

SASKATCHEWAN ALLIANCE FOR YOUTH
AND COMMUNITY WELL-BEING

Mental Health Action Report



SAYCW
Saskatchewan Alliance for
Youth & Community Well-being

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This report is based on data collected in the *Thriving Youth, Thriving Communities Survey (TYTCS) 2019*. The survey and the *Thriving Youth, Thriving Communities Report - 2019 Survey Findings* are available at www.SAYCW.com.

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I would like to start
off by making clubs for people who
need help and to talk about their
problems.” – Grade 7, Female

Key takeaways

- Mental health programs and interventions for youth should focus on those factors shown to provide the most protection against adverse mental health outcomes such as depressive symptoms, self-harm, and suicide.
- Feeling supported by and connected to friends, families, school, and community gives young people the strongest protection when they experience trauma or struggle with their mental health.
- Youth need support and connection to help improve their health and well-being and to protect them against traumatic experiences.
- The time to act is now. Saskatchewan youth were reporting concerning levels of depressive symptoms, high-risk behaviours, and traumatic experiences before the pandemic. Early results from other research suggests the pandemic is exacerbating existing mental health problems.
- Poor mental health outcomes are strongly associated with traumatic events commonly experienced by many youth, including bullying and dating violence. Some young people report experiencing a higher proportion of traumatic experiences and poor mental health outcomes than their peers.





- Existing supports for youth mental health may not be as effective as they could be.
- Mental health supports can come in many forms, ranging from resources and toolkits, to grant funding, grassroots initiatives, and collaborations involving several organizations working toward a common goal.

DEFINITIONS OF MEASURES REPORTED

ANXIETY

An aggregated measure of survey responses about a young person's sense of control, worry, and self-esteem.

BULLIED

Being the recipient of an act of verbal, physical, or social aggression that is intended to cause harm. Bullying can happen in person, online, or through third parties (e.g., rumors).

DEPRESSIVE SYMPTOMS

Feeling so sad or hopeless that a person stops doing routine activities (e.g., going to school), or leisure activities they used to enjoy (e.g., spending time with friends), or both, for two weeks or longer.

HIGH-RISK BEHAVIOURS

Any act that increases a person's risk of injury, disease, or death (e.g., binge drinking, risky sexual activity, violence).

MENTAL HEALTH

A state of well-being in which an individual can handle life's challenges, have satisfying relationships with others, and be productive in their work and endeavours. Mental health is about more than just the absence of mental illness.

SELF-HARM

The deliberate act of harming oneself without the intention of taking one's own life (e.g., cutting skin, burning, punching objects or self).

SUBSTANCE USE

Binge drinking, cannabis use, or other drug use.

TRAUMATIC EXPERIENCE

Any event that results in a person feeling fearful, helpless, confused, or other disruptive emotions that are long lasting and negatively impact a person's functioning, behaviours, or attitudes.

How we assessed youth mental health

In 2019, the Saskatchewan Alliance for Youth and Community Well-being (SAYCW) surveyed more than 10,000 students and teachers around the province about a variety of factors that influence young peoples' health and well-being. The results of that survey are presented in the *Thriving Youth, Thriving Communities Report*. *

Respondents to the survey identified mental health as the most pressing health issue among young people. (Since the survey was conducted, youth have experienced significant challenges because of the COVID-19 pandemic, which have likely exacerbated existing mental health problems.)

We did a deep dive into what Saskatchewan young people said in the survey about their mental health and their suggestions for improving the mental health of youth in the province. This report includes information about anxiety, depressive symptoms, self-harm, substance use, and suicide behaviour. It also includes information about young peoples' experiences with traumatic events such as bullying and dating/controlling behaviour, sexual assault, violence, and their parents' experiences with trauma and addiction. And it highlights some of the factors that can help protect young peoples' mental health, including support from and connection with family, friends, school, and community.

* Because survey participants were not randomly selected, there are limitations to the generalizability of the findings. Results from the youth who did not complete the survey may differ from what is reported here. For more details about the provincial survey administration and methods, please see the *Thriving Youth, Thriving Communities Report*, 2019 available at: www.SAYCW.com.





Mental health is a state of well-being that involves more than just the absence of mental illness. A person with good mental health has a sense of purpose and a good sense of self. Good mental health also includes feeling connected to others and being resilient, able to manage life's highs and lows and to enjoy life.

Poor mental health can have a significant impact on youth and can affect many aspects of their life, including relationships with family and friends, academic performance, self-esteem, and sense of self-worth.

What youth told us about their mental health

In the survey, youth expressed concern about their mental health (e.g., depressive symptoms), high-risk behaviour (e.g., substance use), and traumatic experiences (e.g., bullying). Many young people said these issues were connected. For example, reports of adverse mental health outcomes were more frequent among youth who also reported experiencing a traumatic event.

The survey asked youth if they felt there were enough mental health supports available to them. Those young people who reported poor mental health outcomes, more traumatic experiences, and high-risk behaviour also said there was not enough support to help them. This finding suggests that while supports are available to young people, they may be missing the mark.

Twice as many youth in higher need of support reported that support was lacking.

ANXIETY

(Sense of Control, Worry, Self-Esteem)

25.8%

VERY HIGH ANXIETY

(n=2,621)

62%

HIGH ANXIETY

(n=6,292)

41.3%

**DATING VIOLENCE,
CONTROLLING
BEHAVIOUR,
OR BOTH**

(among youth who
reported ever dating)

(n=2,147)

YOUTH MENTAL HEALTH — A PROVINCIAL PICTURE

% Youth Reporting (# of youth reporting)

21.4%

SELF-HARM

(Ever)

(n=1,816)

38.2%

SUBSTANCE USE

(binge drinking, cannabis
use, other drug use)

(n=3,877)

23.2%

**CONSIDERED
SUICIDE**

(in the past
12 months)
(n=2,327)

37.7%

BULLYING

(verbal, social,
cyber, physical
monthly or more)

(n=3,804)

35.7%

**PARENT
EXPERIENCED
TRAUMA AND
ADDICTION**

(n=2,306)

38.4%

**DEPRESSIVE
SYMPTOMS**

(n=3,833)

16.8%

**SEXUAL
ASSAULT**

(Unwanted sexual
activity from force
or impairment)

(n=290)

Young people who may be at greater risk of mental health problems

YOUTH IMPACTED BY COVID-19

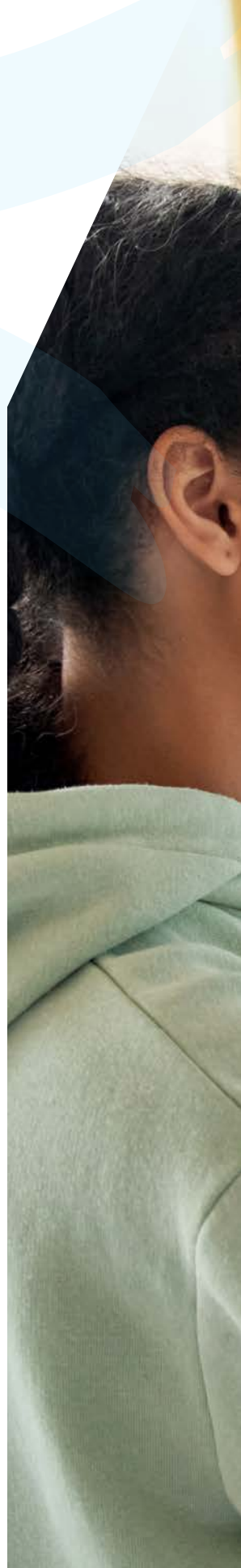
The COVID-19 pandemic is expected to disproportionately affect the mental health of young people because it led to social isolation at a stage in life where connections with peers and adult mentors is essential for healthy development and well-being.^{1,2,3}

Beyond social isolation, COVID-19 has also resulted in disruption to routines, a sense of helplessness and lack of control, barriers to physical activity, and a shortage of activities that provide meaning and personal growth.³ It's likely that pandemic restrictions have had a more pronounced impact on people with depression and anxiety.

While this report cannot speak to what youth have experienced since the start of the pandemic, we do present information on how youth reported they were feeling pre-pandemic, in relation to a number of factors that early research suggests have been negatively affected by COVID-19, including worry; sense of control; support and connection with friends, family, school, and community; screen time; sleep; physical activity in school; depressive symptoms; self-harm; general health; and substance use. We found that:

- Young people who reported worry, low sense of control in life, and a lack of support and connection with friends, family, school, and community were associated with much higher reports of depressive symptoms and self-harm.
- These same factors had a similar but smaller relationship with poor self-reported general health and with higher substance use.
- Young people who reported spending less time on screens and getting more sleep and physical activity were less likely to report depressive symptoms, self-harm, poor general health, and substance use. However, these factors had less impact on mental health than worry, control, and support and connection.

These results suggest that youth who were experiencing poor mental health prior to the pandemic are more likely to be doing even worse now.





Discuss mental health depression, anxiety, etc. Increase supports for people who know someone who is abusing substances or is suicidal, so that they can help the troubled individual.”

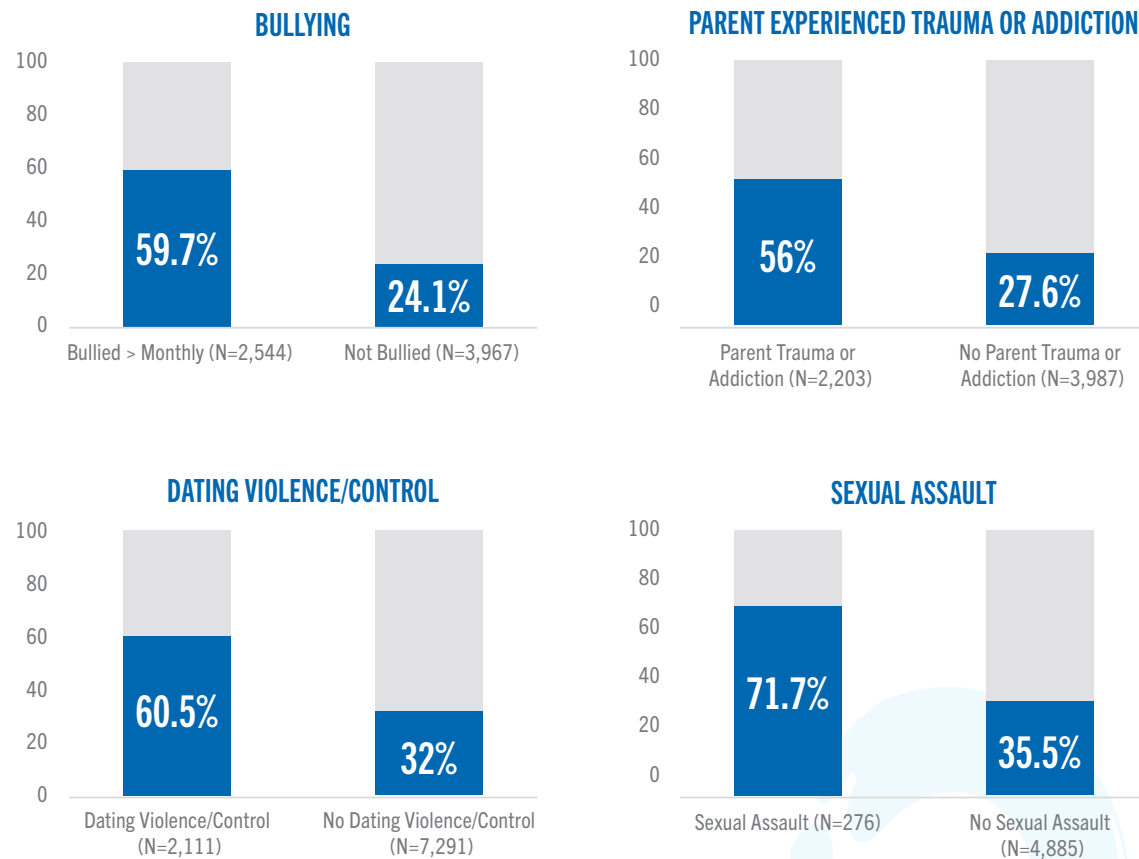
– Grade 10, Female

YOUTH WHO REPORTED TRAUMATIC EXPERIENCES

Youth who reported negative experiences (i.e., bullying, dating violence/controlling behaviour, sexual assault, or having a parent who had experienced trauma, addictions, or both) were more likely to report negative mental health outcomes (i.e., depressive symptoms, self-harm, considered suicide) as well as higher rates of high-risk behaviour (i.e, substance use). This association was consistent across all outcomes and negative experiences that were examined (see examples in graphs below and right).

YOUTH WHO REPORTED NEGATIVE EXPERIENCES REPORTED HIGHER LEVELS OF DEPRESSIVE SYMPTOMS

■ No Depressive Symptoms ■ Depressive Symptoms

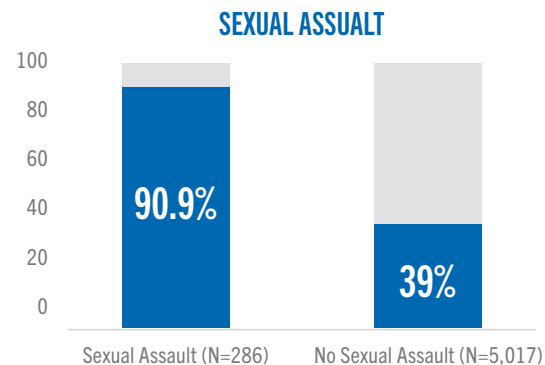
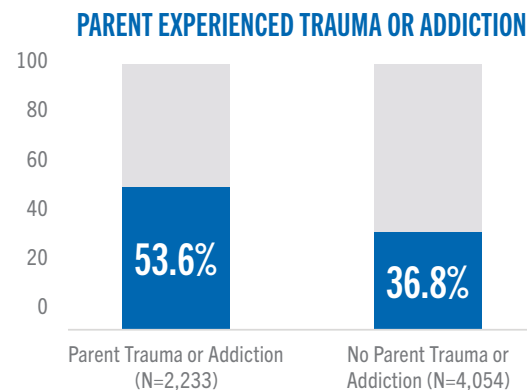
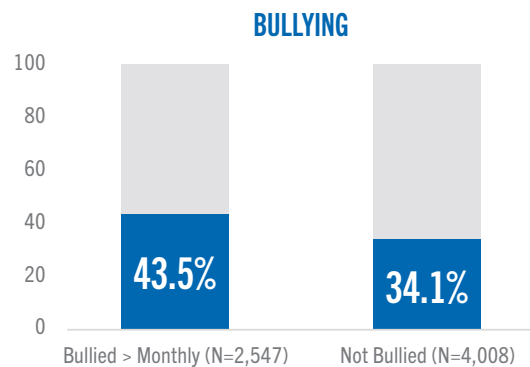




I think school
should teach you how to deal
with stress and homework”
– Grade 8, Female

YOUTH WHO REPORTED NEGATIVE EXPERIENCES REPORTED HIGHER LEVELS OF SUBSTANCE USE

■ No Substance Use ■ Substance Use



These results suggest that youth who have gone through a negative experience may be at greater risk of negative mental health outcomes and high-risk behaviour.

Females, 2SLGBTQ+ youth, First Nations youth, and Métis youth were more likely to report negative experiences, negative mental health outcomes, and high-risk behaviour.

Factors that can help protect young people from mental health problems

PROTECTIVE FACTORS

Preventing mental health issues involves managing risk factors through the promotion of protective factors.

THE PROGRESSION OF MENTAL HEALTH⁵



Protective factors are resources, behaviours, and conditions at the individual, family, or community level that reduce the effects of stressful life events. For example, adequate sleep and being physically active are important protective factors against anxiety and depression.

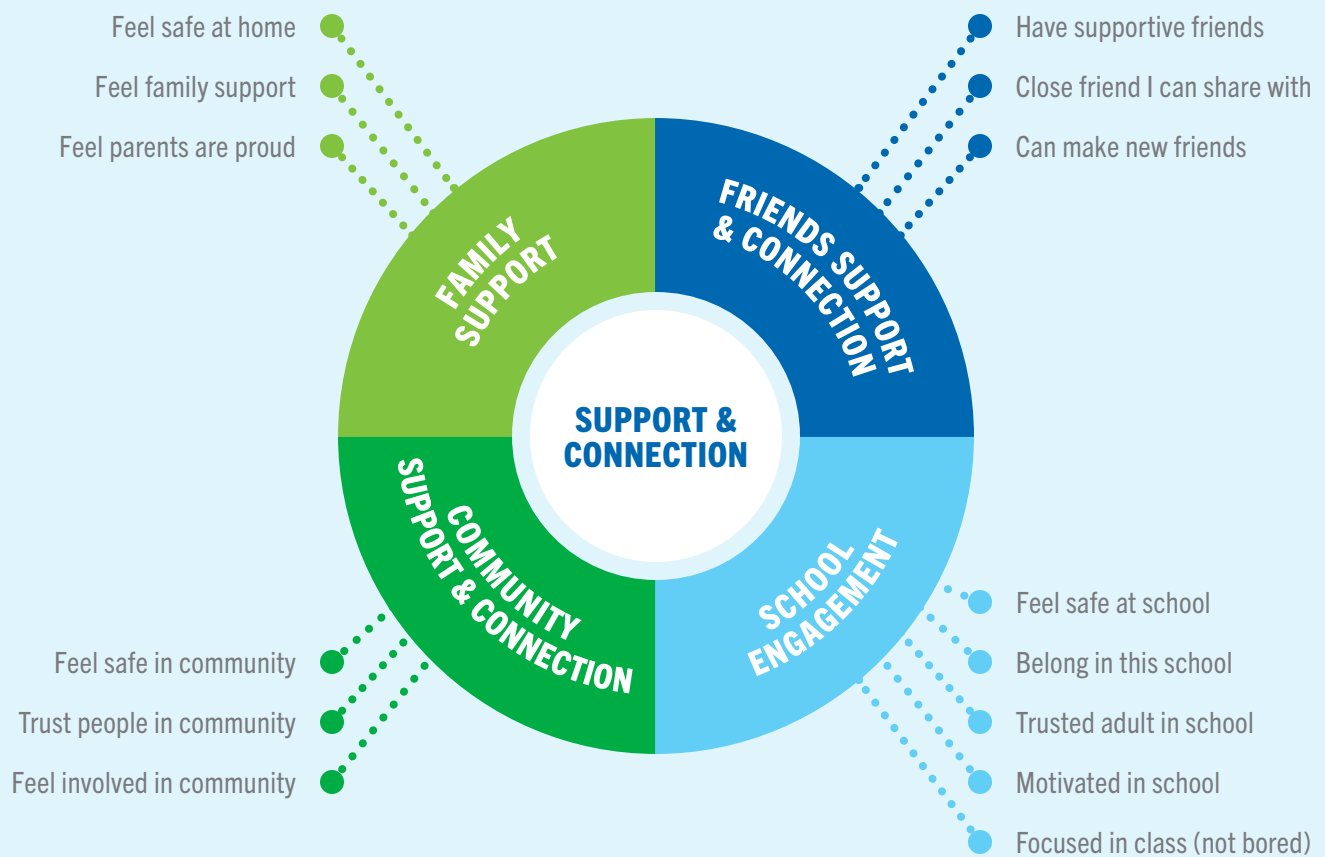
Early adoption of protective factors helps youth to effectively manage risk factors such as stress and isolation, which are associated with anxiety, self-harm, and substance use. Having healthy and supportive relationships and making meaningful connections with friends and family can protect youth mental health.⁴ For youth, these protective factors not only enhance their ability to cope but also build resiliency, equipping them to thrive in all aspects of their life.^{5,6}

The factor we found to provide the most protection against poor mental health outcomes and high-risk behaviour is connections to and support from friends, family, school, and community—which we call “support and connection”.

SUPPORT AND CONNECTION

Support and connection is made up of four pillars: family, friends, school, and community. The following image illustrates the survey items related to these pillars and how we grouped them in our analysis.

SUPPORT AND CONNECTION

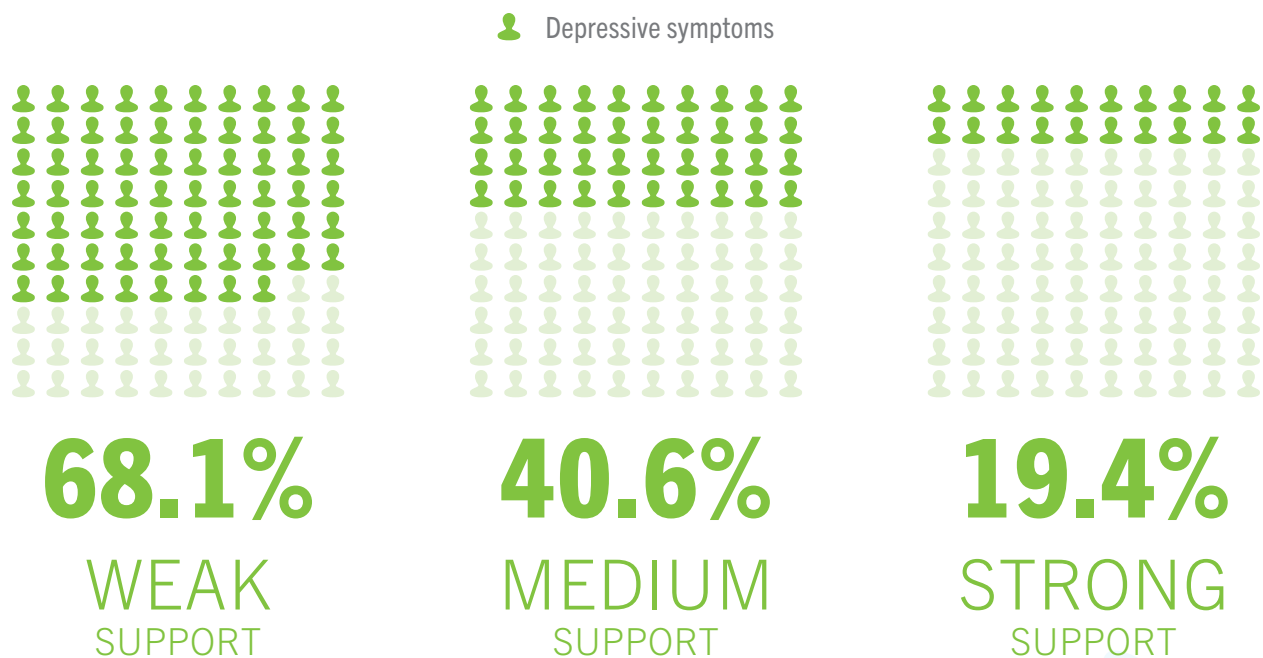


Feeling a sense of support and connection with others appears to provide youth with a strong protective factor for poor mental health outcomes.

HOW THE STRENGTH OF SUPPORT AND CONNECTION AFFECTS MENTAL HEALTH OUTCOMES

We analyzed the survey data related to support and connection to determine if there was variation across the four pillars. For example, were there youth who reported strong support in all areas except family? We found consistency in youth's responses across the four pillars. Youth who reported weak support in one pillar were more likely to report weak support in the other three. Based on this finding, we created three profiles to describe the strength of a young person's support and connection (weak, medium, and strong), then examined the relationship between each level of support and a young person's mental health outcomes and high-risk behaviours.

STRONG SUPPORT AND CONNECTION ASSOCIATED WITH BETTER MENTAL HEALTH OUTCOMES





“

Schools need more supports in place to help youth not just with education and learning disability (which I have) but to understand mental health issues.”

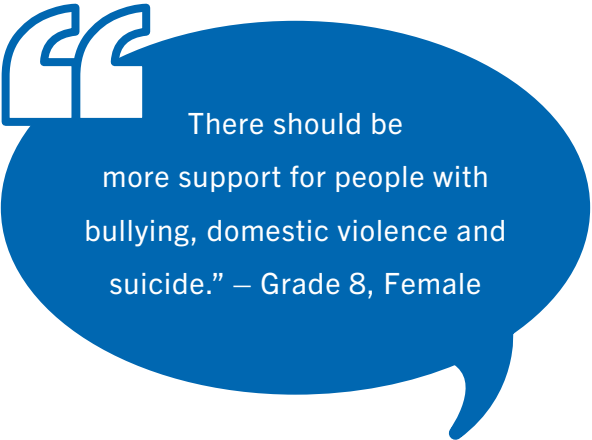
– Grade 11, Female

Building support and connection: Some Saskatchewan examples

Now more than ever, Saskatchewan youth need support and connection to help improve their health and well-being—and to protect them against negative experiences. Some of the best ideas for change can come from the grassroots level.

Local stakeholders often know what is happening in their communities and have practical ideas to support youth. Solutions come in many forms, from resources and toolkits, to grant funding, grassroots initiatives, and collaborations between organizations working toward a common goal. Our website contains a variety of resources and toolkits for promoting youth mental health (<https://saycw.com/resources/toolkits/mental-health/>) as well as reports on the 2019 survey (<http://saycw.com/survey-and-findings/thriving-youth-thriving-communities-survey-2019-results/>).

In 2016 and 2017, SAYCW provided funding to several school- and community-based organizations to develop initiatives aimed at promoting youth mental health and well-being. These projects strengthened connections between youth and their families, schools, and communities. Several grant recipients created new clubs or programs for youth (and sometimes families too) who previously struggled to fit in; funding was used to start clubs for young people interested in cooking, gardening, robotics, and media. Grantees also increased connections for youth from the same community—such as our 2SLGBTQ+ youth and First Nations, Métis, Inuit youth—by engaging them in activities such as camping, sports, and weekly visits over coffee, or in cultural traditions such as teepee ceremonies, medicine walks, or creating traditional regalia. The majority of the initiatives were youth led or involved consultation with youth during the planning and implementation stage; youth also provided feedback afterwards. We highlight several of these grassroots initiatives on the next few pages. (More detail on the grant program and all initiatives funded can be found in our Knowledge to Action Showcase (<http://saycw.com/resources/knowledge-to-action-showcase/>).



There should be more support for people with bullying, domestic violence and suicide.” – Grade 8, Female



HEALTHY FOODS, HEALTHY LIFE - FOOD LITERACY FOR INDIGENOUS YOUTH AND FAMILIES

Sakewew High School (North Battleford) created a nutrition literacy cooking class that focused on healthy, inexpensive meals and traditional Indigenous dishes. Through the weekly class, students learned about food and meal planning, budgeting, shopping, cooking, and cleaning. The program strengthened connections between students, their families, and the school by involving youth and family members in after-school activities with their teachers. Said one of the program organizers: “The cooking classes with students and their families allowed [teachers] to build stronger relationships with the families that participated. Many students brought members of their families to the cooking classes, and fun and laughter were apparent in each of the sessions.”

(Photo courtesy of Healthy Foods, Healthy Life)



INDIGENOUS ENGAGEMENT

Students, staff, and partners of W.P. Bate Community School (Saskatoon) focused on Indigenous engagement, as they felt “it was imperative to see an improvement in overall health, attendance, and engagement with Indigenous students and families.” Organizers invited students, families, and the wider community to participate in song and dance and other cultural initiatives involving Knowledge Keepers and Elders. Through this initiative, students developed more pride in their culture and now share and identity more readily and more often with their school peers and the wider community. Dialogue between home and school has also increased and is more positive; parents and caregivers feel more welcome at the school and a greater sense of belonging.

(Photo courtesy of Indigenous Engagement)



OUTdoor EXPLORATION

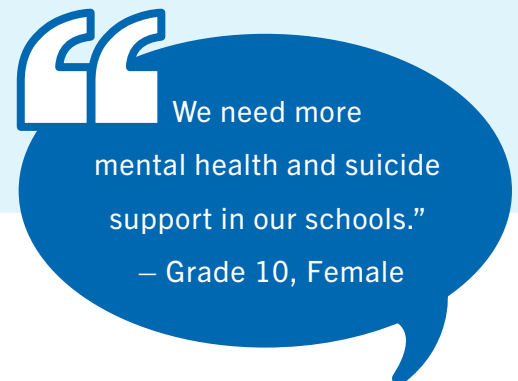
Moose Jaw Pride, SK Pride Network, Prairie South School Division, and Wakamow Valley Authority created a program designed to support the mental health of 2SLGBTQ+ youth by providing them with a safe setting to explore outdoor leisure activities and build their outdoor skills in the context of building friendships, trust, confidence, and appreciation for the environment. Youth were involved in the planning of the outdoor activities with the organizers and the Prairie South Straight Alliance also helped by directing the outdoor activities for the youth. Youth met once a week to spend time together outdoors camping, gardening, canoeing, swimming, hiking, and playing “bubble ball” soccer. Youth continue to connect with and now attend other events put on by Moose Jaw Pride. One parent from a small town outside Moose Jaw reported that the program helped their transgender child—who previously had limited opportunities for social interaction—become more outgoing, active, and connected to the community.

(Photo courtesy of OUTdoor Exploration)

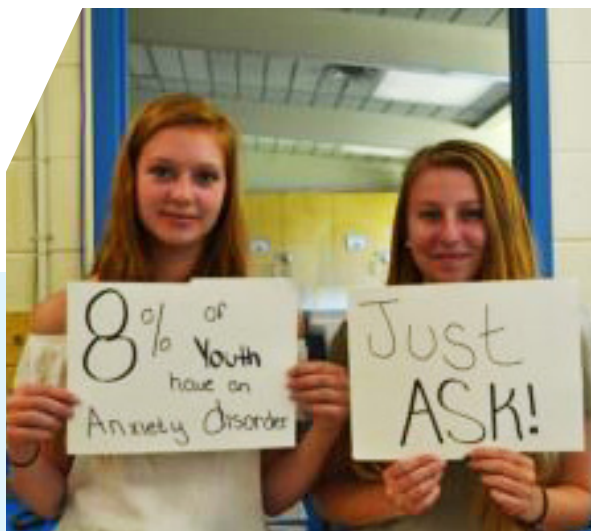


RAINBOW COFFEE

Youth along with PARTNERS Family Services Inc created the Rainbow Coffee youth group in Saskatoon to offer a safe and inclusive space for lesbian, gay, bisexual, transgender, queer or questioning youth, and their allies to meet. Facilitators from various sectors help connect 2SLGBTQ+ youth with resources, provide information about topics relevant to their lives, and offer support, advocacy, and referrals to improve health outcomes for participants.



“We need more
mental health and suicide
support in our schools.”
– Grade 10, Female



MENTAL HEALTH AWARENESS PROGRAM

Indian Head High School developed a mental health awareness program featuring guest speakers (e.g., spokespeople from the local health unit, community groups, RCMP) and movie nights to learn about and discuss different topics related to mental health (e.g., cyber bullying, social media, anxiety, depression, self-harm, and suicide). Students also created videos about these topics, which were shown at the start of each session. The program reduced the school social worker's caseload, improved school attendance and teacher-student relationships, and increased empathy among students. Based on the success of the original program, a student group was created to continue spreading motivational messages throughout the school.

(Photo courtesy of Mental Health Awareness Program)



P.A.C.I. STUDENT HEALTH AND ENGAGEMENT PROGRAM

Prince Albert Collegiate Institute partnered with St. John Ambulance to host a school-wide CPR/First Aid class for students. As well, 20 student ambassadors from across all grade levels took the St. John Ambulance Mental Health First Aid training, which equipped them with the skills necessary to identify fellow students who may be experiencing a mental health crisis and to help connect them to support services. After the training, there was an increase in referrals for mental health supports and a decrease in stigma around mental health among students. As well, school staff now have more open conversations with students about mental health. The program also led to more families participating in parent-teacher interviews and more open communication with staff.

(Photo courtesy of P.A.C.I. Student Health and Engagement Program)

Next steps

It is essential to develop relevant and successful youth-led intervention strategies that identify the factors that promote and protect their mental health and well-being.⁷

The knowledge generated from SAYCW surveys and reports, along with the great work grant recipients have done to increase support and connection for youth in Saskatchewan, create exciting opportunities for us to work together in new ways. To date, many of the improvements have been limited to specific locations around the province.

Just think what more could be accomplished if we were better connected. Collaboration will be key in achieving widespread improvements in youth mental health and well-being. We are excited to begin connecting people, organizations, and systems across Saskatchewan who are eager to share, learn, and improve youth mental health and well-being together.

We will begin by hosting a virtual space for people to come together to discuss how best to build a learning and sharing community to promote youth mental health and well-being. Through this community we hope to:

- **Facilitate connections and develop relationships** amongst those with a shared interest in youth mental health and well-being.
- **Share information** about what work is currently underway, by whom, and where. We want to celebrate and highlight successes and troubleshoot challenges or stuck spots.
- Engage in a process of **collective learning**, through which we can identify tools and processes (e.g., quality improvement) to support community members in their ongoing efforts.

And that's just the first step! In addition to sharing learnings, we are also interested in exploring future opportunities for a coordinated, collective action approach to improve youth mental health and well-being.

Interested in learning more about or joining a youth mental health and well-being learning and sharing community?

Please contact the Saskatchewan Health Quality Council at youthmentalhealth@hqc.sk.ca.



I think that there should be more support in our school system for people who are being bullied. There are many circumstances where someone is being bullied, they try to speak up, and they are shot down.” – Grade 10, Female



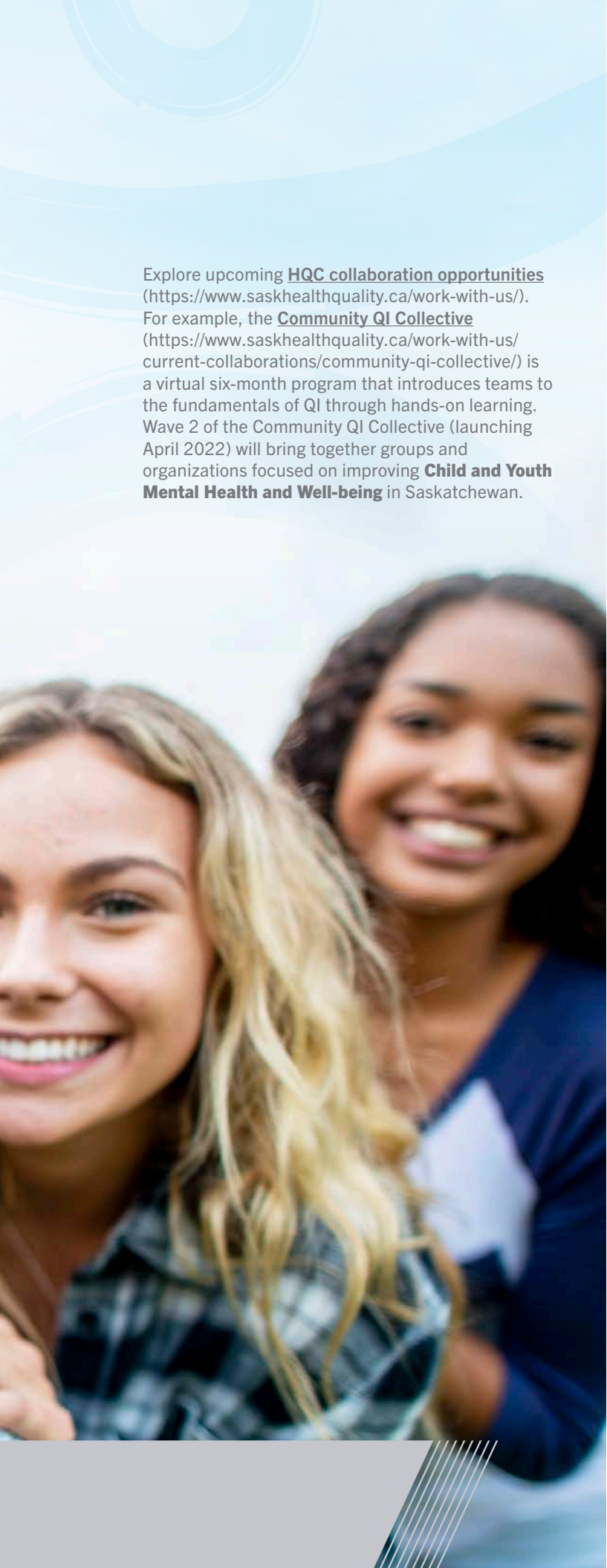
WHERE CAN I LEARN MORE ABOUT QUALITY IMPROVEMENT?

Quality improvement (QI) equips teams with the necessary “toolbox” to help understand and solve problems. QI provides a framework, tools, and techniques to systematically test and implement changes. These changes can result in improved performance, a more effective use of resources, and a higher quality of service for clients.

For a more detailed description of QI, read the blog “**What is quality improvement, anyway?**” (<https://www.saskhealthquality.ca/blog/what-is-quality-improvement-anyway/>).

To learn more about QI-related topics in health and health care or make new connections, check out Health Quality Council’s free monthly quality improvement webinar series **QI Power Hour** (<https://www.saskhealthquality.ca/training-webinars/qi-power-hour-webinars/>).





Explore upcoming **HQC collaboration opportunities** (<https://www.saskhealthquality.ca/work-with-us/>). For example, the **Community QI Collective** (<https://www.saskhealthquality.ca/work-with-us/current-collaborations/community-qi-collective/>) is a virtual six-month program that introduces teams to the fundamentals of QI through hands-on learning. Wave 2 of the Community QI Collective (launching April 2022) will bring together groups and organizations focused on improving **Child and Youth Mental Health and Well-being** in Saskatchewan.



...ask more questions
on sexual stuff because sometimes
people need support on stuff like
that.” – Grade 9, Female

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