

APPENDIX D

CAPC/CPNP Survey Findings

The Young/Single Parent Support Network
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April, 2000

Teen Pregnancy Prevention Project - CAPC/CPNP Survey Results

INTRODUCTION

This survey is part of a larger national initiative underway to help Community Action Program for Children (CAPC) and the Canadian Prenatal Nutrition Program (CPNP) projects, and other organizations across Canada reduce the rate of teenage pregnancy. The survey gathers information from CAPC/CPNP funded projects about their own efforts in the area of teenage pregnancy prevention and about their knowledge of activities by other organizations in their community. It also examines, from the projects' perspectives, the critical elements of success as well as obstacles for the provision of programs and services in the area of teenage pregnancy prevention.

METHODOLOGY

A self-administered questionnaire (see attached copy) was mailed to 756 CAPC/CPNP funded projects across Canada.

Response rate

Ten questionnaires were returned "address unknown". Out of the 746 "valid" projects, 247 returned a completed questionnaire. This represents an overall response rate of 33%. The response rate for French language projects was 35% (115/328) and for English language projects, the response rate was 27% (132/492). The response rate by province was as follows (number of questionnaires completed/total number sent):

Newfoundland	4/19=21%
Prince Edward Island	3/12=25%
New Brunswick	3/11=27%
Nova Scotia	2/20=10%
Quebec	112/320=35%
Ontario	54/151=36%
Manitoba	11/25=44%
Saskatchewan	9/46=19%
Alberta	23/50=46%
British Columbia	19/77=25%
North West Territories	2/12=17%
Yukon	3/9=33%
Nunavut	1/4=25%

23 (9%) of the 247 respondents came from Aboriginal projects.

A telephone follow-up of a small sample of projects (N=10) across Canada who did not respond to the survey, indicated that the response pattern was fairly random, and that non-respondents were just as likely to be involved in the area of teenage pregnancy

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prevention as respondents. Reasons for non-response included reasons such as change of staffing/ pregnancy leave, questionnaire was sent to wrong office/individual, and too busy before Christmas to respond.

SURVEY RESULTS

Reducing the rate of teen pregnancy

- ! 24% feel reducing the rate of teen pregnancy is one of the most important things we could do in this country
- ! 65% feel it is very important but not necessarily the most important thing
- ! 12% feel it is very realistic to reduce the rate of teen pregnancy; 83% feel it is challenging, but achievable
- ! additional comments given most often
 - S more educational tools needed to achieve this goal (11%)
 - S need to work on several fronts/collaboration (11%)
 - S need to address the causes of teen pregnancy (9%)

Differences by region, language, and Aboriginal status: Respondents from Ontario/Nunavut (31%), Manitoba-Saskatchewan (35%), and B.C./Yukon (31%) were more likely to indicate that reducing the rate of teen pregnancy was one of the most important things we should do compared to those from other regions of the country (Atlantic=17%, Quebec=19%, Alberta/NWT=24%).

English language projects were more likely to indicate that reducing the rate of teen pregnancy was one of the most important things we could do than French language projects (29% versus 19%).

Aboriginal projects were more likely to indicate that reducing the rate of teen pregnancy was one of the most important things we could do than non-Aboriginal projects (35% versus 23%).

Key ingredients for success in reducing the rate of teen pregnancy

- ! items checked by the majority of respondents were:
 - S self-esteem development for pre-teen & teenage girls (93%)
 - S clear messages about contraception (76%)
 - S supporting teenage parents (70%)
 - S helping parents talk to their children (70%)
 - S effective advice and contraception (68%)
 - S special prevention programs for high risk teens (68%)

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- S promoting responsible behaviour among males (67%)
- S Canada-wide campaign to mobilize various sectors (66%)

- ! other items checked by respondents were:
 - S have clear national goals (46%)
 - S more recreational programs for youth (41%)
 - S promotion of abstinence (21%)
 - S other key ingredients mentioned (21%) include: accessible programs for all teens (13%), parent education skills (9%), simulated pregnancy programs for teens (7%)

Differences by region, language, and Aboriginal status:

There may be differences by region with respect to some of the key ingredients for success. For example, while 45% of respondents from Manitoba/Saskatchewan feel promotion of abstinence is important, only 9% of respondents from Quebec feel this way. The same difference is reflected in language - with 31% of English language respondents choosing this success factor compared with 9% of French language respondents.

There also appears to be regional differences over whether providing more recreational programs for youth is important for success. Only 29% of respondents from Quebec and 36% from Alberta/NWT feel this way compared to 60% from Manitoba/Saskatchewan, 55% from Ontario/Nunavut, 55% B/C/Yukon and 50% from the Atlantic region.

The importance of improving young women's self esteem was highly rated by everyone.

Most important strategies from above list

- ! the strategies which were listed as one of the **three** most important strategies most often were:
 - S self-esteem development for girls (65%)
 - S clear messages about contraception (29%)
 - S special prevention programs for high risk teens (29%)
 - S Canada-wide campaign to mobilize various sectors (26%)

There appears to be consensus across the various subgroups (region, language, Aboriginal status) with respect to the top three strategies.

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Experts in the area

- ! 43% of respondents provided names of people who could provide advice about what to do to reduce the rate of teenage pregnancy in Canada

Activities in teen pregnancy prevention

- ! 66% were aware of activities in their region (including their own agency) aimed at reducing teen pregnancy
- ! the organizations most involved in these activities are:
 - S public health agency (56%)
 - S their own agency (56%)
 - S school board (39%)
 - S youth-serving organization (27%)
 - S community health organization (26%)
 - S another CAPC/CPNP project (19%)
 - S recreational service organization (8%)
 - S religious community (8%)
 - S other organizations listed (26%) - those given most included social service agency (36%), and Planned Parenthood (9%)
- ! types of activities described most often were:
 - S providing messages about contraception (70%)
 - S effective advice and contraceptives (62%)
 - S supporting teenage parents (53%)
 - S self-esteem development (49%)
 - S recreational programs for youth (35%)
 - S helping parents talk to their children (31%)
 - S special prevention programs for high risk teens (27%)
 - S promotion of abstinence (25%)
 - S campaign to mobilize various sectors (15%)
 - S promotion of responsible behaviour (16%)
 - S other programs (8%) - such as low income housing (15%) and free contraception (15%)
- ! 70% provided the names of contacts for further information about the programs listed above

Differences by region, language, and Aboriginal status:

Awareness about other programs in the area of teen pregnancy prevention varies by region with almost an east to west trend. 100% of the respondents from Alberta/NWT, 90% of those from Manitoba/Saskatchewan and 86% from

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B/C/Yukon indicated they were aware of others in the field compared to 71% from Ontario/Nunavut, 58% from the Atlantic region and 49% from Quebec.

The above difference was reflected by language with English language respondents being more aware than French language respondents (80% versus 50%).

There was no difference in awareness level by Aboriginal status.

CAPC/CPNP projects' involvement in teenage pregnancy support and reduction

- ! 49% of the respondents indicated that their agency is involved in working to support teenage parents
- ! 39% of the respondents indicated that their agency is involved in working to reduce the rate of teenage pregnancy
- ! the socio-cultural characteristics of the target population for teen pregnancy reduction efforts are:
 - S pregnant youth (77%)
 - S low income (70%)
 - S parenting youth (69%)
 - S those at high risk (62%)
 - S those who have had a previous pregnancy (59%)
 - S parents (40%)
 - S aboriginal (39%)
 - S general population (35%)
 - S those in care of child welfare (32%)
 - S people living in specific neighbourhoods (30%)
 - S mothers and sisters of teen parents (28%)
 - S teachers (19%)
 - S ethno-cultural (14%)
 - S Francophone (11%)
 - S religious communities (5%)
 - S other groups (4%) - mainly primary and secondary school students, group homes (8%)

Differences by region, language, and Aboriginal status:

Involvement in supporting teen parents is fairly high across all regions (80% or more) with the exception of Quebec where only 46% of the respondents indicated they were working to support teenage parents. This difference was reflected by language with English language respondents being more involved than French language respondents (91% versus 48%).

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Although the majority of Aboriginal projects (74%) reported that they were working to support teenage parents, the proportion was not as high as non Aboriginal projects where 100% indicated they were involved in this activity.

With respect to working to reduce the rate of teen pregnancies, regional and language variations were found. The most activity in this area seems to be in Manitoba/Saskatchewan (89%), followed by Ontario/Nunavut (87%), and B.C./Yukon (71%). A smaller proportion of respondents from Alberta/NWT (54%), the Atlantic region (50%), and Quebec (37%) reported activities in this area. English language respondents were far more likely to indicate they were working towards reducing teen pregnancies than French language respondents (76% versus 38%).

A higher proportion of Aboriginal projects reported being involved in reducing the rate of teen pregnancies than non Aboriginal projects (81% versus 60%).

Age and penetration of target population

- ! age and gender of main target population:
 - S 81% targeting young women 15-19
 - S 48% targeting women age 20+
 - S 40% targeting girls age 11-14
 - S 6% targeting girls age 10 or younger
 - S 44% targeting young men 15-19
 - S 27% targeting boys age 11-14
 - S 17% targeting men age 20+

- ! percentage of respondents who feel they are reaching majority of their target population (60% or more):
 - S young women 15-19 (14%; reach unknown=61%)
 - S women age 20+ (15%; reach unknown=60%)
 - S girls age 11-14 (5%; reach unknown=68%)
 - S girls age 10 or younger (0%; reach unknown=67%)
 - S young men 15-19 (6%; reach unknown=71%)
 - S boys age 11-14 (3%; reach unknown=76%)
 - S men age 20+ (11%; reach unknown=63%)

Major components/activities of respondents' teen pregnancy prevention program

- ! major components listed by five or more respondents:
 - S prevention through education (21%)
 - S supporting pregnant teens with information & advice (12%)

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- S educational resources, support (11%)
- S informal drop-in with discussion (6%)
- S provision of birth control (6%)

Differences by target population

There were some differences in programming between those agencies who target the general population and those who target high risk groups within the general population such as teenage parents. Organizations targeting the general population are less likely report that their agency offered education programs that were aimed at prevention than those that targeted high risk groups (15% versus 26%). On the other hand, agencies that target the general population are more likely to provide birth control (9% versus 4%) and offer sexual health clinics (9% versus 0%) than agencies that target high risk groups.

- ! elements of program that work well (listed by at least 5 respondents) are:
 - S partnerships with local schools/public health dept. (14%)
 - S peer mentoring (11%)
 - S programming by youth (9%)
 - S partnerships with community programs/services (9%)

Differences by target population

There were some differences in what works well between those agencies who target the general population and those who target high risk groups within the general population. Organizations targeting the general population are less likely report that partnering with community programs and services worked well than those that targeted high risk groups (0% versus 15%). On the other hand, agencies that target the general population are more likely to report that partnerships with local school boards and public health departments (20% versus 10%) and involving youth directly in programming (16% versus 5%) works well.

Promotion of program

- ! approaches used most often to promote program are:
 - S word of mouth (65%)
 - S pamphlets (63%)
 - S existing programs (50%)
 - S posters (44%)
 - S street or school outreach (38%)
 - S media (33%)
 - S telephone outreach (22%)
 - S other (19%) including community family centre (21%), and health unit referrals (16%)

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Program resources

- ! 50% of projects have 1 full-time staff equivalent devoted to their program; 27% have 2 full time staff equivalent; and 23% have 3 or more FT staff
- ! the number of volunteers ranges from 1 to 800 or more; the median number is 30 - which means about half the projects have more than 30 volunteers and half have less than 30 volunteers
- ! other costs range from \$1 to \$13,800 - the median is \$400.

Critical elements for success

- ! according to respondents, the most critical elements for success are:
 - S continued funding (69%)
 - S reputation among youth (64%)
 - S offering program where kids are located (55%)
 - S support from community leaders (40%)
 - S parent involvement (23%)
 - S youth leader endorsement (16%)
 - S media interest and support (16%)
 - S other criteria (27%) including staff & board support (17%), community support (17%), community partnerships (10%)

Differences by region, language, and Aboriginal status:

There appear to be some regional differences in how projects responded to this question. There are also some differences by language and Aboriginal status. For example, while continued funding was quite important overall, respondents from Quebec gave this a lower level of importance (40% versus 69% for all respondents). Continued funding seems to be a very critical factor for Aboriginal projects (92%) compared to other projects (66%). As well, English language projects rated this criteria higher (78%) than French language projects (41%).

The majority of respondents (64%) rated the program's "reputation among youth" as a critical element for success, however, there was a wide range in how people felt by region from 53% indicating this element was important in Manitoba/Saskatchewan to 100% in the Atlantic region. As well, "support from community leaders" was particularly important for programs in the Atlantic region (75%) and less so in other parts of the country such as B.C./Yukon (35%), Quebec (24%), and Alberta/NWT (7%). This factor was also more important for Aboriginal projects (62%) than non Aboriginal projects (38%) as well as for English language projects (46%) compared to French language projects (22%).

"Parental involvement" appears to be more important for success in the Atlantic provinces (50%) than elsewhere in the country particularly Quebec (8%). This

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factor is also more important for Aboriginal projects (54%) than non Aboriginal projects (19%). "Youth leadership endorsement" is also more important for Aboriginal projects (39%) than non Aboriginal projects (14%).

Major obstacles

- ! according to respondents the major obstacles to success are:
 - S gaining support from sources such as the funders, teen fathers, youth themselves (38%)
 - S dealing with values & controversy around sexuality (28%)
 - S deciding on what to do that will make a difference (28%)
 - S raising community concern, readiness to act (26%)
 - S finding staff who are skilled & comfortable in the area (13%)
 - S other obstacles (17%) - funding mentioned most often (44%)

Differences by region, language, and Aboriginal status:

There appears to be a fair amount of consensus across the various subgroups concerning the major obstacles. The exception may be in the area of deciding what to do that will make a difference which appears to be more of an issue in the Atlantic provinces (50%) and in Manitoba/Saskatchewan (59%) than elsewhere in the country. It is also more of an issue for English language projects (31%) than French language projects (19%). Raising community concern is also more of an issue for English language projects (30%) than French language projects (15%) as well as for Aboriginal projects (46%) compared to non Aboriginal projects (23%). This obstacle is also more prominent in Manitoba/Saskatchewan (47%) and B.C./Yukon (42%) than in other parts of the country.

Does respondent's agency have stated position?

- ! 25% of respondents reported that their agency has a stated position on the prevention of teenage pregnancy
- ! key message projects are trying to convey are:
 - S "my" sexuality is a choice (22%)
 - S importance of healthy self-esteem (20%)
 - S postpone the next child/birth control (18%)
 - S be sexually responsible (12%)
 - S being a teen parent is very difficult (10%)
 - S how to have a healthy pregnancy and baby (9%)

Differences by region, language, and Aboriginal status:

Projects in the central and eastern region of the country are more likely to report that they have a stated position on teen pregnancy prevention than those in the

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west. Only 8% of respondents from Alberta/NWT and 9% from B.C./Yukon indicate that their agency has a stated position compared to 38% in Manitoba/Saskatchewan, 23% in Ontario/Nunavut, 41% in Quebec, and 25% in the Atlantic region. French language projects are almost twice as likely to have a stated position than English language projects (39% versus 22%). Aboriginal projects are also almost twice as likely to have a stated position than non Aboriginal projects (42% versus 23%).

Main results agencies have seen as a result of their work

- ! Of those who felt question applied to them, the main results they have seen so far in their community are:
 - S improvements in clients' self-esteem (14%)
 - S increased education of parents (9%)
 - S reduction of pregnancy rate (9%)
 - S clients like the program and the support they receive (7%)
 - S provide support in all areas of family life (6%)

Follow-up activities

- ! 95% of respondents would like a summary report of results
- ! 89% would like their name added to a list of contacts for further activities

Attention: Project Managers/Coordinators

**PLEASE TELL US ABOUT YOUR ORGANIZATION AND ITS
WORK IN THE PREVENTION OF TEEN PREGNANCY**

This questionnaire has been sent to CAPC/CPNP projects across Canada as part of a federally funded initiative to explore what can be done to help reduce the rate of teen pregnancies in Canada. Obtaining information from projects such as yours about your work and knowledge in the area is an important first step. We request that you complete the questionnaire and mail it back to us in the envelope provided by December 31, 1999. If you have any questions about this questionnaire or its purpose, please call Christine Davis, the survey manager, at 1-888-894-8117. Thank you for your participation in this important initiative.

Si vous préférez obtenir un questionnaire en français, communiquez avec Lise Skinner au 1-613-749-4584.

**Developing a Framework for Action Toward the Prevention of Teen Pregnancy
Inventory of Projects, Resources & Activities Related to Teen Pregnancy
Questionnaire**

<u>Name of organization:</u>	
<u>Address:</u>	
<u>Telephone, Fax, E-mail:</u>	
<u>CAPC/CPNP Project Title:</u>	
<u>Name of Project Leader:</u>	

1. How important do you think it is to reduce the rate of teenage pregnancy in this country?

- one of the most important things we could do
- very important
- important
- not very important
- very low on my list of factors that need addressing

2. How realistic do you think it is to reduce the rate of teenage pregnancy in this country?

- very realistic
- challenging, but achievable
- it would take extraordinary effort for not a lot of return
- not feasible at all

Comments: _____

3. What do you think are the key ingredients for success in reducing the rate of teenage pregnancy in this country? (please check all that apply)

- clear national, provincial and regional goals
- Canada-wide campaign to mobilize various sectors: youth employment, health, education, religious communities, recreation, media to take action on reducing the rate of teenage pregnancy
- promotion of abstinence from intercourse for teens
- clear messages about contraception for young men/boys and young women/girls through sexuality education
- self-esteem development for pre-teen and teenage girls
- recreational programs for youth
- helping parents talk to their children and teens about sex and relationships
- effective advice and contraception for young people
- promoting responsible behaviour among boys and young men (including child support enforcement)
- special prevention programs with high risk groups
- supporting teenage parents (housing, education, parenting supports) in order to reduce subsequent pregnancies
- other (please specify) _____

If you had to choose the most important **three strategies** from the list above, which ones would they be?

1 _____

2 _____

3 _____

4. We would like to interview people who could provide advice about what to do to reduce the rate of teenage pregnancy in Canada. Who would you suggest we contact?

Suggested Key Informant	Suggested Key Informant
Name: _____	Name: _____
Title _____	Title _____
Organization _____	Organization _____
Address _____	Address _____
Phone _____	Phone _____
Fax _____	Fax _____
E-Mail _____	E-Mail _____

5. Are you aware of any activities within your region (including your own project's/agency's efforts) aimed at reducing teenage pregnancy?

- yes
- no (if no, go to question #16)

6. Please tell us a bit about activities within your region –

a) What organization(s) is/are leading the effort? (check all that apply)

- public health agency
- school board
- religious community
- community health organization
- youth-serving organization
- recreational services organization
- my own agency
- another CAPC/CPNP project
- other (please specify) _____

b) Please use the table below to describe the activity (check all that apply)

Type of Program(s) Already Active in Your Area	Please Describe
<input type="checkbox"/> campaign to mobilize various sectors: youth employment, health, education, religious communities, recreation, media to take action on reducing the rate of teenage parenting	
<input type="checkbox"/> promotion of abstinence from intercourse for teens	
<input type="checkbox"/> providing messages about contraception for young men/boys and young women/girls through sexuality education	
<input type="checkbox"/> self-esteem development for pre-teen and teenage girls	

Active in Your Area	
<input type="checkbox"/> recreational programs for youth	
<input type="checkbox"/> helping parents talk to their children and teens about sex and relationships	
<input type="checkbox"/> effective advice and contraception for young people	
<input type="checkbox"/> promoting responsible behaviour among boys and young men (including child support enforcement)	
<input type="checkbox"/> special prevention programs with high risk groups	
<input type="checkbox"/> Supporting teenage parents (housing, education, parenting supports)	
<input type="checkbox"/> Other (please describe)	
<input type="checkbox"/> I don't know	

c) Who should we contact for more information about these activities?

Name:	Name:
Title	Title
Organization	Organization
Address	Address
Phone	Phone
Fax	Fax
E-Mail	E-Mail

7. a) Is your organization involved in working to support teenage parents?

yes

no

b) Is your organization involved in working to reduce the rate of teenage pregnancy?

yes

no (if no, go to Question # 16)

8. What are the socio-cultural characteristics of the population you are trying to reach with your teen pregnancy prevention efforts? (check all that apply)

general population

low income

those at high risk of problems (e.g. criminal activity, school drop out, substance abuse)

Francophones

pregnant youth

people living in a specific neighborhood or sub-region of the region

aboriginal

ethno-cultural (please specify culture, if applicable) _____

those in care of child welfare services

youth whose mothers or sisters were teen parents

youth who've experienced a previous pregnancy/birth

youth who are parenting

parents

teachers

religious communities

other (please specify) _____

9. Tell us about the age and sex of those who you're ultimately trying to reach and what proportion you estimate you're reaching:

Who are you trying to reach? (check all that apply)	About what % of your target population did you reach in 1998/99?
<input type="checkbox"/> girls aged 10 and under	
<input type="checkbox"/> girls aged 11 - 14	
<input type="checkbox"/> young women 15 - 19	
<input type="checkbox"/> boys aged 10 and under	
<input type="checkbox"/> boys aged 11-14	
<input type="checkbox"/> young men aged 15 - 19	
<input type="checkbox"/> women aged 20 and over	
<input type="checkbox"/> men aged 20 and over	
<input type="checkbox"/> other	

10. a) What are the major components/activities of your teen pregnancy prevention program?

b) Describe any elements of the program that you think work particularly well (material, approaches, partnerships, etc...) *Please add more about your successes by attaching material, or writing on the back of the questionnaire.*

11. How do you promote your program to make sure you reach your target population? – i.e., How do you spread the word and generate interest? (Please check all that apply.)

- Pamphlets
- Posters
- Media
- Existing programs (please specify) _____
- Telephone outreach
- Word of mouth
- Street or school outreach
- Other (please specify) _____

12. What resources do you devote to the program?

- a) # full time equivalent staff _____
- b) # volunteer hours per month (average) _____
- c) other costs (e.g. advertising and promotion, printing, supplies) _____

13. What would you say are the critical elements for success for your program – i.e., those elements without which the program wouldn't work?

- reputation among youth
- support from community leaders
- offering the program in places where kids are (e.g. schools)
- continued funding
- parent involvement
- youth leader endorsement
- media interest and support
- other (please specify) _____

14. What are the obstacles, the barriers or the difficulties related to your program? (Please comment on how these have arisen and what you've done about them.)

- gaining support from (please specify)

- dealing with values controversy around sexuality

- finding staff who are skilled and comfortable in the area

- raising community concern, readiness to act about the issue

- deciding what to do that will actually make a difference

- other

15. a) Does your CAPC/CPNP project have a stated position on the prevention of teenage pregnancies?

- Yes - please describe (or attach)
- No

b) What are the key messages you are trying to convey to your target population?

c) Why do you think these messages are important?

16. Please summarize the main results of your effort in this area to date in the words of the people you're reaching.

17. Would you like to receive a copy of the Executive Summary of the final report?

yes

no

18. Would you like your name to be added to a list of contacts to be notified of further activities related to reducing the rate of teenage parenting?

yes

no

Thank you for taking the time to give us your thoughts and information.

APPENDIX E

CAPC/CPNP, Government and Aboriginal Representatives Consulted

**The Young/Single Parent Support Network
Timmins Native Friendship Centre
Canadian Institute of Child Health**

May and June, 2000

A Framework for Action to Reduce the Rate of Teen Pregnancy in Canada

CAPC/CPNP, GOVERNMENT AND ABORIGINAL REPRESENTATIVES CONSULTED

**Consultations at the Steering Committee Meeting
Aboriginal Healing Foundation, Ottawa
May 9-10-11, 2000:**

Kelly Jellema and Philippe Rousseau
Representing Christine Reissmann, Manager
Sexual and Reproductive Health Unit, Health Canada

Elise Lavigne
Program Officer
CAPC/CPNP National Projects Fund, Health Canada

Helen Perkins
Coordinator
Peterborough Family Resource Centre (CPNP)

**Consultations at the Steering Committee Meeting
St. John Ambulance National Headquarters, Ottawa
June 5-6-7, 2000:**

Tracey Chevrier
Youth Worker
Native Women's Association of Canada

Elise Lavigne
Program Officer
CAPC/CPNP National Projects Fund, Health Canada

Ruth Norton
Principal
Sagkeeng Anicinabe High School, Manitoba

Looee Okalik
Youth Intervener
Inuit Tapirisat of Canada

Jackie Tenute
Youth Counselor
Aboriginal Women's Support Centre