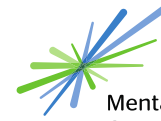




Canadian
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Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada

Webinar on COVID-19 and Early Childhood Mental Health in Canada:

Fostering Systems Change and Resilience

Recommendations for Improvement

October 27th, 2021





Land Acknowledgment

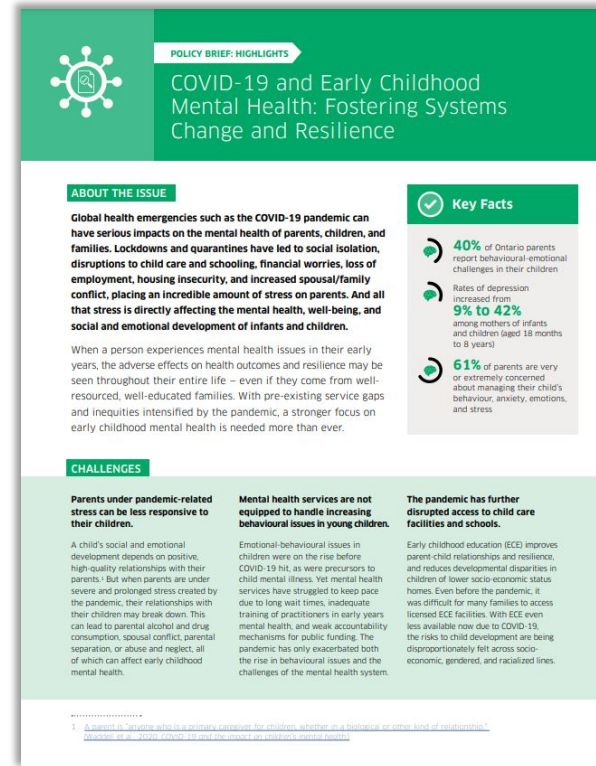
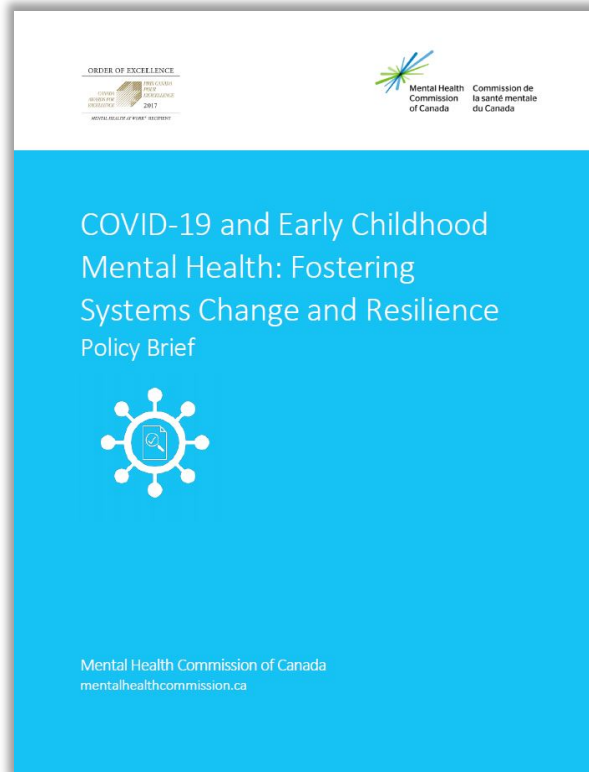
The Mental Health Commission of Canada and the Canadian Paediatric Society operates primarily on the unceded traditional Territory of the Anishinabe Algonquin Nation whose presence here reaches back to time immemorial. The Algonquin people have lived on this land as keepers and defenders of the Ottawa River Watershed and its tributaries. We are privileged to benefit from their long history of welcoming many Nations to this beautiful territory. We also recognize the traditional lands across what is known as Canada on which our staff and stakeholders reside.

Agenda

1. Welcome
2. Setting the Stage – Background Context
3. Web poll
4. Panel discussion – Dr. Kassia Johnson, Corrine Bridger and Dr. Mary Bartram
5. Q & A
6. Resources
7. Thank You & Closing

Setting the Stage

Overview of the Policy Brief



Background context

- Based on a brief out of a larger series on populations affected by mental health and substance use issues and COVID-19
- Worked in collaboration with a small group of expert advisors, including: Leanne Boyd, Dr. Robert Whitley, Miranda Andrews, Dr. Doris Payer, Dr. Daphne Korczak, Dr. Robin Williams
- In a second round of feedback, engaged Public Health Agency of Canada, and the Canadian Academy of Child and Adolescent Psychiatry



About the Issue

- Global health emergencies like COVID-19 can have serious impacts on the mental health of parents, children and families
- Lockdowns and quarantines have led to social isolation, disruptions to childcare and schooling, financial worries, loss of employment, housing insecurity, and increased spousal/family conflict
- The increased stress placed on parents directly affects the mental health, well-being and social emotional development of infants and children

 Key Fact



40% of Ontario parents reported behavioural-emotional challenges in their children



Rates of depression increased from **9 to 42%** among mothers of infants and children (aged 18 months to 8 years)



61% of parents were very or extremely concerned about managing their child's behaviour, anxiety, emotions and stress



Licensed early childhood education centres, which are benchmarked to best practices and professional standards, were unavailable to **75-80%** of all families before COVID-19

CHALLENGES

Parents under pandemic-related stress can be less responsive to their children.

A child's social and emotional development depends on positive, high-quality relationships with their parents.¹ But when parents are under severe and prolonged stress created by the pandemic, their relationships with their children may break down. This can lead to parental alcohol and drug consumption, spousal conflict, parental separation, or abuse and neglect, all of which can affect early childhood mental health.

Mental health services are not equipped to handle increasing behavioural issues in young children.

Emotional-behavioural issues in children were on the rise before COVID-19 hit, as were precursors to child mental illness. Yet mental health services have struggled to keep pace due to long wait times, inadequate training of practitioners in early years mental health, and weak accountability mechanisms for public funding. The pandemic has only exacerbated both the rise in behavioural issues and the challenges of the mental health system.

The pandemic has further disrupted access to child care facilities and schools.

Early childhood education (ECE) improves parent-child relationships and resilience, and reduces developmental disparities in children of lower socio-economic status homes. Even before the pandemic, it was difficult for many families to access licensed ECE facilities. With ECE even less available now due to COVID-19, the risks to child development are being disproportionately felt across socio-economic, gendered, and racialized lines.

CONSIDERATIONS

Unprecedented events such as pandemics can affect brain development in early childhood.

The first six years of a child's life are crucial for brain development. Events such as economic downturns, recessions and natural disasters, including infectious disease outbreaks, can negatively affect this development, with chronic stress able to activate genetic markers implicated in mental illness. They can also disrupt parent-child relationships and interfere with how sensitive parents are to their children's needs.

Parental coping strategies are critical to healthy childhood development.

When parents are coping well with stress, they can model appropriate behaviours to their children. But when the stress and pressure are too much, it can worsen their coping strategies and trigger mental health symptoms, such as depressive episodes. It can also lead to detrimental behaviours, such as punitive parenting and maltreatment, increasing the risk of emotional and mental health problems in children.

Pandemic-related parental stress is multiplied by inequity.

People living with multiple disadvantages across race, class, education, disability, and immigration status have been hit the hardest by the pandemic, disproportionately affected by unemployment, stress, and the risk of illness and death. When combined with parental stress, the situation becomes significantly worse – and can further affect the mental health and brain development of infants and children.

Highlights of Policy Recommendations

- ✓ Prioritize interventions that will **reduce parental stress**
- ✓ Provide targeted mental health supports to **parents of very young children** and foster increased collaboration with and integration of mental health and developmental service providers
- ✓ Expand **community outreach and supports that foster social connection**, with direct outreach to parents who are reporting high levels of social isolation and substance use
- ✓ Invest in and expand access to universally available, high quality **culturally safe mental health and substance use services** for diverse parent and child populations
- ✓ Research the mental health and social support needs of **diverse parent groups**

Highlights of Policy Recommendations

- ✓ Ensure **virtual services** are culturally appropriate and available to people of all socio-economic backgrounds, while also continuing to provide access to in-person services as needed
- ✓ Continue to provide **income support measures for parents**, especially for those dealing with disproportionate economic impacts of the pandemic
- ✓ Expand **access to housing and shelter** for parents and families at risk of homelessness, precarious housing, and domestic violence
- ✓ Ensure all policies, programs, and research on early childhood mental health are guided by **increased attention to sex, gender, and other aspects of social identity**

Panel Introductions

Dr. Kassia Johnson, Developmental Paediatrician, Early Years Task Force Member, Physician Lead CPS Anti-Racism Strategy, Canadian Paediatric Society



Corrine Bridger, Parents for Children's Mental Health, Windsor Essex Chapter Leader, Founder of My Neurodivergent Child



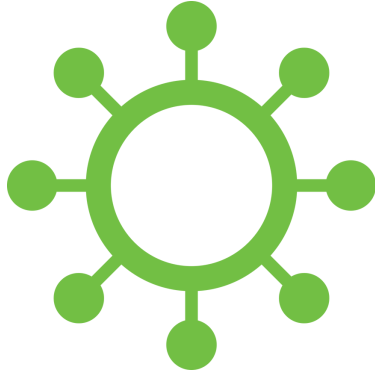
Panel Discussion

- Why is this work important to you? How are you involved in this work?
- How, and in what ways, do the highlights, issues articulated, and recommendations relate to your work and/or lived experience?
- What are some next steps you recommend to translate the policy recommendations into further action?

Questions or Thoughts?



Resources



MHCC's Mental Health Resource Hub to access information, resources, and tools related to mental health and wellness during COVID-19.

<https://www.mentalhealthcommission.ca/English/covid19>

Canadian Paediatric Society:

www.cps.ca

Parents for Children's Mental Health:

www.pcmh.ca

My Neurodivergent Child:

www.myndchild.com



THANK YOU!

MHCC's Research and Policy and CPS's Public Affairs Teams

Questions and Follow up:

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