

# CHSSN

## Youth Pulse Check Survey

### Key Findings

#### Purpose of the #YouthPulseCheck survey:

Gain insight into the wellbeing of English-speaking youth (18-29) and their experience accessing mental health care and supports across Quebec during COVID-19. The data collection period was from December 20, 2021 - March 31, 2022.



Across the board, these subsets of English-speaking youth respondents were shown to be particularly vulnerable to mental health struggles and to the gaps and barriers to accessing adequate mental health services: LGBTQIA2S+ , Black community members, young carers, parents, youth with disabilities and foster care alumni.

## GAPS AND BARRIERS TO ACCESS

**Finding :** Overwhelmingly, English-speaking youth feel there is a dramatic lack of adequate mental health services and support in English in their region, exacerbated by the COVID-19 pandemic.



**90 %**

of respondents experienced feeling mentally unwell within the previous two weeks, and over half of these respondents felt like this “all of the time” or “most of the time”



**40 %**

of respondents, on average, do not have access to a family doctor, similarly **40 %** do not know what mental health services are out there



**46 %**

of respondents said they were not very comfortable or not comfortable at all speaking French and feeling understood when talking about their mental health

*“Not having a family doctor has made it hard to seek help because, due to a lack of French, it is hard to have the courage to make appointments.”*

## FINANCIAL STRESS AND WELLNESS

**Finding :** English-speaking youth felt a high correlation between financial stress and their mental health struggles. This stress is exacerbated by the lack of mental health support available in English in the public sector combined with the high cost of mental health support in the private sector.



**32 %**

of respondents said that their financial struggles negatively impacted their mental health

*“I would like to emphasize that the only reason I have not been able to access therapy is because it is not financially possible.”*

*“There needs to be more in-person therapy services [in English] for people who are financially struggling, including being able to see a therapist for consecutive weeks to get help...”*

## URBAN VS. RURAL OUTLOOK



**Finding :** There are higher levels of stigma felt around mental health struggles and a dramatic lack of services in rural vs. urban regions of Quebec.



**24 %** of respondents based in the most urban areas of Quebec said they felt that they would be judged for seeking help for their mental health.

*"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..."*

There is an urgent need for action regarding the lack of services as demonstrated by the numerous comments by residents of the North Shore and Lower North Shore and in other geographically isolated parts of Quebec



In the rest of Quebec, this percentage jumps to

**32 %**

*"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."*

## INFORMAL SUPPORTS AND COPING MECHANISMS



**Finding :** Instead of turning to public health and social services as a first resort, English-speaking youth are relying heavily on informal support networks and using adaptive and maladaptive coping strategies.



About  
**50 %**

of respondents would turn to their family, friends or significant other most often and only **25 %** would turn to their family doctor or a clinic if their mental health took a turn for the worse.



Over  
**72 %**

of respondents lean on a friend/supportive person or engage in relaxing activities, **57 %** exercise and **35 %** use one or more substances to feel well (i.e. cannabis, alcohol, nicotine, etc.).

*"Just having a phone discussion with friends [helps me to feel well]. It's very important to just have someone to talk to when I am feeling isolated because it makes me realize that I am not as alone as I had originally thought."*

## WHAT YOUTH WANT

Public or affordable mental health services in English (i.e. counselling) and community programming (i.e. life skills)

adapted to different demographic subsets of youth :

- 1 People who are financially struggling
- 2 People from racialized, immigrant, and refugee backgrounds
- 3 People with disabilities
- 4 People who identify as LGBTQIA2S+
- 5 Indigenous peoples

## RECOMMENDATIONS

**Building for diversity and inclusion :** designing an initiative, service, or activity that is responsive to the distinct needs and realities of more vulnerable population groups alongside those of less vulnerable population groups (i.e. flexibility, adaptability, diversity).

**Raising awareness of health partners :** collaborations with health partners to raise awareness of the gaps and barriers English-speaking youth and subgroups within this population are experiencing in accessing mental health support in order to tackle them.

**Fostering youth leadership :** Quebec's English-speaking youth have strong and valuable opinions to share about accessing mental health support in the province and this expertise should be leveraged in the design and implementation of services and resources to support them.