

## Portrait of Health in All Policies in Canada: Advancing Infant, Child and Youth Mental Health through the Atlantic Summer Institute's *Upstream Investment Policy Brief*

CASE SUMMARY

2025

### FOREWORD

This publication introduces the work of the Atlantic Summer Institute on Healthy and Safe Communities in promoting Mental Health in all Policies through its *Upstream Investment Policy Brief*. This case summary is part of a series developed by the Canadian Network for Health in All Policies (HiAP) to document the current state and variety of HiAP initiatives being implemented in Canada. It is intended for public health actors and other actors interested in HiAP, and aims to advance knowledge of HiAP, highlight effective practices, and promote the exchange of ideas across Canada.

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### KEY MESSAGES

- The Atlantic Summer Institute on Healthy and Safe Communities (ASI) is a leading example of civil society advancing Health in All Policies in Canada. Through its strategic focus on infant, child, and youth mental health, ASI promotes upstream, intersectoral policy solutions that embed mental wellbeing across sectors, levels of government, and community systems.
- The *Upstream Investment Policy Brief* proposes a strategic roadmap and a set of concrete, evidence-informed recommendations to encourage intersectoral, upstream policy development that supports mental wellbeing across the lifespan.
- The Policy Brief contributed to key outcomes, including the development of a guiding Mental Health in all Policies framework and the successful advocacy for Motion 83, adopted by the Prince Edward Island Legislative Assembly in March 2022. The motion calls on the government to fundamentally shift its approach to healthy public policy and to implement ASI's recommended upstream investments outlined in the Policy Brief.



## 1 ABOUT THIS SERIES

This case summary is part of a series of cases prepared by the NCCHPP as part of the activities of the Canadian Network for Health in All Policies (CNHiAP).<sup>1</sup> It is intended to document the diversity of Health in All Policies (HiAP) initiatives in Canada and the state of implementation activities. Promoted by the World Health Organization (WHO), HiAP is an intersectoral approach to policy making that facilitates action on the social determinants of health and improvement of health, wellbeing and equity. It is based on the recognition that health is primarily determined by factors outside the health sector and that, therefore, population health is not only a product of health sector policies and programs but is largely determined by policies in other governmental sectors.

The objective of this project is to produce a portrait of HiAP practice in Canada across different jurisdictions. The cases will outline HiAP initiatives, covering their origins, mission, objectives, governance structures, implementation mechanisms, achievements, funding sources, and evaluation frameworks. This series aims to enhance public health professionals' and decision makers' understanding of HiAP initiatives in Canada, promote promising practices, and foster connections among actors to strengthen the impact of HiAP on public policy and population health.

### BOX 1. WORLD HEALTH ORGANIZATION'S DEFINITION OF THE HIAP APPROACH

**"Health in All Policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity. It improves accountability of policymakers for health impacts at all levels of policy-making. It includes an emphasis on the consequences of public policies on health systems, determinants of health and well-being" (World Health Organization & Finland Ministry of Social Affairs and Health, 2014, p. 2).**

<sup>1</sup> To learn more about the CNHiAP, visit: <https://ccnpps-ncchpp.ca/canadian-network-for-health-in-all-policies-cnhiap/>

## 1.1 Methodology

### Case Selection

Three criteria were used for case selection, and the initiatives had to meet all three criteria to be considered. For this project, a HiAP initiative:

1. Fosters intersectoral collaboration and engagement
  - Involves at least two partners from different government sectors and may also involve non-governmental sectors.
  - Aims to break down silos and build new partnerships to coordinate action on the social determinants of health.
2. Promotes health, wellbeing, and equity
  - Incorporates health, wellbeing and equity considerations into policies, programs, and decision-making processes.
  - Implicitly or explicitly focuses on health, wellbeing and equity.
3. Fosters governance structures, mechanisms and processes to facilitate policy coordination
  - Instigates changes in relationships and decision-making processes across sectors and potentially non-governmental organizations from the private, public or third sector.
  - Establishes or enhances governance structures and/or mechanisms for intersectoral collaboration and integration of health, wellbeing and equity considerations.

Since HiAP is an approach rather than a specific model, the focus, composition and structure of HiAP initiatives vary from setting to setting. Therefore, this project aimed to document various HiAP approaches across different cases, including newly established, long-standing, non-governmental organization-led, and traditional government-led initiatives. It also aimed to account for diversity in geographical location, the level at which the HiAP approach is implemented (e.g., federal, provincial, regional, municipal), and the primary focus of the initiative or its target scope (e.g., national, provincial, regional, municipal). Initiatives involving CNHiAP members were also prioritized.

### Documentation

The information for this series was initially gathered through grey literature searches, drawing on publicly available documentation for each respective case. Subsequently, key informants from each case were contacted to confirm the findings and provide any additional data. The data was collected between April 2024 and April 2025.

## 2 ABOUT THE ATLANTIC SUMMER INSTITUTE INITIATIVE

### 2.1 Origin and Objectives

#### About the Atlantic Summer Institute

The Atlantic Summer Institute on Healthy and Safe Communities (hereafter Atlantic Summer Institute [ASI]) is a bilingual, non-governmental organization (NGO) with a secretariat based in Prince Edward Island (PEI). ASI plays a catalytic role in advancing Mental Health in All Policies (MHAP) in the Atlantic region.

Since its creation in 2003 and incorporation in 2008, ASI has worked to catalyze social change and build more inclusive, equitable communities across Atlantic Canada, which includes PEI, Nova Scotia, New Brunswick, and Newfoundland and Labrador. Governed by a Board of Directors with representatives from all four Atlantic provinces and supported by the health promotion consultancy The Quaich Inc., ASI brings together a diverse array of stakeholders<sup>2</sup> from public policy, health promotion, social work, youth engagement, and more. Its mission is operationalized through the coordination of programs, partnerships, and knowledge-sharing initiatives designed to advance upstream, collaborative approaches to community health and wellbeing. Operational funding for all ASI's work is also secured each year through requests to provincial and federal governments, foundations, and private sector companies to support the annual Policy Forum.

Initially focused broadly on the social determinants of health and the root causes of crime, ASI pivoted in 2014 to address infant, child and youth mental health, responding to emerging regional priorities. Since 2015, ASI has prioritized and advocated for an upstream approach, working to ensure mental health considerations are integrated into policymaking across all levels of government and society. This commitment is reflected in its *Upstream Investment Policy Brief* (hereafter the Policy Brief), *Placing Infant, Child and Youth Mental Health Promotion at the Forefront*, which outlines a strategic roadmap and a set of concrete, evidence-informed recommendations to guide intersectoral, upstream policy development. Through this initiative, ASI promotes proactive investments in mental health to support the wellbeing of infants, children, and youth, helping to embed mental health considerations across sectors, over generations, and through proactive policy interventions.

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<sup>2</sup> ASI is using the term stakeholder and multistakeholder in reference to the 2014 WHO document, Health in All Policies (HiAP) Framework for Country Action. This document defines multistakeholder as a term "referring to actors outside the government (such as non-governmental, private sector, professional, or faith-based organizations)." ASI acknowledges that the term stakeholder is politically sensitive given the context of its colonial origins, when the term stake referred to a resource or land claim made by colonizers on Indigenous land. Now, stakeholder is more commonly understood as a party with a vested interest or concern in a given issue. They will continue to use the terms stakeholder and multistakeholder in alignment with the WHO framework, acknowledging their potentially sensitive nature. To learn more, see: <https://www.rmdelaney.com/blog/da-news/words-are-important-they-can-wound-or-they-can-heal/> or <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5020149/>.

## Translating MHiAP into action: The Policy Brief

While ASI does not implement policy directly, it plays a catalytic role in advancing MHiAP through advocacy, capacity building, stakeholder engagement, and knowledge mobilization. A cornerstone of this work is the Upstream Investment initiative, which culminated in the development of the [Policy Brief](#).

Building on earlier work on mental health promotion in Canada and recognizing the ongoing focus on crisis response rather than prevention, ASI brought together stakeholders and the wider community to co-develop the [2017 Call to Action](#), guided by emerging evidence. This group included expertise from federal, provincial, municipal, and Indigenous governance to ensure broad relevance and applicability. ASI had been involved since 2014 in a collaborative effort initiated by the Canadian Mental Health Association, Nova Scotia Division, working alongside researchers and practitioners to address the increasing need for upstream, intersectoral approaches to child and youth mental health promotion in Atlantic Canada through social and emotional learning and knowledge translation.

Building on this foundation, ASI partnered with [A Way Home Canada](#) and other national collaborators in 2020–2021 to produce the Policy Brief. Serving as both a mobilization tool and a policy guide, the Policy Brief reinforces ASI's role as a catalyst and connector. It advocates for mental health as a shared societal responsibility and illustrates ASI's broad commitment to advancing MHiAP through collaborative, upstream efforts.

Rooted in the HiAP approach, the Policy Brief sets out four priority areas that collectively support MHiAP:

1. A whole-of-government approach to embed mental health considerations across all public policies.
2. A whole-of-society approach through the creation of a multisectoral platform for collaboration.
3. A whole-of-community approach to support grassroots and community-led mental health initiatives.
4. A sustainable and integrated funding model to support long-term, cross-sectoral change.

Table 1      Policy Brief Contributors

<ul style="list-style-type: none"> <li>• A Way Home Canada</li> <li>• National Collaborating Centre for Determinants of Health</li> <li>• National Collaborating Centre for Healthy Public Policy</li> <li>• Atlantic Policy Congress, First Nations Chiefs Secretariat</li> <li>• Mental Health Commission of Canada</li> <li>• Canadian Families and Correction Network</li> <li>• Raising the Villages, Nova Scotia</li> <li>• IWK Children’s Hospital</li> <li>• Nova Scotia Health</li> <li>• PEI Dept. of Health and Wellness</li> <li>• Independent Researchers and Consultants</li> <li>• Institut national de santé publique du Québec</li> </ul>
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2.2    Governance and Implementation

ASI actively promotes and supports the uptake of the Policy Brief to advance the adoption of MHiAP across Atlantic Canada. The ASI Board of Directors supported by The Quaich Inc. are responsible for overseeing this initiative.

A roadmap to MHiAP implementation

The Policy Brief serves as a strategic roadmap for implementing the MHiAP approach, aligning with the four identified priorities for action. For each area, it makes a call for action and offers recommendations to governments and non-governmental sectors (ASI, 2022):

1.    Mental Health in All Policies – A whole-of-government approach

To strengthen mental health promotion in Atlantic Canada, the Policy Brief recommends that governments adopt a coordinated, measurable, and cross-sectoral approach to address the current fragmentation of strategies. Implementing a whole-of-government approach would foster collaboration across sectors aimed at advancing child and youth mental health. To ensure effective policy development, it is recommended that Atlantic Canada adopt a MHiAP Framework, based on the HiAP Framework. This approach would enable a systematic assessment of policy impacts on mental health and inform future decisions (ASI, 2022).

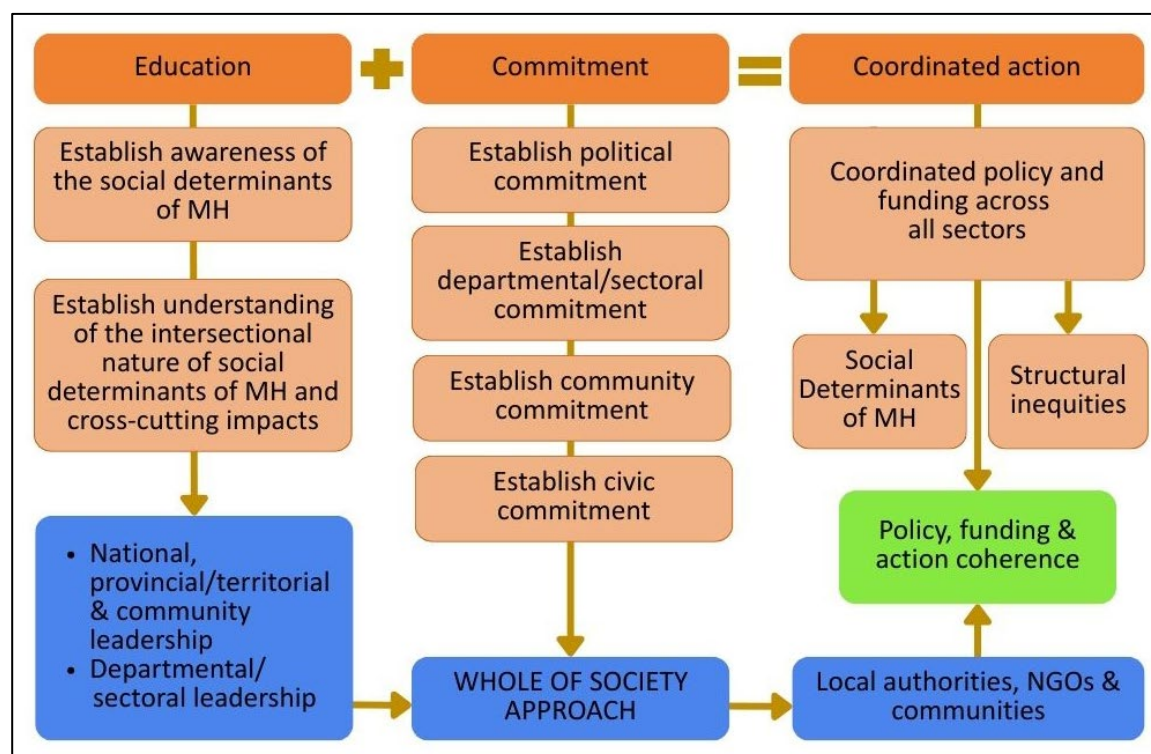
To translate this into practice, ASI developed a [MHiAP Implementation Framework](#) and implementation guidelines, refining them through a workshop at the ASI 2023 Policy Forum (see Figure 2). Rooted in research on HiAP, resilient communities, and mental health promotion, the framework integrates the [Circle of Health](#)<sup>3</sup> and embraces a co-learning approach to capacity building.

<sup>3</sup>    The Circle of Health is a value-based health promotion tool that incorporates the Ottawa Charter and the Indigenous medicine wheel. The Circle of Health was developed in Prince Edward Island in 1996 and is used internationally.  
 National Collaborating Centre for Healthy Public Policy  
 Institut national de santé publique du Québec



The model consists of three key steps: first, raising awareness about MHiAP and its importance; second, securing commitment at multiple levels for a coordinated MHiAP approach; and third, developing a coordinated action plan to ensure alignment of policy development, funding, resource allocation, and actions that reflect the systemic changes required for effective implementation (ASI, 2024a).

**Figure 1 Mental Health in All Policies Implementation Framework**



Adapted from ASI, 2024a.

## 2. Multistakeholder Action - A whole-of-society approach

To effectively advance child and youth mental health in Atlantic Canada, the Policy Brief recommends that a multistakeholder approach be adopted, recognizing that health is shaped by social and economic factors beyond the health sector. Governments, the private sector, civil society, and communities must collaborate to drive meaningful change. It is recommended to establish an interagency council as a central platform so as to align policies, coordinate funding, and advance MHiAP priorities. This council could also be replicated at the local level to enhance impact. The platform would (ASI, 2022):

- Guide priorities and strengthen system coordination
- Support co-design of policies, programs, and funding
- Raise public awareness and mobilize knowledge
- Provide strategic, evidence-based advice to governments

By uniting diverse stakeholders, this platform would ensure long-term alignment with the MHiAP Framework and influence future policies (ASI, 2022).

### **3. Investment in Community Action - A whole-of-community approach**

To enhance child and youth mental health, the Policy Brief recommends that communities be recognized and supported for their role in providing essential services like recreation, childcare, housing, and inclusive programs. Greater consultation and knowledge-sharing will help scale best practices and maximize impact. Building community resilience is key in a post-COVID world. To achieve this, policymakers could (ASI, 2022):

- Map existing community assets to identify strengths and gaps
- Enhance strategic planning and coordination for upstream investments
- Strengthen community-based mental health supports
- Foster cross-sector collaboration to address systemic challenges

Investing in community-driven strategies will promote sustainable mental health outcomes and long-term resilience (ASI, 2022).

### **4. Sustainable and integrated funding model**

Current funding for child and youth mental health is fragmented, short-term, and fails to support sustainable, cross-sectoral solutions. To effectively address this urgent issue, the Policy Brief recommends a funding model based on (ASI, 2022):

- Core/Multi-Year Funding: Flexible, long-term operational funding to ensure continuity, stability, and the ability to leverage additional resources.
- Innovation & Community-Led Solutions: Support for experimentation and adaptation to evolving needs, recognizing that innovation starts locally.
- Research & Evaluation: Dedicated funding for evidence-based approaches, ensuring continuous improvement and accountability.
- Outcome-Based Funding: Streamlined reporting aligned with a MHiAP Framework to measure meaningful impacts.
- Cross-Departmental Fund: A collaborative funding pool across government departments, targeting mental health promotion, prevention, and early intervention.

Without integrated, cross-sectoral funding mechanisms, siloed approaches will persist, limiting progress on social determinants of health and long-term mental wellbeing (ASI, 2022).



## Mobilizing the Policy Brief

Following the publication of the Policy Brief, a knowledge mobilization strategy was launched to promote its content and strengthen intersectoral partnerships. To this end, ASI held a series of workshops in 2022 and 2023 across the four Atlantic provinces, in collaboration with provincial organizations engaged in mental health and social policy. Reports from these workshops were shared with participants and submitted to the Council of Atlantic Premiers. They are available online at [asi-iea.ca](https://asi-iea.ca).

Mobilization also continued through ASI's annual Policy Forums, which bring together diverse sectors to advance a shared agenda around intersectoral mental health policy. These forums serve to highlight community initiatives, build collective capacity, and support the implementation of the Policy Brief's recommendations.

In addition, the Youth Leadership Program, integrated into each Policy Forum, fosters youth leadership, intergenerational learning, and the development of collaborative networks that help move forward the Policy Brief's upstream policy priorities by developing knowledge, skills and resources for community action on upstream investment in the mental health of infants, children, and youth throughout Atlantic Canada and beyond (ASI, n.d.).



Youth Leadership Program; ASI, 2024.

## Testing the recommendations of the Policy Brief

In 2022, ASI received funding to advance this initiative by testing the Policy Brief in PEI. A three-year pilot project, titled "Investing Upstream: Placing Infants, Children, and Youth at the Forefront of Lifelong Mental Well-Being", was launched in PEI to implement the recommendations outlined in the brief, focusing on the four priority areas.

The project objectives were to (Nishka Smith Consulting, 2024):

- Establish relationships and deepen partnerships with elected officials, government departments and organizations representing diverse cultures, languages and sectors in support of their mutual commitment to advocating for and demonstrating the effectiveness of policies that promote infant, child and youth mental health in PEI.
- Implement a knowledge mobilization strategy in PEI prompting an intersectoral response, moving from awareness to action that advances recommendations arising from the ASI Policy Brief and can serve as a model for Atlantic Canada.
- Increase the capacity of all PEI stakeholder organizations to implement and sustain recommendations arising from the ASI Policy Brief in government and community systems.
- Evaluate the impact of knowledge mobilization on achieving the goals of knowledge capture and dissemination.

A logic model was developed to structure this project, illustrating the connections between the objectives, planned activities, target groups, outputs, and the intended short- to long-term outcomes. The model supports planning, execution and evaluation of the 5 key components listed in the table below with a selection of related activities and expected short-term outcomes.

**Table 2** PEI Project Logic Model – Key components, examples of related activities and short-term outcomes

<b>Key components</b>	<b>Activities</b>	<b>Expected Short-term Outcomes</b>
Leadership and Accountability	<ul style="list-style-type: none"> <li>• Develop Project Advisory Committee, Communications Committee, Terms of Reference, clarify roles and responsibilities.</li> <li>• Set up workplan, timelines, and meetings of Project Team and its evaluation.</li> <li>• Report to ASI Board of Directors on ongoing basis.</li> <li>• Submit required reports and plans for next steps to PEI Alliance for Mental Well-Being.</li> </ul>	<ul style="list-style-type: none"> <li>• Project leadership by ASI demonstrates accountability and models intersectoral collaboration with diverse stakeholders, building capacity and mobilizing action.</li> </ul>
Strengthening partnerships	<ul style="list-style-type: none"> <li>• Host a meeting of key partners to form an Advisory Committee to agree on a shared vision; guide and monitor the uptake of the policy brief over the next 3 years.</li> <li>• Recruit provincial champions to lead provincial knowledge mobilization plan.</li> <li>• Collaborate with partners in offering provincial and local events, meeting with governing bodies and key influencers, and disseminating materials through local channels.</li> </ul>	<ul style="list-style-type: none"> <li>• Strong partnerships advocate for uptake of investment in upstream policies for mental health and demonstrate increased capacity for intersectoral collaboration.</li> </ul>
Knowledge mobilization	<ul style="list-style-type: none"> <li>• Meet with the Council of Atlantic Premiers to present the Policy Brief to create awareness of PEI pilot.</li> <li>• Create print and social media campaigns that widely share the context, content and recommendations of the Policy Brief with the general public.</li> <li>• Host provincial workshops to share the Policy Brief and proposed knowledge mobilization plan.</li> <li>• Engage with stakeholders from communities, governing bodies and the private sector in implementing the knowledge mobilization plan.</li> <li>• Communicate with policy makers to advocate for upstream investment.</li> </ul>	<ul style="list-style-type: none"> <li>• The knowledge mobilization strategy increases awareness, interest and investment in upstream policies and programs that support infant, child and youth mental health.</li> </ul>

**Table 2** PEI Project Logic Model – Key components, examples of related activities and short-term outcomes (continued)

<b>Key components</b>	<b>Activities</b>	<b>Expected Short-term Outcomes</b>
Capacity building	<ul style="list-style-type: none"> <li>● Assess readiness, capacity and training needs for engagement in intersectoral action for mental health promotion.</li> <li>● Assess policy maker readiness and commitment to advancing Mental Health in All Policy implementation.</li> <li>● Work with educational settings and HR departments to develop training strategies for intersectoral collaboration.</li> <li>● Deliver and oversee training throughout PEI.</li> <li>● Convene annual Atlantic Canada knowledge exchange event to promote sharing of best practices and promote large scale-up of Policy Brief recommendations.</li> </ul>	<ul style="list-style-type: none"> <li>● The capacity of the PEI stakeholder organizations to implement and sustain recommendations arising from the ASI Policy Brief in government and community systems is strengthened.</li> </ul>
Research	<ul style="list-style-type: none"> <li>● Develop a request for proposal (RFP) for participatory evaluation of the knowledge mobilization strategy.</li> <li>● Develop project's success indicators and framework.</li> <li>● Develop detailed evaluation plan and instruments to monitor process and outcomes of knowledge mobilization.</li> <li>● Collect and analyze knowledge mobilization evaluation data.</li> <li>● Analyze processes of policy brief development and mobilization.</li> <li>● Report evaluation findings to the Advisory Committee and participants quarterly to strengthen the knowledge mobilization strategy.</li> <li>● Create documents, reports, guidebook for implementation, and disseminate.</li> </ul>	<ul style="list-style-type: none"> <li>● A Participatory Action Research evaluation supports collection of data contributing to evidence-based decision making, new knowledge products, and accountability throughout the project.</li> </ul>

The project is overseen by the ASI Board of Directors, managed by The Quaich Inc., and guided by an intersectoral Advisory Committee.

The Board provides strategic direction, monitors the budget, supports partner engagement, ensures bilingual service delivery, and promotes participation. The Board was accountable to the PEI Alliance for Mental Well-Being<sup>4</sup> (PEIAMWB) for funding and deliverables (ASI, 2025).

The Board also established the PEI Project Advisory Committee, chaired by a Board representative, supported by ASI staff, and composed of members from NGOs and government, including the PEI Special Olympics, UPEI Psychology, PEI Advisory Council on the Status of Women, PEI Native Council, PEI Coalition for Women in Leadership, Early Childhood Development Association, UPEI Student Council, UPEI Faculty of Medicine and PEI Department of Health & Wellness. The Advisory Committee ensures alignment with project goals, recruits provincial champions, supports knowledge exchange through events and workshops, assists with community and government engagement, advises on implementation and partnerships, supports new members, and guides youth involvement (ASI, 2025).

Key outcomes of the pilot project in PEI to date include:

- The unanimous approval of Motion 83 by the PEI Legislative Assembly in 2022, which led to increased dialogue among elected officials about upstream mental health programming.
- ASI piloted a workshop to engage community advocates in promoting upstream mental health investments, which was later refined into a more interactive format. The revised workshop, "Mental Health is More Than You Can Imagine," received positive feedback during the ASI Policy Forum 2024, and the Advisory Committee is now planning to engage in a train-the-trainer approach to support additional facilitators, as a way to expand its delivery across PEI and throughout Atlantic Canada.
- The ASI PEI Project Advisory Committee has plans to launch a social media campaign based on the theme: All Policies Impact Mental Health and to extend the reach of these messages to the public and in educational sessions with NGO's, the business community, the Public Service Commission, municipal governments and standing committees of the provincial legislature.
- As of April 2025, a second phase of the project has been launched. This two-year phase (2025-2027) updates the objectives and terms of reference from the first phase and focuses on enhanced leadership, systemic transformation, and regional impact through knowledge sharing (ASI, 2025).

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<sup>4</sup> The PEIAMWB was founded in 2021 as an incorporated non-profit organization by the Government of PEI. It was created in response to community-informed recommendations to enhance and accelerate preventive mental health efforts (ASI, 2025).

Funding

This initiative was supported through a multi-modal funding model, combining distinct funding sources aligned with complementary objectives:

- Initial mobilization efforts, including the development of the Policy Brief, were funded through a one-year grant from the Public Health Agency of Canada (PHAC)'s Intersectoral Action Fund (ISAF).
- To build on this momentum, the three-year implementation pilot (2022–2025) in PEI received support through the Positive Change Grant Program of the PEIAMWB. This program funds initiatives across the province that strengthen resilience and promote mental wellbeing.
- In February 2025, ASI received renewed funding from PHAC's ISAF, in the form of a two-year grant aimed at continuing the foundational work in PEI and expanding the initiative across the other Atlantic Provinces.

2.3 Achievements

ASI has successfully carried out multiple actions to advance the uptake of the Policy Brief with the aim of promoting public policy in Atlantic Canada that fosters the mental health of children and youth. A selection of these actions is detailed in the table below.

Table 3 Selection of Successful ASI Actions

<p><b>Created the ASI Mental Health in All Policies Framework</b></p> <ul style="list-style-type: none"> <li>• Conducted a literature review of programs aimed at building capacity for implementing MHiAP. The review identified education as a crucial first step and led to the creation of a list of relevant training opportunities. Based on these findings, a Framework for MHiAP was developed, emphasizing the importance of fostering resilient communities as a foundation. The Framework outlines what MHiAP implementation entails and provides practical guidelines, aligned with the recommendations of the Policy Brief.</li> </ul>
<p><b>Mobilized the Policy Brief through the annual policy forums</b></p> <ul style="list-style-type: none"> <li>• A series of round table discussions on investing upstream at the 2023 Atlantic Summer Institute Policy Forum promoted engagement and knowledge-sharing among stakeholders.</li> <li>• A workshop was held at the ASI Policy Forum 2023 to test and refine the MHiAP Framework.</li> <li>• Panel discussions related to policies aligned with the four priority areas of the Policy Brief were held at the 2023 and 2024 ASI Policy Forums. The panel discussions provided a snapshot of initiatives that are aligned with the four priority areas of the Policy Brief across Atlantic Canada and through the Canadian Network for HiAP and demonstrated momentum for upstream policy development in Canada. Plans are underway to continue the conversation at the 2025 ASI Policy Forum.</li> <li>• Workshops fostering upstream investment, governance and collaborative leadership, and social and emotional learning in the community were held at ASI 2024.</li> </ul>



**Table 3 Selection of Successful ASI Actions (continued)**

**Tested the Policy Brief in PEI**

- Presentations made to the Official Opposition (Green Party) caucus and the Third Party (Liberal) caucus, led to unanimous approval of Motion 83 by the PEI Legislative Assembly on March 24, 2022. This motion calls on the government to fundamentally change the way it develops healthy public policy and to implement ASI's recommendations on upstream investment, as outlined in the Policy Brief.
- Piloted a workshop to engage community advocates in promoting upstream mental health investments in February 2024, which was later refined to a more interactive format, offered at ASI 2024 and again refined and offered in November 2024. Follow-up surveys in March 2025 reported positive impacts in participant organizations.
- Follow-up meetings held with key stakeholders, including the Minister of Health and Wellness, Standing Committee on Health and Wellness, and Deputy Ministers of Social Policy, resulted in productive discussions and commitment for implementation of the Policy Brief.
- Formation of a PEI pilot project Advisory Committee with multi-sectoral representation, fostered collaboration, expanded partnerships, diverse perspectives and capacity building through co-learning.
- The addition of two more years of funding to continue the work of the PEI project and scale up the initiative in the other Atlantic provinces.

## 2.4 Evaluation

An annual comprehensive evaluation monitors both the Policy Brief knowledge mobilization strategy and the PEI pilot project. Using a realist evaluation approach, it explores how knowledge mobilization and capacity-building efforts function across different contexts, identifying factors that enable or limit their effectiveness.

To date, two annual evaluations have been completed (2023 and 2024). The evaluation framework is based on the key components of the PEI project logic model. Led by an external evaluator, the evaluation process is designed to be adaptive, evolving alongside project activities to address the shifting needs and priorities of partners.

In its first year (2022-2023), the evaluation for the Policy Brief knowledge mobilization strategy and the PEI pilot project placed particular emphasis on the knowledge mobilization component. The second year (2023-2024) put more emphasis on measuring the progress of the capacity building component.

Key findings from the second-year evaluation (2023-2024) include the following (Nishka Smith Consulting, 2024):

- The PEI Project Advisory Committee met regularly and established working groups focused on communication and workshop development.
- Most members of the PEI Project Advisory Committee expressed satisfaction with project management and felt their contributions were respected.
- Partnerships were built or strengthened with over a dozen organizations, including government bodies, NGOs, and community groups.

- The “Working Together and Thinking Upstream” workshop was delivered to 24 organizations, helping to broaden awareness and engagement.
- The project team presented at key national and provincial forums.
- Surveys showed a marked increase in workshop participants’ understanding of upstream approaches and the MHiAP framework.
- 79% of ASI Policy Forum attendees felt inspired to take action on upstream mental health.

Areas for improvement include (Nishka Smith Consulting, 2024):

- Enhancing existing partnerships and exploring opportunities to engage additional stakeholders, including representatives from healthcare and government, while focusing on promoting diversity.
- Strengthening knowledge mobilization efforts by allocating dedicated communication resources and improving the accessibility and clarity of key materials.

Data collection methods include:

- Administrative tracking
- Documentation review
- Consultations with project management
- Workshop surveys
- Focus groups and surveys with the Advisory Committee

## KEY TAKEAWAYS

- ASI’s Policy Brief translates MHiAP from concept to practice. By developing a comprehensive policy brief and implementation framework, ASI has demonstrated how civil society can catalyze upstream, intersectoral policy action that embeds mental health promotion across all levels of government and sectors.
- The Policy Brief promotes collaborative governance to advance infant, child and youth mental health. Through whole-of-government, whole-of-society, and whole-of-community approaches, ASI fosters integrated strategies that align diverse actors, government, NGOs, community organizations, and youth, with respect to the co-creation of mental health-promoting policies.
- Testing implementation of the Policy Brief in PEI strengthens policy impact and scalability. The PEI pilot illustrates how a localized application of the Policy Brief can lead to concrete outcomes, such as legislative motions, community engagement, and capacity building, offering a model for other jurisdictions across Canada.
- By promoting sustainable funding, systemic collaboration, and inclusive engagement, ASI’s Policy Brief supports the advancement of long-term mental wellbeing and positions early intervention as a shared public responsibility.

## REFERENCES

In addition to personal interviews with key informants, the following sources were used to help inform this case summary.

- Atlantic Summer Institute on Healthy and Safe Communities. (2022). *Upstream Investment: Placing infant, child, and youth mental health promotion at the forefront*. <https://asi-iea.ca/wp-content/uploads/2023/03/ASI-Policy-Brief-2022-03-09.pdf>
- Atlantic Summer Institute on Healthy and Safe Communities. (2024a). *A MHAP Implementation Framework*. <https://asi-iea.ca/wp-content/uploads/2024/04/MHiAP-Revised-2024-02-06.pdf>
- Atlantic Summer Institute on Healthy and Safe Communities. (2024b). *The Enduring Spirit of Collaboration – Celebrating 20 Years with ASI*. <https://asi-iea.ca/en/asi-2024-policy-forum/>
- Atlantic Summer Institute. (2025). *Implementation of Upstream Mental Health Promotion in PEI – a catalyst for Atlantic Scale up - Terms of Reference*.
- Atlantic Summer Institute on Healthy and Safe Communities. (n.d.). *About ASI*. <https://asi-iea.ca/en/about-the-asi/>
- Joint Action on Mental Health and Wellbeing. (2017). *Mental health in all policies: Situation analysis and recommendations for action*. [https://health.ec.europa.eu/document/download/ba635845-7207-46ad-a34c-6b3b1b2429e3\\_en](https://health.ec.europa.eu/document/download/ba635845-7207-46ad-a34c-6b3b1b2429e3_en)
- Leading Impact. (2023). *Proposed Workplan, prepared for ASI PEI Advisory Committee, September*.
- Nishka Smith Consulting. (2024). *Investing Upstream: Placing infants, children, and youth at the forefront of lifelong mental well-being – a shift in policy direction for Prince Edward Island - Evaluation Report 2023-2024*.
- Tamarack Institute. (2017). *Tool – Collective Impact at a Glance*. <https://www.tamarackcommunity.ca/hubfs/Collective%20Impact/Tools/CI%20at%20a%20Glance%20Tool%20April%202017.pdf>
- World Health Organization and Finland Ministry of Social Affairs and Health. (2014). *Health in All Policies: Helsinki statement, framework for country action: The 8th Global Conference on Health Promotion*. [https://iris.who.int/bitstream/10665/112636/1/9789241506908\\_eng.pdf](https://iris.who.int/bitstream/10665/112636/1/9789241506908_eng.pdf)

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# Portrait of Health in All Policies in Canada: Advancing Infant, Child and Youth Mental Health through the Atlantic Summer Institute's *Upstream Investment Policy Brief*

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