Mental health and child welfare:

understanding the links between both systems to better integrate and coordinate mental health services for youth in care

Key Findings and Recommendations

Reminder of the Research Objectives:

Describe the practices and standards that influence mental health services provided to children and youth under youth protection or transitioning to adulthood in Quebec

Identify the factors that facilitate or hinder the implementation of current standards and guidelines, according to the perspectives of key stakeholders, decision-makers, and practitioners.

Understand the needs and expectations of young people and families who have received youth protection services in Canada regarding mental health and well-being.

To sum up ...

- **44** Participants
- **4** CISSS and CIUSSS in Québec
- **7** Individual Interviews
- **13** Focus Group

december 2025

Overview of the Approach

A Qualitative Methodology

- **To explore complex topics that do not lend themselves to quantification**
- **To give a voice to those directly affected**
- **To understand the nuances of a situation**

The thematic analysis of the various focus groups and individual interviews also allowed us to identify key elements related to the initial objectives from an organizational resilience perspective. We adopted a learning health system approach, emphasizing knowledge emerging from field experience.

Key Findings

What young people tell us about their mental health needs

The research findings suggest that young people primarily want their experiences, both positive and negative, to be acknowledged and taken seriously in the support they receive.

They also emphasize the importance of having access to stable and continuous services, without interruptions in care or long waiting periods.

Young people want to be more involved in decisions that affect them and for their life experiences to be genuinely valued.

Finally, human connection is at the heart of their expectations: the stability of care providers, attentive listening, and a trusting relationship are seen as essential for support to be truly meaningful.

What service providers and managers tell us

Many express the need for greater support, training, and recognition in order to strengthen their capacity to develop and sustain a relational role with young people.

Key Findings

Gaps Between Expressed Needs and Services Provided

Insufficient Recognition of Traumatic Experiences

The consideration of prior trauma by youth protection services (DPJ) remains insufficient, due to a lack of specialized resources and training for practitioners, despite growing interest in trauma-informed approaches such as the ARC model.

Limited Access and Discontinuity of Care

Access to mental health services for youth is hindered by long wait times, discontinuity in follow-up care, geographic and administrative constraints, and a lack of tailored interventions. These barriers undermine trust-building and reduce the effectiveness of support.

Mismatch Between Approaches and Loss of Meaning

Participants criticized rigid and impersonal therapeutic approaches that overlook the human relationship. High staff turnover and the strict application of theoretical models weaken the bond of trust, leading to fatigue and disengagement from services.

Systemic Constraints and Institutional Logics

Siloed Work and Interservice Fragmentation

System fragmentation and lack of coordination between services place youth at the center of siloed processes, characterized by the shifting of responsibilities and limited awareness of available resources.

Procedural Rigidity and Judicial Constraints

In youth protection services, the tension between legal requirements and relational needs creates a rigid framework that limits active listening, fosters frustration and mistrust among young people, and reinforces feelings of powerlessness among practitioners.

Institutional Violence and Experiences of Mistreatment

Youth placed in residential care centers report practices perceived as violent and coercive, which exacerbate their distress and limit their autonomy. Meanwhile, practitioners struggle to balance support and discipline.

Toward a More Relational, Inclusive, and Coherent Service Offer

Reaffirming the Value of the Relational Approach

Young people and practitioners emphasize the importance of human connection — stability, attentive listening, respect, and trauma-informed approaches — as key to meaningful support that fosters trust and resilience.

Greater Recognition of Experiential Knowledge and Youth Involvement

Young people call for genuine involvement and being heard in decisions that affect them, with their lived experience recognized as essential expertise. Practitioners, meanwhile, emphasize the importance of co-constructing interventions to foster engagement and relevance.

Support for Professionals and Working Conditions

Practitioners are calling for support, training, and recognition of their relational role, as well as collaborative spaces, to improve the quality of services provided to youth.

Key Findings

To better integrate mental health services for children and youth in care, it is essential to establish clear standards. These standards define the level of quality that practitioners must uphold to provide support that is appropriate, consistent, and equitable. They help harmonize practices across different services and pose a simple question: "What would a competent professional do in a similar situation?" Once established, these standards serve as a benchmark to ensure that all young people receive the mental health services they need, regardless of their circumstances.

The findings remind us of the importance of placing people at the heart of services and supporting those who accompany them on a daily basis.

Three categories of standards emerge:

Relational and Ethical Standards

Clinical Standards

Organizational Standards

Recommendations

Stability and Consistency
Promoting continuity in practitioners and living environments to reduce disruptions and support safe, stable settings.

A Holistic Vision of Well-Being
Recognizing that mental health is shaped by multiple interconnected factors.

Relational Approaches
Emphasizing trust, empathy, and continuity between youth and practitioners.

Youth Voices
Integrating their regular feedback to adapt services to their needs and aspirations.

Clear Guidelines for Complex Needs
Providing clear language and tools to better identify and support these situations.

Trauma-Informed Practices
Adopting approaches that minimize the risk of retraumatization.

Acknowledging Trauma
Taking into account prior experiences, sometimes lived even before involvement with services.

A Coordinated Circle of Care
Engaging all significant individuals and professionals around the young person.

Staff Support
Recognizing the risks of vicarious trauma and moral injury, and providing resources to protect staff mental health.

Shared Decision-Making
Involving young people and interdisciplinary teams in care planning and decision-making.

Integrating these elements could help strengthen the quality, continuity, and relevance of services, while fostering more sustainable care environments that support the well-being of both youth and practitioners.

Visibility and Engagement

Oral presentation and scientific poster at the 7th International Conference of the International Association for Youth Mental Health in Vancouver. Find the presentation here and the poster here.

Symposium on "Mental Health of Vulnerable Youth" held at ACFAS in Montreal. The conference proceedings are available here.

Upcoming presentation at the World Mental Health Congress – Barcelos, Portugal

Upcoming presentation at the CRÉMIS lunchtime seminar, in collaboration with the Mouvement Jeunes et santé mentale and the Ex-Placé DPJ Collective

Launch of the website smjaction.ca. If you would like to subscribe to the newsletter, we can add you to the mailing list—just let us know.

Planned Publications:

- BMJ Open – Protocol for a scoping review about mental health service standards in youth protection programs in Canada
- Jeunes et Société Journal – Improving the Integration of Mental Health Services in Youth Protection: Supporting Resilient Organizations
- Child and Adolescent Social Work Journal – Standards of Mental Health Care in Child Welfare Services: A Scoping Review

If you would like to contribute to the writing process, feel free to contact us:
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Challenges and Limitations

Several challenges emerged during data collection:

First, recruiting participants proved to be difficult, particularly when it came to reaching teams and individuals located outside of Quebec or establishing contact with youth protection (DPJ) employees and decision-makers. It was also not possible to meet with young people currently placed in rehabilitation centers.

Moreover, the diversity of participants' availabilities and lived realities led to certain logistical constraints in organizing the meetings.

The one-year funding period, provided through a rapid research grant, also posed a constraint: the relational work required to build trust takes significantly more time than what is typically allocated in such programs.

The interview analysis also presented specific challenges, as some were conducted in English and others in French. Translation and interpretation can lead to lost nuances or partial understanding of participants' statements.

Finally, as with any qualitative approach, the findings are based on situated experiences and perceptions, which limits the generalizability of the conclusions while offering a rich and contextualized understanding of the issues explored.

Acknowledgments

This research project on the integration of care standards in mental health and youth protection services could not have come to life without the commitment, collaboration, and support of many individuals and organizations.

We extend our heartfelt thanks to the Mouvement Jeunes et Santé Mentale, whose active participation, critical reflections, and unwavering dedication to youth enriched every stage of the project. Their contribution was essential in grounding our approach in the lived realities and expressed needs of young people themselves.

Our deepest gratitude also goes to the project's participants —youth, practitioners, and partners—who generously shared their time, experiences, and perspectives. Their voices are at the heart of this research.

We thank the entire research team for their rigorous work, creativity, and ongoing collaboration. A special thanks to those who ensured the coordination, analysis, and dissemination of the findings with professionalism and sensitivity.

Finally, we express our appreciation to our colleagues and institutional partners, whose intellectual, logistical, and human support made it possible to carry out this project in a spirit of co-construction and openness.

This project is the result of a collective effort, driven by a shared commitment to improving services for youth in vulnerable situations.

To each and every one of you—thank you.

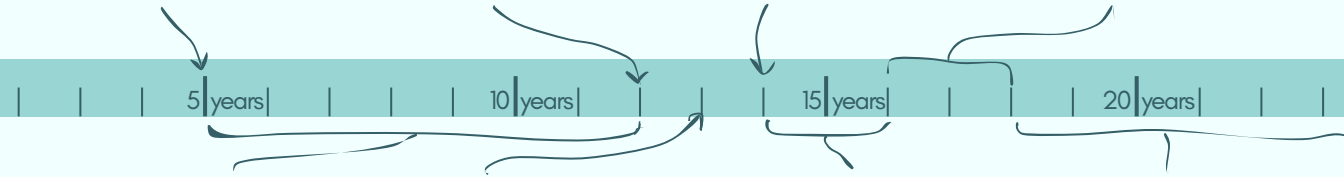
Appendix: Marc's Story — A Journey Through Youth Protection and Mental Health Services Based on Participants' Lived Experiences

Marc, the third child in a sibling group in Québec, is placed in foster care due to his parents' substance use and domestic violence. Because of a lack of available placements, he and his brothers are separated. This separation, experienced as a form of grief, leaves him confused and with a deep sense of abandonment, wondering when he will see his family again.

A temporary return to his mother's home with one of his brothers gives Marc hope. But communication is strained, and their mother, overwhelmed by stress, often yells. Without adequate preparation, the experience fails. After a few weeks, Marc is angry and convinced that his lived experience was not taken into account.

At 14, Marc enters a rehabilitation center. His stay is brief: he refuses medication and begins using cannabis to soothe his anxiety. His new social worker transfers him to a rehabilitation unit, cutting off contact with his family.

Marc builds a connection with Charles, his new social worker, who listens without judgment. Charles introduces him to nature-based therapy—kayaking, climbing, hiking. The experience helps reduce Marc's substance use and restores his confidence. For the first time, Marc begins to think about his future, though anxiety resurfaces when he considers adult responsibilities he doesn't yet understand.



Marc has lived in nearly ten foster families and has worked with seven different social workers. Each change, rarely explained, forces him to retell his story and erodes his trust. Psychological support begins to address his anxiety, but frequent moves and staff turnover cause him to miss appointments for weeks at a time.

Back in foster care, Marc meets with a child psychiatrist. He is diagnosed with attachment disorder, generalized anxiety disorder, and ADHD. Despite being on medication, he continues to struggle—stealing, fighting, and accumulating conflicts. His overwhelmed social worker recommends placement in a rehabilitation center.

Life in the center follows a strict schedule. The professionals, young and transient, are nicknamed "the interns." Marc runs away to see his friends, but is punished with isolation lasting up to five days, without activities or access to a shower. He experiences these sanctions as injustices and thinks: "Other teenagers my age don't have to go through this."

Marc agrees to join the Youth Qualification Program, which offers support until the age of 21. This stability reassures him —he knows he won't be alone after leaving the system. For the first time, he feels capable of imagining an independent future and reconnecting with his family.