







Dear Friends,

No one is alone.

Through our shared narrative, families and carers find strength to face the challenges and to celebrate the joys of caring for their youth who experience mental health problems.

As a community of peers, families and carers join together to support each other on their journey, actively participating in the care, recovery and rehabilitation of their youth.

Communication between families and health care providers empowers families and carers to cope and to build capacity through the processes of knowledge-sharing, resulting in better understanding and respect of the other's role in assisting their youth.

Through active participation in community projects on mental health, families and carers, their youth and members of the greater community, including institutions, organizations and private industry, work together to develop a responsible partnership of collaboration and exchange in order to build on social inclusion and advocate for de-stigmatization.

Yours in the journey toward mental health and well-being for all,

THE ACCESS OPEN MINDS FAMILY & CARERS COUNCIL

Yvonne Pelling | Mary Anne Levasseur | Laurie Roeszler | Karen Pinkoski Kathy Shettell | Laurie Sutherland | Laura Tootoosis | Norma Gould

With special thanks to:

Bernadette Bernard and Leta Bernard, Eskasoni First Nation ACCESS Open Minds Central Office staff Dr. Srividya N. Iyer, NPI and Scientific-Clinical Director, ACCESS Open Minds

TABLE OF CONTENTS





Introduction

Mental health problems do not discriminate. They cut across culture, religion, ethnicity, gender and age, as well as socio-economic, educational and environmental factors. One of the most important and natural resources for youth who experience mental health problems is the family. Family and carer involvement with youth affected by mental health concerns, in the form of education, support and intervention, promotes improvement in quality of life and reduces relapse rates. As such, family and carer participation in treatment, recovery and support may offer the best opportunity for community-based health and safety for youth.



This ACCESS Family and Carers Council Perspectives paper is a compilation melded together of the invaluable contributions made by families and carers who participated in the ACCESS Open Minds Family and Carers Council (AFC Council) at one time or another in the

ACCESS Open Minds national research project in transforming youth mental health services. AFC Council Perspectives reflects the thoughts, ideas, stories and actions of families and carers from rural, urban and Indigenous across 16 community sites in seven provinces and one territory in Canada.

Through the AFC Council and at the ACCESS Open Minds sites, family and carer participant dedication to help and support families and carers of youth living with the challenge of mental health problems, is nothing short of awe inspiring. Their participation in family and carer engagement initiatives, both at ACCESS Open Minds sites and on the national level to raise awareness about the importance of the role of family and carers in youth mental health, has helped change the perspectives of health care providers and policy makers in Canada. Families and carers from the ACCESS Open Minds project came together with with youth, clinicians, researchers and decision makers demonstrating how collaboration among all participants in youth mental health supports youth in overcoming mental health problems and regaining their autonomy.

The AFC Council acknowledges and understands that even as families and carers are a crucial support to the well-being and recovery of youth with mental health problems, they are often the invisible link in the chain of youth mental health services. In their dedicated efforts to help youth seek services, obtain treatment, and journey to recovery, families and carers often ignore or neglect their own needs.

It is therefore the hope of the AFC Council that projects like ACCESS Open Minds continue to welcome families and carers as essential partners in care to improve outcomes in youth mental health.

ACCESS Open Minds: Transforming Youth Mental Health

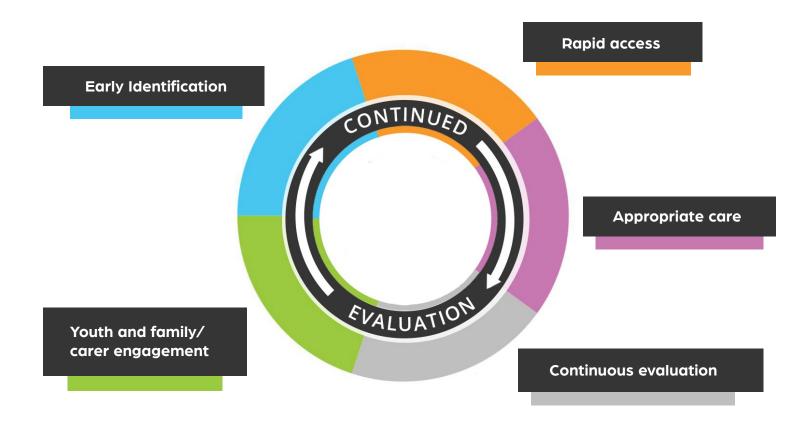
ACCESS Open Minds (ACCESS OM) is a pan-Canadian network whose mission is the transformation of youth mental health services in Canada. Jointly funded by the Canadian Institutes of Health Research (CIHR) under the Strategy for Patient-Oriented Research (SPOR) program, and the Graham Boeckh Foundation (GBF), ACCESS OM seeks to improve youth mental health services and understand their impact in diverse communities from coast to coast to coast. There are 16 ACCESS OM sites operating in seven provinces and one territory across Canada.



The ACCESS OM Approach

The main principle of this SPOR program is to engage patients and caregivers in health care research processes. The ACCESS OM network is made up of youth, families and carers, service providers, researchers and policy makers, and builds on local strengths and engages participants in their own communities to improve youth mental health services. While each ACCESS OM site is unique and reflects the community needs, all sites use standard forms and tools to participate in a common network-wide evaluation of the ACCESS OM framework. This cohesive structure ensures that the services provided best meet the needs of youth in seeking services in their own communities.





The principal objectives of the ACCESS OM framework are:

- **Early identification:** Youth in need get help as soon as possible, and youth and families/carers know where they can seek help.
- **Rapid access:** Help is offered immediately and can be accessed through multiple portals (e.g. walk-in, phone, email, social media, etc.).
- **Appropriate care:** Youth and their families/carers are connected to the right services for them and their needs, and they are fully supported until they receive appropriate care.
- Continuity of care from ages 11 to 25: All youth aged 11-25 receive services without experiencing interruption due to their chronological age (i.e. turning 18 and being sent to adult services).
- Youth and family/carer engagement: Youth and families and carers are engaged in the design and implementation of services as full partners in their own care.
- **Continuous evaluation:** Evaluation is integrated into services to understand their impact, to respond to community needs, and to inform efficacy and cost-effectiveness.

ACCESS Open Minds Family and Carers Council

Defining "Family and Carers"

The term "Family and carers" refers to the parents, siblings, extended family, step-family, family friends, adopted and foster families, and any other informal carers who support and care for youth experiencing a mental health concern. The word "carers" has been intentionally used to include the special people who stand in for family to assist a young person in need.

For reading ease, the term "family and carers" will be referred to as "family" or "caregiver".

The AFC Council

The AFC Council is one of three councils in the ACCESS OM network and is made up of families of youth experiencing mental health concerns. AFC Council members come from ACCESS OM site communities, as well as other communities across Canada. They collaborate with ACCESS OM site teams by welcoming, informing and supporting local families who seek help for their youth or accompany them at one of the ACCESS OM sites.

The AFC Council holds monthly meetings where members come together to discuss important topics related to caring for and supporting youth affected by mental health problems. Members share their experiences from their work at ACCESS OM sites or from their participation in other community organizations. Nationally, AFC Council members regularly participate in ACCESS OM network initiatives, bringing to the table their knowledge and insights from the family perspective.



Vision

Families are acknowledged and welcomed as essential partners in caring for and supporting their youth experiencing mental health concerns. Families are empowered to be an active and positive force in their youth's life as they face the challenges of mental health concerns together.

Mission

The mission of the AFC Council is to assist families in meeting their needs, and in caring for and supporting their youth with mental health concerns, by:

- helping families connect with each other, peer to peer
- providing families with practical information, educational tools and resources in caring for and supporting their youth
- offering a forum for families to share their ideas, insights and knowledge about how they care for their youth

Family: Natural Caregivers of Youth

The AFC Council recognizes that the majority of youth facing a mental health crisis are still living with their family of origin or are being supported and cared for by their family of choice. They may be dependent on their family for their basic needs, support for daily activities, financial support, transportation, and in many cases, aid to access health care services. Because of this dynamic, the family is a natural resource of support that already exists within the life of most youth.

From adolescence through young adulthood, youth experience many milestones along the way. Young people are busy finishing high school, socializing with friends and playing sports. They discover newfound independence and experiment with expressing their creativity. They think about going to university or vocational school. During this time, youth often get their first job or maybe travel. One thing is certain, throughout this period, young people are always dreaming about their future.

At the same time, youth may face different challenges while growing up and gaining more independence. Youth may be concerned about fitting in with their friends or meeting their parents' expectations. They may be going through a difficult time with their family. Some youth may be worried about getting good grades, or making the team. Also, they may be dealing with peer pressure to experiment with alcohol, cannabis or other substances. Youth could be worried about what their future holds.

Health professionals report that 10% to 20% of children and youth in Canada are at risk of developing a mental health problem.

On top of all these important life passages and complicated decisions, health professionals report that 10% to 20% of children and youth in Canada are at risk of developing a mental health problem. For these youth, it means facing and coping with this additional life challenge.

Families can also experience ups and downs, and that includes having differences with their youth. The fact remains that family support and effective involvement with their youth in treatment is one of the strongest influences on youth mental health outcomes. Such support can increase a youth's chances for overcoming this difficult experience.

Family support and effective involvement with their youth in treatment is one of the strongest influences on youth mental health outcomes.

Family members are generally the first to denote that something has changed for their youth, and will generally be the first to seek out a pathway to care. They may also take on the initiative of activating treatment or navigating services while providing ongoing emotional support for their youth. In addition, as a youth's needs change depending on where they are in the process of help-seeking, the family is often on call, being the most consistent and reliable support in the youth's life.

Families are generally a willing partner in any recovery and healing process. They may even act as the information keepers and case managers for their youth. They hold the history of their youth and the family, information which can be useful for service providers as a treatment plan is formulated. Families may help to make and juggle appointments as their youth move through the numerous doctor's appointments or sessions with other mental health service providers. They often act as chauffeur, prescription dispensary, dietician, main support person, and crisis manager.

Families are caregivers in the truest sense of the word and are often the glue that holds it all together.

Families' Needs in Caring for Youth

In order for families to help their youth affected by mental health problems, families may also need help. Caregiving in any circumstance requires time, effort, and basic knowledge about the illness or condition. Families may need help to find financial or other resources to ease the burden associated with caregiving. Families are more effective in helping their youth if they have a collaborative partnership with their youth's health care team. Families may also benefit from the support of other families who have had similar experiences and understand the experience caregiving families provide.

The AFC Council promotes and advocates for the resources, tools and education needed to assist families in caring for and supporting their youth.

The AFC Council recognizes that principal among families' needs are:

- Information and Learning
- Emotional Support and Self-care
- Collaborative partnership among families, their youth and health care providers

Information and Learning

When a youth experiences mental health problems, families may be the first to see something has changed. They may encourage their youth to seek help and offer to accompany them. Whether the youth agrees to seek help or not, families need information about what is going on with their youth.

Once a youth accesses mental health care services, families need to learn more about how they can best support their youth, including the following:

- Understanding the illness what is happening with their youth
- How to provide care for their youth
- How to communicate with their youth
- Availability of financial, emotional, educational and support resources
- How to navigate the health care system

Emotional Support and Self-Care

As families help their youth, they may worry about their loved one's wellbeing and what the future will hold. Families may also have to face new challenges associated with caregiving, including:

- Communicating with health care providers
- Managing caregiving with other responsibilities of family life
- · Coping with sadness, anxiety and grief

In order to deal with these challenges, family caregivers may need extra support and time for themselves to take a break. Supports could include:

- Peer-to-peer family support (discussed in section on Family Peer Support)
- Seeking support from health care providers or other resources
- Self-care
- Community care

Self-care is an essential aspect of caregiving. The well-being of the whole family is a critical factor in supporting a youth's well-being. Self-soothing activities, such going out for dinner or a movie, provide distractions and comfort in difficult times. Self-care activities, such as scheduling time at the gym, planning an outing with friends or joining a group to build up coping skills, help one find meaning and support, growth and grounding. Both are important to family caregiver well-being.

Community care can also be a source of self-care and wellness. It may be helpful to create a care map for yourself of resources on your immediate environment and in your community, by considering the following questions:

- What kind of activities help you to move forward?
- Who cares for you?
- Who is in your support network?
- Who can you rely on to help you when you feel depleted?
- Are there services you can access for your own wellness (e.g., doctors, therapists, etc.)?

Collaborative Partnership among Family, Youth and Health Care Providers

Building Blocks

Families need to participate in a collaborative partnership with health care providers in the care and support of their youth. A collaborative partnership fosters trust and confidence among families, their youth and health care providers. It also helps families increase their ability to care for and support their youth by actively participating from the initial meeting with health care providers, throughout assessment, treatment and recovery processes.

Clear communication and exchange of ideas in a safe and welcoming space is of the utmost importance. When families and their youth can effectively share their concerns with health care providers, this creates an opportunity to see the bigger family picture.

Families are information holders who help shape a more complete and unique understanding of their youth and their own experiences. They provide insight regarding the youth's mental health problem as well as the family dynamic. Health care providers are then able to better inform themselves and educate all participants about mental illness, possible avenues with regard to treatment, as well as a plan for recovery.

The journey to mental health and wellness for the youth will mean meeting various health care providers along the way, many of whom may not share the entire journey with the youth; however, the family who supports and cares for their youth will be there the whole way. Families are a vital link through all the transitions their youth may experience while receiving mental health care.

In order to be effective partners with treating teams and other health care providers, families need and benefit from:

- Information about what treatment programs will best suit the needs of their youth
- Knowing the level and kind of participation they can expect to contribute in the care and support of their youth
- Being able to identify signs of mental health problems as well as signs related to mental wellness
- Basic understanding of why medication may be used in treatment and what are the benefits and side effects of such medication
- Being aware of their family dynamic, including what works and what doesn't in terms of communication, support and care of their youth

At the same time, health care providers can strive to be effective partners with families and youth by implementing the following values. This helps ensure that families are respected as partners in their youth's care journey and that family commitment is valued in the process.

- **Proactivity** of health care providers to offer assistance to families as they care for and support their youth in the short and long term of mental health care
- Respond to the need for support from families in a timely manner
- Refer families to a key person from the treatment team
- Collaborate with families and their youth by ensuring fluid communication between families, youth and health care providers
- Harmonize expectations and responsibilities (Who does what? Share responsibilities between the treatment team and families)

Families are information holders who help shape a more complete and unique understanding of their youth and their own experiences.

Barriers

Both families and health care providers desire the best outcomes for youth affected by mental health problems, yet families still face barriers in their need to actively engage with health care providers. Barriers include:

- Difficulty accessing or connecting with their youth's health care providers
- · Lack of or poor communication between families and health care providers
- Lack of understanding about confidentiality
- Not being able to share information with health care providers about family or youth history, side effects from medication, and substance use
- · Youth not wanting family to participate in their care
- Reluctance by health care providers to involve families as partners in care
- Ignoring suggestions or other input from families

While discussing the above barriers in depth is beyond the scope of this document, an important one is discussed next.



Confidentiality

What is confidentiality?

As families care for their youth experiencing mental health problems, they may become more involved than usual in their youth's life. A family member may ask about how to access mental health services, how the mental health condition developed, or what the

treatment plan or the prognosis is. In addition, family members may ask how their youth can receive financial assistance while out of work, or how to deal with leaving or going back to school or a job.

However, family members may not have access to all the information they may need to help their youth. One reason for this is the obligation of confidentiality a doctor, nurse, therapist or other health care professional has in protecting the information of the youth they are treating. Depending on the province or territory in which a youth lives, once the youth reaches a certain age, they have the right to privacy. For instance, a youth who is 14 years or older in Québec is no longer a minor child, while in Ontario the age is 16 years. Other provinces and territories in Canada may consider the youth no longer a minor at a different age.

What all this means is that whatever is shared between a youth over a certain age and their psychiatrist or other members of the treating team is private and must be kept confidential. If family members need confidential information about the youth to help their youth, they must get written permission from the youth. A youth's right to privacy and confidentiality are protected under the provincial or territorial laws where that youth lives.

How is confidentiality a barrier?

As youth with mental health problems receive care from treating teams in hospitals or community clinics, they are often also receiving support and care from their family, whoever that family is. This approach often is beneficial in helping the youth manage their mental health condition while being supported in regaining their independence.

However, families face challenges in assisting their youth during this time. Adolescence and young adulthood represents a life stage when people are becoming more autonomous in their thinking and actions. Youth at this stage are seeking their own pathways to follow, dreaming and creating their own future, and becoming more independent of their family.

Unfortunately, this same period of time may also signal the onset of mental health problems. As families try to assist their youth with mental health concerns, some challenges they may face include:

- Youth does not acknowledge having a mental health problem;
- Youth decides to stop taking prescribed medication;
- Youth does not want to attend medical appointments;
- Youth does not want their family member to accompany them or be present when speaking with their psychiatrist or other member of their treating team.

This can be a very trying time for family caregivers. While the family tries to care for and support their youth, the youth still feels able to figure things out independently and often rejects their family's help. Also, families are not able to get information from medical professionals about what's going on with their youth because of confidentiality. This situation is unfortunate as research shows that informed family care and support of their youth is one of the most important factors in reducing the chance of relapse.

The right to privacy allows people to decide who has access to their information. When a youth seeks help from a health care provider, it is the duty of the health care provider to keep confidential any information the youth shares. In this way their relationship is built on trust and respect. In fact, it is worthwhile for all those participating in helping the youth with mental health problems to respect a youth's right to privacy and to treat the youth with dignity.

Confidentiality: Respecting the law and building trust

Just as important as keeping confidential whatever information youth share with their health care provider, is building trust and respect among youth, their family and health care providers. When youth trust that their family and health care providers are trying to help them, and the family trusts that the health care provider understands the important role of the family in their youth's care, everyone is more willing to collaborate.

The following tips are helpful in building trusting relationships in caring for and supporting youth during this difficult time:

- Establishing open communication with your youth is important.
- Connect with your youth on a daily basis, not only through activities and homework, but also to get a sense of what's going on in their lives.
- Establish a good connection with a service provider as soon as possible.
- Seek out information and understanding about your youth's situation and ask questions of your service provider.

- Ask your youth to give written permission or consent for the service provider or treatment team to include you as part of the team in your role as the family caregiver.
- A request for help by the family must include the family.
- Make an appointment with the health care provider to consult about the treatment plan and to inform of new developments, positive or negative.
- Sharing information with the health care provider about taking medication, side effects or relapse can be helpful.
- Keep in mind that it is not helpful or useful to share information about your youth that is not related to the mental health condition and could create unwanted distrust.

In addition to the tips listed above, it is good to keep in mind that even if a health care provider cannot obtain consent from the youth to share information with the family, it is still possible for the health care provider to share general information about mental health problems, resources for the youth and their family, information about the clinical program, among others. It is also possible for the family to share relevant information with the health care provider. The key here is to ask the question.

Finally, because the rules and regulations around confidentiality and privacy vary depending on the province or territory, it is a good idea for families to familiarize themselves with the regulations where they live.



AFC Council – Indigenous Perspective



Tradition and Culture in Supporting Families

Culture & Community

Our programs target holistic individual and family development by:

- · Integrating traditional values of family and kinship with realities of modern living
- Cultural framework based on restoring balance through tradition
- Traditional teachings foundational to healing and a productive lifestyle

Family objectives include:

- Provide teachings/ceremony for individuals to enhance their skills.
- Teach individuals to find honour in the teachings of the Knowledge Keepers.
- Developed sense of self.
- Better understanding of traditional concepts.
- Help participants to expand their knowledge, which will increase their understanding of survival, kinship, and tradition.
- Honour each participant's distinct identity as gifted by the Creator

Community Tribe
Law Protocol
Headman
Chief

Individual Laws
Protocol
Children
Grandchildren

Clans
Ceremonies
Protocals
Laws
Rain dance Bundles
Horese dance
Medicine
Ghost Dance
Head Men

Family and Community Mapping

Immediate Family
Mom, Dad, Brother,
Sister, Aunties, Uncles,
Nieces, Nephews,
Grandparents, Great–
Grandparents
Protocol
Law Head Men

Traditional Adoption
Mom, Dad,
Brother, Sister, Aunties,
Uncles,
Nieces, Nephews,
Grandparents, GreatGrandparents
Protocol
Law Head Men

In-laws Extended
Family
Mom, Dad, Brother,
Sister, Aunties, Uncles,
Nieces, Nephews,
Grandparents, GreatGrandparents
Protocol
Law Head Men



Neutral, safe, inclusive spaces

First and foremost, the abuse that has been suffered within Indigenous people is in our DNA. Being an Indigenous person, you are born with all of the intergenerational trauma that your ancestors had faced.

Two-eyed Seeing (Albert Marshall Sr.)

LEARN... to see from one eye with the best in Indigenous knowledges and ways of knowing, and from the other eye with the best in Western knowledges and ways of knowing... and LEARN to use both these eyes together for the benefit of all. (Elder Albert Marshall Sr.)

It is important to implement two-eyed seeing in any culture, but first you have to be able to master your own culture and identity before integrating the other. You have to acknowledge your history regarding culture, self, and community.

Seek to understand, appreciate and integrate lived experience of the clientele

Our clinicians are from the community, which has allowed many doors to open up for our community members accessing services. Accessing services in our language and culture, and having a clinician from the community has allowed us to earn respect throughout the years. It makes the community members more comfortable in accessing services because they have seen their clinicians face many ups and downs, things they have overcome and the struggles that they have faced, and that they, too, are human.

Allow for individualization: Holistic and client-centered service delivery

Within an Indigenous community, we are ALWAYS meeting a client where they are at, physically and mentally. Physically meeting them where they are at means meeting them in their homes, outside in the community, and at the office. Mentally meeting them where they are at means that the interventions and terminology being used during sessions are appropriate to the client. Families are always welcomed to all services within communities and meeting them where they are at in every aspect is our practice.

Identifying circles of care/resources

Our community members and clients are educated about the services that are available to them to make the changes in their lives and also to have additional supports. When a specific agency or organization cannot meet the needs of the client or family, there are many different resources within the community that can help.



Family Peer Support

Families can benefit greatly from support from their peers, either informally in their community, or through organized peer support offered by family members with lived experience in caring for their youth. Families need emotional support in carrying out their caregiver role, as well as information on other forms of support, including financial support, housing or respite care, and self-care.

Families also need to be actively involved in their youth's recovery; family peer support forums provide an opportunity to share experiences, discuss the challenges of caregiving, and brainstorm solutions to better care for and support loved ones. Family peer supporters are important members of the extended treatment team, as they work closely with both health care providers and families.

At different times throughout treatment and recovery, families' needs will change. The family peer supporter can offer different forms of support, including systems navigation, accompaniment, mediation, and advocacy. Helping families usually begins with exploring current needs and corresponding resources, and offering support to navigate systems. The following are some of the supportive roles that family peer supporters play in assisting families and carers:

Supporter

The family peer supporter provides emotional support to families throughout all the stages of help-seeking and recovery. Emotional support is different for everyone, but common elements include:

- listening without judgement
- validating feelings
- acknowledging the challenges associated with caregiving

The families know that self-care is just as important as caring for their youth, the family peer supporter help families find balance in their lives and activate their own coping strategies. Support can be offered individually or in a group setting, depending on family needs.

Navigator

The family peer supporter becomes a navigator: they help sift through resources. What services are available in the public or private systems? What criteria do these services require? After listening to a family member and learning about what they are going through, the navigator can gather information and link them to appropriate resources. Through their own lived experience, these navigators can support a better understanding of the system, and prepare families to face and navigate barriers. The family peer supporter can strategize with families throughout this process.

Mediator

Sometimes families face barriers in caring for and supporting their youth, or in communicating with their youth's treating team or other supports. In these situations, the family peer supporter can help families resolve such situations by facing these challenges together and brainstorming solutions. In addition, the peer supporter may sometimes mediate between the family member and health care provider. As each individual has a unique understanding of any situation, the family supporter-mediator creates a space in which each individual shares their perspective with the ultimate goal of identifying problems and working toward their resolution. The mediator can help empower families to share elements of their story with the health care provider that otherwise may not have come to light. Since the mediator has the experience of having gone through similar situations, they can draw attention to essential parts of what health care providers are saying, which otherwise may be lost to the family member in an emotionally charged situation. Ultimately, the mediator helps create an atmosphere of fluent communication among all parties involved.

Advocate

The family peer supporter informs families of their rights, and presents the options that are available in order for families to advocate for better care and services for themselves and their youth. The family peer supporter shares their knowledge of evidence-informed approaches in youth mental health care with the family member, which can help families to advocate for the best care possible.

Peer support work is an important part of the recovery model in mental health. Family peer support offers assistance and support to families as they care for their youth with mental health concerns, in addition to caring for other members of the family and themselves.





Conclusion

As families and carers, our desire is to provide our youth with what they need to be healthy, confident people in their own right. We seek to ensure that they benefit from a nurturing, secure and caring environment as they enter into adulthood and achieve their own dreams. If we see our youth struggling in their journey toward adulthood and the realization of their dreams, we want to help them in whatever way we can.

Youth at risk for mental health problems, or who suffer from undiagnosed or diagnosed mental illness, are among the most vulnerable in society. Due to various gaps and obstacles in health care systems, young people often have great difficulty in accessing and receiving quality mental health care. The ACCESS OM network of dedicated health care professionals, researchers, youth, family and carers, community workers, and policy and decision makers have collaborated over the years to close the gaps so youth can access timely and appropriate mental health care services.

Familes who care for and support their youth in obtaining quality care often find themselves in the position of not being able to find support they need from health care systems or in their communities when faced with the crisis of mental health problems in their youth. In some instances, youth and their families face dire situations while trying to find help, with youth falling through the cracks along with their families falling apart due to lack of support.

Our primary objectives in coming together to share our perspective as families of youth affected by mental health problems are to share our collective experience and information with families, and to raise awareness with all stakeholders in Canadian youth mental health about the need to include families as essential partners in the care of their youth affected by mental health concerns.

We therefore invite you to:

RAISE

Respect Advocacy Inclusion Support Education

THE BAR ON YOUTH MENTAL HEALTH

INVITE, ENGAGE AND INVOLVE FAMILIES AND CARERS TO SUPPORT AND CARE FOR THEIR YOUTH

In closing, we share with you the ACCESS OM FAMILY AND CARERS CORE VALUES as we support families and carers with their youth.

FAMILY CORE VALUES

DECISION-MAKING

The role of the family is respected and the level of family involvement is discussed and adjusted in accordance with the young person, according to everyone's needs and the care program.

INTEGRITY OF THE FAMILY

Families often have crucial knowledge of the youth's history and development that would provide a basis for the implementation and continuity of care. If the family of origin is not reachable, anyone who is meaningful for the young person may assume the role of caregiver.

GOALS AND RECOVERY

Involved family members and the youth's personal network are encouraged to offer care that is oriented towards the young person's well-being and recovery journey. Communication and collaboration among all those caring for and supporting the youth helps promote the well-being and recover process.

SENSITIVITY

Care and services offered to the youth, their family and network of support are guided by inclusivity, empathy, transparency, integrity, authenticity and patience.

ADEQUATE AND NECESSARY UNDERSTANDING

Providing information and education to family caregivers allows them to better support treatment and recovery plans for the youth. Family Peer Support is a necessary tool that provides the opportunity to gain the support and benefits of a shared perspective from those who have had similar experiences.

STRENGTHS AND RESILIENCE

Services are based on a philosophy that values the power of hope, resiliency, empowerment and respect for self-determination. This approach builds on the strengths of the youth, their family, their network and their community.

DIVERSITY

Taking into account the diversity of cultures of care and of family constellations (sex, ethnicity, historical background, etc.) allows for the integration of family strengths into the care plan.



Bibliography

Canadian Mental Health Association. (2016). Best practices guide: Information sharing in the context of child and youth mental health and substance use in BC. CMHA – BC Division.

Caring Together: Families as Partners in the Mental Health and Addiction System. (n.d.). Canadian Mental Health Association. https://ontario.cmha.ca/documents/caring-together-families-as-partners-in-the-mental-health-and-addiction-system

College of Family Physicians of Canada. (2018). Recovery-oriented mental health and addiction care in the patient's medical home. Mississauga, ON: College of Family Physicians of Canada.

Copeland, W. (2007). Confidentiality and Mental Health. Friends for Mental Health.

Ferguson, G., Abi-Jaoude, A., Johnson, A., Saikaly, R., Woldemichael, B., Maharaj, A., ... & Wiljer, D. (2018). Collaborating with families: Exploring family member and health care provider perspectives on engaging families within medical education. Academic Psychiatry, 42(3), 329-337.

Institut universitaire en santé mentale de Québec. (2012). La confidentialité / Le secret professionnel. Guide d'information et de soutien destiné aux membres de l'entourage de la personne atteinte de maladie mentale.

Jones, N. (2015). Guidance manual: Peer involvement and leadership in early intervention in psychosis services: From planning to peer support and evaluation. National Association of State Mental Health Program Directors: Alexandria, VA.

MacCourt, P. (2013). National guidelines for a comprehensive service system to support family caregivers of adults with mental health problems and illnesses. Mental Health Commission of Canada.

Mental Health Commission of Canada. (2015). The mental health strategy for Canada: A youth perspective.

Norris, S. (2018). Child and youth mental health in Canada. (2018-35-E). Ottawa: Library of Parliament.

Understanding Common Legal Issues in Child and Youth Mental Health. (n.d.). Canadian Mental Health Association. https://ontario.cmha.ca/documents/understanding-common-legal-issues-in-child-and-youth-mental-health

Yoo, A., Kim, M., Ross, M. M., Vaughn-Lee, A., & Butler, B. (2018). Engaging caregivers in the treatment of youth with complex developmental and mental health needs. The Journal of Behavioral Health Services & Research, 45(3), 440-453.