



Addressing Youth Mental Health

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Date: January 31st.2023

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Overview of What is Mental Health

Every person will experience emotions throughout the day, and everyone has the capacity to feel unpleasant emotions such as anxiety, sadness, anger, or hurt. Every person can experience mental wellness, but not every person will experience a mental illness. Mental illness can be defined as a health condition which impacts emotions, thoughts, and behaviors, which can disrupt daily functioning [1]. Mental illness, which includes addictions, is becoming a bigger discussion as our society begins to recognize and acknowledge the impact it has on our overall health, and our economy. This is not only a problem in Canada. This is a global issue. Across the world, approximately 450 million people are struggling with their mental health which makes mental illness the leading cause of disability [2]. 50% of Canadians will experience mental illness by the time they reach 40 years old, which should be alarming to most people [2]. Such statistics highlights how we must shift our focus to support our communities, especially our youth [2]. The federal and provincial governments across Canada have acknowledged the importance of mental wellness, and the need for appropriate services. Difficulties with mental health prevents an estimated half a million people from going to work each week, and the cost of leave due to mental health disability is almost double the cost of what it would be for someone to take a leave of absence due to physical disability [2].

Many people don't associate death with mental illness in the same way they associate cancer or heart conditions with death. However, the relationship between mental and physical health is undeniable especially as mental health disorders have caused suicide. There have been interactions with law enforcement in Canada, as well globally, which has caused organizations to form to address how police enforcement interact with those struggling with their mental health and/or addiction [3]. Over 4,000 suicides are recorded each year in Canada. People who struggle with mental disorders, especially mood ones, are at risk of developing conditions which need longer-term medical care, and those who struggle with mental illness are twice as likely to struggle with substance misuse [2]. Smoking, or nicotine addiction, are among the leading causes of early death in Canada [4]. These numbers are staggering.

While many adults are impacted by mental illness, youth are sometimes left out of that conversation and often passed off as typical teenaged or adolescent behaviour. This is interesting to note as research shows mental illness frequently begins in childhood or adolescence, and has the ability to impact functioning into adulthood if left untreated and unsupported [5]. During our early years, healthy and supportive emotional development aids in creating a strong foundation for wellness across the lifespan. Of those currently living with a mental illness, 70% saw their symptoms begin well before they turned 18 [6]. While evidence has shown that symptoms often begin in childhood, and has the potential to interfere with healthy development, mental health services often receive insufficient funding. As we approach the third year living alongside COVID, mental health is becoming a more common topic among youth, adults, and policy makers as we begin to see the psychological impacts of the COVID-19 pandemic among our population, especially among our youth.

Across the globe approximately 1 in every 7 youth aged 10 to 19 have experienced mental illness. Disorders such as depression and anxiety are among the top reasons causing disability in youth [6]. Suicide remains one of the top causes of death for people under the age of 29 [2]. Mental health care should be as important as physical health [6]. The consequences of failing to address youth mental illness is simple; it can limit

youths' ability to live full, satisfying lives as they make the transition into adulthood. This affects society as a whole. We are creating a cycle of people not being able to participate fully in their own lives, and this creates a cycle which needs to be ended.

Adverse Childhood Experiences (ACE's)

There are many reasons why a child could experience challenges with their mental health, and even more reasons as to why those challenges can develop into a mental disorder. When youth are in environments where they feel safe, loved, supported, and they are more likely to thrive. A study done in the 1990's linked the significance between the amount of adverse childhood experiences (ACEs) one experiences to several negative effects such as substandard mental and physical health and risky behaviors such as delinquency and substance use or abuse. ACEs are events that could have the potential to traumatize a person, typically occurring before the age of 18. Events within this categorization include but are not limited to experiencing physical violence, neglect, witnessing someone being hurt, death within one's family or community, and also include environmental factors such as substance use within the family, instability in the family unit, and more.

The more risk factors than protective factors youth are exposed to, the greater risk they are at for developing a mental health disorder. Some common situations youth are exposed to that can cause stress include exploring one's personal identity, bullying, negative body image, shame, and pressure to conform to peers. Quality of life at home and relationships are important factors in creating capacity for adversity within youth. Mental health conditions such as depression or anxiety have been proven to affect productivity, motivation, and schoolwork. Youth who experience withdrawal within school are also at risk of socially withdrawing. This can intensify feelings of loneliness and increase the potential for thoughts of suicide [7].

While ACEs are extremely common, they are also quite preventable. They are also costly if left unaddressed. The economic and social costs to communities, provinces, and countries pass hundreds of millions of dollars each year [8]. Reducing the impact of ACEs could not only save money by lessening the pressure mental health currently places on our healthcare system, but can also prevent upwards of 2 million heart diseases cases, as well as the amount of cases of depression and anxiety [8] [9].

Brain Development in Adolescence

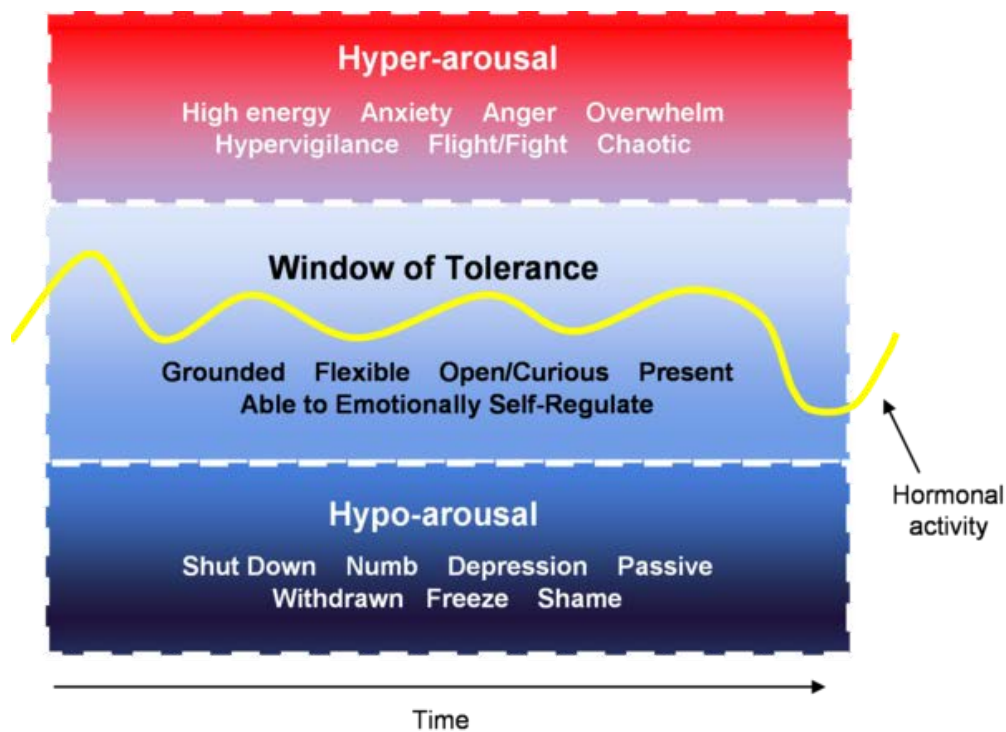
Childhood and adolescence are crucial stages in human development. This is when important social and emotional dynamics are learned and formed, and the brain is developing at a rapid rate. They are quite literally changing in front of one's eyes in such a short amount of time. Consider just how different a person is from 13 to 23. Adolescents change physically, emotionally, and socially. On top of that their sleep cycles are changing, they are developing critical thinking skills, experiencing social-emotional learning, developing interpersonal skills, and learning how to cope and manage their own emotions [10]. Providing youth with opportunities to explore and create their identity, while protecting them from adversity and promoting that social-emotional learning can help aid in creating psychologically healthy young adults. In an environment that is toxic, that development is challenged.

The brain, in the simplest of terms, is designed to ensure survival. It does this by generating internal signals that register what our bodies need at that current moment. The brain also warns and alerts for potential dangers, threats, and opportunities. During adolescence, the body is going through significant changes to the brain, mind, body, and social environments. While many youths will develop into mentally well adults, adolescence is also a particularly vulnerable time for mental health problems. As learned through ACE's, adolescents do not enter mid-childhood as an empty canvas; many of one's early life experiences will play a role in development. Puberty is often described as an abrupt transitional event that marks the beginning of adolescence. But rather it is a slow process that often takes years to fully complete, and each youth will have a different experience with both when puberty begins and when it ends. On the outside we see puberty drastically change youth, however there is much more going on within the body that many people don't fully understand. To put it as simply as possible, puberty changes one's hormonal levels over time which results in changes to the body over time. As stated before, each youth will experience puberty differently and at different times. Early childhood experiences such as exposure to ACEs can alter pubertal timing and lower the age of onset [10].

Puberty is both a social process as much as it is a biological process. Within the body, endocrine levels are changing drastically which results in the development into the adult body. The time at which youth may experience puberty depends on environmental and genetic factors. Within the social context, puberty changes how youth may think and feel about themselves, and how they are treated by others. Some youth who experience puberty at an earlier age than their peers have unfortunately experienced social consequences such as bullying. Researchers have shown that there is a significant link between exposure to stressful events and pubertal timing, which supports the theory that one's social environment plays a strong role in healthy development [8]. While ACEs can influence youth physiologically, it is important to remember that these ACEs will not determine everything about one's mental health. Youth are resilient and adaptive, and so is the plasticity in their brains. While ACE's cause stress and play a role in pubertal timing within youth, which directly impacts their hormonal development, there is also a large potential for recovery during adolescence. One's social context and personal capacity for resiliency can predict the outcome of one's mental health, whether that be for the better or for the worse [10].

To further dive into this perspective on how brain development can help explain youth mental health, the nervous system must be explored on a deeper level. The nervous system is divided into two divisions: the central nervous system which includes the brain and the spinal cord, and the peripheral nervous system which includes the somatic and autonomic nervous system. The autonomic nervous system is further subdivided into two divisions. These divisions are the sympathetic nervous system (SNS) and the parasympathetic nervous system (PNS). The SNS is activated during flight, fight or freeze responses, and the PNS is activated during times of relaxation. The SNS is the foundation for the Window of Tolerance. Giving youth the skills to emotionally regulate themselves takes practice and time but is particularly important for the development of one's window of tolerance. The Window of Tolerance model was created by clinical professor of psychiatry Dr. Dan Siegel and is founded in neuroscience [11]. This model attempts to explain how people can thrive when their emotions are able to be managed within their window of tolerance. When one is within their window of tolerance, one can maintain present, learn, and self-regulate. Throughout our days, especially during times of stress, emotions change. While we are experiencing emotions, our bodies are physiologically changing, and hormones are released. These changes provide us with signals about how we are responding to situations. Everyone will have different "windows" of what they are able to manage emotionally, and those windows are influenced by early childhood experiences. In this model people are fluctuating between hyper-arousal, which is commonly known as the fight or flight response, and hypo-arousal, which is commonly known as the freeze response. When a person is experiencing

hyper-arousal, they may struggle with concentration, irritation, anger, panic, or participate in self-destructive behaviors. When a person is experiencing hypo-arousal, they may feel as if they are shutting down, dissociating, “ zoning out”, or feeling numb. This can look like depression, exhaustion, or extreme disconnection with oneself and environment.



Window of Tolerance Diagram [11]

Mental Health and COVID-19

The COVID-19 pandemic affected every aspect of society. Feeling anxious, stressed, or unsettled as a reaction to the pandemic are normal emotions to such unique and challenging circumstances. One study found that there were five domains in which impact could be assessed: daily routine, stability and structure, friendship, opportunity, and freedom. These domains can be extremely helpful when supporting youth with their mental health in the aftermath of the height of the pandemic. [11] [12]

Whether either of these theories, ACE's and the Window of Tolerance, are more accurate than the other despite their limitations can be debated. Yet both perspectives agree on one thing: the brain goes through tremendous growth during the adolescence period. Adolescent brains are neither “more advanced” child brains, nor are they under-developed adult brains. They are functioning just as they need to be for this point in the lifespan, while going through immense changes. As technology advances and we understand the developing brain more deeply, especially with how it develops under intense stress, we take on the responsibility to ask how we, as a society, can best support youth development. In what ways can we create and implement policies and systems which not only means keeping youth out of harm's way but by teaching them to cope with stress and harm in healthy ways. While adolescence and puberty are sometimes thought of as awful and awkward times in the lifespan, it should be viewed as opportunities for incredible growth and development.

During the pandemic lots of mental health physicians saw an increase in anxiety, depression, stress, and other mental illnesses. The reason for this uprise in mental health patients is because of grief over lost loved ones, isolation, and hardships because of the pandemic. One in five people developed a new mental illness during the Covid pandemic, most therapists and physicians who have been in the field for a long time have never seen such an extraordinary rise in new patients. Almost all of Canada's free services have a waitlist of over two years to receive a consultation, to assess how severe your mental state may be.

Covid-19 affected lots of people just by being diagnosed, which could cause major anxiety and stress. Not only would the fact of being diagnosed with a life-threatening disease cause anxiety or stress, having to isolate for approximately two weeks or more can cause depression and even more anxiety if the individual is reading false information. Battling the sickness could have also been quite taxing on the individual, if they had no support system during the time of their sickness. Which in turn could cause the individual to be sick for longer, as if struggling from depression or anxiety it could be five times as hard to take care of themselves.

In the age group of approximately 25-45 years old major depressive disorder rose from 18% to 23% in a few months because of the covid pandemic, and anxiety disorder rose from 15% to 20% in the same time frame [13]. It is expected that the number will increase more as others who are on the waitlist for treatment get the help they need. Although Covid-19 was a major reason for a lot of mental health issues in children, youth, and young adults, the pandemic taught us lessons that we should learn from as children and youth suffered arguably more than most adults. Youth were forced away from structured routine, their friends, and extended social circles. These aspects of early childhood are integral parts of human development, and youth were likely confused as to what was happening.

Difficulty Accessing Services

While a high percentage of youth will experience mental health challenges, less than 20% will receive appropriate, client-centered treatment [14]. That number becomes even smaller for youth who reside outside of urban cities. For youth who live in rural or remote areas, access to services is even more limited. Even before the COVID-19 pandemic there was a need for change within our healthcare system.

Despite the recognition that mental health conditions can severely impact functioning and development of the brain, less than 1/5th of youth will get appropriate, client-centered care [14]. Both the direct and secondary effects of the COVID-19 pandemic have exasperated an already fatigued system.

Recent surveys among Canadians who have experienced major depression showed only half of those received "potentially adequate care" and only one third of youth above the age of 15 reported their needs met when receiving mental health services. Indigenous youth face further barriers to treatment and are six times more likely to complete suicide than their non-Indigenous peers [15]. Our Inuit youth face one of the highest suicides rates in the world which soars 11 times higher than the national averages [2]. Things must change.

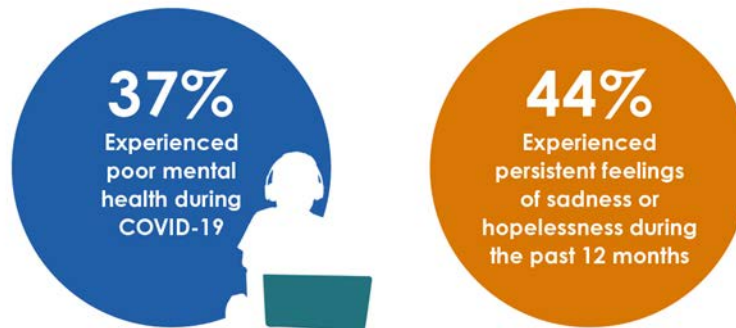
A recent study that was conducted and published at the University of Lethbridge found that there was a lack of continuum of care with the mental health services in Alberta, however Alberta is not alone in this struggle for

services. This study highlighted the overall difficulty that youth and their families experience when navigating the mental healthcare system. Many parents and their children face challenges when finding appropriate and specialized care, resources, and are finding that they need to be their own advocates for their children. The researchers propose the creation of a new, multidisciplinary system approach that connects the healthcare, school, and social services in one information system. This will allow all professionals to collaborate with one another on cases [16] [17].

Stigma

Despite the devastating impacts of the pandemic and COVID-19, those facing isolation and illness were able to speak more easily about their struggles which enabled many more adults and youth to feel validated. It is becoming more normal for people to reach out when needing help instead of feeling ashamed for going through these issues. Social media also has a big impact on reducing stigma in the mental health community. Some social medias such as Instagram, Tiktok and Twitter have started campaigns to reduce the stigma surrounding all kinds of mental health issues. Usually hiring celebrities to speak up about what issues or situations they have gone through, to try to help others understand that they aren't alone in suffering and there are resources. Reducing stigma will take decades to fully break down, even with big initiatives such as Bell Let's Talk. Things are getting better, but there remains much work to be done. According to the Mental Health Commission of Canada, about 40% of parents say they would not tell anyone (including their family doctor) if their child was experiencing a mental health problem. Approximately 60% of people with a mental health problem or illness won't seek help for fear of being labelled. These statistics highlight the work that is left to do.

CDC DATA ON YOUTH MENTAL HEALTH DURING COVID-19



For more information, visit
cdc.gov/nchhstp/newsroom



Teenaged Mental Health Statistics 2022 [18]

COVID's Affect on Children's Social Abilities

Covid's effects on children can be detrimental to their social abilities, and in turn can cause more mental health issues in their future as they are unsure of how to express themselves properly. Social abilities for "covid babies" has been hard for parents to develop since there has been such little contact with other children in their age group in the past few years. This issue could cause children growing up in this age to be more reliant on their parents/caregivers, and cause them to lose social skills and abilities for their future leading them to a more likely possibility of mental health issues or illness. Over the next few years ensuring we have enough child and youth care workers, or speech and social therapists for young children is critical to the development of the children of today.

Where We Are At Now and What We Can Do About It

There are many areas in the mental and addiction health care services where we are falling short of providing sufficient, client-centered care. There are many strategies currently being used that are non-cost effective leaving many needs unmet. Just over 10 years ago, in 2011, mental health disorders were costing our economy just over 40 billion dollars [15]. These numbers, however, do not capture the entirety of the crisis as these numbers do not include the cost of the justice service, child and youth services, educational, and social services. Our government is estimating the direct costs of mental health care to exceed 2 trillion dollars in 30 years [15]. It is no secret that mental health care is severely underfunded. Between 2003 and 2013, the budget was decreased by 6.75 billion dollars (5.4% to 4.9%), which given the estimations is 3-4 times lower than what is needed to appropriately run these services [15]. As stated above in this report, over 40% of youth aged 15 and over already report that their needs are unmet in our current services, and a fraction of those suffering from mental illness receive adequate, specialized treatment.

Due to services receiving less than optimal funding, emergency rooms are becoming a 'front door' for mental health supports. According to one report, in just over a decade emergency departments have seen an increase in mental health visits by 75% [15]. Emergency departments are becoming overrun with non-emergent addiction and mental health patients who are unsure of where else to receive treatment, medication, resources, and support. While people may not think of the emergency department as the typically place to begin one's treatment journey, the pathway towards treatment often includes the emergency room. Youth who struggle with addiction or mental health often have complex, traumatic experiences that lead them to the emergency department. This can include overdoses, suicide attempts, and other intense experiences that may involve long delays before they receive help. Almost 40% of youth who visited an emergency department reported multiple visits [15]. This especially should be concerning to the public as repeat visit to an emergency department can cause challenges for the youth looking for services, and discourage youth from accessing services in the future. These visits to the emergency room are not cheap. On average, mental health visits to the hospital cost more than non-mental health visits [15]. In fact, emergency rooms may be the least cost-effective way to connect youth to the services they need [15].

Preventative measures and early intervention are key strategies in promoting positive mental health and wellness. Research has proven that these strategies along with services that can provide shorter delays in treatment admission while maintaining evidence-based, client focused care can decrease suicide rates [15]. Countries who have begun implementing early intervention strategies saw improvements clinically, socially, and economically,

while youth also reported ease in accessing services [15]. A study completed in Canada found that reducing risks associated with mental health by just 10%, in less than 20 years over 580 million dollars could be saved in direct health care costs each year [15]. Another study completed in the United Kingdom found that by improving a single youths mental wellness, that could save a person \$140,000 over their lifetime [15].

Conclusion

Multiple reports have concluded that many folks will struggle with their mental health at some point over their lifetime or will know someone who will be impacted by mental illness. Research has shown us how debilitating mental disorders can be, how costly they are to our economy, and how they can impact each one of us at any point. Research has also shown us that most conditions will begin in adolescence, shedding light on the importance of supporting and investing in youth mental health care. Health care is not complete without acknowledging the importance of mental wellness, and providing wrap-around services that include early identification of symptoms and preventative care. Providing appropriate services means being able to offer services when they are needed without long wait-times, being connected with appropriate and specialized care, and following through on continuity of care. Brain development, accessing services, and learning more about mental health during the time that we know as Covid- 19, are all just a small part to play in what mental health is and what we need to do to help others come out of hiding to get the help they need and deserve. While we are seeing progress in reducing the stigma youth and adults face in regard to mental health, there is still plenty of work to do.

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