Youth aging out of care
Prepared for Surrey Poverty Reduction Coalition

McCreary Centre Society
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Executive Summary

Surrey has the largest youth population in British Columbia. Among Surrey’s young people, around 60 to 70 turn 19 and age out of government care every year.

While increasing numbers of young people in BC are living with their parents until well into their twenties, young people aging out of care are forced into independence and are cut off from familiar services and supports before they feel ready.

Reflecting the pattern across BC and in other countries such as Australia, the US and the UK, local youth who age out of care are more likely than their peers to become homeless; have poor educational, employment and health outcomes; and claim welfare benefits.

Feeling unsafe in their neighbourhood and transportation challenges were issues raised by young people in Surrey which were not highlighted as priorities in other studies with young people from government care.

Surrey youth in care are resilient and have positive plans for their future. If they receive support from peers and from adults in their family, school and community they report better physical and mental health, better school attendance, reduced substance use and more positive plans for their future.

Qualitative and quantitative studies engaging local youth in and from care have identified what these young people need to succeed. As well as supportive relationships with adults and peers, youth also need:

- Access to safe, affordable housing
- Access to employment and job training
- A supportive mentor
- A system navigator
- Support to graduate and access post-secondary opportunities

“At 19 it feels like you’re just dropped off and considered an adult by the care system.”
Terms used in this report

**Aging out/Aged out:** Youth who have reached the age of 19 and are no longer eligible for government care such as a foster home, group home or a Youth Agreement. Although ‘aging out’ is not the preferred term for many people it is used here as there was common understanding of its meaning.

**Fostering Change:** An initiative of Vancouver Foundation focused on improving the transition out of government care.

**Youth Agreement:** Considered an alternative to government care. Youth Agreements are intended for youth aged 16-18 who are homeless and unable to live with their family but for whom a foster home or group home would not be appropriate. Youth receive financial support to live independently.

**Youth in care:** A young person under the age of 19 who currently lives in a group home or foster home and receives support from the BC government or a delegated Aboriginal agency.

**Youth previously in care:** A young person who is not in care currently but has been previously.

**Youth with recent care experience:** A young person who is currently in care or has been in care within the past year.

**Youth with care experience:** A young person who has ever been in government care.

Although a Youth Agreement is an alternative to care, youth on a Youth Agreement were included in statistical analyses of youth currently, previously, recently or ever in care. Full details are on p 5.

*Note:* Children and youth enter government care for many reasons. For example, a parent may ask for their child to enter the care of the government because of their own or their child’s challenges, or because of parent/child conflicts. Alternatively, the child may be placed into government care because of concerns for their safety in their home environment, either at their own request or at the discretion of a child protection agency. Children and youth may be in care temporarily or permanently until the age of 19.
**Introduction**

“You turn 19, you get the boot out the door.”

This report was created using local data wherever possible. It is intended to form the basis of community presentations to be held in Surrey in the spring of 2016.

Analyses were conducted using data provided by around 150 youth in and from care who completed the 2013 BC Adolescent Health Survey (Fraser South) and the 2014 Homeless and Street Involved Youth Survey (Surrey). Local statistics were also provided by the Ministry of Children and Family Development (MCFD).

Additional sources of data include information from interviews, focus groups, and evaluations conducted in Surrey and surrounding communities with in excess of 250 youth with government care experience. Sincere thanks are due to Dr. John Hogg (University of Fraser Valley) and Dr. Deborah Rutman (University of Victoria) for sharing currently unpublished data.

Despite the inclusion of a wide range of young people’s perspectives, the data in this report does not necessarily capture the experiences of all local youth in care.

A literature review was conducted to provide supplementary information and to offer context to the Surrey findings.

Quotes included throughout the report were provided by local youth with government care experience.

In Canada, 40% of 20- to 29-year-olds live with their parents\(^1\) and the percentage of young people aged 20 to 24 living at home has consistently increased over the past three decades.\(^2\)

Most British Columbian parents expect to support their children up to age 28, and 80% of those with children aged 19 to 28 living away from home provide them with financial and other assistance. The majority believe that 19-year-olds do not have the necessary skills and resources to live independently (87%), and need the support of their families through their twenties (90%).\(^3\)

In contrast to the high levels of family help that most British Columbians in their twenties can expect, Rutman and Hubberstey\(^4\) found that only 9% of former youth in care in Greater Vancouver aged 19-26 had received any housing support from their family since aging out of care and only 16% had received financial support from their family.

Increased public awareness about the challenges faced by youth aging out of care has led to increases in public approval for provincial government support to be extended to young people beyond their 19\(^{th}\) birthday.\(^5\)
The local picture

In 2012, a quarter of Surrey’s population was under 19 years old. Surrey has the largest number of youth of all BC municipalities, with 57,560 youth aged 10-18 years and 37,440 youth aged 19-24 years.\(^5\)

Approximately 700 youth in BC ‘age out’ of care every year on their 19\(^{th}\) birthday,\(^6\) and around 5,000 young BC adults (aged 19-24) have previously been in foster care.\(^7\)

According to data provided by MCFD for South Fraser (Surrey, Langley and Delta), around 66 youth aged out of care from MCFD or a delegated Aboriginal agency each year over the past five years.

In 2015/16, 54 youth will age out of care before March 31\(^{st}\) 2016. MCFD predicts that 59 youth will age out in 2016-17; 72 in 2017-18; 51 in 2018-19; and 44 in 2019-20.

A community conversation was held in Surrey in 2015 to discuss how to better support youth transitioning out of care. This conversation identified the need for wider awareness-raising among the Surrey public to increase understanding of the needs and issues faced by youth transitioning out of care, and what the local community can do to support these youth.\(^8\) This identified need supports findings from a 2013 Vancouver Foundation poll which showed that only 28% of British Columbian adults were aware that government support ends when young people in care reach their 19\(^{th}\) birthday.\(^3\)

The Fostering Change community conversation in Surrey also identified a willingness among community members and City of Surrey staff to work together to address the issues for youth transitioning out of care. Suggestions from participants as to how this might be achieved included increasing partnerships and training with local businesses and organizations (e.g., credit unions, universities/colleges, technology companies) to better support youth leaving care.

Challenges associated with aging out of care

“My 19\(^{th}\) birthday came and they hadn’t given me an aging-out plan so they just gave me enough money to buy a bed, a desk and a chair. I feel like the Ministry shortchanged me in this.”

Youth in BC who age out of government care are considered independent when they turn 19 regardless of their readiness or ability. Research shows these young people experience poorer outcomes in areas such as homelessness, education, employment, income, physical and mental health, justice involvement, substance use, pregnancy, parenting and involvement with the child welfare system.\(^4\)

A UK study looking at mental health outcomes of youth leaving care noted that youth transition out of care at a particularly vulnerable time developmentally because they are at increased risk of developing a mental illness. In a study of 53 youth, a year after aging out of care only 3% met criteria for successful outcomes and 64% met DSM IV criteria for a psychiatric diagnosis. The study concluded that a model where the timing of transition does not fall at such a risky time for young people should be considered, so that they can transition when they are most able to succeed.\(^9\)
Findings among BC youth support those of studies in the UK, Australia and other parts of North America. For example, poorer mental and physical health, a lack of independent living skills, inadequate education, and lack of supports and resources that most young people rely on when moving into adulthood have been identified as crucial factors linked to homelessness and other challenges among youth with care experience in Ontario.

Additionally, emerging neurobiological evidence suggests that final maturation of the pre-frontal regions of the brain—responsible for functions required for independence such as planning, organization and emotion regulation—does not occur until a person is in their mid-twenties.

**Supporting youth aging out of care**

In response to the poor outcomes seen among youth aging out of care, places such as the UK, the US and Ontario have extended supports past the age of majority. For example, in the US, states are required to fund follow-up services for young people who have aged out of care, with 30% of the funds earmarked for supportive housing.

In Scotland, local authorities continue to offer support to former youth in care aged 19-26, if they are assessed as having eligible needs. Also a young person in foster care, a kinship agreement or residential care can remain in that care placement up to their 21st birthday.

Youth with care experience who participated in Surrey focus groups about transitioning to adulthood suggested extending services for young people in government care to age 25. However, findings from Australia go further by suggesting the need to move away from linking supports to chronological age and instead to focus on young people’s individual needs. This shift in focus would provide a more gradual transition to independence, rather than an abrupt end to supports.

**Economic picture**

According to the BC Office of the Representative for Children and Youth, the costs to our society of not supporting youth transitioning out of care are far higher than the costs of providing adequate support during this critical time in their development. This statement is supported by 2006 findings from Australia that estimated an average youth leaving care would cost the state $738,741 CAN more over the course of their lifetime than a youth not involved in the care system because of their lower earnings, poorer health and greater interactions with services.

A young person leaving care in Canada will earn about $326,000 less over their lifetime than their peers who have not been in care, and will cost governments more than $126,000 in lower tax revenues and higher social assistance payments.

A cost-benefit study in Ontario explored increasing the age of support to youth in government care from that province’s current age of 21 to age 25. Findings showed that for every $1 spent extending support, taxpayers would save or earn $1.36 over that person’s lifetime as former youth in care attained a better education, were less dependent on welfare, and paid more taxes.
Profile of local youth aging out of care

Data in this section, were provided by youth in care in Fraser South who completed the 2013 BC Adolescent Health Survey (BC AHS), unless otherwise stated. Surrey was the largest school district to take part in the survey and made up over two-thirds of youth in Fraser South. Only mainstream public schools participated in the survey, so data from youth in and from care attending alternative schools in the area are not included. Full results for Fraser South are available at www.mcs.bc.ca.

Data about homeless youth with care experience were provided by Surrey youth who completed the Homeless and Street Involved Youth Survey (HSIY).

As noted earlier, youth on a Youth Agreement are included in analyses which refer to youth currently, previously, recently, or ever in care. This is because youth had often experienced being in care and on a Youth Agreement (an alternative to care) and because some noted they were unsure what type of care they were in so had chosen Youth Agreement from the survey options. For these reasons the analyses could not be separated.

All comparisons and associations for the BC AHS and HSIY are statistically significant at p <.05. This means there is up to a 5% likelihood that the results presented occurred by chance.

Where low numbers of youth respondents or high standard errors in the analyses prevented the reporting of data among youth currently in care, analyses were conducted among youth ever in care.

It is important to note that youth may have been providing information about their experiences outside of their time in care. For example, if youth recently in care reported they had been bullied in the past year, it is not known whether they were in care at the time this happened.

“I have been living on a Youth Agreement for about a year now. I have no idea what I will do when I turn 19. It is pretty scary.”

Among youth who completed the 2013 BC AHS in Fraser South, 3% had ever been in government care (in a group home, foster home or on a Youth Agreement). One percent were currently in care and less than 1% had been in care within the past year but were not currently in care.

The percentage of youth who had ever been in care was unchanged from 2008, while the percentage of youth in care recently increased.

Youth currently in care ranged in age from 12 to 18 years. The majority (64%) were aged 16 or older and therefore approaching their transition out of care.

As noted earlier, Canadian and international studies have found a link between government care and homelessness, and this was also the case in Surrey. Among youth who participated in McCreary’s 2014 Homeless and Street Involved Youth Survey (HSIY), around half (51%) of Surrey based youth had been in
one or more types of government care, including 38% who had been in foster care, 36% in a group home, and 23% on a Youth Agreement.

Fifty-five percent of homeless Surrey youth who had been in care reported that at least one of their relatives had also been in care.

**Family background**

The most common ethnic backgrounds among youth in care in Fraser South were European, Aboriginal Southeast Asian and East Asian.

Consistent with the provincial picture, Aboriginal youth were over-represented among local youth in care. For example, while Aboriginal youth accounted for 5% of all BC youth in Fraser South, 17% of Aboriginal youth had been in care. African youth were also over-represented among youth who had been in care (among those who completed the BC AHS).

Among homeless Surrey youth ever in care, 43% identified as Aboriginal. Most of these youth reported a family member had been in residential school.

**Sexual orientation**

Over half (53%) of youth currently in care identified as completely straight, which was lower than among their peers not in care. Youth in care were more likely to identify as lesbian, gay or bisexual, or to report they did not have sexual attractions.

Among local homeless youth ever in care, around one in four (26%) identified as lesbian, gay, or bisexual.

**Housing and homelessness**

It is recommended that youth stay in the foster care system until they can secure stable and sustainable housing.6

“You may be totally ready, but it’s still hard to find a place.”

Among homeless Surrey youth with care experience, 67% had couch surfed, 61% had stayed in a shelter or safe house, 61% had been living on the street, 59% had stayed in a motel, hotel or SRO, 44% had stayed in a squat or abandoned building, and 44% had lived in a tent or car.

When asked about their reasons for being homeless or street-involved, youth with care experience most commonly reported being kicked out (64%), not getting along with their parents (57%), and running away (50%).
Supporting these survey findings, youth who had aged out of care who accessed a local housing program\textsuperscript{17} reported high lifetime rates of precarious housing, including couch surfing and staying in a safe house or shelter.

Youth identified many barriers to finding housing including insufficient money for rent or a deposit, not having a phone number landlords could call them back on, and being discriminated against by landlords because of their age and circumstances.

In addition to challenges finding housing, keeping their housing was a challenge for youth with a history of government care. Issues included literacy problems leading to not completing important paperwork, problems with roommates, and not knowing how to say no to family and friends who wanted to stay. However, with support from the program, 70\% of participants reported that they were able to maintain housing after leaving care. When asked what they needed as young adults now, many indicated that affordable housing was their main concern, followed by money for groceries.\textsuperscript{17}

In a 2013 evaluation of the same program,\textsuperscript{18} when asked what was helping them to keep their current housing, former youth in care most commonly identified support from staff. Other common responses included help with life-skills, making and maintaining connections in their community, support from a mental health or substance use counsellor, access to food, and/or having a job.

Surrey youth with care experience who participated in focus groups about the transition to adulthood suggested that offering low-cost, youth-friendly housing should be a local priority to ensure successful transitions.\textsuperscript{14}

Surrey residents have worried that cheaper house prices mean that young people from across the region move to Surrey and experience separation from their home communities and sources of support.\textsuperscript{8} Among youth with care experience who completed the HSIY survey in Surrey, 58\% had lived in Surrey before becoming homeless. However among homeless youth who had ever lived in Surrey, 71\% had moved to another community (including Abbotsford/Mission, Chilliwack, Burnaby, Vancouver, North Shore, Victoria, Nanaimo, Kamloops, Nelson, and Prince George).

\textit{Moving house}

The BC Office of the Representative for Children and Youth\textsuperscript{6} recommended decreasing the number of times youth in care are moved, as this could help support youth in building healthy long-term relationships.

About a third (34\%) of youth currently in care in Fraser South had moved in the past year, as had 46\% of those ever in care. Youth with recent care experience were more likely than those not in care recently to have moved in the last year (45\% vs. 20\%), and more likely to have moved three or more times.
Poverty

Youth transitioning out of care need increased financial support to improve their access to adequate nutrition and other basic needs. The BC AHS asked youth how often they went to bed hungry because there was not enough money for food at home. Among Fraser South youth with recent care experience, 20% went to bed hungry at least sometimes. This was a decrease from 2008, although still higher than the rate among local youth not in care.

Income and employment

Surrey youth’s suggestions for improving the transition out of care included offering a level of financial support which allows them to successfully establish themselves independently.

The percentage of youth in care in the past year who worked at a paid job during that time period dropped from 49% in 2008 to 23% in 2013, consistent with patterns seen among all youth provincially. Over a quarter (28%) of homeless local youth ever in care worked at a legal job in the past month.

Thirteen percent of Fraser South youth claimed “Income Assistance: Expected to Work” within six months of aging out of care. A significant number of these young people go on to become homeless.

In 2014, 25 youth from Surrey participated in focus groups to identify barriers and supports to finding and maintaining employment. They felt that local employers were often reluctant to give young people a chance, and that if hired they had to hide their care history for fear of discrimination. Other local barriers youth identified included not having money for school or to get required training, lack of work experience, and lack of transportation.

Youth who had been able to find employment noted they had received support to do so, including being driven to interviews, coached in interview skills, and supported throughout the application process.

People think because I am young I know about computers and looking for jobs and things online but I just really know how to use it for Facebook and things like that.”

Surrey youth in care were among participants in PLEA’s Career Path, an employment program for youth aged 15 to 18 who were in conflict with the law and considered at high risk of becoming gang involved. Youth worked full time in a ten week job placement and received intensive one to one support and supervision from Career Path staff. Employers received training on how to support youth with care histories and other challenges. An evaluation of the program showed 40% of youth had been hired as an employee at the site of their placement, and the majority of other program participants found other employment or returned to school.

“[Career Path] put me on the right track to build a positive future.”
Technology use

The majority of Fraser South youth in care owned a cellphone or other portable electronic device. They most commonly used it for chatting online or social networking, entertainment, finding information, communicating with friends, and communicating with parents or guardians.

Local homeless youth with care experience most commonly reported using the internet to keep in touch with friends and to look for work. They were more likely than their peers without care experience to use the internet to keep in touch with family members and to look for work, and were less likely than other youth to use their phone specifically to connect with parents or guardians.

Physical health

Three quarters (75%) of Fraser South youth currently in care rated their physical health as good or excellent, and 63% of homeless Surrey youth with care experience rated their health this way. These rates were lower than among youth without care experience.

In Fraser South, 23% of youth with care experience had a health condition or disability, such as a physical disability, sensory disability, severe allergy requiring the use of an epinephrine injection, or a long-term or chronic health condition. This rate was comparable to that among youth without care experience.

Half (50%) of youth with care experience who had a health condition or disability reported that it prevented them from doing things their peers could do at least some of the time.

In Fraser South, 61% of youth in care in the past year had seen a dentist during that time period, compared to 85% of local youth not in care.

Local homeless youth with care experience most commonly got their health care from a walk-in clinic (60%), a family doctor (35%), and/or emergency room (25%).

A quarter of homeless Surrey youth with care experience had missed out on needed medical services in the past year, compared to 7% of local homeless youth never in care. Common reasons included thinking or hoping the problem would go away, being afraid of what the doctor would say or do, being too busy, their parent or guardian not taking them, and lack of transportation.

Injuries & injury prevention

Twenty-seven percent of Fraser South youth with care experience were injured seriously enough to require medical attention in the past year. Although this rate was comparable to local youth without care experience, youth with care experience were more likely to report a concussion in the past year (24% vs. 15% of local youth never in care).
Consistent with youth without care experience, 65% of youth with care experience always wore a seatbelt when in a motor vehicle; a quarter (25%) always wore a helmet when riding a bike; 38% when riding an ATV, motorbike, scooter, or snowmobile; and 44% when using ice skates (among youth who took part in these activities).

Over a third (36%) of youth ever in care had been a passenger in a vehicle with a driver who was under the influence of alcohol or other substances, which was higher than among youth without care experience (22%).

**Sleep**

Compared to their peers, youth in care were less likely to sleep the recommended number of hours for adolescents (8.5 to 9.25 hours each night, according to the National Sleep Foundation). Thirty-eight percent of youth currently in care in Fraser South slept for eight or more hours the night before taking the BC AHS. Youth in care were over twice as likely as youth not in care to have slept 5 hours or less.

Among local homeless youth, a quarter (25%) of those with care experience had slept eight or more hours the night before taking the survey. Two out of three (67%) youth reported difficulties sleeping, and 42% indicated they had a sleep disorder.

**Mental health**

An evaluation of Aunt Leah’s Link program for Lower Mainland youth transitioning out of government care found that at least half struggled with mental health issues.12

Surrey youth talked about challenges to their mental health from past experiences of separation and trauma being compounded by changes in placement, schools and adult relationships over which they felt they had little control. These challenges are exacerbated when they lose government support at age 19.19

Among Fraser South youth with care experience, 68% rated their mental health as good or excellent. This was lower than the rate among youth not in care, and lower than ratings of physical health. Also, 23% had a mental or emotional health condition, compared to 8% of youth who had never been in care.

When asked about specific mental health conditions, 39% reported they had at least one condition (vs. 15% never in care) and 20% reported two or more (vs. 5% never in care). The most commonly reported conditions were Depression, Anxiety Disorder or panic attacks, and Attention Deficit Hyperactivity Disorder. Rates were higher than among those without care experience.

Among local homeless youth, 63% of those ever in care indicated a family member had a mental illness, including 53% who had a parent with a mental illness.
**Stress and despair**

The majority (82%) of youth in Fraser South who had been in care reported feeling stressed in the past month, with 18% reporting so much stress that they struggled to function. Youth with care experience also reported high rates of despair, with 21% reporting extreme despair to the point they could not do their work or deal with things (vs. 6% never in care).

Surrey youth in and from government care suggested that the stress they experienced would be reduced if they had improved access to counsellors who could assist them to work through past traumas and current sources of stress; if meetings they had to attend could be scheduled outside of school hours; and if care services were extended beyond age 19.19

**Self-harm and suicidality**

Twenty-seven percent of youth with care experience in Fraser South indicated they had cut or injured themselves on purpose without the intention of killing themselves in the past year. Youth with care experience were over twice as likely as their peers to have self-harmed multiple times (23% vs. 9%). Among youth with care experience, 16% reported they had attempted suicide in the past year, compared to 5% of youth who had not been in care.

Among homeless Surrey youth with care experience, 35% had self-harmed, 47% had considered suicide, and 31% had attempted suicide in the past year.

**Missed out on mental health services**

Youth often do not have access to mental health services when they need them.6

“It’s intimidating – you don’t know how to refer yourself or if you will be welcome or comfortable.”

In Fraser South, about a quarter (26%) of youth with care experience indicated they had missed out on needed mental health services in the past year, compared to 10% of youth without care experience. The most commonly reported reasons were not wanting their parents to know and thinking or hoping the problem would go away. Youth who had been in care were more likely than their peers who had never been in care to report lack of transportation or previous negative experiences as reasons they had missed out on needed services.

Among homeless Surrey youth with care experience, 35% had missed out on needed mental health services in the past year.

Youth from care in Surrey talked about not feeling ready to address some mental health and related issues while in care (e.g., addictions, anxiety and panic attacks). When they were a little older and had transitioned out of care, they felt more ready to address the issues but said the support was no longer available to them.19
**Positive mental health**

Most youth currently in care in Fraser South usually felt good about themselves (73%), felt as competent as other people (81%), and could identify something they were good at (65%). Also, 41% felt calm most or all of the time in the past month, and just over half (53%) felt happy this often.

Locally, the majority of youth currently in care envisioned only positive circumstances in their future, most commonly having a job or career, being in school, and/or having a family of their own.

Surrey youth’s suggestions for improving the transition out of care included allowing young people to continue to access youth mental health services until they can establish themselves as independent adults. They also suggested the need for ongoing trauma-informed social and emotional support to promote young people’s emotional healing and resilience into adulthood.19

**Nutrition**

Surrey youth spoke about the challenges of eating healthily when living on a Youth Agreement, as the money they received had to cover all the expenses of living independently. Those who used a food bank noted that the food bank’s hours often conflicted with school, felt stigmatizing to use, and often offered food they did not know how to cook.19

Youth who completed the BC AHS were asked about food and beverages they had consumed on the day prior to the survey. Most (92%) youth currently in care reported eating fruit and/or vegetables at least once the previous day, which was consistent with youth not in care.

Among youth with care experience, 42% always ate breakfast on school days. This was lower than the percentage among those never in care (56%). When asked why they did not eat breakfast, youth most commonly reported that they did not have time, were not hungry in the morning, and that there was nothing at home they liked to eat.

Half of youth in Aunt Leah’s Link Program reported that before getting involved in the program they went to bed hungry because there was not enough money for food. Youth who were parenting or pregnant particularly valued receiving healthy food through the program on a weekly basis, including cheese, milk, eggs and vegetables.17

**Sexual health**

Among youth with care experience, 39% had ever had oral sex and 38% had sexual intercourse. These percentages were similar among youth currently in care but higher than those among youth never in care for both oral sex (18%) and sexual intercourse (13%).

Most youth with care experience reported using protection the last time they had sex.
Substance use

Female participants in a Surrey substance use program talked about the effectiveness of having supportive foster parents and other adults in the community who could help them to deal with stress in a more constructive way than turning to drugs, as they had previously done.23

Tobacco

Thirty percent of youth with care experience had smoked tobacco, which was consistent with the rate five years previous, and among youth currently in care. Most youth who had tried smoking had smoked in the past month.

Youth with care experience were more likely than their peers to have first smoked at age twelve or younger.

Alcohol

“A lot of kids in foster care have been through trauma in our past, so that’s why I drink.”

“There were a lot of problems with alcohol in my family and I started drinking too.”

Compared to five years previously, youth in care in Fraser South were less likely to have tried alcohol. However, they remained more likely than their peers not in care to have tried it (53% vs. 37%). Just over half of those who had tried alcohol had drunk in the past month (54%).

Similar to their peers not in care, youth with care experience most commonly reported having their first drink at age thirteen or fourteen.

Marijuana

Similar to results in 2008, 38% of youth recently in care had tried marijuana (compared to 21% of youth not in care). Most youth who had tried marijuana reported using it in the past month.

Youth with care experience were around three times more likely than their peers to have first tried marijuana at age twelve or younger (29% vs. 10%). They were also more likely than their peers to have used substances other than alcohol and marijuana.

Among local youth with care experience who completed the HSIY survey, most reported they had used alcohol, marijuana, or tobacco in the past month. Four out of ten (41%) had tried other substances (such as amphetamines and hallucinogens). Most also reported having a family member who had a problem with alcohol or other substances.
**Reported reasons for using substances**

When asked their reasons for using substances the last time they had used them, youth in care were more likely than their peers to use because they were stressed, feeling down or sad, and because of physical pain.

**Consequences of alcohol and other drug use**

Seven out of 10 youth in care reported negative consequence of their substance use in the past year. The most commonly reported consequences were passing out and being told they had done something they could not remember.

Around one in ten (11%) youth with care experience reported needing help for their substance use in the past year (vs. 4% who had not been in care).

**Victimization**

**Abuse**

Youth with care experience were more likely to report they had been physically or sexually abused, compared to their peers without care experience. The sexual abuse rate among youth with recent care experience decreased from 51% in 2008 to 26% in 2013.

**Youth who had ever been abused**

<table>
<thead>
<tr>
<th></th>
<th>Youth with care experience</th>
<th>Youth without care experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physically abused</td>
<td>33%</td>
<td>11%</td>
</tr>
<tr>
<td>Sexually abused</td>
<td>26%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Note: Sexual abuse included being forced into sexual activity by another youth or adult, or being the younger of an illegal age pairing the first time they had sex.

Among homeless Surrey youth with care experience, most had witnessed someone in their family being abused or mistreated. Youth with care experience were more likely than their peers to report witnessing abuse, and most had experienced physical abuse themselves. Also, 39% had experienced sexual abuse.
**Discrimination**

Among Fraser South youth who had been in care in the past year, 39% had experienced discrimination during that time. They most commonly felt they were discriminated against because of how much money they or their family had, being seen as different, their sexual orientation, or their appearance.

**Bullying**

Youth with recent care experience were more likely than their peers to be bullied in-person in the past year: 37% had been teased to the point of feeling very uncomfortable, 36% had been socially excluded, and 17% had been physically assaulted.

Youth with care experience were also twice as likely to have been cyberbullied in the past year (23% vs. 12% without care experience). Additionally, 15% had met someone online who made them feel unsafe.
Improving outcomes for Surrey youth aging out of care

Research shows that youth in care do better when they have strong social supports and feel connected to their families, schools, and communities.\textsuperscript{6}

Access to a combination of formal and informal support networks can make a positive difference for youth aging out of care, including their educational and housing-related outcomes for several years after exiting the care system.\textsuperscript{4}

Family relationships

The BC Office of the Representative for Children and Youth\textsuperscript{6} recommends that unless there is a valid safety reason for a youth to not have contact with their birth family, supporting their relationships with their birth family and important foster family can have a positive and lasting impact on their transition to adulthood.

In Fraser South, 56\% of youth currently in care had an adult in their family to turn to if faced with a serious problem, as did a third of homeless Surrey youth with care experience. These youth were more likely than their peers without such an adult to rate their mental health as good or excellent and to feel good about themselves, and were three times as likely to feel happy in the past month.

Around three-quarters of youth in care (76\%) had asked a family member for help in the past year, and the majority found this experience helpful. Youth with a helpful family reported more positive mental health than youth who did not find their family helpful.

Among youth aged 19-26 who had transitioned out of care locally, Rutman and Hubberstey\textsuperscript{4} found 40\% had no family to turn to. Among those who did, the support was primarily emotional whereas youth without care experience received family support with housing, education costs, and day-to-day living expenses, as well as emotional support.

Supports outside the family

“We need an adult to talk to for guidance, discipline, and help along the way.”

Mentorship, when combined with practical and financial support, can be an important component for a successful transition out of government care.\textsuperscript{2}

In Fraser South, 45\% of youth in care felt there was an adult in their community outside of school or family who cared about them (vs. 58\% not in care), and 30\% had an adult outside their family they could turn to if they had a serious problem. Among homeless Surrey youth with care experience, 55\% reported there was an adult outside their family they could turn to if they had a serious problem.
In total, 28% of youth with care experience in mainstream schools did not feel they had an adult inside or outside their family who cared about them, as did 36% of Surrey youth from care who were homeless.

Youth in care in Surrey talked about needing an advocate to support their transition out of care and as they begin to live independently.19

Youth from care in Surrey who discussed the transition to adulthood talked about the negative effects they experienced when they lost connections with supportive adults, such as foster parents and social workers, when they left care at 19. They also said that agencies who had supported them were no longer officially allowed to do so. Their suggestions for how adults could support them as they transitioned out of care included:

- The need for a mentor to guide and advise them through the process of living independently, and to celebrate successes with them.

- Support that allows youth to keep their self-respect and personal agency, that is non-judgemental, and recognizes their potential.

- Practical assistance in meeting basic needs, such as shopping, cooking, and doing laundry.14

Similarly, Surrey youth aged 19-26 who were interviewed for Hogg’s 2015 project about transitioning out of care talked about the importance of a quality relationship with a trusted mentor as vital for a successful transition to adulthood. Examples of people they saw in this role included former foster parents and social workers.

According to the BC Office of the Representative for Children and Youth,6 youth in care need at least one supportive adult relationship when they transition out of care.

Peers

“Friends are really important because it’s hard to ask adults for help in case you get let down again.”

Rutman and Hubberstey4 note the value of peer (and ‘near peer’) support for former youth in care in reducing social isolation and fostering feelings of belonging, which can lead to improvements in educational, health and mental health outcomes.

“Getting help and changing friends helped me to stop drinking too much.”

All youth in care in Fraser South had at least one close friend in their school or neighbourhood, and most (84%) had three or more close friends. McCready research with youth in care has shown that having three or more friends is associated with improved mental health and particularly reduced risk of self-harm and suicide attempts.25
Among youth in care, 78% had asked a friend for help in the past year, and 56% found their friends helpful. Consistent with other research, there were positive associations with having helpful friends. For example, those who found their friends helpful were more likely to feel happy and calm and were less likely to have missed school in the past month, compared to those who had not found their friends helpful.

Youth in Surrey wanted more peer support groups where youth in care could meet and support each other, particularly if they found it hard to build trust with adults.  

**Healthy attitudes about risk behaviours**

Previous McCreary research has shown the benefits of youth in care having friends with healthy attitudes about risk behaviours. Youth in care were less likely than their peers not in care to have friends who would be upset with them if they got arrested (56% vs. 82%), were involved in gang activity (59% vs. 87%), were involved in a pregnancy (62% vs. 83%), dropped out of school (62% vs. 89%) or used marijuana (41% vs. 63%). However they were more likely in 2013 than 2008 to have friends who would be upset with them if they beat someone up or got drunk.

**School**

“*Even if high school education is free, affording it can still be impossible if all your money goes toward rent, food and bills.***”

“*Doing well in school can really lift you, especially when the teacher notices you are working hard and making progress.”*

Children and youth in government care have been identified as one of the most high-risk groups for academic failure in schools. On every measure of school-related success from kindergarten to high school graduation, children and youth in care fared worse than youth who received child welfare services but had not entered care, who in turn fared worse than youth who had never been involved in the child welfare system.

In Fraser South, 55% of youth from care completed high school. Provincially, 47% of BC youth in care completed high school, compared to 84% of the general youth population. In Aunt Leah’s Link program for youth transitioning out of care, 71% of participants had less than a Grade 12 education.

Surrey youth who participated in discussions about high drop-out rates among youth in care felt it was hard to stay motivated to remain in school when they realized they would not graduate at the same time as their peers, could not afford to participate in grad activities, and did not have anyone to help them complete all the forms required to attend post-secondary and seek scholarships.
Other challenges Surrey youth in care faced to graduating at the same time as their classmates include changing schools and missing a lot of school due to challenges outside of school and appointments with professionals.

**School connectedness**

Feeling connected to school and safe at school have been shown to be associated with positive health for youth with care experience.\(^{25}\)

Most youth currently in care in Fraser South felt safe at school (62%) and felt they were a part of their school (52%); 57% felt teachers cared about them; 50% were happy to be at school; 62% felt school staff treated them fairly; and 41% felt other school staff cared about them. These rates were lower than for youth not in care.

Youth who had aged out of care who participated in focus groups for *Growing up in BC II*\(^{27}\) talked about how difficult it had been to finish high school and lose the support of teachers and other school staff at the same time as they transitioned out of care.

Among youth who completed the HSIY survey, 70% of homeless youth in Surrey who were currently in care were attending school. In a local focus groups discussing these results, youth reported that school provided access to supportive adults, structure and shelter.

Smith et al.\(^{25}\) found that when BC youth in care had positive connections and felt a teacher cared about them they were more likely to report positive physical and mental health.

Surrey youth in care reported that it was hard to feel connected to school because they did not have the money to go on trips or join activities with their friends. However, their feelings of school connectedness were higher when they felt teachers cared about them; adults were available to talk; support with assignments was available; food was provided; the school felt safe; there were free clubs, activities, and events to get involved in; and there were opportunities to influence decisions at school.\(^{19}\)

**Post-secondary education**

In Canada, graduating from high school has been shown to increase the likelihood of finding employment and earning a living wage, yet provincially only a small portion of youth in care go on to post-secondary, and an even smaller number complete. The BC Office of the Representative for Children and Youth\(^6\) recommends that youth in care receive financial accommodation, tuition, supplies and other supports to complete high school and post-secondary education.

Among Surrey youth in care who completed the BC AHS, 85% planned to graduate high school and go on to further education.
In March 2014, the BC government introduced legislation to fund youth who have been in care to attend post-secondary education. However, due to age cut offs many youth are not eligible to apply or lose eligibility before they finish their studies.\(^6\)

**Cultural connectedness**

Youth leaving care who were interviewed by the BC Office of the Representative for Children and Youth\(^6\) said they wished more had been done to help them develop a sense of belonging to their own history and cultural community.

Around a quarter (26%) of local youth currently in care participated in cultural or traditional activities in the past year. Also, 38% reported eating food from their traditional background the previous day.

Cultural connectedness was associated with positive health for youth in care. For example, those who participated in a weekly cultural or traditional activity were more likely than those who did not to rate their overall health as good or excellent.

**Community connectedness**

“\textit{When you get the chance to try things and join in sports and stuff it keeps your mind busy and keeps you away from stuff you shouldn’t be doing.}”

Among Fraser South youth in care, 23% felt quite a bit or very much like a part of their community (compared to 40% not in care). These youth were more likely than those who did not feel like part of their community to report good or excellent mental health. Other studies have also shown youth who feel connected to their community are more likely to plan to continue to be engaged in their community in the future.\(^25\)

Participation in extra-curricular activities can be an important source of positive relationships, and participation in these activities on a weekly basis has been linked to more positive health among youth in care.\(^25\) Youth in care who participate in extracurricular activities are more likely to form healthy relationships, to complete high school, and to experience other positive outcomes. The broader the level in which youth positively engage in their communities, the higher the likelihood they will have successful outcomes in life.\(^6\)

In the past year, 64% of Fraser South youth currently in care participated in extracurricular activities on a weekly basis (compared to 86% of youth not in care). Locally, youth in care who played sports at least weekly were more likely than those who did not take part to have slept for eight or more hours the night before taking the survey.

When asked what prevented them from engaging in extracurricular activities, similar to youth in other parts of the province, Surrey youth in care and those on a Youth Agreement reported being too busy to play sports or take part in other extracurricular clubs or activities. They said they had so many appointments with social workers and other professionals to fit into their day that it was hard to commit
to other things. Also, having to balance the responsibilities of being in care or on a Youth Agreement and being in school often left them too exhausted to think about extracurricular activities.19

Among Fraser South youth currently in care, around half (51%) felt the activities they participated in were meaningful to them and 27% felt their ideas were listened to in these activities. These youth were more likely than those who did not feel this way to see a positive future for themselves, as well as to rate their mental health as good or excellent and to feel good about themselves.

Surrey participants in the Fostering Change conversations8 recommended free recreational passes to allow youth in care to participate in extracurricular activities.

Neighbourhood safety

When youth in care report feeling safe in their neighbourhood, this is associated with more positive mental health and a greater likelihood of accessing needed services.25

Around four in ten (39%) youth currently in care in Fraser South often or always felt safe in their neighbourhood during the day and 18% felt this way at night. Provincially, 78% of youth in care felt safe in their neighbourhood during the day, as did 98% of those not in care.

Around 1,100 Surrey youth aged 15-24 participated in the 2013 Metro Vancouver Youth Vital Signs Survey38 where young people were asked to grade life in their community and identify priority areas for improvements. Surrey youth identified public safety as the number one priority issue. Surrey youth were more likely than youth in other parts of Metro Vancouver to think this should be the priority for their community.3
Community Supports & Services

Programs that link youth in care to community resources and mentors, and which teach them life-skills as they begin to reach the transition age, have shown promise in promoting successful transitions to adulthood.28

“You need services to keep going. They can’t just stop and expect you to be OK. What if you are not ready? What if you have unresolved issues?”

When youth transition out of government care at age 19 they often do not feel ready to lose contact with youth services and they mourn the sudden loss of ties with professionals with whom they have developed close and trusting relationships.17

Surrey youth who had transitioned out of care were often surprised by how abruptly they had been cut off from services and supports that they had assumed might continue in some form after their 19th birthday. They spoke of their gratitude to individual workers and agencies that had offered them some support even when they were not funded to do so.

Supports youth access

“[Social workers] work while we are at school, so it’s hard to get to see them. And they are gone by half past four.”

In Fraser South, youth in care had asked a variety of adults in the community for help in the past year. They most commonly approached school counsellors and teachers. Youth in care were more likely than those not in care to have sought support from adults. Most of these youth found this experience to be helpful.

Having adults available for support has been linked to positive mental health, reduced substance use, and positive future aspirations.25

<table>
<thead>
<tr>
<th>People in the community whom youth most commonly approached for help in the past year (among youth currently in care)</th>
</tr>
</thead>
<tbody>
<tr>
<td>School counsellor</td>
</tr>
<tr>
<td>Teacher</td>
</tr>
<tr>
<td>A friend’s parent</td>
</tr>
<tr>
<td>Social worker</td>
</tr>
<tr>
<td>Doctor</td>
</tr>
<tr>
<td>Other school staff</td>
</tr>
<tr>
<td>Youth worker</td>
</tr>
</tbody>
</table>

Note: Youth could choose more than one response.
Supports accessed in the past year

<table>
<thead>
<tr>
<th>Support</th>
<th>Youth currently in care</th>
<th>Youth not currently in care</th>
</tr>
</thead>
<tbody>
<tr>
<td>School counsellor</td>
<td>24%</td>
<td>50%</td>
</tr>
<tr>
<td>Social worker</td>
<td>4%</td>
<td>37%</td>
</tr>
<tr>
<td>Youth worker</td>
<td>9%</td>
<td>29%</td>
</tr>
<tr>
<td>Other school staff</td>
<td>15%</td>
<td>31%</td>
</tr>
<tr>
<td>Friend’s parent</td>
<td>18%</td>
<td>43%</td>
</tr>
<tr>
<td>Mental health counsellor</td>
<td>5%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Source: 2013 BC AHS Fraser South.

Surrey youth in care who completed the HSIY survey were asked about a range of services they accessed. They most commonly accessed safe houses, shelters, transitional housing; mental health support; dental services; and youth centres. Most youth who accessed services found them helpful.

Most commonly accessed services
(among homeless youth ever in care)

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe house, shelter, transitional housing</td>
<td>62%</td>
</tr>
<tr>
<td>Mental health support</td>
<td>58%</td>
</tr>
<tr>
<td>Dental services</td>
<td>58%</td>
</tr>
<tr>
<td>Youth centre</td>
<td>58%</td>
</tr>
<tr>
<td>Job training, work experience</td>
<td>54%</td>
</tr>
<tr>
<td>Youth clinic</td>
<td>50%</td>
</tr>
</tbody>
</table>

Source: 2014 HSIY survey
Note: Youth could choose more than one response.

Youth who attended Aunt Leah’s Link Program felt the holistic nature of the program was a key strength, as youth were able to get help in areas as diverse as housing, finance and relationships.12
Recommendations based on findings from the Link evaluation\textsuperscript{12} included:

- Ensuring youth can be supported by the same organization and if appropriate the same staff, before and after they turn 19;
- Increasing the availability of quality market housing units for youth after transitioning out of government care.

**Needed community supports**

Rutman and Hubberstey\textsuperscript{4} found that the supports most frequently cited as being needed by former youth in care locally related to employment, budgeting/financial literacy, education, and mental health.

Homeless Surrey youth were asked what services they needed in their community. Over half of youth in care reported they needed more job training or work experience, safe and affordable housing, youth clinics, street nurses, safe houses, shelters or transitional housing, life-skills training and soup kitchens.

A 2015 community dialogue about supporting youth transitioning out of care in Surrey\textsuperscript{8} identified the need for:

- A wide range of culturally appropriate services and supports to address diverse populations
- Better coordination among services
- Services to be more considerate of the unique needs of youth in care
- Transportation challenges to be addressed (such as cost and availability of public transport) which make accessing some services difficult
- Accessible information about Surrey’s services
- More one-stop shops where youth can access different services under one roof
- A personal advocate for youth to help them navigate the systems they interact with
- More support for youth transitioning out of care to access education, employment, and housing opportunities.

Youth in care who participated in Surrey focus groups about transitioning to adulthood had many similar recommendations and also talked about the need to integrate services.\textsuperscript{14}

Youth in care noted that often access to supports and services did not become available until after they went into government care. They felt that had supports been available to them or their family earlier they may not have ended up in care.\textsuperscript{19}

"Why weren’t these supports available BEFORE I went into care?"

Hogg\textsuperscript{20} identified that youth, service providers, and foster parents are confused about the variety of resources available in Surrey, and suggested that agencies work together in a collaborative way to increase understanding.
The value of building supports

All protective factors are important and the more that a young person has in their life, the better they do. Also, some protective factors are more strongly associated with certain outcomes than others. For example, among BC youth with government care experience, having pro-social friends was found to be the most important predictor for reducing the need for substance use help, and family connectedness was the most influential factor associated with good or excellent mental health. Young people reported the best health picture if they had supports across peers, school, community and family, and the more of these they had in each domain the better their health.25

Surrey youth’s suggestions for improving the transition out of care included recognizing that youth in care often have to take on adult roles not only before their peers, but before completing key transitions such as finishing high school and securing stable employment and housing, and that they therefore need support across many areas of their life to be successful.19

Hogg20 conducted interviews and focus groups with Surrey youth, foster parents and service providers. He concluded that in order to support youth to successfully transition out of care, it is important to ensure young people:

- Have access to consistent, quality relationships with peers and adults.
- Have support to understand and access available resources.
- Begin preparations for the transition out of care by the time youth are 15 years of age, including developing a network of supports that will remain in place after they turn 19.
- Do not lose services and supports at 19 but are offered flexible supports that can ensure a smoother transition to adulthood.
- Have the opportunity to influence policy and legislation and to advocate for change, such as through the formation of a Surrey chapter of the Federation of BC Youth in Care Networks.
- Can experience natural supports and similar milestones to youth not from care, such as the opportunity to live in scattered site housing rather than a single supported housing site, and the opportunity to have a foster home from which they can move out and move back to for a short time if they experience challenges.
Promising practices from around the world

Surrey youth in care may be at risk of homelessness and other challenges.

Mockingbird Society in Washington completes a risk assessment that predicts which youth leaving care are likely to become homeless, allowing the Society to target specific supports for these young people before they become homeless.

In Australia the provision of safe, secure and affordable housing units was found to be a crucial component in the transition from care to independent living, and closely linked to positive outcomes in health, social connections, education and employment.\(^{10}\)

Surrey youth in care want to be in school, employed and contributing to their community.

The *Transitional Living* program in Tennessee provides intensive, individualized support, and counselling services to young people leaving government care. An evaluation of the program found increased earnings, reduced homelessness and poverty, and improved health and safety outcomes among the youth participants.\(^{29,30}\)

The Academy in New York provides paid internship placements and GED completion opportunities to reduce the conflict many youth transitioning out of care face in choosing between education and employment.\(^{31}\)

An Israeli study found that higher future expectations among youth in government care were associated with satisfaction in accommodation, economic status and educational achievements after leaving care. These results highlighted the role of future expectations as a source of resilience and motivation for youth in care.\(^{32}\)

Surrey needs more foster parents.

Mockingbird Society in Washington operates a model where new foster parents are supported by veteran foster parents by offering peer support, social activities, respite or crisis care, and assistance in navigating the child welfare systems.

Surrey youth in care need support past the age of 19.

In Washington State, youth in school or those planning to be in school (high school, GED, college or post-secondary) can stay in the foster system until graduating or turning 21.

The UK’s ‘Staying Put’ program, which enables young people to stay with their foster carers beyond the age of 18 years, has led to improved housing and educational outcomes for youth after they move out.\(^{33}\)
Surrey youth in care need natural supports.

The CORE program in Minneapolis engages the social network of youth nearing their transition out of care, to help youth to develop lasting, supportive relationships with adults. Evaluation results showed that youth participants reported having more power over their lives, a variety of supportive adults, and could better regulate their emotions, compared to a control group. The program taught youth the relationship-building skills needed to develop such connections, and supported them to practice these skills while still in foster care.34

Another US natural mentoring program has shown positive results in promoting youth’s social and emotional well-being. This program promotes enduring relationships for youth transitioning out of government care, with non-parental adults from within the youth’s existing social network.35

Cooperative living communities in Oregon and Massachusetts bring together youth in government care, their foster families, and Elders in order to form a robust support system around the children. The members of the community live in subsidized and market-value housing, where a variety of community-building programs take place. Preliminary findings show a positive impact on children and youth in care.36

Surrey youth in care need advocates.

The Lawyers Fostering Independence group in Washington provide free civil legal aid for youth and young adults aged 17-24 who have been in care. The service is designed to resolve barriers to obtaining or maintaining housing, employment, and education.

Surrey youth in care would like a ‘one stop shop’.

In Seattle, a range of services for youth in and from care are located in one building. One agency in the building is the Treehouse. The Treehouse provides a shop where youth can access free clothes and school supplies, as well as join summer school, camps, and extracurricular activities like sports, clubs, and music. Another agency housed in the building is Mockingbird Society which trains youth in and from care to successfully advocate for changes in legislation that negatively affect youth in care.

Also in Seattle, the Raikes Foundation has created and supports a Learning Lab which encourages organizations to share best practices and improve effectiveness of their outreach to homeless youth including those who have transitioned out of care.
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