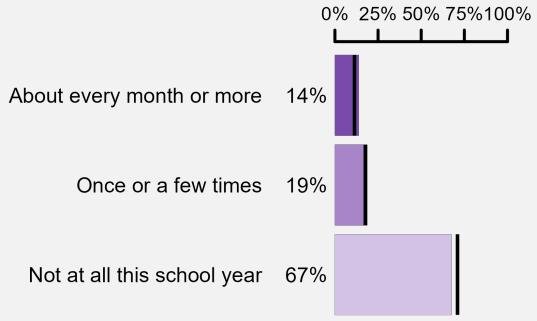
Physical Bullying (e.g., hit or kicked)



Social Bullying (e.g., exclusion, gossip)



Verbal Bullying (e.g., threatened, teased)



RESEARCH HIGHLIGHTS

School connectedness has been shown to be important for promoting academic achievement and averting negative behaviours. (CDC, 2009)

Social investments in student-teacher relationships may be beneficial for student academic motivation. (Scales et al, 2020)

A school climate characterized by supportive adults and anti-bullying attitudes can help prevent bullying. (Wang, Berry, & Swearer, 2013)

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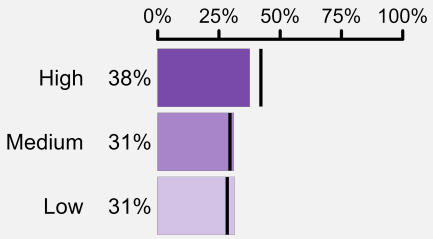
PHYSICAL AND MENTAL WELL-BEING

Physical and mental well-being provides a description of habits, behaviours, and exposures that shape both physical and mental well-being. It also asks about youth's experiences accessing and utilizing different healthcare services. This dimension of the YDI helps identify risk factors that may be important for averting poor health trajectories in emerging adulthood.

GENERAL HEALTH*

Youth's rating of their overall health.

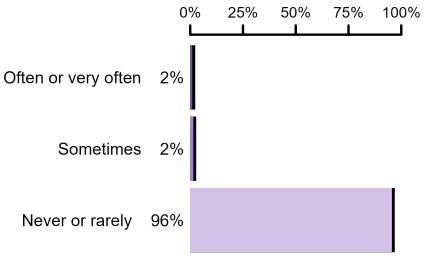
e.g., "In general, how would you describe your health?"



FOOD INSECURITY

How frequently youth reported experiencing food insecurity in the past 12 months.

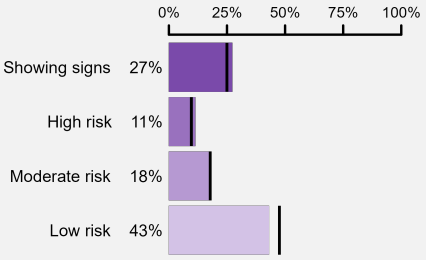
"In the past 12 months, did you [and other household members] worry that food would run out before your family got money to buy more?"



DISORDERED EATING BEHAVIOURS

Youth's level of risk of developing an eating disorder based on the *InsideOut Institute Screener* (2018). "Showing signs" indicates sub-threshold or threshold eating disorder.

e.g., "Do you feel like food, weight, or your body shape dominates your life? For example, experiencing constant thoughts about food, weight or your body"



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SLEEP*

Number of nights per week youth reported having a good night's sleep.

e.g., "How often do you get a good night's sleep?"

20%
5-7 nights

22%
average of reported districts

51%
3-4 nights

48%
average of reported districts

29%
0-2 nights

30%
average of reported districts

PHYSICAL ACTIVITY

Number of days per week youth reported engaging in moderate to vigorous physical activity for at least an hour.

31%
5-7 days

30%
average of reported districts

35%
3-4 days

28%
average of reported districts

34%
0-2 days

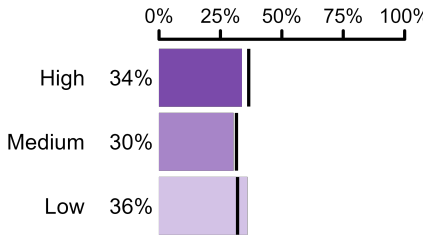
42%
average of reported districts

LIFE SATISFACTION*

Youth's level of agreement with statements about how content they are with their lives.

e.g., "I am happy with my life"

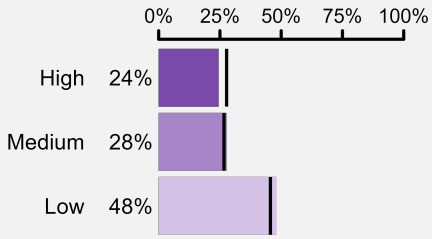
*called Satisfaction with Life (Happiness) on the MDI



GENERAL MENTAL HEALTH

Youth's rating of their overall mental health.

e.g., "In general, would you say your mental health is...?"



DEPRESSION

Depression was examined using a modified version of the Patient Health Questionnaire (PHQ-8). Please note that the PHQ-8 is used as a screening tool and is not designed to provide a diagnosis of depression. Youth with a sum score of ten or above are considered to have screened positive for depression.

e.g., "Over the last two weeks, how often have you been bothered by feeling down, depressed or hopeless?"

42%
screened positive
for depression
(scored ten or above)

40%
average of reported districts

GENERALIZED ANXIETY

Generalized anxiety was examined using the Generalized Anxiety Disorder 2-item scale (GAD-2). Please note that the GAD-2 is used as a screening tool and is not designed to provide a diagnosis of generalized anxiety. Youth with a sum score of three or above on the GAD-2 are generally considered to have screened positive for generalized anxiety.

e.g., "Over the last two weeks, how often have you been bothered by feeling nervous, anxious, or on edge?"

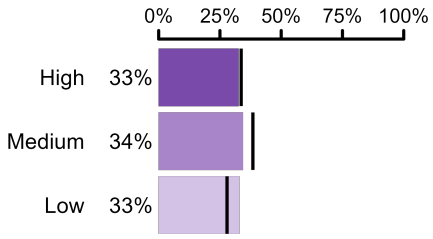
46%
screened positive on the
GAD-2 for generalized
anxiety
(scored three or above)

41%
average of reported districts

BEHAVIOURAL SELF-CONTROL

Youth's rating of their ability to handle unexpected and difficult problems.

e.g., "In general, how would you rate your ability to handle unexpected and difficult problems such as a family or personal crisis?"



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MENTAL HEALTHCARE ACCESS

The percentage of youth who reported feeling the need for professional help for mental health concerns but did not seek help in the past six months.

44%
reported an unmet mental healthcare need

38%
average of reported districts

MENTAL HEALTHCARE NAVIGATION

The percentage of youth who agreed that they would prefer to get help for a mental health, emotional, or substance use problem from each of the sources below.

67%
prefer to get help in person

65%
average of reported districts

20%
prefer to get help over the phone/helpline

22%
average of reported districts

21%
prefer to get help on the Internet

23%
average of reported districts

24%
prefer to get to talk over videocall

25%
average of reported districts

34%
probably wouldn't seek professional help

34%
average of reported districts

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COPING

The percentage of youth who reported engaging in the activities below to help them manage any distressing events, such as the COVID-19 pandemic.

84%
connect with family, friends, or romantic partners, or pets

82%
average for reporting districts

23%
seek external support in school or outside of school (e.g., teachers, counsellors, Elders, mental health websites/apps)

20%
average for reporting districts

71%
exercise or spend time outdoors

67%
average for reporting districts

78%
use technology or social media playing video games

78%
average for reporting districts

56%
turn to extracurricular activities, or spiritual or religious practice

58%
average for reporting districts

39%
use another coping mechanism (e.g., eating more than usual, using substances)

29%
average for reporting districts

RESEARCH HIGHLIGHTS

Longer sleep time has been linked to healthier emotional regulation, higher academic performance, and greater quality of life.
(Chaput et al, 2016)

Schools are an opportunistic environment for integrating physical activity (e.g. physical education, extracurricular activities, etc.).
(Beauchamp, Puterman, & Lubans, 2018)

Unmet mental health needs can place youth at greater risk for social and economic implications later in life.
(Malla et al, 2018)

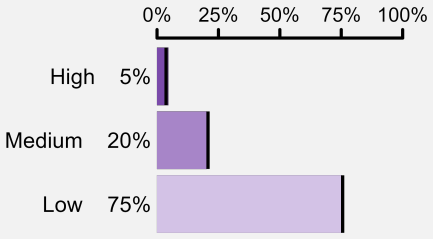
NAVIGATING THE WORLD

Navigating the world captures a variety of subdomains that ask youth to think about how they envision their future and encourages them to reflect on their local and global environment. As youth are preparing to enter early adulthood, understanding their long-term goals, values, concerns and how they fit in their larger setting is important.

GENDER INEQUALITY

Youth's level of agreement with statements about gender inequality.

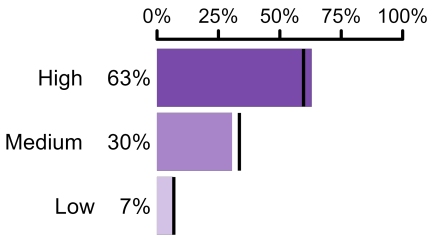
e.g., "On the whole, men make better political leaders than women do"



VIEWS ON MULTICULTURALISM

Youth's level of agreement with statements about the importance of cultural and ethnic diversity in Canada and within society.

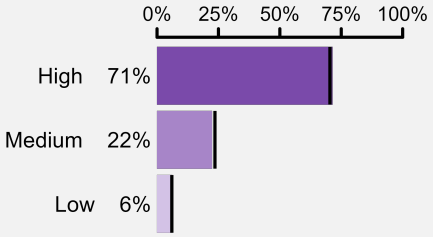
e.g., "We should recognize that cultural and racial diversity is a fundamental characteristic of Canadian society"



CLIMATE CONCERN

Youth's level of agreement with statements about the severity of climate change.

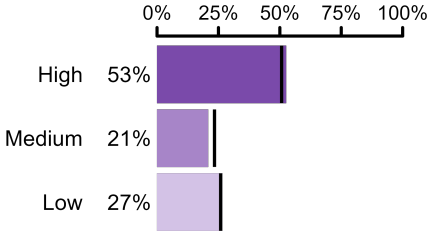
e.g., "Regarding climate change, I feel that the threat should be taken more seriously"



STRESS OF FUTURE UNCERTAINITY

Youth's rating of how stressed they feel about decisions regarding their future.

e.g., "e.g., "Please rate whether the following has been a source of stress for you: Having to make decisions about future work or education"



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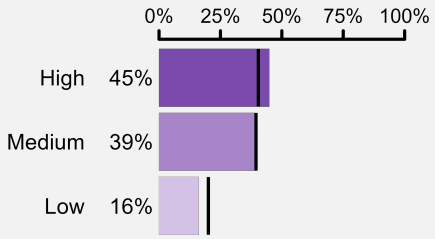
CIVIC ENGAGEMENT

Youth's level of agreement with statements about their engagement with politics, current events, philanthropy, and community-led problem-solving.

e.g., "How much would you agree that you have strong feelings about politics?"



RESEARCH HIGHLIGHTS

Being involved in the community improves society as a whole and improves the well-being of the helper.
(Thoits & Hewitt, 2001)

Emotional and sociocogntiive competencies (e.g., empathy, prosociality, and future orientation) are bi-directionally linked to both organized and informal forms of civic engagement.
(Metzger et al., 2018)

High academic aspirations among youth have been linked to less mental health concerns among youth. Conversely, low aspirations predict the onset of mental health problems.
(Almroth et al., 2018)

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CROSS-CUTTING DOMAINS

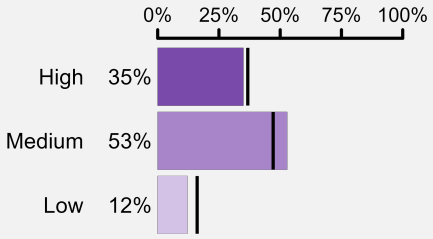
In addition to its five dimensions, the YDI measures other strengths-based indicators of positive youth development that transcend the dimensions. Known as cross-cutting domains, these indicators are broadly shaped by a combination of emotional, social, physical, mental competencies and experiences that act as both promoters towards positive trajectories and buffers against adverse youth outcomes.

POSITIVE CHILDHOOD EXPERIENCES (PCEs)

PCEs lead to increased resilience to adversity. They include:

- the ability to discuss feelings with family;
- having family support during difficult times;
- participating in community traditions;
- having a sense of belonging in school;
- feeling supported by friends;
- having two invested non-parental adults and;
- feeling safe at home.[1]

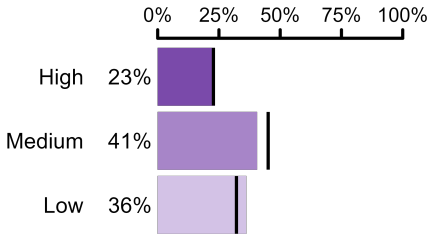
Results are based on the number of reported PCEs: High (7), Medium (3-6), and Low (0-2).



POSITIVE MENTAL HEALTH

Positive mental health was assessed using the Warwick-Edinburgh Mental Well-being Scale (WEMWBS).[2] The WEMWBS is a seven-item scale that asks how frequently youth have experienced clear and healthy thought patterns, positive self-perception, effective problem-solving abilities, autonomous decision-making, etc. in the last two weeks.

Results are based on the sum scores across the seven items in the scale. The maximum score is 35. High (28+), Medium (21-27), and Low (0-20).



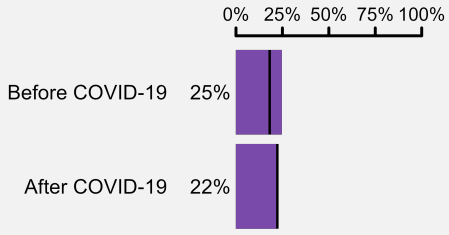
[1] Bethell et al., 2019
[2] Tennant et al., 2007

IMPACTS OF COVID-19

In light of the COVID-19 pandemic, the YDI included an extra section asking youth about the impact of the pandemic and associated public health measures on their physical and mental health, their relationships, and their quality of life. Giving youth the opportunity to identify areas where they are struggling during the pandemic enables us to take steps towards implementing the appropriate supports and resources. This section draws on questions from the BC Children's Personal Impacts of COVID-19 survey, co-led by Dr. Evelyn Stewart and Dr. Hasina Samji. For more information about the Person Impacts of COVID-19 survey, visit https://www.bcchr.ca/POP/our-research/pics.

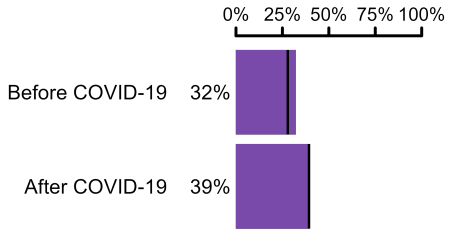
PHYSICAL HEALTH

The percentage of youth rating their physical health as 'poor' or 'fair' before COVID-19 compared to during COVID-19.



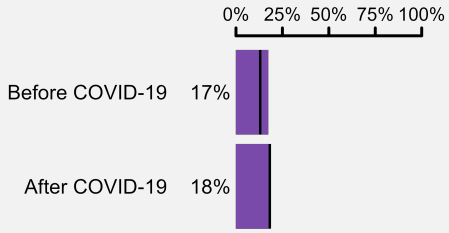
MENTAL/EMOTIONAL HEALTH

The percentage of youth rating their mental/emotional health as 'poor' or 'fair' before COVID-19 compared to during COVID-19.



QUALITY OF LIFE

The percentage of youth rating their quality of life as 'poor' or 'fair' before COVID-19 compared to during COVID-19.



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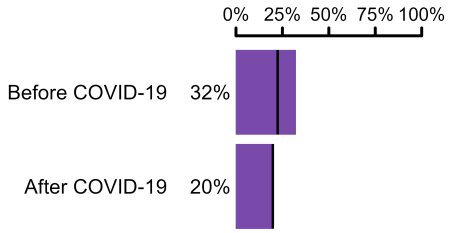
RELATIONSHIPS

The percentage of youth rating their relationships as ‘poor’ or ‘fair’ before COVID-19 compared to during COVID-19.



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TECHNICAL NOTES

WELL-BEING INDEX

The YDI uses related but distinct well-being indicators compared to the MDI well-being index. Specific differences are as follows: optimism is measured on the MDI via items from the Resiliency Inventory Subscale (Noam and Goldstein, 1998) whereas it is measured on the YDI via the Warwick Edinburgh Mental Well-being Scale (Tennant et al., 2007); absence of sadness is measured on the MDI via items from the Seattle Personality Questionnaire (Kusche et al., 2008) whereas it is measured on the YDI via the eight-item Patient Health Questionnaire Depression Scale or PHQ-8 (Kroenke et al., 2009); and the happiness/life satisfaction indicator uses only three of the five items used on the MDI. These differences mean that the MDI and YDI well-being indices are not directly comparable.

ASSETS INDEX

The YDI assets index has certain differences to the MDI assets index, but the two indices are largely comparable. Specifically, within the nutrition and sleep asset, the 'Sleep' subdomain includes a question which varies from the MDI – while the MDI asks how often respondents get a good night's sleep, the YDI asks how many hours of sleep youth get on average per night. Within the same asset, the 'Eating with Adults,' subdomain asks how often youth's parents or other adult family members eat meals *or snacks* with them, rather than meals alone as it appears on the MDI. In the after-school activities asset, the 'Extracurricular Activities' subdomain varies from the MDI to contextualize the question to youth. For example, the MDI specifies these activities as after-school activities respondents participate in between about 3-6PM while the YDI specifies these as extra-curricular activities youth participate in anytime outside of school hours. As well, response options were changed from the MDI to target a youth audience.

With regards to how assets are defined in the index, peer and adult relationships assets were considered as 'present' if the relevant subdomains had a 'medium' or 'high' score. The nutrition and sleep asset was considered as 'present' if the relevant subdomains had a score of three or more times a week. The after-school activities asset was considered as 'present' if students participated in at least one extra-curricular activity per week.

SUBDOMAINS

Since the 2020/2021 YDI survey, changes have been made to the 2021/2022 YDI survey as a result of continued validation of the survey including psychometrics analysis, feedback received from stakeholders and respondents, and an effort to reduce the survey length. Thus, changes have been made to the 2021/2022 YDI school district reports since

the previous year's reports. These changes include revisions in how certain indicators are measured (i.e. scale changes), the removal of certain items within subdomains, and the inclusion of new subdomains based on feedback received from schools and districts as to which types of data are most valuable to them.

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