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**PUTTING YOUTH
IN THE PICTURE**

Provincial Advocate
for Children & Youth

A Mental Health Community Snapshot

[illegible]

TO BE UNDERSTOOD/
HEARD

Leaders who LISTEN
freedom to be who you are

more financial support
equals more options for
school/trades

Place of
Belonging

mental assessment to
see if you are falling
into an unhealthy zone

help in and out of
school with the same
person or organization

extracurricular and venues
that attract youth, relieve
stress and create
relaxation

housing options -
better environments

Someone to confide
in without feeling exposed
or embarrassed

support system - family,
friends



About Us

The Office of the Provincial Advocate for Children and Youth (Advocates Office) is an independent Office of the Legislature of Ontario. The Office is instructed by legislation to “partner with children and youth to bring issues forward.” We elevate the voices of children and youth, following the United Nations Convention on the Rights of the Child, and always involving young people in everything we do.

We are mandated to serve children and youth in provincial care, and at the margins of provincial care. Six groups of children and youth are included in this mandate: those connected to the child welfare system, the children’s mental health system, the youth justice system, children and youth with special needs, or requiring the services of Provincial or Demonstration Schools, and First Nations children and youth.

Provincial Advocate
for **Children & Youth**



Mental Health

Over the past two years, we have read with great interest the reports of the Select Committee on Mental Health and Addictions (Ontario, Legislative Assembly, 2010) and the Minister's Advisory Group (Minister's Advisory Group on the 10-Year Mental Health and Addictions Strategy [Minister's Advisory Group], (2010). In 2011, the Government of Ontario released its mental health and addictions strategy (Ministry of Health and Long-Term Care [MOHLTC], 2011). This year, the Mental Health Commission of Canada published both its mental health strategy for Canada (Mental Health Commission of Canada, 2012) and a scan, survey and literature review on school-based mental health and substance abuse (Mental Health Commission of Canada, School Based Mental Health and Substance Abuse Consortium, 2012).

For our part, we have added to the dialogue on mental health by writing a *Statement on Child and Youth Mental Health in Ontario* (Office of the Provincial Advocate for Children and Youth, 2011b) and *A Statement on the Future of the Psychiatric Patient Advocate Office* (Office of the Provincial Advocate for Children and Youth, 2011a). As well, we responded to Bill 117, *Children's Mental Health Act, 2010* (I. Elman, personal communication, November 23, 2010) and made a submission on Bill 13, *Accepting Schools Act, 2011* and Bill 14, *Anti-Bullying Act, 2011* (Office of the Provincial Advocate for Children and Youth, 2012).

Summary of

PUTTING YOUTH IN THE PICTURE

Much has been written and discussed by adults about child and youth mental health. They have painted the broad strokes of what an excellent mental health system should look like, the problems with our current system, and the changes needed. As our Office's responsibility is to listen to and elevate the voices of children and youth within our mandate, we wanted to speak directly with young people to hear their thoughts about mental health.

Through the process chronicled in this report, we found that young people had many ideas and were excited to give their opinions. To a large extent they agreed with the general directions described by the adults in mental health policies and frameworks. As well, they were able to add specific information from their lived experience as young people and their own local context. They have provided a wealth of detail that explains the importance and interconnections of their homes, families, schools and communities. They have also given information about a range of recurring themes, including the foundations of good mental health, how to make community spaces appealing, and the role of supportive adults in their lives. This is a level of detail that we could not expect from adults, yet is very important in planning and implementing services that young people will want to use and will find effective.

This report helps to put youth into the picture. It is our hope that it demonstrates that while experts in the field and concerned adults can paint a picture with broad strokes, young people can fill in that same picture with colour and detail. The result is a picture of mental health that can be supported by all.



PUTTING YOUTH IN THE PICTURE CONSULTAT



IONS

To understand mental health from the point of view of young people, the Advocates Office organized consultations with youth groups in Peterborough and asked for their ideas and opinions about what children and youth in their community want in order to stay healthy and get healthy.

Peterborough was chosen because it was compared to data for all of Ontario from the 2006 census and was found to be a strong comparator for the Ontario average. Because it reflects average demographics for the province, Peterborough has long been used as a test marketing community (The Canadian Encyclopedia, 2010). It also has an on-line database of community resources, considered necessary for this snapshot. Because of all of these elements, we selected Peterborough as the community for our snapshot. (see *Challenges* on page 10)

EDUCATION

FUN

PRACTICAL SUPPORTS

COMMUNITY

RELATIONSHIPS

SERVICE DELIVERY

The Consultation Process

Definitions

We used definitions of mental health derived from the World Health Organization (2001), revised for youth.

People who are mentally healthy –

- feel generally happy and satisfied
- realize their own abilities
- are interested in learning and fun and have a good balance between the two
- feel they have something to contribute to their community
- have close relationships with other people
- can cope with the normal stresses of life

People who are having mental health problems –

- have feelings or behaviour that are out of their control
- have difficulties carrying out the usual activities and routines of their lives
- often are experiencing toxic stress, beyond the “normal stresses of life”

Youth Participants

A total of 46 young people participated in 6 separate group consultations. We decided to use a group format because we were asking for the ideas and opinions of participants and not for their personal experiences or information. Within the groups, youth took inspiration from each other to expand their ideas or to think about mental health in new ways.

Consultations were arranged through existing organizations. We took care to approach organizations working with youth in a variety of settings. However, we also deliberately chose organizations to ensure that some youth associated with our mandate would be included in the consultations.

Process

We wanted to learn about how the existing system is meeting the mental health needs of young people, as expressed by them. To do so, we contacted a variety of youth-serving organizations, including those with and without mental health mandates. Each organization already had a youth group meeting regularly.

We created an exercise based on community mapping practices, which are rooted in the assumption that those who live in particular places have special knowledge of their community and their relationship to it. For our purposes, this meant that we expected young people to know the resources already available in their own community. An “assets based” philosophy is common to all community mapping processes; the focus is on the strengths of the community and the knowledge of the people involved. By identifying the assets and supports that already exist, we take a first step toward developing an overall picture of the community, which can lead to collaboration and coordination in planning. Because this project is the beginning piece of community mapping, we have termed it a community snapshot.

In each consultation we asked youth to brainstorm individually, and then bring all of their ideas together. The group format also allows for group brainstorming as well. Consultations took between one and two hours. The same exercise was used for each consultation, and consisted of four rounds. Participants were asked the same set of questions:

- 1** *What do you think young people want in order to stay mentally healthy or to get mentally healthy – this can include how they get what they want.* Youth were given a stack of sticky notes and were asked to write one idea per note. At the end of the round, all notes were stuck onto a large sheet of paper mounted on the wall.
- 2** *After looking at all of the ideas generated on the large paper, was anything missed?* The youth added notes then grouped them together into categories that made sense to them.
- 3** *What supports or services do you know that already exist?* Again, participants wrote one idea per note. Although many of these ideas were specific services, others were more general things considered supports by young people, such as “parks” or “friends”.
- 4** *After looking at everything on the large paper, choose your five top priorities and indicate them by sticking stars onto them on the paper.*

All of the ideas generated have been included on the poster included with this report. The categories were reorganized slightly for consistency across all groups.





Challenges

We deliberately looked for youth within our mandate. As the Mental Health Commission of Canada (2012) pointed out in its recently released national strategy, children in child welfare care, those in the criminal justice system and those who experience disparities in living conditions have a higher need for mental health services than the average population. We would expect greater involvement of these youth with mental health services. While this may make their information less reflective of the general population, it may also provide more knowledgeable information.

We also chose to approach groups catering to youth over the age of twelve, in an effort to reduce the demands on staff. However, this means that younger children were not present in the consultation groups.

We recognize that there is, in fact, no “typical” Ontario community. Great diversity exists across and within communities in Ontario and the specific results from Peterborough cannot be generalized across the whole province. We understand that mental health and access to services are impacted by a range of social factors and inequities, including racism, poverty, social exclusion, health care values and culturally inappropriate care. One community cannot reflect the entire province and we are largely missing information from racialized youth (including First Nations, youth of colour and recent immigrants) who may have highlighted other issues had we chosen a different community. To capture the factors specific to each community, a similar process to include youth participation in mental health planning could be used in communities across Ontario.

Summary of Consultation Findings

During each consultation, the youth generated ideas and opinions and grouped them together into categories. We found considerable consistency in categories across all of the groups. After all consultations were completed, the ideas were gathered together. The summary given below outlines the categories of education, fun, practical supports, community, family and service delivery, and describes the youths' ideas about what they want in each of these categories in order to stay healthy and to get healthy. All of the ideas and opinions generated for each category are presented in a separate poster within this report. The graphic on the front cover of this report is also taken directly from the collected ideas of the youth.

1 Education

Every group chose education and schools as being very important to them. This included groups in which all of the youth were very involved and connected with their schools and other groups in which at least some youth were not currently attending school. Commonalities across groups included the importance of teachers and other school staff to help make schools a positive space that contributes to good mental health. Other ideas were specific to only one group and ranged from constructive discipline to peer support.

Each group had ideas for expanding the role of schools beyond the academic curriculum. For some, including more activities and opportunities for training and volunteering at school, whether during the regular school day or after school, would add to their mental health. Others wanted anti-bullying programs, support groups, student mentors and education about mental

health. The youth also saw their schools as places to connect them with other services and supports, so they could become involved with the same support staff or organization both within and outside of the school.

2 Fun

Youth in each group named a wide range of recreational activities that helped to keep them mentally healthy. Both physical and arts activities were popular in all groups. Aside from specific activities, youth were looking for opportunities to try something new, to have fun, to find creative outlets and to meet others. They also wanted to develop positive personal qualities and skills, and saw these as supporting good mental health.

3 Practical Supports

The young people identified having a secure and stable living environment as important to mental health. Every group acknowledged that money is necessary to access supports and opportunities. Because of the range of personal circumstances, different aspects of practical supports were emphasized by different groups. Food and transportation came up more often and in more groups than anticipated. Jobs, job training and resources to find jobs were also common themes across groups.

4 Community

The largest and most diverse category was community, with all groups mentioning many resources and a wide range of resources that they use and value. Youth in all of the groups see themselves as part of their community and see the community as very important to their mental health. In part, they expect the community to offer resources to help them to stay or get mentally

healthy and were able to give many examples of the types of resources they want. In some groups, the quality of the interaction between the youth and community support, including interactions with staff, took precedence over the more specific resources offered.

Several existing community organizations figured largely in the priorities selected by the young people. Through the discussions, many talked about the importance of these organizations, other young people connected to the program, and above all the staff. The level of trust and connection made these safe places for young people to talk about their feelings, stresses, problems and views.

5 Relationships

Personal relationships were emphasized by every group. Family and friends were seen as important and were the primary relationships discussed and grouped in this section. For the most part, the groups distinguished these personal relationships from other important relationships, including teachers and community staff. Relationships with these professionals were mostly placed into other categories, and the Relationship category was reserved primarily for personal relationships. Interestingly, relationships with pets were also chosen several times by youth and were placed in this category.

6 Service Delivery

Only one of the groups created a separate category focussing on how they want services to be delivered. However, many of the other groups had similar ideas emerge through other categories. Services have to be available when youth are available: on weekends or after school hours. Services that are available only during business hours are seen as less youth friendly

and require youth to miss school, compounding the problem if they are already struggling at school. They also talked about being able to get access to services quickly. Long waits or complicated procedures to receive services tended to discourage or frustrate youth. They also want services to be consistent across their different environments: to be able to access the same person, group or organization at school or in the community. This promotes consistency and keeps the youth from having to tell their story multiple times to multiple people. Not surprisingly, they said services should be discrete and confidential. Finally, social networks, primarily through social media, are important to youth. They look at texting and social networking as ways of getting support; as one youth said, "Social networks can be a youth's voice."

Priorities

Each youth participant had the opportunity at the end of the exercise to indicate his or her top priorities for mental health, from all of the categories, wants and resources already listed. This allowed everyone to look at all of the ideas generated and choose the items most important to them. A wide variety of items were chosen, cutting across all categories. Some of the most frequently chosen priorities were existing services and organizations, indicating how important they are to young people.

The diagram on the right represents the priorities selected by youth from all six groups. The choices were added together and used to create a "word cloud" of youth priorities. Because word clouds give more prominence to words that appear more frequently, the larger the lettering of the item in the word cloud, the more frequently it was chosen by the youth.



THEME



In addition to the categories that they were initially asked to create, the youth groups identified five themes through the discussions which arose from the exercise. The themes provide a fuller and more complex analysis of their living situations and the factors that most affect their mental health. These themes look beyond just the supports they want and highlight the ways in which communities and supports can include, engage and support youth. On the enclosed poster, these additional themes are highlighted across multiple categories. Although presented separately within this report for clarity, it is important to recognize that these themes are interwoven and interdependent.

The Advocate's Office initiated this project to ensure that the voices of youth about their mental health were as important as the many voices of adults — government officials, experts, and service providers. To do this, we have explored each theme from three points of view — the United Nations Convention on the Rights of the Child, the province of Ontario, and the youth involved in the consultations.

The exploration of each theme begins with stating the rights set out under the UN Convention on the Rights of the Child (UN Convention). [For more information on the UNCRC see <http://www2.ohchr.org/english/law/crc.htm> or <http://www2.ohchr.org/french/law/crc.htm>.] As Canada has ratified the UN Convention, it is obligated to uphold the rights it contains.

The UN Convention reminds us that children and youth are rights bearers and that we all have a duty to ensure that we are working to realize their rights. As well, the UN Convention helps to create a change in thinking, from viewing children and youth as passive recipients of service to engaging them as active and involved citizens (Hodgkin and Newell, 2007). Although little reference has been made to the UN Convention within the sector of children's mental health in Ontario, it was endorsed by the Mental Health Commission of Canada in the values on which it based its child and youth mental health framework (Kutcher and McLuckie, 2010).

Following a brief explanation of the UN Convention rights, we narrow the focus to look at Ontario. We look at the movement from broad international principles to provincial policies and how the five themes have been supported in various reports.

The final say goes to the young people involved in the consultations. They have given specific information about how they would like to see these policies implemented. Their examples help us to understand how broad based rights, translated into policies, impact young people in the real world.



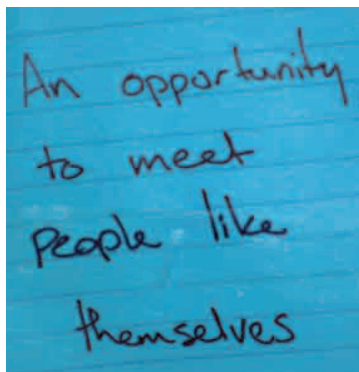
The consultations indicated a strong feeling of wanting to belong on the part of the youth involved. The youth talked about wanting to connect individually with other young people like themselves and also to connect with places and facilities in the broader community.

UN Convention on the Rights of the Child says

Children's rights to an adequate standard of living are spelled out under Article 27 of the Convention (Hodgkin and Newell, 2007). A UN conference on human settlements fleshed out that Article more fully in relation to neighbourhoods and communities. Within "standard of living" they included the importance of community space for children and youth, emphasizing safety, being together, experiencing autonomy and feeling a sense of belonging (United Nations Children's Fund [UNICEF], 2006).

Ontario says

In their report, the Health Minister's Advisory Committee included belonging, involvement in the community and connections with other people as community-based solutions for people getting and staying mentally healthy. In promoting a youth development approach to mental health, they reiterated the importance of a sense of belonging for youth in particular (Minister's Advisory Group, 2010). Similarly, through the goal of optimal mental health for children, the Ministry of Children and Youth Services sought to enable children to have positive connections with others, in peer relations, school and community activities (Ministry of Children and Youth Services [MCYS], 2006). The province's mental health strategy states simply that a sense of belonging leads to better mental health (MOHLTC, 2011).



Belonging

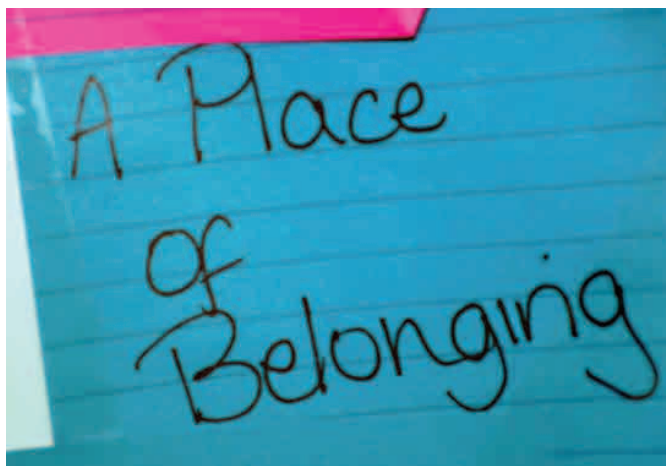
The youth say

With other youth

Not surprisingly, the youth wanted to socialize and have fun with other young people like themselves. Often they wanted to be in places where they can connect with other youth, make friends, talk to others with similar problems or concerns, find some positive influences, learn about other points of view and be in intelligent and stimulating company. Although they identified several places where they can socialize, some youth said that there is simply not enough for young people to do in their community.

In the community

The youth wanted to be full participants in their community. Although they were asked to talk about only what they want from their community, they said in the discussions that it is not a one-way relationship. The youth wanted to find their own place where they can also contribute to the community through mentoring others, volunteering, raising money, creating opportunities for themselves and others, and contributing their labour. Essentially, they saw themselves as both rights-holders and citizens, with supports due to them and space created for them to be active and engaged in their community. A mentally healthy community provides supports and opportunities to its youth and makes room for youth to feed their abilities and skills back into the community.



"Research indicates that assets and feelings of connectedness play important roles in healthy development, including protecting youth against risky behaviours, promoting positive and healthy choices and building resiliency in youth to help them cope with challenges and difficulties. Further, the more assets adolescents possess, the more likely they are to engage in health-enhancing activities and the less likely they are to engage in activities potentially harmful to their health."

(Canadian Institute for Health Information. 2005. *Improving the health of young Canadians*. Ottawa, ON: Author, p 33)

"Whether consideration is being given to the positive mental health of a youth or an adult, of an individual or the community, belongingness, connectedness and engagement are key indicators of mental well-being. It is also clear that if the goal is positive mental health for individuals the attention should be on creating a supportive environment for those individuals by way of a mentally healthy community."

(Peterborough County-City Health Unit. 2010. *Community assessment report*, p 100)

What youth want in a place they frequent is for it to feel safe, both physically and emotionally. Safety was mentioned several times by multiple groups. Feelings of safety were most closely related to openness, acceptance and lack of discrimination.

Through the discussions, the youth spoke about safety for everyone and their awareness of how other people are being treated, as well as how they themselves are treated. One youth gave an example that as a gay youth, he feels more comfortable that he will be accepted in a particular place when he see others of diverse ethnicities being welcomed and accepted. Openness and acceptance seem to have a cumulative effect; respect for the unique identity of one person seems to encourage respect for another.



Safe Space

UN Convention on the Rights of the Child says

Article 3 of the Convention requires the state to make the best interests of the child a primary consideration. More specifically, it requires states to set standards for all services for children, including safety standards. These are not limited to physical safety alone, but require that all children's services "must comply with all other provisions of the Convention, respecting, for example, the principles of non-discrimination and best interests and the right of children to have their views and other civil rights respected" (Hodgkin and Newell, 2007). The best interests of the child, therefore, require safe spaces that promote freedom of expression and actively eliminate discrimination.

Similarly, in addressing Article 28, the right to education, the Committee on the Rights of the Child stated explicitly that states have a duty to provide a safe school environment, including freedom from bullying. The Committee also noted the impact of bullying on children's psychological health and suggested that children must be fully involved in combating bullying and creating safe space in schools (Hodgkin and Newell, 2007).

"Community members need space to come together to build cohesion, identify local needs and strategies to address them, operate their own programs, or just to gather for social purposes. Youth share these needs, and in particular need neutral and safe places in which to gather, play, create and develop a sense of security and identity within their community."

(McMurtry, R. and Curling, A. 2008. *The review of the roots of youth violence*, Vol. 2. Toronto, ON: The Queen's Printer for Ontario, p 299)

Ontario says

In its policy framework, the Ministry of Children and Youth Services (2006) outlines the protective factors that promote positive mental health for children and youth, including safe and effective schools as one of the factors. Similarly, the Mental Health Commission of Canada's (2012) recent national strategy seeks to make school a haven for children and calls for the promotion of healthy development and reducing bullying.

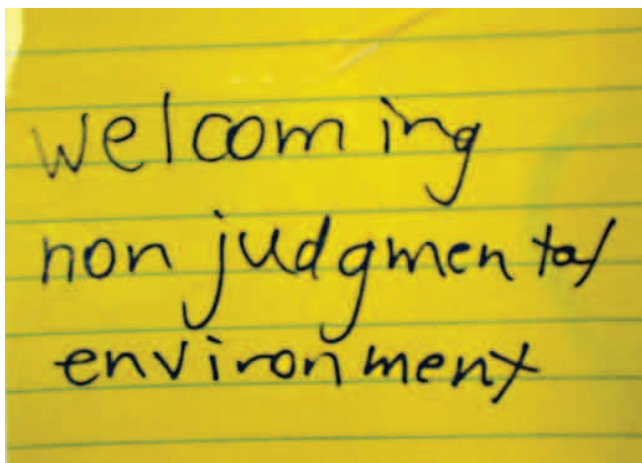
The youth say

In schools

The youth wanted their schools to be safe, with accepting environments and awareness of disabilities or differences. In particular, the support of gay-straight alliances (GSAs) made schools feel safer. A few specific schools in Peterborough were named by youth as being particularly safe environments. Anti-bullying programs and standing up to bullies were also included by some youth as creating safety in schools.

In the community

As well, the youth wanted to gather in community organizations where they feel safe and cared about. To feel safe, an organization should promote tolerance or understanding for others and respect for all sexual orientations and identities, religions, and cultures. Youth wanted to have the freedom to be who they are, without judgment.



"Students cannot be expected to reach their full potential in an environment where they feel insecure and intimidated. That's why Ontario is so committed to making our schools safe, inclusive and healthy places where all students feel accepted. This is more than a 'nice to have,' Mr. Speaker. It is a necessary condition for student success and well-being and for the future prosperity of our province."

(Brotten, L. (2011, Dec. 7) "Accepting Schools Act 2011" Ontario, Legislative Assembly. *Official Report of Debates (Hansard)* First Session, 40th Parliament, p 407 Retrieved from http://www.ontla.on.ca/web/house-proceedings/house_detail.do?Date=2011-12-07&Parl=40&Sess=1&locale=en#P52_2887)

"Like all of us, youth need space that is welcoming, appropriate, healthy, LGBTIQ positive, safe, and respectful of a wide spectrum of identities and perspectives, a space where exploration is encouraged and innovations are supported. Good policies, procedures and attitudes can ensure that young people feel a sense of belonging, feel trusted and respected and are given the space, time and funds needed for their ideas to evolve into a tangible reality."

(Social Planning Toronto. *Another winter, another spring: Toronto youth speak out about space*, p 19)

The youth involved in the consultations presented a sophisticated analysis of the impact of their living situations on their mental health. The groups identified money as providing an important base for good mental health. They also linked money with access to food, housing, and to their community and were aware that differences in the amount of money they had meant unequal access to resources.

Although they did not use this term, the youth were referring to some of the living situations that experts often term the “social determinants of health” (Chief Medical Officer of Health, 2011, p 6). Income is seen as a very important determinant of health and is closely related to others, such as food, housing, and education. A higher income not only allows people to take care of their basic needs, but also allows greater choice and control over decisions, which contributes to good mental health. Conversely, low income is linked with lower physical and mental health (Health Canada, 1999).

Living Situations

What does The Social Determinants of Health mean?

“Canadians are largely unaware that our health is shaped by how income and wealth is distributed, whether or not we are employed, and if so, the working conditions we experience. Furthermore, our wellbeing is also determined by the health and social services we receive, and our ability to obtain quality education, food and housing, among other factors. And contrary to the assumption that Canadians have personal control over these factors, in most cases these living conditions are – for better or worse – imposed upon us by the quality of the communities, housing situations, our work settings, health and social service agencies, and educational institutions with which we interact.”

(Mikkonen, J., & Raphael, D. 2010. *Social determinants of health: The Canadian facts*. Toronto: York University School of Health Policy and Management)

UN Convention on the Rights of the Child says

Article 27 of the UNCRC discusses the right to an adequate standard of living. Parents have primary responsibility for providing for their children, but when they cannot, the state is expected to provide assistance and support, particularly with regard to nutrition, clothing and housing (Hodgkin and Newell, 2007). The Convention also notes that a child’s development is inextricably linked to living conditions and requires the state to provide a standard of living that meets all of a child’s developmental needs.

Ontario says

Over the past several years, the social determinants of health have been increasingly seen as important factors affecting mental health. The Ministry of Children and Youth Services (2006), Ontario's provincial mental health strategy, (MOHLTC, 2011) and the Mental Health Commission's (2012) national strategy have all noted the need to enhance living conditions as part of improving the mental health of Ontarians.

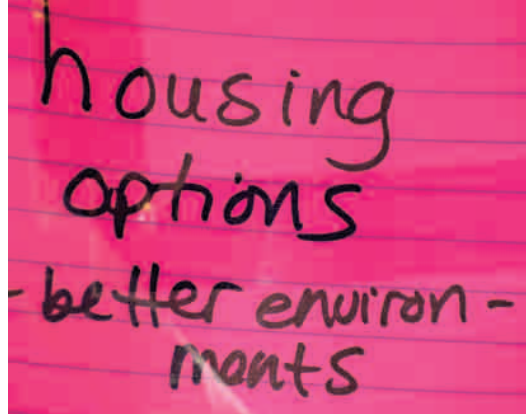
The youth say

For the youth, good mental health began with a safe place to live, food, and an income sufficient to provide stability and choice. Within the community snapshot, there were differences among and between groups in young people's living arrangements and financial circumstances. Yet finances came up in every group, as the youth compared the opportunities they have and the supports they would like to have, versus what they can afford.

Basic Needs

Some youth spoke of difficulties with their housing and their need for more stability and better housing environments. Others talked of the importance of shelters in giving everyone the opportunity to sleep indoors in warmth and safety. In discussion, there were a few youth who spoke about living on their own at a young age and their problems in trying to find housing that is affordable, safe, in good repair, and willing to rent to young people. They noted that poor housing can affect sleep and overall stress level, destabilizing mental health.

A large number of youth mentioned the importance of food in keeping them mentally healthy. A few particular foods were mentioned as treats, believed to give people a boost in mood. Generally, though, the key points made by youth were having enough food to keep from being hungry and having healthy food. What was surprising was how often food was mentioned and how obvious to the youth the link was between access to food and good mental health.



"Societies cannot afford to neglect young people and their skills, knowledge, energy and potential. They cannot expect young people to study hard and work hard as the traditional means to decent work and success, amidst diminishing evidence of its effectiveness. Young people require financial and social investments to fulfill their potential, to transition into adulthood and to be active and engaged citizens. Decent jobs not only contribute to young people's lifetime employment success, they have a proven multiplier effect on family well-being, the health of national economies and societies at large."

(United Nations. 2011. *World youth report 2011*. Youth employment: Youth perspectives on the pursuit of decent work in changing times, Retrieved from http://unworldyouthreport.org/index.php?option=com_k2&view=itemlist&task=category&id=7:chap-1-employment-youth&Itemid=114)

Some youth worried about having enough money to pay rent and buy food and clothes. While they frequently said that money helped them to be mentally healthy, youth were very aware that it was not the money itself, but what it could buy for them — the ability to attend school or learn a trade, food, medication and stability.

Unfortunately, some of the youth currently struggling just to survive found that the help offered to them was actually unhelpful. One person pointed out that when adults teach strategies for coping with stress to youth, it does not get rid of the social or economic situations causing the stress in the first place. Other youth who were offered counselling found it too often focussed on problems from their childhoods. They wanted help now to solve current problems and get access to needed resources. Being pressured to talk about the past when worried about how to pay rent or apply for a job actually increased their stress.

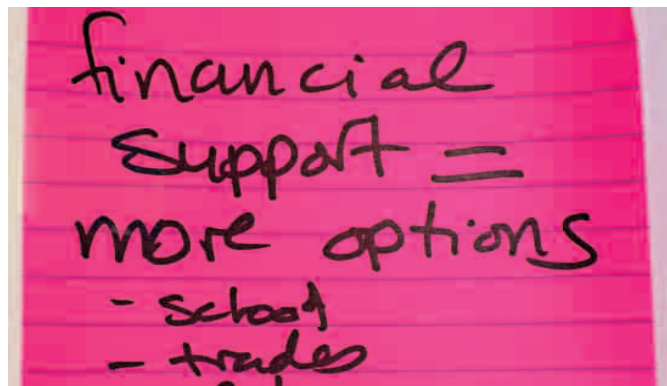
Choices

As well as causing stress itself, lack of money also means that youth have limited choices in the activities that bolster their good mental health and relieve stress. Transportation was mentioned as a problem for attending school and taking part in activities in the community. Those living outside of the city have to rely on rides from others. Those within the city have access to public transportation; several people mentioned the cost of buses as a barrier to taking part in activities, while others who were able to access free bus passes named this as an asset and were highly appreciative.

Paying program fees was also a problem for a number of participants. The importance of low cost or no cost activities was mentioned in most groups. The young people wanted to be able to take part in activities of interest to them but sometimes felt unable to do so because of cost. They therefore missed out on the specific activities that many people identified as important in keeping them mentally healthy, such as creative expressions and physical exercise. They also missed the connection to others and feeling of belonging that comes with being part of a group, also considered by the youth as important to their mental health.

“The social determinants of health — education, employment, income and housing — are strongly correlated with mental health because they affect people’s sense of competence and control — of being connected to the community — as well as their socio-economic status.”

(Minister’s Advisory Group on the 10-Year Mental Health and Addictions Strategy. (2010). *Respect, recovery, resilience: Recommendations for Ontario’s mental health and addictions strategy*. Toronto, ON: Queen’s Printer for Ontario, p 24)



Several youth discussed feeling that young people are treated differently, and are given different information or resources. Access to fewer supports in the community means less access to information and opportunities, further impacting their socioeconomic state and, ultimately, their mental health.

Adult Leaders*

"This can mean participation in almost any kind of activity such as school, music, politics, the arts or community work, so long as the activity is felt to be meaningful, significant and structured (that is, it is performed with a specific purpose in mind). A review of the literature found that these kinds of activities can be empowering for youth when the adults who are involved in them create social spaces that youth find welcoming and safe and in which adults enable youth to play a role in planning and decision-making."

(Canadian Institute for Health Information. 2005. *Improving the health of young Canadians*. Ottawa: Author, p 31)

The youth wanted adults to be involved in their lives. Parents and other family members, teachers and school staff, community agency staff, and church leaders were all seen as potential supports to young people in staying or getting healthy.

UN Convention on the Rights of the Child says

Two Convention Articles are instrumental in defining the roles of adult leaders. The right to freedom of expression is described in Article 13. Of particular importance to children's freedom of expression is the right to play, recreation, cultural activities and the arts, which are detailed under Article 31. Children and youth have the right to undertake recreational and cultural activities, on their own or by joining with adults.

Because these activities should be enjoyable for children, and they are vulnerable to being forced to participate in activities organized by adults, children and youth should be involved in planning activities and their views of what they want should be given high priority (Hodgkin and Newell, 2007). The two Articles together reinforce that children may express not only the types of activities they want, but also the type of adult interaction they want.

Ontario says

The province has recognized the importance of adults in supporting children's mental health. The Minister's Advisory Group (2010) included a general section on healthy development for children in its report to the Ministry of Health. It stated that healthy development needs to include participation of all the people involved in a child's life and support from both family and the community. The Ministry of Child and Youth Services' (2006) framework included having at least one significant, caring relationship with an adult as one of the positive, protective factors for child and youth mental health. Positive relationships with adults are therefore seen as key to the overall development and well-being of children and youth.

The youth say

The youth involved in the consultations were able to describe what positive relationships with adults look like to them. Most importantly, adults should be “people that care about you”, able to establish supportive relationships. Youth wanted easy access to adults, preferring someone who can always be counted on to be there to talk and listen. They wanted adults around to learn new skills, try out new activities or forms of expression, and join in celebrations. They also wanted to be able to talk to adults about their lives and their problems. Sometimes that means just venting, other times they want adults to actively help them to solve problems. Many of the youth involved in the consultations mentioned adults in their lives who already fulfill this role for them.

Qualities

The youth wanted their adult leaders to be caring, nonjudgmental, and accepting of everyone. They also preferred adults who are able to focus on the positive, are encouraging and help youth to find their strengths.

Actions

The approach that adult leaders should take is to listen to youth and to talk to them with respect, including not talking down to them. The youth wanted adults to do things with them, including activities, offering help with school work or job seeking and teaching practical skills. Sometimes they wanted adults to provide support with problems, give advice, and set rules. Aside from these more practical actions, the youth also said that adults have a role in nurturing passion in young people for whatever interests they might have or discover.

Knowledge

The most helpful adults have an understanding of mental health, and are educated about the different cultures and identities of youth, including queer and transgendered youth, amongst others. They also have and share knowledge about available resources, such as bursaries and skills, such as how to make a resume.

“While youth did discuss enjoying their freedom and independence this didn’t mean they didn’t want supportive adults around. In fact youth were eager to find mentors who understood the needs of young people and treated them with respect and as equals as they develop their skills.”

(Social Planning Toronto. Another winter, another spring: Toronto youth speak out about space, p 8)



* Although “Adult Allies” is the term often used, we have chosen to reflect the young people’s use of “Adult Leaders”.

Spectrum of Services

At the beginning of each consultation, we spent some time defining the meanings of the terms “mentally healthy” and “mental health problems”, as we wanted the youth to feel free to speak to any aspect of mental health.

During the exercise and their discussions, the youth identified a range of supports they wanted for those trying to maintain good mental health and those experiencing different problems with mental health.

UN Convention on the Rights of the Child says

The right to health and health services is enshrined in Article 24. Children and youth have rights to the services, facilities and conditions necessary for them to achieve their highest

attainable standard of health, as do all people. Because the UN defines health very broadly, good health begins not with health care but with the underlying social determinants of health and child development (Hodgkin and Newell, 2007). In its special session on children, the United Nations updated its plan of action, highlighting several goals related specifically to the mental health of children (United Nations General Assembly, 2002). The goals span a spectrum of services including development of a national health policy; access to information and education; health promotion through play, sport, artistic and cultural expression; and special help for children with mental illness. Therefore, children and youth do not have the right simply to health care when experiencing mental health problems, but also to a whole range of supports to develop mental wellness.

Ontario says

Recent provincial reports, including the policy framework (MCYS, 2006), Advisory report (Minister's Advisory Group, 2010), and mental health strategy (MOHLTC, 2011), have all recognized the need for a spectrum of mental health supports and services, ranging from supports for wellness and healthy development through to services for those with mental illnesses. As well, all have emphasized the importance of identifying and intervening early with children and youth who are experiencing mental health problems.

Extra-curriculars
and venues that attract
youth relieve stress
and create relaxation

The youth say

The youth described what they need for good mental health, from healthy living situations to getting help. The graphic below represents their vision of a spectrum of services:



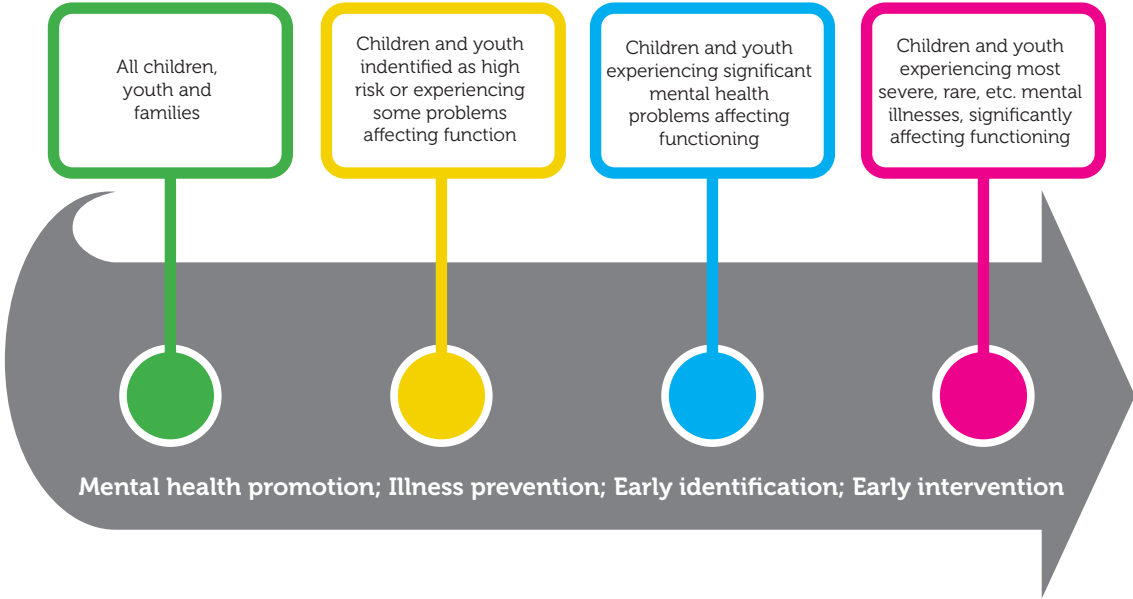
Living situations (the social determinants of health) provide the base for building good mental health. As the youth described, each step up the pyramid relies on the previous steps being fulfilled, for optimum mental health. As well, the youth were unanimous that no matter which step they were currently at, they would want and need all of the supports and services from all of the steps below.

Not surprisingly, the majority of the supports wanted and services identified by youth are located nearer the bottom of the pyramid. As you move up the pyramid, services become more intensive and focussed on treatment, and are needed by fewer people. Also not surprisingly, this area was the least known by the groups in general, although some certainly had more fulsome knowledge and valued the services they had received. All along the spectrum, the youth want to see support designed specifically to help the individual.

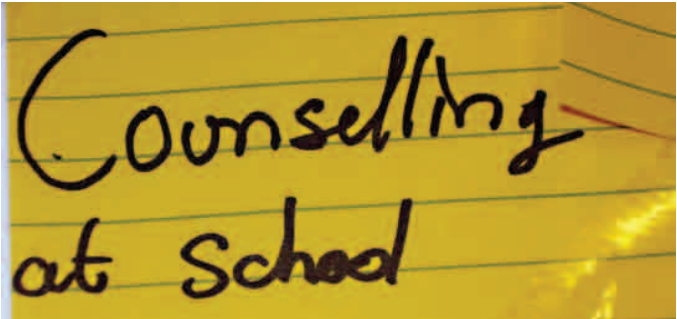
"Each community should facilitate access to the continuum of needs-based services and supports, with an increased focus on mental health promotion, illness prevention, early identification and early intervention."

(Ministry of Children and Youth Services. 2006. *A shared responsibility: Ontario's policy framework for child and youth mental health*. Toronto, ON: Queen's Printer for Ontario, p 13)

The youths' representation is different from, but fits well with, the continuum of services and supports identified by the Ministry of Child and Youth Services (2006) in their policy framework:



The Ministry continuum is focussed on diagnosis, intensity and target population. It does recognize that children and youth may need different intensities of service at different times or more than one at the same time. This is where the youth have been absolutely clear that they do need and want *all* earlier levels of supports, at the same time. The youth also began their spectrum with living situations, feeling strongly that housing, food and income have a fundamental impact on their mental health and on their abilities to access supports at the other levels.



"The key to improving mental health and well-being is to strengthen community mental health and addiction services and integrate those services with other health services and other human services."

(Minister's Advisory Group on the 10-Year Mental Health and Addictions Strategy. 2010. *Respect, recovery, resilience: Recommendations for Ontario's mental health and addictions strategy*. Toronto, ON: Queen's Printer for Ontario, p 31)

Conclusions and Recommendations

1 Involvement of Youth

Youth must be an on-going partner in the dialogue on mental health and the process of building local mental health strategies and determining the services being offered. Making youth central to the process makes them active participants, not merely recipients of service, and also makes them central to their own development and their evolving capacities.

UN Convention on the Rights of the Child says

Article 12 of the UN Convention on the Rights of the Child outlines the participation rights of children and youth (Hodgkin and Newell, 2007). It specifies that children must be seen as active rights holders, particularly in expressing their views freely. Commentary upholds children's rights to participate in decisions about their own health and health care and states that children benefit from participating and expressing their views.

Ontario says

In recent reports, Ontario has also commented on the benefits to individuals of involvement in their own health care. The report of the Minister's Advisory Group (2010) supports an approach in which individuals take more control over their own progress and health. A guiding principle of the province's mental health strategy is the opportunity for people with lived experience of mental health problems to make decisions about their own care and support (MOHLTC, 2011).

Both reports also recognize that the participation of people with lived experience of mental health problems benefits the wider society as well. The Advisory Group (2010) recommended including people with lived experience in the development of their communities, and in agency and community planning, as part of the strategy to create healthy, resilient and inclusive communities. The provincial mental health strategy adopted this approach in its principles, supporting people with lived experience as essential partners in all aspects of service, policy, and system design (MOHLTC, 2011).

Stepping Stones, (Youth Development Committee, 2012), a guide to youth development recently released by the government, also suggests that service providers involve youth in program design and implementation, to benefit both the personal development of young people and the service system. Even more recent, *Ontario's Youth Action Plan* says bluntly that "no one is more knowledgeable about what programs work than youth and community members themselves" (Hoskins and Meilleur, 2012, p 11).

Some communities have already taken steps toward greater involvement of youth. In Peterborough, local planning bodies have been reaching out to young people through consultations and projects to ask for their opinions. The value of their voices and participation is being recognized (Peterborough Social Planning Council, 2011).

“One of the most important principles of community planning is to have a strong citizen participation component. Building on this principle, it is recognized that engaged individuals contribute to their communities. As planners, we must ensure that youth are involved in shaping our social, physical and economic landscapes. This can only be achieved if we understand the expectations, opinions, aspirations and directions for change that youth recommend.”

(Peterborough Social Planning Council in Collaboration with the Canadian Education Association. 2012. *Youth confidence in learning and the future project: Preparing our leaders of tomorrow*. Retrieved from the Peterborough Social Planning Council website: http://www.pspc.on.ca/pdf/report_2012_january_Youth_Confidence_in_Learning_and_the_Future.pdf)

The youth say

Within this community snapshot, the youth involved in the consultations were talking from their familiarity with their own community of Peterborough. In some areas they had extensive knowledge of services and supports and in other areas they had far less knowledge. They also repeatedly mentioned some venues that would not typically be considered community services, but are supports to them nevertheless. They could explain what they liked about different supports and why. They were more likely to use a support when it met their needs, goals and interests.

Not all groups or all youth wanted the same supports. They knew the types of activities that keep them mentally healthy, with some leaning more toward physical activities while others were more interested in the arts. The resources available to each youth privately would also affect what they were looking to add from the public system. Although they differed on specific interests, there were also many instances where young people agreed, particularly in the ways they want services to be offered and the type of staff/adult support they find helpful.

Their interest and enthusiasm for being involved in a planning process can be seen in the reactions from the youth to these mental health consultations. In the evaluations for each consultation, youth commented on their involvement and the process of giving their opinions. Comments from participants included:

- “Good way to hear the opinions of peers on the ideas of mental health and the ideas of what could be done for our community.”
- “I had loads of fun and learnt a lot, as well as felt happy about voicing my opinions.”
- “I found this exercise was very fun and kept me very excited. I liked the fact that I was able to express my feelings freely.”
- “All the information we talked about and shared with each other was good to learn and understand others opinions and values.”

The Advocate's Office says

The more that children and youth are involved in making decisions for their own lives, the healthier they will be.

Through our work with children and youth, we believe that they are more likely to invest and benefit from supports and services when they are included and feel in control of their lives. Young people not only have the right to make decisions about their own health and services, but their participation also furthers their own development and benefits their communities. As the Mental Health Commission of Canada (2012, p 40) states, "... the active involvement of people with lived experience and their families in decision making at all levels is key to driving system change."

We are very pleased to see that two new initiatives under the mental health and addictions strategy (MOHLTC, 2011) are opening new opportunities for young people to be involved in local planning and decision-making for child and youth mental health. New Service Collaboratives are bringing together service providers and stakeholders to improve access and coordination of services, beginning with a focus on children and youth. As part of the overall structure, a Service User Panel will receive feedback and advice from people with lived experience (Centre for Addiction and Mental Health, 2012).

The newly announced action plan will change the system of care, in part by creating community lead agencies that will provide and coordinate child and youth mental health services. The action plan will also provide a legislative and regulatory framework, to ensure that the same standard of care is applied by lead agencies across the province. Advisory groups are also planned for advice and feedback as changes are implemented (Ministry of Children and Youth Services, 2012).

Their contributions to this mental health snapshot have shown that youth are invested in their communities and in their mental health, have opinions about what good services look like and how services work best for them, and understand their local areas and issues. Adults can then match the supports and services wanted with information on good practice. This helps in deciding how to spend limited financial and human resources, fitting them to the youth being served.

To ensure that the involvement of young people is meaningful and on-going, we recommend the following:

1. The Provincial Collaborative Advisory Group create a mechanism to ensure that the Service User Panel is receiving feedback from children and youth of different backgrounds and users of a variety of services, across the spectrum of services.

2. Within its regulatory framework, the Ministry of Children and Youth Services require lead agencies to create a formal process for regular feedback from young people in their community and young people using their services or any services under their purview. Processes could include:

- Advisory committee
- Regular questionnaires
- Exit interviews
- Involvement in quality reviews
- Focus groups

3. The Ministries retain accountability for evaluating the level of involvement of young people in these new initiatives and carry out evaluations twice each year.

Funders must also be willing to be flexible with funding to allow services to be provided in ways suggested by youth. Locking service providers into rigid requirements will not allow them flexibility to shift their programming to respond to young people. While general guidelines may help to ensure that communities are getting a full range of services, local service providers need to be willing and able to respond to locally expressed wants and needs. Governments and other funders should therefore allow communities and services to make changes to funded services, when the changes are based on the involvement of youth in decision-making. This includes children's mental health funding announced in June 2011.

2 Gateways to Mental Health Services

Services that identify and give help for mental health problems should consider schools and community services to be the gateways to mental health services. In Ministry parlance, these are the programs targeted to higher risk youth or those offering early intervention and treatment. Through outreach, collaboration and partnerships, they would be more likely to reach young people where they are already comfortable and connected.

UN Convention on the Rights of the Child says

As described earlier in this report, Article 24 defines the right to health and health services. The obligations of states regarding the mental health of adolescents were further defined by the Committee on the Rights of the Child (2003). As well as focussing on the availability, accessibility, acceptability and quality of mental health services, the Committee urged governments to adopt a multisectoral approach. The Committee called for collaboration between services as well as systematic collaboration and coordination within government itself.

Ontario says

Several recent reports have articulated the idea of gateways to mental health services. The Minister's Advisory Group (2010) wants to create community hubs and deliver services in the settings where people are. Ontario's mental health strategy (MOHLTC, 2011) agrees, suggesting that children and youth should be served in a familiar, positive environment where they spend their

day-to-day lives. When considering service integration, the MCYS (2006) policy framework states that each community can best decide its own level of service integration, based on the local context.

The youth say

All of the youth involved in the consultations had used supports and services in the community that they identified as helping to keep them mentally healthy. Not all had needed or used services to help with mental health problems, but they were generally agreed that they thought those services were important and would like them to be reached easily through their schools and community agencies.

Being a full participant in the community means being involved in making and shaping the overall structure of the system. The youth in this community snapshot said that they want a more fluid, open structure, accessible easily through the schools and community services where they are already connected, without further barriers. Through their comments, many youth made it clear that they are already comfortable in their schools and community organizations, with teachers and staff they know and trust. They wanted information about mental health to be brought to them here, they wanted to talk with other young people here, they wanted to talk about problems here and they want connections to mental health treatment brought here. They would be more likely to engage in mental health services if they could reach them through a trusted organization or staff.

The Advocate's Office says

Governments and service sectors tend to work in silos; this has been recognized by both and both have made efforts to do better in collaborating and coordinating services. Through these consultations, the youth have told us that they do not divide their lives into silos.

They see everything from the food they eat to the addictions treatment services they use as contributing to their mental health. This broad spectrum spreads well beyond the usual educational, social, and medical services associated with young people, reaching to housing, income maintenance, and others not usually considered children's issues.

We are pleased to see that multiple ministries will be represented on the Provincial Oversight Committee to oversee the mental health strategy (Centre for Addiction and Mental Health, 2012). **We recommend that children's mental health also become a permanent part of the mandate of the Poverty Reduction Strategy cabinet-level committee.** This would likely require that an equivalent to the recently appointed Strategic Advisor on Youth Opportunities be appointed for mental health, with similar membership in the committee. This structural change would help to recognize that children's mental health is affected by a very broad spectrum of circumstances and further align the large array of resources that contribute to child and youth mental health.

The recently announced *Youth Action Plan* sets out a commitment to begin local planning tables to coordinate across governments and the community. (Hoskins and Meilleur, 2012) This is a promising step; **we recom-**

mend that young people be involved in evaluating the effectiveness of the new planning tables. This will help to ensure that youth are experiencing positive effects from the planning efforts, including involving them in planning, creating the spectrum of services that they want, and bringing those services into their current community spaces.

Although greater coordination is part of the approach, governments and service providers will also need to understand and eliminate the systemic barriers that are either keeping mental health services out of schools and front-line community agencies or limiting their accessibility. This will primarily be the responsibility of adults, not youth. The youth in the consultations often did not know what the barriers were or how they were created. However, they were very aware that the effect of separating mental health services from their day-to-day environments meant that they were less likely to get them when they wanted them. **We recommend that governments, planners and service providers work together to identify and eliminate these barriers.** Again, evaluation by the Ministry with young people will be necessary to ensure that they are experiencing the coordination and access that they are requesting.

PUTTING YOUTH IN THE PICTURE

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for their energy, dedication,
thoughtfulness and creativity

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TO BE UNDERSTOOD/
HEARD

Leaders who
LISTEN

freedom to
be who you
are

more financial support
equals more options for
school/trades

Place of
Belonging

help in and out of
school with the same
person or organization

mental assessment to
see if you are falling
into an unhealthy zone

extracurricular and venues
that attract youth, relieve
stress and create
relaxation

housing options -
better environments

support system - family,
friends

Someone to confide
in without feeling exposed
or embarrassed

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