

## **REPORT: Dartmouth-Cole Harbour Youth Mental Health Town Hall.**

Office of Darren Fisher, Member of Parliament for Dartmouth – Cole Harbour

[www.DarrenFisher.ca](http://www.DarrenFisher.ca) T: 902-462-6453

<b>Topic</b>	Youth Mental Health
<b>Date</b>	January 19 <sup>th</sup> , 2017
<b>Location</b>	Dartmouth Sportsplex – Nantucket Room 110 Wyse Rd Dartmouth, Nova Scotia
<b>Number of Participants</b>	85

### **INTRODUCTION:**

The office of **Darren Fisher**, Member of Parliament for Dartmouth – Cole Harbour organized a **'Youth Mental Health Town Hall'** on **January 19<sup>th</sup>, 2017**.

The town hall was attended by over **85 constituents**.

The town hall began with opening remarks from MP Fisher, reaffirming mental health awareness and outreach as a top priority for his office, and himself personally in his capacity as MP. Next, a panel discussion began with Dexter J. Nyuurnibe, an outspoken mental health advocate, Jessica Basta and Colette Robert, Vice President Equity and Wellness of the Saint Mary's University Students' Association (SMUSA). The panel was followed by an open forum, giving the opportunity for questions, comments and personal stories regarding mental health challenges to be shared by the constituents in attendance.

All comments in this report were provided by constituents or attendees of the mental health town hall. Various note takers of all ages and backgrounds were in the audience contributing the data to this report. Constituents were given the opportunity to provide submissions through [www.DarrenFisher.ca](http://www.DarrenFisher.ca) and by emailing the office. Some constituents chose to mail their submissions directly to the office.

### **THE ISSUES:**

All comments provided by constituents, at the town hall and via other correspondence, were unanimous upon one key, shared opinion – more needs to be done on the front of mental health.

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### **Access to Services:**

Various stories have been shared by MP Fisher's constituents about their experiences regarding mental health challenges and/or about mental health challenges faced by friends and family. Many of the stories focused on the difficulties encountered by those actively seeking support and/or treatment for a mental illness or ailments related to their mental health.

Whether those in need of assistance sought out emergency mental health treatment from a healthcare centre or were in need of support from a mental health professional, the constituents in question all reported experiencing extreme difficulties.

During the open forum many constituents described issues navigating the system and finding existing resources. With many good programs already in place, there appears to be a great need for one website to find and access all services. Some constituents shared existing mental health programming resources with others in attendance.

### **The Mental Health System's Flaws:**

Regarding what is missing in the mental health system, the panel discussed the ongoing challenge for most people not knowing how to enter the mental health system. Most do not know how to get started.

A need for a more preventative approach was also discussed. This preventative approach to treating mental health issues at earlier stages could be coordinated through peer support systems and by formal peer support programs. With psychiatrist wait-times cited as being months long, the importance of a person in need being able to talk to someone without delay, whether they are a peer or a professional, cannot be overstated.

### **Mental Health in the Education System:**

As different demographics require different levels of support, the question of the transition for children and young adults between secondary school and university, and the difficulties which stem from it, was touched upon. The stresses of ascending to the next education level were made more difficult for some of the panelists who shared that they and many peers did not have the resources to cope with the stress of transition or even the knowledge of how to find available resources to help cope with it. They further noted that teachers often are not

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adequately trained to recognize when students are in distress and could benefit from more support. According to panelists and open forum participants, mental health is still not discussed often enough or early enough in the education system.

### **Mental Health Resources for Parents:**

In the same vein, according to the panelists and participants, not enough is done to support or educate parents on mental health awareness for both themselves and their children. While an improved education system which facilitates better opportunities to positively develop students' mental health is paramount, more public resources specific to parents would be significant. One constituent through correspondence had this to say:

“So much suffering could be prevented by developing better parenting skills. The emotional damage done to children in their formative years is staggering, and affects these children for their entire lives...I truly think that teaching a child self-worth and giving them confidence that they are just as good as others...could prevent a lot of mental health problems prevalent today.”

(Gail, Dartmouth)

### **Mental Health Resources for Immigrants and New Canadians:**

These issues are not just specific to demographics. In the open forum section of the town hall, the plight of immigrants and New Canadians was discussed. Participants reflected on how immigrant communities are already often marginalized by language and cultural barriers. There is a need for more culturally-sensitive approaches and resources.

Long-time residents who might not be typically marginalized by language and culture have a difficult enough time navigating the mental health system for support and treatment. The challenges faced by immigrants and New Canadians seeking the same things are thus exasperated dramatically.

### **Mental Health Standardized Risk Assessment:**

With a more specific concern, a constituent wondered the following: "Is there a standardized risk assessment for hospitals for people in mental distress? Every patient could be at risk for

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suicide therefore every patient should be assessed and not sent home" (Julianne, Dartmouth). While this constituent's question and comment specifically mention the risk of suicide by individuals seeking mental health treatment and the need to explore preventative measures, this does beg a larger question beyond just suicide prevention strategies (as crucial as they are). The constituent is concerned about the possibility of patients being made more susceptible to self-harm as a consequence of their mental health challenges going untreated or not being treated thoroughly enough. Evidently, if there is a province-wide standardized risk assessment process to determine if/when a patient being treated for something related to mental health should be discharged, this constituent believes that the process should be reviewed. And, if there is not such process, the constituent implies that this option should be explored.

### **POTENTIAL IDEAS AND SOLUTIONS**

The panelists and the open forum participants were very vocal on what could be done to improve access to the mental health system for those in need. They shared various ideas, both general and specific, as to what could be done.

#### **Family Doctors:**

In correspondence sent to MP Fisher's constituency office a Registered Nurse working in a clinic in Dartmouth's downtown, had this to share:

"We don't need more studies. We don't need pilot projects. We need finances put into hiring more professionals to help alleviate the jam of patients seeking help. We need facilities available to those who feel they are at the end of their coping... We need more family doctors that can at least be a lifeline to someone when there's nothing else available." (Maggie, Dartmouth)

#### **More Financial Resources:**

The need to commit more financial resources was a widely-shared sentiment. Moreover, Maggie was not alone in calling specifically for more family doctors to better support victims of mental illness who might have no other support options. More generally, numerous comments were made on the lack of easy, timely access to healthcare services from all sources of healthcare available to constituents in Dartmouth – Cole Harbour.

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### **"Stop turning people away"**

There were multiple complaints of people discharged from professional care for a mental illness far too early, and thus forced to return to their everyday life with minimal to no professional support post-discharge. It was stated, more than once, that people have to stop being turned away, especially those who come forward for treatment and/or support for their mental health issues on their own volition to seek treatment.

### **Specific Mental Health Centres and Resources:**

Further suggestions for potential solutions have stemmed from complaints related to. One such suggestion is the need to explore options like "'halfway' or supportive housing" for people recently discharged from the care of a healthcare centre for a mental illness (Dorthoyanne, Dartmouth).

Another constituent suggested accessible, free "drop-in centres" specializing in mental health support and treatment combined with home check-ins by a healthcare practitioner and online options for those in ongoing treatment (Julianne, Dartmouth).

### **Improve Education:**

Better education programs and courses were called for to fill in potential gaps in support and knowledge on mental health which children might experience due to different parenting approaches. Conversely, with respect given to different parenting techniques, more also needs to be done to educate parents on mental health awareness for their own well-being and for their children's.

One constituent (Kim, Dartmouth) had several ideas for mental health specific to children and young people. She stated that to overcome stigma and discrimination among peers, all children should have semi-regular sessions at school with a councillor or psychiatrist. This practice could be used to monitor all students for signs of distress and if all students in a school were going to these mandatory one-on-one sessions, it could normalize discussions on mental health and foster a better understanding and appreciation of it amongst children from a young age.