

Mental Health Resource Guide

for the Gaspé Coast
and Magdalen Islands



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Land acknowledgement

The organizations responsible for the creation of this resource guide respectfully acknowledge that our services are located on the traditional territory of the Mi'gmaq people. We extend our gratitude to the Mi'gmaq Nation for their stewardship and care of this land since time immemorial.

Foreword

The stigma surrounding mental health and the use of mental health services remains a significant barrier for English-speaking youth, particularly in rural regions. This second edition of the guide builds on the foundation established in the first edition, developed in response to the formation of a regional Mental Health and Wellness Task Force in 2015. The Task Force aimed to address access to mental health and substance use services for English speakers in the region.

This guide not only seeks to support awareness of existing mental health and addiction services available in English but also emphasizes the unique mental health challenges faced by youth. It begins in Part I with strategies for developing and maintaining mental wellness. Parts II to IV cover various mental illnesses and addictions, with part V taking a specific look into youth mental health-related topics.

The guide concludes with a comprehensive list of resources to support those facing mental health challenges in the Gaspé and Magdalen Islands.

Please note that this information does not replace the advice of a qualified professional.

When we are physically ill, we have no hesitation in reaching out for help from medical professionals: why not do the same when we are struggling with emotional or mental issues?

If you need support, use the information included in this guide to find the services you require.

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Introduction

According to the World Health Organization, mental health is defined as “a state of well-being in which the individual realizes their abilities, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to his or her community.”

Following the wisdom of the Medicine Wheel, we achieve mental wellness when we feel balanced and grounded in our emotional, mental, spiritual, and physical lives. This helps us to effectively handle the normal stresses of life, establish healthy relationships, and make life choices that lead to happiness and fulfillment.

Mental wellness is important at every stage of life, from childhood and adolescence through adulthood, and the challenges to keeping our balance differ in each stage. The Canadian Mental Health Association (CMHA) tells us that reaching and maintaining a balance is a learning process. Sometimes, you may tip the balance too much in one direction and must find your footing again. Your personal balance will be unique, and your challenge will be to stay mentally healthy by keeping that balance.

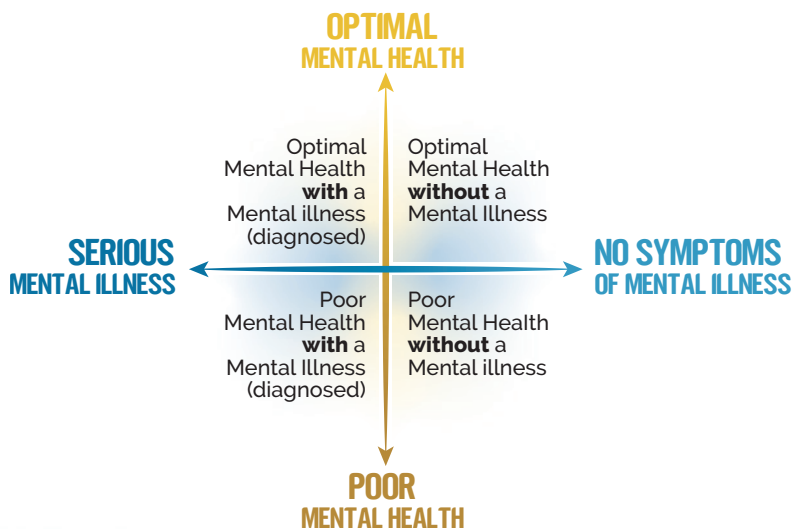
Mental illness and addictions are major challenges for Canadian society. According to the CMHA, in any given year, one out of five Canadians will experience a mental health problem or illness. In addition, people struggling with mental illness are twice as likely to have an addiction as those without. The social stigma surrounding mental health issues prevents many of those suffering from receiving help.

The English-speaking community of the Gaspé is one of the most vulnerable socio-economic groups in the country. This population is more likely to have low levels of education, a low income, and a much higher unemployment rate than Francophone Gaspesians. Linguistic and geographic isolation compound these socio-economic tendencies. These socioeconomic conditions can contribute to the development of mental health issues.

Creating Context

In the mid-1970s, the World Health Organization created a framework to help communities identify people at risk for various health issues. They listed a range of health conditions, from most favourable health at one end to premature death at the other. At the most favourable health end, people are at low risk of poor health, while at the premature death end of the range, people are at very high risk of poor health. Every community has individuals at these different places in the range from low risk to high risk. By identifying those at risk in terms of mental health or substance use issues, a community can get involved early and provide support to the individuals and their families. Each category of health risk requires a particular response that responds to the level of need.

The Mental Health Continuum



The stigma concerning mental health issues can be reduced by understanding those in need, finding the services required, and identifying and strengthening the support that communities and families can provide. Mental health and substance use touch us all in one way or another. Our goal is to build hope, so our communities become places where we all feel we belong.

What is Mental Health?

Mental health is not a question of age, social class, revenue, family, or the colour of one's skin. We are all, at times, faced with difficulties concerning our mental health. Mental health disorders can occur at any age and in various forms. Here are some examples:

- Attention deficit hyperactivity disorder
- Autism spectrum disorder
- Disruptive, impulse control, and conduct disorders
- Eating disorders
- Depressive disorders
- Anxiety disorders
- Dissociative disorders
- Substance use disorders

These disorders are not unique to a specific portion of the population. A whole range of factors may be involved; genetics, biological, and even personality and environmental aspects (family and social factors).

It is never too early to talk about mental health. Children, regardless of their age group, are also susceptible to mental health issues. Parents are responsible for the physical and psychological development of their children. With the instruction they provide, they aim to equip their children with emotional balance and help them develop positive self-esteem. However, even with the healthy support of parents and close family members, children may experience emotional and behavioural difficulties.

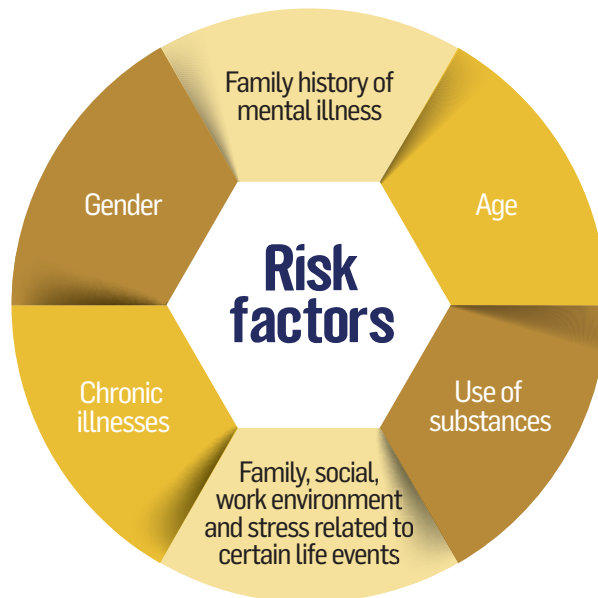
In Canada, approximately 1.2 million children between the ages of 9 and 19 struggle with mental illness, which represents about one in four youth.

Adolescence is also a period that will see the onset of certain vulnerabilities that may have been latent during childhood. This is when young people start taking risks; it is a normal stage of development. Because they are not yet psychologically mature, teenagers cannot always see the consequences of their actions. Thus, it is up to the adults around them to provide a supportive structure and guide adolescents in making good choices.

Most mental health issues among adults originate in childhood, adolescence, or early adulthood, but mental disorders can occur at any age.

The senior population is significantly increasing, and while most older individuals remain mentally healthy, the fact remains that seniors are somewhat more vulnerable in terms of physical and psychological health.

Factors Affecting Mental Health



Because every person's genetics, history, and culture are unique, these risk factors can affect people differently. For example, substance abuse may trigger the development of schizophrenia in one person, but depression in another. Having one or several of these risk factors does not necessarily result in mental health disorders. Some disorders manifest themselves in late adolescence or early adulthood, while others may appear between 40 and 60 years of age.

Part 1: Mental Wellness

Mental health is key to our well-being. We can't be truly healthy without it. It involves how we feel, think, act, and interact with the world around us. Mental health is about realizing our potential, coping with the normal stresses of life, and contributing to our community. It may be more helpful to think of good mental health as thriving. Good mental health isn't about avoiding problems or trying to achieve a 'perfect' life. It's about living well and feeling capable despite challenges. Mental well-being is bigger than the presence or absence of a mental illness. People who live with a mental illness can and do thrive, just as people without a mental illness may experience poor mental health.

Each of our paths to mental well-being will be unique. We all have our own goals, our own challenges, our own talents, and our own supports. But good mental health is in everyone's reach.

Mental health is important to everyone. Whether you are diagnosed with a mental illness, or you are a caregiver to someone who has an illness, or neither, mental health is just as important as physical health. By taking care of your mental health, you can live your life to its greatest potential; by maintaining it you will be able to enjoy the simple things in life that make you happy. It will allow you to manage the stressful things in life and allow you to enjoy what you love.

Mental illness is **NOT**:

- A weakness
- A phase
- Something someone does for attention
- The result of bad parenting
- Contagious like a cold
- Something that affects only adults
- A normal part of adolescence or of aging
- The cause or reason behind most violent attacks
- A figment of the imagination

Mental illness is something that should be taken seriously. It is not something to joke about, and it is not something that is "just in someone's head".

Source: AMI-Québec, www.amiquebec.org

MENTAL FITNESS IS APPARENT IN A PERSON'S:

Positive THOUGHTS:

"I CAN DO THIS!"
"I CAN MAKE A DIFFERENCE
IN MY COMMUNITY."

Positive ACTIONS:

"I CAN HELP OTHERS AND
BE GOOD TO MYSELF!"

Positive FEELINGS:

"I AM HOPEFUL."
"I AM GRATEFUL."
"I AM AT EASE."
"I AM CONTENT."

THESE ARE ELEMENTS THAT INFLUENCE MENTAL FITNESS:



Mental fitness plays a role in adopting a healthy lifestyle.

What can influence our mental health?

Stress

We all talk about stress, but we're not always clear about what it is. Stress comes from both the good and the bad things that happen to us. If we didn't feel any stress, we wouldn't be alive! Stress may feel overwhelming at times, but there are many strategies to help you take control.

Stress is the body's response to a real or perceived threat. That response is meant to get people ready for some kind of action to get them out of danger. But most of the threats people face today aren't something that they can fight or run away from. These threats are usually problems that people have to work through.

Some stress can be a good thing. It can motivate us to focus on a task or take action and solve a problem. In this situation, stress is manageable and even helpful.

When stress is unhelpful, people may feel overwhelmed or feel like they can't possibly fix the problem. In these cases, some people avoid dealing with the original problem altogether, which may make the problem—and stress—worse. It can be very hard to concentrate, make decisions, and feel confident when a person experiences a lot of stress. Many people experience physical sensations like sweating, a racing heart, or tense muscles. Over time, stress can also have a big impact on physical health. Sleep difficulties and headaches are common problems related to stress. People are also more likely to get sick when they're experiencing a lot of stress.

Unless otherwise indicated, information found on pages 11 to 39 has been provided by the Canadian Mental Health Association (www.cmha.ca).



Canadian Mental
Health Association
Mental health for all

Stress is a reaction to a situation—it isn't about the actual situation. We usually feel stressed when we think that the demands of the situation are greater than our resources to deal with that situation. For example, someone who feels comfortable speaking in public may not worry about giving a presentation, while someone who isn't confident in their skills may feel a lot of stress about an upcoming presentation. Common sources of stress may include major life events, like moving or changing jobs. Long-term worries, like a long-term illness or parenting, can also feel stressful. Even daily hassles like dealing with traffic can be a source of stress.

WHAT CAN I DO ABOUT IT?

Taking action is the first step. Ignoring the effects of stress can lead to other mental health problems.

There is no one right way to deal with stress. The tips below are common strategies that are helpful for many people. Try them out and see what works best for you. Remember to look at both short-term and long-term solutions when you're dealing with stress.

- **Identify the problem.**

Is your job, school, a relationship with someone, or worries about money causing stress? Are unimportant, surface problems hiding deeper problems? Once you know what the real problem is, you can do something about it.

- **Solve problems as they come up.**

What can you do, and what are the possible outcomes? Would that be better or worse than doing nothing? Remember, sometimes solving a problem means doing the best you can—even if it isn't perfect—or asking for help. Once you've decided on a solution, divide the steps into manageable pieces and work on one piece at a time. Improving your problem-solving skills is a long-term strategy that can help you feel like you're in control again.

- **Talk about your problems.**

You may find it helpful to talk about your stress. Loved ones may not realize that you're having a hard time. Once they understand, they may be able to help in two different ways. First, they can just listen—simply expressing your feelings can help a lot. Second, they may have ideas to help you solve or deal with your problems. If you need to talk with someone outside your own circle of loved ones, your family doctor may be able to refer you to a counsellor, or you may have access to one through your school, workplace, or faith community.

- **Simplify your life.**

Stress can come up when there are too many things going on. Learning to say no is a real skill that takes practice. Try to look for ways to make your to-do list more manageable.

- **Learn helpful thinking strategies.**

The way you think about situations affects the way you respond to them. Unhelpful thoughts, such as believing that everything must be perfect or expecting the worst possible outcome, can make problems seem bigger than they are.

- **Learn about stress management.**

There are many useful books, websites, and courses to help you cope with stress. There are also counsellors who specialize in stress. There may be stress management courses and workshops available through your community centre, workplace, or school.

- **Start on the inside.**

Practices like yoga, meditation, mindfulness, prayer, or breathing exercises can help you quiet your mind and look at problems from a calmer, more balanced point of view. With time, these practices can help you manage your response to stressful situations as they come up.

- **Get active.**

Physical activity can be a great way to reduce stress and improve your mood. Activity could be anything from taking up a new sport to walking. The most important part is that it gets you moving, and you enjoy it—it shouldn't feel like a chore. If you experience barriers to physical activity, try talking to your doctor or care team for ideas.

- **Do something you enjoy.**

Physical activity can be a great way to reduce stress and improve your mood. Activity could be anything from taking up a new sport to walking. The most important part is that it gets you moving, and you enjoy it—it shouldn't feel like a chore. If you experience barriers to physical activity, try talking to your doctor or care team for ideas.

CAN I PREVENT STRESS?

Stress is part of being human—no one can eliminate all stress from their life or prevent stress from ever happening in the future. The goal of stress management is to bounce back from problems or challenges and maintain wellness. All of the above strategies can help you take control of stress, so it doesn't control you in the future. Remember to practise them often, even when you're not feeling stressed. That way, you'll know exactly what works for you. It's also much easier to deal with difficulties when you're in control and know that you can deal with whatever comes up.



Anger

We all feel angry sometimes. Most of the time, we can deal with feelings of anger or irritability quickly. We may resolve the situation or look at the problem from a different perspective. However, anger can cause problems in our lives and the lives of those around us. Learn more about recognizing problem anger and taking action.

WHAT IS ANGER

Anger is an emotion that tells us when something may be wrong. For example, we may feel angry when something is beyond our control or feels unfair, when we can't reach a goal, or when someone is hurt or threatened. We can also feel angry when we are under too much stress. Anger can involve a wide range of feelings. We may be a little annoyed over a minor incident, like being stuck in traffic or missing our bus. More serious problems, like getting hurt or seeing someone else get hurt, may cause strong feelings like rage. Sometimes, we just feel angry for no reason.

Anger may be a problem for you when it's:

- Much stronger than you'd expect based on the situation
- Very frequent, to the point that you can't enjoy things anymore
- Caused by something that happened a long time ago
- Making you act violently towards yourself, someone else, or someone's property
- Interfering with your ability to do your job
- Hurting your relationships with loved ones
- Affecting your physical health

WHAT CAN I DO ABOUT IT?

Anger is a normal reaction to some situations. Anger can also be helpful when it matches the situation and motivates people to take action or work towards a goal. However, anger that's dealt with in unhealthy ways can create problems and affect your well-being. Fortunately, there are some things you can do to deal with your anger.

IMMEDIATE STRATEGIES

These strategies won't solve the problem. Instead, they can help put you back in control so you can find a productive way to deal with the problem. They may also be useful if you find yourself saying or doing things in anger that you regret later.

- Leave the situation that's making you angry, if possible.
- Count to 10.
- Repeat calming phrases such as *"Take it easy"* or *"Will this matter in six months?"*
- Breathe deeply. Many people, especially adults, breathe from their chest, which doesn't give the benefits of a deep breath. Try to breathe deep into your stomach. You're on the right track if your stomach goes out first. It may seem simple, but taking deep breaths can help calm your mind, slow your heart, and even lower blood pressure.
- Try to shift your attention to something more pleasant or relaxing. This can be very helpful for minor annoyances that you can't control.

SHORT-TERM STRATEGIES

When you are calmer, these are strategies to help you look at your feelings around a particular situation. They don't take a lot of time, but they can make a big difference.

- Acknowledge that you are angry. Angry feelings don't go away if you bottle them up and avoid dealing with them.
- Consider whether your reaction matches the situation. Ask yourself, "*What would I think of someone else if I saw them getting angry in this situation?*" or, "*Is this situation as bad as I am making it out to be?*" You can also ask someone you trust for their perspective—they may help you look at the problem in a more balanced way.
- Look at your thoughts. Sometimes the way you think can fuel anger—for example, assuming that another person is intentionally trying to hurt or annoy you in a situation when that may not be true.
- Identify the source of your anger. If the actions or words of another person are hurting you, try to deal with them directly, peacefully, and productively. Assertiveness skills can be a great way to do this.
- Look for humour in the situation—sometimes it's easy to take minor problems too seriously.

LONGER-TERM SOLUTIONS

These strategies take more time and effort, but they can help you cope with anger as it comes up in many different situations. The goal is to change the way you react to anger so it doesn't cause problems in the first place.

- Learn what triggers your anger. Some people are triggered by other people, such as a boss, friend, or family member. Certain emotions, such as feeling controlled, ashamed or guilty, can also trigger anger in some people.
- Identify your early warning signs so you can take action before your anger turns into full-blown rage. Common early warning signs include a pounding heart, tight chest or jaw, feeling resentful or irritated, or feeling like lashing out.

- Talk to someone you trust who may be able to see things more clearly than you do. Remember that anger can tell us we need to solve a problem. Another person can help you practise identifying the real problem, brainstorming solutions, and testing solutions out.
- If your anger is caused by something beyond your control, such as a job loss, learn how others have dealt with a similar problem successfully and try their strategies.
- Learn and practise skills like healthy thinking, problem solving, and stress management. All of these can help manage anger.
- Many people find physical activity very helpful. Try going for a walk, playing your favourite sport, or cleaning the house.
- Make sure you eat well and get enough sleep. We often lose patience and get irritated more easily when we're tired or hungry.
- Learn mindfulness practices like meditation. Mindfulness teaches you how to look at your thoughts in the present moment without judgment. It may also help teach you to tolerate angry feelings without pushing them away.
- Learn more about assertiveness. Anger can persist when we avoid talking directly to someone about something that has made us angry. Assertiveness is a way of telling others what you feel or what you need while respecting their feelings or needs.
- If you feel easily frustrated when people don't act the way you want them to, remember that you cannot control how other people behave. You can only control how you choose to react to those behaviours.

Anger and irritability can sometimes be signs of depression or anxiety. If anger continues to cause problems or you notice that anger occurs with other symptoms, it's a good idea to talk with a doctor or mental health professional.



Grief

Loss is one of life's most stressful events. It takes time to heal, and everyone responds differently. We may need help to cope with the changes in our lives. Grief is part of being human, but that doesn't mean we have to go through the journey alone.

WHAT IS GRIEF?

Grief (also called bereavement) is the experience of loss. Many people associate grief with the death of an important person or pet. However, people experience grief after any important loss that affects their life, such as the loss of a job or relationship. Grief after diagnosis of an illness or other health problems is also common.

People experience grief in many ways—and experience many different thoughts or feelings during the journey. People may feel shocked, sad, angry, scared, or anxious. Some feel numb or have a hard time feeling emotions at all. At times, many people even feel relief or peace after a loss.

Grief is complicated. There is no one way to experience grief. Feelings, thoughts, reactions, and challenges related to grief are very personal. Some people have thoughts or feelings that seem at odds with each other. For example, someone may feel very depressed about their loss but accept the loss at the same time. Many people find that the intensity of their grief changes a lot over time. Holidays can often bring up strong feelings, for example. People work through grief in their own time and on their own path.

WHAT CAN I DO ABOUT IT?

People express or talk about grief in different ways, but we all feel grief after a loss. In most cases, people navigate through grief with help from loved ones and other supporters and, in time, go back to their daily life.

Some people need extra help from a mental health professional. Grief can be more complicated when the loss is sudden or unexpected, frightening, the result of an accident or disaster, or the result of a crime. Other factors also play a role. A person's experience of mental illness, lack of personal and social supports, and difficult personal relationships can also affect the impact of grief. A type of counselling called grief counselling supports people through difficulties around grief.

Here are some tips to help you through your journey:

- Connect with caring and supportive people. This might include loved ones, neighbours, and co-workers. It could also include a bereavement support group or community organization.
- Give yourself enough time. Everyone reacts differently to a loss and there is no normal grieving period.
- Let yourself feel sadness, anger, or whatever you need to feel. Find healthy ways to share your feelings and express yourself, such as talking with friends or writing in a journal.
- Recognize that your life has changed. You may feel less engaged with work or relationships for some time. This is a natural part of loss and grief.
- Reach out for help. Loved ones may want to give you privacy and may not feel comfortable asking you how you're doing, so don't be afraid to ask for their support.
- Holidays and other important days can be very hard. It may be helpful to plan ahead and think about new traditions or celebrations that support healing.
- Take care of your physical health. Be aware of any physical signs of stress or illness, and speak with your doctor if you feel that your grief is affecting your health.
- Offer support to other loved ones who are grieving. Reaching out to others may be helpful in your own journey.
- Be honest with young people about what has happened and about how you feel, and encourage them to share their feelings, too.

- Work through difficult feelings like bitterness and blame. These feelings can make it harder to move forward in your life.
- Make a new beginning. As the feelings of grief become less intense, return to interests and activities you may have dropped and think about trying something new.
- Think about waiting before making major life decisions. You may feel differently, as your feelings of grief lose their intensity, and the changes may add to the stress you're already experiencing.

Part 2: Mental Health Challenges

What Are Mental Illnesses?

Mental illnesses are health problems that affect the way we think about ourselves, relate to others, and interact with the world around us. They affect our thoughts, feelings, and behaviours. Mental illnesses can disrupt a person's life or create challenges, but with the right supports, a person can get back on a path to recovery and wellness.

It's important to understand that there are many different types of mental illness that affect people in different ways. Within each mental illness, people may have very different symptoms and challenges. However, symptoms are just one piece. Access to services, support from loved ones, and the ability to participate in communities play a big part in the way people experience mental illnesses. Culture, background, and personal beliefs also shape the way people understand mental illnesses.

Some people don't see the name of a diagnosis as an important part of their journey, while others prefer the medical terms to describe the illness. No matter how people talk about their experiences, they will likely need to use medical terms if they seek help in the health system. This is just how the system works right now—but it isn't the only way to talk about wellness.

What do you think of when you hear that someone is experiencing a mental illness? Some people feel concern, fear, or confusion. Some even avoid those who experience mental illnesses. But mental illnesses are just like any other illness: everyone deserves care, help, and support.

Myths About Mental Illness

Mental illnesses affect everyone in some way. We all likely know someone who has experienced a mental illness at some point. Yet there are still many hurtful attitudes around mental illnesses that fuel stigma and discrimination and make it harder to reach out for help. It's time to look at the facts. Here are 10 common myths about mental illnesses.



Myth #1

Mental illnesses aren't real illnesses.


Fact The words we use to describe mental illnesses have changed greatly over time. What hasn't changed is the fact that mental illnesses are not the regular ups and downs of life. Mental illnesses create distress, don't go away on their own, and are real health problems with effective treatments. When someone breaks their arm, we wouldn't expect them to just "get over it." Nor would we blame them if they needed a cast, sling, or other help in their daily life while they recovered.



Myth #2

Mental illnesses will never affect me.


Fact All of us will be affected by mental illnesses. Researchers estimate that as many as one in five Canadians will experience a mental health problem or illness in any given year. You may not experience a mental illness yourself, but a family member, friend, or co-worker will likely experience challenges.



Myth #3

Mental illnesses are just an excuse for poor behaviour.


Fact Some people who experience mental illnesses may indeed act in ways that are unexpected or seem strange to others. We need to remember that the illness, not the person, is behind these behaviours. No one chooses to experience a mental illness. People who experience a change in their behaviour due to a mental illness may feel extremely embarrassed or ashamed around others. It's also true that people with a history of mental illness are like anyone else: they may make poor choices or do something unexpected for reasons unrelated to the symptoms of their illness.



Myth #4

Bad parenting causes mental illnesses.

Fact No one factor can cause mental illnesses. Mental illnesses are complicated conditions that arise from a combination of genetics, biology, environment, and life experiences. Family members and loved ones do have a big role in support and recovery.



Myth #5

People with mental illnesses are violent and dangerous.

Fact Some people try to predict violence, so they know what to avoid. However, the causes of violence are complicated. Researchers agree that mental illnesses are not a good predictor of violence. If we look at mental illnesses on their own, people who experience a mental illness are no more violent than people without a mental illness. Excluding people from communities is linked to violence. People with mental illnesses are often among those who are excluded. It's also important to note that people who experience mental illnesses are much more likely to be victims of violence than to be violent.



Myth #6

People don't recover from mental illnesses.


Fact People can and do recover from mental illnesses. Today, many kinds of treatments, services, and support can help. No one should expect to feel unwell forever. The fact is, people who experience mental illnesses can and do lead productive, engaged lives. They work, volunteer, or contribute their unique skills and abilities to their communities. Even when people experience mental illnesses that last for a long time, they can learn how to manage their symptoms so they can get back to their goals. If someone continues to experience many challenges, it may be a sign that different approaches or supports are needed.



Myth #7

People who experience mental illnesses are weak and can't handle stress.

Fact Stress impacts well-being, but this is true for everyone. People who experience mental illnesses may be better at managing stress than people who haven't experienced mental illnesses. Many people who experience mental illnesses learn skills like stress management and problem-solving so they can take care of stress before it affects their well-being. Taking care of yourself and asking for help when you need it are signs of strength, not weakness.



Myth #8

People who experience mental illnesses can't work.


Fact Whether you realize it or not, workplaces are filled with people who have experienced mental illnesses. Mental illness doesn't mean that someone is no longer capable of working. Some people benefit from changes at work to support their goals, but many people work with little support from their employers. Most people who experience serious mental illnesses want to work but face systemic barriers to finding and keeping meaningful employment.



Myth #9

Kids can't have a mental illness like depression. Those are adult problems.

Fact Even children can experience mental illnesses. Many mental illnesses first appear when a person is young. Mental illnesses may look different in children than in adults, but they are a real concern. Mental illnesses can impact the way young people learn and build skills, which can lead to challenges in the future. Unfortunately, many children don't receive the help they need.



Myth #10

Everyone gets depressed as they grow older. It's just part of the aging process.

Fact Depression is never an inevitable part of aging. Older adults may have a greater risk of depression because they experience so many changes in roles and social networks. If an older adult experiences depression, they need the same support as anyone else.

These myths—and many more—exclude people with mental illnesses from our communities and create barriers to well-being. If we want to reduce the impact of mental illnesses on our communities, we need to learn the facts and start with our own assumptions and behaviours.

Common Mental Illnesses

Health professionals divide mental illnesses into several different groups based on signs or symptoms. Common groups of mental illnesses are listed on the following pages:



Anxiety disorders are all related to anxiety. They may include excessive and uncontrollable worry, strong fears around everyday things or situations, unwanted thoughts, panic attacks, or fears around a past scary situation. Anxiety disorders are the most common mental illnesses, and they can create barriers in people's lives. Panic disorder and phobias are examples of anxiety disorders.

We all feel nervous or worried at times. This anxiety can be a helpful feeling when it motivates us or warns us of danger. An anxiety disorder, on the other hand, causes unexpected or unhelpful anxiety that seriously impacts our lives, including how we think, feel, and act.

Anxiety disorders are mental illnesses. The different types of anxiety disorders include:

PHOBIAS

A phobia is an intense fear around a specific thing like an object, animal, or situation. Most of us are scared of something, but these feelings don't disrupt our lives. With phobias, people change the way they live to avoid the feared object or situation.

PANIC DISORDERS

Panic disorder involves repeated and unexpected panic attacks. A panic attack is a feeling of sudden and intense fear that lasts for a short period of time. It causes a lot of physical feelings like a racing heart, shortness of breath, or nausea. Panic attacks can be a normal reaction to a stressful situation, or a part of other anxiety disorders. With panic disorder, panic attacks seem to happen for

no reason. People who experience panic disorder fear more panic attacks and may worry that something bad will happen as a result of the panic attack. Some people change their routines to avoid triggering more panic attacks.

AGORAPHOBIA

Agoraphobia is fear of being in a situation where a person can't escape or find help if they experience a panic attack or other feelings of anxiety. A person with agoraphobia may avoid public places or even avoid leaving their homes.

SOCIAL ANXIETY DISORDER

Social anxiety disorder involves intense fear of being embarrassed or evaluated negatively by others. As a result, people avoid social situations. This is more than shyness. It can have a big impact on work or school performance and relationships.

GENERALIZED ANXIETY DISORDER

Generalized anxiety disorder is excessive worry around a number of everyday problems for more than six months. This anxiety is often far greater than expected—for example, intense anxiety over a minor concern. Many people experience physical symptoms too, including muscle tension and sleep problems.

OBSESSIVE-COMPULSIVE DISORDER (OCD)

Obsessive-compulsive disorder is made up of unwanted thoughts, images, or urges that cause anxiety (obsessions) or repeated actions meant to reduce that anxiety (compulsions). Obsessions or compulsions usually take a lot of time and cause a lot of distress.

POST-TRAUMATIC STRESS DISORDER (PTSD)

Post-traumatic stress disorder can occur after a very scary or traumatic event, such as abuse, an accident, or a natural disaster. Symptoms of PTSD include reliving the event through nightmares or flashbacks, avoiding reminders of the traumatic event, and feeling unsafe in the world, even when a person isn't in danger.

WHO DO THEY AFFECT?

Anxiety disorders can affect anyone at any age, and they are the most common mental health problem. Sometimes, anxiety disorders are triggered by a specific event or stressful life experience. Anxiety disorders may be more likely to occur when we have certain ways of looking at things (like believing that everything must be perfect) or learning unhelpful coping strategies from others. But sometimes there just doesn't seem to be a reason.

What can I do about them?

Many people who experience an anxiety disorder think that they should just be able to "get over it" on their own. Others may need time to recognize how deeply anxiety affects their life. However, anxiety disorders are real illnesses that affect a person's well-being. It's important to talk to a doctor about mental health concerns. Some physical health conditions cause symptoms of anxiety. A doctor will look at all possible causes of anxiety.

Normal, expected anxiety is part of being human. Treatment should look at reducing unhelpful coping strategies and building healthy behaviours that help you better manage anxiety.

Each anxiety disorder has its own specific treatments and goals, but most include some combination of the following strategies:

COUNSELLING

An effective form of counselling for anxiety is cognitive-behavioural therapy (or CBT). CBT teaches you how your thoughts, feelings, and behaviours work together. A goal of CBT is to identify and change the unhelpful patterns of thinking that feed anxious thoughts. CBT can help you identify problem behaviours and replace them with helpful strategies. It's often the first treatment to try for mild or moderate problems with anxiety.

MEDICATION

Some people also find antianxiety or antidepressant medication helpful. Medication can help with the physical feelings of anxiety. It may also make anxious thoughts less frequent or intense, so it can be easier to learn helpful coping strategies. Some people take medication until their anxiety is controlled enough to try therapies like CBT.

SUPPORT GROUPS

Support groups—in person or online—may be a good place to share your experiences, learn from others, and connect with people who understand.

SELF-HELP STRATEGIES

Many different skills can help people manage anxiety, such as stress management, problem-solving, and relaxation. Mindfulness—developing awareness of the present moment without judgment—may also help. Practices that support wellness, such as eating well, exercising, having fun, and connecting with others, are also important.



Mood disorders

Mood disorders all affect a person's mood—the way they feel. This can affect every part of a person's life. When someone experiences a mood disorder, they may feel sad, hopeless, tired, or numb for long periods of time. At times, some people experience an unusually 'high' mood and feel powerful and energetic, but this can also create problems. Depression and bipolar disorder are examples of mood disorders.

DEPRESSION AND BIPOLAR DISORDERS

Mood disorders are conditions that cause people to feel intense, prolonged emotions that negatively affect their mental well-being, physical health, relationships and behaviour. In addition to feelings of depression, someone with bipolar disorder also has episodes of mania. Symptoms of mania may include extreme optimism, euphoria and feelings of grandeur; rapid, racing thoughts and hyperactivity; a decreased need for sleep; increased irritability; impulsiveness and possibly reckless behaviour.

We all experience changes in our mood. Sometimes we feel energetic, full of ideas, or irritable, and other times we feel sad or down. But these moods usually don't last long, and we can go about our daily lives. Depression and bipolar disorder are two mental illnesses that change the way people feel and make it hard for them to go about their daily routine.

WHAT IS DEPRESSION?

Depression is a mental illness that affects a person's mood—the way a person feels. Mood impacts the way people think about themselves, relate to others, and interact with the world around them. This is more than a 'bad day' or 'feeling blue.' Without supports like treatment, depression can last for a long time.

Signs of depression include feeling sad, worthless, hopeless, guilty, or anxious a lot of the time. Some feel irritable or angry. People lose interest in things they used to enjoy and may withdraw from others. Depression can make it hard to focus on tasks and remember information. It can be hard to concentrate, learn new things or make decisions. Depression can change the way people eat and sleep, and many people experience physical health problems.

Age and sex can also impact how people experience depression. Males often experience anger or irritability rather than sadness, which can make depression harder for others to see. Young people and older adults may experience lasting changes in mood that are mistakenly dismissed as a normal part of growing up or of aging.

WHAT IS BIPOLAR DISORDER?

Bipolar disorder is another mental illness that affects mood. With bipolar disorder, people experience episodes of depression and episodes of mania. An episode of depression in bipolar disorder is the same as other types of depression. Mania is an unusually high mood for the person. People may feel like their thoughts are racing and may feel hyperactive. They may feel unrealistically confident, happy, or very powerful. Many people don't sleep much when they experience mania. They may act without thinking and do risky things they wouldn't normally do.

People usually experience periods of wellness between episodes of depression or mania. Episodes of depression or mania generally last for a period of time, though a small number of people may experience episodes that change quickly. The frequency and type of episode can also vary greatly. For example, some people experience many episodes of depression with only a few episodes of mania or wellness. Others experience long periods of wellness with only a few episodes during their lifetime.

WHO DO THEY AFFECT?

Depression and bipolar disorder can affect anyone. They are likely caused by many different factors that work together, including family history, biology, the environment, life experiences, personality, and physical health problems.

What can I do about it?

Depression and bipolar disorder can be very challenging. Many people blame themselves for their feelings or wonder why they can't just 'get over it.' Some feel like they have to live with difficult feelings because they worry about what others will think if they ask for help. The symptoms of the illnesses themselves can make it hard to seek help. Depression and bipolar disorder are real illnesses, and they deserve care and support. People can and do recover.

COUNSELLING AND SUPPORT

A type of counselling called cognitive-behavioural therapy (or CBT) is common for mood disorders. It teaches you how your thoughts, feelings, and behaviours work together. It also teaches important skills like solving problems, managing stress, realistic thinking, and relaxation. CBT is often the first treatment to try if you experience mild or moderate problems with depression.

Taking care of your well-being is especially important if you're working through recovery, but this can be easy to overlook. Regular exercise can boost your mood and help you manage stress. Eating well and learning or maintaining healthy sleep habits are also very helpful. It's always important to spend time on activities you enjoy, find relaxation strategies that work for you, and spend time with loved ones.

MEDICATIONS

Antidepressants are the main kind of medication used to treat depression. There are many different classes and types of antidepressants, and they each work a little differently. However, antidepressants may not be the best option for bipolar disorder. Instead, bipolar disorder may be treated with mood stabilizers. While medication can help with some symptoms, they can't get rid of the thinking patterns or beliefs that can drive mood problems. Most people use a combination of medication and counselling.

RELAPSE PREVENTION

A big part of recovery is learning to recognize relapse. A relapse is when symptoms come back. Seeking help as early as possible can do a lot to reduce problems or challenges. Relapse prevention plans—prepared when you're well—often map out early warning signs, list treatment strategies that have worked in the past, and assign tasks to key people who can support you in your recovery. Your plan may be a formal arrangement with your care team or an informal plan with loved ones.



Other disorders

EATING DISORDERS

Eating disorders really aren't about food. They are complicated illnesses that are often a way to cope with difficult problems or regain a sense of control. Eating disorders may include seriously restricting how much food a person eats, bingeing, or purging food. Anorexia nervosa and bulimia nervosa are examples of eating disorders.

PSYCHOTIC DISORDERS

Psychosis is a health problem that affects how people understand what is real and what isn't real. People may sense things that aren't real or strongly believe things that can't be real. Schizophrenia is one example of a psychotic disorder.

PERSONALITY DISORDERS

Personality disorders are patterns of thoughts, feelings, and behaviours that may last for a long time and create challenges in a person's life. People who experience personality disorders may have difficulties developing healthy and satisfying relationships with others, managing their emotions well, avoiding harmful behaviour and working toward important life goals. Personality disorders can affect the way people understand and view themselves and others and cope with problems. Borderline personality disorder is one example of a personality disorder.

CHILDHOOD DISORDERS

This is a large group of mental illnesses that start to affect people when they are young, though some people are not diagnosed until they're older. One example of a disorder in this group is attention-deficit/hyperactivity disorder (or ADHD), which affects a person's ability to focus, complete tasks, plan or organize, sit still, or think through actions.

DEMENTIA

Dementia refers to a group of symptoms. It can be caused by a disease that mainly affects nerve cells in the brain or can be associated with many other medical conditions. Dementia impacts a person's memory, language abilities, concentration, organization skills, mood, and behaviours. Alzheimer's disease is one type of dementia.

Part 3: Addictions

Substance use and addictions

SUBSTANCE USE

Many people use substances such as drugs or alcohol to relax, have fun, experiment, or cope with stressors; however, for some people the use of substances or engaging in certain behaviours can become problematic and may lead to dependence.

Addiction is a complex process where problematic patterns of substance use or behaviours can interfere with a person's life.

Addictions can be either substance related (such as the problematic use of alcohol or cocaine) or process-related, also known as behavioural addictions (such as gambling or internet addiction).

UNDERSTANDING SUBSTANCE USE

Many people think of substance use problems only in terms of addiction, a dependence on alcohol or other drugs where someone needs to continually use the substance to feel normal. Substance use is bigger than that. Using substances like alcohol and other drugs can have an impact on mental health, and mental health can have an impact on substance use. When substance use problems are more serious; it may look like someone is simply powerless to do anything about their situation. Research shows that this isn't the case. We all benefit when we look at our substance use, make changes to reduce risks, and seek extra help when it's needed.

LOOKING AT THE BIGGER PICTURE

People use substances like alcohol or other drugs for many different reasons. While it's easy to think of people who have serious consequences as a result of alcohol or drug use—maybe even unemployment or homelessness—many people use substances without experiencing serious harm. Why is it that some people have problems with alcohol or drugs, while others don't experience harm?

How and why people use alcohol and drugs matters. Every person has their own life experiences, personality, and family history. We also have unique problem-solving skills, support systems, and goals. These are just some of the factors that influence how and why people might use alcohol or other drugs. For example, someone who has a hard time coping with stress might find that alcohol can help them ignore difficult feelings. Someone else might use a drug to find relief from symptoms of mental health problems or other illnesses. Another person might use a drug out of curiosity. And someone may never use a drug because other people they value don't use that drug.

All substance use is on a spectrum from helpful to harmful, and in some instances can be both. How and why people use alcohol or drugs can move them closer to helpful use or closer to harmful use.

IF YOU ARE CONCERNED ABOUT YOUR SUBSTANCE USE

The idea that you must hit rock bottom and experience serious consequences like losing your job or losing important relationships before you're ready for help isn't true. You can seek help or support any time you reflect on your own substance use and would like to make some changes. Some people may be able to deal with substance use problems on their own. Others may need some help, like a support group, psychotherapy or counselling, or medication.

If you're not sure where to start, try talking with your doctor or health care provider. They can help you look at different options that fit your needs and your wishes.

IF YOU ARE CONCERNED ABOUT SOMEONE ELSE'S SUBSTANCE USE

It can be difficult to watch someone you care about experience problems with substances like alcohol or other drugs. You may have some very real fears about their safety, or even your own safety.

Remember that change can rarely be forced onto others—in order to see the most benefit, they need to feel like they are part of the process. Forcing someone into treatment is not necessarily a helpful approach.

Recovery is a process that can take a lot of work and time. When someone you care about experiences problems with substance use, one of the most powerful things you can do is help your loved ones help themselves.

The Addicted Brain

Within the brain there are neurotransmitters and neuroreceptors, which are the mechanisms that stimulate the pleasure centres in humans. The use of drugs and alcohol triggers activity in the brain that creates a pleasurable sensation which can lead to a craving for that stimulation. Repeated attempts to create this pleasure by the use of chemicals lead to a tolerance to the drug and the need to increase the dosage to achieve the desired upon pleasure. The absence of the drug can make one's life seem boring and depressing. The brain will take a long period of time to recuperate to its original drug-free state when one quits their drug of choice. The craving to use again is a struggle many people may need help with to resolve over time.

Reference: Herman, M. & Roberto, M. (2015). The Addicted Brain: Understanding the Neurophysiological Mechanisms of Addictive Disorders. *Frontiers In Integrative Neuroscience* March 19. US National Library of Medicine.

Behavioural addictions

Some mental health conditions can lead to behavioural addictions. They can be a way of coping with other issues. It is important to know that these behavioural addictions can be just as serious as substance addictions.

They often develop because of some other underlying issue that needs treatment.



According to research, these behavioural (or urge-driven) disorders trigger the release of extra dopamine, which causes feelings of pleasure. However, over time, the brain can become reliant on the behaviour and the sense of reward. When the extra dopamine levels go down, depressive symptoms arise. So, to feel good again, there is a compelling urge to engage in the addictive behaviour again. This becomes a cycle.

There are some common signs and symptoms that are common to all behavioural addictions:

- Being preoccupied with the behaviour
- Unable to control the behaviour
- The behaviour becomes tolerated, so more and more are needed to get the same effect
- If the behaviour stops, then there is a feeling of withdrawal
- Depressive or anxious feelings when behaviour is stopped

Treatment for behaviour addictions can be a challenge. Unlike substance addictions (drug and alcohol), which can be avoided, behavioural addictions may still be part of the individual's life. For example, food cannot be avoided if someone has an addiction to overeating. This is why treatments for behavioural addictions focus mainly on rehabilitation and recovery and not avoidance.

Treatments can include:

- Individual or group counselling
- 2-step programs (similar to substance abuse treatment)
- Cognitive behavioural therapy
- Treatment facility

These treatment options will often work best when several methods are combined.

Part 4: Suicide

Suicide, when someone ends their life on purpose, is not a mental illness in itself. Not all people who die by suicide experience a mental illness. However, suicide may be linked to many different mental illnesses. It's important to take any talk or thoughts of suicide seriously and seek help.

It's a difficult topic to bring up. However, when someone talks about suicide or brings up concern for a loved one, it's important to take action and seek help quickly.

Experts in the field suggest that a suicidal person is feeling so much pain that they can see no other option. They feel that they are a burden to others, and in desperation see death as a way to escape their overwhelming pain and anguish. The suicidal state of mind has been described as constricted, filled with a sense of self-hatred, rejection, and hopelessness.

WHAT ARE THE WARNING SIGNS?

Major warning signs of suicide spell **IS PATH WARM**:

- I Ideation**: thinking about suicide
- S Substance use**: problems with drugs or alcohol
- P Purposelessness**: feeling like there is no purpose in life or reason for living
- A Anxiety**: feeling intense anxiety or feeling overwhelmed and unable to cope
- T Trapped**: feeling trapped or feeling like there is no way out of a situation
- H Hopelessness or Helplessness**: feeling no hope for the future, feeling like things will never get better
- W Withdrawal**: avoiding family, friends, or activities
- A Anger**: feeling unreasonable anger
- R Recklessness**: engaging in risky or harmful activities normally avoided
- M Mood change**: a significant change in mood

HOW CAN I REDUCE THE RISK OF SUICIDE?

Though not all suicides can be prevented, some strategies can help reduce the risk. All of these factors are linked to well-being. These strategies include:

- Seeking treatment, care and support for mental health concerns—and building a good relationship with a doctor or other health professionals
- Building social support networks, such as family, friends, a peer support or support group, or connections with a cultural or faith community
- Learning good coping skills to deal with problems and trusting in coping abilities
- When a person receives treatment for a mental illness, it can still take time for thoughts of suicide to become manageable and stop. Good treatment is very important, but it may not immediately eliminate the risk of suicide. It's important to stay connected with a care team, monitor for thoughts of suicide and seek extra help if it's needed. Community-based programs that help people manage stress or other daily challenges can also be very helpful.

WHAT CAN I DO IF I EXPERIENCE THOUGHTS OF SUICIDE?

Thoughts of suicide are distressing. It's important to talk about your experiences with your doctor, mental health care team, or any other person you trust. They can help you learn skills to cope and connect you to useful groups or resources. Some people find it helpful to schedule frequent appointments with care providers or request phone support. Other things that you can do include:

Calling a crisis telephone support line:

1-866-APPELLE (277-3553)

Connecting with **family, friends**, or a **support group**.

If you're in crisis and aren't sure what to do, you can call **9-1-1** or go to your **local emergency room**.

Part 5: Youth and Mental Health

Youth Mental Health

SURVEY RESULTS REPORT*

There are 225,590 English-speaking Quebec youth between the ages of 15-29 across the province. They represent 20.5% of the larger English-speaking population of Quebec.

Many English-speaking youth feel there is a dramatic lack of adequate mental health services and support in English in their region.

90%

experienced one or more of the following within the previous two weeks:

Low mood, sadness, feeling blah, down, depressed, can't be bothered

Feeling worried, nervous, panicky, tense, keyed up

Feeling worthless, hopeless, letting people down, not being a good person



Of these respondents over

50% experienced these feelings "all of the time" or "most of the time"

3% experienced these feelings "hardly ever."

32% their financial struggles negatively impacted their mental health.

77%

not very or not comfortable at all either speaking French and feeling understood or understanding spoken/written French.



Negative coping strategies

65%



are concerned about how much time they spend on their phones.



35%

used one or more substances to feel well, answering that they used this substance "somewhat often," "often," or "extremely often" [69% Cannabis]

37%

have never reached out for help. When asked why, these respondents answered the following:

71%

do not know what services are out there



83%

felt that there should be more mental health services tailored to people who are financially struggling in their region.

Findings by region Gaspésie-les-Îles (32 respondents)

44% would or do feel judged by people around them for seeking out help to support their mental well-being. (versus 28% overall respondents)

41% consume substances to feel well. (versus 35% overall respondents)

27% struggling financially and it affects their mental health. (versus 32% overall respondents)

* SOURCE: Nigam, S. (2022, September 15). Youth pulse check: Survey results report. CHSSN. <http://bit.ly/3YsG7nm>



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Youth Mental Health: Signs and Symptoms

About 70% of mental health challenges have their onset in childhood or youth.

This is why early identification and intervention are so important and can support improvements in school and better health outcomes in life.

SIGNS OF A MENTAL ILLNESS

Youth will exhibit different moods, thoughts and behaviours at various times that can be part of normal childhood development. These include:

- getting significantly lower marks in school
- avoiding friends and family
- having frequent outbursts of anger
- changes to sleeping or eating habits
- acting out or rebelling against authority
- drinking a lot and/or using drugs
- not doing the things he or she used to enjoy
- constantly worrying
- experiencing frequent mood swings
- not concerned with his or her appearance
- obsessed with his or her weight
- lacking energy or motivation
- increased risk-taking behaviour
- feeling very down

But these characteristics and behaviours may be signs of an underlying mental health concern or disorder if they:

- are intense
- persist over long periods
- are inappropriate for the age
- interfere with life

MENTAL HEALTH DISORDERS

Some of the most common disorders among youth include:

- anxiety
- attention-deficit/hyperactivity disorder (ADHD) — also known as attention deficit disorder (ADD)
- depression and other mood disorders
- schizophrenia
- eating disorders

When youth have a physical illness or injury, parents seek professional help and get them the medical attention they need. When children and youth have symptoms of a mental illness, they need their parents to respond in the same way.

Most mental health issues of adulthood have their beginnings in these earlier years. Remember, it's important to pay attention to early signs and symptoms and get help soon.

What parents can do:

Listen to your instincts if you are worried about your child. Collect as much information as you can. You are probably in the best position to know if your child's behaviour requires further attention. Arrange to meet with a well-trained and trusted professional.

It can be confusing trying to tell the difference between symptoms of mental illness and normal challenges that all kids experience from time to time. As parents, you can use observable behaviours to help decide what action you need to take by:

- circling the behaviours from the list that concern you (especially those lasting a few weeks or more)
- speak to your child regarding your main concerns (no more than 3 and keep it brief)
- listen to their response for an uninterrupted 3 minutes if you can
- let your child know you will help work out difficult issues together

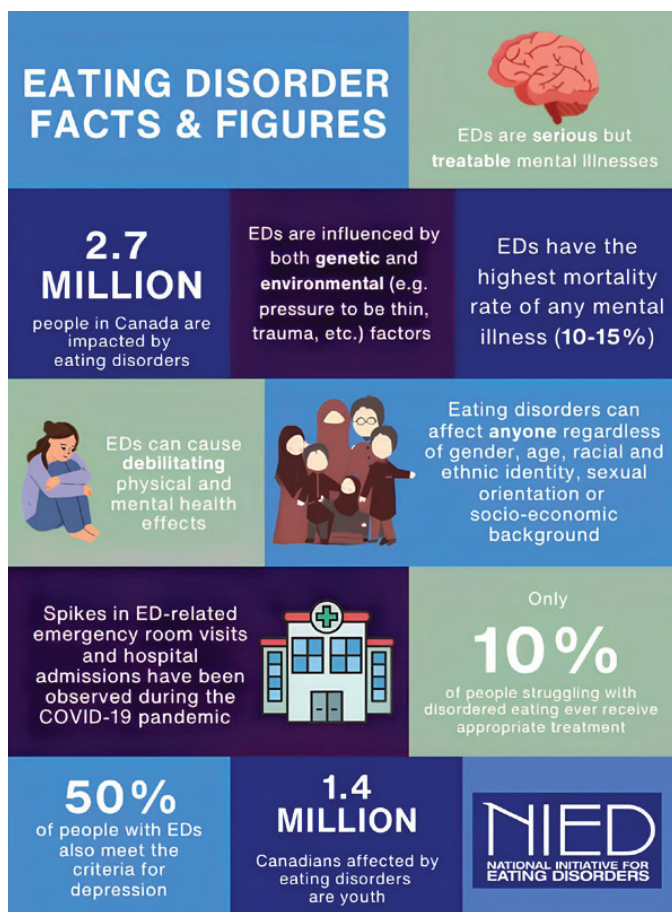
Arrange to meet with a trusted and trained professional to discuss your concerns and how to access help. You don't have to do this alone. Help is available.

UNDERSTANDING EATING DISORDERS

Disordered eating refers to a range of unhealthy eating behaviours, from mild irregular eating patterns (like skipping meals or yo-yo dieting) to severe, life-threatening eating disorders. Eating disorders can severely impact physical and mental health, disrupt relationships, and hinder daily life. Professional help is essential for recovery, and the sooner it is sought, the better the chances of healing.

WHAT ARE THE WARNING SIGNS?

If food, eating, or body image concerns are negatively affecting you or someone you know, seeking professional help is crucial. Early intervention can significantly ease the recovery process.



ED Facts & Figures

TYPES OF EATING DISORDERS

- **Anorexia Nervosa** – Characterized by self-starvation, intense fear of weight gain, and a distorted body image. Common signs include extreme weight loss, restricting food intake, over-exercising, and denial of hunger. Immediate professional help is vital.
- **Bulimia Nervosa** – Involves cycles of binge eating followed by purging (vomiting, using laxatives, over-exercising). Purging behaviours can lead to serious health problems like tooth decay, gastrointestinal issues, and heart trouble. Though the person may appear at a normal weight, the condition is very serious.
- **Binge Eating Disorder** – Characterized by frequent episodes of uncontrollable overeating, often in secret, followed by feelings of shame or guilt. Unlike bulimia, there is no purging. This disorder can lead to obesity, diabetes, heart disease, and depression.
- **Eating Disorder Not Otherwise Specified (EDNOS)** – This diagnosis applies to eating behaviours that cause significant distress but do not fit into the categories of anorexia, bulimia, or binge eating disorder. These behaviours can still be severe and require treatment.

Eating disorders often develop as a way to cope with emotional struggles but can worsen over time, masking deeper issues and they can have serious physical consequences.

TREATMENT AND SUPPORT

Treatment for eating disorders typically involves a combination of medical, psychological, and nutritional support. Key approaches may include:

- Individual counselling or psychotherapy
- Family-based therapy (FBT)
- Medication (in some cases)
- Hospitalization, if necessary, for serious case
- Support groups can provide additional help for individuals with eating disorders and their families.

How You Can Help

If you suspect someone has an eating disorder, you can:

- Educate yourself on the signs and symptoms
- Approach the person with compassion, not judgment
- Offer support, encourage seeking professional help, and be patient as recovery takes time

Gender Diverse Youth

WHAT IS GENDER?

Gender identity refers how a person feels about their own gender (masculine, feminine, or something else). It's not based on their body (like their genitals or chromosomes). Everyone has the right to choose and be respected for their gender identity.

Gender expression refers to how a person shows their gender to others, through things like clothing, actions, or speech. It's different from gender identity. People can express themselves however they feel, and they have the right to be respected for it.

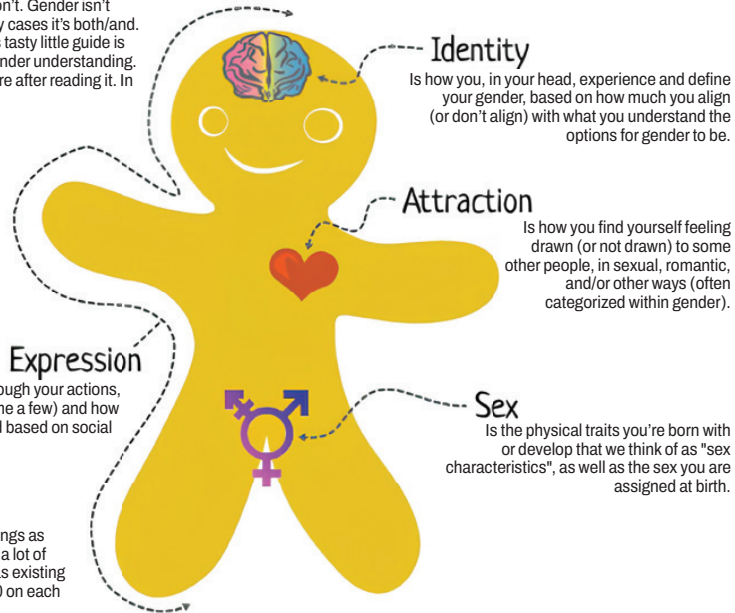
Who are gender-diverse youth?

These are young people whose gender identity doesn't match the one they were assigned at birth. This can include identities like transgender, non-binary, or agender.

The Genderbread Person

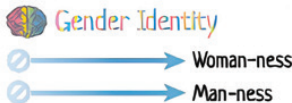
it's pronounced **METROsexual** www

Gender is one of those things everyone thinks they understand but most people don't. Gender isn't binary. It's not either/or. In many cases it's both/and. A bit of this, a dash of that. This tasty little guide is meant to be an appetizer for gender understanding. It's okay if you're hungry for more after reading it. In fact, that's the idea.



We can think about all these things as existing on continuums, where a lot of people might see themselves as existing somewhere between 0 and 100 on each

🕒 means a lack of what's on the night side



personality traits, jobs, hobbies, likes, dislikes, roles, expectations

common GENDER IDENTITY things



style, grooming, clothing, mannerisms, affects, appearance, hair, make-up

common GENDER EXPRESSION things



body hair, chest, hips, shoulders, hormones, penis, vulva, chromosomes, voice pitch

common ANATOMICAL SEX things

Identity ≠ Expression ≠ Sex
Gender ≠ Sexual Orientation

Sex Assigned At Birth
☐ Female ☐ Intersex ☐ Male
 Typically based solely on external genitalia present at birth (ignoring internal anatomy, biology, and change throughout life). Sex assigned at birth (SAAB) is key for distinguishing between the terms "cisgender" (when SAAB aligns with gender identity) and "transgender" (when it doesn't).



What is sexual orientation?

A person's sexual orientation refers to how they define their sexual attraction to others. Every individual has the right to determine their own sexual orientation and to have that decision respected by others. It can change over time and is separate from their gender identity. Examples of sexual orientations include lesbian, gay, bisexual, or queer.

Who are sexual-minority youth?

These are young people who don't identify as heterosexual (straight). They may identify as lesbian, gay, bisexual, pansexual, asexual, or other terms. Their sexual orientation is different from their gender identity.

While the terms are sometimes confused, gender identity, gender expression, and sexual orientation are three different things. A person's gender identity or expression does not determine their sexual orientation.

What do sexual-minority and gender-diverse youth need?

Gender-diverse and sexual-minority youth will not inevitably encounter mental health problems. Research shows that gender-diverse and sexual-minority youth do much better when their families and their communities support them.

Gender identity, sexual orientation, and Mental health

Having a gender-diverse or sexual-minority identity is not a mental health issue and is not caused by parents' actions or trauma. Gender and sexual diversity are natural aspects of human identity. Youth thrive when they are supported and allowed to express their gender or sexual identity freely. However, in Canada, societal expectations tied to gender and sexuality—such as the assumption that girls must be caring and boys must not show emotion—can be harmful. Most people expect others to be heterosexual, and those who don't fit these roles often face discrimination. Gender-diverse and sexual-minority youth may be bullied, excluded, or even experience violence at home or in their communities. They often feel pressure to conform to gender norms or to enter heterosexual relationships, which can contribute to mental health challenges. For these reasons, gender-diverse and sexual-minority youth are more likely than straight or cisgender youth to:

- Experience depression or anxiety
- Use drugs or alcohol in a way that causes problems for them
- Attempt suicide
- Leave or be forced to leave school early
- Have unstable housing or be homeless

Furthermore, some gender-diverse youth experience mental distress if their physical appearance does not match their gender identity. Sometimes the physical changes of puberty can prompt strong feelings of distress for gender-diverse youth. Medications called puberty blockers can be used to pause puberty temporarily. Older youth may choose to access cross-gender hormones or surgery.

Where can a young person get mental health services?

If a young person has a mental health concern, they or their family can speak with:

- A doctor or a nurse
- A teacher or school guidance counsellor
- A group or organization that can connect them to mental health services

If a young person is having a mental health crisis and is at risk of hurting themselves or others, they can seek care at a hospital emergency department. Unfortunately, there is no guarantee that emergency staff will be prepared to sensitively interact with gender-diverse or sexual-minority youth.

Understanding and Finding Help for Self-Harm

UNDERSTANDING SELF-HARM

Self-harm is when a person intentionally hurts their own body. These injuries can range from minor to serious but are usually not life-threatening. It's also called "non-suicidal self-injury" (NSSI) because it's not an attempt to end life. People often harm themselves as a way to cope with difficult situations or painful emotions.

Some facts about self-harming activities:

- They usually start in the adolescent or teen years and can carry on into adulthood.
- It's not uncommon for young persons to purposely harm themselves at least once.
- In early adolescence, girls are more likely than boys to harm themselves, but later on, males and females are at similar risk of self-harm.
- Self-harm is often done in secret, so friends and family may not know it's happening.

Common ways in which young people harm themselves include:

- cutting, scratching, biting or burning the skin
- hair pulling
- overdosing or poisoning, but not to lethal levels
- hitting the head or body against hard surfaces.

Anyone can self-harm and for some it's a one-time-only event. But for others, it continues over time and grows into a habit that's hard to change. While self-harm is an attempt to cope and is not usually a suicide attempt, those who injure themselves are at higher risk of suicide. So, any self-harming activity is a warning sign that something is wrong. Don't ignore it.

RISK FACTORS FOR SELF-HARM

Any number of different factors in life can create distress that will lead some people to harm themselves.

Some factors are social or situational, for example:

- difficult relationships with family or friends
- problems at school or work, including bullying
- problems at home or family breakup
- dealing with homophobia or racism.

Some risk factors are more emotional and personal:

- feeling empty, disconnected, isolated
- experiencing anxiety, anger or depression
- a history of trauma or abuse
- a family history of self-harm.

WHY PEOPLE HARM THEMSELVES

When stressful situations and feelings become too much, some will turn to self-harm as a way of releasing the emotional pressure. As a stress reliever, self-harm can bring relief in several different ways. For example:

- Hurting the body "outside" can shift the attention from painful emotions "inside."
- Feeling emotionally numb or disconnected from inner feelings can push a person to want to feel "something," even physical pain.
- If a person feels unworthy or guilty (with or without a reason), self-harm can sometimes be a form of self-punishment.
- It can provide a sense of control.
- It can be a way of letting others know that something is wrong.

The reasons behind self-harm can be complex and vary from person to person, with motivations often changing over time. While self-harm may provide temporary relief from emotional pain or stress, this relief is short-lived. As worries and pressures build again, the person may turn to self-harm for relief, creating a cycle of stress, self-harm, and brief relief. Over time, this cycle itself can become a source of additional stress.

SIGNS OF SELF-INJURY

Many who self-harm work hard to keep it a secret from others, so it can be difficult to detect. Some of the signs are:

- changes in usual behaviour, like withdrawing from friends and social life and more signs of stress or depression
- overdressing, for example, wearing long sleeves and pants in hot weather
- cuts, bruises or burns that can't be explained and may happen more than once
- signs of scarring
- noticing razors or other items that could be used to self-harm.

TREATMENT AND SUPPORT

Although some people may stop self-harming on their own, professional help is often needed. The main treatment for self-harm is counselling, also called "talk therapy," which often includes cognitive behavioural therapy (CBT) or dialectical behaviour therapy (DBT). Therapy can be done one-on-one, in small groups, or with family, and is provided by professionals like psychologists, social workers, or doctors. You can also find self-help groups online or in your area for extra support.

How you can help

If you believe a friend or loved one is self-harming:

- Be supportive. Let them know you care.
- Don't judge. Listen. Let them know you are there to help.
- Carry on and do the things you usually like to do with each other.
- Learn what you can about self-harming and share helpful information with your friend or loved one if they show interest.
- Offer to be with them if and when they're ready to speak to a trusted adult, such as a counsellor or family doctor.
- Help them get medical help for injuries that are serious.
- Take care of yourself. What you see and what you learn may be upsetting. You might need some help and support yourself and, if you are a young person, you too may want to talk to a trusted adult.

Understanding substance use and addictions

ALCOHOL AND CANNABIS

Alcohol and cannabis are the substances used most frequently by youth in Canada. Alcohol is often the first substance used, and many young people in middle school and high school have tried it at least once. Cannabis use is also common. From grade 7 to grade 12, the use of both alcohol and cannabis becomes more widespread, with alcohol use roughly double that of cannabis.

SUBSTANCE USE AND HARM REDUCTION

Substance use has risks at all ages, but young people are at particular risk of:

- harm to physical and mental health in the short and long term
- harm to the brain — the teenage brain is still developing and substances may have negative impacts on this important process
- accidents, like car collisions, because of increased risk-taking and impaired judgment, attention and reflexes
- alcohol or drug poisoning, particularly since young people don't yet know their physical limits (binge-drinking is common among young teenagers)
- difficulty with schoolwork and attendance
- isolation
- strain on important relationships with family and friends
- Long-term substance use issues (addiction)

A harm reduction approach aims to minimize the potential harms of substance use and has shown to be an effective strategy for youth. Harm reduction is an evidence-based, client-centred approach that seeks to reduce the health and social harms associated with addiction and substance use, without necessarily requiring people who use substances to abstain or stop. Included in the harm reduction approach to substance use is a series of programs, services and practices. Essential to a harm reduction approach is that it provides people who use substances a choice of how they will minimize harm through non-judgmental and non-coercive strategies in order to enhance skills and knowledge to live safer and healthier lives.

RISK FACTORS

Males are more likely than females to experience problems with substance use. Other factors associated with an increased risk of substance use issues may include:

- a family history of problems with substance use
- existing emotional or mental health issues, such as depression and anxiety
- low self-esteem
- feelings of not belonging
- past experience of trauma or abuse

People who are experiencing mental health problems may use drugs or alcohol to cope with their symptoms or challenging feelings. So sometimes, substance use can mask serious mental health issues. When a person has both a mental disorder and a substance use problem, it's known as having "concurrent disorders." Concurrent disorders require their own specialized treatment.

SIGNS OF PROBLEMATIC SUBSTANCE USE

Particular signs depend upon the substance being used, but in general, signs that someone may be using substances problematically include:

- missing school, work, or other important obligations
- caring less about school, work, or friendships and family
- changes to sleeping and eating patterns
- reduced concentration or memory
- increased secrecy about activities or whereabouts
- mood changes, irritability, and personality change
- taking up with a new group of friends who are less connected to home and school

These may be warning signs of problematic substance use, but they can also signal other problems, like mental health issues. Either way, it's important to take these sorts of signs seriously. Don't ignore them.

TREATMENT AND SUPPORT

Different types of services are available to help young people with issues of substance use, depending upon where they live and what the problems are.

For many, meeting with a counsellor for a number of sessions is sufficient while carrying on with a regular school routine. Others may benefit from a “day program” for a set length of time. A day program includes treatment and school-work in a small-group setting at a single location.

If a more intensive approach is needed, there are residential programs where participants stay for the duration of the program – usually from a few weeks to a few months. There are also some “recovery homes” that provide a supportive environment and life skills training during recovery from problematic substance use, in preparation for living independently.

Treatment approaches that involve cognitive behaviour therapy (CBT) or that focus on motivation are often used with success. Sometimes medications are helpful. Family therapy may also be involved.

How you can help

As a parent, or other caring adult, you can:

- Be a healthy role model for your children. If you drink alcohol, follow Canada's Low-Risk Alcohol Drinking Guidelines. This brochure also has some tips for young people who choose to try alcohol.
- Encourage your child to confide in a trusted adult – if not you, then perhaps another relative, a school counsellor, or your family doctor.
- If your child is using substances, stay calm instead of showing panic and anger. Offer patience and support.
- Educate yourself on harm reduction and ways to engage your child in a non-judgmental conversation about substance use.
- Keep communications open – talk to your kids and remember to listen! Try to understand your child's perspective.

If the situation appears serious, get your child the help he/she needs. Early intervention can help. As a start, contact your family doctor or other trusted health professionals.

Resources



amiquébec

Agir contre la maladie mentale
Action on mental illness

AMI-Québec Action on Mental Illness is a non-profit organization that helps families manage the effects of mental illness through support, education, guidance, and advocacy. Family includes those in the circle of support of someone living with mental illness (parents, spouses, siblings, adult children, friends, etc.) Many of our programs may also be of special interest to those living with mental illnesses.

Our programs are all free and are given in English. Although our office is located in Montreal, many of our programs and services are available across Quebec, including:

Counselling for caregivers

Meeting with a counselor by phone or Skype can help you manage your relationship with your afflicted loved one.

Online learning

Available anywhere, anytime learn online with AMI thanks to our YouTube and SoundCloud channels, and our live Hot Topics presentations.

Public Awareness

Presentations are offered to schools and community organizations giving an overview of mental illnesses, warning signs and coping strategies, and a volunteer speaker tells their story on overcoming mental illness.

Resource List

Our External Resource list covers many topics that touch on mental health and will connect you with other organizations that can help you.

Share & Care Newsletter

Published four times a year with helpful tips, trends, and information.

Website

Our website contains a wealth of information about mental illness, mental health, and caregiving.

Asking for help can be hard, but you don't have to face things alone. Reach out!

If you need **INFORMATION** or **SUPPORT**

See your **DOCTOR** to discuss your options for support.

Call or go to your **LOCAL CLSC**. Tell the receptionist you'd like to speak with a social worker.

Call **8-1-1**, a free and confidential telephone consultation service.

Make an appointment to meet with one of the **SERVICE PROVIDERS** listed in this guide.

Call one of the **HELPLINES** in this guide.

If you are a **STUDENT**, talk to a teacher, principal or guidance counsellor.

YOUTH between ages **5 to 25** can call, text, live chat or download the app at **KID'S HELP PHONE** or call **1-800-668-6868** or text **686868**

If you are in **CRISIS** or are having **SUICIDAL THOUGHTS**

Call the Gaspé Coast and Magdalen Islands **SUICIDE PREVENTION LINE**
1-866-277-3553
or text **535353**.

Call the **9-8-8 SUICIDE CRISIS HELPLINE**

Call **9-1-1**.

Go to a **HOSPITAL EMERGENCY ROOM** if the situation is serious and requires immediate attention.

Gaspé Coast Resources

Mental Health

PUBLIC INSTITUTIONS

Centre intégré de santé et de services sociaux de la Gaspésie

Your local CLSC is the main point of entry to all psychosocial services. Professionals can help you evaluate and find solutions to marital, family or personal problems, personal crisis situations, difficulties with family or friends as well as adaptation or social integration difficulties.

**Centre intégré
de santé
et de services sociaux
de la Gaspésie**

Québec 

To access these services, please call or visit your local CLSC (with or without an appointment). Outside regular office hours, in an emergency situation, a social worker can be reached by calling Info-Santé at 811.



Hôpital de Gaspé

418-368-3301

CLSC de Gaspé

418-368-2572

CLSC Rivière-au-Renard

418-269-2572

CLSC Grande-Vallée

418-393-2572

CLSC Murdochville

418-784-2572

CLSC Barachois

418-645-2572

Hôpital Chandler

418-689-2261

CLSC Gascons

418-396-2572

CLSC Chandler

418-689-2572

CLSC Percé

418-782-2572

Hôpital de Maria

418-759-3443

CLSC Matapédia

418-865-2221

CLSC Pointe-à-la-Croix

418-788-5454

CLSC St-Omer

418-364-7064

CLSC Caplan

418-388-2572

CLSC Paspébiac

418-752-2572

Info-Social 811

Info-Social 811 is a free and confidential telephone consultation service. The service is available 24 hours a day, 365 days a year. Anyone living in Québec can call Info-Social 811 for themselves or a family member. Professionals offer advice and can answer psychosocial-related questions. When necessary, they may also direct you to a community resource or a resource in the health and social services network.

Here are examples of situations in which you can call Info-Social 811:

- You are in a situation that causes you anxiety
- You are worried about a friend or family member
- You are experiencing family or relationship problems
- You are in mourning
- You have questions about other worrisome situations or behaviour



811



Eastern Shores School Board

ESSB has made mental wellness support and training part of its past and current plans. Awareness campaigns, access to services, and advocacy for students and staff are priorities. To find out more about the mental health services available to you or your child, please contact your school's principal.



40 Mountsorrel
New Carlisle



418-752-2247



info@essb.qc.ca
www.essb.qc.ca



COMMISSION SCOLAIRE
Eastern Shores
SCHOOL BOARD

INDIGENOUS RESOURCES

Indigenous mental health and addiction resources can be found by contacting Band Offices and Health Centers.

Listuguj Mi'gmaq Government



Band Office:
418-788-2136

Community Health Services:
418-788-2155

Community Social Services:
418-788- 9021

Micmacs of Gesgapegiag Band



Band Office:
418-759-3441
info@gesgapegiag.ca



Health Centre:
418-759-3431

Micmac Nation of Gespeg Administrative office



Administrative Office:
418-368-6005
reception.gespeg@cgocable.ca



COMMUNITY ORGANIZATIONS

While the majority of organizations offer services in English, not all have the resources to do so.

If you require assistance in communicating with a service provider, please contact **CASA at 418-752-5995** or **Vision Gaspé-Percé Now in the Gaspé area at 418-368-3212.**

CASA

CASA works to build and strengthen the vitality of the English-speaking community of the Gaspé Coast (Matapédia to Gaspé) by representing the community's interests and designing and delivering programs that respond to its needs.



168 Gérard-D.-Levesque
New Carlisle
418-752-5995
info@casa-gaspe.com
www.casa-gaspe.com



Vision Gaspé-Perce Now

VGPN ensures that English-speaking Gaspesians residing in the MRCs of Côte-de-Gaspé and Rocher-Percé receive services and support in the area of health and social services, education, and community development.



28 rue St. Patrick
Douglastown
418-368-3212
info@vgpn.ca
www.visiongaspeperce.ca



Centre Accalmie

Centre Accalmie is a shelter for people in difficulty, welcoming men and women of all ages. Operating 24 hours a day, 7 days a week, the centre provides support to individuals for problems related to mental health, alcoholism, substance abuse, depression, difficult family situations, and more. The centre offers personalized and confidential services aimed at improving the client's quality of life.



66, rue Alexander
Pointe-à-la-Croix
418-788-2406
accalmie@globetrotter.net
www.pointe-a-la-croix.com/
bottin/centre-accalmie



Centre de Ressourcement, de Réinsertion et d'Intervention (CRRRI)

CRRRI is an alternative mental health organization in the Côte-de-Gaspé. CRRRI aims to help people with emotional and social needs, with the goal of breaking isolation caused by issues related to mental illness. Activities include individual or group meetings, cooking workshops and community meals, and leisure and social activities.



230 rue Wayman
Gaspé
418-368-1655
crrri@cgocable.ca
www.crrigaspe.com



Convergence

Convergence is dedicated to helping men who need support and offers:

- Specialized help for men who are experiencing difficulties in conjugal, family or social situations.
- Support for men who have impulsive and violent behaviour.
- Support for men who are living in stressful situations.



Anglophone Service Point

Sectors Avignon and Bonaventure)



64 boul. Interprovincial



Pointe-à-la-Croix

581-886-5705

convergence.bdc@gmail.com

Chandler Service Point

855-866-4455

Gaspé Service Point

64 Chrétien Street, local Z-26

418-368-2085

convergence.gaspe@gmail.com



Droits et Recours en Santé Mentale GÎM

Droits et Recours promotes, protects and defends the rights of people who have lived with or who currently have a mental health problem.



60 boul. Perron O.



Caplan



418-388-2506

1-800-463-6192

info@drsmgim.org

www.droitsetrecours.org



Nouveau Regard - Association de parents et amis de la personne atteinte de maladie mentale de la Gaspésie

Nouveau Regard offers information and support to the family members and loved ones of those suffering from mental health challenges. They offer both individual or family meetings and workshops on various topics. Their library holds both English and French books on mental health and resilience.



108 chemin Cyr



New Richmond

418-392-6414



info@nouveaugard.qc.ca

www.nouveaugard.qc.ca



Nouveau
Regard

GASPÉSIE

La Passerelle

La Passerelle offers free and confidential services to help people through difficult times. The centre helps those suffering from loneliness, depression and anxiety, those who need to reorganize their lives following divorce, separation or mourning, and anyone who is living with emotional and/or psychiatric problems.

The centre is open from 8:30 to 4:30, Monday to Friday and offers:

- Individual counselling: someone to listen to and support you in your journey
- Support groups
- Information on subjects related to mental health and illnesses
- Personal growth workshops and outings



198 Perron blvd. East



New Richmond

418-392-4888



lapasserelle@globetrotter.net

www.rocgim.org/membres



ASSOCIATION D'ENTRAIDE
POUR LA SANTÉ MENTALE

LA PASSERELLE

RELATED RESOURCES

While mental health support is not their main mandate, the following community organizations provide varying levels of mental, emotional and social support.

Accueil Blanche Goulet

This organization offers support in the form of individual counselling and temporary emergency accommodation.



184 rue de la Reine
Gaspé
418-368-4877



www.rocjim.org/membres

Maison L'Aid'Elle

Maison L'Aid'Elle supports women and children who have experienced domestic violence through counselling and lodging if needed.



Gaspé
418-368-6883



laidelle@globetrotter.net
www.laidelle.org

CALACS la Bôme Gaspésie

CALACS is a support centre for individuals who are victims of sexual assault. Services offered include individual support and follow-up meetings, telephone support, accompaniment and preparation for medical and legal procedures, information and referrals, and help and support for the victim's loved ones.



CALACS
LA BÔME GASPÉSIE



MRC Côte-de-Gaspé
47 rue Baker, Suite 5
Gaspé
418-368-6686



MRC Rocher-Percé
484 avenue de l'Hôtel-de-Ville
Chandler
418-689-3144



direction.bonaventure@calacslabomegaspesie
www.calacslabomegaspesie.com

**MRC Avignon &
MRC Bonaventure**
597 boul. Perron
Carleton
418-364-2424

Centre Émilie-Gamelin

The Centre Émilie-Gamelin offers assessment and referrals, a day centre, promotion and prevention support, short-term accommodation and autonomous community apartments with follow-up.



307 rue Monseigneur Ross E
Chandler
418-689-6100



jbecu@cegamelinchandler.com
www.rocgim.org/membres

Centr'Elles

Centr'Elles is a community organization for women in the Avignon area. They provide a meeting place for women and will help support those who need emotional, social and financial help for a variety of reasons.



105 route 132 Est
St-Omer
418-364-3157



centrell@globetrotter.net
www.rocgim.org/membres

L'Émergence - Support and Shelter

L'Émergence provides support to women and children who are experiencing domestic violence including phone, individual and group counselling, temporary accommodation and support after departure, loan of household equipment, recreational activities, and education and prevention workshops.



Maria
418-759-3411
emergenc@globetrotter.net
www.maisonlemergence.com



L'Émergence
MAISON D'AIDE ET D'HÉBERGEMENT

Family Ties

Family Ties encourages social inclusion by offering programs and services for all ages including: Early Childhood; Youth; Food Security; Family Support and more. The organization has developed a dynamic resilience plan to empower the community to adapt to challenges together. The Family Ties Community Wellbeing Coordinator helps members to access activities and services to improve their wellbeing.



Carrefour Famille New Carlisle
208A Gérard-D.-Levesque
New Carlisle, Qc, G0C1Z0
418-752-7265
familyties@telus.net



Femmes en Mouvement

Femmes en Mouvement works to improve the living conditions of women and girls living between Cascapédia St-Jules and Shigawake. They offer individual services (listening, support, documentation centre, referrals), educational activities (awareness raising, conferences, workshops on various topics) and collective action (fight against poverty, environment, and social justice).



152 avenue de Grand-Pré
Bonaventure
418-534-4345
info.cfem@globetrotter.net
www.rocgim.org/membres



OGPAC: Organisme gaspésien des personnes atteintes de cancer

OGPAC contributes to the well-being of people with cancer and their loved ones. Services offered include moral support and accompaniment, socio-educational activities such as self-help groups, wellness days, a bereavement group, and workshops on themes related to health. Individuals can also borrow or purchase prostheses and wigs at their location.



549 Blvd Perron Est
Maria
418-759-5050



ogpac@globetrotter.net
www.ogpac.net

Société Alzheimer Gaspésie-Îles-de-la-Madeleine

The Société Alzheimer Gaspésie-Îles-de-la-Madeleine's mission is to support individuals with Alzheimer's disease or other neurocognitive disorders, as well as their family and caregivers. They provide listening services and referrals in collaboration with community partners.



114, avenue Louisbourg
Bonaventure
418-534-1313



info@sagim.ca
www.sagim.ca

Private Practices

Wait times for mental health services such as therapy and counselling can sometimes be lengthy. For those with the financial means, private services are available.



A list of private providers for the Gaspé Coast is available from CASA. Please call 418-752-5995 or email info@casa-gaspe.com.



Substance Use and Addictions

Centre intégré de santé et de services sociaux de la Gaspésie

Do you have problems with substance abuse, alcoholism or gambling, or does the problem affect one of your children or a loved one?

The CISSS can help you prevent, reduce and treat addiction problems. Services offered include evaluation and support by an addiction specialist, crisis intervention and help and referrals for the appropriate resources.

Do you have questions? Do you need support? Are you worried about a loved one? To access services, you can make an appointment with the CLSC in your area or you can go without an appointment. You can also contact Info Social 811 to speak with a social worker. All services are confidential and free.



Info Social
811

*Contact details for CLSCs
are listed on page 64.*

**Centre intégré
de santé
et de services sociaux
de la Gaspésie**

Québec 

Centre Accalmie

Centre Accalmie is a shelter for people in difficulty, welcoming men and women of all ages. Operating 24 hours a day, 7 days a week, the centre provides support to individuals for problems related to mental health, alcoholism, substance abuse, depression, difficult family situations, and more.



66, rue Alexander
Pointe-à-la-Croix
418-788-2406
accalmie@globetrotter.net
www.pointe-a-la-croix.com/
bottin/centre-accalmie



Mi-Chemin

Mi-Chemin welcomes, supports, accompanies and refers at-risk adults who may be developing an addiction (alcohol, drugs, gambling) or those already experiencing addictions and their relatives. Services provided include promotion and prevention workshops, individual meetings, a support line, support for relatives of those struggling with an addiction, a documentation centre, and referrals.



189 rue Jacques Cartier, suite 11



Gaspé

418-368-6676



mi-chemin1@hotmail.com

www.rocjim.org/membres



MI-CHEMIN
DE GASPÉ INC.

Magdalen Islands Resources

CAMI

CAMI, the Council for Magdalen Islanders, works to foster community vitality and support community development. CAMI ensures that English-speakers benefit from programs and services across an array of sectors such as health, education, economic development, and arts, culture and heritage.



787 chemin Principal
Grosse-Île
418-985-2116
info@micami.ca
www.micami.ca



CISSS des Îles

A team of psychologists and social workers is available to help with psychological or social problems (stress, anxiety, health and well-being, addictions, and more). The interventions can be individual or in a group setting.

To access these services, call the CLSC in Cap-aux-Meules at 418-986-2572. More information is available at www.cisssdesiles.com



CLSC in Cap-aux-Meules
418-986-2572
www.cisssdesiles.com

**Centre intégré
de santé
et de services sociaux
des îles**

Québec 

Aire ouverte

A place for young people aged 12 to 25. A variety of health and wellness services are offered in a single location. Professionals, such as a nurse or social worker, are on hand to answer questions or help find the right services.



333, chemin Principal
Cap-aux-Meules
367-995-0851
<https://www.cisssdesiles.com/aire-ouverte/>

L'Éclaircie - Centre communautaire en santé mentale

L'Éclaircie provides services to improve the quality of life of people with mental health problems and their family and friends. Services include in-person and telephone support, counselling, home visits, coffee meetings, group activities, respite activities, educational workshops, referrals and a documentation centre.



330, chemin Principal
Cap-aux-Meules
418-986-6456
eclaircie@tlb.sympatico.ca
www.eclaircie.ca

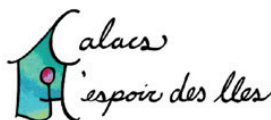


CALACS L'Espoir des Îles

CALACS is a support centre for individuals who are victims of sexual assault. Services offered include individual support and follow-up meetings, telephone support, accompaniment and preparation for medical and legal procedures, information and referrals, and help and support for the victim's loved ones.



735, chemin Principal
Cap-aux-Meules
418-986-6111
calacsdesiles@ilesdelamadeleine.ca
<https://www.calacsdesiles.com/>



Carrefour Unité

A meeting place for people suffering from addictions and those who are recovering addicts. Services offered include a day centre, telephone and in person support, conferences, social activities and afternoon chats.



390, chemin de l'Église St-Luke
Cap-aux-Meules
418-986-2233
carrefour.unite@live.ca
<https://www.facebook.com/carrefourunite>



Homme & Gars

Homme & Gars is a community organization offering confidential health promotion services to men of all ages, including teens. Services offered include individual or group meetings and workshops for those who need support around relationships, separation, anger, impulsiveness and violence, and other issues.



105-735, Chemin Principal
Cap-aux-Meules
418-986-1811
hommesetgars@hotmail.ca
www.hommesetgars.com



La Maison à Damas

Temporary accommodation for people in difficulty. Services offered include information, listening and support.



1202, chemin de Lavernière
Étang-du-Nord
418-986-6631
maisonadamas@tlb.sympatico.ca
<https://rocgim-cdc.org/la-maison-a-damas/>



Maison d'aide et d'hébergement L'Accalmie

Temporary accommodation and assistance for women and children living in conjugal or family violence situations. Services are accessible 24/7.



418-986-5044
accalmie@tlb.sympatico.ca
www.maisonaccalmie.com



Maison de la famille L'Embellie

Organization offering a play and learning environment favourable to the overall development of children (0 to 5 years old). Support for parents and enrichment of the parent / child relationship.



33, chemin des Marais
Havre-aux-Maisons
418-969-4040
embellie@gmail.com
<https://rocgim-cdc.org/lembellie-organisme-communautaire-famille/>



Maison des jeunes des Îles

Offers awareness and information workshops involvement in associative and community life sports, cultural and educational activities learning about democracy and its mechanisms.



704, chemin Grand-Ruisseau
Fatima
418-986-4080
<https://rocgim-cdc.org/maison-des-jeunes-des-iles-de-la-madeleine/>

Private Practices

This list presents the private services available in the Magdalen Islands for informational purposes only and does not constitute an endorsement or recommendation.

Psychologists

Ulrich Klapper
Bilingual services
418-937-9337

Mélanie Cormier
French services
450-516-1669

Geneviève Alain
Bilingual services
418-937-8388
www.psychologueenligne.quebec

Social Workers

Annie Lapierre
French services
418-937-3618
www.annielapierre-travailleusesociale-82.websself.net

Marie-Pier Arseneault
Bilingual services
581-886-0358

Family and Couples Therapists

Michel Lemieux
Bilingual services
514-591-6703

Marie Pier Arseneault
Bilingual services
581-886-0358

Websites, Helplines, and Apps

Telephone Helplines

Alcoholics Anonymous

1 800-463-6155

Al-Anon / Alateen

For people affected by another person's drinking.

1 888-425-2666

L'Appui Caregiver Support

Information and referral services for the caregivers of older adults, as well as friends and family.

1 855-852-7784

Drugs: Help & Referral

Support, information and referrals to people coping with addiction.

1 800-265-2626

Gai Écoute

LGBT Help & Information Centre.

1 888-505-1010

Gambling: Help & Referral

For people who are concerned about their gambling habits and the people around them.

1 800-461-0140

Hope for Wellness: First Nations and Inuit Help Line

Mental health counselling and crisis intervention to all Indigenous peoples across Canada. Chat counselling is also available at www.hopeforwellness.ca

1 855-242-3310

Interligne (Gender and Sexual Diversity)

Free and confidential services 24/7 for those concerned with gender identity and sexual orientation.

Phone or text:
1 888-505-1010



Kids Help Phone

Professional counselling support to young people.

1 800-668-6868

Ligne Parents (Parent Helpline)

Listening, referrals and support services for parents of children between 0 and 20 years old.

1 800-361-5085

National Eating Disorder Information Centre

Provides support for those with eating disorders and weight preoccupations.

1 866-633-4220

SOS Violence Conjugal (Domestic Violence)

Free, anonymous and confidential evaluation, information, awareness, support and referral services 24 / 7 to those affected by domestic violence.

1 800-363-9010

Suicide Helpline

Suicide helpline of the Gaspé Peninsula and Magdalen islands available 24/7.

1 866-277-3553

Tel-jeunes

A youth help phone offering free and confidential listening, referral and support services.

1 800-263-2266
Text: 514-600-1002

Suicide Crisis Helpline

A trained responder will listen without judgment, provide support and understanding, and tell you about resources that will help.

9-8-8

Mental Health Websites

AMI-Québec

AMI-Quebec helps manage the effects of mental illness through free support, education, guidance, resources and advocacy.

► www.amiquebec.org

Anxiety Canada

Online, self-help, and evidence-based resources on anxiety and anxiety disorders.

► www.anxietycanada.com

Bell Let's Talk

Bell Let's Talk promotes mental health awareness, acceptance and action. The website provides tools and links to age-specific mental health resources.

► www.letstalk.bell.ca

Bounce Back™

Bounce Back™ is a free program offered by the Canadian Mental Health Association (CMHA) and designed to help adults and young people aged 14 and over manage low moods, depression, anxiety and concerns. Using workbooks and a trained support person to guide and encourage you, Regain Your Spirit™ helps you acquire the skills needed to improve your mental health.

► <https://retrouversonentrainqc.ca/>

Canadian Mental Health Association

CMHA provides tools and resources to help individuals stay mentally fit and healthy.

► www.cmha.ca

The Centre for Addiction and Mental Health

The CAMH provides accessible, reliable, professionally produced resources on an array of mental health topics for patients, families, students and professionals

► www.camh.ca

Depression Hurts

Information, self-evaluation and tools to support those with depression and information for family and friends of individuals with depression.

► www.depressionhurts.ca

Government of Quebec

This page presents information on understanding mental health, living with mental illness and preventing mental illness and its consequences.

► www.quebec.ca/en/health/advice-and-prevention/mental-health

Kids Help Phone

Kids Help Phone is Canada's only 24/7, national support service for young people and offers professional counselling, information and referrals.

► www.kidshelpphone.ca

Mindyourmind

For youth ages 14 to 29, mindyourmind provides a space where mental health, wellness, engagement, and technology meet and offers interactive tools and innovative resources to build capacity and resilience.

► www.mindyourmind.ca

Revivre

Revivre provides support and tools for those with depression, anxiety and bipolar disorder.

► www.revivre.org/en

Teen Mental Health

Helps to improve the mental health of youth through resources, information and tools

► www.teenmentalhealth.org

Tel-Jeunes

This website provides information on how to text, call, email and live chat with counsellors, as well as providing tips and tools for dealing with emotions, relationships and substance use.

► www.teljeunes.com

How to Talk About Suicide

For those having suicidal thoughts or those worried about someone, this website provides tools and tips to talk about suicide in a preventive way. ►

www.howtotalkaboutsuicide.com

Centre for Suicide Prevention

Equips people with the knowledge and skills to respond to those at risk of suicide.

► www.suicideinfo.ca

Mental Health Apps

Apps focus on improving mental health using various methods such as meditation, journalling, interactive games and providing a support network. Some of the most-used free apps include the following:

Calm

Meditations designed to reduce anxiety and improve sleep

Headspace

Mindfulness and mediation to reduce stress and improve daily performance.

MoodNotes

A thought journal and mood diary to improve thinking habits

MoodDoc

Daily questions to assess well-being and increase awareness of thoughts and emotions.

Sanvello

Provides a toolbox to deal with daily anxiety and stress.

SuperBetter

Game focusing on increasing resilience when presented with challenges.

7 Cups

Online therapy and emotional support for anxiety and depression.

Happify

A space to overcome negative thoughts and stress, and to build resilience.

Talkspace

A counselling and therapy app.

Substance Use and Addictions Websites

Alcoholics Anonymous

Resources and information for those with a drinking problem.

► www.alcoholicsanonymous.org

Narcotics Anonymous

Provides peer-led support groups for individuals recovering from substance use disorders.

► <https://canaacna.org>

Drug Free Kids Canada

Provides information and resources for parents and kids aimed at reducing drug abuse and addiction.

► www.drugfreekidscanada.org

Families for Addiction Recovery

Provides parent-to-parent support for families struggling with addiction.

► <https://www.farcanada.org>

Parent Action on Drugs

Resources and services aimed at parents, professionals (teachers, health promoters, practitioners) and youth.

► <https://parentactionondrugs.org/alcohol-drugs/>

Quebec Government

Information on drugs, alcohol and gambling, and ways to get help.

► www.quebec.ca/en/health/advice-and-prevention/alcohol-drugs-gambling

Sexaholics Anonymous

A fellowship of men and women who share their experience, strength, and hope with each other that they may solve their common problems and help others to recover.

► www.sa.org

Smartkidz

Information relating to adolescent drug abuse and its prevention.

► www.smartkidz.org

Start Your Recovery

Provides helpful information for people who are dealing with substance use issues — and their family members, friends, and co-workers.

► [*www.startyourrecovery.org*](http://www.startyourrecovery.org)

Women for Sobriety

Helps women find their path to recovery through the discovery of self, gained by sharing experiences, hopes and encouragement with other women in similar circumstances.

► [*www.womenforsobriety.org*](http://www.womenforsobriety.org)

Substance Use and Addiction Apps

Saying When

Developed by Canada's Centre for Addiction and Mental Health, this app is for those who want to take charge of how much they drink, or when they drink. Saying When provides step-by-step directions that can help make you successful.

Sober Grid

This app allows you to create online profiles and interact, support, and engage with other people in recovery using a platform similar to Facebook. You can also use the app to create anonymous check-ins about whether you're sober or not, your mood, and what's going on.

SoberTool

SoberTool is an easy way to track your clean and sober days. The app includes daily motivational messages and reminders to keep you on target.

rTribe

Online counselling, coaching, and healing in community for those struggling with unhealthy sexuality, addiction and relationship issues

Mental Health & Wellness Gaspésie



The original Mental Health Task Force, which spearheaded the creation of this resource guide, was composed of the following organizations and individuals.

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The Mental Health and Wellness Gaspésie logo:

"The logo represents all of the people here in our shared community and that the goal of mental health has no face, no race, no colour or status, or even age. The goal of good mental health for all the communities should unite us, not separate us. Mental health affects all of us, family, friends, and children. I wanted the logo to represent all of the communities living here on the Gaspé Coast. With our spirits we can help one another and even speak up for those who can't." - Jessica Jerome, Designer

Disclaimer: This guide is intended for information purposes only. It is not a substitute for professional medical advice, diagnosis, or treatment provided by your physician or other professionals in the mental health field. The Mental Health Task Force does not assume any responsibility or liability for any consequence resulting directly or indirectly from any action or inaction you take based on the information found in this guide.

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