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Protective factors as a path to better youth mental health





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Through its evaluation efforts to date, the New Brunswick Health Council (NBHC) has identified four priorities for youth: achieving healthy weights, achieving tobacco-free living, preventing injuries, and improving mental health.

While all these issues are as relevant today as ever, this brief focuses specifically on youth mental health. Not only are young people the most likely to experience mental health challenges, but 75% of all mental health problems and illnesses (for youth and adults combined) begin before the age of 25. [1]

Plenty of initiatives in the province already recognize the need to improve the state of mental health, but greater coordination is required, along with clear and common performance targets.

One potential avenue to improve youth mental health is to focus more on improving protective factors (as opposed to only targeting risk factors) and on the concept of resilience. Protective factors that deserve particular attention include helping young people access all

supportive services available and making sure kids get enough sleep.

What is mental health?

Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. [11]

What is resilience?

In short, resilience is the ability to bounce back from adversity.

Left unaddressed, youth mental health issues can persist through adulthood. The overarching theme in this brief is therefore improving mental health. This is related to the NBHC's third recommendation to the Minister of Health in 2011, when the NBHC recommended that the Government of New Brunswick, through the Department of Health, "ensures that a concerted strategy is developed to improve health promotion and disease prevention in the province", including for mental health.

Youth mental health - the picture in 2015

More New Brunswick youth seem to be affected by mental health issues than the national average. For example, the proportion of youth in New Brunswick diagnosed with mental disorders or hospitalized for mental health reasons is higher than the Canadian average. Table 1 below lists some of the indicators used to measure the state of youth mental health in the province.

Table 1. Key mental health indicators in New Brunswick

Mental health indicator		Canada	Variability by health zone	
Youth (15 to 24) diagnosed with mental or substance use disorder in their lifetime (%) [2]	35.2	30.0	n/a	
Mental health hospitalizations (5 to 24) (rate per 10,000) [3]	52.9	40.9	28 to 126	
Perceived mental health as being very good or excellent (12 to 19) (%) [4]		74.6	67.8 to 83.9	
Perceived mental health as being very good or excellent (20 to 34) (%) [4]		73.2	55.0 to 78.6	
Youth (18 to 34) diagnosed with depression (%) [5]	14.6	n/a	5.3 to 22.8	
Saw health professional for emotional or mental health issues (18 to 24) (%) [5]	18.7	n/a	1.2 to 34.1	
Community mental health assessment within 30 days (0 to 18) (%) [6]	53.7	n/a	41.3 to 66.8	

The NBHC has reported in the past that health service quality and health status vary greatly within the province. Table 1 shows that this is also true for youth mental health. The system must learn from the geographic areas that have better mental health results to improve mental health service quality – and ultimately youth mental health - throughout the province.

A key part of the approach will be to set clear and common performance targets for improving youth mental health. Which indicators are priorities to work on and what are the specific targets that need to be reached? Some parts of the province may have priorities that are specific to their area. Regardless of the location, having clearly articulated common targets drives efforts to identify how various local resources can contribute to these priorities. These efforts also contribute to a stronger collective understanding of available local resources.

Protective factors and risk factors in mental health

What are protective factors and risk factors?

Protective factors help *prevent* the development or worsening of an undesirable health condition. Risk factors are the opposite; they *contribute* to the development or worsening of an undesirable health condition. For example, physical activity is a protective factor for obesity (and other conditions), while smoking is a risk factor for lung cancer (and other conditions).

Table 2 below lists a number of protective factors and risk factors specific to mental health.¹

Table 2. Protective and risk factors for mental health

	Protective factors	Risk factors			
Individual	Interpersonal/prosocial skills	Sadness or depression			
	Health literacy	Anxiety			
	Nutrition	• Stress			
	Physical activity	Chronic or severe mental illness			
	Reading skills	 Problematic use of substances, including 			
	Sleep	medications			
		Heavy alcohol consumption			
		Smoking			
		Chronic illness			
		Poor nutrition			
		Physical inactivity			
Caregiver/Family	Adequate social and emotional support	Isolation			
	Nurturing environment	Lack of family support			
	Social activity	Limited social network			
	Friendships				
Environment/Context	Access to community support services	Low socio-economic status			
	Supportive environment	 Lack of support services, including transport, 			
	Access to appropriate mental health services	shopping and recreational facilities			
	Opportunities to serve as a volunteer	Limited mental health service			
	Meaningful participation and a feeling of	Stigma and discrimination			
	belonging	Language barriers			

¹ Modified list from the Centre for Addiction and Mental Health (CAMH)

To prevent the onset of mental health issues, it is essential to work at better managing risk factors, but also at increasing the adoption of protective factors. In fact, focusing on adopting protective factors early on helps effectively manage risk factors and reduce the development of mental health issues thereafter.

Figure 1. The progression of mental health issues

Lack of protective factors

Development of risk factors

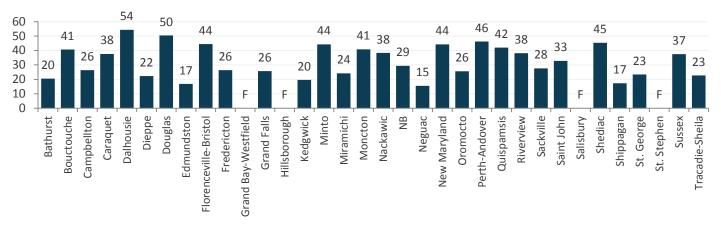
Development of mental health issues

Sleep as a protective factor

Sleep is a key protective factor for health in general, including mental health. There is growing evidence that insufficient sleep significantly and negatively affects learning, emotion, and behaviour. [7]

The NBHC's study on resilience [8] shows a significant association between getting enough sleep and being resilient. Although research shows that adolescents need eight or more hours of sleep [7], only 29% of youth in New Brunswick get that much sleep. This number varies among communities from 15% to 54% [9].

Figure 2. Students who sleep 8 hours or more a night by community



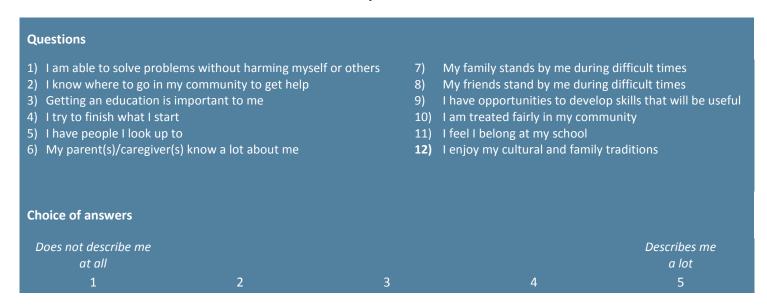
F = Not enough schools participated in the survey to provide reliable data

NBHC analysis on resilience

Resilience can be broadly defined as the ability to bounce back from adversity. It is also in part the capacity of individuals to find the right supports, programs and services for their needs. Although resilience is not limited to mental health (nor does it cover the complexity of all health issues), it is a concept that helps look at the adoption of key protective factors that contribute to better mental health.

The NBHC did an analysis [8] on youth resilience by looking at 12 questions on protective factors from the 2012-2013 edition of the New Brunswick Student Wellness Survey for Grades 6 to 12. This analysis was based on the 12-question Child and Youth Resilience Measure (CYRM-12) [10]. Each question was answered using a 5-point scale from "1 - does not describe me at all" to "5 - describes me a lot."

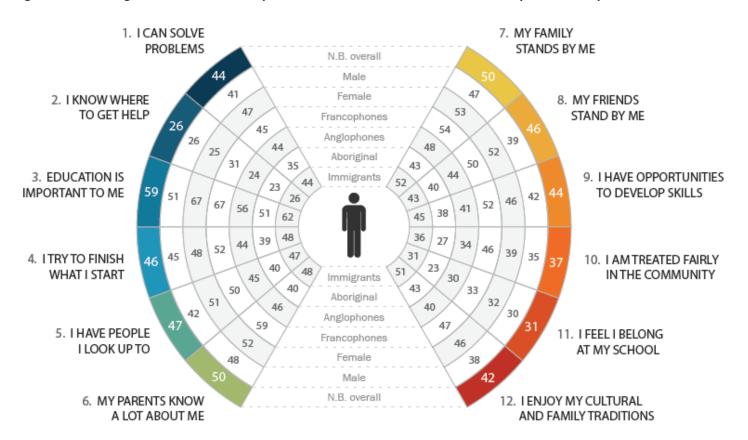
Table 3. Questions and answers used in the NBHC's analysis on resilience



Analysis results: Protective factors

The following diagram shows the percentage of students who strongly identified with each of the questions in the NBHC's analysis on resilience.

Figure 3. Percentage of students who responded "5 - describes me a lot" to the 12 questions on protective factors



Weakest factors measured

Of the 12 protective factors measured, the one with which students least identified was *I know where to go in my community to get help*. Only 26% of students answered "5 – describes me a lot." The two other factors with low scores were the feelings of *belonging at school* (31% of students) and of *being treated fairly in the community* (37% of students). All of these factors vary by community. For example, for the factor *I know where to go in my community to get help*, the results vary from 15% to 45%.

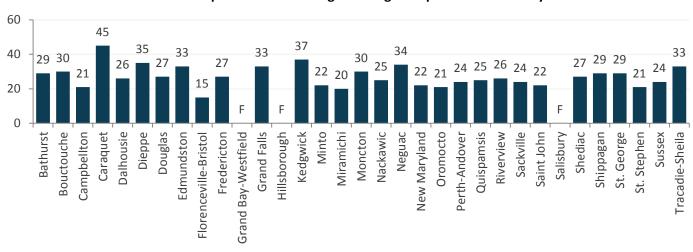


Figure 4. Percentage of students who answered "5 - describes me a lot" to the question on knowing how to get help in the community

F = Not enough schools participated in the survey to provide reliable data

Analysis results: Resilience scores

Based on the Child and Youth Resilience Measure, the NBHC also calculated overall scores that reflect how resilient New Brunswick youth are. These scores show that only 67% of New Brunswick youth have a moderate-to-high level of resilience. This means there is ample room for improvement.

A look at the results by population subgroups show that girls scored higher than boys (70% vs. 64%) and that Francophones scored higher than Anglophones (74% vs. 65%). The Aboriginal population scored the lowest (57%) of all population subgroups,

Calculating resilience scores

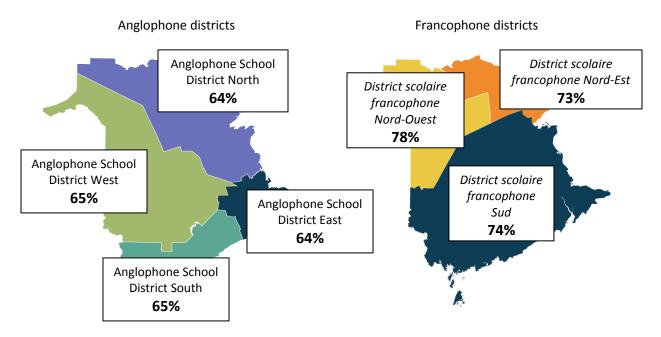
Adding up the answers from the 5-point scale for each question, student scores ranged between 12 and 60 points. Students with scores ranging between 12 and 45 points were categorized as having low levels of resilience, and students with scores ranging between 45 and 60 points were categorized as having moderate-to-high levels of resilience. [8]

whereas the immigrant population had results similar to the New Brunswick average (66%). The results were also broken down by school district. These show that District scolaire francophone Nord-Ouest scored the highest with 78%.

Table 4. Percentage of students in grades 6 to 12 with moderate-to-high resilience scores (by population subgroup)

١	N.B. overall	Male	Female	Francophones	Anglophones	Aboriginal population	Immigrant population
	67%	64%	70%	74%	65%	57%	66%

Figure 5. Percentage of students in grades 6 to 12 with moderate-to-high resilience scores (by school district)



Examples of existing mental health initiatives

If knowing where to get help is the factor where youth have the lowest score, then it is important for organizations that offer mental health services to better coordinate their efforts and promote the availability of their services. Here is an overview of some of the mental health initiatives that already exist in the province; they can involve several government departments as well as community groups.

Table 5. List of some provincial initiatives related to youth mental health

Initiative	Aim	For more information
New Brunswick's Wellness Strategy 2014-2021	To increase levels of wellness and resilience in the province	http://www2.gnb.ca/content/dam/gnb/Departments/sd-ds/pdf/Wellness- MieuxEtre/NewBrunswickWellnessStrategy2014-2021.pdf
The Action Plan for Mental Health in New Brunswick 2011-2018	To increase mental health and empower communities	https://www.gnb.ca/0055/pdf/2011/7379%20english.pdf
The Link Program	To facilitate access to and navigation of services	http://www.thelinkprogram.com/
Integrated Service Delivery (ISD)	To have greater collaboration between departments for improved service delivery to youth	http://www2.gnb.ca/content/gnb/en/corporate/pr/isd.html
New Brunswick's Crime Prevention and Reduction Strategy / Youth Intervention and Diversion Program	To prevent crime	http://www2.gnb.ca/content/dam/gnb/Departments/ps-sp/pdf/Publications/MovingFromTheoryToOutcomes.pdf
ACCESS Open Minds – NB (Access NB)	To increase access to mental health and addictions services	http://news.gc.ca/web/article-en.do?nid=856669

Protective factors as an opportunity to guide improvements in youth mental health

It is a priority to improve the state of mental health in New Brunswick youth.

There is recognition that government services tend to work in silos and the initiatives on the preceding page are examples of efforts aimed at improving the coordination of resources in order to achieve better results. All provincial bodies serve the same population. With recent improvements in the availability of standardized provincial information, it is important that all provincial initiatives use and contribute to a common collective understanding of health trends and needs. The relatively small size of the province is an advantage on this front. The identification of priorities, whether at the provincial or local level, will prove to be far more effective with a stronger collective understanding of the provincial picture and regional trends. Furthermore, there is now evidence that the more local the information, the more effective it can be in mobilizing efforts.

Data shows that many young New Brunswickers have mental health issues. As some geographic areas in the province perform well, part of the

solution is to learn from those areas and to set clear and common performance targets that all stakeholders can aim for. The NBHC released a brief entitled *Variability in Health Service Quality* in October on this issue, which clearly demonstrates a high level of inequity in health service quality and the need for clear priorities and performance targets.

Many factors contribute to the mental health problems that New Brunswick youth face. It's important to effectively manage risk factors, but also to give more attention to promoting protective factors and building resilience. Key protective factors to work on include ensuring youth know where they can get help, increasing their feelings of belonging at school and of being treated fairly in the community, and ensuring they get enough sleep. Some of these factors can be addressed by the family, others by schools, the community and other public services.

Participating in the New Brunswick Student Wellness Survey

The analysis on resilience and protective factors was done using data from the New Brunswick Student Wellness Survey.

This survey is a key source of local information that helps understand the behaviours of New Brunswick youth and identify areas where focused efforts may be required.

Having all schools participate in this survey ensures availability of local data to empower schools and communities for action.

Appendix 1 - Additional data for mental health indicators

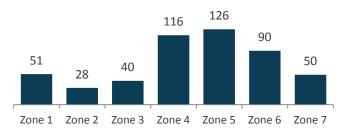
Key mental health indicators by zone



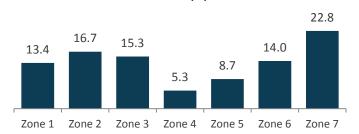
New Brunswick's seven health zones for delivery and administration of health services

- 1) Moncton and South-East area
- 2) Fundy Shore and Saint John Area
- 3) Fredericton and River Valley Area
- 4) Madawaska and North-West Area
- 5) Restigouche Area
- 6) Bathurst and Acadian Peninsula Area
- 7) Miramichi Area

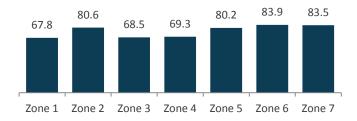
Mental health hospitalizations (age 5 to 24) (rate per 10,000, based on zone of residence)



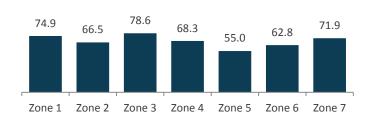
Youth (age 18 to 34) diagnosed with depression (%)



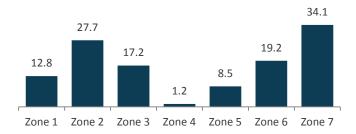
Perceived mental health as being very good or excellent (age 12 to 19) (%)



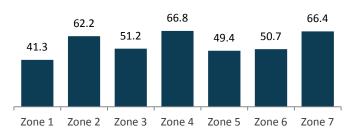
Perceived mental health as being very good or excellent (age 20 to 34) (%)



Saw health professional for emotion or mental health issues (age 18 to 24) (%)



Community mental health assessment within 30 days (age 0 to 18) (%)



Appendix 2 - Complete answers to the 12 questions on resilience

	Percentage of students who chose each answer						
	N.B. overall	Male	Female	Francophones	Anglophones	Aboriginal	Immigrants
I am able to solve problems without harming myself or							
others Describes me a lot – 5	44	41	47	45	44	35	44
4	20	19	20	20	20	15	17
3	14	15	14	14	14	17	13
2	6	6	6	6	6	9	6
Not at all - 1	16	19	13	15	16	24	20
2. I know where to go in my community to get help							
Describes me a lot – 5	26	26	25	31	24	23	26
4	26	25	27	26	27	25	25
3	23	22	24	21	23	20	20
2	12	12	12	10	12	12	11
Not at all - 1	13	15	12	12	14	20	18
3. Getting an education is important to me							
Describes me a lot – 5	59	51	67	67	56	51	62
4	21	22	19	16	22	20	22
3	11	15	8	9	12	15	9
2	4	5	3	4	4	5	4
Not at all - 1	5	7	3	4	6	9	3
4. I try to finish what I start							
Describes me a lot – 5	46	45	48	52	44	39	48
4	32	30	33	29	34	28	30
3	14	15	13	13	14	21	13
2	4	4	3	3	4	5	4
Not at all - 1	4	6	3	3	4	7	5
5. I have people I look up to							
Describes me a lot – 5	47	42	51	50	45	40	47
4	27	28	27	28	28	23	26
3	14	16	13	13	15	19	13
2 Not at all 1	6	7	5	5	6	7	6
Not at all - 1 6. My parent(s)/caregiver(s) know a lot about me	6	7	4	4	6	11	8
Describes me a lot – 5	50	48	52	59	46	40	48
Describes me a lot – 5	24	24	24	22	26	21	24
3	14	15	12	11	14	19	15
2	6	6	5	4	7	9	7
	U	7	5	4	7	11	6

(Appendix 2 continued)

	Percentage of students who choose each answer						
	N.B. overall	Male	Female	Francophones	Anglophones	Aboriginal	Immigrants
7. My family stands by me during difficult times							
Describes me a lot – 5	50	47	53	54	48	43	52
4	24	24	23	22	24	17	24
3	14	16	13	14	15	21	14
2	6	6	6	5	6	8	5
Not at all - 1	6	7	5	5	7	11	5
8. My friends stand by me during difficult times							
Describes me a lot – 5	46	39	52	50	44	40	43
4	28	30	29	28	30	24	26
3	16	18	11	13	16	20	14
2	5	6	4	5	5	6	6
Not at all - 1	5	7	4	4	5	10	11
9. I have opportunities to develop skills that will be useful							
Describes me a lot – 5	44	42	46	52	41	38	45
4	29	30	33	28	32	27	27
3	17	17	14	13	17	19	17
2	5	5	4	3	5	6	5
Not at all - 1	5	6	3	3	5	10	6
10.I am treated fairly in my community							
Describes me a lot – 5	37	35	39	46	34	27	36
4	35	34	35	34	36	29	32
3	17	18	17	13	18	24	17
2	6	6	5	4	6	9	7
Not at all - 1	5	7	4	3	6	11	8
11.I feel I belong at my school							
Describes me a lot – 5	31	30	32	33	30	23	31
4	30	29	32	30	30	25	26
3	21	21	20	21	20	25	19
2	9	9	8	8	10	12	10
Not at all - 1	9	11	8	9	10	15	14
12.I enjoy my cultural and family traditions							
Describes me a lot – 5	42	38	46	47	40	43	51
4	26	27	27	26	28	23	24
3	18	19	16	16	18	15	14
2	6	6	6	5	6	7	5
Not at all - 1	8	10	5	6	8	12	6

References

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