

THE HEALTH OF YOUNG PEOPLE IN CANADA: FOCUS ON MENTAL HEALTH



hbcs

HEALTH BEHAVIOUR IN
SCHOOL-AGED CHILDREN

WORLD HEALTH ORGANIZATION
COLLABORATIVE CROSS-NATIONAL STUDY



EXECUTIVE SUMMARY

**THE RESULTS OF A CROSS-NATIONAL RESEARCH
STUDY ON THE HEALTH AND HEALTH BEHAVIOURS OF
YOUTH IN CANADA, GRADES 6 THROUGH 10.**

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TO PROMOTE AND PROTECT THE HEALTH OF CANADIANS THROUGH LEADERSHIP, PARTNERSHIP, INNOVATION AND ACTION IN PUBLIC HEALTH.

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La santé des jeunes au Canada : portrait de la santé mentale

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INTRODUCTION

Health Behaviour in School-aged Children (HBSC) is a cross-national research study conducted in collaboration with the World Health Organization at the international level and with the Public Health Agency of Canada at the national level. The HBSC study gains insight into the health and well-being of youth in grades 6 to 10 in Canada, with the goal of informing provincial/territorial, national, and international health policy; applied research; and health promotion programs. In this national report, we report on the emergent themes and key findings from the 2022/23 Canadian survey.

The Health of Young People in Canada: Focus on Mental Health national report presents the results of the 2022 HBSC survey, in which 317 Canadian schools and 26,360 students from grades 6 to 10 participated. We engaged an advisory panel of young people from across Canada to provide their reflections, contexts, and insights about the findings from the HBSC study to ground and inform the interpretation of the report. They provided suggestions to improve the content of the HBSC survey and they also identified several themes that were most currently important to them.

The mental health of young Canadians continues to be a major public health priority in Canada and represents the major theme of this report: *the positive and negative indicators of mental health status in different groups of young Canadians*. This report describes how the indicators of mental health status relate to various health behaviours, outcomes, and contexts.

The 2022/23 cycle of HBSC was unique because it was mainly conducted after the COVID-19 pandemic had abated. Consequently, this offered the researchers an opportunity to get a sense of how youth were doing before and after the pandemic. Another novel feature in this report is that it is the first time that the investigators can report on the health experiences of transgender and gender diverse (TGD) youth.

For a full description of the emergent themes and key findings, as well as the study itself, please refer to the full report, *The Health of Young People in Canada: Focus on Mental Health*, which can be found at: [insert hyperlink]



EMERGENT THEMES

1. **Transgender and Gender Diverse Youth.** For the first time, the HBSC study has been able to document the **health and health behaviour experiences of TGD youth**. Overall, the findings are concerning. TGD youth report worse states of health and more health risk behaviours for nearly all indicators in the survey.
2. **Developmental patterns** remain an important concern. As young people of all genders progress into grades 9 and 10 they are reporting higher levels for almost all negative health indicators, especially those pertaining to their mental health.
3. **The health of cisgender girls** remains a concern due to their reports of experiencing significant health problems in many domains.
4. **Relationships matter.** Students who report strong relationships with their parents, families, friends, and within their schools are much more likely to report better mental health and higher levels of well-being.
5. **Young people who face adversity** can be empowered by positive environments at school, among peer groups, in the community, and especially at home. Among students who report the lowest levels of affluence, the number of health resources they have in their lives has a strong relationship with many positive health outcomes, including physical, social, emotional, and spiritual health.
6. **The COVID-19 pandemic** had a negative impact on the lives of most young people, but the extent of this impact was modest among most survey participants. These findings suggest that perhaps young people are more resilient than they are given credit for.



KEY FINDINGS

MENTAL HEALTH

Compared with cisgender girls and TGD youth, cisgender boys reported relatively high levels of positive mental health indicators (e.g., life satisfaction, self-confidence, etc.) and relatively low levels of poor mental health indicators (e.g., feeling nervous, loneliness, etc.). A concerning number of cisgender girls and TGD youth report feeling “sad and hopeless” and “being lonely” and that they are experiencing health complaints consistent with poor mental health and low self-confidence. However, TGD youth are the most likely to report these mental health concerns. In general, when contrasting the current survey results with past cycles of HBSC, girls and boys are also reporting worse mental health outcomes over time.

HOME AND FAMILY

Most cisgender boys (e.g., 85% in grades 6 to 8) and cisgender girls (e.g., 74% in grades 6 to 8) reported having a happy home life. In contrast, TGD youth report having a more challenging and less supportive home life, with under half of TGD youth overall reporting ease of communication with their parents and over half of TGD youth in grades 9 and 10 reporting wanting to leave home. Having a happy home life and associated family support are each associated with positive mental health for all youth, but particularly among those who are less affluent.

FRIENDS

Less than half of all youth reported having highly supportive friendships. More positively, however, the majority of young people reported that they found it easy to talk to their best friend. Communicating with friends online was more common among cisgender girls than it was for both cisgender boys and TGD youth. Friend support was associated with positive mental health status, particularly among cisgender girls.

SCHOOL

Most youth reported liking school and being supported by teachers, although these feelings were lower for TGD youth. Only one-quarter of TGD youth reported being accepted by other students in their school. Over time, a higher proportion of both boys and girls have reported pressure due to schoolwork, with the proportions highest for girls. Positive school climates and caring teachers were associated with positive mental health for all youth.

Figure 1. Students who reported that during the past 12 months they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, by grade and gender (%)

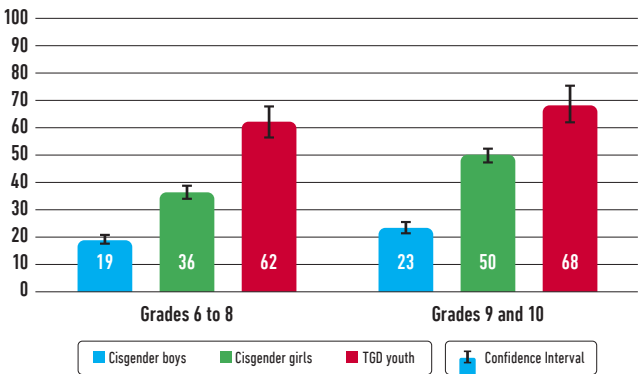
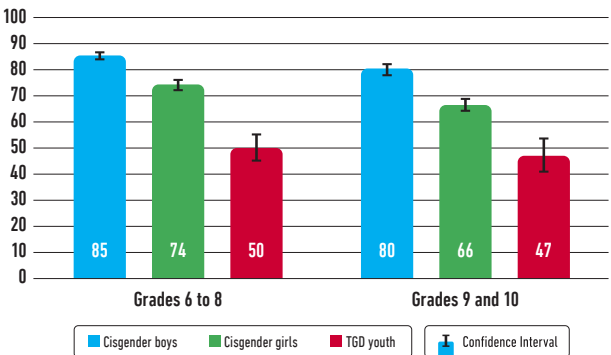


Figure 2. Students who reported that they had a happy home life, by grade and gender (%)



COMMUNITY

For girls, there has been an increase in neighbourhood distrust over time. TGD youth were less likely to agree that they could trust people in their neighbourhood when compared with cisgender girls who, in turn, were less likely to agree than cisgender boys. Community support was positively associated with higher life satisfaction and well-being for all youth. For less affluent TGD youth overall and less affluent grades 6 to 8 cisgender girls, these relationships were particularly strong.

PHYSICAL ACTIVITY, SCREEN TIME, AND SLEEP

Most cisgender boys reported high levels of physical activity, and the majority of cisgender youth met recommended sleep guidelines. Cisgender girls and TGD youth reported concerning low levels of physical activity, and TGD youth reported high levels of sleep difficulties (i.e., trouble falling asleep or staying asleep; daytime sleepiness). The vast majority of all youth (89%-96%) did not meet recommended levels of daily screentime.

HEALTHY EATING

Optimistically, the majority of youth reported that they had not experienced food insecurity. When considering a standard food security index, 34% of students reported low food security and 9% reported very low food security. As cisgender youth grew older, they were less likely to report health promoting practices, like eating breakfast and also meals with family. Fruit and vegetable consumption declined from levels reported in past survey cycles, while the consumption of sweets and sugary soft drinks appears to be increasing. Overall, TGD youth reported the lowest levels of health promoting eating behaviours.

HEALTHY WEIGHTS

The prevalence of youth with a body mass index classified as overweight or obese was high (e.g., 22% for grades 9 and 10 cisgender boys and 30% for grades 9 and 10 cisgender girls). Over the last six cycles of the HBSC study, the majority of boys and girls were categorized as being normal weight, while the proportion of students reporting body mass indexes that were categorized as overweight or obese has remained relatively stable. TGD youth are more likely than cisgender youth to report that they feel their body is “too fat” and that they are teased about their body weight.

INJURY AND CONCUSSION

The proportion of students who reported experiencing a medically treated injury in the last 12 months declined from historical levels, perhaps influenced by the COVID-19 pandemic. One in ten young people reported experiencing a concussion, which is concerning due to both the short- and long-term effects on health and wellness of head injuries.

BULLYING AND TEEN DATING VIOLENCE

While fewer students reported bullying others since 2018, the proportion of youth who reported being bullied increased by 12%. TGD youth were the most likely to report being victimized by all forms of



bullying. Reports of bullying are concerning as it was consistently associated with poorer mental health outcomes.

Between 5% and 22% of youth reported they had been victims of teen dating violence. Cisgender girls and TGD youth were more likely than cisgender boys to be victimized by their romantic partner through various forms of teen dating violence (i.e., control or emotional hurt, violence perpetrated through social media, etc.).

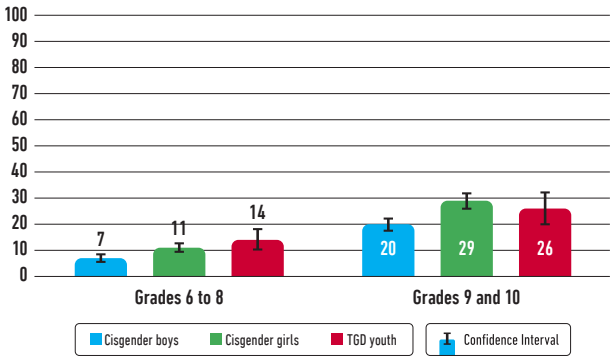
SPIRITUAL HEALTH

Most cisgender youth reported that connections to self were important to them. This is encouraging as higher level of connections to self are predictive of positive mental health. Cisgender girls reported relatively high levels of connections to others, which is also strongly related to positive mental health. When compared with their cisgender peers, TGD youth were least likely to place importance on connections to themselves, others, and the transcendent. A larger proportion of students in grades 6 to 8 than students in grades 9 and 10 reported that connections to nature were important to them.

SUBSTANCE USE

A very small proportion of youth report smoking cigarettes. However, vaping is common among all youth, with up to one in four students reporting that they have vaped by the time they reach grade 10. Rates of vaping are of particular concern in girls, with striking increases observed since 2018. Similarly, more girls are reporting having ever used cannabis. Increased vaping and cannabis use were also associated with the negative mental health indicators.

Figure 3. Students who reported that they have used a vape, also known as an e-cigarette, in their lifetime, by grade and gender (%)



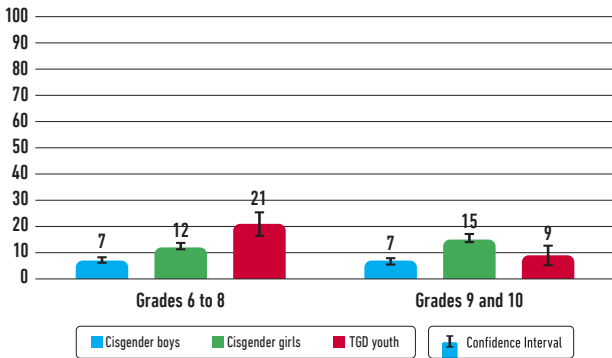
SEXUAL HEALTH

Among young people who had engaged in sexual intercourse, similar proportions of cisgender boys and cisgender girls reported the use of contraceptives, mainly condoms. In grades 9 and 10, cisgender girls and TGD youth were more likely than cisgender boys to report sexting behaviours. The 5% of youth who reported non-consensually sending someone else’s sext was concerning.

SOCIAL MEDIA USE

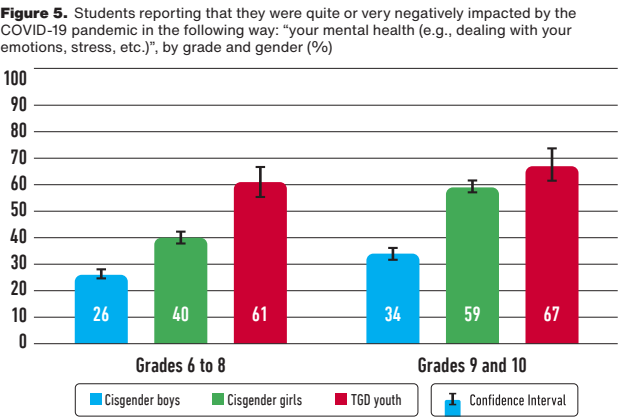
Cisgender girls and TGD youth reported the highest proportions of problematic social media use and trying to achieve an ideal body shape in ways that were promoted on social media. Problematic social media use was associated with increased likelihoods of reporting loneliness and health complaints and also was associated with lower levels of life satisfaction and well-being. These relationships were particularly strong for less affluent cisgender girls.

Figure 4. Students who report problematic social media use, by grade and gender (%)



COVID-19 AND HEALTH

Overall, the COVID-19 pandemic had a negative impact on all youth reports of life satisfaction and well-being and was also associated with increased loneliness and health complaints. While the extent of this impact seemed to be modest among most youth, it did have a pronounced negative impact on the lives of some groups of young people, especially less affluent TGD youth.



YOUTH PERSPECTIVE AND PRIORITIES

In this report, the HBSC investigators were intentional about seeking the views of young people from a range of backgrounds and contexts to ensure the survey findings were grounded in their lived experiences. The HBSC Youth Advisors are a team of 12 young people from across Canada who provided insight into new items that would be important to include in the survey questionnaire; participated in focus groups to test specific items for clarity and understanding; interpreted the study findings; and provided advice for ongoing research. As part of this process, these youth advisors were asked to review each chapter, offer their perspective on its content, and provide reflective quotes for the reader to “hear their voice” when considering the survey results.

In a final summative focus group meeting, the youth advisors were asked to consider the survey results and then rank the most important issues that affect the health and well-being of young people in Canada, but from their own lived experience and perspective. What follows is a brief summary of their insights, organized conceptually according to the most important themes and ideas that emerged from our discussions.



1. **Mental health** remains a major priority for young people, especially in the aftermath of the COVID-19 pandemic. This is especially true for Canada's cisgender girls and TGD youth. Overall, youth express a need for more supports and services at school and in the community to address their mental health issues.

"I am a cisgender girl. I feel like the findings correlate with my experiences but do not represent them fully. I am more lonely, less supported, less accepted, and I don't enjoy school as much because I cannot explore my interests fully. However, I am also less nervous and more confident in myself because I accept myself more."



2. **Gendered expectations** were a leading issue raised by many HBSC youth advisors. These expectations prescribe and surround the social norms associated with being a cisgender boy, cisgender girl, or a TGD youth in Canadian society. Many felt pressured to live according to stereotypical gender roles that determine how they should behave, and these pressures were felt to have a negative effect on their health.

"I expected that less cisgender boys would report being lonely compared to their cisgender girl peers. I expected this because boys typically don't share their emotions as much and as a result are more likely to lie about them. I believe the cisgender boys did actually feel as much loneliness as cisgender girls but didn't want to admit it."

"The gender issue is very confusing, depending on how you have been raised, and trying to figure out where you fit. And when you figure out your limited options when you don't think you are a boy or girl, that can be really confusing. It can be overwhelming mentally and emotionally. Trying to find people who understand you can also be a challenge."

"Don't ignore transgender and genderqueer youth and uplift their voices! Sincerely, a genderqueer teen from Québec."

3. **TGD youth** report health disadvantages in many different ways. Many TGD youth lack strong positive relationships in the home, with their friends, and at school, and they also tend to feel unsafe in their communities. For the majority of health behaviours, TGD youth are experiencing the most problems, but (in the views of the HBSC youth advisors) are least likely to be recognized and supported as they deal with these problems on an ongoing basis.

4. **Social media** is influencing a lot of health behaviours and experiences for youth. Some youth indicated that this became even more prominent during the pandemic.

“Social media has a very big impact on all of these themes. For example, diet, how we dress, how we look – social media might influence all of these things. Social media has an impact on almost all of the health topics.”

5. Young people hope for **more supports and connections** in schools, in communities, and from the adults that surround them. Youth truly value their relationships with peers, parents, and teachers, and acknowledge that they play a central role in their behavioural choices. Young Canadians want adults to provide more support, and they want their school and communities to be safe places for them. They felt that the school system and related government authorities could be doing more to support them.

“I would say to school principals and government leaders that the youths need to be more taken care of, from vaping as little as grade 6 to not feeling safe in neighbourhood is not okay. As leaders they need to be taking actions, not just posting a poster about it in the hall but actually working with students and coming up with a plan on how to overcome these problems.”



6. **Risk-taking continues to evolve**, with new expressions of behaviour replacing old (e.g., vaping replacing smoking, cyber-bullying replacing face-to-face bullying, etc.) and new online expressions of risk-taking emerging as virtual communication becomes normative.

“Every time I go to the bathroom, it is hard to get around all of the girls vaping.”