

Child & Youth Mental Health and Substance Use
COMMUNITY OF PRACTICE

2022 Annual Gathering Summary Report



May 13, 2022

OVERVIEW

On May 13, 2022, the CYMHSU Physicians Community of Practice (CoP), now with 258 members, hosted their seventh provincial gathering at the Marriott Pinnacle Hotel in Vancouver, BC. Eighty-eight participants gathered for the full-day event which focused on the top priority highlighted by the CoP memberships 2021-2022 strategic plan.

Participant Profile

Specialist Physician
 Family Physician
 Clinical Nurse Specialist
 Pediatric Resident Physician
 Researcher
 Health Authority Representative
 Child Psychiatrist
 Director of Child and Youth Mental Health
 Director, Master of Public Health Program
 Emergency Physician and Rural Family Medicine Locum
 Pediatric Pharmacist

Gathering Objectives

- Leverage strengths, possibilities, challenges, and successes of BC's health care system to work towards our vision
- Identify opportunities for new or continued partnerships for prevention and transformation of care

THE DAY IN BRIEF

See below for a quick summary of the day's events. You can also view the full agenda [here](#). Unless otherwise noted, presenters are physicians that are part of the CYMHSU CoP.

- The Annual CYMHSU CoP Gathering opened with a welcome from **Dr. Matthew Chow**. Squamish Nation **Elder Syexwaliya Ann Whonnock** sang a traditional song and offered an opening prayer. Elder Syexwaliya Ann Whonnock recognized all participants as survivors and encouraged them to share in the wisdom of her people by adopting a stance of openness to energy and ideas of participants throughout the day.
- **Dr. Veronic Clair** shared significant developments in CYMHSU in their presentation, titled *The COVID Pandemic & Child and Youth Mental Health and Substance Abuse: Intersection and Prevention*.
 - Both suicide and overdose rates have been rising since 2017 with a significant increase in 2021
 - In 2020, illicit drug toxicity was the top cause of death for people aged 19–35 and the third highest cause of death for youth under the age of 19
 - An estimated 70% of mental illnesses present before the age of 25.



- **Dr. Hasina Samji** shared learning from over 9000 youth responses to the Youth Development Instrument (YDI).
 - **A Youth Patient Partner** and Grade 10 Student at Abbotsford Senior Secondary shared their story about anxiety and how the isolation measures of COVID-19 contributed to it. In response to questions, this youth representative with lived experience noted they felt most teachers in their school did not care about their situation and that their mother and one teacher's concern facilitated access to the Foundry and CBT therapy.
 - **Judy Wu** (CHART Lab Research Assistant and SFU Faculty of Health Sciences) also shared findings from the Youth Development Instrument related to youth eco-anxiety.
- **Dr. Paul Kershaw** (UBC School of Population & Public Health and Founder, Generation Squeeze) encourages CYMHSU individuals to support continued investment in social determinants of health to help reduce illness and create a healthier population. Dr. Kershaw hopes that funding for childcare, housing, and poverty reduction is also increased. CYMHSU members also shared that physicians are continually increasing their focus on preventative care.
- **Dan's Legacy** partners with 17 social services organizations to provide trauma-informed and culturally sensitive counselling and life skills programs to youth with substance use challenges in Metro Vancouver. **Tom Littlewood**, Program Director, talked about advancing a centralized resource for youth with substance use challenges, ensuring that we have a supply of trauma-informed therapists and provide youth in recovery with safe alternatives to street-supplied substances.
- **Drs. Wilma Arruda, Matthew Chow, Sari Cooper, Robert Lehman, and Ms. Kelly McQuillen** (Ministry of Health) shared the benefits of, and progress towards, Primary Care Networks in the province. See description of PCNs and opportunities in the last section of this report.



- **Drs. Tracy Monk and David Smith** presented the steps involved for clinicians using Pathways and shared another video outlining Pathways addiction services. A pre-recorded video from **Dr. Dzung Vo** on *Stabilization Care for Illicit Drug Overdoses* was also presented.
- In *Unfolding Some esSentials for Working with ACEs Sequae*, **Dr. Erika Cheng** introduced CYMHSU members to tools for self-awareness and to hear, see and value when they recognize ‘dis-ease’ in themselves or a family in their practice. **Drs. Shirley Sze and Linda Uyeda** also invited participants to generate ideas for spreading trauma-sensitive care in the province, including partnerships outside of healthcare.
- Doctors of BC President, **Dr. Ramneek Dosanjh**, thanked everyone, noting that CYMHSU members are changemakers and encouraged them to register for the [Health and Justice Alliance](#), doctors and lawyers collaborating to better serve families experiencing toxic stress as a result of separation and divorce. The motivator is ACEs which provides compelling data. Physicians can make a collective impact—when they can lean into one another, they can do some tremendous things and influence change.



EMERGING THEMES AND OPPORTUNITIES

Children & Youth Mental Health in Our Communities

British Columbians’ mental health depends on many social determinants. There has been relative underinvestment in these social determinants—including education, housing, and income security—over the past decades, and pandemic-related disruptions further eroded many social determinants. The Youth Development Instrument (YDI) reveals the impact on youth aged 16-17. Following the peaks of the pandemic, nearly half reported “poor” or “fair” mental health. Restrictions during the pandemic threatened factors that are critical to youth mental health: school routines, milestones such as graduation and prom, post-secondary opportunities, connection to family and friends, and the income security and stability of their family units. The YDI surfaced the following learnings:

- For individuals with ACEs scores, this disruption of familiar routines worsened underlying anxiety and/or depression.
- Proven prevention interventions (e.g., Preventure) mitigate ACEs risks.



- Positive Childhood Experiences (connection with friends) can increase youth resiliency.

In a pre-event survey, CoP members were asked to prioritize investment options including primary, secondary, and tertiary care. They prioritized prevention programs in schools and communities, and access to physicians and clinicians in schools as the most impactful for improving child and youth mental health and substance use in BC.

Member Call to Action: Connect with local school districts and elevate awareness of mental health status, spotlight opportunities to invest in effective interventions (e.g., Doc in School programs, Take a Hike program, Preventure). For other effective interventions, please see:

<https://www.wsipp.wa.gov/BenefitCost>

CoP Opportunity: Identify and actively participate in CYMHSU prevention programs (e.g., parenting skills programs, Preventure) throughout British Columbia.

CoP Opportunity: Within cross-sector coalitions, use physicians' voices and influence to encourage government's long-term focus and investment in social determinants (e.g., housing, education, income security).

Primary Care Network

A Primary Care Network (PCN) is a network of physicians (via patient medical homes), other primary care providers, allied health care providers, health authority service providers, and community organizations that work together to provide all the primary care services a local population requires. The group discussed ways to include CYMHSU services in the development and implementation of PCN:

- Streamlining of funding sources
- Retention of mental health professionals
- Engagement with the Ministry of Child and Family Development
- Collaboration of health authorities and medical staff associations

Member Call to Action: Connect with your local PCN and champion the integration of mental health supports for children and youth, including social workers and trauma-informed counsellors.

Youth Presenting with Substance Use Challenges

When physicians identify a youth with substance use issues, there are several opportunities to improve access to Trauma-Informed Therapy & Recovery:



- Service-mapping to help physicians identify local resources that families can access
- Centralized list of vetted trauma-informed therapists (e.g., in public domain with bios to activate youth in choosing the right fit, or accessible through a provider tool such as COMPASS)
- Best practices for ensuring prescriber safety and preserving the therapeutic relationship

QUICK WAYS TO GET CONNECTED

- Join our Community of Practice by emailing svirk@doctorsofbc.ca
- Register for [Pathwaysbc.ca](https://pathwaysbc.ca)
- Keep the 24/7 Addiction Medicine Clinician Support Line handy (778-945-7619)

CoP Opportunity: Advance provider sensitivity through a Trauma-Informed Skills course (like UBC CPD's Cognitive Behavioural Skills course).

Proposed Resolution

The CoP members in attendance expressed support for the following resolution, which will be subject to editorial amendments by the Steering Committee:

The Child and Youth Mental Health and Substance Use Community of Practice calls on the BC and Canadian governments to create and fund a whole of government comprehensive strategy to prevent and treat mental illnesses and problematic substance use, and promote mental wellness, using a trauma informed life course approach with ongoing reporting of related key performance indicator and associated research agenda.