

Clarendville Session – Question 1:

Please share your perspectives or experiences with the regional and/or provincial mental health care system.

Younger kids are presenting with mental health issues more than ever before

The ratio of guidance counsellors to students in need is very high

Children are not as resilient

Access to service is limited

Regional health authority professionals do not tell the truth in my experience

There are not enough resources to go around so people are not given diagnosis because there is no service for them

There have been some good community partnerships with community resource center and M that has worked well to service the mental health needs of young families

It's very difficult when people don't know how to navigate the system

We really need to be giving people skills to keep themselves mentally well

Mental health is a continuum - some people have serious mental health issues and other issues can be more hidden

Mental health clients can go into the system and get help but they can then be turned out into the world with no follow-up

Not enough services – not enough staff

Only 1 psychologist and 2 psychiatrists here

Had a Mental Health Advisory Committee in place and identified what we need

Need more services at the ground level

Gap in system is not new - has been identified before

Gaps when people leave one service and go to another

Need more programs in the rural areas

Peer support does a lot of healing and is needed more

U-turn is a drop-in support service dealing with addictions

Lived experience is very beneficial when providing help

Transition to work program helps people with mental health barriers to find employment

Work is important for well-being and mental health

Attended Be Heard last year and felt it made some changes

Addictions get shifted from generation to generation

Important to be your own expert on mental health and addictions when you have family affected

Person with addiction must be ready to accept treatment, and treatment must be ready to accept them

People need support

There is a lack of punishment in the community - court system was not helpful - person is sick not a criminal

People need advocates

Family support and care is just as important as treatment for the person with addiction

Make the doctors accountable for what they are doing

People are crying out and we need to listen

Addiction is a family disease

Addiction has a grieving process

21-day program implemented years ago, but today many complex issues, more different drugs, stigma

21 days today might not be enough, has there been new research done?

Need more transitional housing

Everything is in St. John's and I don't know why

People coming out of 21-day treatment still have a lot of stuff to deal with while trying to stay sober

What needs to change is to place greater emphasis on recovery

Correctional centre for women, there is nothing in place for women when they leave

Methadone program is blown out of the water - not really a program and not organized anymore - given too freely should be a screening process

While at methadone people are not able to work clearly on the issues they have and can't take ownership of their issues

Should be mandatory to have counselling while on methadone, and have to do a 12-step program - should be a weaning off process – should have a time limit

Future going to have an epidemic on methadone – should have a time limit

Challenge getting medical professionals interested - what is the alternative?

Research - is methadone working?

Parents do a lot of enabling because they don't have the right information - lack of education on methadone

Clients experience stigma being on methadone

Can get drugs at the Waterford Hospital – it is a joke and not safe there - there is nothing here to help me

Lack of support in Clarenville

When people ask for help, doctors tell them they are delusional

Factors outside mental health that impact our mental health

Easier to access mental health services in Ottawa – way too long a wait here to see psychiatry, psychologist, counsellor - if you have private insurance then great, but if not a very long wait

No support groups here - started a group to meet a need

In crisis situation – go to hospital and if not, no other support

Long waitlist for psychiatry services for children – little available other than Janeway – very long wait here at times

Increased incidence of mental health issues in young children who are medication dependent – frightening increase in children and pharmacology

If in crisis, have to wait for an intake which could be weeks - only other option is to present at hospital

People nervous to use crisis line - reluctant to disclose suicidal thoughts in case police will show up at their door

Gaps here in NL – people don't know about services – a big disconnect

Lack of education and awareness – can't find numbers for mental health

What can government do to increase awareness – online services – use of apps? Strongest Families

Housing a big issue in Clarendville – lack of affordable housing – can't work if suffering from mental health issues – income support rates not adequate to cover rent

Police often first point of contact for mental health patients

Revolving door for people with more serious mental health issues

Won't release information to family members if patient is an adult

Mental Health office is downstairs in Bonavista - no privacy for clients

Need ways to decrease stigma and engage in service

Government needs to leave out the backdoors

Stigma is still really big

Ways to position things so that there is a free flow for people accessing service so no one knows what the person is attending for

People are encouraged to reach out for help - is the service there when they need it

Wait times for service

Increase in anxiety in children

Increase in school refusal for children – anxiety, self-esteem, parents struggling to deal with the issues with their children

Children exposed to so many things in the media with violence and unable to process it

Need for play for young children in primary

Social isolation - for all age groups

Parents feel more anxious with Child, Youth and Family Services

Clareville Session – Question 2:

What do you feel is currently working well in the regional and/or provincial mental health care system?

Community partnerships are working well, and that needs to be increased

There's been more awareness about mental health issues and ending stigma such as *Bell Let's Talk*

Companies have policies that highlight mental wellness - it's ok to talk about mental health issues

We've come a long way from where it was years ago for my family member who was diagnosed with a mental illness

Kids are accepting of mental health issues - acceptance of mental health issues depend of the age and generation you are from

Kids Have Stress Too and *Handle with Care* are two positive resources of the Family Resource Centre - limited human resources to deliver these programs

Safe and Caring Schools' person with school district speaks to kids about diversity - they have a big geographical area but its moving in the right direction

Healthy Baby Program is moving in the right direction

Self-help and drop in like U-Turn

Grass root community groups, like the Family Resource Centre, to talk about post-partum depression

Some think that addictions and mental health issues have to be somewhat separate - deal with addictions first then move on to mental health issues

Suicide and depression is high in deaf community and it's demoralizing - a lot of alcoholism in deaf community too

Supportive employment gives a sense of worth

IQ needs to be changed to open up employment services can get more people in

All the work being done by the APC - good stuff

Recovery Network - 80 people connected in province

Recovery movement is happening

Anti-stigma campaign is working well

Mental Health First Aid course is available out there now

Putting mental health in public domain – acknowledge what is happening in mental health – very positive

Lack of inter-agency networking now as opposed to in the past - used to network monthly and it was really good - not sure why that changed but workers have busy workloads now

More focus on housing which is positive

Guidance counsellors a good resource but overworked

How to best distribute public resources – people don't have personal resources for private counselling

People can't afford to pay privately if no insurance

Walk-in clinic being opened in Clarendville – great for people in crisis

People won't access mental health services due to stigma

End the stigma campaigns – very positive

Inter-agency networking on the west coast still happening

People not aware of what's available

Self-referrals are working well

Media ads to increase awareness are done well

Mental Health Crisis Line

Bridge the gAPP

Youth outreach worker

Clarendville Session – Question 3:

What improvements do you believe can be made to the regional and/or provincial mental health care system?

When you reach the age of majority it's frustrating for families - sometimes the privacy act hinders progress in treatment

We work as a team in this region and that works well - team work is the key

Wait list is the problem

Assisted living is necessary for some people with chronic mental illness

There are more challenges related to alcohol and drug abuse

More programming and direct services are needed

If we don't have the expertise here in NL and if you need treatment out of province there should be a more willingness to do that

We need consultation that is nation-wide because we can't always get what we need here

Food – budget money spent on non-nutritious food in the centres out there - look at sugar intake in school - sugar is an addictive substance

Start young - parenting topics like how to deal with anxiety in young children – need more information provided on such topics

Greater focus on early intervention and promotion

Parents put a lot of pressure on kids i.e. taking to every sports team

Linkages - need to be more intensive support in place - 29 weeks to help people connect to workplace

Should be funded by government though AES - some funding is federal

SPLASH Centre gives young people somewhere to go - need these youth centres in our communities

Soon going to have a technology program - addictive behaviours being learned early on

Self-harm is huge now - need more information on this for youth

Get people in schools to talk about issues in the school to the students and parents

Need leaders in the community

Person in the supporting role leads education and support too - sometimes you can do too much

Where do people get advice? Mental Health Crisis Line place to ask questions about how best to support people

Groups in community to help people learn about how to support family of friends

New facility for Waterford - but also need programs in the community outside the St. John's area too - more than bricks and mortar

Make Doctors more accountable

Ask the people in the system what their experience has been and learn from them

Need more support systems

Hold support groups in the community

Community to take more responsibility

Person needs different types of support and not only a counsellor - yoga, nutrition, etc. - need a complement of all types of support

Support, support, support!

So much to be fixed in mental health – wait lists are huge and need to be improved - more bridging the gap – more drop-in crisis centres

A one- stop shop - mental health, housing, income are all connected so one place to deal with all

More affordable/supportive housing

Education and awareness – starting with school system

Health curriculum deals with mostly physical health and not mental health – increase understanding and facilitate access hopefully with mental health at the forefront

People in mental health are worked to death – burnout among professionals so reducing services/access privately

Social workers off on stress leave

Mental health to be taught as a subject in schools

Guidance counsellors are now crisis counsellors as opposed to career counsellors

Local support groups would like school access to educate on mental health issues

Kids may be easier to reach outside classroom setting – use alternate venues

Get kids healthy so they become healthy adults

Need mental health teams in schools

Barriers – transportation, financial, geography, etc. for kids to access services so parents don't follow through

Early intervention an issue as school curriculum so heavy and intense that no room/time for presentations on mental health topics or other issues

Government should have a mandate that mental health be part of the school curriculum so that time/resources allotted to same

More optimistic about mental health in NL than ever before – we are slowly moving forward
Lack of beds in hospitals for mental health patients in crisis

Guidance counsellors work more reactive than proactive regarding mental health in schools

One group doesn't know about the other (their programs and services) – how can we change that?

Lack of funding for mental health community groups to access office space and resources

Re-focus role of the general practitioner, who is often first point of contact

Big discrepancy in doctor's knowledge, willingness to treat, and over prescribing of medications

More networking among doctors – general practitioners don't often show up to mental health forums as they are fee for service

More input into the mental health system from front line workers

Meet specific population needs, such as autism with children above Grade 3 and adults

Access and decrease wait times for service

Support groups

Holistic - all the needs of persons need to be met - housing, finances, etc.

Improved accommodations and resources in women's correction

Need appropriate services to support a drug court

Some groups' criteria are too strict – populations excluded

Not the building but the programs to meet the needs of the people - what will happen when the Waterford Hospital is replaced?

Clareville Session – Question 4:

Is there anything else you would like to share with the All-Party Committee on Mental Health and Addictions?

There is easy access to addictive agents

Drug use is contributing to mental illness

Parents who need education don't avail of it

Video game use is a problem

If caught early, mental health issues can be treated better - early diagnosis needs to be the focus

Do your homework - get a second opinion and don't trust the first thing you are told

Shorter wait lists for services for children

The Waterford Hospital needs to be replaced

There needs to be more support/structure in place upon release from the Waterford Hospital

Work with community groups, such as Family Resource Centres to offer programs/information workshops aimed at prevention, education, and awareness

The conversation needs to continue

Look at the recommendations and do something

Stigma and attitudes are still strong - need to tell people to deal with problems head on

Focus on school system to help kids learn how to deal

Self-care for employees

Lived experience is a huge asset

Commercials sponsored by government are really good - need to broaden these commercials and maybe add in a piece of what goes through the clients' minds

Some of our stigma happens in our health care

Ensure people working in the field have the best experience and training

Canada is spending more on mental health than NL, where we are spending about half of what we should be spending

Support groups also need the support of the formal services in the community

Change the focus of mental health and addictions to include topics that the community will engage in - make it real

There is a role for other therapies like acupuncture

All comes down to funding and with the provincial financial situation now, if additional cuts coming, this would be very worrisome and detrimental - need to maintain what we have

Government needs to be more proactive in getting people off income support and use this money to better fund mental health services/supports

Take care of waiting lists and meet the needs of the people

Need community supportive services and community partnerships

Need to think we are all working towards same goal

Keep lines of communication open to work with local not-for-profit organizations who are addressing mental health and addictions

“Target Groups” – Everyone has to be treated equally, not depending on income, location, etc.

Everyone is/can be affected by mental illness

We need more manpower to meet needs of those looking for services

1:250 student to guidance counsellor ratio

Community partnerships

Sober living

Transitional housing aftercare from in-patient treatment

More drop-in for people to get support from people with lived experience

More drop in centres across the island - this provides a building for self-help groups

Hiring people with lived experience – this will help fill the gap for doctor appointments and recovery centre

Get rid of outdated Waterford Hospital - too much stigma attached to it - move toward holistic community-based treatment centre

Community family self-care

Education for those who find themselves in supporting roles – “Am I doing what is best for those I’m supporting?”

Work with community groups, such as Family Resource Centres to offer programs/information workshops aimed at prevention/education/awareness

There needs to be more support/structure in place upon release from the Waterford Hospital

Waterford Hospital needs to be replaced

Shorter waitlists for services for children

Education of mental health in schools

Increase rental rates for income support recipients so they can get housing

Mental health curriculum in schools

Reduce wait list times to access treatment