

**Education and Health  
B.C. & Yukon Provincial Council**

**2015.01      Increased Early Intervention and Access to Children and Youth Mental Health Services**

**Whereas,**      An estimated 1.2 to 2 million children and youth in Canada suffer from mental illness, yet less than 20% receive access to appropriate supports, treatment or care due to long wait periods; and

**Whereas,**      This lack of services may contribute to suicide, the leading cause of non-accidental death among youth, which could be decreased through early intervention; and

**Whereas,**      Child and youth mental health is an area of shared federal and provincial/territorial jurisdiction; therefore, be it

**Resolved,**      That national council of The Catholic Women's League of Canada, in 95<sup>th</sup> annual national convention assembled, urge the federal government, in collaboration with provincial/territorial governments, to provide increased early intervention and access to children and youth mental-health programs; and be it further

**Resolved,**      That this resolution be forwarded through the national executive to the other ten provincial councils, encouraging them to become aware of this issue as it pertains to their province/territory, and to act on it, as deemed necessary/prudent.

**BRIEF: Increased Early Intervention and Access to Children and Youth Mental Health Services**

An estimated 1.2 to 2 million children and youth in Canada suffer from mental illness. The Mental Health Commission of Canada states, "...yet, less than 20 percent will receive appropriate treatment" (MHCC, 2015). A 2010 study, *A Preliminary Investigation of Wait Times for Child and Adolescent Mental Health Services in Canada*, concludes, "...current practice does not meet proposed standards of care as they relate to wait times" and that "...when access to treatment is delayed, there may be an increased risk of decompensation and suicide" (Kowalewski et al.). The 2006 federal parliamentary document *Out of the Shadows at Last* states, "The importance of early intervention cannot be overstated. When symptoms of distress or illness first appear in a child or young person, regardless of age, family caregivers, health professionals and educators should intervene immediately" (Kirby, 2006).

"Suicide is the leading cause of non-accidental death among youth, ages 15 to 24, .... Canada's youth suicide rate is higher than many other industrialized countries, including the United States and the United Kingdom. More disturbing is the fact that one of the most important risk factors for suicide is the presence of an untreated mental disorder, which is the case in 90% of youth suicides"(Kirby, 2013). The Centre for Addiction and Mental Health (CAMH) confirms the above statistics and states, "While mental illness constitutes more than 15% of the burden of diseases in Canada, these illnesses receive less than 6% of health care dollars," and "almost a third of Canadians who seek mental health care report that their needs are unmet or partially met. The rate is even higher for children and youth"(CAMH).

"Along with many other aspects of health, child and youth mental health is an area of shared federal and provincial jurisdiction in which the provinces have primary responsibility for the delivery of services. The federal government has undertaken several broad initiatives aimed at improving mental health among Canadian youth" (Butler & Pang). "According to a 2007 report by the advisor on healthy children and youth to the federal minister of health, Canadian citizens believe that the federal government should play an important role in several specific areas related to child and youth health," including, but not limited to "...developing national standards; conducting and supporting research; and collecting and disseminating data"(ibid). The federal government has developed some initiatives (Government of Canada), yet the above statistics support the need for more concerted efforts. "Seventy percent of mental health problems have their onset during childhood or adolescence" (CAMH).

This resolution seeks to address the lack of early intervention and access to children and youth mental health services. We are urging that each level of government work together to ensure that, regardless of a family's financial circumstance, all children have access to mental health programs and services when the need arises. If the federal government provides increased early intervention and access to children and youth mental-health programs, they will be improving the overall health outcomes of children, families, workforces and communities thereby improving the economic health of the country. It is each provincial/territorial governments' responsibility to ensure all children and youth within their province/territory, regardless of financial circumstances, have access to appropriate supports, treatment and care in mental health services as soon as the need arises. This will save the lives of our youth (Butler & Pang).

## Work Cited

1. Butler, Martha; Melissa Pang. Library of Parliament. *Current Issues in Mental Health in Canada: Child and Youth Mental Health*. March 5, 2014
2. Centre for Addiction and Mental Health. *Statistics on Mental Illness and Addictions*. <[http://www.camh.ca/en/hospital/about\\_camh/newsroom/for\\_reporters/Pages/addictionmentalhealthstatistics.aspx](http://www.camh.ca/en/hospital/about_camh/newsroom/for_reporters/Pages/addictionmentalhealthstatistics.aspx)>
3. Government of Canada. Canadian Institutes of Health. "Harper government Invests to Improve Access to Mental Health Services for Children and Youth." <<http://www.cihr-irsc.gc.ca/e/44870.html>>
4. Kirby, Michael. *National Post*. "Canada's two-tiered mental health care". Oct. 28, 2013
5. Kirby, Micheal; Wilbert Keon. Parliament of Canada. *Out of the Shadows at Last, Transforming Mental Health, Mental Illness and Addiction Services in Canada*. May 2006
6. Kowalewski, Karolina, et al. *A Preliminary Investigation of Wait Times for Child and Adolescent Mental Health Services in Canada*. May 5, 2010
7. Mental Health Commission of Canada. "Child and Youth". Web. <http://www.mentalhealthcommission.ca/English/issues/child-and-youth>

## Other Works Used:

8. Blackwell Tom. *National Post*. *Blackwell on Health: Study highlights long mental-health wait lists*. May 16, 2011. <<http://news.nationalpost.com/2011/05/16/blackwell-on-health-study-highlights-long-mental-health-wait-lists/>>
9. Klassen, Andrea. *Kamloops This Week*. "Conversation on suicide prevention has begun." Jan. 16, 2015.

**Action Plan:**

1. Write letters to the prime minister, minister of health and local members of parliament, urging the federal government to invest in pan-Canadian efforts to provide early intervention and access to youth suicide prevention initiatives and programs.
2. Write letters to provincial and territorial governments urging them to increase access to appropriate supports, treatment and care for youth mental health services in their province/territory.
3. Provide information and resources to members and the public regarding the need for youth mental health services, including early intervention and youth suicide prevention initiatives and programs.