The coronavirus disease 2019 (COVID-19) pandemic has exacerbated many challenges faced by children and young people including the **underserved** mental health crisis.

The pandemic has **turned the lives of all children and youth upside down**, particularly those living with non-communicable diseases (NCDs) and mental health conditions, members of the LGBTQIA+ and Indigenous communities, those living in poverty, and others who faced adversities and vulnerabilities long before COVID-19.

The State of the World’s Children 2021 report revealed that approximately 16 million adolescents aged 10-19 live with a mental disorder in Latin America and the Caribbean (LAC). Anxiety Disorder is the second leading cause of disability among 10-14-year-olds. It is no surprise that research during the first year of the pandemic revealed that 27% of adolescents in LAC reported experiencing depression and 15% experiencing anxiety; one in two young people reported having less motivation to do activities they usually enjoyed.

For years, society has turned a blind eye to these invisible illnesses that are just as critical to holistic health and wellbeing. As youth, we continue to ask where mental health and supportive policies fall on our policymakers’ priority list; COVID-19 has demonstrated that it is far below where it should be.

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It is within this context that we, as young people, write on behalf of all the children and other young people in the Caribbean who have found themselves unsupported and suffering in silence. We raise our voices, demanding an urgent whole-of-society, whole-of-government response to address this emerging mental health crisis. We have all learned some hard lessons during this pandemic. Let us seize this opportunity, without hesitation and urgently act by prioritising the mental wellness of today’s youth as an investment in our collective society’s future.

What is the Caribbean Youth Mental Health Call to Action?

The Caribbean Youth Mental Health Call to Action outlines key asks from youth across the region to transform existing mental health systems to better protect child and youth mental health and wellbeing.

The four calls, Leadership, Research, Regulations and Services, and their accompanying actions are informed by nearly 30 consultations with youth and youth organisations from across the Caribbean Region. The Healthy Caribbean Youth team also consulted with UNICEF Jamaica and the Pan American Health Organisation, to garner their feedback on and support for the Call to Action.

Each overarching call is accompanied by specific actions and implementation recommendations.

The Call to Action or specific elements of the calls align with global guidance including the World Health Organization’s Comprehensive Mental Health Action Plan 2013-2030, the recommendations outlined in the World Health Organization’s World Mental Health Report: Transforming Mental health for all, the Pan American Sanitary Conference Policy for Improving Mental Health and the World Health Organization’s LIVE LIFE implementation guide for suicide prevention. The call to action also highlights the asks from youth who attended the Caribbean Conference on Youth and Adolescent Health in 2019, who called for increased investment and research into youth mental health. If actualized, the call to action can inch us closer to achieving the 2030 Sustainable Development goals, specifically goal 3 which aims to reduce premature mortality through the prevention and treatment of non-communicable diseases as well as promotion of mental health and well-being.

At the end of the day, what do we want?

Multisectorial dialogue and action to transform mental health systems to better protect the mental health and wellbeing of children and youth in the Caribbean.

We hope to achieve this by building a groundswell of support around the call to action - by engaging with key stakeholders to inform them of youth-informed solutions to improve the mental health care systems across the Caribbean region and to continue to create and amplify youth-driven mental health advocacy in the Caribbean.

CALL #1:
Leadership: to prioritise integration of mental health into existing health policies and emergency plans and ensure youth are meaningfully engaged in policy development

Summary: We are calling on governments to recognise the unique mental health and wellbeing needs of children and youth in the Caribbean. In addition, youth should be given opportunities within government fora to articulate these needs and advocate on behalf of their peers.

Such action includes:

1. Establish/Strengthen multisectoral National Youth Health (sub) Committees to co-create national policies and ensure all child-health related concerns, including mental health and well-being are factored into government decision-making.

   Implementation Considerations:
   • A designated subcommittee could be integrated into existing Youth Committees/Councils/Parliaments. Where these do not exist, their formation is strongly encouraged.
   • This (sub) committee should be inclusive and integrate often overlooked groups as well as those who are most vulnerable including persons living with NCDs (PLWNCDs), persons living with disabilities (PLWD), members of LGBTQIA+, Indigenous communities, ethnic minorities, religious groups and persons of low socio-economic status.

2. Integrate mental health and well-being into youth-focused policies, health and wellness policies and disaster management plans.

   Implementation considerations:
   • Consultations with multiple stakeholders including civil society and vulnerable youth groups (PLWNCDs, PLWD, members of LGBTQ+, Indigenous communities, ethnic minorities, religious groups and persons of low socio-economic status) should be held to inform aforementioned policies.
   • The policies should be backed by evidence, free of conflict of interest and industry interference.
   • The policy should be stratified by age (e.g., young children, teens, young adults, middle-aged adults, elderly etc.) recognising that the mental health needs of these groups differ.
   • The policy should consider the unique needs and barriers faced by different genders
   • The policy should also focus on mental health within the school environment which would include mental health integrated within the school curriculum and extra-curricular activities that would support optimum mental health.
Summary: We call on government agencies/departments, private sector and education institutions to collaborate with policymakers and prioritise and/or strengthen mental health research and dissemination.

Such action includes:

1. **Partnerships with public and private universities, research councils and related entities to undertake and operationalise mental health and well-being research, specifically integrating mental health into population-based surveys and in depth qualitative studies to better understand the lived experiences faced by our population.**

2. **Disseminate research findings appropriately, translated into practice and integrated into policies and programmes.**

   **Implementation considerations:**
   - Governments, private sector and educational institutions should create more research-conducive environments in the Caribbean, thereby creating opportunities to facilitate and support independent and organisation-led research initiatives.
   - This research should be used to identify and proactively integrate best practices into decision-making to ensure that all policies and programmes developed and implemented in the country that prioritise the needs and explore the perspectives of children and young people, especially those with lived experiences.
   - Where possible resulting data should be open (public) and available for secondary use.

3. **Establish an innovation fund for mental health promotion that prioritises youth-focused, evidence-informed mental health interventions, research and advocacy projects**

   **Implementation considerations:**
   - Funds should be allocated from the local Ministry of Health and Education’s annual budget. Alternatively, funds can be sourced from health-neutral private entities without conflicts of interest.
   - An intergenerational subcommittee should be formed to coordinate the innovation fund activities, monitor and evaluate funds’ initiatives and projects, and disseminate a report with these findings to the relevant sponsors/partners.
   - Funds should be used for positive mental health sensitization, youth capacity building activities, and other youth focused mental health initiatives.
   - Research projects free from conflict of interest and industry interference should be executed through collaboration with both private and public institutions, health and non-health institutions, to support and incentivize the implementation of youth-driven, evidence-based mental health and wellness initiatives.
Summary: We call on governments to introduce, expand and enforce regulations related to in person and digital harassment, stigma, bias and the marketing and sale of health harming products.

Such actions include:

1. Revise, expand, and enforce law/policy related to cyber and in-person harassment to protect children and youth especially from bullying and sexual harassment and address the public stigma associated with seeking mental health support.

2. Revise, expand and enforce discrimination (stigma and bias) policy in school, workplaces and other places that children and youth occupy to protect them on the basis of their age, weight, gender, race, faith, ethnicity, disability, sexual orientation and socioeconomic status.

3. Create and implement policies to regulate the in-person and digital marketing of health-harming products such as unhealthy food and beverages, tobacco and vaping products, alcohol and bleaching products to children, youth and their parents including, emphasising their correlation to worsening mental health conditions and other non-communicable diseases.

Implementation considerations:

- The local Cyber Crime Unit could provide continued education on the seriousness of discrimination and harassment (especially cyberbullying) and the current laws that are in place to protect victims. These messages should be shared on media channels popular to youth.

- The Unit could be encouraged to engage in community and school education sensitisation sessions on the different forms of discrimination and harassment and its implications.
CALL #4:
Services: to support the mental health and well-being of children and youth

Summary: We are calling on governments to increase and improve the awareness and availability of school, work and community based mental health services.

Such actions include:

1. Improve access, availability and quality of school-based mental health services

   Implementation considerations:
   - The Ministries of Education should work together with the Ministry of Health and tertiary education institutions (such as The UWI) to ensure the presence of a guidance counsellor or master’s level clinical psychologist on-site and/or to increase the (primary, secondary and tertiary) student to mental health professional ratio in schools, for more effective management and support and implement protocol and referral systems in place to manage issues of concern among students and staff.
   - The Ministries of Education should work together with the Ministry of Health to provide psychological first aid training to students, parents, teachers, coaches, law enforcement officers and other key stakeholders within the community that have an active role in the lives of young people.

2. Introduce or expand mental health curriculum in primary, secondary and tertiary institutions including medical schools.

   Implementation considerations:
   - The Ministry of Education, along with the Ministry of Health should work together to expand the education curriculum at all levels to include mental health education that also encompasses practical healthy mental health habits e.g coping skills, stress management
   - Expand school curriculum to include social media training to increase youth awareness of the consequences of virtual actions

3. Introduce, review and improve workplace-based mental health support and services and insurance schemes or policies that cover these services and related medications.

   Implementation considerations:
   - Institutionalise workplace wellness committees that prioritise mental health and wellness and guarantee youth representation on the committee to capture youth concerns and solutions.
   - The Ministry of Health along with the Ministry of Finance should work together to standardise and/or offset mental health care costs to increase affordability and prevent insurance companies from excluding mental health services and medications in policies.

4. Review, revise and improve community based mental health services.

   Implementation considerations:
   - A needs assessment as well as a review and revision of services currently offered should be conducted by the Ministry of Health (if not done already) to ensure that mental health services are accessible to all, especially to those in vulnerable conditions including youth, children in state care, those of care delivered to populations experiencing homelessness, those of lower-socioeconomic status, those of the LGBTQ+ and Indigenous communities and persons living with disabilities and NCDs.
   - Establish one regulatory board of mental health professionals and a referral system in the Caribbean and/or increased collaboration and engagement among in-country psychological associations and similar organisations throughout the Caribbean to better support the needs of all citizens across the Caribbean.