

CYIT Network - Canadian Youth in Transition

What are the **objectives** of the proposed network?

- The objective of this pan-Canadian network is to facilitate the transitions of youth with severe mental illness, neurodevelopmental disorders and addictions into adulthood; This transition period is a particularly vulnerable one for this population and often results in a worsening of symptoms and impairment.
- We propose to establish Evidence to Practice Portals (EPP) consisting of local/regional/provincial representatives of youth in transition, their parents, service providers, researchers, clinicians and policy makers. An EPP national steering committee will ensure equal representation, synchronization, and consistency in goals and methods across the country. Each EPP will evaluate specific aspects of the transition of youth. This could include demonstration projects, systematic reviews, cohort studies, and clinical trials.
- We aim to integrate the assessment and treatment of youth with severe mental illness, NDD and addictions, overcoming diagnostic and system silos.

What are the **biggest challenges** your proposed network has to overcome?

- Increase the involvement from youth in transition, family members, advocacy groups and policy makers.
- Address the barriers that focus on specific diagnostic categories and the artificial separation of disorders that fail to recognize that in adolescence, those barriers are 'fuzzy' and lack long term validity.
- Overcome institutional barriers that restrict services to certain silos, i.e. mental health services that exclude youth with addictions and neurodevelopmental disorders even though epidemiological studies emphasize extensive co-morbidity which has a profound impact on adult outcome.

Who is who in the team here at the workshop?



Peter Szatmari is Chief of Child and Youth Mental Health Collaborative at CAMH & Sick Kids, and Director of the Division of Child and Adolescent Psychiatry at the University of Toronto.



Gloria Chaim is Deputy Clinical Director of the Child Youth & Family program at the Centre for Addiction and Mental Health.



Anna Chouchkova is a 4th year student at Queen's University, and a Lupus Clinic graduate from The Hospital for Sick Children, Toronto.



Anne Fuller is British Columbia's Provincial FASD Consultant, Children and Youth with Special Needs Policy, in the Ministry of Children and Family Development.



Chris Richardson is a step-parent of three Aboriginal daughters with Severe Mental Illnesses (SMIs) and addictions, VP of From Grief to Action - a parent advocacy group, and an Epidemiologist who researches adolescent risk taking and impulsivity.

What skills, resources, connections or other **inputs from potential collaborators** are you looking to find at the workshop to strengthen your proposal?

- CYIT would like to develop a collaboration with groups who have a strong Aboriginal connection.
- An increased Youth, Parent, and Family voice at the planning level is a connection the CYIT network would like to strengthen.
- Further expand CYIT to include more provinces and territories not already involved to form a truly pan-Canadian network (coast to coast to coast).

Which **organisations** are involved with the network?

- There are approximately 88 different organizations that are part of this pan-Canadian CYIT Network. The key organizations that have committed to implementing and evaluating transition programs as part of CYIT include The Hospital for Sick Children (Sick Kids), Centre for Addiction and Mental Health (CAMH), McMaster Children's Hospital, Children's Hospital of Eastern Ontario (CHEO), the Ability Hub (Calgary), IWK Health Centre (Halifax), and Providence Health Care's Inner City Youth Mental Health Program, affiliated with the University of British Columbia (UBC).

How will the network **achieve a transformation** in adolescent mental health in 5 years?

1. We will contribute expertise in identification of system gaps and barriers, in empirical evaluation, knowledge translation/exchange, program development and implementation, mental health policy development, and first-hand experience with mental disorder and issues related to the transition of youth into adulthood. We have important links with politicians and policy makers at national, provincial and territorial levels. Collectively, we have a long history of being able to implement change, obtain CIHR funding, lead large collaborative interdisciplinary research projects and train young investigators in clinical, health services, qualitative, KTE and policy research.
2. Aim to create a patient-oriented mental health care pathway focused on youth in transition without regard to "diagnostic silos".
3. Reverse the trend towards increasing fragmentation in the mental health care system and foster collaborative care pathways across service silos.
4. Create an evidence-based, developmentally sensitive system of care to facilitate the transition of youth with mental disorders into adulthood.

What **other things** would you like people to know about the proposed network?

- Through Knowledge Translation/Exchange activities and stakeholder expertise, we propose to develop a framework of effective practices and policies for youth in transition.
- We hope to identify the clinical, education, employment, housing, income assistance, social supports, and respite care policies needed to ensure that Canada is seen as a global leader in the successful transition of youth with mental disorders into adulthood.