



CHSSN

Youth Mental Health Initiative

evaluation report

Compiled by Sunita Nigam, PhD, for the Community Health and Social Services Network

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Evaluation Methodology:

This report arises out of an evaluation process that began in September 2021 and finished in June 2022. This process involved the attendance of the evaluator during all Community of Practice (CoP) meetings for the YMHI, one-on-one meetings with the Program Manager for the YMHI at CHSSN, and two meetings with the Advisory Committee for the YMHI. In consultation with the Program Manager, Advisory Committee and the organizations under the YMHI, the evaluator designed the Youth Pulse Check, a survey created to collect information about the mental health struggles and wellbeing of English-speaking youth from across Quebec and to promote the crisis services offered by Kids Help Phone. This survey was disseminated through Instagram and Facebook by organizations and institutions across the province from December 21st 2021 to March 31st 2022 with the help of the digital agency, Third Wunder. As part of her evaluation, the evaluator consulted, interpreted, and summarized the data collected from the 456 respondents to this survey. Beyond these activities, the evaluation process for the first year of the YMHI included two sets of 20-minute to 1-hour phone interviews, which the evaluator conducted with the YMHI project lead and/or Executive Directors from all organizations participating in the initiative from December 2021 to April 2022. The initial set of interviews were designed so the evaluator could: become acquainted with the project lead and/or Executive Director of each participating organization; learn about

the regional contexts of English-speaking youth across Quebec; and learn about the YMHI project of each participating organization. The initial set of interviews consequently gave participating organizations the opportunity to become acquainted with the evaluator and ask any questions about the evaluation process. The second set of interviews was structured around 4 key questions decided upon by the evaluator in consultation with CHSSN. These questions are included in this report as Appendix A. Based on her conversations with participating organizations and her existing knowledge about the regional contexts of the English-speaking Community (ESC) from previous research, the evaluator wrote texts about the regional contexts of the ESCs and English-speaking youth for each organization. Each organization was asked to edit and expand upon these texts. The evaluator also consulted and analyzed the end-of-year progress reports provided to CHSSN by each participating organization in April 2022, as well as other key documents created by CHSSN describing the design and goals of the YMHI. Upon consulting with the Program Manager from CHSSN, it was determined that 2 follow-up questions needed to be asked to all participating organizations. These are included at the end of this report as Appendix B. These final questions were asked via email to all participating organizations in May and June 2022. All participating organizations were given the opportunity to review their section of this report for accuracy before the report was completed.

Key Terminology:

Aire ouverte: An Aire ouverte is a space developed by each CISSS and CIUSSS for youth ages 12-25 where a range of free health and wellness services are offered. The Aire ouvertes are a new network of Integrated Youth Services implemented across the province of Quebec by each CISSS and CIUSSS according to their territories. Thirty sites were foreseen to be in development for March 2022. Each service point has been developed with the participation of youth ages 12-25 and has professionals such as nurses and social workers on hand.

CISSS or CIUSSS: Integrated Health and Social Services Centres (CISSSs) and Integrated University Health and Social Services Centres (CIUSSSs) provide health services to Quebecers through various points of service such as CLSCs, CHSLDs or hospitals.

CLC: Community Learning Centres (CLCs) arose out of the CLC Initiative in 2006, with which Quebec's Ministry of Education introduced CLC schools. CLC schools are designed to support student achievement within and beyond the classroom and to contribute to the greater vitality of Quebec's English-speaking Official Language Minority Community. CLCs foster connections between schools, families, local organizations, and regional and provincial bodies to strengthen the academic and developmental outcomes for English-speaking youth.

CJE: Carrefours Jeunesse-emploi (CJEs) support the economic and social inclusion of Quebec's youth by helping them to improve their employability and by connecting them with employment opportunities.

CoP: A Community of Practice (CoP) is a formal or informal learning community that shares a common practice related to a shared domain of interest. Different from a network that only shares existing knowledge, a CoP generates new knowledge through its collective interactions.

ESC: English-speaking Community

OLMC: Quebec's English speakers are one of Canada's Official Language Minority Communities (OLMCs).

MRC: Quebec is divided into 87 Regional County Municipalities (MRCs). MRCs are political entities that act as regional municipalities.

NPI: CHSSN's Network Partnership Initiative (NPI), which has been financed by Health Canada since 2004, supports the development and mobilization of community health and social services networks throughout the province of Quebec to engage with local and regional partners in order to improve access to health and social services for the ESC. The NPI is inspired by CHSSN's Community Mobilization Model which encourages ESCs to adopt an intersectoral networking and partnership approach and take action on key health determinants impacting the health and wellbeing of Quebec's ESCs. For more information on CHSSN's Community Development Model, please refer to: <https://chssn.org/projects/npi/>

RRS: The Ministère de la Santé et des Services sociaux (MSSS) fulfills its mission by sharing its responsibilities with health and social services institutions spread across 18 health regions referred to as RRS (régions sociosanitaires).

YMHI: Youth Mental Health Initiative

YPC: As part of its support of the YMHI, CHSSN designed and promoted a Youth Pulse Check (YPC) survey focused on the mental health needs, challenges, and experiences of Quebec's English-speaking youth (18-29). The YPC received 456 survey responses from across Quebec.

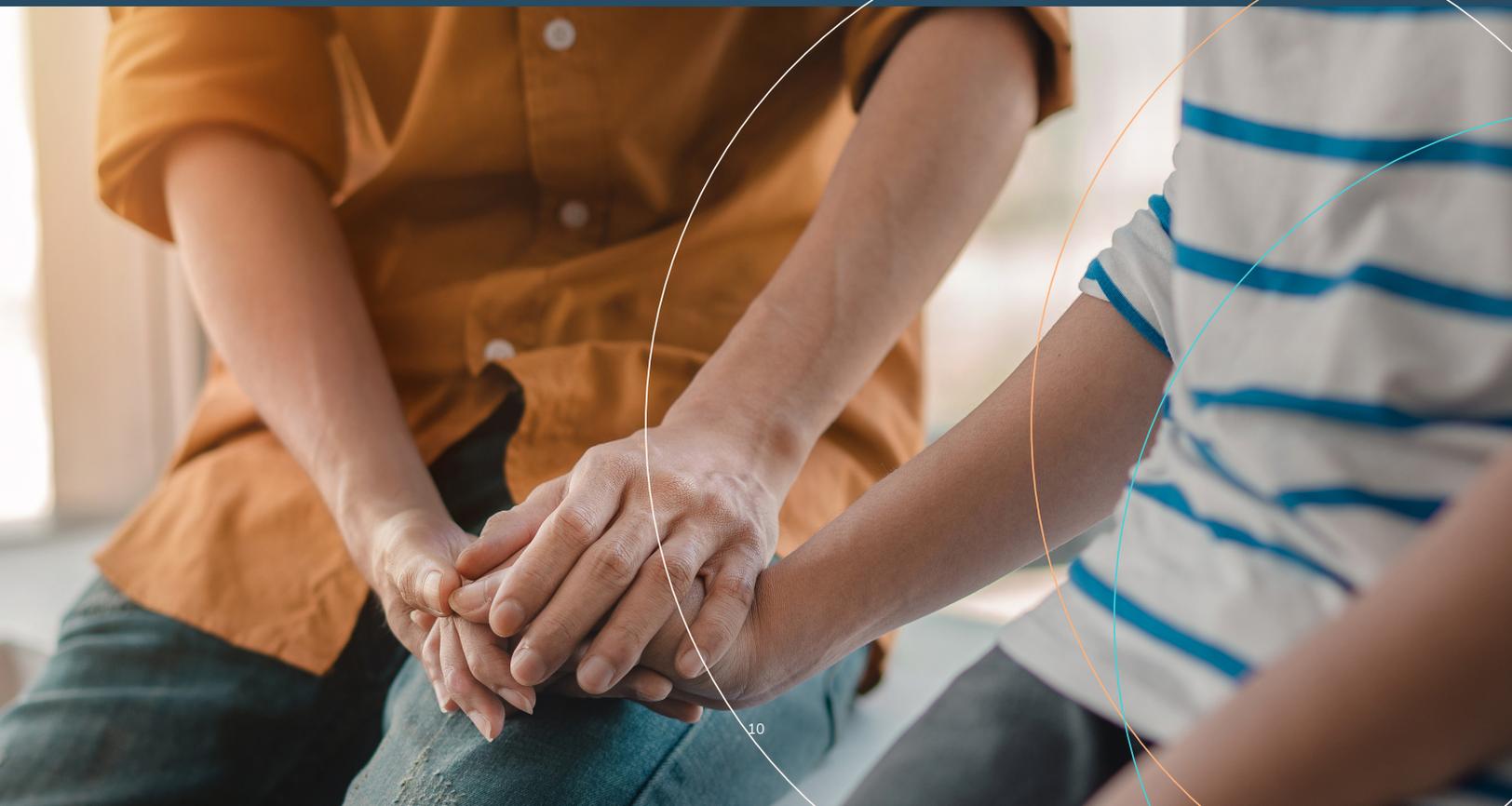


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Introduction

This evaluation report offers an overview of the first year of the 2021-2024 Youth Mental Health Initiative (YMHI). The YMHI is funded by the Secrétariat à la jeunesse, supported by the Lucie and André Chagnon Foundation, and managed by the Community Health and Social Services Network (CHSSN). Within the YMHI, CHSSN worked with 24 organizations who partnered with 221 other organizations working in 12 regions across Quebec and 3 partners working throughout the province of Quebec with the central goal of **improving the access of Quebec's English-speaking youth between the ages of 15-29 to mental health services and resources**. This evaluation report outlines the key outcomes, strengths, and challenges of the pilot year of the YMHI as a whole and according to region and organization. It also offers select recommendations for managing the next 2 years of the YMHI.



Project Description

Context

Research on the mental health and wellbeing of Quebec's youth since the advent of the COVID-19 pandemic has revealed concerning increases in symptoms of anxiety, depression, and trouble sleeping compared with data that was collected prior to the pandemic. These increases are especially high amongst Quebec's English-speaking youth. A study conducted by Dr. Melissa Généreux of the Faculty of Medicine and Mental Health Services University of Sherbrooke and advisor to Quebec's Directorate of Mental Health Services revealed that 37% of adults in Quebec aged 18-24 reported symptoms of anxiety or depression in the two weeks previous and that "[English speakers] are twice as likely as

[French speakers] to have anxiety or depressive symptoms." (Généreux, 2021). Prior to the COVID-19 pandemic young English speakers were also less likely to describe their mental health as excellent (31.3%) compared to their French-speaking counterparts (43.5%), to have good self esteem (44.9%, compared to 53.7%), or to report having people they can count on (71.9% versus 79.8%) (CHSSN, 2015).

Recent research has also demonstrated that Quebec's English-speaking youth have low access to information about available mental health services (CHSSN, 2019), and that the service infrastructure for mental health support for this demographic contains many gaps.



Goals

It is the situation outlined above that gave rise to the YMHI, which is seeking to improve the access of Quebec's English-speaking youth between the ages of 15-29 to mental health services and resources. Notably, the YMHI is especially concerned with involving youth in the design and implementation of mental health activities and events through their participation on the boards of organizations, youth councils and committees, focus groups, the production of mental health resources and activities, and more. The focus on this type of youth involvement is meant to improve the design of events and resources, to secure youth buy-in, and to reinforce a sense of agency amongst Quebec's English-speaking youth.

Another major goal of the YMHI is to reduce societal stigma surrounding mental health challenges and services. Indeed, a major finding of the YPC is that stigma around mental health and using mental health services amongst English-speaking youth remains high, especially but not exclusively in more rural regions. In fact, 28% of the 456 respondents to the YPC said that they would or do feel judged by others around them for seeking out help for their mental health. In the most urban regions of Quebec (Montreal, Laval, and Capitale-Nationale), 24% of the respondents said they felt that they would be judged for seeking help. In the rest of Quebec, this percentage jumps to 32%.

In sum, the central goals of the YMHI are to:

- Improve access to mental health services and resources for young English-speaking Quebecers (15-29)
- Involve young English-speaking Quebecers (15-29) in the design and implementation of mental health activities and events.
- Reduce stigma around mental health struggles and the use of or recourse to mental health services amongst English-speaking Quebecers (15-29)

Partners

For the YMHI, CHSSN partnered with 24 organizations of which 21 are situated across 10 regions of Quebec. Of the 24 organizations, 3 (LEARN, ELAN, and Y4Y Québec) are mandated to serve the entire province of Quebec. The partners that participated in the first year of the YMHI were:

Region	Organization
Capitale-Nationale	Jeffrey Hale Community Partners (JHCP)
Chaudières-Appalaches	Mégantic English-Speaking Community Development Corporation (MCDC)
	Council for Anglophone Magdalen Islanders (CAMI)
Gaspésie-Îles-de-la-Madeleine	Committee for Anglophone Social Action (CASA)
	Vision Gaspé-Percé Now (VGPN)
The Laurentians	4Korners
Laval	Agape: The Youth and Parents Agape Association Inc.
The Lower Saint Lawrence	Heritage Lower Saint Lawrence (HLSL)
Montérégie East	Montérégie East Community Partnership for the English-Speaking Community (MEPEC)
Montérégie West	Montérégie West Community Network (MWCN)
Montérégie Centre	South Shore Assistance and Referral Centre (ARC)

Region	Organization
	African Canadian Development and Prevention Network (ACDPN)
	BGC Dawson
	Collective Community Services (CCS)
	Centre of Dreams and Hopes
	On Our Own (O3)
	Project 10
	The East Island Network for English-Language Services (REISA)
The Lower North Shore	Coasters Association
The North Shore	North Shore Community Association (NSCA)
Outaouais	Connexions Resource Centre
	English Language Arts Network (ELAN)
The province of Quebec	LEARN
	Y4Y Québec



The Role of CHSSN

For a three-year mandate from 2021-2024, the YMHI is funded by the Secrétariat à la jeunesse and supported by the Lucie et André Chagnon Foundation to a total of \$2,400,000. The initiative began in September 2021. As the managing organization for the YMHI, CHSSN provided the participating organizations **with individualized project development and capacity-building support**. This support included: the facilitation of a virtual **Community of Practice (CoP)**, which fostered a space for sharing resources and best practices, and for networking; the creation of a **Facebook group** through which CHSSN regularly disseminated program learnings, research, and relevant tools; and conducted **individual meetings** and offered **training sessions** with the organizations. CHSSN also coordinates and collates the reporting on financial resources and evaluation of program deliverables and outcomes as well as administration of allocated funds with the participating organizations.

Youth Pulse Check

As part of its support of the YMHI, CHSSN and the organizations participating designed and promoted a Youth Pulse Check (YPC) survey focused on the mental health needs, challenges, and experiences of Quebec's English-speaking youth. The YPC was also promoted by the participating organizations' partners. It was filled out by 456 English-speaking youth between the ages of 18-29 from 14 regions across the province of Quebec. The goal of the Youth Pulse Check survey was to assist community organizations in gaining a better understanding of the mental health challenges and needs of English-speaking youth living in their territory. The results of the survey reflect patterns in some of the challenges, needs, as well as the desires of Quebec's English-speaking youth in taking care of their mental health. These patterns are largely consistent with existing research on mental health and Quebec's Official Language Minority Community. To consult our YPC report, please visit the Document Centre on our website.



General Strategies, Outcomes, and Findings

Outreach

In the first year of the YMHI, many participating organizations started in an exploratory phase. These organizations focused on: discovering and mapping existing mental health services for English-speaking youth across their territories; reaching out to and learning about the needs and realities of English-speaking youth through the YPC and/or other surveys and by consulting partners; and planning activities and outreach strategies for the next 2 years of the YMHI. In the first year of the YMHI, other organizations began exploring and implementing outreach strategies to reach youth. These strategies varied depending on the region and organization and according to the specific youth demographic targeted by the organization.

Many organizations reported that youth in general were a challenging demographic to reach, and that this challenge is increased significantly in the case of youth who are no longer attending school and in the case of youth who live in geographically isolated territories. Moreover, the COVID-19 pandemic significantly limited the outreach abilities of most participating organizations in the YMHI, especially the organizations that had planned to engage in outreach in schools and which no longer had access to them, or had limited access to them, due to the pandemic. In trying

to reach youth who are still attending school during the periods when these were accessible throughout the COVID-19 pandemic, many organizations found success in leveraging their existing relationships with their regional school boards, elementary and high schools, and adult education centres to run focus groups in the schools, maintain a presence in the schools, and carry out surveys, and/or plan mental health and wellbeing programming through consultations with the students. Many organizations also held activities and events in collaboration with schools, which played a vital role in their capacity to reach youth.

Many organizations also established or fortified fruitful partnerships with their regional CISSSs, CIUSSSs, or Aire ouvertes. These partnerships were vital for: raising awareness about the realities of English-speaking youth within the healthcare system; benefitting from the expertise of CISSS, CIUSS, and Aire ouvertes staff in the area of mental health and youth; collaboratively planning mental health programming for English-speaking youth. These partnerships with the CISSSs, CIUSSs, and Aire ouvertes were also beneficial for reaching youth that no longer attend school.

Some organizations strategized the use of online communications to reach their youth more effectively, going beyond Facebook. For instance, MEPEC recruited youth ambassadors to run their social media platforms, especially Instagram and TikTok, to promote resources and activities. Y4Y has also had great success using Instagram to reach and consult Quebec's English-speaking youth. BGC Dawson used Snapchat to engage with youth and recruit youth volunteers. Connexions productively used Facebook Live chats for a health promotion series. And Project 10 used Discord innovatively for their Mental Health Panel. A benefit of using youth-friendly platforms like Instagram, TikTok, Snapchat, and Discord as part of an outreach strategy for the YMHI is that their reach extends beyond educational institutions and can reach youth living in geographical isolated contexts.

In the upcoming years of the YMHI, it will be useful for participating organizations to share challenges as well as best practices in outreach so that the YMHI can extend its reach to the vulnerable youth who need access to mental health support the most.



Youth Involvement

A key goal of the YMHI is to engage youth at the level of decision-making, project-design and implementation of YMHI programming, resources, and activities. To be sure, Quebec's English-speaking youth are the experts in their own experiences and the youth buy-in for YMHI activities promises to be enhanced by engaging this expertise and prioritizing youth leadership in project-design. With these outcomes in mind, CHSSN has centralized Roger Hart's Ladder of Youth Participation as a resource and guide for the YMHI. This resource outlines **8 rungs** on a ladder of participation, with each rung describing a different way in which youth can be affected and/or involved in a given project. The bottom **3 rungs** are non-participatory. If a project sits on one of these rungs, youth are treated as objects rather than participants. The top **5 rungs** are participatory. If a project sits on one of these rungs, it is engaging youth as partners to greater and greater degrees as the project moves up the ladder of participation. Through the YMHI, CHSSN encourages participating organizations to reflect on the ladder so that youth are engaged as the most important partners, leaders, and decision-makers of the YMHI as a whole.

In the first year of the YMHI, most organizations reported being somewhat in the middle of Roger Hart's Ladder of Youth Participation in their YMHI projects, with youth being assigned, informed, and/or consulted. Many of these organizations said that, in the first year of

the YMHI, they have planned strategies for moving up on the ladder in the upcoming years of the YMHI. A number of organizations also reported being higher on the ladder, with youth being intimately involved in project design and decision-making. In the first year of the YMHI, organizations involved youth in their projects by: consulting them through the YPC and other surveys as well as through focus groups, social media, and one-on-one and group consultations, discussing with them at panels; informing them about activities and resources through social media and via other service-providers; actively recruiting youth to sit on their organizational boards; hiring youth ambassadors; and creating Youth Advisory Committees for their YMHI projects. Notably, 33 youth under the age of 35 sit on the boards of the organizations participating in the YMHI and 2637 youth were involved in identifying service gaps and barriers for English-speaking youth seeking mental help support in Quebec across the YMHI as a whole.

In the upcoming years of the YMHI, it will be useful for participating organizations to share challenges as well as best practices related to youth involvement so that the YMHI can increase youth buy-in and ownership for its various projects and expand leadership opportunities for English-speaking youth, which promises in itself to have positive effects on their wellbeing.

Roger Hart's Ladder of Young People's Participation



Rung 8: Young people & adults share decision-making

Rung 7: Young people lead & initiate action

Rung 6: Adult-initiated, shared decisions with young people

Rung 5: Young people consulted and informed

Rung 4: Young people assigned and informed

Rung 3: Young people tokenized*

Rung 2: Young people are decoration*

Rung 1: Young people are manipulated*

** Note Hart explains the last three rungs as non-participation*

Adapted from Hart, Roger A. (1992). Children's Participation: From tokenism to citizenship, Innocenti Essay no. 4, Unicef.

Impact

In its first year, the YMHI was successful at improving access to mental health services and resources for young English-speaking Quebecers (15-29) and in producing strategies to continue to improve this access in upcoming years of the initiative. The YMHI was also successful at involving youth in the design and implementation of mental health activities and events and in producing strategies in which youth can be increasingly involved in upcoming years of the initiative. While the reduction of stigma around mental health challenges and using mental health services is difficult to measure as this process tends to involve slow and incremental changes in cultural and personal attitudes, practices, and discourses, organizations participating in the YMHI are actively thinking about long-term strategies for reducing stigma. Normalizing talking about mental health and general wellbeing in public and semi-public contexts—activities that are central to the projects of all organizations participating in the YMHI—promises to play a role in reducing stigma over time.

The following bubble outlines the quantitative products and impact of the first year of the YMHI.

Activities
carried out
258

Youth
participants
in activities
4428

Youth
participants
in events
860

Events
held
46

Resources
created and
disseminated
402

Partners better
informed to respond
to the needs of
English-speaking
youth
136

Youth under
35 on boards
of directors
33

Documents
adapted and/
or translated
47

Total youth
involved
7925

Partnerships
created
136

Youth involved in
identifying gaps
and barriers
2637

Youth
satisfaction
rate for activities
and events
provided
96%

Mental health
professionals
involved
63

Gaps and Barriers

Major service gaps and barriers to accessing mental health services amongst English-speaking youth were identified by the YPC and by organizations participating in the YMHI, several of which conducted workshops, focus groups, and surveys for youth from 15-18, who were not included in the YPC. One key finding of the YPC and the consultations with youth 15-18 was that many English-speaking youth feel there is a dramatic lack of adequate mental health services and support in English in their region. Notably, only 108 of the YPC respondents or 24% said they were very comfortable speaking French and feeling understood when talking about their mental health and only 146 of respondents or 34% said they were very comfortable understanding spoken or written French when it comes to their mental health. Furthermore, 201 respondents, or 46% said they were either not very comfortable or not comfortable at all speaking French and feeling understood when talking about their mental health and 141 respondents, or 31% said they were either not very comfortable or not comfortable at all understanding spoken or written French when it comes to their mental health. This feedback suggests that access to mental health services and resources in English plays a major role in English-speaking youth seeking out and using mental health services and resources.

Specific service gaps and barriers identified by organizations participating in the YMHI included:

- A (sometimes dramatic) lack of mental health services and resources in English.
- A lack of credible information about mental health accessible to English-speaking youth.
- A lack of awareness about existing mental health services and resources.
- A lack of promotion of existing services and resources in English.
- A lack of affordable services in English combined with the financial stress such services entail.
- Financial precarity, which prohibits youth who are financially struggling to access private mental health support
- A lack of trust in services or in mental health providers.
- A lack of coordination between mental health services.
- A lack of representation of especially marginalized identities and their experiences (including racialized, LGBTQIA2S+, Indigenous, and low-literacy youth as well as youth having exited foster care).
- A lack of culturally-appropriate or adapted services for especially marginalized youth (including racialized, LGBTQIA2S+, Indigenous, neurodiverse, and low-literacy youth as well as youth having exited foster care).
- A lack of accessibility of services for youth living in remote areas.
- A lack of projects emerging out of a participatory planning process involving youth leadership.
- A lack of access to life-skill education (related to budgeting, financial planning, cooking, etc.).

- A lack of staff in the community and healthcare systems.
- Very long waitlists for mental health and support services.
- A lack of safe, non-judgemental physical spaces in which English-speaking youth of diverse backgrounds can comfortably gather.
- Cultural and familial stigma surrounding mental health issues.
- Large physical distances between youth and existing mental health services.
- A lack of support for reintegrating youth who exit foster care (and especially 2SLGBTQIA+ and Black youth) into society.
- A lack of a trauma-informed approach in the public mental health care system.
- A lack of accessible addiction services.
- A lack of cultural awareness about the needs and realities of English-speaking youth on the part of French-speaking service-providers.
- A lack of funds in the community sector and healthcare system to hire English-speaking resources.
- A lack of English-language competency on the part of staff in the healthcare system and community sector.
- A lack of confidence in health and social services on the part of English-speaking youth due to negative, even traumatic experiences of using these services in the past (including experiences of systemic racism and discrimination).
- A lack of support for young carers and for the caregivers of youth with neurodiversity.
- A lack of childcare to accompany mental health services, which creates a barrier for many young parents living on a low income in accessing mental health support.



Notably, the size of the gaps and barriers varies according to region as well as to the identity intersections of English-speaking youth. English-speaking youth living in rural regions, for example, tend to be affected by more dramatic service gaps than their urban counterparts. English-speaking youth living on low incomes are barred from accessing costly private mental health support when this support is not available in English in the public sector, whereas English-speaking youth with greater financial resources have the financial means to access private mental health support. And a lack of services adapted for racialized and/or 2SLGBTQIA+ English-speaking youth and/or English-speaking youth exiting care, for example, will create a larger barrier to accessing services for youth with these particular identity intersections than it will for other youth.

Projects by Region and Organization

Capitale-Nationale

Regional Context

The ESC of Greater Quebec City is an integrated but not assimilated linguistic minority community that represents approximately 2% (15,270) of the overall population. It prides itself on being proactive in building partnerships and developing services that represent an added value for both linguistic communities of the region. Benefiting from a strong network of institutions and community organizations dedicated to its members, the ESC nonetheless still has vulnerable segments in its population that remain underserved, such as isolated seniors, special needs individuals, low-income families, and youth. A noteworthy trend based on 2016 census data, reveals that every 5 years 20%-25% of our community's population is renewed by newcomers.



Jeffrey Hale Community Partners (JHCP)

Background

Prior to joining the YMHI, JHCP was experienced in working with children from 0-8 through direct programming and, increasingly, with youth from 12-17 through a collaboration with the school board. However, the organization had not yet worked extensively with youth from 15-29, as the region is lucky to have a variety of services targeted to youth. Since 2009, JHCP has been a member of a regional Youth Networking Table. Through this table, JHCP has fostered close relationships with partners working with youth, whom JHCP supports with various youth-centred projects. As JHCP has had the goal of bolstering its programming focused on mental health for several years, the YMHI is serving as a stepping stone for launching further mental health programming that complements the rest of JHCP's programs.

Gaps and Barriers to Services

The YPC revealed that 56% of the 456 respondents felt there should be more adapted services for English-speaking LGBTQ2S+ youth. JHCP's focus on this demographic in their support of 2 gay-straight alliance groups that had been created in regional high schools thus responds to a need that has been identified by the organization, local schools, and English-speaking youth more broadly. More generally, 3 of JHCP's local partners have identified anxiety as the main issue for which English-speaking youth at large are reaching out for help.

Jeffery Hale Community Partners is a community-based charitable organization whose mission is to promote and contribute to the health and wellbeing of the English-speaking population of the Capitale-Nationale (Greater Quebec City Region). JHCP is a key collaborator in a Wellness Centre, an innovative intersectional collaboration between CIUSSCN and community organization and themselves. The Wellness Centre has positioned JHCP as a key service-provider and health-promoter to 5 targeted population groups (families, caregivers, seniors, special needs youth, and seniors in residence). JHCP has been part of the CHSSN NPI program, since 2009.

Partnerships and Activities

Through the YMHI, JHCP has reinforced its presence in high schools, CEGEPS, and adult education centres, offering workshops focused on suicide prevention and, especially, on supporting the mental health of: 1) LGBTQ2S+ youth; and 2) CEGEP students struggling with anxiety. In this year of the YMHI, JHCP has partnered with 2 high school leaders to support their gay-straight alliance groups. JHCP also paid for a highly successful youth diversity training for 10 health professionals from the local CIUSS and 1 professional from the Champlain Saint Lawrence College CEGEP. JHCP is now focusing on working with the school board to connect with the local First Nations community. JHCP has described its approach to partnerships for the YMHI as follows: “We have decided to invest in the strength and leadership already present in our community. The groups and partners we have been able to support are proof that so much can be done when we work together.” Through its promotion of the YPC, JHCP has also received feedback regarding some of the most desired activities for English-speaking youth across its territory.

Of the 19 youth from the Capitale-Nationale region who responded to the YPC:

- 8 said they would benefit from activities related to improving financial skills.
- 8 said they would benefit from one-on-one help getting their life back on track.
- 5 said they would benefit from activities related to improving employability skills.

Outreach

JHCP identified reaching youth that are hard to reach to be a major challenge of the YMHI so far. While reaching youth that are attending school is less challenging, reaching youth in the 20-29 age range, most of whom are no longer connected with educational institutions, remains difficult. One of JHCP’s goals for the continuation of the YMHI is to continue to reach and consult youth in and outside of schools by developing new and effective outreach strategies, including developing a program targeted to fathers in this demographic.

Youth Involvement

One of JHCP’s primary goals for the next year of the YMHI is to create a Youth Advisory Committee to ensure that it is involving youth at the level of design and implementation of events, activities, services, and resources. The Youth Advisory Committee will help the organization to harness youth expertise, secure youth buy-in, and foster a sense of agency amongst English-speaking youth. JHCP feels its YMHI project currently sits at [Rung 4](#) on Roger Harts’ Ladder of Youth Participation, with its youth having been assigned and informed. [Refer to page 19 for a visual representation.](#)



Chaudière-Appalaches

Regional Context

The ESC in Chaudière-Appalaches is made up of 3,755 people and is spread across three main areas: the MRC des Appalaches, Lévis, and Beauce-Sartigan. While the region has three urban centres, the rest of it is very rural, and considerable distances separate the urban centres from one another and the rural territories from the urban centres. Transportation and internet access represent significant barriers to services in the region's rural territories. There are only two public English schools (one elementary school and one high school) in the region, and both are located in Thetford Mines. With only two schools, the region is limited in its capacity to provide educational opportunities in English to English-speaking youth. MCDC is the only organization in Chaudière-Appalaches that provides services to the ESC. MCDC has increasingly strong collaborations with its local schools so students can access its services through their educational institutions. MCDC's relationship with its regional youth currently consists of its collaborations with the schools.



Mégantic English-speaking Community Development Corporation (MCDC)

Background

Prior to joining the YMHI, MCDC had special expertise in serving English-speaking seniors across its region and was in the process of enhancing its capacity to serve the region's English-speaking youth. At the start of its YMHI project, MCDC envisioned offering mental health services in 2 MRCs, namely Thetford Mines and Lévis. However, through discussions with CHSSN, the organization quickly realized, that it might maximize its efforts in the first year of the YMHI by focusing on building key partnerships in Thetford Mines. This reorientation allowed MCDC to increase its knowledge of the mental health needs and challenges of local English-speaking youth and to identify vital collaborations for serving this demographic. Participating in a local table on mental health, substance abuse, and suicide prevention called the *Table en santé mentale et dépendance des Appalaches*, was crucial for the expansion of MCDC's targeted partnerships.

Gaps and Barriers to Services

A survey that MCDC conducted with 52 high school students from its regional high school revealed that there are substantial gaps in mental health services in Chaudière-Appalaches. A language barrier between English-speaking youth and Francophone services as well as extremely long wait times for mental health services were emphasized as the main barriers preventing English-speaking youth in the region from accessing mental health support.

Partnerships and Activities

Throughout the first year of the YMHI, MCDC has developed new partnerships with the governing boards of local schools and a Community Learning Centre (CLC) agent. It also developed a strong partnership with a mental health resource at the local CISSS-CA who works in suicide prevention in schools across the region. Together, MCDC and the CISSS-CA are determining what existing programs, services, and resources can be adapted into English. Through this partnership, MCDC was invited to participate on the *Table en santé mentale et dépendance des Appalaches*. In the next year of the YMHI, MCDC and the CISSS-CA will share leadership of the suicide prevention program in local schools. wMCDC also developed a new partnership with Y4Y and is in the process of co-developing

Created in 2000, MCDC is a not-for-profit community organization based in Thetford Mines. Its mission is to serve the ESC of Chaudière-Appalaches and Arthabaska-l'Érable, with special emphasis on the Appalaches, de L'Érable, and Lotbinière MRCs. It has a satellite office in Lévis and owns and operates a Community Resource Center in Thetford Mines that provides access to a community library, a meeting room, an information corner, free internet access, and easy access to MCDC personnel. Most MCDC activities are targeted towards seniors (65+), since they represent approximately 80% of current membership. MCDC has been part of the CHSSN NPI program, since 2004.

several projects in the school with this organization. Having observed Y4Y's consultation process in Chaudière-Appalaches, MCDC feels it can benefit from the knowledge and expertise of their youth ambassador for this region. Notably, the organizational visibility of MCDC has increased dramatically as a result of these new partnerships. The organization was also able to raise its awareness of the realities and needs of the region's English-speaking youth by adapting the YPC survey to high school students. It received informative feedback from 52 respondents to this survey. One interesting finding of the survey was that 6% of the respondents did not consider themselves male or female. MCDC will be working with the Montreal-based organization SILK to offer workshops about gender identity and sexual orientation.

Outreach

As the focus of the first year of MCDC's YMHI project has been building partnerships with the CISS-CA and local schools, the organization has not experimented with reaching youth that are not currently attending school. MCDC has observed that its region's English-speaking youth who have left school are more active in the French-speaking community than in the ESC.

Youth Involvement

MCDC has consulted 52 high school students through the survey focused on their mental health and wellbeing and wants these youth to play an active role in co-designing an action plan with the school to address their mental health needs. The survey revealed that mental health is an issue close to the hearts of many of the region's youth, with 37% of the survey respondents saying they would be willing to volunteer to help with the creation, design, and delivery of services. As such, MCDC has begun laying the foundation for involving youth in the design and implementation of services dedicated to their wellbeing in the upcoming years of the YMHI. The organization feels its project for the YMHI currently sits between [rungs 5-6](#) on Roger Hart's Ladder of Youth Participation, with youth being consulted, informed, and beginning to share in decision-making.



Gaspésie- Îles-de-la-Madeleine

Regional Context

The English-speaking population in Gaspésie-Îles-de-la-Madeleine faces distinct socio-economic challenges, including lower education levels and incomes and higher unemployment rates than their French-speaking counterparts. The English-speaking population of the Gaspé Coast has one of the lowest socioeconomic statuses in Canada: 66.3% of this population has low education levels; 29.6% is unemployed; and 66% has a yearly income of less than \$20,000 (Pocock “Sociodemographic Profile 2018: Gaspésie-Îles-de-la-Madeleine & MRC les Îles-de-la-Madeleine”). The ESC in Gaspésie-Îles-de-la-Madeleine is also affected by a ‘brain drain,’ with many of its youth leaving for post-secondary studies and not returning to the region. In May 2020, VGPN, CAMI, and CASA partnered to produce a youth profile. This profile revealed that English-speaking youth tend to be more at risk than their French-speaking peers when it comes to education, employment, and income. It also showed a lack of activities for the region’s English-speaking youth in comparison with those offered to French-speaking youth. The vast majority of public service-providers in the region are French-speaking and have limited knowledge of the language, history, and culture of the region’s ESC. The disparity between the knowledge of service-providers and the realities and needs of the ESC presents a major barrier for English-speaking youth in developing trusting relationships with staff members. This disparity appears to deter English-speaking youth from seeking help from regional service-providers and contributes to feelings of social alienation. Focus group discussions have revealed that English-speaking youth culture in the region is leading to concerning levels of drug and alcohol use and other high-risk behaviors. Importantly, stigma around mental health issues and services in the Gaspésie-Îles-de-la-Madeleine represents a major barrier to English-speaking youth in this region accessing mental health services and resources. This was highlighted in the YPC, which revealed that while 24% of respondents living in urban regions of Quebec (Montreal, Laval, and Capitale-Nationale) said they felt that they would be judged for seeking help, this percentage jumps to 32% for respondents living in rural regions. Stigma around mental health in the islands was highlighted by one respondent as such: “If you’re working on the issues of mental health on the islands, you must look into the fact that having mental illnesses is considered very taboo here and you should make people aware that having mental illnesses or struggling is a normal thing in life. Target young kids, youth and adults of the community. God knows they all need it.” Since 2021, CASA, CAMI, and VGPN have participated in a Regional Mental Health Task Force focused on the mental health needs of English speakers in Gaspésie-Îles-de-la-Madeleine.

Council for Anglophone Magdalen Islanders (CAMI)

Background

Prior to joining the YMHI, CAMI didn't have many resources to carry out any concrete activities in the area of mental health. However, with some funding from CHSSN, it was able to do some research about mental health across its territory. The YMHI has given CAMI the resources needed to more effectively support the mental wellbeing of English-speaking youth across its territory.

Founded in 1987, CAMI is a non-profit organization that works with the ESC of the Magdalen Islands. CAMI ensures that English speakers benefit from the various available programs across a range of sectors, and that English speakers can benefit from these programs in their own language. Health, education, language, culture and heritage are all part of CAMI's mandate. CAMI has been part of the CHSSN NPI program, since 2004, when the program was first created.

Gaps and Barriers to Services

CAMI and its partners have identified a lack of access to health and social services in a safe environment within the community for English-speaking youth. Insofar as there are major language barriers isolating the ESC from the larger island community, English-speaking youth do not generally feel comfortable gathering in spaces that are predominantly French-speaking, or mixing with other French-speaking youth. The fact that there are very few physical spaces for gathering within the ESC presents an obstacle to finding appropriate environments for connecting English-speaking youth with mental health services and resources and for planning activities to support their wellbeing. Stigma around mental health issues and services in the Gaspésie-Îles-de-la-Madeleine also presents a major barrier to English-speaking youth in this region accessing mental health services and resources.

Partnerships and Activities

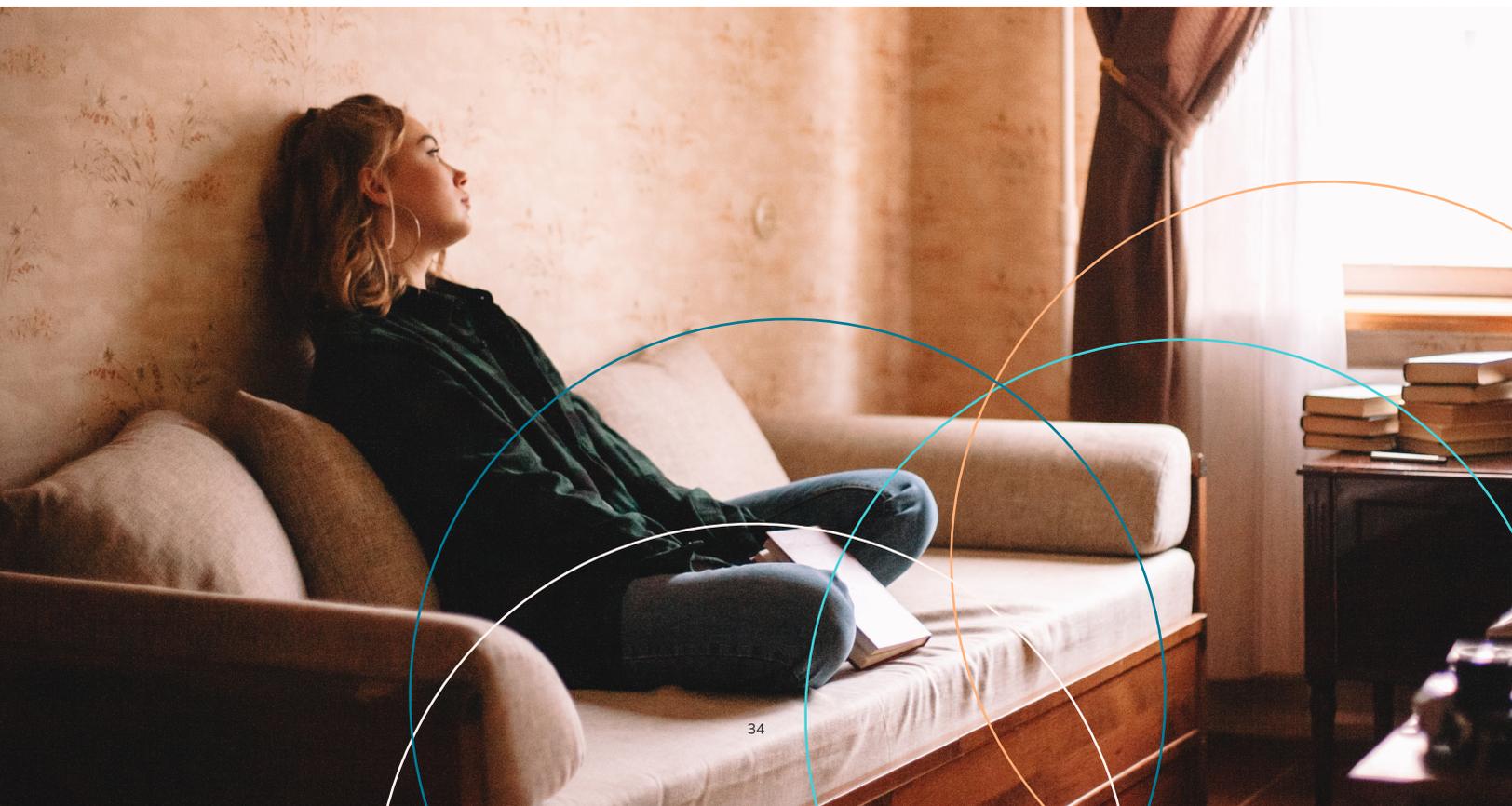
As part of their YMHI project, CAMI has worked with VGPN and CASA to create a 3-year strategic plan focused on reducing stigma around mental health issues, which involves producing a documentary with this purpose. As of March 2022, one of CAMI's primary partnerships has been with a local women's shelter. CAMI invited a staff member from this shelter to offer a workshop focused on self-love, self-esteem, and setting boundaries for girls from 15-18. Two large-scale events took place in March 2022 over the course of a 2-day women's mental health and wellbeing retreat, with one day being focused on school-aged young women and the second being focused on older women. Beyond these activities, CAMI has attended 2 partner meetings held to address pressing issues and service gaps with the community and to compile a list of possible services that partners might be able to adapt to the needs of the ESC. As part of the YMHI, CAMI has been able to build bridges with 9 organizations with whom CAMI might partner in the future. Notably, the CISSS des Îles will be offering the Aire ouverte service, which promises to offer a safe space for youth to gather where they can access health professionals such as nurses and social workers.

Outreach

CAMI's outreach efforts in the first year of the YMHI have consisted of organizing activities like pizza lunches and movie nights for youth aged 15-18 in the local high schools. Having identified young men as a demographic that is especially hard to reach, CAMI plans to create a strategy to target this demographic in subsequent project years.

Youth Involvement

CAMI has identified 5 youth that are willing to sit on a Youth Advisory Committee that will identify and validate the mental health needs of regional English-speaking youth and recommend actions. As of March 2022, the first meeting of the Youth Advisory Committee, during which the results of the YPC were to be presented, was set to take place in April 2022. Two English-speaking youth under 35 years of age currently sit on CAMI's Board of Directors. CAMI feels its project for the YMHI currently sits between [rungs 5-7](#) on Roger Hart's Ladder of Youth Participation, with youth being consulted and informed through Facebook and beginning to share in decision-making through the new Youth Advisory Committee and the presence of youth on its board.



Committee for Anglophone Social Action (CASA)

Background

CASA has a long history of supporting its regional English-speaking youth and the mental wellbeing of its English-speaking community at large. In particular, CASA has a track-record of assisting English-speaking youth through employability services. CASA's participation in the YMHI has involved an extension and intensification of its efforts to respond to the mental health needs of this demographic across its territory. As part of the YMHI, CASA is sitting on a regional Youth Table as well as a regional Mental Health Table, each of which brings together about a dozen stakeholders. CASA is also part of a regional Mental Health Advisory Council and, since 2021, has participated with CAMI and VGPN in a Regional Mental Health Task Force focused on the mental health needs of English speakers in Gaspésie-Îles-de-la-Madeleine.

Founded in 1975, CASA is mandated to build and strengthen the vitality of the English-speaking population of the Gaspé Coast by representing the community's interests and designing and delivering programs that respond to its needs. CASA has been part of the CHSSN NPI program, since 2005.

Gaps and Barriers to Services

Major service gaps for English-speaking youth identified by CASA were: access to addiction services and access to mental health and social services. Notably, the youth population of English speakers in the Gaspé is mostly concentrated in the Baie des Chaleurs, with the rest being spread over an immense territory, increasing the geographic isolation of these youth and exacerbating other barriers to service. Stigma around mental health issues and services in the Gaspésie-Îles-de-la-Madeleine also represents a major barrier to English-speaking youth in this region accessing mental health services and resources. Luckily, because CASA has been working with English-speaking youth for a long time through accompaniment services and collaborations with the local CJE's and the CIUSS, the organization is already known to many regional youth. Notably, CASA learned that an unwillingness to serve English speakers is rarely an issue with health professionals in the region, although it is often perceived as such. The bigger issue is related to a lack of resources, time, cultural awareness, and English-language competency.

Partnerships and Activities

CASA's first year of the YMHI was devoted to planning and partner presentations with the purpose of sensitizing regional partners to the mental health needs of English-speaking youth. This year, CASA has worked with CAMI and VGPN to create a 3-year strategic plan focused on reducing stigma around mental health issues, which involves producing a documentary with this purpose. A group of 8 youth will be working on this documentary as part of a special employability project. CASA is working with a community organizer at the CIUSS on an anti-bullying program and with the school board and the local Mi'kmaq community on a healthy living program, which will involve 40 workshops. For the latter program, Mi'kmaq leaders are sharing their expertise in healthy living based on the medicine wheel. The regional Mi'kmaq run a youth and adult treatment centre for drug and alcohol addiction and have significant expertise working on this issue. CASA hopes to build a strong partnership with them in order to help English-speaking youth struggling with addiction, many of whom are currently being sent to Montreal for treatment, which separates them from their support network. CASA is also in the process of transforming part of its building into a space in which youth can gather to favour outreach and organizational visibility.

Outreach

CASA's outreach strategy for the first year of the YMHI has involved fortifying the work strategies they were already using, namely: 1) assisting young English speakers with social and economic insertion; 2) working with partners to sensitize them to the realities and needs of English-speaking youth; and 3) supporting its regional sister organizations (CAMI and VGPN) with a common strategy. Reaching geographically isolated English-speaking youth remains an ongoing challenge for CASA and other organizations in the region.

Youth Involvement

One of CASA's upcoming objectives is to assist youth in creating youth-led video vignettes featuring regional youth sharing their mental health experiences. These vignettes promise to work towards reducing stigma around mental health challenges in the region and to increase outreach. CASA feels it currently sits on [Rung 4](#) of Roger Hart's Ladder of Youth Participation, with youth being informed about CASA's services and other offerings. CASA feels it is close to moving up the ladder with more youth-led projects.

Vision Gaspé Networking and Partnership Initiative (VGPN)

Background

In recent years, VGPN has moved towards more activities focused on supporting of the ESC's mental wellbeing. VGPN was a founding member of the Mental Health Gaspésie Committee and currently hosts mental health activities for all ages, including self-care workshops, outdoor activities, and StrengthsFinder and StrengthsExplorer workshops, and it plans to continue offering these services. Since 2021, VGPN has participated with CAMI and CASA in a Regional Mental Health Task Force focused on the mental health needs of English speakers in Gaspésie-Îles-de-la-Madeleine.

Having served the ESC in Gaspé and Percé for almost fifteen years, VGPN's work has focused on seniors, youth, families, young children, and caregivers. Its office in Douglastown provides a central location for the organization. And yet, ESCs in Percé, which comprise 20% of the population, require specific targeted support beyond VGPN's current programming. VGPN aims to improve the quality of life of all English-speaking Gaspésians. VGPN has been part of the CHSSN NPI program, since 2004.

Gaps and Barriers to Services

VGPN has described the situation of English speaking youth across its territory as “dire” when it comes to their mental health and access to services. There are almost no mental health services for English-speaking youth in the region and the wait time to see a psychologist is often as long as two years. There are limited social workers and there is intense stigma around requiring the assistance of a social worker or other mental health professional.

Partnerships and Activities

As part of their YMHI project, VGPN has worked with CAMI and CASA to create a 3-year strategic plan focused on reducing stigma around mental health issues, which involves producing a documentary with this purpose. VGPN also enjoys a strong partnership with the school board, the adult education centre, the CIUSS, and the Centre de Ressourcement, de Réinsertion et d'Intervention (CRR), with whom they hope to work on an outreach strategy. VGPN is still in the process of figuring out how to work with smaller community organizations as well as the new Aire ouverte to better support the region's English-speaking youth. In the first year of the YMHI, VGPN has translated materials mapping out regional services and has facilitated 5 StrengthsFinder workshops for Secondary 5 students aged 15-18.

Outreach

Outreach has been a big challenge for VGPN in the first year of the YMHI. It has been able to do some outreach with young parents participating in its Bright Beginnings and prenatal programs. In the next years of the YMHI, the organization plans to work with other partners to help make youth 15-29 aware of the programs and activities that they offer.

Youth Involvement

The regional responses to the YPC will guide the project design, as will a Youth Steering Committee, which the organization is in the process of forming. VGPN has 1 youth on its Board of Directors and expects to sit between [rungs 4-5](#) on Roger Hart's Ladder of Youth Participation within the next few months.





The Laurentians

Regional Context

The Laurentians are home to pockets of ESCs dispersed across 84 municipalities representing a geographic territory of over 20,000 square kilometers. Home to a large population of English speakers between 45 and 65 years of age, the Laurentians have the 5th highest per capita of English-speaking seniors across the 22 regions of Quebec. After seniors, the second largest demographic segment of English speakers in the Laurentians is under the age of 14. While the Laurentians are home to a large population of English speakers that require care, the large population of English-speaking children in the region is a strong sign of the vitality of the ESC in the region. As English schools in the Laurentians are few in number, they are populated by youth residing across an expansive geographic territory. While youth find community in the schools themselves, at home they often face high levels of social isolation. In this context, video games and social media become their privileged tools for socializing. Even when social services are available for English-speaking youth, the geographic dispersal of English-speaking youth throughout the Laurentians presents an important barrier for the accessibility of these services.



4Korners

Background

In the year leading up to the YMHI, 4Korners had become increasingly aware that there were major service gaps for regional English-speaking youth and that this demographic was particularly difficult to reach. As a highly active member of the 12-25 Youth Table, a *table de concertation* focused on youth ages 12-25, 4Korners has been working with partners to combine outreach efforts and raise awareness about the realities and needs of English-speaking youth in the region. As part of this mission, the table planned a day in which regional service-providers met in an English school in the region to reach youth and promote services.

Founded in 2005, 4Korners is a registered Canadian charitable organization that serves and enriches the lives of communities in the Laurentian region. It fulfills this mandate by connecting the individuals of the Laurentians with programs and services to meet their identified needs in a secure and inclusive environment. 4Korners has been part of the CHSSN NPI program, since 2010.

Gaps and Barriers to Services

While the regional English schools are eager to connect their students with community services as a strategy for breaking their social isolation, many of the community services are not able to serve these youth because of a language barrier. Community projects are not designed to include English-speaking youth and the promotion of these projects is done in French exclusively. English-speaking youth also have difficulty in accessing health services in English. More could be done to make the realities and challenges of English-speaking youth known in the community at large.

Partnerships and Activities

4Korners has taken advantage of the first year of the YMHI to plan YMHI projects, adapt and translate mental health resources for partners, strengthen partnerships, and co-create programs with regional partners, including with the local high school, the Maison des jeunes, the CJE de Montagne, and Sécurité Québec, Agape, The English Community Organization of Lanaudière (ECOL), the school board, and regional CISSSs. In particular, 4Korners has supported partners on a 15-25 Youth Table in their efforts to reach English-speaking youth and provide mental health resources. It has also helped to plan the roll-out of a Mental Health First Aid Program in collaboration with the school board, ECOL, Agape, and 3 regional CISSSs. 4Korners is also helping Sécurité Québec to adapt a program focused on self-esteem for youth in English high schools. For the first year of the YMHI, 4Korners formed a Youth Action Committee made up of 13 regional English-speaking youth and is supporting this committee in their planning of projects, activities, and outreach strategies. In particular, the organization assisted the committee in creating a space for youth in Deux-Montagnes. A community resource person from 4Korners now also spends one day per week in a local high school.

Outreach

In the first year of the YMHI, 4Korners' outreach strategy involved placing a staff member at the local high school one day per week to chat with students, build trust with them, and increase the visibility of 4Korners. It has also involved leveraging the Youth Action Committee it created to invite youth to participate in various activities. 4Korners has found it challenging to merge outreach efforts focused on different youth demographics (youth in schools, youth outside of schools, youth living in the Mohawk settlement of Kanasatake, youth living off the settlement). In upcoming years of the YMHI, 4Korners plans to create a summertime space, such as a skatepark, in which youth from different backgrounds might gather and which might serve as a contact point for 4Korners and English-speaking youth.

Youth Involvement

With the Youth Action Committee, youth are being empowered to design and implement programs and initiatives for their fellow youth. 4Korners currently has 2 youth on its Board of Directors and plans to recruit more. 4Korners feels it currently sits between [rungs 5-8](#) on Roger Hart's Ladder of Youth Participation depending on the project. Youth are consulted and informed, but they are also involved in decision-making related to project design and implementation.



Laval

Regional Context

In 2016, there were 90,980 English-speaking individuals living in the Laval region (Census of Canada), and this population continues to grow. Notably, the ESC in Laval includes high numbers of unilingual English speakers, immigrants who do not speak French, seniors and seniors living below the low-income cut-off line. The growth of Laval's minority language community may be seen as a positive sign of vitality, but only if this growth is accompanied by a commensurate increase in the level of access English speakers experience with respect to essential support services. Despite the increase in demand for services that has accompanied the population growth in the ESC, CHSSN baseline data report research in 2016 shows that Laval English speakers continue to face barriers in accessing services. Of the 300 different community organizations operating in Laval, Agape is the only one that does not offer services primarily in French and one of the few that offers bilingual services. While working with Laval's English-speaking youth has not been easy in the past, it is getting better. The ESC of Laval is a thriving community and has huge high school populations as the result of merging schools. Notably, Laval's school board covers a vast, decentralized territory and each school is selective about which initiatives they want to join and partnerships they want to foster. Laval's English-speaking youth aged 6-14 make up 22.7% of the total English-speaking population (n=10,380) and those aged 15-24 make up 23.2% of the population (n=12,080). According to Dr. Melissa Généreux, during the first wave of the COVID-19 Pandemic, Quebec youth who are anglophones were more likely to experience symptoms of Generalized Anxiety Disorder, Major Depressive Disorder, and suicidal ideation. When Laval youth were consulted at local high schools in the winter of 2021-2022, many reported sleep disturbances and high levels of stress. Symptoms of anxiety and depression were also confirmed. The vast majority reported not knowing how to access the healthcare system, not knowing about community resources offering mental health support, and having little information in general about mental health.

The Youth and Parents Agape Association Inc (Agape)

Background

Agape is the only organization mandated to serve the ESC of Laval. It does not have a specific specialization in serving youth, which has made working with Laval's

youth a challenge in the past. However, Agape considers Laval English-speaking youth a priority group given that Laval's English-speaking population is a young demographic compared to Laval's linguistic majority group. It also has more risk factors than the majority, such as higher income gaps and lower average levels of educational attainment. Agape believes that their youth are crucial for the vitality of their community, now and in the future. Agape has witnessed the mental health struggles of its youth in the past and even more so with the negative effects of the COVID-19 pandemic on mental health. Agape thus wishes to work more with Francophone partners who serve youth to better reach and serve English-speaking youth. Before joining the YMHI, Agape had carried out a collaborative project with Concordia University that offered art and drama therapy to high school students.

Founded in 1976, Agape is a non-profit, charitable organization mandated to enhance the vitality of the underprivileged English-speaking and multicultural people of Laval by offering a wide variety of services that promote mental and physical wellbeing. It is the only organization devoted to serving the ESC of Laval. Agape has been part of the CHSSN NPI program, since 2009.

Gaps and Barriers to Services

Agape created and disseminated its own youth mental health survey (which received 156 respondents), and has been privy to information collected through focus groups on mental health with youth in 4 regional high schools and adult education centres. Through these activities, Agape has learned that, despite high levels of psychological stress amongst regional English-speaking youth, this demographic has a very limited understanding of how to access mental health services and does not generally feel comfortable reaching out to ask for help.

Partnerships and Activities

For the first year of the YMHI, Agape has focused on building partnerships with mental health organizations in Laval and joining tables and committees to represent the interests of English-speaking youth, especially in the context of COVID-19. Participation in regional tables, including ones headed by the CISSS Laval, has led to the creation of a new sub-committee that is strategically aligned with the goals of the YMHI. Agape is in the process of creating inroads with the local Community Learning Centre (CLC) as well as the Sir Wilfrid Laurier School Board's Ascend Leadership Program. It is also fostering a relationship with the fully bilingual Aire ouverte based at the CISSS Laval through its participation in the Aire ouverte Committee, which includes 54 organizations and institutions. The Aire ouverte will serve as a gatekeeper between youth ages 12-25 and a range of health and social services. Through a partnership with the Sir Wilfred Laurier School Board, Agape has facilitated trainings from the Mental Health Commission of Canada—Mental Health First Aid on working with youth for student support staff in high schools.

Outreach

As part of its outreach strategy in the first year of the YMHI, Agape has been working closely with the CISSS de Laval and its Public Health Directorate, along with many community partners on the Positive Mental Health and Substance Abuse Prevention Youth Committee and subcommittees. Closer collaborations are developing between Agape and the Travail de rue de l'Île Laval (TRÎL) and one of their street outreach workers in hopes of reaching more vulnerable English-speaking youth in Laval. It is also exploring potential outreach strategies through the feedback it has received from the YPC, its own survey, and the focus groups with high school students.

Youth Involvement

As Agape is still in an exploratory phase in relation to learning about the mental health needs of its region's English-speaking youth, the organization feels it currently sits between [rungs 4-5](#) on Roger Hart's Ladder of Youth Participation, with youth being consulted and informed.



Lower Saint-Lawrence

Regional Context

According to the 2016 Canadian census data, the English-speaking population in the Lower Saint-Lawrence only represents 0.6% of the entire regional population and this population is spread out over a vast territory. Youth represent approximately 20% of the English-speaking population of the region. Notably, there is only one English institution across the entire region and regional youth tend to be culturally isolated and difficult to reach. Community partners and schools in the region note that the region's English-speaking youth are struggling with questions of identity, belonging, and isolation, and that some are limited in their abilities to function in a French environment. In the public and community systems, services are, for the most part, only offered in French, which creates service gaps for the ESC.



Heritage Lower Saint Lawrence (HLSL)

Background

HLSL has been working with English-speaking youth across its territory for many years through collaborations with Métis Beach School, Educaloï, the McGill Health Career Promotion and Bursary Programs, and HLSL's own culture, health, and literacy programming. During this time, parents and educators have routinely expressed their concern that English-speaking youth in the region are experiencing rising mental health challenges. Before joining the YMHI, HLSL indirectly supported youth, their teachers, and their families through its special health and wellness book collection in English. The organization felt it necessary to join the YMHI in order to adopt a more direct approach to supporting the mental wellbeing of youth, to increase its knowledge about existing mental health resources in English, and to raise awareness about and improve access to these resources for the region's English-speaking youth. HLSL also wanted to explore new approaches to reducing the stigmatization of mental health struggles amongst English-speaking youth, as such stigma presents an important barrier to accessing mental health services.

HLSL is mandated to support the vitality and wellbeing of the English-speaking communities of the Lower Saint-Lawrence. The YMHI will allow HLSL to support the region's English-speaking youth by increasing the organization's knowledge of this demographic and by working to improve their access to services. HLSL has been part of the CHSSN NPI program, since 2009.

Gaps and Barriers to Services

Being part of a very small minority in the Lower Saint-Lawrence, English-speaking youth are highly isolated and difficult to reach. Because most services and resources in the public system and community sector are offered exclusively in French, this creates major gaps in the provision of services for English-speaking youth in the region. In April 2022, HLSL plans to create a profile outlining priorities, gaps, and needs in mental health services for English-speaking youth.

Partnerships and Activities

In the first year of the YMHI, HLSL has maintained partnerships with the local high school and a social worker from the school board. It is building bridges with the local CISSS, and is part of a group of 25 professionals, organizations, and institutions called the Communauté ouverte et solidaire pour un monde outillé, scolarisé et en santé (COSMOSS), which is focused on improving the welfare and mental wellbeing of regional children, families, and youth.

Outreach

In the first year of the YMHI, HLSL has begun thinking about best practices for reaching its English-speaking youth and has started to explore several outreach strategies. Initially, HLSL had planned to work only with high school students in secondary 3 through 5, since the organization already has strong relationships with the local high school. These students will be consulted through a focus group animated by a social worker from the school board. HLSL has also experimented with reaching alumni from the high school and has created a group for high school alumni that includes 5 students. HLSL was able to share the YPC with this group and sees the group as a potentially useful resource for reaching regional youth beyond the high school.

Youth Involvement

HLSL has not yet involved youth in the design and implementation of its YMHI project and feels it currently sits between [rungs 3 and 4](#) on Roger Hart's Ladder of Youth Participation, with youth beginning to be consulted and informed.





Montréal

Regional Context

Montréal is a culturally diverse territory containing a range of urban, semi-urban and rural environments. It is also home to the second largest English-speaking population in Quebec after the Island of Montreal. The ESC in Montréal is growing fast. “Between 2006 and 2016 the number of English-speaking citizens increased by 21% in the Montréal region” (Beaudry-Godin and Boulais, 2018). In Central Montréal, this number grew by 24% during the same period. Central Montréal has a particularly high concentration of English speakers; there are about 96,540 English speakers across the territory including approximately 30,000 allophones. Nearly half of the allophone living in Montréal are immigrants. In Montréal East, the number of English speakers earning less than \$20K annually is greater than 30% of the total population. In Pierre de-Saurel (Sorel), this number represents 45% of the population. Across the region, more than 15% of the ESC is over 65 years old and 12.6% of this population lives in poverty. English speakers in the region are more likely to die earlier, suffer from multiple illnesses, and vulnerable to isolation due to communication difficulties. Although there are two English secondary schools in the region (Heritage High School, which has a student body of 1776, and St Lambert International School, which has 364 students), specialized health services and more general services that support the wellbeing of young people are not expansive enough to adequately assist English-speaking youth in the area. The promotion of services by community organization is also carried out predominantly in French, as these organization do not have the resources or capacity to promote and/or offer services in English. The unemployment rate of English-speaking youth in the region is also considerable; it is 13.3% versus 9.9% for they French-speaking counterparts. All of these factors combined point to an urgent need to offer programs and services to the region’s English-speaking youth to better equip them with resources to deal with mental health struggles. The wellbeing of the English-speaking youth of Montréal will play a role in the vitality of the region’s ESC and the region at large.

South Shore Assistance and Referral Centre (ARC)

Background

Since its founding, one of ARC's priorities has been its young clientele. Over the years, ARC has developed a variety of activities and programs designed to address the needs of regional English-speaking youth, including in the areas of employment, scholarship, and health professional retention. With the onset of the COVID-19 pandemic, ARC's immediate priority shifted to supporting the mental wellbeing of English-speaking youth. According to Statistics Canada, in 2020, only 54% of Canadians aged 15 and over reported having good mental health. This represents a significant drop from the 2018 statistics, when this number was 68%. This was the context in which ARC began its first year of the YMHI, during which the organization sought to learn further about the mental health needs of the English-speaking youth living in its region and to empower them to collectively seek solutions.

Gaps and Barriers to Services

A strength of the Montérégie is the amazing services that exist for French-speaking youth across the region. However, as most of these services are exclusively available in French, ARC is trying to help organizations and institutions to adapt their services for English-speaking youth. Many of these organizations and institutions lack the funds to hire staff to deliver their services in English. Through its consultations with English-speaking high school youth and the data collected through the YPC, ARC discovered that: youth lack reliable and credible information about mental health; there is a lack of resources and services to assist youth in developing healthy coping mechanisms; and there are insufficient mental health services in the school and in the community at large.

ARC is a non-profit community organization dedicated to assisting and empowering people of all ages to access health and social services, information, resources, programs, and activities in English on the South Shore with the ultimate goal of promoting wellbeing. The organization is seeking to become the recognized voice of the ESC in Central Montérégie as well as the official liaison between the ESC and various stakeholders including French public and community organizations. The organization leads, develops, and maintains strong partnerships and networks within the community to ensure accessibility to English services on the South Shore of the Saint Lawrence River. It seeks to empower youth, and to facilitate social changes that break down stigma by creating opportunities based on the needs of youth within the community at large. A central goal is to provide youth with the tools they need to make well-informed decisions about their physical and mental wellbeing. ARC has been part of the CHSSN NPI program, since 2011.

Partnerships and Activities

In the first year of the YMHI, ARC has focused on building strong partnerships with the Community Learning Centres (CLCs), which have access to the schools and to robust networks. It is also building relationships with the Preville Fine Arts Centre, Karen Delage Life Educator (a parent/youth educator, facilitator, and consultant and the founder of ParenTeenFocus), the school board, St. Lambert International, and the CLC St. Lambert with the goal of forming a mental health committee focused on English-speaking youth. ARC has also partnered with 5 other organizations (*Porte ouverte sur l'avenir*, the Centre d'action bénévole (CAB) Clarenceville, the CAB Noyan, and the CLC of Bulter & Farnham Elementary School) to plan a 3-day mental health workshop series for English-speaking youth. Finally, ARC facilitated the first 4 workshops of a series with the Preville Art School focused on mental health and creativity, which 24 youth attended.

Outreach

In the first year of the YMHI, ARC's outreach strategy has focused on building strong partnerships with the CLCs. ARC has also hired a specialist in youth work from the Département de la protection à la jeunesse (DPJ). This specialist was able to carry out a diagnosis of at-risk youth through the CLCs and then to follow up with tailored activities, exercises, and consultations. COVID-19 has presented a challenge for carrying out outreach in the first year of the YMHI, as it is more difficult to physically access youth at this time.

Youth Involvement

In the first year of the YMHI, ARC feels its project sits between [rungs 5-7](#) on Roger Hart's Ladder of Youth Participation. The priority of this year was consulting youth through the YPC and through consultations at the CLCs. Youth expressed wanting a safe place to talk and more people who are open to working with them.

Montérégie East Community Partnership for the English-Speaking Community (MEPEC)

Created in 2018, MEPEC is a citizen-led initiative that seeks to expand services for the English-speaking population of the Montérégie. MEPEC serves as a new NPI in the Montérégie East region, making it the 22nd NPI in Quebec.

Background

Before joining the YMHI, MEPEC had little experience working with youth. Since joining the YMHI, MEPEC has increased its collaboration with Heritage High School and has created a Youth Ambassador position in order to engage more youth in activities and workshops. Mental health is very important to MEPEC, as COVID-19 has resulted in a dramatic increase in the demand for resources and services in this area. MEPEC felt it was necessary to join the YMHI, as youth across its territory have difficulty accessing existing services and are largely left behind due to the lack of services and resources in English.

Gaps and Barriers to Services

Through meetings with its partners, MEPEC has identified 6 main gaps in mental health services for regional English-speaking youth that it plans to address in collaboration with its partners. These are services for: youth struggling with dependence; youth dealing with cyberintimidation; LGBTQ2S+ youth; suicide prevention; youth with anxiety; youth wellness.

Partnerships and Activities

For the first year of the YMHI, MEPEC established partnerships with 7 organizations and individuals, namely: Heritage High School; Karen Delage (a parent/youth educator, facilitator, and consultant and the founder of ParenTeenFocus); Ami-Québec; Partage; Nadia Hammoud-Revivre (a Mental Health Workshop Facilitator/Creator, Educator and Speaker, Founder/Lead Writer of The Writer's Block); Need Help Now, and Kids Help Phone. In the first year of the YMHI, MEPEC developed the program Listen Teen Talk in collaboration with Karen Delage to reach out to Youth at Heritage High School. This program will be launched during the next project year.

Outreach

In the first year of the YMHI, MEPEC created 3 new social media accounts (on Instagram, TikTok, and Facebook) as part of its strategy to better reach youth across the region. This has generated 86 followers and a total of 7083 post views. Focusing on outreach via social media was a strategy adapted for the context of online schooling during the COVID-19 pandemic.

Youth Involvement

In December 2021, MEPEC created a volunteer Youth Ambassador position, which has been filled by a 17-year-old Communications student from Champlain College. It is also in the process of opening its Community Space and having the Youth Ambassador get involved in attracting other youth to get involved in the space by creating activities for youth. MEPEC feels it currently sits between [rungs 4-5](#) on Roger Hart's Ladder of Youth Participation, with youth being assigned, consulted, and informed.



Montérégie West Community Network (MWCN)

Montérégie West Community Network is an initiative of English-speaking citizens who wish to enhance community vitality in Montérégie West. MWCN has been part of the CHSSN NPI program, since 2018.

Background

Since its foundation, MWCN has worked with the New Frontiers School Board CLC workers and has planned many intergenerational activities with them. In the past, the CLCs approached MWCN for help supporting the mental health of students across different schools, and the organization acquired funding to improve the students' access to career centre services. Following the success of this initiative, MWCN approached the Lester B. Pearson School Board, which is also on the organization's territory, to see if they might benefit from similar assistance. With the goal of providing such assistance to this school board, MWCN joined the YMHI.

Gaps and Barriers to Services

Since the advent of the COVID-19 pandemic, MWCN and its partners from the education sector have noticed an increased need for support for the mental wellbeing for students and teachers as they navigated online teaching and learning that was not met by an increase in access to mental health professionals for students and teachers.

Partnerships and Activities

For the first year of the YMHI, MWCN worked with 3 schools belonging to the Lester B Pearson School Board, namely Place Cartier Adult Education Center, PAAC adult education centre, and the Gordon Robertson Beauty Academy. Students within the schools were surveyed to determine their needs and desires and committees were formed, which included the students. With the leadership of one staff member, students put together a proposal for a fitness room.

Outreach

For the YMHI, MWCN has exclusively worked with youth that attend the 3 high schools participating in its project.

Youth Involvement

With the leadership of one staff member, students put together a proposal for a fitness room. One youth under the age of 35 currently sits on MWCN's board of directors. The organization feels it currently sits between [rungs 4-5](#) on Roger Hart's Ladder of youth participation, with youth being consulted and informed and sharing in some decision-making.

Montreal

Regional Context

Montreal is the most populous city in the province of Quebec. As of 2021, the city had a population of 1,762,949, and a metropolitan population of 4,291,732 of which more than 600,000 are of English-speaking communities on the island (Pocock, 2018). The proportion of English-speaking youth actually exceeds the provincial average (20.5%) for their language group in Montreal, specifically in Centre-Sud-de-l'Île-de-Montreal at 25.8% and Centre-Ouest-de-l'Île-de-Montreal at 23.7% (Pocock, 2018). Compared to the French-speaking youth in the same region, English-speaking youth at times trend larger in number such as in the l'Est-de-l'Île-de-Montreal (21.9% of their regional population vs 18%).

With over 100 different ethnic communities, Montreal boasts of some of the most densely populated and ethnically diverse towns and neighbourhoods in Canada. Certain individuals face specific challenges due to their double minority status in Quebec as it pertains to not only language but also ethnicity.

According to a broad Quebec survey conducted in September 2020 measuring the psychosocial impacts of the COVID-19 pandemic, “the region of Montréal posts a higher prevalence of psychological disorders than the other regions. Nearly one Montréalais in three exhibits generalized anxiety disorder or probable major depression. Furthermore, the prevalence of serious suicidal ideation appears to be higher in Montréal than elsewhere in Québec (one adult in thirteen)” (Généreux et al, 2021).

Like those elsewhere in the province of Quebec, Montreal's ESCs are experiencing socio-economic vulnerability. This reality poses a risk to the general wellbeing of the ESC, particularly in certain sub-groups within the population given the higher level of diversity compared to other regions.

A 2019 study on the wellbeing of young Quebecers by the Fondation Jeunes en Tête reveals that more than a third of them aged 15 to 17 have a high level of psychological distress. It was also found that more than one in two young people said they felt sad or depressed in the last month, and that girls were almost twice as likely as boys to report experiencing psychological distress (Gallant et. al. “Portrait du bien-être des jeunes au Québec: Ensemble du Québec”).

African Canadian Development and Prevention Network (ACDPN)

Founded in 2005, ACDPN provides leadership in access to health and social services for the English-speaking Black Community (ESBC) of Montreal. By fostering inter-organizational collaboration across sectors that influence the health and wellness of the Black community, ACDPN advocates for access to social, educational, and economic programs that are culturally and linguistically adapted to the needs of the ESBC. ACDPN has been part of the CHSSN NPI program, since 2008.

Local Context

The lack of a strong presence of a Black community organization in the education sector in Montreal has led to gaps in services and community support for the city's English-speaking Black Community (ESBC).

Background

ACDPN has a long history of working with youth in many areas, including education and mental health. Before joining the YMHI, the organization had a program called “It’s ok not to be ok” and hosted town halls with high school students to provide a safe space for dialogue and to disseminate important information. Since 2014, ACDPN has worked extensively with the Department of Youth Protection with kids between ages 6-14. In recent years, the organization has realised how vulnerable these children are when they reach the age of majority and are forced to take care of themselves. These youth are often ill-equipped for their new reality and struggle with depression, anxiety, and isolation. This group of vulnerable youth was ACDPN’s motivation for joining the YMHI.

Gaps and Barriers to Services

Youth in the English-speaking Black community face many barriers to accessing services. These challenges are a result of lack of representation in the system and the limited availability of services that are offered in English. The lack of linguistic and cultural adaptation of public services and programs means that most of the services offered in the public system are not tailored to their particular needs.

Partnerships and Activities

ACDPN’s YMHI project was originally intended to focus on youth having exited foster care, but, as the organization realized that this demographic was extremely hard to reach, the project quickly pivoted to focus on youth from ages 16-18 about to exit care. ACDPN’s main partners for its YMHI project are the Batshaw Youth and Family Centres. It has also been working with the Côtes-des-Neiges Black Community Association (CDNBCA)—a partnership that has been built into the design of the project. CDNBCA provides culturally adapted service support for Black English-speaking youth and boasts a social work program that is able to provide youth with ongoing clinical and social support. In the upcoming year of the YMHI, ACDPN hopes to build a partnership with Friends of Mental Health on the West Island. In this first year of the YMHI, ACDPN created a life-skills development program called “Adulting Like Us” (ALU). The organization also adapted the Boitvin Transitions Program, which is a highly interactive, skills-based curriculum designed to promote positive mental health and personal development. The program uses a developmentally appropriate, integrated approach designed to strengthen skills to help youth navigate this transition.

Outreach

In the first year of the YMHI, ACDPN learned that a best practice for conducting outreach with youth exiting care is to forge relationships with them before they exit care when they are still easily accessible. It has also discovered that a best practice is to begin working with youth one-on-one before working with them in group settings.

Youth Involvement

In the first year of the YMHI, ACDPN has focused on forging relationships with youth about to exit care with the goal of building a foundation for future consultations. ACDPN has 2 youth under 35 on its board and one serves as its youth representative. The organization feels it currently sits at [rung 4](#) on Roger Hart's Ladder of Youth Participation.

Boys and Girls Club (BGC) Dawson

With deep roots in the English-speaking community of Verdun since 1959, BGC Dawson is a safe and supportive community centre that offers a wide range of educational, recreational, and social programs. BGC Dawson uses anti-oppressive practices and engages strength-based and trauma-informed approaches in all its activities.

Local Context

Verdun is a beautiful community that is faced daily with gentrification and the destruction of resources for underserved youth and families. The youth served by BGC Dawson are primarily English-speaking and many are from immigrant families.

Background

Since its founding, BGC Dawson has offered social, recreational, and educational activities for all youth. The BGC Dawson Youth Programs reach over 500 participants from Verdun and across the city of Montreal. Through continuous observations, conversations and analysis, BGC Dawson understands the needs of its members and community. The organization uses trauma-informed practices in all its interventions. It is aiming to become a bridge between community members and different resources, including mental health professionals. It was instrumental for BGC Dawson to join the YMHI because it has helped the organization to connect with community partners, has deepened its understanding of youth mental health (barriers/challenges), and added to its repertoire of resources. This will enable BGC Dawson to better refer youth and families to appropriate mental health services.

Gaps and Barriers to Services

Through its consultations with youth in the first year of the YMHI, BGC Dawson has identified the following barriers to accessing mental health services for English-speaking youth in its territory: the prevalence of cultural/familial stigma around mental health issues; the lack of availability of services in English for anglophone and allophone youth whose first official language spoken is English; the lack of time to seek out services; the lack of knowledge about existing services; financial stress; and physical distance between youth and services.

Partnerships and Activities

BGC Dawson's primary partnership for its YMHI project is with the local high school Beurling Academy, with which it has collaborated on numerous projects. BGC Dawson has a youth worker in the school 5 days per week and the organization sits on the governing board of the school. It also has a great collaboration with the school's CLC. The organization's YMHI project has benefited from the involvement of a number of adult volunteers who have experience working with youth in the area of mental health. For the first year of the YMHI, the organization has organized mental health workshops and one-on-one youth consultations, and piloted a youth-produced podcast series. It is also creating a mental health awareness campaign in consultation with its Youth Committee and informed by its various mental health workshops.

Outreach

BGC Dawson is fortunate to benefit from very high participation on the part of its local youth in its programs and activities. Notably, the organization serves a very large population of racialized and socially marginalized youth. The organization has discovered that a best practice to ensure that no youth is left out of its service offerings is to provide a large variety of simultaneous youth programs and activities within its physical space so that youth become accustomed to spending time at BGC Dawson.

Youth Involvement

Involving youth in the design and implementation of projects is the basis of everything that BGC Dawson carries out so that youth can take ownership of the projects that they use. The organization is in the process of creating a Youth Committee that will lead the design of its YMHI project. It feels it currently sits between [rungs 6-8](#) on Roger Hart's Ladder of Youth Participation depending on the given project.



Collective Community Services (CCS)

Background

CCS has always worked closely with Montreal youth. It offers a variety of socio-emotional programs including Girl's Group and Transitions to help youth to prepare for the challenges of tomorrow while encouraging a healthy living environment and education. The organization has provided a sleep-away camp for over 80 years and has worked closely with the elementary and high schools of Montreal to meet the specific needs of the children and create safe and fun learning environments. CCS has also hosted an anti-bullying event called Pink Shirt Day. The organization decided to join the YMHI in order to expand their ability to support the wellbeing of Montreal youth.

CCS is mandated to improve the quality of life of individuals by reducing isolation and effectively supporting those living in poverty, primarily within the ESC of Greater Montreal. The volunteers and staff of CCS endeavor daily to give individuals living in poverty or isolation within the ESC a safe and caring place to which to turn. CCS's youth department specializes in social skills development programs that promote positive social interaction and an understanding of emotions, listening, friendships, and play. These skills include improving communication, learning about one's strengths and weaknesses, learning effective strategies to deal with challenges, and learning how to increase morale and self-esteem. CCS has been part of the CHSSN NPI program, since 2009.

Gaps and Barriers to Services

Through the questionnaire that CCS sent out, which was completed by 31 respondents, the organization was able to recognize that many of the respondents felt they were missing human interaction, were struggling, and were unsure about who to speak to.

Partnerships and Activities

While CCS had initially planned a program focused on pet therapy in schools for the first year of the YMHI, COVID-9 restrictions made this impossible. It thus pivoted to create an online resource instead. With the help of a youth mental health specialist by the name of Zach Fenlon, the organization created and launched an online interactive mental health resource designed for youth ages 15-30. This platform contains 18 subcategories and over 90 resources. It has been shared with 5 partners and 7 high schools across Montreal. The design of the resource was informed by data collected through a mental health questionnaire created by CCS designed for youth and parents of youth.

Outreach

While CCS sought to reach and consult youth with the questionnaire it created, reaching youth through the survey proved challenging since CSS was denied access to schools to promote the survey due to COVID-19 restrictions. In the upcoming years of the YMHI, CSS hopes to have access to the schools and to foster new relationships with alternative schools across its territory.

Youth Involvement

CSS currently has one youth under 35 on its board. It feels it currently sits between [rungs 3–4](#) on Roger Hart's Ladder of Youth Participation, with youth being informed and consulted.



Centre of Dreams & Hopes (CDH)

Background

Prior to joining YMHI, CDH provided a variety of supports and services aimed at meeting the unique needs of youth with neurodiversity. These included; recreational and community activities, speech and occupational therapy, and summer camp and respite services. Although the mental wellbeing of the community members were considered through the lens of a whole-person approach embraced by the above-mentioned programs, there was no mental health-specific service or mission addressed. In discussions with the organization's youth and their families around the mental health challenges of the youth, it became more apparent that the current scope of external mental health services were not meeting the needs of CDH's members. This was due to: the behavior-focused approach taken by education and public support systems which tended/tends to overlook the emotional needs of people with neurodiversity; the lack of counselors equipped to work with a neurodiverse population; and long wait lists. These issues compelled CDH to reflect on the importance of community-driven mental health services available on-site in its organization. CDH's observations were validated during COVID-19, when many of the organization's community members entered into mental health crises for the first time, or experienced an aggravation of previously experienced mental health issues. As such, the organization was responsible for finding an avenue to meet its clients' needs in a way that was accessible, individualized, and holistic. This need was strategically aligned with the objectives of the YMHI.

Since its foundation in 2006 as a Montreal-based organization, Centre of Dreams and Hopes (CDH), was created to offer therapeutic, recreational, and social programs to support children and adults with neurodiversity. The organization offers multiple services including professional speech therapy, occupational therapy, mental health counseling and groups, an early intervention and social skills program, adult education, and family support. CDH is also a gateway to a greater network of information, essential services, and resources aimed at the individual's overall development and integration. The Mental Health Support Program is specifically aimed at offering accessible, adapted, and English mental health services to youth with special needs and their families in the form of individual, family, and group counseling. Moreover, its mental health programs trains professionals in how to work with neurodiverse populations and build awareness on issues surrounding the neurodiverse population visibility in the mental health discourse and accessibility of mental health services.

Gaps and Barriers to Services

Persons living with neurodiversity and their caregivers are vulnerable to experiencing mental health issues due to stigma, precarity in access to services, and challenges associated with developmental life cycles. The pandemic has posed particular stressors on these individuals and their families because of the increased isolation, lack of access to supports, changes in routines, changes of employment and health status on the part of caregiver, and impacts on psychosocial experiences. Despite these issues, few mental health supports exist for youth with neurodiversity and their families/caregivers and few mental health workers have adequate experience in or knowledge about working with a neurodiverse population with concurrent mental health issues. Even more scarce is access to English mental health services for this community.

Partnerships and Activities

In the first year of the YMHI, CDH enjoyed a productive collaboration with the CLSC de l'est de Montréal, specifically with a team working with people with intellectual disabilities. The CLSC team has been identifying people who have not been accessing available public services and connecting them with CDH. CDH has also been working closely with 4 interns from Concordia University, helping to train them in how to better support youth with neurodiversity. In the first year of the YMHI, the organization has developed a psychoeducative tool for educating neurodiverse youth about sexual health and body image. This workbook must be used by trained clinicians. CDH also carried out 4 different 'activity packages: 1) individual counselling with neurodiverse youth; 2) 2 different group counseling series (one on sexual health and body image and one on socio-emotional skills); 3) counselling sessions with family members of neurodiverse youth; and 4) support groups for caregivers of neurodiverse youth (yoga, and mindfulness programs).

Outreach

CDH's partnership with the CLSC has been a major factor in its ability to reach hard-to-reach youth. In the next year of the YMHI, the organization hopes to launch a mentorship program in schools, which has already been developed.

Youth Involvement

CDH consistently integrates the feedback and preferences of the youth it works with into its programs and activities. It is currently working with interns from Concordia to build a Youth Committee composed of neurotypical and neurodiverse youth. The organization feels it currently sits between [rungs 5-7](#) on Roger Hart's Ladder of Youth Participation depending on the initiative, with youth being consulted and informed and sharing in decision-making.

On Our Own (O3)

Background

With a focus on helping young parents and their children, O3 had been wanting to add a mental health component to their mandate for some time. The YMHI gave the organization the opportunity to do so, and specifically to support single parents whose mental health took a turn for the worse during the COVID-19 pandemic.

Founded in 2005, On Our Own (O3) is a Montreal-based non-profit that offers support services and transitional housing to young, vulnerable parents and their children.

Gaps and Barriers to Services

The population O3 serves has often had tenuous or traumatic relationships with institutions due to issues like systemic racism. This history has made it difficult for this population to seek mental health services through the CLSC and other public institutions. Services are not generally adapted to the lived realities of these young parents. When it comes to many of them: there is no childcare included; they are expensive; they do not offer flexible scheduling; they are not trauma-informed; they are not adapted to their learning styles (they are adults but often have low literacy or have had interrupted education).

Partnerships and Activities

O3 has so far not included any partners in its YMHI project, though it hopes to invite a number of guest speakers for its various project-related workshops in upcoming project years. ACDPN, which has a focus on Black mental health, is an ongoing partner of O3. In the first year of the YMHI, O3 planned a series of coffee club social events that provided a space for its clients to share openly about their mental health challenges and to break isolation in the context of the COVID-19 pandemic. Using the adapt workshops series content (from the Canadian Mental Health Association–Montreal), which the organization adapted to be more relevant to the life experience of its residents (young parents), O3's RDC led workshops in which participants were able to learn about mental health concepts and build their vocabulary and ability to assess what challenges and mental health struggles they are going through. This also helped to normalize struggles and helped participants to be able to strategize new coping mechanisms and understand what resources are available. These workshops were animated by the resident development coordinator who is a certified trauma-informed practitioner and a member of the social work order.

Outreach

Since O3 is already in direct contact with the population that it serves, its outreach strategy for its YMHI project involved promoting activities and making one-on-one phone calls to remind its resident clients of events.

Youth Involvement

Youth were somewhat involved in informing the various activities for year 1 of the YMHI. They were especially involved in directing the more informal conversations that took place during the Coffee Club events. O3 feels it currently sits between [rungs 5-6](#) on Roger Hart's Ladder of Youth Participation depending on the project.



Project 10

Background

Project 10 has worked with 2SLGBTQIA+ youth for over 30 years. Today, the organization's mandate focuses specifically on supporting the wellbeing of 2SLGBTQIA+ youth between ages 14-25 in the Greater Montreal Area. As an organization focused on wellbeing, which the organization approaches from a holistic perspective, its commitment to strengthening the mental health of its participants has been central to the work it carries out. Joining the YMHI has enabled Project 10 to expand its network of resources and community partner organizations and represents an important step towards implementing more support systems for 2SLGBTQIA+ youth who are at a higher risk of having poor mental health. Chief among its intentions for joining the YMHI was the pressing need to increase the ways the organization can help the youth served at Project 10 access mental health services during the COVID-19 pandemic. The pandemic has had particularly devastating impacts on the 2SLGBTQIA+ community. Project 10 is an organization which intimately understands the ways that mental health services are severely lacking in these institutions in particular, as they are often ill-equipped and not competently adapted to meeting the unique needs of 2SLGBTQIA+ youth.

Project 10 works to promote the personal, social, sexual and mental wellbeing of lesbian, gay, bisexual, transgender, transsexual, two-spirit, intersex and questioning (2LGBTQ+) youth and adults 14-25. Through advocacy and education, using a harm reduction approach, Project 10 aims to facilitate the empowerment of youth at individual, community, and institutional levels with a particular emphasis on supporting individuals and groups who experience multiple and intersecting oppressions.

Gaps and Barriers to Services

One of the challenges faced by youth who exit care is that they are not often supported with a well-conceived reintegration plan. This is especially true for 2SLGBTQIA+ youth exiting care, who require adapted services and who are negatively affected by the intense gendering of the foster care system. The organization has noted a lack of mental health services in English, or services that are falsely advertised as being bilingual. There is also a lack of non-judgemental spaces; many institutions that offer help are not trained on topics like intersectionality, inclusion, and sexual diversity. Notably, 2SLGBTQIA+ youth still in care have difficulty accessing appropriate mental health support services as they require parental or guardian supervision or permission. This creates a situation in which youth are forced to out themselves or are outed without their consent. The challenge of being part of the Official Language Minority Community in the province presents additional complications to the situation of many 2SLGBTQIA+ youth, who struggle to access services in the language they are most comfortable using. Occupying intersectional identities as both youth and 2SLGBTQIA+ individuals, the difficulty of finding mental health services in English continues to exacerbate the problem and produces an even wider gap in services available to youth served at Project 10.

Partnerships and Activities

In the first year of the YMHI, Project 10 has created a community asset map representing services for English-speaking 2SLGBTQIA+ youth. It also hosted a Youth Group event including a mental health panel, trans voice exploration, monthly dignity, and an experimental panel discussion that guided youth through visioning their ideal holistic mental health landscape in Montreal. Beyond these activities and resources, Project 10 created: a resource and referral database; engaging culturally-adapted infographics; new mental health programming with mental health professionals; an assessment process for youth to provide feedback about services they use; and a research project focused on resource-development for the Direction de protection à la jeunesse (DPJ) adapted to 2SLGBTQIA+ youth exiting care. Project 10 works most closely with child and family services. It is trying to work more directly with school boards to support youth in care. It hopes to work with Teen Having and Batshaw Youth and Family Centres to help them to adapt their services to 2SLGBTQIA+ youth.

Outreach

While Project 10 initially planned to work with youth having exited care, it quickly discovered that this population was extremely difficult to reach and pivoted to working with youth ages 16-18 about to exit care. This way, youth can be aware of Project 10 by the time they exit care. Project 10 has found it very difficult to persuade caregivers and social workers to promote Project 10 and its services, though the precise reason for this challenge is not known.

Youth Involvement

In the first year of the YMHI, Project 10 has been in the 'research phase' of its project, which has involved speaking directly to youth to find out what they want and need most. It gathered voluntary feedback from 3 key service populations: past intervention service users' past Full Circle (QTBIPOC Program) participants; past Gender Gear (free gender-affirming articles Program) service users. Project 10 currently has 8 2SLGBTQIA+ youth under 35 on its board, with 5 new members having been actively recruited this year. The board was given specialized training on how to work with youth. The organization feels it currently sits between [rungs 5-6](#) on Roger Hart's Ladder of Youth Participation, with youth being consulted and informed.

The East Island Network for English-Language Services (REISA)

Local Context

English-speaking communities in the east end of Montreal represent 14.6% of the population. However, it is commonplace for the needs of these communities to be overlooked. Quebec law provides the right to receive health and social services in English depending on available resources. There are 34,035 English-speaking youth aged 15-29 in the CIUSSS du Nord and CIUSSS de l'Est territories. When compared to their French-speaking peers, these English-speaking youth are more likely to be members of a visible minority, to have lower income levels, and to report low educational attainment. There are a total of 6 English high schools in the East and North territories of Montreal with a total of 4882 students. For some schools, dropout rates can be as high as 17.4%. Three of the six schools have an IMSE (Indice de Milieu Socio-Économique) rating between 8 and 10 while the remaining do not exceed 6. The IMSE is composed of two variables: the under-education of the mother and the inactivity of the parents. Research shows that these two variables have the greatest impact on academic failure. All schools in Quebec are ranked on a scale of 1 to 10, with 1 being the most advantaged and 10 the most disadvantaged. A high number of students between the ages of 16-30 that attend vocational schools are either working or looking to find part-time work as they complete their studies. Many have families with young children or live on their own. On average, more than 60% of young adult students come from immigrant backgrounds and are English-speaking. The following issues facing youth were identified in consultation with high schools, employability organizations, vocational schools and community groups in the East and North:

- In high school: anxiety and depression (mental health issues); soft skills; employability.
- Employability: language barriers; practical experience; continuity and retention of youth in employment services; digital literacy.
- Youth with Immigrant backgrounds: financial precarity; financial literacy; knowledge on legal rights; immigration issues; mental health; cultural shock and identity.

Established in 2005, REISA seeks to develop resources and services in English and to promote the English language as a communication tool and not as the language of work in areas where minority groups are more comfortable receiving services in English than in French. Examples of these groups include Chinese, Latino, Indian, Pakistani, Polish and Italian communities. REISA has assisted partnership development in three main areas: expansion of local-level services, outreach to new services and community capacity-building. Keeping the ESC's needs in mind, REISA has identified four priority development sectors: Youth, Seniors, Intellectual Deficiency and Mental Health. REISA established a Youth Network in 2018 to bring together more than 40 partners including schools, CJEs, and other organizations that serve youth. REISA has initiated programs for youth on drug awareness, healthy life choices, transition, nutrition, mental health, bullying, addiction prevention, and employability. Youth mental health initiatives include: an annual Mental Health Fair in schools; an annual Headstrong Summit in collaboration with the Mental Health Commission of Canada; and the English Montreal School Board; and workshops with AMI-Québec. REISA has been part of the CHSSN NPI program, since 2005.

Background

As the local English Montreal School Board (EMSB) has been one of REISA's closest partners since the organization's foundation, REISA has a long history of working with English-speaking youth across its territory. Beyond having a successful track-record of importing various health programs (transition, nutrition, mental health, bullying, addiction prevention, and more) into elementary and high schools, REISA has partnered for several years with CJEs and youth centres across its territory to initiate projects, including projects focused on youth with special needs. In 2018, REISA began building a Youth Network that brings together public sector and community partners working in English and French. The network shares best practices, translations and adaptations of services for the ESC, and outreach and pilot projects. From its foundation, mental health has been one of REISA's priorities. Before the YMHI, REISA initiated a program on resilience and self-esteem at the elementary school level titled *Friends For Life*. It also launched a program on self-esteem for girls at the high school level called *Expressin' Life*. REISA has co-organized an annual Mental Health Fair with the EMSB over the past few years and organizes an annual Headstrong Summit in partnership with the Mental Health Commission of Canada. Since 2015, the organization has hosted an annual Mental Health Forum bringing together public institutions and community organizations to examine services offered to the ESC and experiences of members of the community in accessing those services. REISA has worked closely with AMI-Québec, which sits on REISA's board of directors, to promote and export eastbound programs for caregivers of persons with a mental illness. Additionally, REISA has hosted presentations to seniors on the topic of mental health (through CHEP). Given the high levels of anxiety and depression and well as other mental health struggles related to financial precarity and culture shock (on the part of immigrant youth and their families) that REISA's partnership network has identified in English-speaking youth across its territory, REISA seized the opportunity to address these issues by joining the YMHI.

Gaps and Barriers to Services

There is a major lack of mental health resources in English across REISA's territory, and many youth find themselves needing to seek out services across the island of Montreal if they hope to access any English mental health support at all. The distance of resources is a major deterrent to English-speaking youth across REISA's territory seeking out mental health support.

Partnerships and Activities

In the first year of the YMHI, REISA created a mental health resources poster for the 7 high schools across its territory, a mental health podcast, and a Young Carers Workshop. The podcast was initiated by two groups of 10 students (ages 14-16) at Laurier Macdonald and John F. Kennedy high schools. Topics covered included: mental health issues, kindness, anti-bullying, how to seek support, prevention strategies and techniques. REISA's YMHI project has benefitted from longstanding partnerships with AMI-Québec, the EMSB, and a number of high schools across its territory. For this project, REISA has assisted AMI-Québec in adapting its Young Carers program to the needs of the school board. Beyond these activities, REISA created and disseminated a survey focused on mental health resources titled Youth Take Charge. This survey was shared by many of REISA's partners. With the YMHI, REISA was able to reboot its Headstrong Summit, started in 2019 to fight mental health stigma amongst English-speaking youth, which was paused due to COVID-19. It also continued a series of improvisation workshops with the Montreal School of Performing Arts. These were offered to students at Don Bosco Youth Leadership Center's Happy Days Camp in Rivière-des-Prairies in the summer of 2021 (youth ages 9-11) and at Laurier Macdonald high school in the Fall (ages 12-14). Themes of the workshops included building confidence, taking risks, making choices and being your best self.

Outreach

REISA has begun reaching some youth that are hard to reach by working with CJEs, CEGEPS, and vocational and outreach schools. However, the COVID-19 pandemic made reaching youth that are hard to reach, especially challenging.

Youth Involvement

REISA has created programs that focus on peer support. It currently has 1 youth under 35 on its board. The organization feels it currently sits on [rung 8](#) on Roger Hart's Ladder of Youth Participation, with youth and adults sharing in decision-making.

The (Lower) North Shore

Regional Context

The Lower North Shore consists of 16 communities, including 2 Indigenous communities. This is a region that boasts beautiful natural landscapes and also faces many challenges due to its geographic isolation, difficulties with transportation (limited or non-existent roads connecting communities and prohibitive transportation costs), great difficulty in retaining health professionals, low employment opportunities, and a lack of access to services. Nearly all services in the sector of leisure and recreation are provided on a volunteer basis. With high rates of volunteer burnout, especially since the advent of COVID-19, these services are at risk. With highly limited service infrastructure, youth are increasingly spending their time in front of screens. There are high rates of drug and alcohol use amongst youth in the region. This situation has provoked many community members to fear losing services. Local institutions are struggling due to the drastic drop in population and the effects this drop has had on the communities. In this context, a key objective of community organizations is to advocate for the creation and preservation of services. There are no post-secondary education institutions in the region and there are limited employment opportunities and extremely limited social programming. Over the last 20 years, the communities of the Lower North Shore have experienced an alarming level of outward migration of youth and high unemployment rates. At the same time, youth in the region demonstrate very high levels of place-attachment and a strong sense of belonging. They also have access to beautiful natural environments and many outdoor activities. Factors such as the low cost of living in the region, the strong place-attachment of youth from the area to the Lower North Shore, and growing opportunities for remote working (COVID-19 contributed to this) are starting to draw some young people back to the region.

Coasters Association

Background

The Coasters Association has been focusing its efforts on attracting and retaining youth for some time through projects that have been directed at youth employability (ie. career focus, youth skills link, summer camps, etc). Other youth-focused programs include a Master's Degree program in partnership with the Université du Québec à Trois-Rivières and internships for youth. Place aux Jeunes en Région is another program that Coasters has taken on since 2020. This program focuses on youth attraction and retention. Since its foundation, Coasters has continuously been involved in improving health and social services for the community and has produced a Youth Engagement Guide & Toolkit. The organization has also worked very closely with the local school board. When the YMHI funding was announced, the Coasters Association felt it presented an avenue that the organization could use to support the mental health of youth on the Lower North Shore.

Founded in 1988 by a group of concerned coastal residents, Coasters Association Inc. is a non-profit organization with the objective of creating, supporting, and promoting ideas and actions that contribute to the vitality of the Lower North Shore. The organization is funded in part by the Ministry of Canadian Heritage. The remainder of the funds are received from other government departments (i.e. federal, provincial, and local) and derives from fundraising, donations, and memberships. The association communicates regularly with government officials to represent the needs and challenges of the ESC in the Lower North Shore and to advocate for this population. Coasters Association has been part of the CHSSN NPI program, since 2004.

Gaps and Barriers to Services

The Lower North Shore, and especially the ESC in the Lower North Shore, is affected by dramatic gaps in health and social services and community and leisure activities. There are currently very limited mental health services across the organization's territory. As one respondent from this region wrote in the YPC, "I live in an isolated region, and I wouldn't say that mental health services are lacking, I would say they are non-existent. People suffer in silence because they have no idea where to turn to receive support." There is also a lack of physical spaces for young people to gather. Significant cultural stigma around mental health issues and using mental health resources presents an added barrier to the region's English-speaking youth reaching out for the help they need.

Partnerships and Activities

Coasters Association's main partners for its YMHI project are the school board and the CISSS. While staff at the CISSSCN are eager to meet, there are substantial language barriers and time limitations that render this partnership challenging. The organization was also in touch with a number of stakeholders at the regional, provincial, and federal levels to raise awareness about the challenges faced by its regional youth. In this first year of the YMHI, Coasters Association launched an awareness campaign focused on youth mental health, producing a video with the goal of reducing stigma. It also partnered with a local youth entrepreneur to produce merchandise featuring mental health catch-phrases with the same goal. Beyond these activities, the organization adapted 2 resources from AMI-Québec for its regional youth and promoted mental health resources via social media created by the Youth Mental Health Association of Canada.

Outreach

So far, Coasters Association's outreach strategy has focused on the use of social media and conversations with schools about potential partnerships so that the organization might better be able to reach youth in schools. The YPC was completed by 35 youth from the Lower North Shore. The organization also adapted this survey for school-aged youth from 15-17, receiving 29 responses. Through these surveys, and through conversations with the schools, the organization has learned that students are eager to learn about anxiety and depression. Coasters Association hopes to carry out work in the schools that will help to normalize and destigmatize these terms. The organization realizes that a project like the YMHI will require buy-in from the youth across its territory and that this may be a slow process, perhaps taking the full 3 years of the project.

Youth Involvement

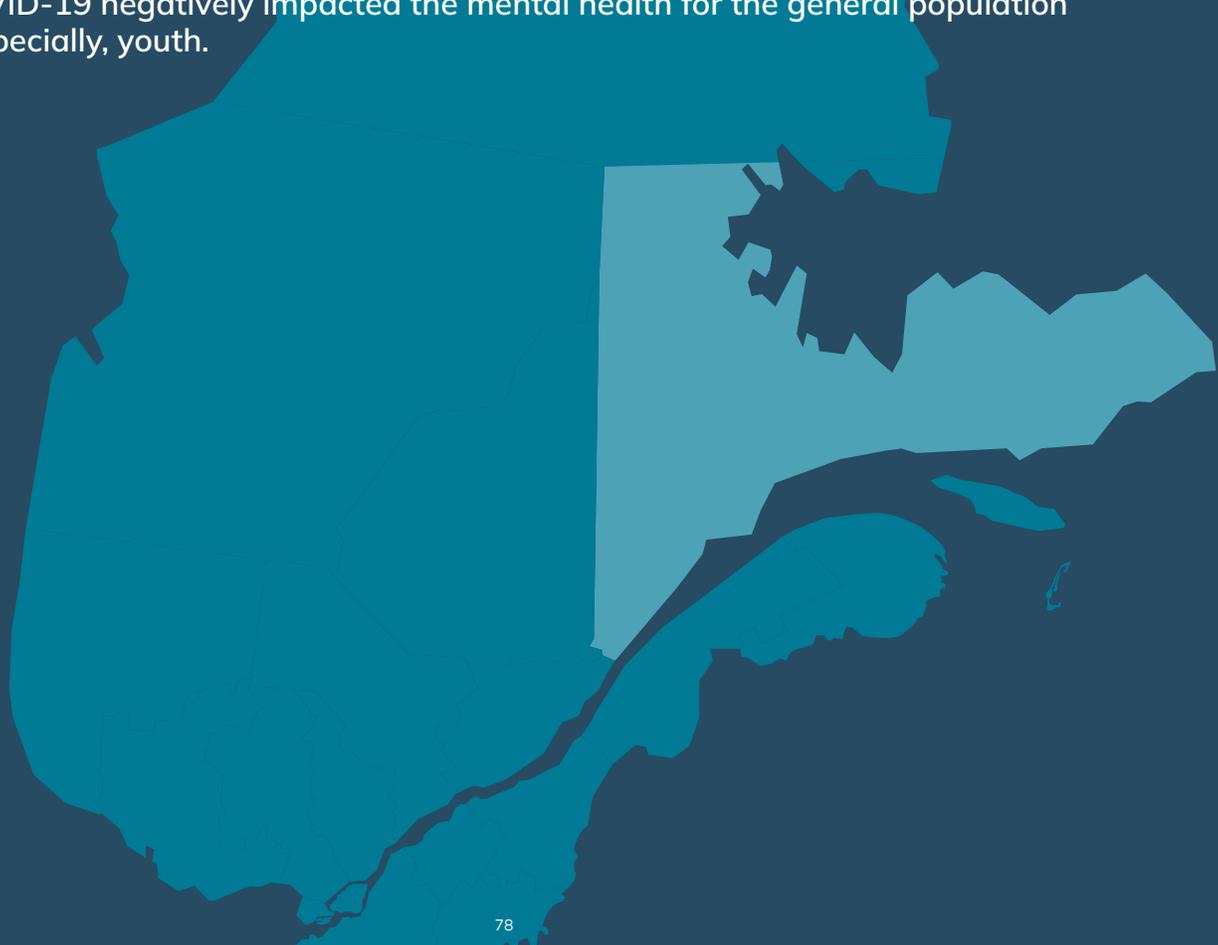
As Coasters Association is still in the 'discovery' phase of its YMHI project, it has not yet implicated youth in the design and implementation of its project. The organization plans to use the YPC results in order to strategize about how to involve youth in its YMHI project for the remaining years of the initiative. The organization currently has 1 youth under 35 on its board of directors and has prepared a presentation for its board about the benefits of including youth on organizational boards. Moreover, the 2 coordinators for its YMHI project are themselves youth. The organization feels it currently sits between [rungs 4-5](#) on Roger Hart's Ladder of Youth Participation, with youth being consulted and informed.



The North Shore

Regional Context

The North Shore Community Association has a constituent territory composed of 5 MRCs, spanning from Tadoussac to Havre Saint-Pierre and including Fermont and Schefferville. The region's population of 2,270 English speakers (3% of the regional population) includes the Naskapi population, the region's first-official-language-English-speaking First Nations. The ESC in the North Shore is historically concentrated in the cities of Baie-Comeau, Sept-Îles, and Port-Cartier. There are also important numbers of English speakers in the remote northern communities of Fermont, Schefferville, and Kawawachikamach. The English-language minority population varies significantly from one locality to another within the region, as do the communities' needs, challenges, and opportunities. According to the 2018 CISSS de la Côte Nord portrait on health and wellbeing for the population of the region, high daily stress and anxiety disorders particularly affect 25-44 year olds and psychological distress particularly affects 12-24 year olds. Psychological distress is a distressing mental state primarily characterized by depression and anxiety. A more recent report conducted by the CISSS de la Côte-Nord indicates that there has been an increase of 11% in the last 5 years in the proportion of high school students with a high level of the psychological distress index (29%). Notably, the COVID-19 negatively impacted the mental health for the general population and, especially, youth.



North Shore Community Association (NSCA)

Background

Over the years, NSCA has worked in collaboration with regional educational institutions to deliver a variety of workshops for youth through partnership initiatives. It has also worked with employability partners to increase access to services and programs in English for English-speaking youth. The NSCA promotes and coordinates the McGill bursary program for youth in its region, which includes hosting an annual Career Fair for high school youth. In the past years, surveys and consultations were held with youth, which have helped NSCA to identify the needs and interests of this demographic. In 2020, before joining the YMHI, NSCA met with high school youth to discuss and identify issues affecting the mental health and wellbeing of youth. It also held a series of psychosocial workshops on various subjects. Through these workshops and discussions, the organization learned that there was a need to continue increasing access to services and resources, to enhance young people's strengths, and to promote positive mental health.

NSCA is a non-profit regional organization mandated to represent and serve the ESC of Quebec's North Shore. It empowers residents and strengthens the community by: making information and resources available; supporting community initiatives; promoting access to services; developing partnerships; and increasing the visibility of the ESC. NSCA has been part of the CHSSN NPI program, since 2009.

Gaps and Barriers to Services

Having gathered information from many community health partners on the North Shore, NSCA has observed an increase in mental health service requests and the psychological distress of employees since the advent of COVID-19. Gaps in services have also been identified. There is understaffing in the community and health care systems and long waiting lists for mental health support services. The extent and quality of the social service support network must be improved, as does the access of English-speaking youth to these services. There is also a need for increased collaboration and partnerships focused on prevention and promotion initiatives. Notably, a language barrier excludes many English speakers from participating in promotional activities and/or accessing services that are predominantly offered in French, and few resources are available in English. Regardless of their culture, language, or socio-economic status, youth are entitled to develop their full potential. Understanding mental health is a big part of overcoming some of the challenges faced by Quebec's English-speaking youth.

Partnerships and Activities

In the first year of the YMHI, NSCA created a database of regional organizations and health services. It has been working with a private clinic to create mental health video capsules for English-speaking youth. It has also joined 2 mobilization tables with other community organizations (The Social Development Tables for the MRC of Manicouagan and the MRC of Sept-Rivières) that have mandates under mental health and wellbeing. These tables are building action plans for filling service gaps in the area of mental health. In September 2021, NSCA planned a 'Gender Identity' workshop at the regional Aire ouverte, which was attended by 4 youth. It hopes to continue to work with the Aire ouverte in planning YMHI-related activities. In March 2022, it planned a 'Body Image and Self-Esteem' workshop at the Queen Elizabeth High School, which was attended by 15 students.

Outreach

NSCA has observed that youth, in general, are challenging to reach. It has sought to reach youth in its region by promoting the YPC and it has outsourced its promotional activities to a company that is creating a communications plan that leverages Instagram to reach English-speaking youth. The organization is launching a campaign focused on reducing stigma around mental health struggles and sharing helpful tips and tricks that youth can use to support their wellbeing.

Youth Involvement

NSCA currently has one youth under 35 on its board. The organization feels it currently sits at [rung 5](#) on Roger Hart's Ladder of Youth Participation. In upcoming years of the YMHI, NSCA hopes to work with a particular school and its CLC to create a 'safe space' for youth to gather. It is involved in ongoing conversations with the local CISSS to identify how its services can be adapted for English-speaking youth.



Outaouais

Regional Context

The English-speaking population of the Outaouais accounts for 18.2% of the region's total population, making it a region with a large percentage of English speakers, ask Nathalie Fillion. The ESC of the administrative health region (RSS) of the Outaouais includes 66,650 individuals and accounts for 6.3% of the English-speaking population across Quebec.¹ English-speaking families in the Outaouais earn a lower annual income, have a higher unemployment rate, and are more likely to be single parents than their French-speaking counterparts. Data collected from the YPC (from a sample of 66 respondents between the ages of 18-29 from the Outaouais region) demonstrated that nearly all respondents struggled with their mental health and that 42% reported feeling anxious, depressed, or worthless most of the time. Outaouais' English-speaking youth are turning to substances like cannabis, alcohol, and nicotine to cope. They are also experiencing financial struggles and express a desire to improve their financial literacy. Finally, the region's English-speaking youth express a need for accessible health and social services, especially mental health services for underrepresented and marginalized communities. According to a portrait produced by the CISSSO's Direction de la santé publique on the mental health state of Outaouais residents, the group most affected by the adverse mental health effect of the pandemic were youth aged 18 to 24 (41%), people from the ESC (28%) and immigrants (25%).

1 <https://centreconnexions.org/wp-content/uploads/2020/03/Des-Collines-de-lOutaouais-Community-Portrait.pdf>

Connexions Resource Centre (Connexions)

Background

Connexions' involvement with youth dates back to 1997, when it offered a Healthy Lifestyles Program in high schools for several years. This program was offered in collaboration with the Western Quebec School Board, which sustained the program by integrating it with their drug and alcohol prevention activities. A summer program was also offered for at-risk youth, which included field trips, workshops on a wide variety of topics related to youth, and a work placement that provided youth with valuable work experience. Over the years, Connexions has offered a variety of activities in schools and at the only English CEGEP in the region. A Regional Youth Forum, which brought together public and community stakeholders and youth, informed the organization of the need for better access to mental health services for youth. Recently, Connexions has been an active member of the Aire ouverte project and has contributed valuable information on the needs of English-speaking youth through its participation on various committees for the implementation of this project.

Gaps and Barriers to Services

The YPC, which was completed by 66 English-speaking youth in the Outaouais, revealed several gaps in services for youth in this region. Gaps included: access to mental health services in English; access to life-skill education to assist youth in developing health coping mechanisms and resilience; and access to activities and workshops for especially marginalized youth. The YPC revealed that there is a desire for more services adapted to LGBTQIA2S+ youth in the region as well as for support with finances and budgeting.

Connexions Resource Centre is a not-for-profit community organization whose mission is to serve and promote the health, wellbeing, and vitality of the English-speaking population of the Outaouais. Its organizational objectives are to develop and deliver relevant, youth-led mental health initiatives that meet the specific needs of the regional youth and to work in collaboration with the public health and social services system, community organizations, educational institutions, and other key stakeholders to improve access to mental health services in English. Connexions has been part of the CHSSN NPI program, since 2005.

Partnerships and Activities

In the first year of the YMHI, Connexions has launched a partner-outreach initiative in the underserved MRC of Pontiac. In particular, it partnered with the local Maison des jeunes du Pontiac and Jeunesse Idem (which works with LGBTQIA2S+ youth) to strategize about outreach and adapting existing programs and services into English. It is also partnering with the CJE Pontiac and adult education centres and high schools in Pontiac to deliver LGBTQIA2S+-affirming programming to English-speaking youth living in this territory. Additionally, it is working with Y4Y Quebec to plan its participation in the region's Pride Festival. The organization has relied on its education and health partners to begin recruiting youth for a Youth Advisory Committee and has joined its new regional Aire ouverte Committee, which has positioned Connexions as a key partner in regional mental health initiatives. This year, the organization also hosted 2 Facebook Live events to promote community services for youth and facilitated presentations by mental health professionals and Sentinel (suicide prevention) trainings for its partners.

Outreach

Connexions heavily promoted the YPC created by CHSSN across its territory, ultimately garnering responses from 66 English-speaking youth, with 16 who agreed to be contacted by Connexions for follow-up exchanges. It also used a journaling workshop it organized at the Western Quebec Career Centre to begin recruiting youth for its Youth Advisory Committee.

Youth Involvement

Given that youth are being consulted through the YPC and that youth are currently being recruited for the organization's Youth Advisory Committee, Connexions feels its YMHI project currently sits on [rung 5](#) on Roger Hart's Ladder of Youth Participation.



The Province of Quebec

There are 225,585 English-speaking youth (15-29) living in Quebec and they form a substantial 20.5% of their language population and 13.8% of the total provincial population according to the available 2016 census data of Canada (Pocock, 2018). To compare, French-speaking youth aged 15-29 years comprise 17.5% of Quebec's majority language group. Most affected by the pandemic in research available thus far (Généreux et al., 2021) are men and young adults aged 18-24, notably English-speakers and individuals residing in the Montreal area, as well as health care workers.

Quebec's English-speaking communities reside high in number on the island of Montreal, as well as nearby Montérégie and Laval and taper off into much smaller communities in areas such as Bas-Saint-Laurent, Saguenay Lac-Saint-Jean and des Îles. A trending growth of youth populations (15-29) was noted in 2016 in Laval, Saguenay and Montreal (Pocock, 2018).

It is important to note that a substantial number of Quebec's English-speaking youth (aged 15-29) are members of a visible minority (35.1%) compared to French-speakers of the same age (12.6%). Although "the proportion of youth who are also members of a visible minority group varies widely by region from 53.1% in the Nord de L'Île de Montreal region and 49.8% in Centre Ouest de L'Île de Montreal to 1% in Cote-Nord and RTS de la Gaspésie." (Pocock, 2018)

When compared to the overall situation of the English-speaking population across the province of Quebec, English-speaking youth are more likely to be experiencing socio-economic vulnerability. Provincially, compared to the total ESC over 15 years of age, there is a markedly high percentage of youth represented in the low-income bracket (about 70% vs 38%). In fact, more ESC youth live in poverty (below the low-income cut-off) than any other age range of the English-speaking population. The proportion of youth living in poverty measures greater among English-speaking youth (23%) than their French-speaking counterparts (15%). There is a notable variance between the youth of minority and majority language populations in their tendency to be living in a lone parent family. English-speaking youth, depending on the region, have higher percentages of unemployment and have lower educational attainment (particularly in apprenticeships or trade certificates) than French-speaking youth (Pocock, 2018).

Based on a comparative analysis of English and French language high schools collected in 2016-17 (Djeha, Améyo et al. 2022), ESC school-aged youth (12-17) scored higher on the following mental health indicators: medically diagnosed with depression or an eating disorder; do not perceive themselves to be in good health; sleep less than the recommended amount; rate the social support they receive in their home as low; report low sense of overall self-efficacy, experienced bullying/cyberbullying or gang violence. Several of these mental health inequalities are identified as well with comparisons of official language minority youth as English-speakers in Quebec compared to French-speakers outside of Quebec (Pan-Canadian Health Inequalities Data Tool, 2015-2018).

More recent census data will update this portrait of English-speaking youth's perceptions of wellbeing as well as mental health indicators, considering the global pandemic.

English Language Arts Network (ELAN)

Background

Early in the development of ELAN's ArtEd program, the organization learned that artists were concerned about the mental health of youth and the community members with whom they interacted when facilitating arts and culture experiences. ELAN first approached CHSSN in 2018 to see how it could collaborate to provide artists with support and resources. Joining the YMHI allowed ELAN to continue this important capacity-building work.

Gaps and Barriers to Services

Teaching artists find that by being outsiders to the schools and communities in which they work affords them a different perspective on the youth they work with. In creating safe spaces for the vulnerability and courage that creative work requires, the teaching artists create spaces in which youth often also feel safe sharing stories and challenges. The teaching artists need to know how to respond to these disclosures and where to refer youth for support for themselves, a family member or friend. The artists often find that organizations that invite them in to facilitate are not aware of mental health support available.

Partnerships and Activities

For this project, ELAN partnered with teaching artists who already had strong partnerships and confirmed contracts with schools or community organizations. This strategy worked incredibly well. ELAN's partnerships with the Quebec Writers' Federation and the Quebec Drama Federation enabled ELAN to reach Teaching Artists from all three Quebec organizations representing diverse arts disciplines.

ELAN is a not-for-profit organization that connects, supports, and creates opportunities for Quebec's English-speaking artists and arts communities. ELAN members are individuals and organizations from a wide array of artistic disciplines, cultural and geographic backgrounds, and linguistic and cultural communities. Together this network reflects an evolving Quebec identity and celebrates the province's cultural, artistic, and social diversity. ELAN ArtEd is a program housed under the umbrella of ELAN, that connects diverse English-speaking Quebec artists who have experience facilitating high-quality Arts & Culture experiences with English schools and communities across the province. The ArtistsInspire Grants project is an ELAN Quebec/LEARN partnership made possible in part by funding from the Government of Canada.

Outreach

ELAN's strategy for reaching youth that are hard to reach for its YMHI has involved working with teaching artists who already have relationships with schools and communities. This strategy allowed ELAN to reach 52 schools, 6 school boards, 8 community organizations, and over 3000 youth with its YMHI project.

Youth Involvement

Five of the teaching artists participating in this project were 35 and under. By sharing their experiences during facilitations, these teaching artists were able to develop strategies to respond to needs they observed and the feedback they received from youth. ELAN's three arts organization partners currently have 10 youth under 35 on their boards and board committees. ELAN feels its project for the YMHI currently sits between [rungs 5-8](#) on Roger Hart's Ladder of Youth Participation, with youth teaching artists leading the design of their teaching programs, and with the feedback of school-aged participants functioning as an ongoing consultation process that impacts project design. In ArtEd's approach to professional development, engaging students' voices is always prioritized.



Leading English Education and Resource Network (LEARN) Québec

LEARN is a non-profit educational organization with a mandate to serve the English-speaking community of Quebec. Supporting the mental health and wellness of youth, educators and families are key preconditions to LEARN's work which focuses on student retention, academic success and strong English-speaking communities. LEARN works to achieve its mandate through the development of school-community partnerships.

Background

As LEARN's mandate is centred on supporting the wellbeing of English-speaking youth, educators, and families across Quebec, its participation in YMHI serves as a natural extension of the organization's core activities and commitments.

Gaps and Barriers to Services

In its experience working with schools and communities, LEARN has observed that pre-packaged projects planned from the top-down tend to have minimal success. By contrast, research shows that projects emerging out of a participatory planning process are more successful. There is a need to develop very accessible tools to teach key stakeholders in schools and communities about how to engage in an effective participatory planning process so that these stakeholders can build projects that respond to their distinct contexts and needs.

Partnerships and Activities

LEARN's project for the YHMI, which will begin in September 2022, will involve the creation of youth mental health innovation labs that bring together schools, stakeholders, parents, and youth ages 15-29. After introducing participants to a design-thinking process, the participants will build grassroots project designs that are specific to their contexts and needs. One of the goals of the labs will be to create free tools and a process that are available to secondary schools and adult education centres. In 2022-2023, LEARN will work with 1 adult education centre and 1 secondary school in Quebec as prototype spaces. The organization is working with Purcolab, which has expertise in creating social innovation labs. All of the strategies for the social innovation labs will be rooted in Social and Emotional Learning (SEL) practices.

Outreach

The social innovation labs are designed to involve a variety of community stakeholders, including youth. Together, these stakeholders will use a design-thinking process to develop outreach strategies that best suit their local contexts and needs.

Youth Involvement

LEARN's YMHI project will centre youth in the design and implementation of the grassroots projects created in the social innovation labs.

Y4Y is a non-profit organization that works to ensure that English-speaking youth have opportunities to take leadership roles in their communities, to inspire their peers to become active members of society, to liaise with and engage the French-speaking community, and to mobilize the broader English-speaking community around issues that impact its vitality.

Youth for Youth Québec (Y4Y)

Background

Founded by youth, for youth, with a focus on assisting Quebec's English-speaking youth and improving the opportunities of this demographic to take on leadership roles in Quebec society, Y4Y's participation in the YMHI is a natural extension of its core activities and commitments. Supporting the mental wellbeing of this demographic is essential to enhance the vitality of the province's English-speaking youth.

Gaps and Barriers to Services

Y4Y organized a special panel of 5 mental health professionals for English-speaking youth focused on discussing gaps in mental health services for English-speaking youth. The panel had 40 youth in attendance. During the panel, the following gaps were identified: a lack of awareness of existing services; a lack of promotion of existing services; a lack of affordable services; a lack of trust in services or in mental health providers; a lack of consistency in services; a lack of coordination between mental health services; a lack of representation of different identities within mental health fields; a lack of accessibility of services for youth living in remote areas.

Partnerships and Activities

Beyond organizing the mental health panel, which it created in partnership with Wellness Art Therapy and the Canadian Mental Health Association Montreal, Y4Y sponsored 13 youth to complete Mental Health First Aid training, organized 4 virtual workshops themed around pressing mental health topics and skills development, including: substance use; active listening; art therapy; and cultural considerations in mental health. These topics were selected following an information-gathering process with youth through social media. Also in the first year of the YMHI, Y4Y collaborated with organizations such as Portage, Creative Wellness Art Therapy, and the Canadian Mental Health Association Montreal in organizing. AMI-Québec assisted Y4Y in promoting its activities throughout its YMHI project and also participated in the mental health panel.

Outreach

Y4Y maintains a very active social media presence, especially on Instagram, which serves as a great outreach tool. It currently has 1,600 followers on social media. The organization has discovered that using a playful, enthusiastic tone in their social media is a best practice that garners higher levels of engagement. The organization has also been reaching out to guidance counselors and mental health counselors in CEGEPS and universities to solicit feedback about the mental health needs and challenges of English-speaking youth. Y4Y has observed that it is increasingly challenging to get youth to participate in online activities as they are affected by exhaustion and “Zoom fatigue.”

Youth Involvement

Insofar as Y4Y is an organization run by youth for youth, its YMHI project sits on rung 8 on Roger Hart’s Ladder of Youth Participation. While the organization is in the process of forming a Youth Advisory Committee for the next year of its YMHI project, and while it carried out feedback surveys for all the workshops it carried out as part of the YMHI, Y4Y feels there is still room to involve youth in decision-making even more in upcoming project years. The organization feels it currently sits between [rungs 6-8](#) on Roger Hart’s Ladder of Youth Participation.

Conclusion and Recommendations

Having carried out over 300 activities and events, involved nearly 8,000 English-speaking youth from across Quebec in its projects, activities, and events, produced and disseminated over 400 resources, and fostered the creation of 136 partnerships, the YMHI has gotten off to a strong beginning in 7 months despite the challenges for outreach and participation presented by the COVID-19 pandemic. Beyond the activities they carried out in the first year of the YMHI, the 24 participating organizations also devoted significant time to planning, strategizing, and laying the foundations for activities, events, programs, committees, and partnerships, for the next two years of the YMHI.

The YPC created by CHSSN as well as the consultations, surveys, and other research that were carried out by organizations as part of the YMHI confirmed that high numbers of Quebec's English-speaking youth are struggling with anxiety, depression, and low mood, and that many members of this demographic are ill-informed about mental health and unaware of existing services and resources they might turn to for support. Particular subsets of this demographic, including youth having exited foster care, 2SLGBTQIA+ youth, Black youth, and youth living with neurodiversity were revealed

to be particularly vulnerable to mental health struggles and particularly affected by service gaps and barriers. The research carried out as part of the YMHI revealed many (and sometimes dramatic) gaps in mental health and social services for Quebec's English-speaking youth as well as numerous barriers (including stigma, low trust in health and social services, and financial stress combined with the prohibitive cost of some mental health services) to these youth accessing existing services. Service gaps and barriers were especially numerous in Quebec's more rural regions, where health and social service infrastructures are much less robust than in urban centres, where populations are often dispersed across large geographic territories and where stigma about seeking out mental health services is especially high. Participating organizations as well as the youth consulted (through the YPC and by the organizations through other surveys, focus groups, and other consultations) emphasized a lack of representation of marginalized professionals and diverse culturally-appropriate, trauma-informed approaches in the healthcare system. They insisted on the need for more programs and services adapted to the specific needs of: youth having exited foster care, 2SLGBTQIA+ youth, Black youth, and youth living with neurodiversity, Indigenous youth, youth

living on a low income, and youth who are regular caregivers. One significant finding of the YPC is the extent to which Quebec's English-speaking youth are struggling financially and, furthermore, the extent to which they feel their financial struggles affect their mental health. About 83% of respondents felt that there should be more mental health services tailored to people who are financially struggling in their region and 27%, that is 126 of the 456 respondents felt they would benefit from workshops devoted to helping them with financial literacy and budgeting.

Key challenges that emerged in the first year of the YMHI involved the difficulty of reaching youth that are no longer in school and who live in geographically isolated territories. These outreach challenges might be addressed by inviting experts working with these youth demographics to give talks or workshops for organizations participating in the YMHI and/or by inviting participating organizations to share best practices and co-develop outreach strategies tailored to these youth demographics.

Organizations participating in the YMHI emphasized the funding they received as part of the YMHI as vital for responding to often dire needs related to mental wellbeing of English-speaking youth in their communities. The organizations also reported feeling well-supported by CHSSN in its management of the project and had productive ideas for how CHSSN might continue to support their projects in the future, which are reflected in the recommendations at the end of this report.

The YMHI has so far been successful in working towards its goal of improving access to mental health resources and services for Quebec's English-speaking youth, and promises to involve young English-speaking Quebecers in the design and implementation mental health activities and events even more than it already has in the next two years of the initiative. Insofar as one of the goals of the YMHI is to reduce stigma around mental health struggles and using mental health services amongst Quebec's English-speaking youth, an evaluation strategy will have to be adopted in upcoming years of the YMHI if CHSSN and the YMHI funders wish to measure whether this goal has been achieved. To be sure, "stigma is a complex and multi-layered phenomenon" (Corrigan and Shapiro 2011) and changes in public and personal stigma can occur slowly over time. If it is determined to be important to measure the impact of the YMHI on reducing public stigma, it is essential that an evaluation strategy that draws on leading research on measuring the impact of programs that challenge public stigma around mental health struggles be created.

The following section offers the evaluator's recommendations for the upcoming years of the YMHI. These recommendations emerged from her consultations with all the organizations participating in the YMHI.

Recommendations

That CHSSN facilitate contexts in which organizations dealing with a similar clientele (i.e. youth exiting care, youth living with neurodiversity, racialized youth, 2SLGBTQIA+ youth,), or facing similar challenges (i.e. reaching youth in rural contexts, reaching youth no longer in school, challenging stigma in rural contexts, a lack of services for youth struggling with substance abuse) can meet, exchange, strategize and collaborate.

That CHSSN continue to encourage participating organization to move away from using Facebook as a primary social media platform for reaching youth and facilitate a small workshop series for participating organizations focused on how to use Instagram and TikTok to engage youth in their projects and consultations and to work on reducing stigma around mental health struggles.

That CHSSN consider creating a small guest speaker series inviting experts on certain issues related to the YMHI to share with participating organizations who feel they could benefit from their expertise. The topics of the series could be decided by consulting this report and by polling all organizations participating in the YMHI.

That CHSSN decide whether it is important for the YMHI to measure its impact on stigma around mental health struggles for Quebec's English-speaking youth and, should the answer be yes, that it develop a research-backed strategy for measuring this impact.

That CHSSN assist participating organizations in rural regions to connect with the virtual mental health support offerings of organizations based in urban centres. In tandem with this recommendation: that CHSSN assist organizations based in urban centres but mandated to serve the province of Quebec to promote their mental health support offering and projects in Quebec's rural regions.



References

Beaudry-Godin, Mélissa and Julie Boulais. “Depuis 2006, la population d’expression anglaise s’est accrue de 21% en Montérégie.” *Périscope* no. 82 (September 2018): <http://extranet.santemonteregie.qc.ca/depot/document/3919/PeriscopeAnglophones-2018MBG-JB.pdf>

Corrigan, Patrick W. and Jenessa R. Shapiro. “Measuring the Impact of Programs that Challenge the Public Stigma of Mental Illness.” *Clinical Psychology Review* vol. 30 no. 8 (2010): <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2952670/>

Djeha, Améyo et al. “Disparités en santé mentale et ses déterminants chez les jeunes du secondaire au Québec selon la langue d’enseignement” 2022, Quebec: INSPQ. <https://www.inspq.qc.ca/publications/2843>

Gallant, Nicole et al. “Portrait du bien-être des jeunes au Québec: Ensemble du Québec.” Édition 2019, Québec: INRS et Fondation Jeunes en Tête. <https://s3.amazonaws.com/u92-fondationjeunesentete/wp-content/uploads/2020/06/02144911/1-ensemble-du-quebec-definitif.pdf>

Généreux, Mélissa et al. “Psychosocial impacts of the COVID-19 pandemic: A frame of reference from lessons learned through disasters in Canada.” 2021, Webinar: NCCEH. https://ncceh.ca/sites/default/files/M%C3%A9lissa%20G%C3%A9n%C3%A9reux_021721NCCEHSeminarSeries-web.pdf

Hart, Roger A. “Children’s Participation: From tokenism to citizenship.” *Innocenti Essay* no. 4 (1992) Unicef. <https://www.unicef-irc.org/publications/100-childrens-participation-from-tokenism-to-citizenship.html>

Pocock, Joanne. “Sociodemographic Profile 2018: Gaspésie-Îles-de-la-Madeleine & MRC les Îles-de-la-Madeleine.” 2018, Québec: CHSSN. https://10mae22rkruy1i4j5xh07m9u-wpengine.netdna-ssl.com/wp-content/uploads/2021/08/mrc24001_Les-Iles-de-la-Madeleine.pdf

Pocock, Joanne. “Key demographic and socioeconomic characteristics of Quebec’s English-speaking youth (15-29)” 2018, Québec: CHSSN. <https://chssn.org/documents/key-demographic-and-socioeconomic-characteristics-of-quebecs-english-speaking-youth-15-29/>

Pan-Canadian Health Inequalities Data Tool. A joint initiative of the Public Health Agency of Canada, the Pan-Canadian Public Health Network, Statistics Canada and the Canadian Institute for Health Information. (2015-2018) <https://health-infobase.canada.ca/health-inequalities/data-tool/Index>

Appendix A: Interview Questions

1: Outreach: In this first year of the YMHI, how have you been reaching youth that are hard to reach? Are there any best practices you have discovered or challenges that you have encountered. If you haven't yet experimented with reaching youth that are hard to reach, how do you hope to do so in the future?

2: Partnerships: Who are you currently partnering with on the YMHI? How are these partnerships going? And how are these partnerships impacting the design of your project?

3: Youth engagement: Have you so far been successful at involving youth at the level of project design, decision-making, and implementation? If so, how? In Hart's ladder of participation, where do you feel your YMHI currently stands? [Refer to page 19 for Roger Hart's Ladder of Young People's Participation.](#)

4: Support: Is there anything you currently feel you need help with to enhance the YMHI? How can CHSSN better support you in the future?

Appendix B: Follow-up Questions

1: In a couple of brief sentences, can you please describe your organization's experience working with youth, on the one hand, and in the area of mental health, on the other, before joining the YMHI and explain why it felt it necessary to join the YMHI?

2: In a couple of brief sentences, can you please describe some of the primary gaps in mental health services and barriers to accessing mental health services for English-speaking youth that you have noticed and which have impacted the design of your project?



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