have a permanent doctor, and more likely to need care but not receive it. 70% of students have said that they have heard verbal attacks on LGBTQ+ youth at school and 10% of attacks were from teachers (mygsa.ca). There needs to be more studies done on diverse groups in Canada such as the LGBTQ+ community in order to provide more effective and respectful treatment. (Mental Health Commission of Canada, 93). By the government implementing this, more LGBTQ+ youth will graduate from high school and post secondary. This will also improve the amount of negative stigma and discrimination towards the LGBTQ+ community (Berman, 28).

The Canadian government should provide more easily accessible mental health services for youth such as treatment from their primary care doctor, support groups, and education (Mental Health Commission of Canada, 52). Setting timelines and removed or reduced financial barriers would help to achieve mental wellness in Canadian youth significantly (Mental Health Commission of Canada, 63). Hospitals need to provide mental health patients and their families with the proper information to receive treatment after being released and need to go back for follow ups (Mental Health Commission of Canada, 69). This will help reduce suicide attempts and the amount of completed suicides (Berman, 28). The Canadian government needs to set goals in term’s of treatment and trials (Mental Health Commission of Canada, 63). This will help youth to graduate high school with the ability to make good decisions, solve problems, and gain high self esteem (Berman, 36). Although the government is providing access for teens to find out about access to mental health treatments they are doing nothing to help teens receive help when needed. FNMI teens need treatment that respects the aspects and religious beliefs of their culture. LGBTQ+ teens need treatment that respects and effectively serves their