Consensus Statement on the Mental Health of Emerging Adults: Making Transitions a Priority in Canada

Executive Summary
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BACKGROUND

Changing Directions, Changing Lives: the Mental Health Strategy for Canada (Strategy), written and released by the Mental Health Commission of Canada (MHCC) in 2012, makes a number of recommendations for action on child and youth mental health. In order to better serve emerging adults in particular, the Strategy recommends the removal of barriers that can prevent successful transitions from child and youth to adult mental health and addiction services.

Building on recommendations put forward in the Strategy, the MHCC commissioned a research team from the Children’s Hospital of Eastern Ontario to conduct a comprehensive assessment of the current state of policies and practices for youth transitioning from child and youth to adult mental health and addiction services in Canada. The resulting report, entitled Taking the Next Step Forward: Building a Responsive Mental Health and Addictions System for Emerging Adults, makes a series of recommendations for building a seamless continuum of services for emerging adults and for improving inter-sectoral policies that address challenges faced by emerging adults in current service systems. With this report as context and background, in November 2015, the MHCC convened the first Canadian consensus conference on the mental health of emerging adults. The release of the Consensus Statement on the Mental Health of Emerging Adults: Making Transitions a Priority in Canada coincides with current discussions on the Health Accord. This timely report has the potential to inform provincial and territorial thinking about how to prioritize youth and emerging adult mental health within funding streams earmarked for mental health.
ABOUT THE MENTAL HEALTH OF EMERGING ADULTS (EAs)

Emerging adulthood is the life stage during which early symptoms of diagnosable mental disorders and first onset of major mental illnesses are most prevalent. Unfortunately, because EAs are often forced to transition out of youth services around the age of majority (18 or 19), many emerging adults are not able to access vital services and programs precisely at the time when they need them most. Lack of coordination between child and youth and adult mental health services and systems, long wait times and differences in the culture and training between these two systems pose barriers to continuity of care. Additionally, existing systems are failing to meet the diverse mental health needs of all emerging adults equally and some populations are chronically underserved.

Health equity must underscore any approach to providing mental health, substance use and other social services to diverse and vulnerable EA populations across Canada. Appropriate and adequate care during this developmental period can positively impact the lifetime trajectory of an individual’s mental illness and well-being.
ABOUT THE CONSENSUS CONFERENCE

A consensus development conference is a gathering of experts and community leaders who translate lived experiences and expert knowledge of evidence into policy and practice recommendations. It relies on a jury to generate consensus on actionable policy recommendations in a short amount of time. Our Jury and EA Innovators came from across the country and represented a wide spectrum of knowledge, expertise and sectors.

The goal of the Consensus Conference on the Mental Health of Emerging Adults: Making Transitions a Priority in Canada (the Conference) was to develop a consensus statement with concrete recommendations aimed at improving the mental health of emerging adults and to address the challenges they face in current service systems.

The Conference was attended by 200 delegates from across Canada, including emerging adults, caregivers, policy makers, representatives from provincial and territorial mental health administrations, researchers, mental health organizations, clinicians and professionals from multiple sectors. The consensus statement is aimed at those who have a role to play in improving the mental health of emerging adults.
PRINCIPLES OF A CHANGED SYSTEM

The Jury and EA Innovators identified a number of foundational characteristics of a reformed system – one that is better able to meet the mental health and problematic substance use needs of emerging adults.

These principles assert that all emerging adults across Canada have equitable and timely access to high-quality, publicly-funded mental health care in a system that is defined by a culture of hope, collaboration and integration and that is flexible in its responses.

In this system, emerging adults are full co-creators of client-driven and holistic solutions designed to meet their needs and have access to peers and professionals with whom they can relate. Services are locally, culturally and personally relevant, highly responsive to the needs of all vulnerable people, family informed and cultivate a sense of belonging. Finally, service and system performance are evaluated in a coordinated and timely manner to ensure desired outcomes.

RECOMMENDATIONS

The consensus process resulted in 12 synthesized recommendations that fall into three broad categories. These recommendations are summarized below under each category.

Recommendations that are foundational to change:

Emerging adulthood needs to be recognized as a distinct developmental stage of life and policies and service responses need to be based on need rather than chronological age. A changed system will collaborate with emerging adults to define outcomes and determine the most appropriate services to meet their needs and will work to develop pathways and tools to meaningfully engage with EAs’ families of choice at all levels of the service system. In order to ensure that all populations of emerging adults have access to appropriate care, principles of health equity, anti-oppression and anti-racism must be applied.
Recommendations for addressing service gaps:

A seamless recovery-oriented continuum of care that fosters resilience, meets EAs where they’re at and bridges gaps between youth and adult mental health and addiction services must be created. In order to ensure continuity of mental health care for all EAs, barriers to collaboration and integration of services and sectors must be removed. Children, youth and emerging adults require more opportunities to foster resilience and mental well-being as they progress through their education and peer support training and paid peer support opportunities need to be expanded across the continuum of care. Recognition of emerging adulthood as a distinct developmental phase of life requires working with professional and accreditation bodies to establish Canada-wide competencies for professionals working in the field of emerging adult mental health, ensuring professionals are adequately trained and service quality is measured.

Recommendations for generating action and sustaining momentum:

In order to address the urgent and unmet mental needs of emerging adults, funding incentives can be used to ensure that stable, flexible funding is provided and tied to shared outcome targets. Time and funding must be dedicated to improving evaluation, data collection, research and knowledge exchange in emerging adult mental health so that the evidence base regarding how best to meet the mental health needs of EAs is strengthened. Finally, a coalition consisting of emerging adults and champions of emerging adult mental health must be established to work with policy makers in translating the 12 recommendations put forward in the consensus statement into policy, programs and practices that improve the mental health of EAs.
ENGAGEMENT WITH FIRST NATIONS, INUIT AND MÉTIS

The *Consensus Statement on the Mental Health of Emerging Adults: Making Transitions a Priority in Canada* does not aim to speak for First Nations, Inuit and Métis emerging adults, their families, or communities. Although First Nations, Inuit and Métis were represented on the Jury, members of the Jury and conference delegates raised legitimate concerns that there was inadequate representation of First Nations, Inuit and Métis experts and voices among conference participants, that First Nations, Inuit and Métis were engaged too late in the process, and that their national organizations were not engaged prior to the conference. Before finalizing the statement, the Jury agreed that the MHCC had to first take the time to engage with First Nations, Inuit and Métis emerging adults in a process that was satisfactory to the respective national organizations. At the time of release of this document, discussions with the Métis Nation organizations have been completed. Updated versions of this document will be issued as parallel discussions with other Indigenous organizations are completed.