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Whistler for Youth
Community Assessment Report

November 2003

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Executive Summary

The current report summarizes the results of the Risk and Protective Factor assessment done by Whistler for Youth as part of Whistler, B.C.'s *Communities That Care*® community mobilization process. *Communities That Care*® is a process designed to facilitate the mobilization of community members to work together to prevent 5 main youth problem behaviours: substance abuse, delinquency, teen pregnancy, school dropout and violence. This *Communities That Care*® system was developed by Dr. David Hawkins and Dr. Richard Catalano, and is based on their research, which has identified the 20 risk and protective factors that both predict and mitigate youth problem behaviours.

A key goal of the *Communities That Care*® process is to identify which specific risk factors, protective factors, and youth problem behaviours are prevalent in our community, and to implement evidence-based programs to address these unique concerns. In order to accomplish this goal, the Risk and Protective Factor Assessment workgroup collected and analyzed data on students that attend both Myrtle Philip Elementary School and Whistler Community Secondary School in conjunction with relevant archival data. Then, with input from the Community Board at the November 22nd workshop, 5 priority risk factors were identified as well as strengths to build on that exist in the community at the present time.

The assessment was completed using the *Communities That Care*® Youth Survey and relevant archival data. The *Communities That Care*® Youth Survey is a tool to both identify risk and protective factors, and to measure the actual prevalence of drug use, violence and other antisocial behaviours. The *Communities That Care*® Youth Survey was administered to Grade 6, 7, 8, 9, 10, 11 and Grade 12 students in May and June of 2003. Of the 432 students in those grades, 355 students participated.

Based on the analysis of the data, and with input from the Community Board as to which risk factors they considered important, the following risk factors were identified as priorities for future community attention:

- *Community Laws and Norms Favorable toward Drug Use and Crime* (Community Domain)
- *Favorable Parental Attitudes and Involvement in Problem Behaviour* (Family Domain)
- *Lack of Commitment to School* (School Domain)
- *Favorable Attitudes Towards the Problem Behaviour* (Peer - Individual Domain)
- *Extreme Economic Deprivation: 18-26 population ONLY* (Community Domain)

These risk factors were selected as priorities for prevention action because both the survey and Canadian archival data indicated that the risk factor levels were elevated in the Whistler region.

Positively, students reported high scores on several of the protective factor scales, which should be considered strengths to build on in the future. Specifically, students reported high scores on the protective factors of *Family Opportunities for Pro-social Involvement*, *Family Rewards for Pro-social Involvement*, and *Belief in the Moral Order*. Conversely, students

reported lower scores on the protective factor scales of *School Opportunities for Pro-social Involvement*, *School Rewards for Pro-social Involvement*, and *Social Skills*.

Introduction

Mission Statement

“To promote positive development for Whistler’s children and young adults.”

Vision Statement

“A safe community where residents and guests of all ages are comfortable and secure.”

Whistler for Youth – The *Communities That Care*® Approach:

Communities That Care® is not a program but a process. It is a community action model promoting positive youth development and preventing problem behaviors that uses a prevention framework, which is research based. The *Communities That Care*® process is:

Inclusive: A comprehensive community-wide, youth development planning process, bringing together a wide range of people, programs and initiatives to address youth issues in a comprehensive, collaborative way.

Customized to our community: It is not a “cookie cutter approach.” It starts by understanding existing collaborative teams and planning efforts, community structures, data profiles and programs and activities that address youth issues. It helps communities get to the tested effective programs, policies they need based on assessment of their risk, protection and resources.

Research Based: *Communities That Care*® is heavily researched and evidence based with more than 10 years experience helping communities use the system.

Prevention Based: *Communities That Care*® targets the predictors of the problem, by identifying risk and protective factors.

Key accomplishments:

I. An organizational structure has been established, including:

- Whistler Community Services Society has made a commitment to support the project as the host agency.
- Whistler Mayor, Hugh O’ Reilly has been identified as the Key Leader Champion.
- A Community Board has been developed and Key Leaders appointed
- A diverse and representational Steering Committee of key people has been established to activate the *Communities That Care*® process.
- A community profile of risk and protective factors has been completed outlining our community’s strengths to build on and opportunities for improvement.

II. A 2-day Community Board Orientation Workshop was held. A technical expert in the *Communities that Care*® Process facilitated this workshop. 41 people were in attendance. Dr. Colin Mangham, a Canadian prevention specialist was invited to speak

with the project regarding Canadian evidence based approaches. A one-day Community Assessment Training has been completed with 32 people in attendance. **Five risk factors have been prioritized for further attention as follows:**

- *Community Laws and Norms Favorable toward Drug Use, Firearms and Crime* (Community Domain)
- *Favorable Parental Attitudes an Involvement in the Problem Behavior* (Family Domain)
- *Favorable Attitudes toward the Problem Behavior* (Peer-Individual Domain)
- *Lack of Commitment to School* (School Domain)
- *Extreme Economic Deprivation* (18-26 year old age group) (Community Domain)

III. A vision statement was developed.

IV. Steps have been taken to educate and involve the community and community stakeholders have been identified.

V. A **part-time Coordinator** and **part-time Project Manager** have been hired.

VI. A **Resource Assessment and Strengths** work group has been created to identify evidence-based programs available in the community to address identified risk factors.

VII. The **Communities that Care® Youth Survey** was administered to students of **Whistler in Grades 6 - 12**. The survey report provided:

- A measurement of young people’s rate of use and attitudes about alcohol, tobacco and other drugs.
- An accurate measure of community’s risk and protective factors.
- A framework for building stronger, safer, healthier communities.

L. Funding obtained to date:

▪ Putting Children First Initiative	\$11,750.00
▪ Grant in aid for Coordinator Support	22,910.00
▪ Whistler Community Services Society	1,500.00
▪ Putting Children First Initiative	3,961.00.

The Community Assessment:

The risk and protective factor model developed by Dr. Hawkins and Dr. Catalano includes twenty risk factors that predict problem behaviours in youth, and ten protective factors that help mitigate the effects of those risk factors. By addressing these risk and protective factors, communities can help prevent related youth problem behaviours, as well as strengthen the effect of protective factors in the community.

This Community Assessment report represents the first step in that important process. The Risk and Protective Factor Assessment workgroup has collected Canadian archival data on the risk factors, protective factors and problem behaviours in Whistler, B.C. With input from the

Community Board, the workgroup has identified our community's strengths and the priority risk factors to address in the future.

Data collection methods:

As noted above, the *Communities that Care® Youth Survey* was administered in May and June of 2003. Of the 432 students in grades 6 to 12 asked to complete the survey, 355 students participated. This survey data was then used to determine a risk and protective factor profile for Whistler, B.C., as well as measure the actual prevalence of substance abuse, violence and other antisocial behaviour within the community.

In addition to the survey data, Canadian archival data was collected and used to both strengthen and corroborate the results of the survey. This archival data was also used as viable measures for the risk and protective factors not covered by the survey, namely Extreme Economic Deprivation, and the problem behaviours of teen pregnancy and school drop-out. Canadian archival data was collected from Statistics Canada, Statistics B.C., the Ministry of Education, the R.C.M.P., and the Resort Municipality of Whistler. The two risk factors of *Media Portrayals of Violence* and *Early and Persistent Antisocial Behaviour* cannot be measured by either the *Communities that Care® Youth Survey* or archival data and therefore will not be considered at the current time.

How the 5 priority risk factors were identified:

The risk factor prioritization process was undertaken at the November 22nd, 2003 workshop, attended by members of the Community Board at MY Millennium Place. The results of the *Communities that Care® Youth Survey* identified 4 risk factors that had elevated scores:

- *Laws and Norms Favorable to Drug Use and Handguns* (Community Domain)
- *Parental Attitudes Favorable toward ATOD Use* (Family Domain)
- *Personal Transitions and Mobility* (Peer – Individual Domain)
- *Favorable Attitudes toward Antisocial Behaviour* (Peer – Individual Domain)

With input from the Community Board, and the Risk and Protective Factor Assessment workgroup's archival data summary, several other risk factors were added to the shortlist. I.e. example, the remaining Family Domain risk factors of *Family History of Problem Behaviour*, *Family Management Problems* and *Family Conflict*, as well as *Lack of Commitment to School*, *Extreme Economic Deprivation* (restricted to the 18-36 year old population), and *Friends Who Engage in the Problem Behaviour*.

After the shortlist of risk factors was identified, each participant present at the workshop was given the opportunity to vote and choose 3 risk factors they would consider priorities. The results of the vote were counted and the **following 5 risk factors were identified as priorities for prevention action:**

- *Community Laws and Norms Favorable toward Drug Use and Crime*¹ (Community Domain)
- *Favorable Parental Attitudes and Involvement in Problem Behaviour* (Family Domain)
- *Lack of Commitment to School* (School Domain)

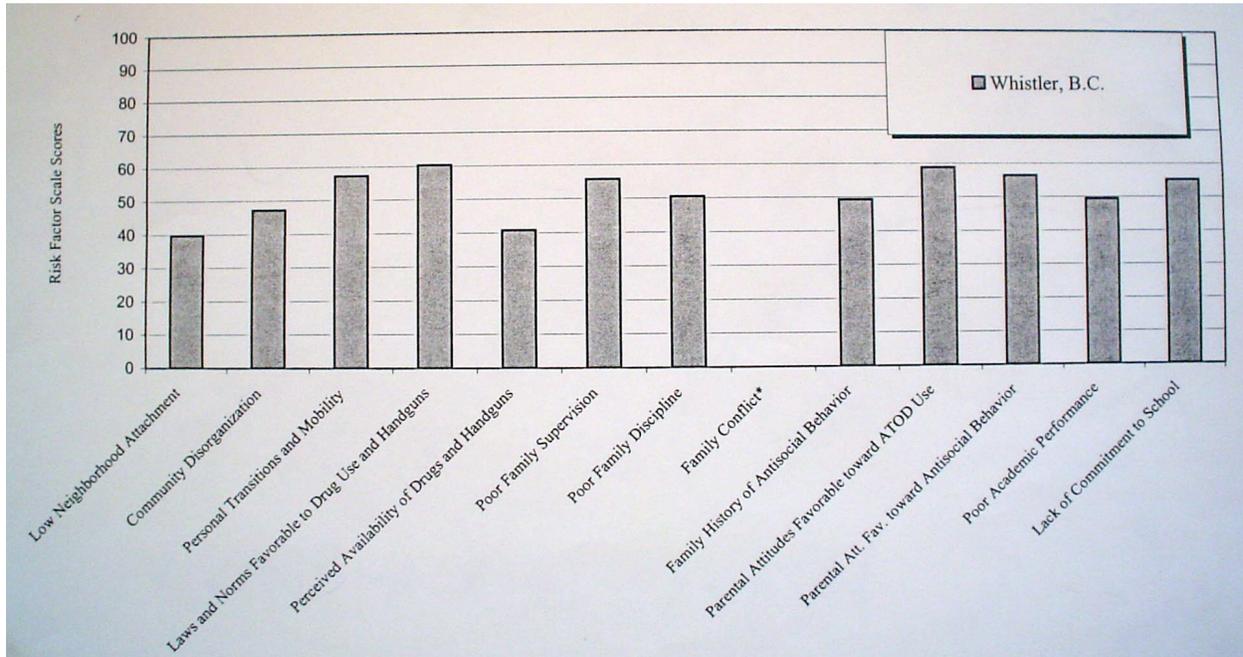
¹ This risk factor and its title have been modified to exclude *Community Laws and Norms Favorable to Firearms*. This has been done because the use of firearms was not identified as a major concern in the Whistler community.

- *Favorable Attitudes Towards the Problem Behaviour* (Peer - Individual Domain)
- *Extreme Economic Deprivation: 18-26 population ONLY* (Community Domain)

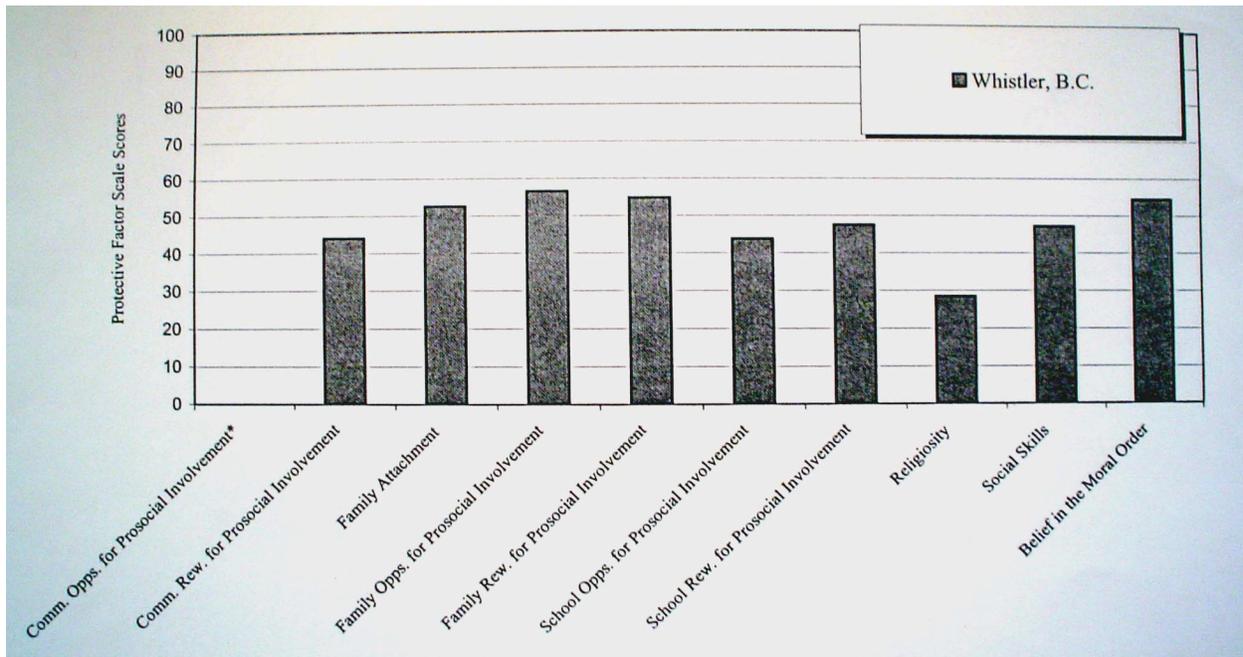
Report Overview:

The following report provides detailed information and analysis of the risk and protective factors and problem behaviours in Whistler, B.C. Data from the *Communities that Care® Youth Survey* was utilized to assess and prioritize areas of concern in the local community and to identify the risk factors related to these youth problem behaviours. The following sections provide an overview of the risk and protective factor profile developed for the Whistler region, a more detailed look at each prioritized risk factor, and ends with recommendations for future action.

Graph 1: Community, Family and School Domain Risk Factor Scale Scores for Surveyed Students from Whistler, B.C.



Graph 2: Protective Factor Scale Scores for Surveyed Students from Whistler, B.C.



Risk and Protective Factor Profile for Whistler, B.C.

Risk Factors²

Definition of risk factor: A condition in the environment or within individuals that increases the likelihood that youth will engage in one or more of the 5 youth problem behaviours.

The five youth problem behaviours are:

- Substance Abuse
- Delinquency
- Teen Pregnancy
- School Drop-out
- Violence

The Whistler *Communities that Care*[®] *Youth Survey* identified the following 5 risk factors as priorities for prevention action in the future.

1. Risk factor: Community Laws and Norms Favorable to Drug Use and Crime³

The *Communities That Care*[®] *Youth Survey* revealed that the score for this risk factor was elevated in the Whistler region. Students reported a particularly high score on the Laws and Norms Favorable to Drug Use and Crime scale in comparison with the *Communities That Care*[®] *Youth Survey* normative population. With a score of 60, Community Laws and Norms Favorable to Drug Use and Crime has been identified as a significant risk factor for the local community.

This finding is supported by Canadian archival data from the *Adolescent Health Survey* conducted by the McCreary Society. For example, this survey found that:

- 26% of youth in the Coast Garibaldi region reported they had rode with a driver who had been drinking. This was higher than the provincial average of 23%.
- Only 55% of youth use seatbelts.

High scores on the Community Laws and Norms Favorable toward Drug Use and Crime are related to increased levels of 3 of the 5 adolescent problem behaviors of substance abuse, delinquency and violence. For these reasons, this risk factor has been designated a priority for the local Whistler community.

2. Risk factor: Favorable Parental Attitudes and Involvement in Problem Behavior

The *Communities That Care*[®] *Youth Survey* revealed that the 2 scores related to this risk factor (Parental Attitudes Favorable toward ATOD Use and Parental Attitudes Favorable toward Antisocial Behavior) were both elevated in the Whistler region.

² A score of 50 matches the national (United States) average, with scores higher than 50 indicating above-average scores, and scores below 50 indicating below-average scores. Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scores, not higher. Conversely, because protective factors are associated with better behavioral outcomes, it is better to have protective factor scores with high values.

³ This risk factor and its title have been modified to exclude *Community Laws and Norms Favorable to Firearms*. This has been done because the use of firearms was not identified as a major concern in the Whistler community.

First, students reported particularly a high score of 59 on the Parental Attitudes Favorable to ATOD Use in comparison with the *Communities That Care*® Youth Survey normative population (score of 50). Second, students reported particularly a high score of 56 on the Parental Attitudes Favorable to Antisocial Behavior in comparison with the *Communities That Care*® Youth Survey normative population (score of 50).

High scores on the Favorable Parental Attitudes and Involvement in Problem Behavior are related to increased levels of the 5 adolescent problem behaviors of substance abuse, delinquency, teen pregnancy, school dropout and violence. For these reasons, this risk factor has been designated a priority for the local Whistler community.

3. Risk factor: Lack of Commitment to School

The *Communities That Care*® Youth Survey revealed that the score for this risk factor was elevated in the Whistler region. Students reported a particularly high score on the Lack of Commitment to School in comparison with the *Communities That Care*® Youth Survey normative population. With a score of 55, Lack of Commitment to School has been identified as a significant risk factor for the local community.

This finding is supported by Canadian archival data from the Ministry of Education. One locally measurable indicator of the risk factor *Lack of Commitment to School* is the transition rate. The transition rate is defined as the proportion of students entering grade 8 who complete grade 12 within 6 years. For School District 48 (Howe Sound) the transition rate is 78% and has been identified as an area of concern.

The Whistler for Youth group considered this an important risk factor to include because high scores on the Lack of Commitment to School scale are related to *increased levels of all 5 adolescent problem behaviors* of substance abuse, delinquency, teen pregnancy, school dropout and violence. For these reasons, this risk factor has been designated a priority for the local Whistler community.

4. Risk factor: Favorable Attitudes Towards the Problem Behavior

The *Communities That Care*® Youth Survey revealed that the scores related to the risk factor (Favorable Attitudes Towards Antisocial Behavior, Favorable Attitudes Toward ATOD Use, and Low Perceived Risk of Drug Use) were elevated in the Whistler region.

First, students reported a score of 57 on the Favorable Attitudes Towards Antisocial Behavior scale, which is higher than the *Communities That Care*® Youth Survey normative population of 50. Second, students reported a score of 52 on the Favorable Attitudes Toward ATOD Use scale, which is also higher than the *Communities That Care*® Youth Survey normative population of 50. Third, students reported a score of 44 on the Low Perceived Risk of Drug Use scale. This means that students do not perceive that they are at risk of adverse health reactions when using drugs and their peers reinforce these views.

High scores on these 3 scales are related to increased levels of the 5 adolescent problem behaviors of substance abuse, delinquency, teen pregnancy, and school dropout. For these reasons, this risk factor has been designated a priority for the Whistler for Youth group.

5. Risk factor: Extreme Economic Deprivation

The *Communities That Care*® Youth Survey a low score for this risk factor within the student population is Whistler. According to Statistics Canada in 2001, the incidence of low income within families was only 8.1%, well below the provincial average of 15.4%. For this reason, Extreme Economic Deprivation has not been designated a risk factor for the school-aged population of Whistler, B.C.

However, since the population of Whistler is divided into several distinct sub-populations, this risk factor is a relevant one for the 18-26 year old age group. This group consists of seasonal workers, who are paid minimum wage and are often living below the Low Income Cutoff or LICO. This means that these individuals experience a lack of services (for instance, medical/dental insurance) and are put at higher risk of health problems, stress and suicide. For these reasons, *the risk factor of Extreme Economic Deprivation has been designated a priority for the 18-26 year old population by the Whistler for Youth group.*

Conclusion and Recommendations

Whistler's strengths

The data revealed that young people in Whistler, B.C. have a high level of neighborhood attachment and they perceive that drugs and handguns are not very available in their community. Youth in Whistler also report good opportunities for pro-social involvement available at home, low rates of methamphetamine, heroin and other club drug use, as well as low levels of participation in the following antisocial behaviors: attempting to steal a vehicle, carrying a handgun and taking a handgun to school. Whistler, B.C. should work to build on these strengths while enhancing other protective factors in its prevention efforts.

Community priorities

Based on the analysis of the data and input from the Community Board members at the November 22nd workshop, the following priority risk factors were identified for the community to focus on over the next several years:

- *Community Laws and Norms Favorable toward Drug Use and Crime*⁴ (Community Domain)
- *Favorable Parental Attitudes and Involvement in Problem Behaviour* (Family Domain)
- *Lack of Commitment to School* (School Domain)
- *Favorable Attitudes Towards the Problem Behaviour* (Peer - Individual Domain)
- *Extreme Economic Deprivation: 18-26 population ONLY* (Community Domain)

These risk factors were chosen as priorities because both the *Communities That Care*® Youth Survey and the additional Canadian archival data collected indicated that they are the most elevated throughout the Whistler region. It was recommended by the Whistler For Youth group

⁴ This risk factor and its title have been modified to exclude *Community Laws and Norms Favorable to Firearms*. This has been done because the use of firearms was not identified as a major concern in the Whistler community.

that Whistler, B.C. give particular attention to implementing strategies or programs to address these four risk factors when developing a prevention plan.

Next steps

The next step in the *Communities That Care*® process is to find out what resources are already in place in Whistler that address the priorities outlined above. The Resources and Assessment Evaluation workgroup are currently evaluating the services offered in Whistler to see if any evidence-based programs exist in our community. Those findings, combined with this report, will make up the profile for Whistler, B.C. that will be used to identify programs and strategies to promote positive youth development and prevent problem behaviors in the future. A long-term goal of the process is to implement these programs and conduct an on-going evaluation of their results at the community level.