Building Healthy and Resilient Communities

SD44 Board Standing Committee

October 4th, 2022

Guiding Questions

- More and more open conversations about mental health and well-being are happening. Why is this important and how can we support these conversations?
- Is there community-based stigma to talking about mental health or mental illness? What does that look like/sound like? Who is most impacted?
- How has COVID-19 impacted child, youth and community mental health?
- What role should schools and school communities play regarding mental health and well-being?
- Five to 10 years from now, what do conversations about, and structures connected to, mental health and well-being look like/sound like, in schools and in our communities?

Promotion of Positive Child and Youth Mental Health

Dr. Alex Choi, North Shore Medical Health Officer

October 4, 2022

Vancouver CoastalHealth

2022-10-04 11:53 AM

VCH Land Acknowledgement

I (We) would like to acknowledge that we are conducting our work today on the unceded and traditional territories of the 14 First Nations of Musqueam, Squamish, Tsleil-Waututh, shíshálh, Tla'amin, Wuikinuxv, Nuxalk, Heiltsuk, Kitasoo, Lil'wat, N'Quatqua, Samahquam, Skatin and Xa'xtsa.

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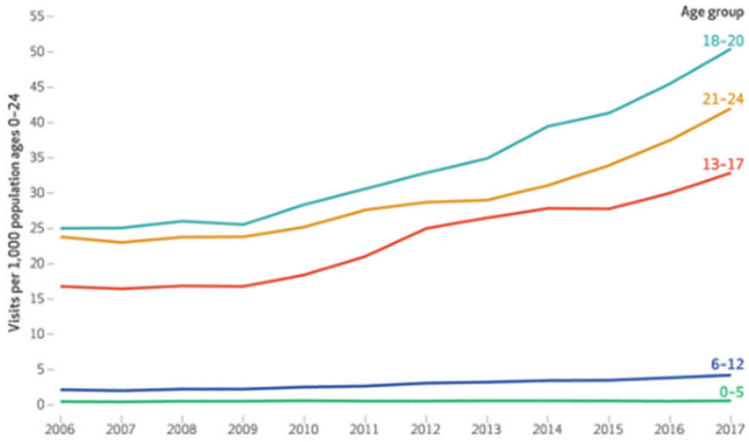
2

Increasing mental health issues among children and youth

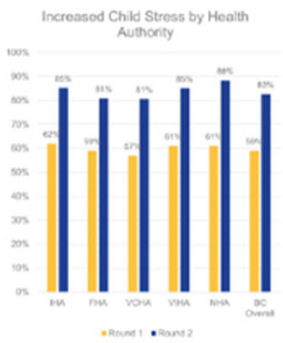


Deconstructing The Rise In Mental Health–Related ED Visits Among Children And Youth In Ontario, Canada
Maria Chiu, Evgenia Gatov, Kinwah Fung, Paul Kurdyak, and Astrid Guttmann
Health Affairs 2020 39:10, 1728-1736

Vancouver CoastalHealth

Mental health in North Vancouver during COVID-19

- **59%** report that their mental health has worsened
- **63%** report that their child's wellbeing is worse
- **81%** report that their child is more stressed



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4

In North Vancouver, factors that are protective for our mental health have suffered during the pandemic

- **67%** report that their child has decreased connection with family
- **93%** report that their child has decreased connection with friends
- **44%** report increased household conflict
- **73%** report that their child is less physically active
- **93%** report that their child has more screen time
- **13%** report that their child's diet is worse (fewer fruits and vegetables)
- **35%** report that their child is sleeping less
- **92%** report that their child is participating in fewer extracurricular activities

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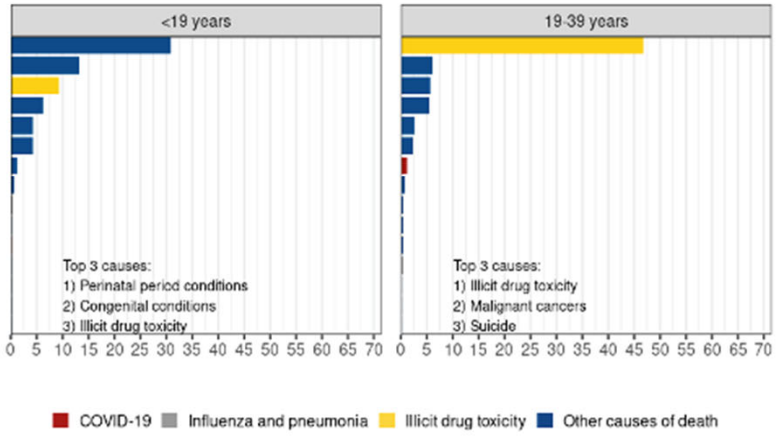
5

Health care visits and illicit drug toxicity

Top 15 causes of death by age group in BC for March 2020 to February 2022



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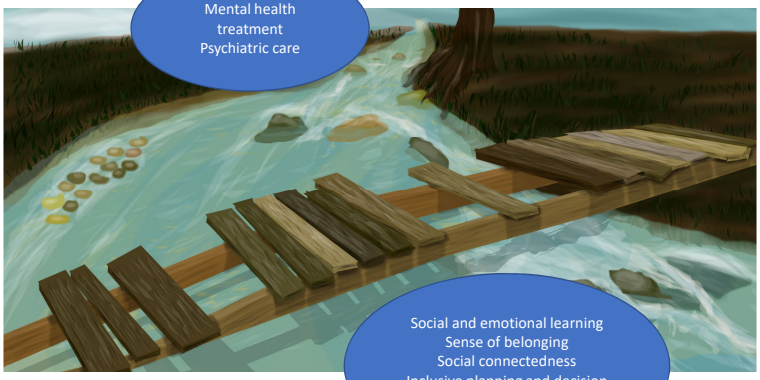
6

The parable of the bridge



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9

Thank you

Vancouver CoastalHealth

10

Youth mental health and well-being during the COVID-19 pandemic

Findings from a provincial survey

North Vancouver School District

Oct. 4, 2022

Dr. Hasina Samji

Assistant Professor,
Faculty of Health Sciences,
Simon Fraser University

Senior Scientist in
Population Mental Well-being,
BC Centre for Disease Control

Director,
Capturing Health and Resilience
Trajectories (CHART) Lab

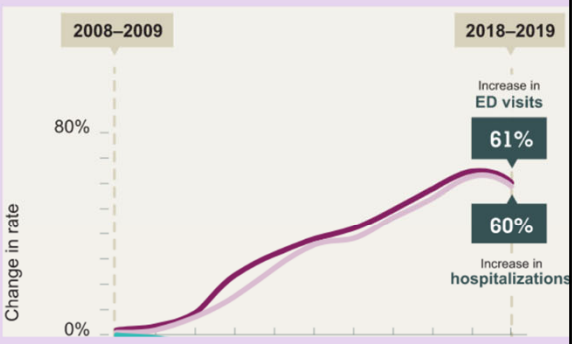
YDI Youth Development Instrument

BC Centre for Disease Control

SFU SIMON FRASER UNIVERSITY

STATE OF YOUTH MH IN CANADA PRE-PANDEMIC

- ~1.2 million diagnosed with mental disorder; < 20% receive appropriate treatment[1]
- In 2012 national mental health survey, mood and substance use disorders were highest among 15-24 year-olds[2]



Over the past decade, 60% increase in mental health-related hosptializations

Source: Canadian Institute for Health Information

- Increasing trends of poor/fair perceived mental health and diagnosed mood/anxiety disorders among 12-24 years-olds[3]

SIGNIFICANCE OF YOUTH

- 70% of Canadians living with mental illness have onset of symptoms before the age of 18 [1]
- Adolescence is a developmental transition period between childhood and early adulthood involving the navigation of new physical, hormonal, cognitive, emotional changes as well as social challenges [5]
- Potential for increased life satisfaction coupled with onset and escalation of psychopathology [6]
- This period presents a critical time for mental illness prevention and promotion of mental health and well-being [6,7]

The New York Times — THE LEARNING NETWORK | Teens on a Year That Changed Everything

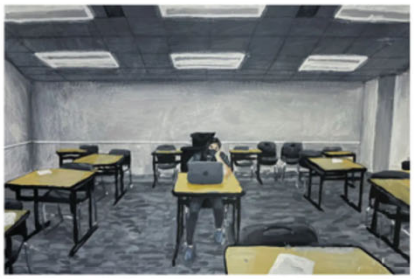
1. A Generation Trapped in Its Bedroom

"For some, it was a time of reflection. For many, it was a dark period of isolation. For a generation, it was a defining collective experience." — Parrish André, 18

WHIPPANY, N.J.
Sunnina Chen, 16

DALLAS
Ryan Daniel, 18

FRISCO, TEXAS
Camila Salinas, 16



CHICAGO
Stevia Ndoe, 18

INITIAL IMPACTS OF COVID-19

Child and Adolescent Mental Health

Child and Adolescent Mental Health Volume **, No. *, 2021, pp. **–** doi:10.1111/camh.12501

Review: Mental health impacts of the COVID-19 pandemic on children and youth – a systematic review

Hasina Samji[1,2,3], Judy Wu[4], Amilya Ladak[1], Caralyn Vossen[5], Evelyn Stewart[3,6,7], Naomi Dove[4], David Long[6] & Gaelen Snell[1,8]

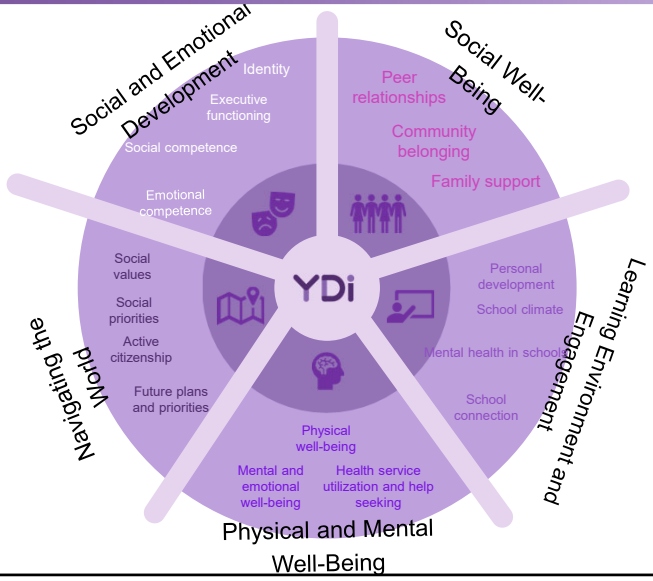
- Older adolescents, girls, and youth living with neurodiversities and/or chronic physical conditions had increased likelihood of negative mental health outcomes compared to pre-pandemic

4

YDI Dimensions and Domains

Cross Cutting Domains

- Resilience
- Positive Childhood Experiences
- Thriving
- Positive Mental Health
- COVID-19 (YDI 2021)



WAVE 1 DATA ANALYSIS

Individual & Contextual Factors

Individual

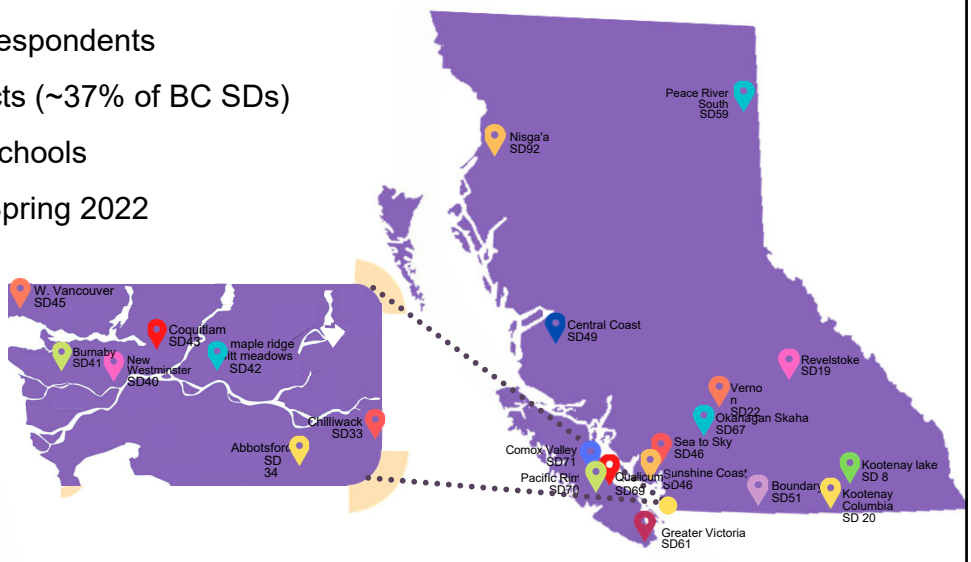
- Female/non-binary gender
- 2SLGBTQIA+ status
- Existing MH condition

Contextual

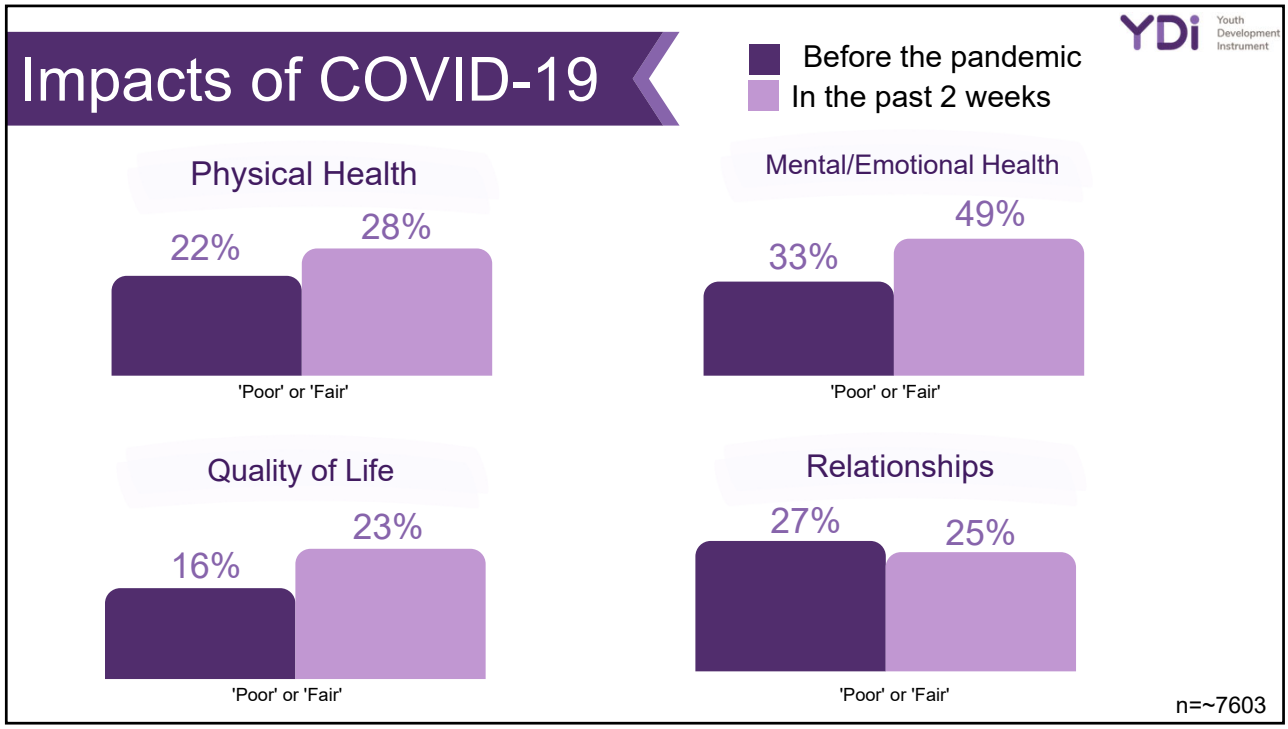
- Loneliness
- School pressure
- Good sleep

Wave 2 Participating Districts

- ~9,000 student respondents
- 22 School Districts (~37% of BC SDs)
- 5 Independent Schools
- Data collection Spring 2022

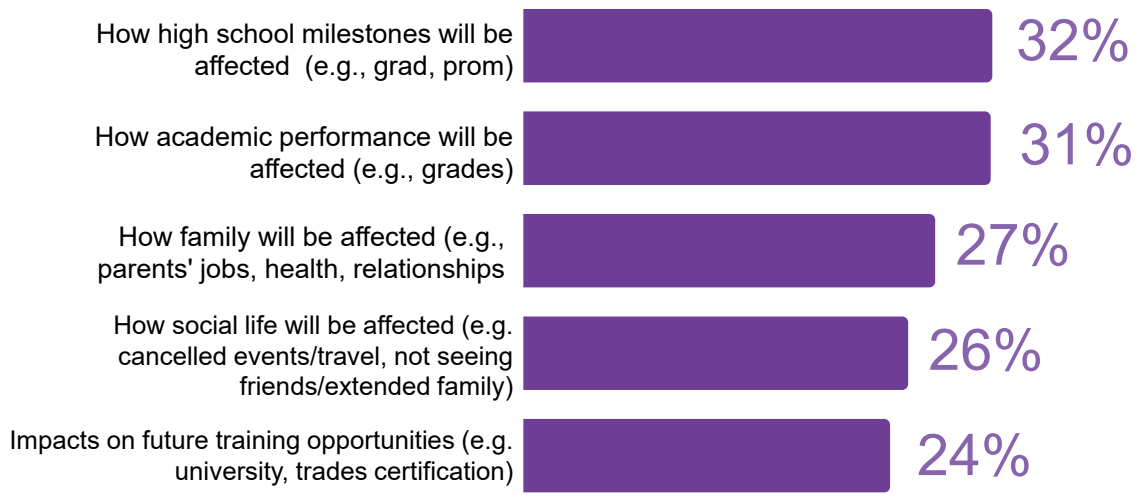


Impacts of COVID-19



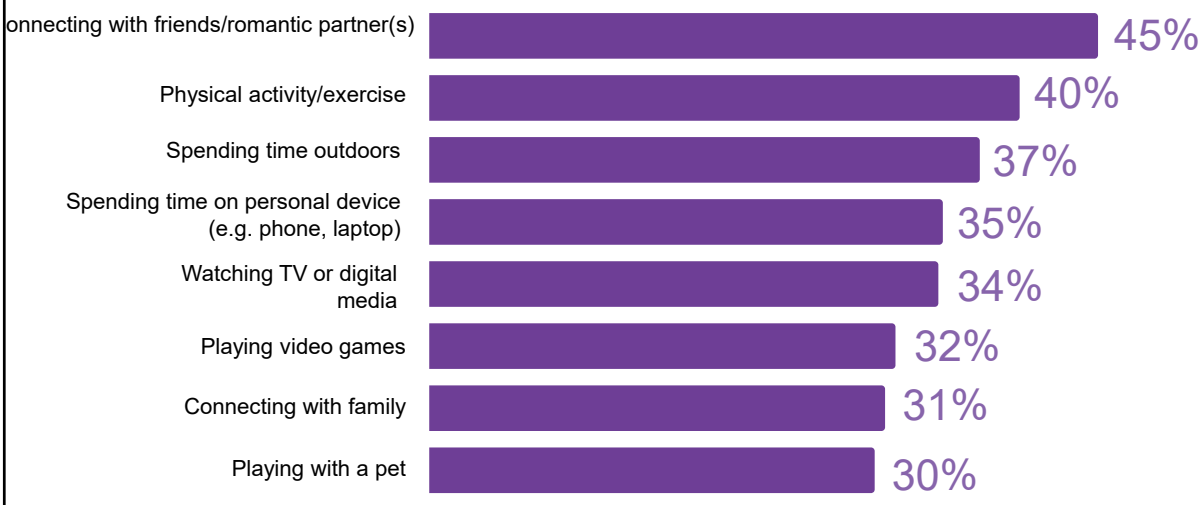
n=~7603

Top 5 COVID-Related Worries



n=7,800

Coping Strategies

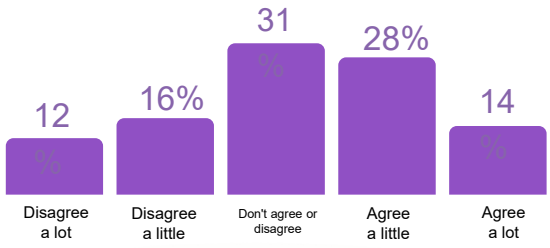


*Participants could select all that apply

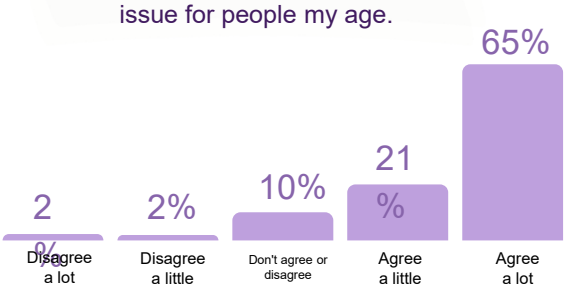
n=~8,175

Perceptions about MH in Schools

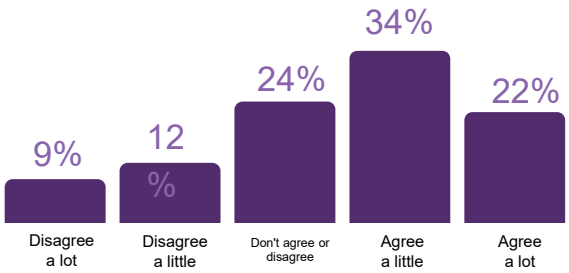
People at my school talk openly about mental health.



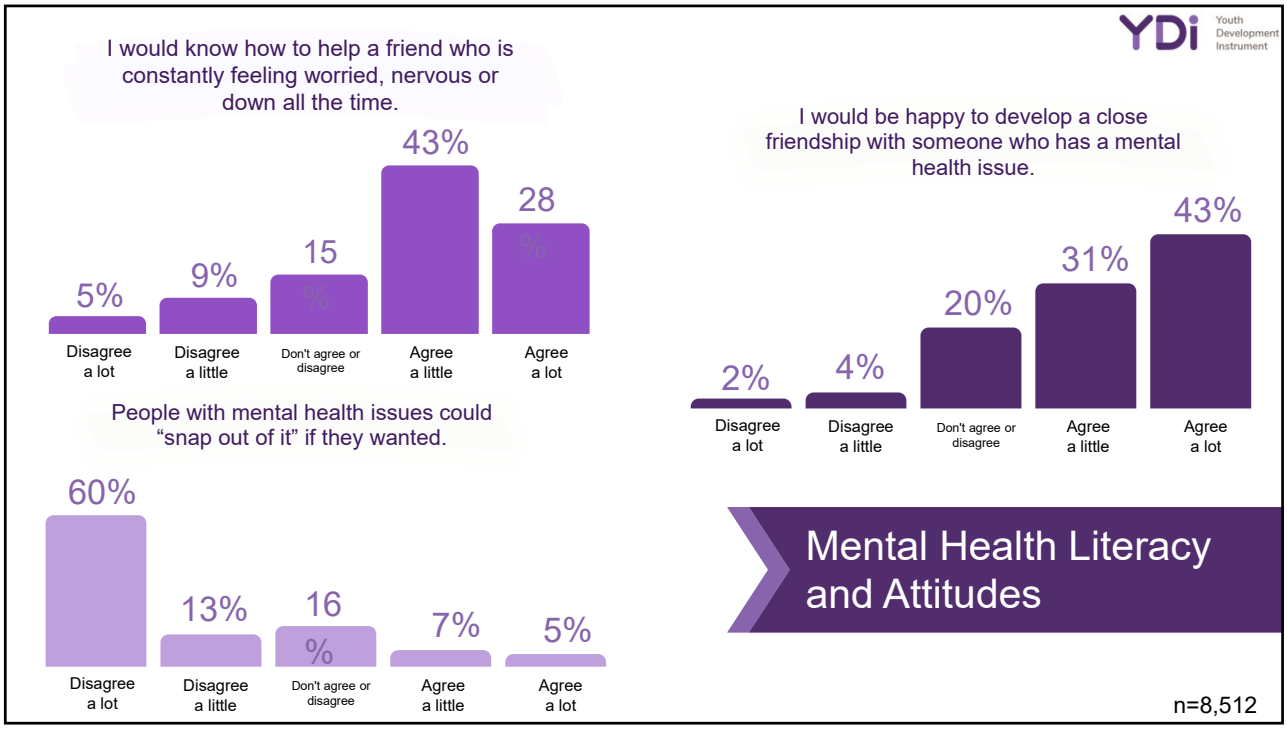
Mental health is an important issue for people my age.

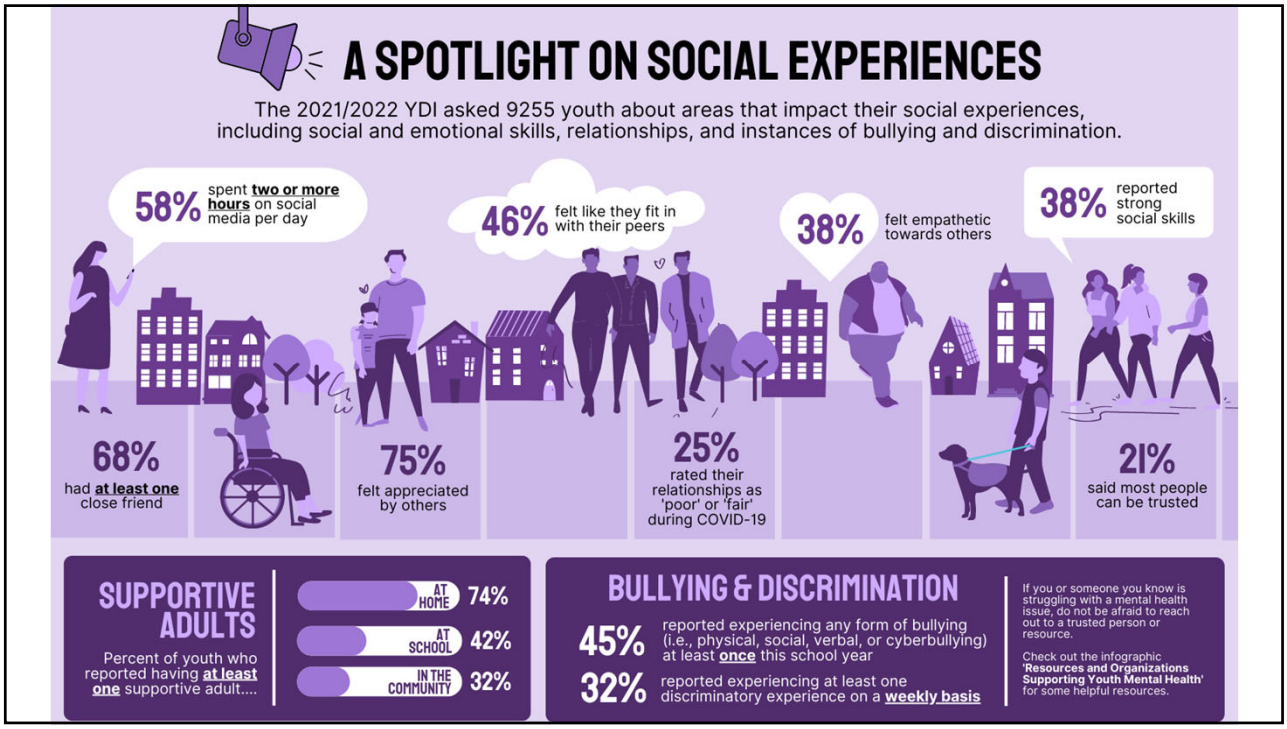


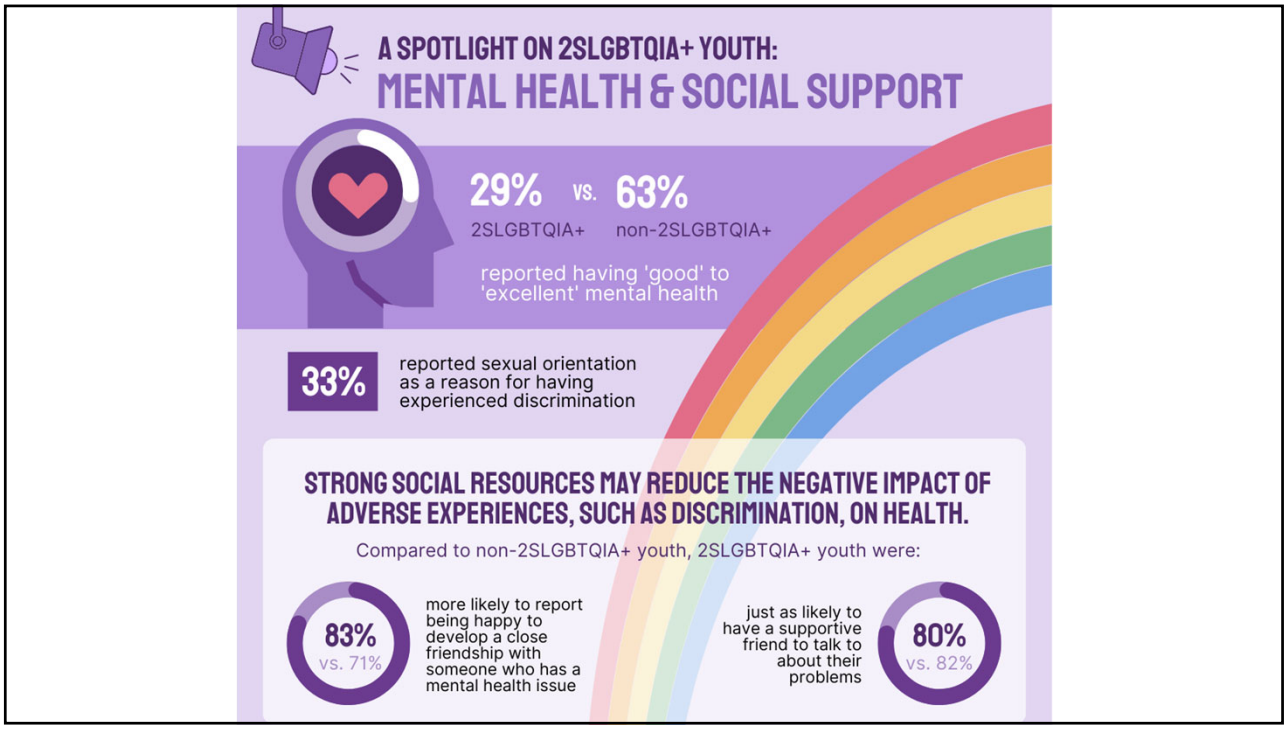
My school encourages students to take care of their mental health.

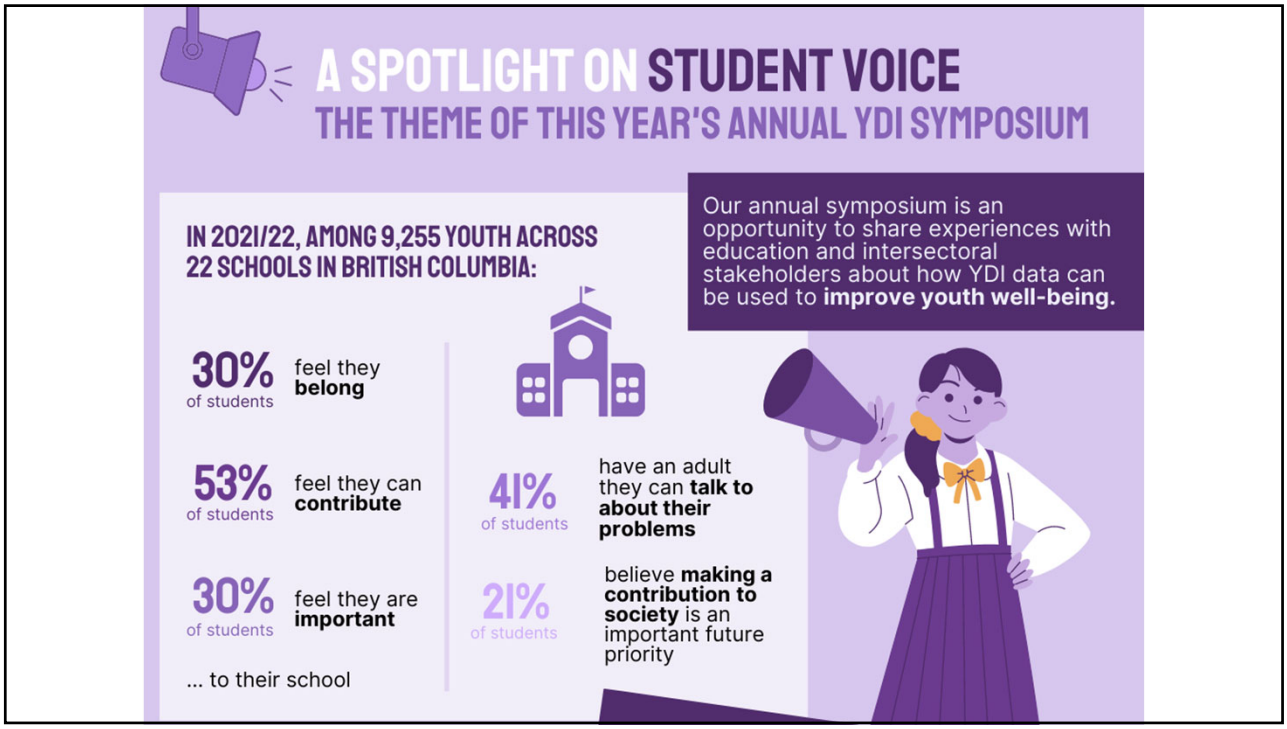


n=~8,508


YDI Youth Development Instrument
I would know how to help a friend who is constantly feeling worried, nervous or down all the time.
5%
9%
15%
43%
28%
Disagree a lot
Disagree a little
Don't agree or disagree
Agree a little
Agree a lot
People with mental health issues could "snap out of it" if they wanted.
60%
13%
16%
7%
5%
Disagree a lot
Disagree a little
Don't agree or disagree
Agree a little
Agree a lot
I would be happy to develop a close friendship with someone who has a mental health issue.
2%
4%
20%
31%
43%
Disagree a lot
Disagree a little
Don't agree or disagree
Agree a little
Agree a lot
Mental Health Literacy and Attitudes
n=8,512


A SPOTLIGHT ON SOCIAL EXPERIENCES
The 2021/2022 YDI asked 9255 youth about areas that impact their social experiences, including social and emotional skills, relationships, and instances of bullying and discrimination.
58% spent two or more hours on social media per day
46% felt like they fit in with their peers
38% felt empathetic towards others
38% reported strong social skills
68% had at least one close friend
75% felt appreciated by others
25% rated their relationships as 'poor' or 'fair' during COVID-19
21% said most people can be trusted
SUPPORTIVE ADULTS
Percent of youth who reported having at least one supportive adult....
AT HOME 74%
AT SCHOOL 42%
IN THE COMMUNITY 32%
BULLYING & DISCRIMINATION
45% reported experiencing any form of bullying (i.e., physical, social, verbal, or cyberbullying) at least once this school year
32% reported experiencing at least one discriminatory experience on a weekly basis
If you or someone you know is struggling with a mental health issue, do not be afraid to reach out to a trusted person or resource.
Check out the infographic 'Resources and Organizations Supporting Youth Mental Health' for some helpful resources.


A SPOTLIGHT ON 2SLGBTQIA+ YOUTH:
MENTAL HEALTH & SOCIAL SUPPORT
29%
2SLGBTQIA+
VS.
63%
non-2SLGBTQIA+
reported having 'good' to 'excellent' mental health
33%
reported sexual orientation as a reason for having experienced discrimination
STRONG SOCIAL RESOURCES MAY REDUCE THE NEGATIVE IMPACT OF ADVERSE EXPERIENCES, SUCH AS DISCRIMINATION, ON HEALTH.
Compared to non-2SLGBTQIA+ youth, 2SLGBTQIA+ youth were:
83%
vs. 71%
more likely to report being happy to develop a close friendship with someone who has a mental health issue
just as likely to have a supportive friend to talk to about their problems
80%
vs. 82%


A SPOTLIGHT ON STUDENT VOICE
THE THEME OF THIS YEAR'S ANNUAL YDI SYMPOSIUM
IN 2021/22, AMONG 9,255 YOUTH ACROSS 22 SCHOOLS IN BRITISH COLUMBIA:
Our annual symposium is an opportunity to share experiences with education and intersectoral stakeholders about how YDI data can be used to improve youth well-being.
30% of students feel they belong
53% of students feel they can contribute
30% of students feel they are important
... to their school
41% of students have an adult they can talk to about their problems
21% of students believe making a contribution to society is an important future priority

COVID & KIDS PROJECT

DR. EVELYN STEWART, MD

Investigator | BC Children's Hospital
Director of Research, Child and Adolescent Psychiatry | BC Children's Hospital
Professor | Department of Psychiatry, UBC

DR. HASINA SAMJI, PHD, MSC

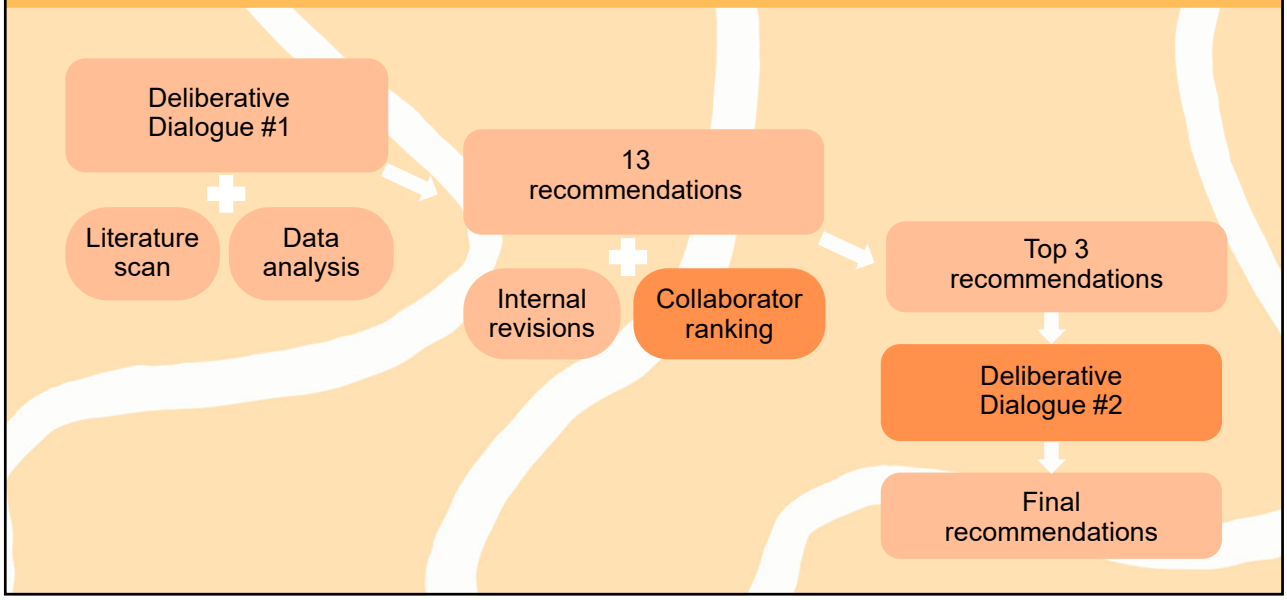
Senior Scientist in Population Mental Well-being | BC Centre for Disease Control, PHSA
Assistant Professor | Faculty of Health Sciences, SFU

COVID & KIDS PROJECT

How can we best support youth mental health through the pandemic recovery phase?

- Analyze data from two provincial surveys (YDI & PICS)
- Bring together youth mental health partners
- Identify disproportionately impacted sub-populations
- Inform efforts to promote resiliency and support mental health & well-being

RECOMMENDATION DEVELOPMENT



TAKE PRIORITY ACTIONS TO ADDRESS MENTAL HEALTH DISPARITIES AMONG UNDERSERVED POPULATIONS

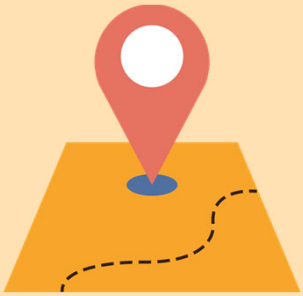
- Certain sub-groups of youth have been disproportionately impacted by the COVID-19 pandemic
- Girls, non-binary, 2SLGBTQIA+ youth, youth with a prior MH condition, youth from low-income households, racialized youth, & Indigenous youth, have reported poorer MH outcomes.

SCHOOLS CAN PROVIDE TARGETED MHW SUPPORTS FOR UNDERSERVED STUDENTS

IMPROVE YOUTH'S KNOWLEDGE OF AND CONNECTION TO MH RESOURCES

- Develop a repository of youth mental health and well-being resources
- Address youth's knowledge gaps about mental health and the resources available to them

SCHOOLS CAN ENSURE INCLUSION OF RESOURCES FOR DIVERSE YOUTH



INCREASE YOUTH REPRESENTATION AND INCLUSION IN YOUTH MH RESEARCH, PROGRAM DEVELOPMENT, AND EVALUATION

- The inclusion of youth voices is important for decision-making across sectors for decision-making
- As outlined by the United Conventions on the Rights of the Child (Articles 12 & 13) there is an obligation to hear, respect, and value youth voices

SCHOOLS CAN DEVELOP CLEAR STRATEGIES TO INVOLVE YOUTH THROUGHOUT THE DEVELOPMENT OF INITIATIVES THAT PROMOTE ACTIVE ENGAGEMENT AND AVOID TOKENISM

EXPAND EXISTING MH PROGRAMS AND INTERVENTIONS PROVEN TO BE EFFECTIVE AT IMPROVING YOUTH MH

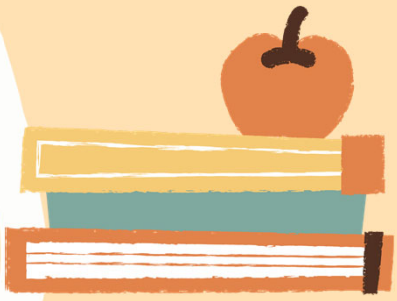
- Many evidence-based preventative interventions are not yet systematically implemented in BC.
- Finding evidence-based programs for youth MH is highly decentralized.

WE ARE CREATING AN ONLINE REPOSITORY OF EVALUATED STRATEGIES AND INTEVENTIONS FOR SCHOOLS.

ENHANCE OR STRENGTHEN SOCIAL AND EMOTIONAL LEARNING (SEL) STRATEGIES WITHIN SCHOOL CURRICULA AND COMMUNITY PROGRAMMING TO INCREASE RESILIENCE AND POSITIVE MENTAL HEALTH.

- SEL resources and MH literacy may differ widely across districts and between school
- Enhancing SEL strategies can improve learning experiences for all students across BC.

INCREASE INCORPORATION OF SEL AND MH LITERACY INTO SCHOOL CURRICULA



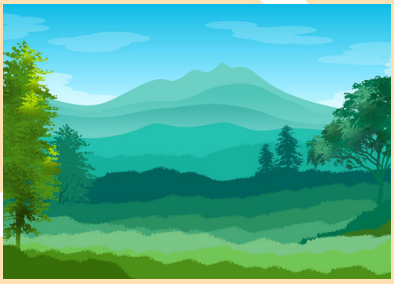
REFRAMING EXTRACURRICULARS AS CENTRAL TO YOUTH, FAMILY, AND COMMUNITY WELL-BEING

- Extracurricular activity is often considered supplementary and subject to inequitable access
- Family access, living in urban areas, and gender are associated with differences in participation of extracurricular activies

E.G., FREE COMMUNITY-CENTRE ANNUAL PASSES FOR YOUTH

INCORPORATE MORE TIME OUTDOORS INTO SCHOOL CURRICULUMS

- Outdoor learning has been found to improve youth's health in the scientific literature (Oberle et al., 2019)
- Also meets calls to increase outdoor learning to curb COVID-19 spread in indoor spaces



INCORPORATE INDIGENOUS LAND-BASED ACTIVITIES AND EXPERIENTIAL LEARNING IN SCHOOLS

SUPPORT AND INCREASE MH KNOWLEDGE AND KNOWLEDGE HOLDERS

- Reported unmet mental health needs illustrate demand for more MH knowledge holders in the community
- Knowledge holders can increase service accessibility fill support gaps, and reduce mental health stigma.

SCHOOLS CAN IMPLEMENT PEER-TO-PEER MENTAL HEALTH AND WELL-BEING PROGRAMS

Thank you!

QUESTIONS?

hsamji@sfu.ca
chartlab.ca
@HasinanisaH
@yditeam

YDi Youth Development Instrument

CHART
CAPTURING HEALTH AND RESILIENCE TRAJECTORIES

Well-Being: An Everyone Endeavour

SD44 Standing Committee

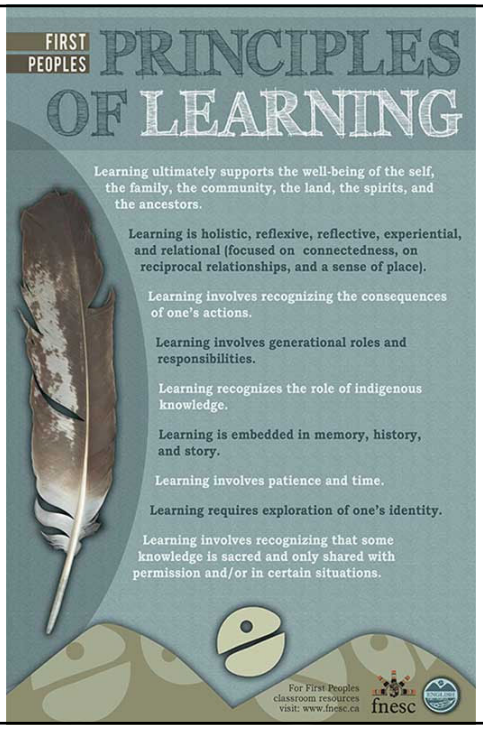
October 4, 2022

Jeremy Church – District Principal of Safe and Health Schools

Sakihiwewin

"How do I weave love into my actions?"

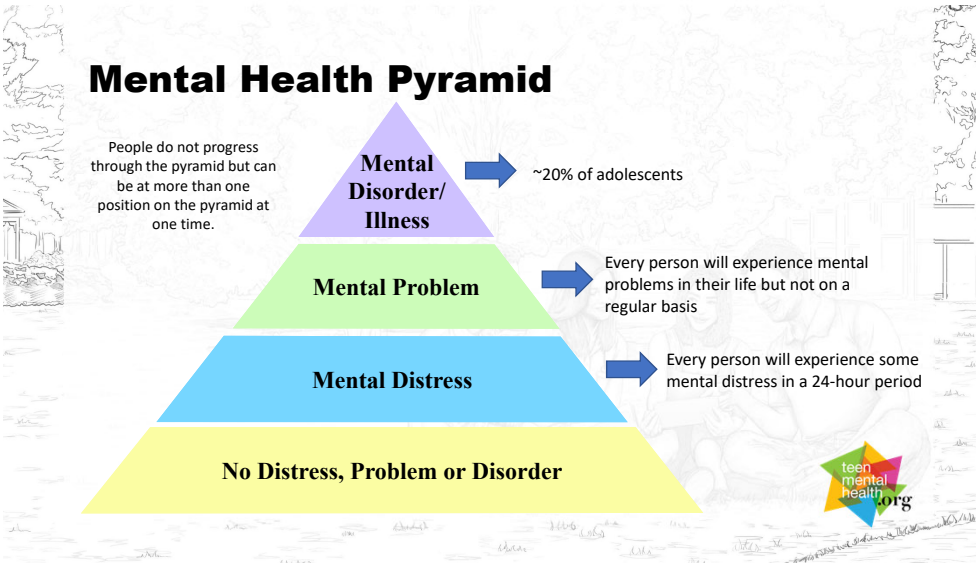
Sense of Belonging
Mental Health Literacy
Integrated Mental Health Supports
Social Emotional Learning
nvsd

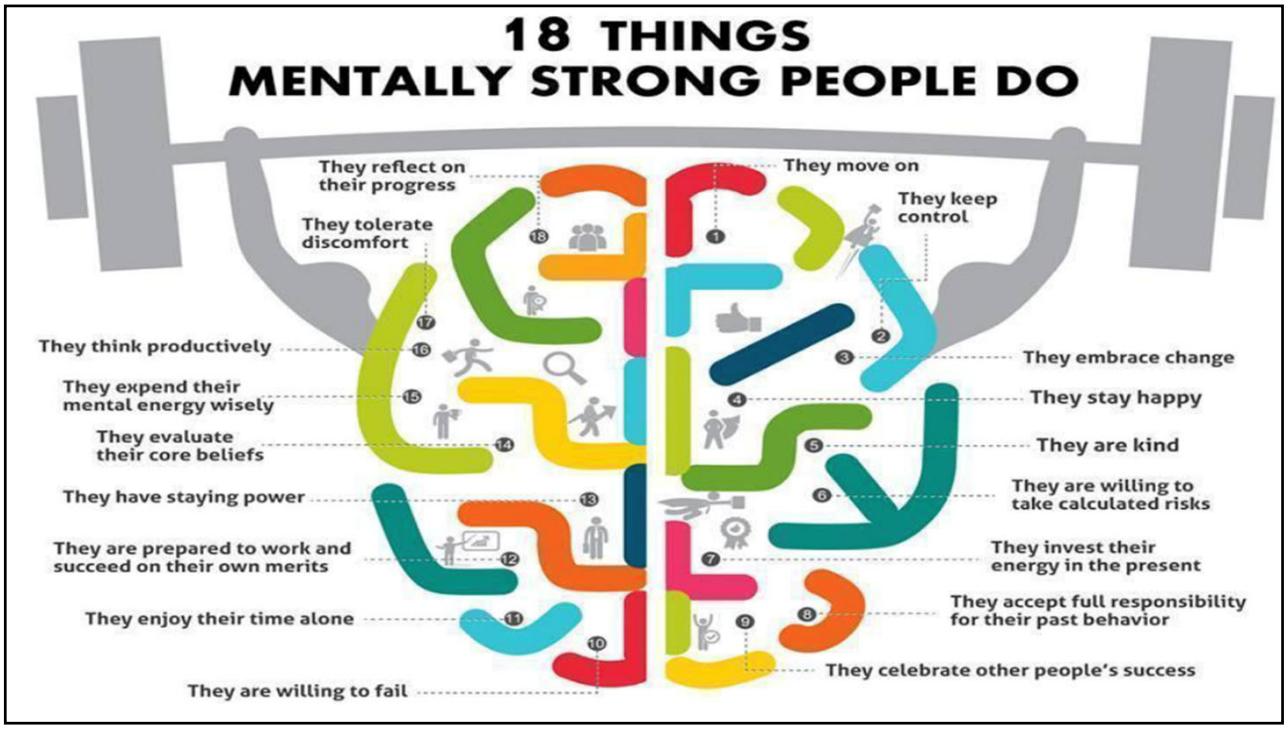

FIRST PEOPLES
PRINCIPLES OF LEARNING
Learning ultimately supports the well-being of the self, the family, the community, the land, the spirits, and the ancestors.
Learning is holistic, reflexive, reflective, experiential, and relational (focused on connectedness, on reciprocal relationships, and a sense of place).
Learning involves recognizing the consequences of one's actions.
Learning involves generational roles and responsibilities.
Learning recognizes the role of indigenous knowledge.
Learning is embedded in memory, history, and story.
Learning involves patience and time.
Learning requires exploration of one's identity.
Learning involves recognizing that some knowledge is sacred and only shared with permission and/or in certain situations.
For First Peoples classroom resources visit: www.fnesc.ca
fnesc

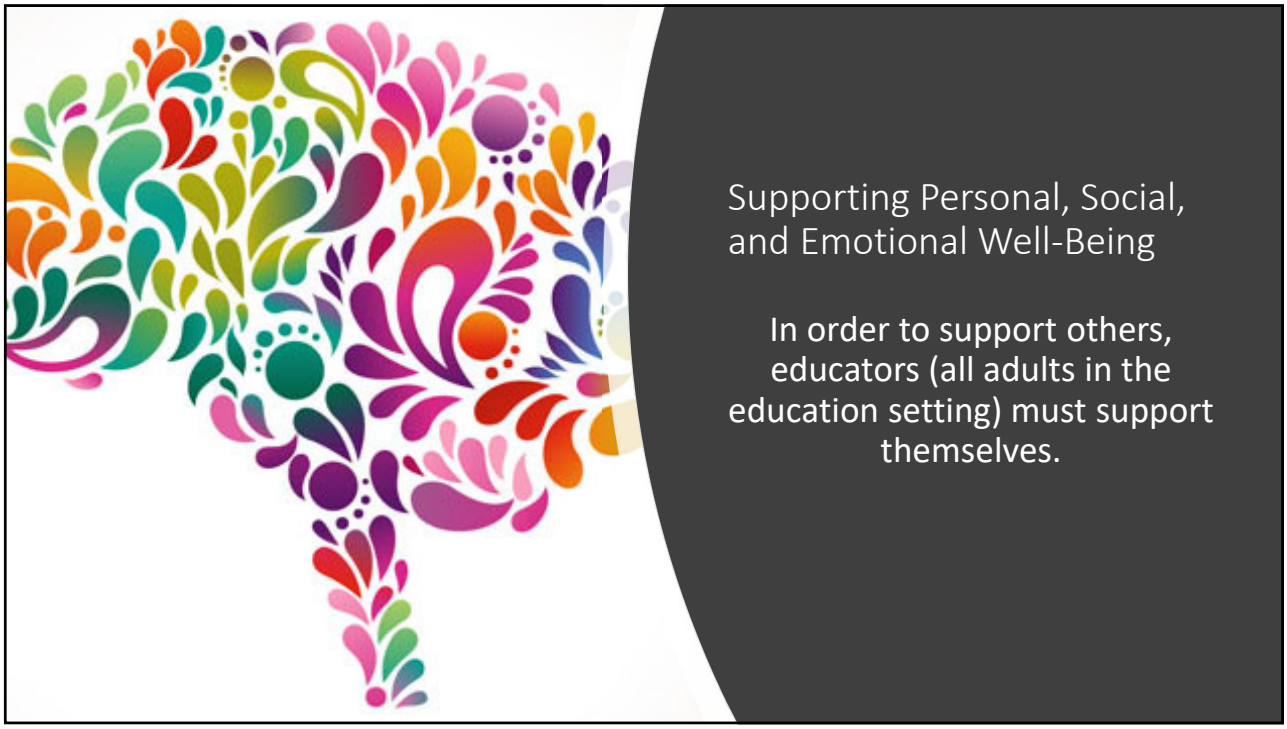
COMMUNITIES
FAMILIES & CAREGIVERS
SCHOOLS
CLASSROOMS
Self-Awareness
Self-Management
Social & Emotional Learning
Social Awareness
Responsible Decision-Making
Relationship Skills
SEL Instruction & Classroom Climate
Schoolwide Culture, Practices & Policies
Authentic Partnerships
Aligned Learning Opportunities

What is Mental Health?

- The capacity to successfully adapt to life's circumstances. It does not mean happiness nor does it mean not having negative feelings, worries or difficulties. It includes the experience of stress and the use of that experience to help you solve the many and frequent challenges of life. People develop that capacity in the context of human relationships and usual developmental processes.




18 THINGS
MENTALLY STRONG PEOPLE DO
They reflect on their progress
They tolerate discomfort
They think productively
They expend their mental energy wisely
They evaluate their core beliefs
They have staying power
They are prepared to work and succeed on their own merits
They enjoy their time alone
They are willing to fail
They move on
They keep control
They embrace change
They stay happy
They are kind
They are willing to take calculated risks
They invest their energy in the present
They accept full responsibility for their past behavior
They celebrate other people's success


Supporting Personal, Social, and Emotional Well-Being
In order to support others, educators (all adults in the education setting) must support themselves.

Jamieson
NATURAL SOURCES
Since 1922
Stress
ease
B COMPLEX & IMMUNE SUPPORT
COMPLEXE B ET SOUTIEN IMMUNITAIRE
90
CAPLETS
Stress relief formula
Formule pour soulager le stress

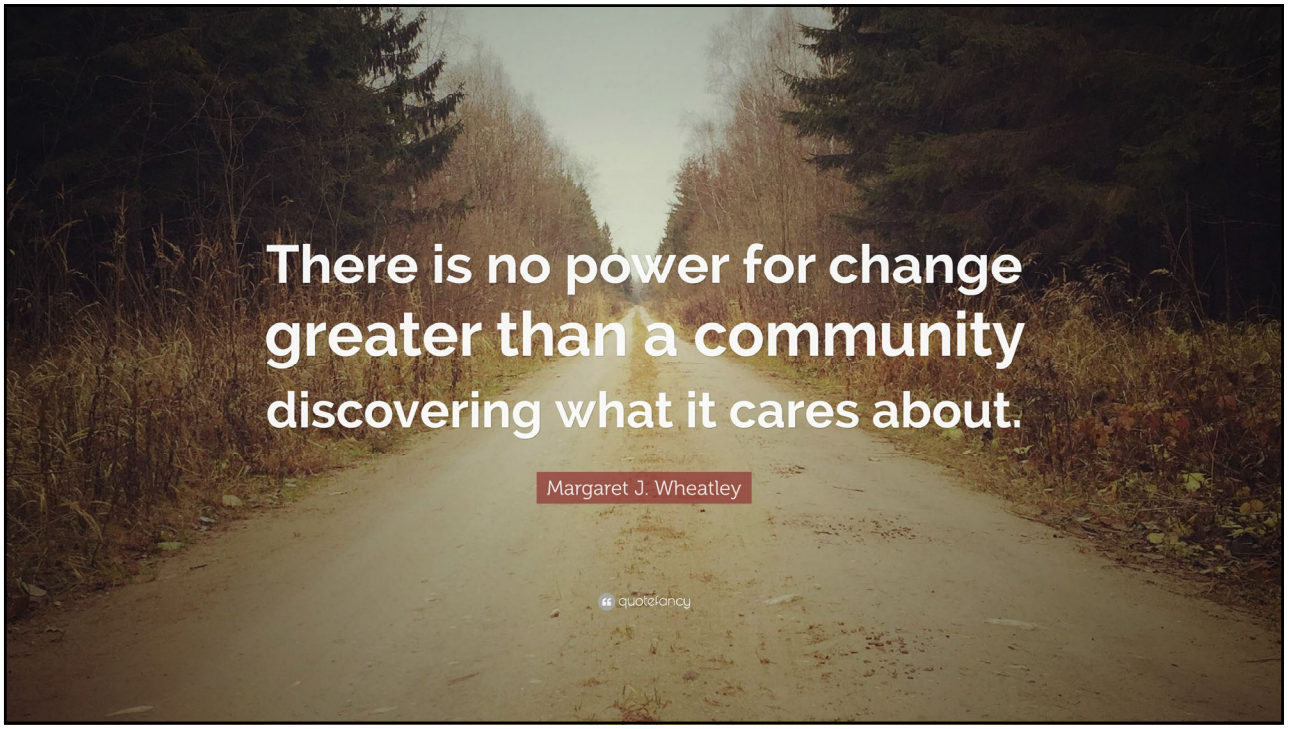
Well-Being
Cooking
DANIEL
GOLEMAN
FOCUS
The Hidden Driver
of Excellence
Act Like a
Success
STEVE
HARVEY
MESSY
MESSY

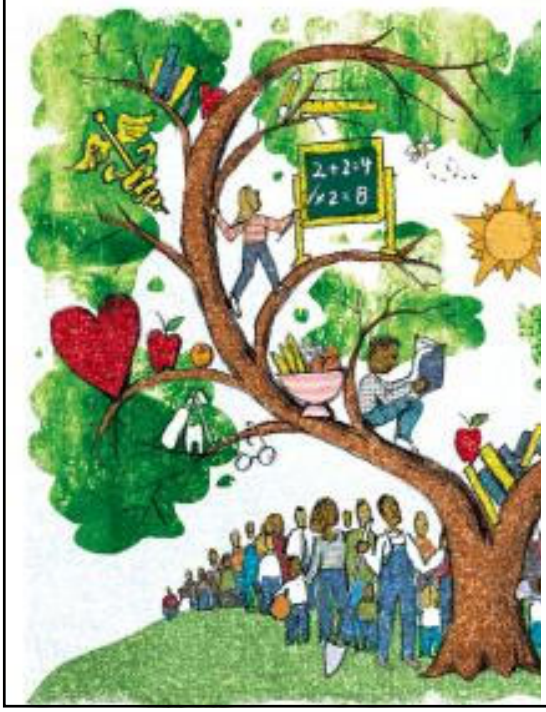
But ...

OPINION

Put down the self-help books. Resilience is not a DIY endeavour

MICHAEL UNGAR
CONTRIBUTED TO THE GLOBE AND MAIL





Schools ARE Communities…For all

- Natural intersection point
- Varied backgrounds
- Diverse experiences
- Reflective of our community as a whole
- Schools are the EVERYBODY
- Connections to Well-Being are incredibly important at school

Reflecting on Youth Mental Health - "Building Healthy, Resilient Communities"

Sierra Lee

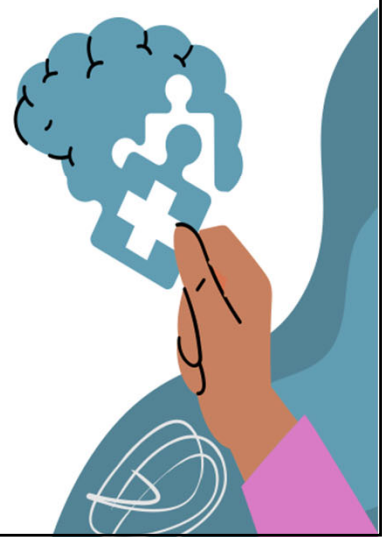
My experience

Advocacy

1. Youth Development Instrument Youth Advisory Council

1. **Real Talks**

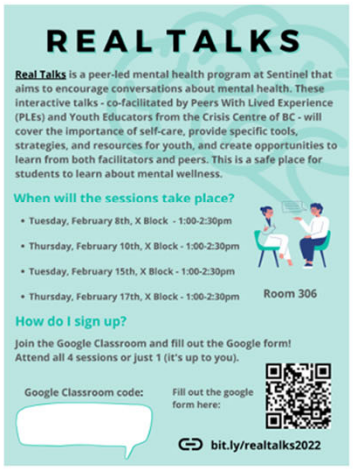
Personal



What is Real Talks?

A peer support mental health program that aims to provide high school-aged youth with a safe space for conversations about mental health

- *Peers with Lived Experience* co-facilitate "talks" alongside experienced Crisis Centre facilitators
- Topics covered: the importance of self-care, reaching out for support, mindfulness tools and strategies
- Piloted at Sentinel Secondary and Sutherland Secondary



The "Why?" - Addressing Mental Health Stigma

"It's ok"

Normalizing prioritizing academics over mental well-being

Lack of knowledge of school/community mental health resources and how to seek help

Internalized shame and isolation

Associating vulnerability with weakness

Creating a space for mental health conversations

Why?

- ➔ Addressing mental health stigma and creating an environment where conversations about mental well-being are normalized
- ➔ Normalizing sharing mental health struggles with peers + recognizing strength in vulnerability
- ➔ Promoting knowledge of available mental health supports among youth

- Changes to daily routines - adapting to different learning models
- Isolation from peers
- Extra-curricular activities essential for well-being restricted or cancelled
- Transition from in-person to online mental health support services

Responding to the effects of COVID on youth mental health

Looking Forward… What's Next?

Expanding "Real Talks"

Schools supporting youth-organized spaces for mental health conversations

Increasing emphasis on mental health education

Youth will know how to access support

Crisis Centre
Real Talks - Youth Program Inquiry
These Talks aim to engage high school youth in discussions about mental health and wellness in a safe and structured environment over four 1.5-hour sessions, each co-facilitated by the Crisis Centre's Youth Educator and Peer Leaders with Experience.
This series is organized in partnership with schools. Participation of student peer-leaders and school counsellor/ teacher is required.
Limited number of Real Talks is available at no cost to Vancouver and the North Shore schools.
To request Real Talks at your school or for more information, please submit your details below:
* Your Name
First
Last
* Your Role (Youth Leader /Teacher / School Counsellor)
bit.ly/realtalks-2022
Contact: realtalks@crisiscentre.bc.ca

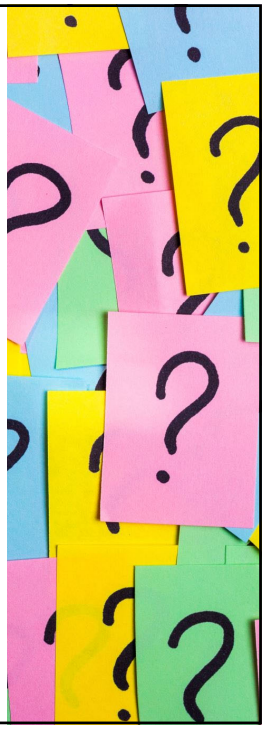
CREDITS: This presentation template was created by Slidesgo, including icons by Flaticon, infographics & images by Freepik

Panel Discussion

October 4th Standing Committee Meeting

Table Talks

- What did you hear during the panel presentations that resonates with you/your table?
- What questions remain yet to be addressed or answered?
- Table facilitator will capture notes on page
- Table groups will be invited to share 1 resonance and/or 1 question
- 15-20 minutes



Guiding Questions

- More and more open conversations about mental health and well-being are happening. Why is this important and how can we support these conversations?
- Is there community-based stigma to talking about mental health or mental illness? What does that look like/sound like? Who is most impacted?
- How has COVID-19 impacted child, youth and community mental health?
- What role should schools and school communities play regarding mental health and well-being?
- Five to 10 years from now, what do conversations about, and structures connected to, mental health and well-being look like/sound like, in schools and in our communities?

thank you