

# 2824 MENTAL HEALTH CALLS OF ACTION

Calls of Action to the Government of Canada and Government of Ontario for 2024 to Improve Mental Health and Increase Resources and Support

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The views expressed in this calls of action document are the views and opinions of Joshua Bell through his work as a community leader and mental health advocate alone and are not tied to, influenced by the views of, or coerced by any political party, federal or provincial organization, or any other group or organization. The decisions and advocacy calls made in this document have been informed through a year's (2023 and previous years) worth of conversations with members of the community across Ontario and Canada and through attending mental health conferences/events in 2023 as well as through personal experiences and opinions. The mental health information and recommendations found within should not be taken as medical or professional advice. If you are in a mental health crisis, please reach out and make that connection or speaker to a trusted person in your life.

# MENTAL HEALTH CRISIS LINES

Your mental health is important. If you are in a mental health crisis or need support, please contact a crisis line.

If you are in immediate danger or if it is an immediate emergency, please call 9-1-1.

Ontario Crisis Line (ConnexOntario)

Phone: 1-866-531-2600

Canadian Suicide Prevention Line

Phone: 988 Message: 988

First Nations and Inuit Hope for Wellness

Phone: 1-855-242-3310

LGBT YouthLine

Message: 647-694-4275 (only available from Sunday-Friday 4pm EST to 9:30pm EST)

Kids Help Phone

Phone: 1-800-668-6868

Message: CONNECT to 686868

Good2Talk Ontario Phone: 1-866-925-5454

Message: GOOD2TALKON to 686868



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# WELCOME AND OVERVIEW

Mental health care and access to care is a human right just as much as access to care for a physical injury or disability.

As the times in Canada change and the challenges that many Canadians face change with it, the support and the need for mental health services and care are going to change with it. The forms of care that are being delivered and the state of these systems need to be reevaluated and corrected to ensure that people can receive the best care in the shortest amount of time possible.

Through this document entitled 2024 Mental Health Calls of Action (herein referred to as "Calls of Action"), I will work to highlight not only the progress that has been made over the last year since the publication of the 2023 Mental Health Calls of Action: Federal but will also outline renewed and new calls of action for both the Government of Canada and the Government of Ontario and their applicable Ministries and Committees to ensure that the mental health of everyone continues to be taken as a top priority.

These calls of action and this document prepared through my work as a community leader and mental health advocate based out of Ontario, are designed not only to show the continued and growing need for mental health services and care in Canada but also to advise and make calls for action on topics related to mental health and well being to ensure the improved mental health of everyone across the country. These calls have been informed through what I, through a year's (2023) worth of conversations with individuals, groups, organizations, attending events and focus sessions/panels, personal experiences, and more from across Canada, see as the areas with the most need of action.

These calls are what I will be heavily advocating for through 2024 in addition to previous years' calls of action. They are goals and recommendations made to the Government of Canada and the Government of Ontario that when acted upon, I truly believe will make an impact on communities and will help to improve the mental health of everyone.

Joshua Bell Community Leader & Mental Health Advocate

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# CURRENT STATE OF MENTAL HEALTH IN CANADA AND ONTARIO

The mental health service demand is here and it is here to stay. Across the country, over the last few years, we have seen a surge in the demand for mental healthcare-related services while also seeing a rise in anxiety, depression, eating disorders, disordered eating-related behaviors, and more. As people move more into an online world, we have seen the drawbacks and effects that this has had on individuals' mental health and the isolation that it causes, including coming out of COVID-19. The stresses of being fully back and involved in our lives and communities are only now starting to show following long periods of isolation during the Pandemic.

The following section and subsections in this document work to highlight the current challenges and state of mental health across Canada. When put together, these sections give a stark image of how the state of individuals' mental health and our care system across the country are coping while highlighting gaps in care and resources currently offered.

# Suicide and Suicidality

In Canada daily, an average of 12 people end their lives by means of suicide [1]. On average about 4500 people [1] will end their lives per year while another 200 attempts are made daily [2]. According to the Canadian Association for Suicide Prevention (CSAP), in 2015 over 3 396 000 Canadians who were 12 years or older had thoughts of suicide or suicidal behavior. The impact that suicide has had on Canadian life and Canadian society does not stop there with the individual as for every suicide there are hundreds of people directly and indirectly affected by the decision such as family, friends, coworkers, and many more. With 7 to 10 people being immediately affected by the loss of someone by means of suicide [2], the impact is immediate and long-lasting.

According to a survey released by Kids Help Phone, 1 in 5 teens in Canada have seriously considered suicide as a means to end their life [3]. Suicide ideation has also increased as the significant impact of the COVID-19 Pandemic takes hold on people. In 2019, thoughts of suicide in the general population were at 2.7%, this has since increased sharply to 4.2% [4]. Of these thoughts, 12% of people will attempt suicide at least once in their lifetime [1]

The public health epidemic of suicide ranks as the 13th leading cause of death for Canadians overall in 2022, down from 11th in 2020 [5]. While overall the leading cause of death from suicide has dropped, the leading cause of death for youth between the ages of 15 to 34 remains suicide [6]. This remains even more worrisome as hospital visits for youth under 18 attempting suicide increased by 22% during the Pandemic and global rates for youth increased by 8% [7].

The disproportional effect of death by means of suicide and self-harm on members of the Canadian population, such as suicide death rates being 3 times higher in men compared to women, self-harm resulting in hospitalization being higher in women [1], and the overlooked effect of suicide in Indigenous communities and youth across Canada with rates of suicide in Indigenous communities being as high 3 times the rate of non-indigenous people [8], and the higher rates of suicide in working

populations such as construction workers where rates of suicide can be as high as 52% [9], all come together to show the urgent need for action and support (prevention, intervention, postvention) from our governments and community support systems to address this public health epidemic.

These statistics are not just numbers on paper and should not be reduced to that either. These are real people from across Canada in many different communities who have lost their lives by means of suicide or those who have thought about suicide and self-harm. These are people who are active in their personal, work, and communities with families and friends.

The number of people lost to suicide and who have thought about or inflicted self-harm highlight an urgent public health crisis of suicide that should be at the front of everyone's minds and that needs urgent action and leadership now by everyone.

#### **Addictions and Overdose Crisis**

The addiction and overdose crisis is a public health crisis that has grappled Canada and hundreds of our communities for many years now. With about 21% of the Canadian population meeting the criteria for addiction in their lifetime [10], clear and continued actions are needed now to ensure increased harm reduction, treatment, and research. Additional supports that help prevent increased poor mental health and addictions such as proper and secure housing, food security, financial stability, and more are all required.

Since January 2016, there have been about 40000 opioid-related deaths and an additional 39000 opioid-related hospitalizations. Of the nearly 40000 opioid-related deaths, 3 of every 4 have been male [11]. The extremely toxic and unpredictable drug supply, of which much is illegal, has all brought a new challenge to this crisis as drugs continue to be laced in high amounts of fentanyl and fentanyl analogues. Since 2016, about 80% of all opioid-related deaths have had traces of fentanyl involved in the drug supply that was used by the individual prior [11].

Communities across Canada are affected by the impacts of opioid-related deaths, including some of the most populated northern communities in Ontario where these communities had 3 times the overdose mortality rate as the Ontario provincial average [12].

With 18% of people meeting the criteria of alcohol-related abuse and/or addictions [13], actions are needed as well to ensure not only substance use and abuse reduction but also alcohol-related addictions.

It is not only an increase in resources and funding that is needed to help provide the much-needed services and support to individuals struggling with an addiction or substance use, but it is also working to expand public knowledge about substance use and addictions that will work to break the stigma and put an end to misinformation and the increased disinformation around the topic in recent years. Working to expand training for how to deal with overdoes with the use of Naloxone (Narcan), expanding resources through community-funded partners for people with substance use or addiction, and working to ensure that people feel safe and cared for at all stages of recovery.

Greater actions are also needed to combat the new disinformation being spread about the ongoing opioid crisis in Canada and what are the best ways to deal with this matter to ensure that people are able to recover and do not continue to suffer.

Support systems need to be ensured and tailored as well to ensure that people have the resources that they need to ensure stable housing, community-based support and resources, food security, and as much financial stability as possible in this ever-changing world.

#### **Youth and Young Adults**

The mental health and well-being of youth continue to take a sharp turn as modern problems continue to avail themselves. Continuing changes in the world mixed with the continuing impacts of long periods of isolation due to COVID-19 have all combined to impact youth and their mental health. Youth and young adults across the country require support for their mental health and well-being now more than ever before it is too late.

In Ontario, 39% of high-school students indicate a moderate-to-serious level of psychological distress such as anxiety and depression. In addition to this, 17% indicated a serious level of psychological distress [14]. In Canada's largest city, Toronto, youth visits to emergency departments for self-harm have increased by about 30% [21].

In the Campus Mental Health Across Canada Report (2022), conducted by the Campus Mental Health Community of Practice from the Canadian Association of College and University Student Services (CACUSS), it was indicated that 90% of student leaders are reporting fatigue from the COVID-19 pandemic and more than 80% said that isolation was linked to depression, anxiety, and loneliness [15]. In addition to this, about one-third of students are reporting more anxiety-related problems [16] and depression levels too high that they have indicated that they are not able to function for the purposes of working for their education [17].

Students in portions of the country, such as Alberta, have indicated a lack of support for their mental health with 71% of students in Alberta indicating that "their post-secondary institutions' mental health services [are] lacking" [18]. In addition to this, some students are more prone to mental health-related issues or challenges due to a change in culture, language, or customs once they move to Canada for their education as international students [19].

Access to on-campus or in-school support and resources is crucial to ensuring the proper mental health and well-being of students across the country. This includes access to supports where the students and youth feel safe, comfortable, and supported both in the post-secondary and secondary levels, but also outside of their school setting.

About 70% of mental health disorders or challenges have their onset in the early stages of childhood or youth [20] and if not addressed, could only worsen into something larger as the child grows older. That is why it is so important that these issues are addressed and supported during the early stages and to

ensure that youth have access to the support and services that they need to ensure their mental health.

With youth between the ages of 15 to 24 being more likely to experience a mental illness and/or substance use disorders than any other age group in Canada [22], action must be taken to address the youth mental health crisis that is unfolding across the country and the lack of access to services and supports.

#### **Eating Disorders**

Defined as "disturbances in behaviours, thoughts and attitudes to food, eating, and body weight or shape" [23], eating disorders currently have one of the highest mortality rates out of any mental health disorder and/or mental illness with estimates at about 10% to 15% [24]. Eating disorders are complex and require not only a lot of support for the individual from loved ones but also the right level of care and external supportive services from the healthcare system.

With a culture of dieting, bulking, and cutting, and a society that is increasingly putting a focus on the way that individuals look and appear, the pressures that many young people and adults may feel can contribute to the start or the increase of an eating disorder or put them at risk for developing an eating disorder. While about 90% of people diagnosed with an eating disorder are women [25], men tend to go longer without a diagnosis or no diagnosis at all [26].

During the COVID-19 pandemic, the rate of hospitalizations for girls between the ages of 10 to 17 with an eating disorder raised by nearly 60% [27] while general admissions into programs for eating disorders, such as at Mcmaster Children's Hospital in Hamilton, Ontario, spiked to unprecedented levels [28]. In addition to this, it was found that acute care visits for eating disorders increased significantly after the onset of the Pandemic in 2020 and then remained well above expected levels during the first 10 months of the pandemic [29].

It is clear that if nothing is done to prevent eating disorders and limit the factors for the risk of eating disorders, eating disorders will only continue to affect millions across the country. Action is needed to work to prevent eating disorders among the youth and the general population, as well as to end the stigma around eating disorders and start a greater conversation about body positivity.

# **LGBTQ Mental Health**

Members of the LGBTQ community continue to be individuals who contribute greatly to society and whose impact is felt in our communities, however, both access to mental health services and the mental health of members of the LGBTQ community continue to be poor. With the rising hate in recent years and the impact that this has had on members of the community [30], it is now more important than ever to ensure that LGBTQ members in our community feel safe, and heard, and to ensure that their mental health is being looked after.

Studies show that LGBTQ individuals are at about double the risk of developing post-traumatic stress disorder (also known as PTSD) when compared to their heterosexual peers [31] and that they are 2.5

times more likely than heterosexual counterparts to have attempted suicide [32], with youth being a further 14 times the risk for suicide and substance abuse than heterosexual peers [33].

Studies have also shown that LGBTQ individuals may suffer from higher rates of depression, anxiety, obsessive-compulsive and phobic disorders, suicidal thoughts and actions such as self-harm, as well as a greater level of alcohol and drug dependence in some cases [34, 35, 36].

With a large number of LGBTQ Canadians saying that they have had unmet mental healthcare and access needs [37], and the stress of the COVID-19 Pandemic and subsequently higher levels of anxiety and substance use being present when compared to heterosexual peers during the same time over the pandemic [31], access to care and prevention efforts for substance use and abuse has never been more important.

Past injustices, years of lack of support and social stigma, and the increase in discrimination and hatemotivated incidents toward the LGBTQ community have continued to contribute to the lower-than-average mental health of LGBTQ Canadians [33].

#### **Economic Costs and Barriers to Access Care**

According to the Centre for Addiction and Mental Health (CAMH), the combined economic cost to the Canadian economy due to mental illness and mental health-related issues is about \$50 billion per year with an additional annual cost of about \$40 billion in economic loss due to substance use and addiction [38]. While it has been proven that investing in workplace mental health and well-being does deliver a positive outcome, both for the workers and for the economic benefits of the business, people who are living with a mental illness are much less likely to be employed and unemployment rates can be as high as 70% to 90% for individuals with severe mental illnesses [38].

There is also a massive barrier to accessing affordable mental healthcare and access to mental health services in general across Canada. While average wait times for access to mental healthcare for children and youth can be as low as 67 to 92 days, at times depending on location wait times to access mental health services can be as high as two and a half years long [38].

Access to mental health services for youth who are in schools as well continue to lack and be behind the requirement of what is needed to ensure proper student mental health. In the 2022-23 Annual Ontario School Survey, 46% of schools indicated that they have no access to mental health specialists or mental health nurses while another 45% of schools indicated that they only have on-call specialists or mental health support nurses for the students to access [39].

As the demand for mental health services has surged across the country [40], much of the country is grappling with a shortfall of nurses, psychologists, and other mental healthcare professionals who provide vital support for people in their communities [41]. Without this support and an increase in these positions being filled, people will only continue to suffer.

The costs of mental health treatment for Canadians have also continued to present themselves as a barrier to care. With the average cost of therapy in Canada ranging from \$150 to \$250 per hour session [42], the reality is that most people can not afford these high costs to maintain their mental health.

Wait times also continue to pose an increased issue for people who are seeking mental health resources both in their community and at large. Thousands of Canadians continue to have to wait months for services in both the public and private sectors [43] and nearly 50% of Canadian youth say that they find it difficult to access services [44]. Wait times in Ontario continue to be upwards of two and a half years with the average wait time for mental health services being 67 days and for more intensive treatment at 92 days. The longest current wait periods are around the GTA with some people having to wait upwards of 919 days for mental health services [45]. In addition, an estimated 200000 youth currently have no contact with any form of mental health services in their community or larger networks [45].

More action and collaboration are needed across all jurisdictions to ensure proper, affordable, accessible, and positive mental healthcare access for everyone. Support is also needed to reduce the lack of mental health professionals in communities and ensure that everyone is able to access some form of care that they need.

# **PROGRESS MADE IN 2023**

2023 marked a year where both the Government of Canada and the Government of Ontario have made progress in bettering the mental health and well-being of individuals while also working to improve access to services and levels of care, community support, addressing the overdose crisis across the country, and much more.

This section works to provide a look at some of the things that both the Government of Canada and the Government of Ontario have done over the course of 2023 to improve the mental health of Canadians. Note that this is not a full list of everything that has been done or proposed and only contains major announcements, progress, and key promises through proposed legislation.

# **Federal Progress**

The federal government has made the following progress on the substance use and overdose crisis [46]:

- Launched the renewed Canadian Drugs and Substances Strategy (CDSS)
- Launched the Youth Substance Use Prevention Program as part of the CDSS
- Conducted and released opinion surveys on how Canadians think about and how much they know about drug decriminalization
- Released and published updated data on hospitalizations, deaths, possibly related deaths, medical and emergency room visits, emergency service responses, supervised consumption sites
- Published reports on repeat hospitalizations for substance-related harms in Canada, trends in substance-related poisoning hospitalizations among pregnant individuals in Canada
- Continued to work to reduce the stigma through investing in programs such as the Soar Above Stigma campaign, meetings with community partners and police departments
- Worked to develop a new Blueprint for Action and policy paper outlining practical approaches for schools to prevent substance-related harms among youth
- Invested over \$3 million over 4 years to evaluate program implementation and impacts of safer supply pilot projects and to assess the public health impacts of supervised consumption sites (SCS) located in British Columbia, the Prairies, Ontario, and Quebec-Atlantic
- Granted a 3-year exemption under the Controlled Drugs and Substances Act (CDSA), so that adults aged 18 and over in British Columbia will not be subject to criminal charges for the possession of up to 2.5 grams total of certain illegal drugs for personal use between 31 January 2023 and 31 January 2026

The federal government has made the following progress in reducing suicide in Canada [47, 50]:

- Updating the Suicide Prevention Framework
- Launched Canada's new 988, a national three-digit number for suicide prevention and emotional distress accessible across to country to everyone while also providing \$158.4 million over three years, starting in 2023-24, to the Public Health Agency of Canada to support the operation of 988

The federal government has made progress in ensuring reduced economic barriers and increasing access to care by [46, 49]:

- Budget 2023 invests \$200 billion over 10 years, including \$46.2 billion in new funding for provinces and territories, to improve health care for Canadians
- Providing \$650 million in 2022-2023 to support trauma-informed culturally grounded communitybased mental wellness initiatives
- The 2023 Fall Economic Statement proposes exempting professional services rendered by psychotherapists and counseling therapists from the GST/HST charges
- Entering into bilateral agreements with the Provinces and Territories to \$25 billion in additional funding over ten years to assist in addressing expanding access to health services, supporting health workers, reducing backlogs, increasing mental health and substance use support, improving licensing and credential recognition, and modernizing health systems

The federal government has made the following progress in reducing eating disorders in Canada [48]:

 Invests of \$1.28M to support youth experiencing eating disorders through Eating Disorders Nova Scotia

The federal government has also made progress in [51, 52, 53, 54, 55]:

- Investing nearly \$5 million in national mental health and substance use standards for children, youth, and young adults
- Announcing \$2.5 million for projects to improve mental health support for Indigenous Peoples
- Investing \$21 million to support community-based organizations that are helping address harms related to substance use
- Investing \$1.8 million in Hamilton to help address harms related to substance use
- Investing \$2.8 million to support 2SLGBTQI+ mental health across Canada

# **Provincial Progress Made in Ontario**

The provincial government in Ontario has made the following progress in youth mental health [56, 59, 61]:

- Implementing Policy/Program Memorandum 169 outlining requirements for school boards and school authorities, and the Consortium Centre Jules-Léger to provide culturally responsive, evidence-informed student mental health promotion, prevention, and early intervention services
- Expanding care for youth in regions in Ontario through the expansion of Youth Wellness Hubs
- Expanding the "One Stop Talk" program connecting youth to mental health counseling by phone, video, text, and chat

The provincial government in Ontario has made the following progress in expanding and supporting mental health services [57, 58, 60]:

- Working to expand the Ontario Structured Psychotherapy (OSP) program
- Supporting first responders experiencing Post-Traumatic Stress Injury (PTSI) and other concurrent mental health disorders by advancing medical center projects through an investment of \$9.6 million to accelerate the project's development towards its next round of approval
- Providing an additional \$425 million over three years to support mental health and addiction services, including a five percent increase in the base funding of community-based mental health and addiction services providers funded by the Ministry of Health
- Launching Health811 to assist in finding services like community health centers, mental health support, or a walk-in clinic close to people's homes

# Progress in Relation to the 2023 Mental Health Calls of Action

In the 2023 Mental Health Calls of Action: Federal, six different calls of action were made to the Government of Canada to work towards bettering the mental health of Canadians, access to mental health services, and ending stigma as well as specific focus areas for segments of the population such as youth.

Throughout 2023, the Government of Canada made progress on some of these six calls of action that were made and continues to work on others on an ongoing basis.

In 2023, Call of Action Number 3 was completed when the Government of Canada announced and moved to start working to develop and redesign the National Drug Strategy for Canada, as also mentioned above in federal progress made this year. Other subitems mentioned in Call of Action Number 3 were also implemented or started a trial phase in some Provinces and Territories.

The Government of Canada also took steps forward in relation to Call of Action Number 4, the creation and implementation as well as continued funding for the National 988 Suicide and Crisis Line. This new lifesaving short and easy-to-remember number will work to connect people who are in crisis with the immediate support that they need at that moment when they may be in crisis. The continued funding commitments to ensure that this number is successful and continued partnerships with different national mental health organizations also prove the Government of Canada's commitment to ensuring reduced suicide rates across the country and to ensure that people can get the support that they need.

The Government of Canada also worked and continues to work on other past calls of action made in 2023 such as on youth mental health, the mental health and well-being of members of the LGBTQ community, as well as fast and reliable access to mental health services.

# CALLS OF ACTION TO THE GOVERNMENT OF CANADA

While there has been great progress over the last year in ensuring access to better services and reducing the stigma related to mental health, more action and support are urgently needed by our federal government to ensure the continued well-being and support of Canadians and their mental health.

The following calls of action are calls that have been set out following the information on the previous pages and the urgent need for action to better the mental health of Canadians everywhere by the federal government.

The following calls of action are things that I, in my work as a mental health advocate, will be looking for and advocating for throughout 2024 in addition to previous calls as I continue to urge the Government of Canada to take a closer look at the mental health of Canadians in 2024.

**Call of Action 1:** Fulfill the Promise and Create a Fully Operational Canada Mental Health Transfer In 2021, following the federal election, the federal government set a public goal of implementing a Canada Mental Health Transfer - that is having a dedicated funding stream provided to the Provinces and Territories specifically to support mental health and mental health services.

In 2024, like 2023, I am continuing and urgently calling on the Government of Canada and the applicable Ministries and Commissions to fulfill this promise made and dedicate federal healthcare funding to this new Canada Mental Health Transfer (CMHT).

Such funding received by the Province and Territories in this new Canadian Mental Health Transfer should:

- Be received based on the continued needs of the Province or Territory to improve mental health and mental health services and care but not less than 11% of a Provinces or Territories health budget;
- Be adjusted to the rate of inflation yearly to not have unintended inflictions and ensure proper funding yearly;
- Be reviewed yearly, as determined by the federal budget fiscal period, to ensure that the funds being received by the Provinces and Territories are meeting the needs of that Province or Territory and the people in it; and that the Provinces and Territories are using the funds for their intended purposes;
- Have a subset of funding through the CMHT dedicated to funding and supporting community-based services and support programs.

#### Call of Action 2: Urgently Create and Implement a National Suicide Prevention Strategy

Canada continues to be the only country in the G7 with no set National Suicide Prevention Strategy instead resorting to a national framework with recommendation points.

Continuing from 2023 and into 2024, I am urgently calling on the Government of Canada and the applicable Ministries and Commissions to act to create and implement a fully functional and funded

National Suicide Prevention Strategy.

The National Suicide Prevention Strategy should:

- Work to outline and mandate cross-jurisdiction systems with provincial and municipal counterparts and health ministries where data and records of suicides/attempts are easily able to be accessed and reported;
- Support and increase knowledge of environments and spaces that promote healthy and positive well-being and mental health including places such as community centers, healthcare offices, and places that empower individuals to speak openly about their well-being and mental health in their daily lives and community;
- Take into account in the form of a specific section and through the appropriate cultural and situational contexts the voices and lived experiences of marginalized communities and individuals such as members of the BIPOC community, LGBTQ community, and the voices of Indigenous Communities as to meet the concerns and unique needs for suicide prevention, prevention supports, survivor supports, and intervention supports needed in each of these communities;
- Enhance clinical services and supports for survivors, for individuals who may have suicidal thoughts, and for individuals who have been affected by suicide;
- Provide outlined supports that are dedicated to community support with the prevention, intervention, postvention, and support of people who have been affected by a loss to suicide.

The National Suicide Prevention Strategy must also foster a culture of open dialogue and conversations, work to end the stigma associated with poor mental health and/or suicide, and who are seeking support, as well as work to ensure a reduction in suicide and suicide attempts across the country.

The National Suicide Prevention Strategy should be reviewed and updated over a 3-5 year period to implement new research in the field, data, and other important information and possible prevention efforts that would only benefit the prevention of suicide in Canada while working to better the supports available.

# **Call of Action 3:** Continued National 988 Support and Investments

On 30 November 2023, the Government of Canada, in partnership with national mental health organizations, implemented the now-operational National 988 Suicide and Crisis Line. This line and the immediate support that it will provide millions of people can not be understated.

The Government of Canada must also make a continued effort to ensure reduced suicide by supporting the continued operation of this number and the services that it provides people. The National 988 must remain accessible in every part of the country and must work to provide care in a way that is best for the individual accessing it. This includes proper cultural and social environment considerations, as well as ensuring that people feel safe in accessing a number that they can rely on. Further considerations must also be taken to ensure that there are no language barriers between individuals and the 988 number as well as proper care of any data or information given during a call or message conversation.

Public knowledge about this number is key. Ensuring a rise in the general knowledge that the public has about this new service will also ensure a safer environment for our communities.

# **Call of Action 4:** Assistance to Provinces and Territories for Surging Demand for Access to Mental Health Care

Many of Canada's Provinces and Territories are currently struggling with their healthcare systems and in maintaining enough nurses, healthcare support staff, psychologists, and more. The lack of enough people in the healthcare system is having detrimental effects on people's health and increasing wait times even more. In some Provinces, there are even growing movements to move towards a private healthcare system to help assist in reducing the wait times and increasing support available for people.

In 2024, I am urging the Government of Canada to assist with the surging demand in our healthcare systems for mental health services and mental healthcare professionals such as psychologists and social workers and the economic effect that it is having on families.

Assistance that can be delivered through:

- Working with the Provinces and Territories to reduce blockages for foreign licensed healthcare workers, such as social workers and psychologists, to work in their Province or Territory;
- Reduce blockages for foreign licensed healthcare workers to enter and work in Canada, such as increasing the number of work visas issued for the most needed healthcare workers right now;
- Investing and urging Provinces and Territories to focus on delivering care through community-based supports, programs, and providers where people will be able to access services faster and closer to home:
- Working to develop and implement a cap on the amount that can be charged for mental health services by private for-profit care providers across the country.

## CALLS OF ACTION TO THE GOVERNMENT OF ONTARIO

The Government of Ontario over the last year has worked to provide care and an increase in services across the province, especially when it comes to youth and their mental health. While there has been great progress over the last year in ensuring access to better services and reducing the stigma related to mental health, more action and support are urgently and desperately needed by the Government of Ontario to ensure the continued well-being and support of Ontarians and their mental health.

The following calls of action are calls that have been set out following the information on the previous pages and the urgent need for action to better the mental health of people in Ontario by the Government of Ontario.

These calls are items of action that I, in my work as a mental health advocate, will be looking for and advocating for throughout 2024 as I urge the Government of Ontario to invest the needed resources into the healthcare system.

#### Call of Action 1: Increased Efforts for Mental Health Education

General public knowledge about the types of mental health services, forms of care, and where they may be able to access such services is severely lacking.

In 2024, I am urging the Government of Ontario to invest in increasing not only public awareness around mental health and the types of resources available, but also expanding and investing in public education campaigns through:

- Partnerships with national, provincial, and local mental health organizations and municipalities to
  provide public education and knowledge sessions on mental health, well-being, and resources. This
  includes providing specific resources and knowledge-focused sessions for areas that have higher
  rates of poor mental health or increased risk of mental health-related issues;
- Working with schools and different educational institutions expands knowledge about different mental health disorders, how to take care of your well-being, and what resources are available if you need help;
- Mandating and revising the provincial education curriculum to include complete courses about your
  mental well-being, how to take care of your mental health, what services and resources are
  available, and the difference between different mental health-related disorders or illnesses to help
  eliminate stigma and discrimination;
- Mandating expanded mental health and well-being training for all educational workers and public sector workers who interact with members of the public, including but not limited to provincial employees and municipal staff and employees.

# Call of Action 2: Support for Student and Campus Mental Health

Youth and students across the Province are at a crisis point. As the impact of COVID-19 continues to show itself and we learn more about the heavy isolation and the effects that this has had on youth and students across the country, as well as the increased levels of anxiety, depression, and dim outlook on the future, the Government of Ontario must continue to act to ensure that the mental health of students is taken care of.

In 2024, I am urging the Government of Ontario and the applicable Ministries and Commissions to act for student and youth mental health. Urgent action is needed in partnership with school boards, post-secondary institutions, and different organizations to work together to provide services and access to services for students. This includes:

- Updating standards for youth mental health in schools and post-secondary institutions with youth and student involvement;
- Working with post-secondary institutions across the Province to provide increased on-campus mental health support to student wellness centers and other mental health-related programs on campuses;
- Mandating that the Ministry of Colleges and Universities and Ministry of Education, in partnership
  with Health Ontario, keep track of data related to student mental health and well-being, including
  but not limited to student suicides on campuses; progress of services offered on campuses, and
  more;
- Establishing, in partnership with post-secondary institutions, a peer-to-peer support system if not already offered at post-secondary institutions for students to access and talk with each other;
- Working to expand in-school support for elementary and secondary schools such as social workers, mental health resources information centers, and more.

# Call of Action 3: Investments in Community-Based Care

Community-based supports are essential to providing care and support to millions of people across the country and in Ontario. These supports that are close, local, and easy to access allow for faster and more personal care for people who are seeking help, rehabilitation, or general mental health information and safety tips.

In 2024, I urge the Government of Ontario and the applicable Ministries and Commissions to increase support for community-based mental health services and supports. This includes not only increased financial support and funding towards community mental health support and community-based care but also includes:

- Working with local, provincial, and national mental health organizations and service providers to increase the number and accessibility of community-run peer-to-peer support groups, drop-in groups, and other group support systems;
- Providing support to community mental health agencies and the crisis response teams that they may operate in their city or county;

- Investing and supporting non-police or minimal-police mobile crisis services and response teams in communities and cities across the Province;
- Restore the Opioid Emergency Task Force and work to expand the delivery of Naloxone (Narcan);
- Investing in the people who provide care such as psychiatrists, social workers, nurses, and case managers, and ensuring that Ontario is able to fulfill enough of these positions to provide care.

# Call of Action 4: Increased Support for Rural and Northern Communities

People in rural and northern communities have less access to the mental health and addiction support that they need. A gap in care has long gone overseen by the government year after year as thousands continue to remain without accessible services for their health.

In 2024, I am urgently calling on the Government of Ontario and the applicable Ministries and Commissions to increase investment, accessibility of resources, and community care in rural and northern communities across Ontario.

The Government of Ontario should work to, in addition to ongoing support:

- Implement expanded Youth Wellness Hubs in rural and northern communities;
- Work with rural and northern community health and mental health organizations to provide tailored mental health programs for the needs of the district and community in which they are located;
- Increase supportive care for marginalized communities such as members of the LGBTQ community, visible minorities, and newcomers who are living in a rural or northern community;
- Expand digital and online mental health services for northern communities where access to inperson services is extremely difficult to get to where a drive of 45 minutes or a flight of 15
  minutes or longer is required or where a mental health care professional is not able to remain to
  provide care;
- Provide and increase support through investments to northern Indigenous Communities and Peoples to be able to set up and increase the care as required in their communities with additional support workers provided by the Province as requested.

# Call of Action 5: Universal Mental Health Care Coverage

General access to mental health resources has become harder and harder to access due to the shortfall of mental health professionals, but also due to the increasingly high economic costs to access help. As the cost of everything in our communities increases, the costs of accessing mental health services rise as well, and many families are left making decisions between purchasing food or accessing required care for their mental health and well-being or that of a loved one.

In 2024, I am calling on the Government of Ontario and the applicable Ministries and Commissions to act and make mental health care part of the Universal Healthcare System offered under the Ontario Health Insurance Plan (OHIP). Real action is needed now as people continue to face the economic challenges of accessing services.

A Universal Mental Health Care Coverage system in Ontario under OHIP should:

- Offer and provide up to 15 covered 1 hour psychotherapy sessions per year;
- Offer and provide coverage for urgent mental health and/or substance use support such as rehabilitation, eating disorder treatments, substance use, and addiction treatment from medical centers or hospitals for up to 3 visits per year if not already covered by the individual;
- Establish principles and standards of care for mental health-related services that are offered under OHIP:
- Work to provide data on performance, such as lowering the wait times for services and care.

In addition to implementing a provincial system under OHIP, the Government of Ontario and the applicable Ministries and Commissions should take the lead and work to set a new national standard and push for a national system of care for mental health coverage under the Canada Health Act and any new legislation that may be proposed to ensure Universal Mental Health Care coverage.

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