

Children's Health: Reducing Risk Factors and Building Resiliency

To: Chair and Members of the Board of Health

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Recommendations

It is recommended that the Board of Health receive this report for information.

Key Points

- Youth health and well-being are shaped by early experiences and relationships. Positive supports during childhood and adolescence can help strengthen resilience, allowing youth to navigate life's challenges and thrive.
- Both protective and risk factors play a role in developing resilience. Increasing access to protective factors and reducing exposure to risk factors can help build resilience and support youth well-being.
- The Well-being and Health Youth (WHY) Survey data provides insights into youth well-being in Wellington-Dufferin-Guelph (WDG), highlighting how protective and risk factors across individual, social and community levels interact to influence well-being.
- Protective factors, including family support, a positive school environment and engagement in extracurricular activities, help build resilience and encourage positive development.
- Conversely, too much time spent on social media (>2 hours each day), not enough sleep, poor physical health and substance use, such as vaping, are risk factors for poor well-being in WDG students.
- WDG Public Health, schools and community groups are implementing targeted efforts to support mental health, reduce risk factors and strengthen protective factors.

Background

Early experiences and relationships play a significant role in shaping the health and well-being of youth, as it lays the foundation for emotional, social and physical development. Positive influences and relationships during these formative years can help develop essential life skills and prepare youth to navigate life's challenges. Recognizing the importance of these early experiences is key to creating strategies that support youth.

The Well-being and Health Youth (WHY) Survey provides valuable insights to understand youth health and well-being in WDG. This survey gathers data on the experiences, environments and relationships of youth, providing a comprehensive picture of their overall well-being. By examining these broader influences, opportunities can be identified to support youth in ways to promote healthy development and foster resiliency.

Protective and Risk Factors

Youth health and well-being are shaped by both positive and negative experiences at individual, social, community and environmental levels. Strengthening the protective factors and reducing risk factors can help create a safe, stable and supportive environment for youth to thrive. This can translate into better overall physical and mental health outcomes in adulthood.

Protective factors are the supports and systems that strengthen an individual's ability to weather life's challenges and maintain overall well-being. These can include community belonging and supportive relationships.¹

Conversely, risk factors include adverse childhood experiences (ACEs) and other forms of early adversity that can lead to toxic stress in the body when there is a lack of a supportive relationship to buffer their effects.¹ This includes experiences such as racism, discrimination and bullying, which can hinder well-being and development. ACEs were described in more detail in a [May 2023 Board of Health report](#).

These factors are interconnected, meaning improvements in one area can positively influence others. For example, participation in extracurricular activities can foster social connections and reduces excessive social media use.

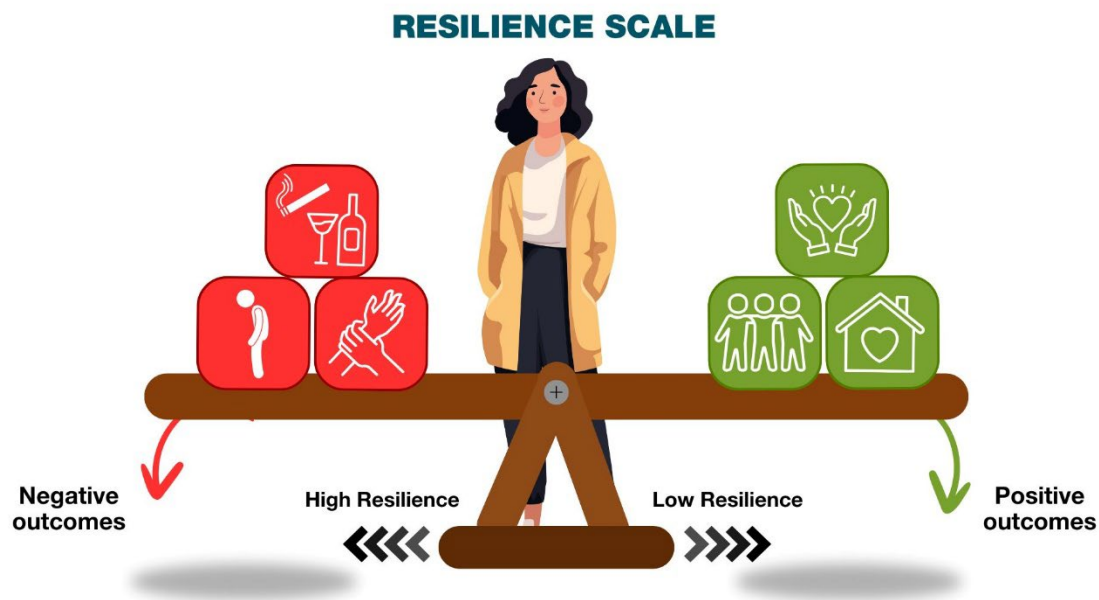
Resilience

Resilience is defined as “the capacity of individuals to navigate their way to the psychological, social, cultural and physical resources that sustain their well-being and their capacity individually and collectively to negotiate for these resources to be provided in culturally meaningful ways”.²

Resilience is not a fixed trait, but a dynamic process influenced by a combination of relationships, experiences, environments and genetics. Research also indicates that resilience can help buffer the effects of ACEs.³⁻⁵

Resilience is influenced by the presence of protective and risk factors across individual, social and environmental levels. It can be visualized as a scale or seesaw, with a fulcrum in the middle, and protective and risk factors on either side (see Figure 1).⁶

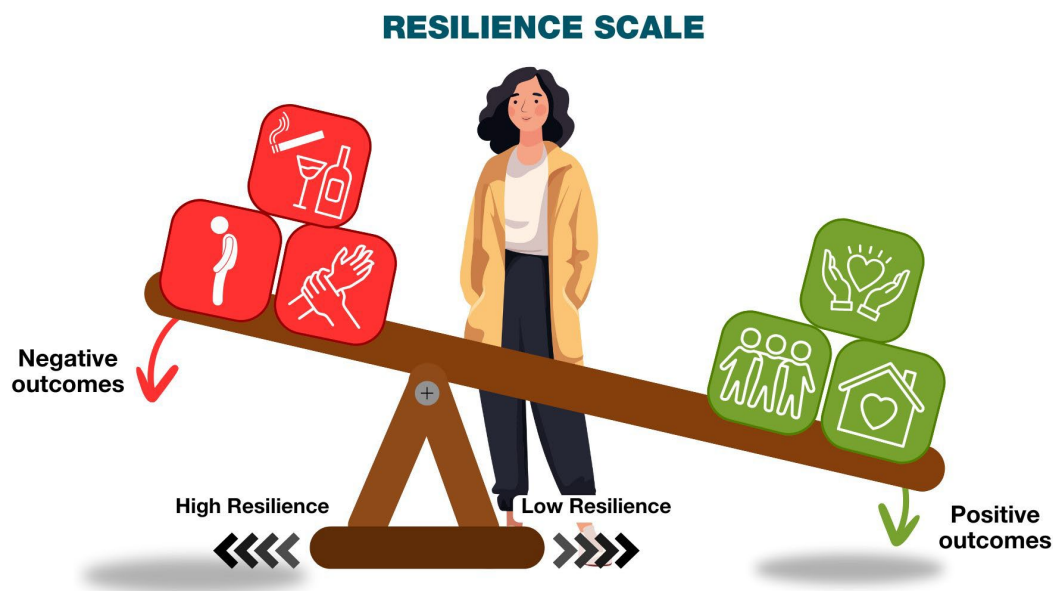
Figure 1: The Resilience Scale



This figure illustrates the relationship between risk and protective factors in shaping youth outcomes. On one side of the scale, red boxes represent the accumulation of risk factors and negative experiences which can tilt the balance toward negative outcomes, particularly when there is no support to buffer the impact. On the opposite side, green boxes symbolize access to protective factors and positive experiences that can counterbalance the risk factors and shift the balance towards positive outcomes.

The center of the scale is called the fulcrum, which represents an individual's starting capacity for resilience. This is initially influenced by genetics, making some children more sensitive to the effects of early adversity. However, the position of the fulcrum can shift over time. Experiences that support the development of core life skills such as executive function, and self-regulation can move the fulcrum to the left. This shift makes it easier to tip the seesaw toward positive outcomes (see Figure 2).⁶

Figure 2: Tilted Resilience Scale Toward Positive Outcomes

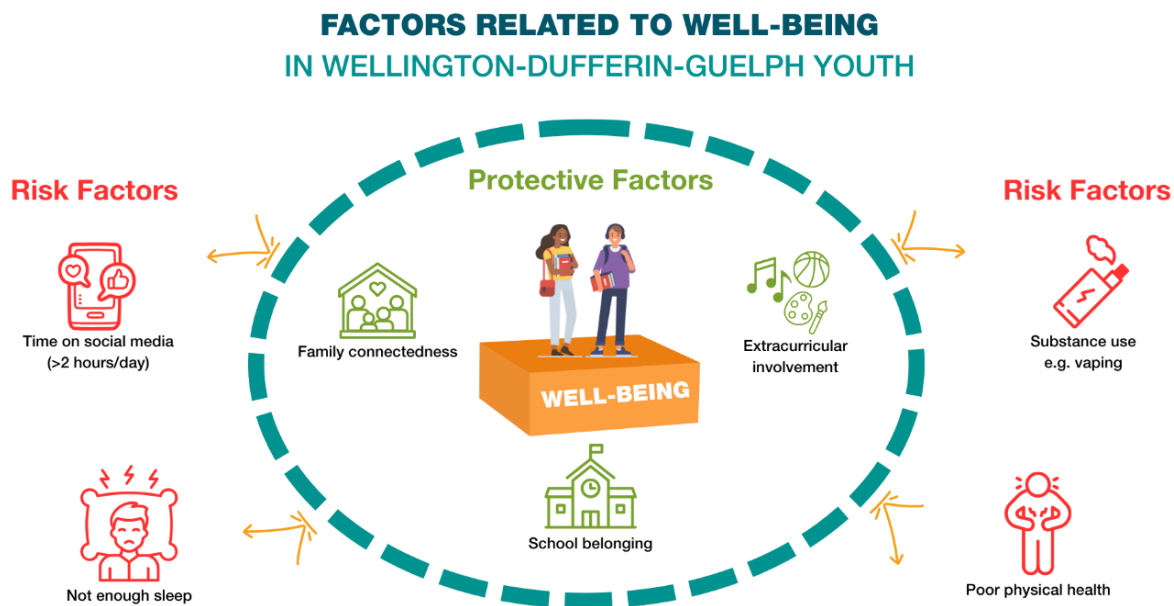


Each person's starting point is different, so some may be more easily tipped towards negative outcomes than others. By increasing access to protective factors and reducing risk factors, we can shift the balance in favor of positive outcomes. When youth have access to supportive relationships within families, schools, and communities, as well as quality programs and services, they are better equipped to navigate challenges and achieve improved long-term health and well-being.

Discussion

Youth well-being is shaped by a mix of individual, relational (e.g., family and friend) and environmental (e.g., school and community) risk and protective factors. Some of these factors are more strongly related to youth well-being than others. The infographic (Figure 3) provides a local perspective to the impacts of protective and risk factors influencing the well-being of WDG youth reported in the WHY Survey.

Figure 3. Factors Related to Well-being in Wellington-Dufferin-Guelph Youth



Family Time

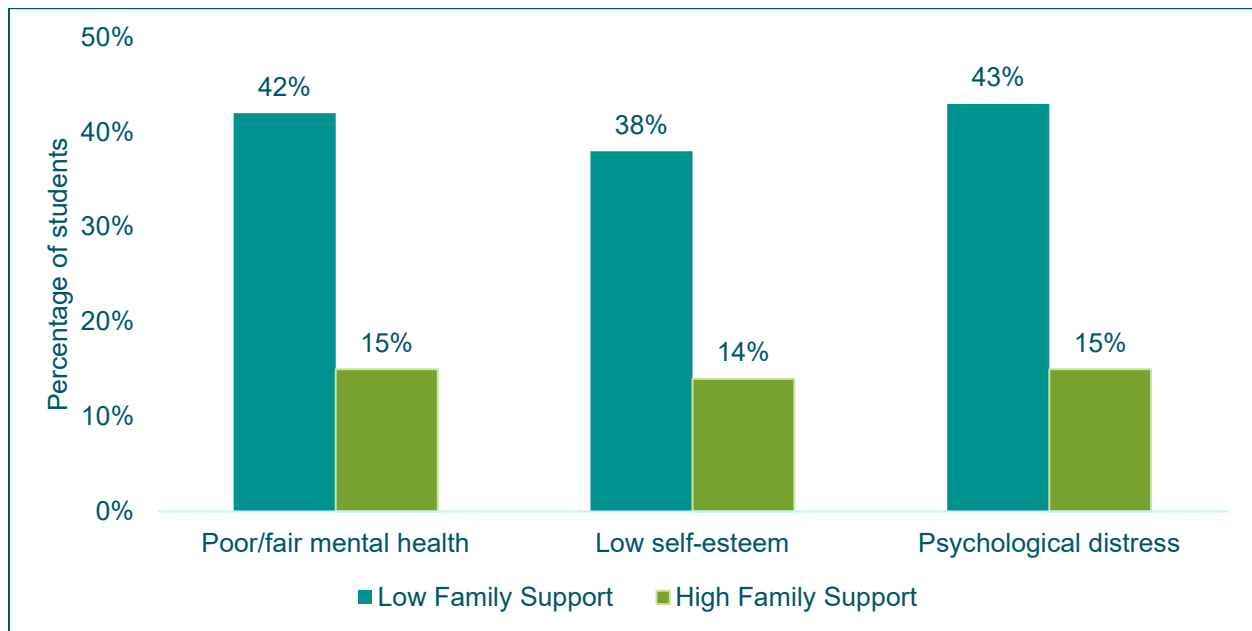
Regular family time provides emotional support, stability and guidance that helps youth navigate challenges, make positive choices and can lead to better health outcomes in adulthood. The WHY Survey shows a significant association between family time and well-being (see Figure 4).

In 2024, nearly 1 in 4 WDG students (23%) reported poor or fair mental health. However, among students who experienced strong family support, open communication and quality time at home, only 14% to 15% reported poor or fair mental health.

Similarly, while 43% of WDG students reported low self-esteem, this percentage was lower among students who reported high family support (31%), strong communication (30%), and quality time with family (32%). Low self-esteem can have long-term consequences on the development of youth, including struggling with self-worth as an adult, lower career satisfaction and increased likelihood of mental health issues persisting in later life.⁷

Almost 1 in 10 WDG students (9%) experienced psychological distress in 2024, which includes feeling sad, lonely, depressed or anxious. The proportion of WDG students who experienced psychological distress drops to 5% when there is family support, communication and quality time.

Figure 4. Percentage of students who report well-being challenges, by family time, Wellington-Dufferin-Guelph, 2024.



Leisure Time

The time spent outside of school can impact stress levels, emotional well-being and overall life satisfaction of students. Positive leisure routines can replace unhealthy coping mechanisms such as excessive screen time (> 2 hours of screen time outside of schoolwork), substance use or isolation. These unhealthy coping mechanisms can in turn reduce sleep quality and worsen mental health.

The WHY Survey showed that students who did not meet the sleep guidelines for their age group, engaged in more than two hours of social media each day or reported poor or fair physical health had well-being challenges at higher proportions than the WDG average (see Figure 5).

The largest differences in well-being challenges appear when comparing students who report poor or fair physical health compared to the average WDG student. In 2024, 69% of students who reported poor or fair physical health had poor or fair mental health, compared to 23% of WDG students on average. These same differences between students with poor or fair physical health compared to the WDG average are seen across the following mental health challenges:

- Struggle with being distracted (59% vs. 43%)
- Low resilience (50% vs. 29%)

- Severe stress about grades or exams (54% vs. 45%)
- Psychological distress (28% vs. 9%)
- Thoughts of self-harm (45% vs. 21%).

These findings highlight the strong link between physical health and mental health.

Figure 5. Percentage of students who report well-being challenges, by self-reported physical health, Wellington-Dufferin-Guelph, 2024.



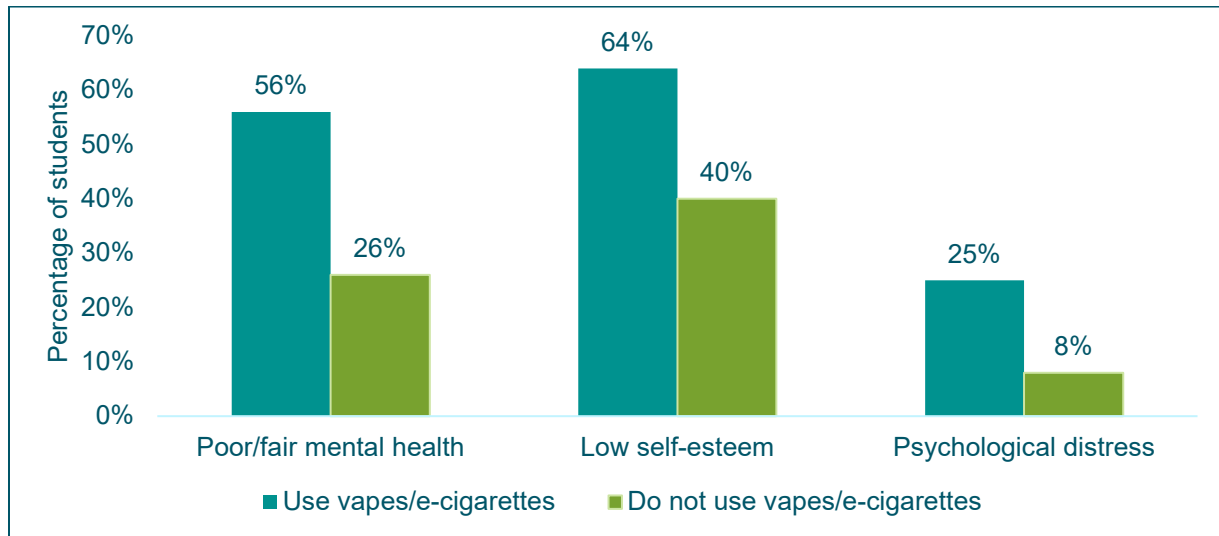
Substance Use

Substance use can have a significant impact on mental health, often leading to long-term emotional, psychological and behavioural challenges. Among students in WDG, a higher proportion of those who reported using substances in the past year, such as binge drinking, cannabis and vaping, reported experiencing mental health challenges compared to the overall WDG student population (see Figure 6).

- While almost 1 in 4 WDG students report poor or fair mental health (23%), this rises to 46% for students who binge drink, 54% for students who use cannabis and 56% for students who vape.
- Similarly, low self-esteem was reported by 43% of students. This increases to 57% among students who report binge drinking, 61% among cannabis users and 64% among students who vape.

Psychological distress, reported by 9% of students, more than doubles among students who binge drink (20%), use cannabis (24%) and vape (25%).

Figure 6. Percentage of students who report well-being challenges, by substance use, Wellington-Dufferin-Guelph, 2024.



Spending quality time with family members helps youth build resilience, self-worth and healthy habits that carry into adulthood. In 2024, 71% of WDG students reported spending quality time at home with their family. The proportion who reported spending quality time with family members is much lower in students who binge drink (54%), use cannabis (46%), and vape (47%). This suggests a connection between substance use and reduced quality of time with family.

Involvement in extracurricular activities, such as participation in youth programs in the community and school clubs or sports, provides students with important opportunities for personal growth, skill-building and social interactions.

- In 2024, half of WDG students (50%) reported participation in youth programs. This drops, to 42% among students who binge drink, and 36% for both students who use cannabis and vape.
- Similarly, school-based activities like clubs and sports also see a decline. While 54% of students participate overall, this drops to 41% among students who binge drink, 34% among students who use cannabis and 35% among students who vape.

These declines suggest that substance use may be linked to reduced engagement in positive environments.

A caring and supportive school environment can promote academic success, and emotional well-being.

- In 2024, two-thirds of WDG students (66%) reported a caring school environment, which includes adults having high expectations of students, are interested in them and notice when they are doing a good job and let them know.
- Among students who binge drink this drops to 50%. It's even lower for students who use cannabis (45%), and students who vape (46%).

This trend continues with other school-related attitudes:

- Interest in learning drops from 48% overall to 36% among students who binge drink, 32% among students who use cannabis, and 31% among students who vape.
- Enjoyment of school (students who like or love school) drops from 54% overall to 34% among students who binge drink, 32% among students who use cannabis, and 30% among students who vape.

School Experiences

A positive school environment is essential for youth to thrive academically, socially and emotionally. It helps shape their confidence, decision-making and outlook on their future. Students who report a caring school environment, being interested in what they are learning at school and enjoyment of school report well-being challenges at lower proportions than the WDG students average (see Figure 7).

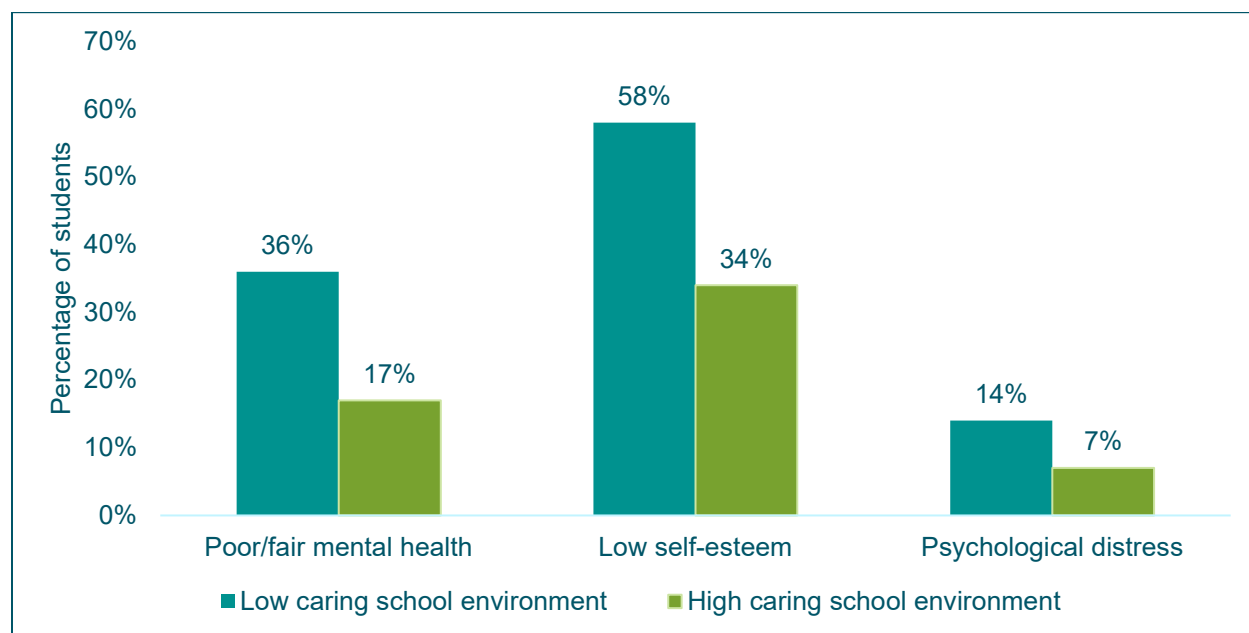
In 2024, almost 1 in 4 WDG students (23%) reported poor/fair mental health. However, this percentage was notably lower among students who:

- Reported a caring school environment (17%)
- Were interested in what they are learning (16%)
- Reported loving or liking school (14%)

This pattern continues across other indicators of well-being:

- While almost half of WDG students (48%) report low self-esteem, this proportion drops to 34% in students with a caring school environment, 31% in students who are interested in what they are learning and 32% in students who love or like school.
- In 2024, 9% of WDG students reported psychological distress, which decreases to 7% in students who report a caring school environment, 6% in students who are interested in what they are learning, and 5% in students who love or like schools.

Figure 7. Percentage of students who report well-being challenges, by school experiences, Wellington-Dufferin-Guelph, 2024.



The following table summarizes which protective and risk factors have a stronger relationship with student well-being outcomes, according to the analysis of the WHY Survey (Table 1).

Table 1. Protective and risk factors with relationships to well-being outcomes in WDG students.

Protective and risk factors	Good, very good or excellent mental health	High self-esteem	Low psychological distress	Did not have thoughts of self-harm
Strong family support	✓	✓		
Strong family communication	✓	✓		
Quality time spent at home with family	✓	✓	✓	
Meet sleep guidelines	✓			
Good, very good or excellent physical health	✓		✓	✓
Did not use a vape/e-cigarette	✓			
Caring school environment	✓	✓		
Interested in what they are learning at school		✓		
Love or like school	✓	✓		

A checkmark indicates that the factor has a moderate relationship with the mental health outcome.

Protective Factors as an Opportunity to Guide Improvements in Youth Well-being

Protective factors are essential for building resilience and promoting positive youth well-being. Everyone has a shared responsibility to support youth potential and build resilient communities. The insights from the WHY Survey provide a valuable foundation for shaping strategies, policies and programs that enhance protective factors and reduce risk factors in the WDG community. By understanding how these factors interact, community members and organizations can foster and implement initiatives that promote school belonging, encourage extracurricular participation and support family connectedness, while addressing challenges such as inadequate sleep, excessive social media use and substance use. By leveraging these findings, the WDG community can take meaningful steps toward creating environments where all youth are empowered to thrive.

Community Impact

The WHY Survey data is actively informing programs and initiatives that enhance youth well-being across the regions WDG Public Health serves. By using this data, schools and community groups are implementing targeted efforts to support mental health, reduce risk factors and strengthen protective factors. Some examples include:

- **Youth Empowering Students for Mental Health (YES4MH):** This initiative is being implemented in eight secondary schools this school year. Youth leaders utilize school specific WHY data to identify priority areas related to mental health and substance use. They organize activities and events to enhance mental health and well-being amongst their peers.
- **Wellington Guelph Drug Strategy (WGDS) Campaign:** WHY data is being used to inform upcoming awareness campaigns related to substance and technology use for parents, youth, and educators, in collaboration with Upper Grand District School Board (UGDSB) and Wellington Catholic District School Board (WCDSB).
- **WCDSB Youth Mental Health Symposium:** The WCDSB Student Senate is hosting a mental health symposium for 80-100 secondary students, primarily in Grade 12. The event includes a keynote presentation on addiction and dependency, incorporating WHY data to illustrate mental health and substance use concerns, and associations between them.

As part of the Community Resilience Coalition of Guelph and Wellington, WDG Public Health is actively working to increase awareness and knowledge of the importance of protective factors in youth well-being. To support this effort, various training modules are available for the public, community leaders, educators, coaches and service providers. These resources can be accessed at communityresilience.ca/get-trained.

Health Equity Implications

Health equity in youth well-being is influenced by risk and protective factors, which are unevenly distributed due to systemic inequities. Addressing these disparities requires targeted policies, more inclusive education and healthcare systems, especially for marginalized youth.

Risk factors like poverty, racism and environmental hazards increase exposure to health challenges and adverse childhood experiences. Marginalized youth—such as those from low-income or 2SLGBTQIA+ communities—often face higher levels of stigma, limited resources and poor living conditions, affecting both physical and mental health.

Protective factors, such as inclusive schools, mental health services, supportive families and accessible providers, can help reduce disparities and build resilience. A comprehensive, youth-informed approach is key to reducing adversity and fostering resilience.

Conclusion

Understanding risk and protective factors in youth is essential for promoting their overall well-being and future success. Risk factors, such as substance use, low self-esteem and negative peer influences, can increase the likelihood of harmful behaviors and mental health challenges. However, protective factors, including family support, a positive school environment and engagement in extracurricular activities, help build resilience and encourage positive development. By fostering supportive relationships, creating safe environments and providing opportunities for growth, communities, schools and families can help youth navigate challenges and thrive. Investing in these protective factors not only reduces risks but also empowers young people to reach their full potential and contribute positively to society.

Ontario Public Health Standards

Foundational Standards

- ☒ Population Health Assessment
- ☐ Health Equity
- ☐ Effective Public Health Practice
- ☐ Emergency Management

Program Standards

- ☒ Chronic Disease Prevention and Well-Being
- ☐ Food Safety
- ☒ Healthy Environments
- ☒ Healthy Growth and Development
- ☐ Immunization
- ☐ Infectious and Communicable Diseases Prevention and Control
- ☐ Safe Water
- ☒ School Health
- ☒ Substance Use and Injury Prevention

2024-2028 WDGPH Strategic Goals

More details about these strategic goals can be found in [WDGPH's 2024-2028 Strategic Plan](#).

- ☐ Improve health outcomes
- ☒ Focus on children's health
- ☒ Build strong partnerships
- ☐ Innovate our programs and services
- ☐ Lead the way toward a sustainable Public Health system

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