



**2026 Ontario Municipal Elections Candidates Book:
Recommendations for Increased City Presence in
Mental Health Supports in Hamilton**

Office of Joshua Bell

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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 in an emergency, please call 9-1-1.

For additional resources, visit joshuamjbell.ca/help.

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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BACKGROUND INFORMATION

About Joshua

A dedicated mental health advocate and community leader, Joshua Bell brings a wealth of knowledge and personal lived experience to the mental health sector and to various national and local projects, boards, and organizations.

Passionate about mental health and suicide prevention, Joshua has worked tirelessly to raise awareness around mental health and suicide prevention efforts, educate on the types of resources available, and push for key policy changes to improve the mental health of Canadians. This includes his advocacy for the National 988, a national suicide prevention strategy, a national mental health transfer, and much more. Between 2020 and 2024, Joshua started and operated a youth mental health advocacy organization in the Hamilton region.

Joshua currently sits as the National Co-Chair for the National Advisory Council of the Mood Disorders Society of Canada, Chair of the National Advisory Council of the National Initiative for Eating Disorders and a Director of the National Board, and is a Community Champion with Unsinkable. Joshua is also a Member in good standing of the Eating Disorders Association of Canada, Global Mental Health Action Network, and a Member of the 988 Community Member Advisor Network.

In early 2025, Joshua was awarded the King Charles III Coronation Medal by the Governor General's Office on behalf of the King for his significant contributions to Canada for his mental health and suicide prevention work. In 2026, Joshua was recognized as one of Canada's top 25 mental health leaders.

About the OJB

The Office of Joshua Bell (OJB) is a federally incorporated non-profit governed by the Canada Not-for-Profit Corporations Act. Inspired by the lived experience of Joshua Bell, the organization works collaboratively to raise awareness of mental health issues, reduce stigma, and educate the public about available resources and how to access them.

The OJB currently has a staff of 4 working alongside Joshua.

For more information, contact info@joshuamjbell.ca or visit ojb-bjb.ca.



EXECUTIVE INTRODUCTION

Mental health is a fundamental human right. Access to timely, affordable, and compassionate mental health care should be regarded with the same importance as access to care for physical illness or injury. As Hamilton continues to grow and evolve, so too do the mental health challenges facing our community. Rising rates of mental illness, substance use, suicide risk, and barriers to accessing care have placed increasing pressure on individuals, families, healthcare providers, and community organizations. Addressing these challenges requires coordinated leadership, sustained investment, and a renewed commitment from all levels of government and the broader community.

Hamilton is home to a resilient and compassionate population, yet many residents continue to face significant obstacles in obtaining the mental health and addictions supports they need. Evidence presented throughout this recommendation report demonstrates increasing demand for community-based services, lengthy wait times for treatment, persistent health inequities, and the growing impact of housing instability, poverty, food insecurity, and social isolation on mental well-being. These challenges disproportionately affect youth, individuals experiencing socioeconomic disadvantage, members of the LGBTQ+ community, and those living with concurrent mental health and substance use disorders.

The City of Hamilton has taken meaningful steps to recognize mental health as a municipal priority through initiatives such as the Community Safety and Well-Being Plan, the City of Hamilton Youth Strategy, and continued collaboration with community partners on suicide prevention and public health. These efforts have established a strong foundation for future progress. However, the increasing complexity of community needs demonstrates that additional action is required to ensure every resident has equitable access to high-quality, community-based mental health supports.

Throughout the creation of this recommendation report, a focus was given to make sure that it supports and provides information from a lived-experience view to candidates in the 2026 City of Hamilton Municipal Election by providing an evidence-informed overview of the current state of mental health and well-being within our community, examining existing municipal strategies, and presenting practical recommendations for strengthening the City's role in promoting positive mental health outcomes. While municipalities are not primary healthcare providers, they play an essential leadership role through advocacy, community planning, public education, partnership development, recreation, housing initiatives, and investments that strengthen the social determinants of health.



The recommendations presented throughout this publication are intended to encourage practical, collaborative, and measurable action. They focus on strengthening partnerships between municipal, provincial, and federal governments; expanding community-based mental health services; increasing public awareness of available supports; improving accountability through measurable outcomes; and investing in inclusive community spaces that foster connection, belonging, and well-being. Collectively, these actions represent an opportunity for Hamilton to become a provincial leader in municipal mental health policy while improving the quality of life for residents across every neighbourhood.

Mental health affects every resident, every family, and every community. It is not solely a healthcare issue, but one that intersects with housing, education, employment, public safety, transportation, recreation, and economic development. Building a healthier Hamilton will require continued collaboration among governments, healthcare organizations, community agencies, businesses, educators, and residents themselves.

As someone who has dedicated my time since I was 16 to advancing mental health awareness, suicide prevention, and evidence-based public policy, I believe that meaningful change is both possible and necessary. The future of Hamilton depends on our collective willingness to invest in prevention, early intervention, accessible care, and compassionate leadership.

By working together, we can build a city where every person has the opportunity to access the supports they need, recover with dignity, and thrive; and make Hamilton a leading city in our province for mental health support and care.

Joshua Bell

King Charles III Coronation Medal
Mental Health Advocate & Community Leader



THE STATE OF MENTAL HEALTH, WELL-BEING, AND SUPPORT SERVICES

Hamilton Focused

Hamilton continues to face significant and evolving mental health and substance use challenges that affect residents across the lifespan, with youth and other individuals experiencing socioeconomic disadvantage and being disproportionately impacted. Although many Hamilton residents report good overall health and well-being, as seen through the 2024 Community Health Status Report, a growing demand for mental health and addictions services reflects increasing complexity of need and persistent inequities across the community.

Throughout the 2024 Community Health Status Report and other subsequent reports on well-being within our city, mental health, substance use, and self-harm are among the areas with the greatest health inequities, with outcomes closely linked to income, housing stability, social exclusion, and other social determinants of health. Residents living in the city's lowest-income neighbourhoods are nearly five times more likely to experience self-harm than those living in the highest-income areas.

Mental health service utilization has also only continued to rise over the past decade. While hospitalization rates for mood disorders such as anxiety and depression have declined, Hamilton has experienced increasing hospitalization rates for schizophrenia and substance use disorders, alongside growing outpatient visits for mental health and addictions care. These trends suggest that although more individuals are accessing community-based treatment, the burden of severe and complex mental illness remains substantial for many members of our community. The increasing prevalence of concurrent mental health and substance use disorders further highlights the need for integrated models of care that address both conditions simultaneously.

Substance use has become one of Hamilton's most pressing public health challenges and is now a leading contributor to preventable illness and premature death. The ongoing drug crisis has driven a dramatic increase in opioid-related harms, with opioid-related deaths increasing by more than 400% since 2005 and remaining consistently higher than the provincial average. In addition to opioid-related mortality, emergency department visits related to alcohol use continue to exceed Ontario rates, highlighting the broader impact of substance use across the community. Collectively, tobacco, alcohol, and opioid use account for more than 1000 deaths annually among Hamilton residents, illustrating the profound health burden associated with addiction.



Youth mental health remains an area of particular concern within our city as well. While rates of suicide in Hamilton have remained relatively stable between 2018 and 2022, emergency department visits for self-harm have increased by more than 55% over the past decade, with female youth experiencing the highest rates.

Many young people continue to experience significant psychological distress, emphasizing the importance of early intervention, school-based supports, family-centred services, and suicide prevention initiatives, such as those being done and supported by the Canadian Mental Health Association, Hamilton Branch, and the Suicide Prevention Community Council of Hamilton. Broader evidence from the Canadian Mental Health Association and CAMH indicates that demand for child and youth mental health services across Ontario continues to exceed available capacity, contributing to long wait times and delayed access to care, like here in Hamilton, where wait times can be as high as 710 days.

Mental health and addictions cannot be considered independently of the broader social conditions that shape health. Hamilton continues to experience rising homelessness, housing unaffordability, food insecurity, and poverty, all of which increase vulnerability to poor mental health and substance use. More than 1400 individuals were experiencing homelessness in Hamilton during each month of 2023, while over one in five households lived in unaffordable housing and nearly one in five experienced food insecurity. These intersecting challenges place increasing pressure on healthcare, emergency services, housing providers, and community organizations, reinforcing the need for coordinated, upstream approaches that address both clinical needs and the underlying social determinants of health.

In response to these growing needs, Hamilton has expanded collaboration across health care, social services, education, and community organizations to strengthen the local continuum of mental health and addictions care. However, these initiatives do not do enough to continue to combat the rising strain on residents' mental well-being and the services that are being accessed. Continued collaboration across sectors will be essential to building a more responsive, equitable, and sustainable mental health system that supports prevention, early intervention, treatment, and recovery for all Hamilton residents.

For more information on the well-being of Hamiltonians, as of 2024, visit hamilton.ca/sites/default/files/2024-11/publichealth-community-health-status-report-2024.pdf.

Suicide and Suicidality

In Canada, daily, an average of 12 people end their lives by means of suicide. On average, about 4500 people will end their lives per year, while another 200 attempts are made daily. 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, 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. 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%. Of these thoughts, 12% of people will attempt suicide at least once in their lifetime.

The public health epidemic of suicide ranks as the 13th leading cause of death for Canadians overall in 2022, down from 11th in 2020. 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. 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%.

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, 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, and the higher rates of suicide in working populations such as construction workers where rates of suicide can be as high as 52%, 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 community.

The number of people lost to suicide and who have thought about or inflicted self-harm highlights 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, 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. The extremely toxic and unpredictable drug supply, of which much is illegal, has brought a new challenge to this crisis as drugs continue to be laced with 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.

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.

With 18% of people meeting the criteria of alcohol-related abuse and/or addiction, 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 overdoses 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 in our city, and what the best ways are to deal with this matter to ensure that people can 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 arise. 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. In Canada's largest city, Toronto, youth visits to emergency departments for self-harm have increased by about 30%.

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. In addition to this, about one-third of students are reporting more anxiety-related problems and depression levels so high that they have indicated that they are not able to function for the purposes of working for their education.

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". 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.

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, 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, action must be taken by our city and elected officials 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", 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%. 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, men tend to go longer without a diagnosis or no diagnosis at all.

During the COVID-19 pandemic, the rate of hospitalizations for girls between the ages of 10 to 17 with an eating disorder rose by nearly 60% while general admissions into programs for eating disorders, such as at McMaster Children's



Hospital in Hamilton, Ontario, spiked to unprecedented levels. 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.

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, 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 and that they are 2.5 times more likely than heterosexual counterparts to have attempted suicide, with youth being at a further 14 times higher risk for suicide and substance abuse than heterosexual peers.

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.

With a large number of LGBTQ Canadians saying that they have had unmet mental healthcare and access needs, 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, access to care and prevention efforts for substance use and abuse have never been more important.

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

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. 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.

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.

Access to mental health services for youth who are in schools also continues to be lacking and is 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.

As the demand for mental health services has surged across the country, 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. 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, 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, and nearly 50% of Canadian youth say that they find it difficult to access services. 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. In



addition, an estimated 200,000 youth currently have no contact with any form of mental health services in their community or larger networks.

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.

CURRENT HAMILTON STRATEGIES AND PLANS

The City of Hamilton and Council over recent years have taken steps to address the rising need for mental health services in Hamilton and the growing need for a coordinated effort.

Some of the most relevant strategies to support the mental health and well-being of members of our city include the following but are not limited to them.

Community Safety and Well-Being (CSWB) Plan

In 2025, the City of Hamilton released the CSWB Plan that was developed over the previous year and was developed in partnership with members of our city to collaboratively address local priorities and create conditions where everyone in Hamilton feels safe, connected, and able to meet their needs.

While designed as a wider plan for the city on all things related to community safety, crime, and well-being, the CSWB Plan works to provide a starting framework for our city to ensure that residents' concerns of safety and well-being are being listened to, and a plan is in place to address the issues that are raised.

The CSWB Plan does just that through recognizing mental health as one of Hamilton's six major priorities, emphasizing collaboration and working to include lived experience and Indigenous participation throughout its creation.

The CSWB Plan also takes care to use evidence-based approaches to solving issues that are raised and focuses heavily on prevention rather than only emergency response and postvention for well-being-related matters.

The CSWB Plan also takes important steps to hold itself and the city accountable through annual reporting and public dashboards so that members of our community can see the work that is being done and its impact on our community and residents.



For more about the CSWB Plan, visit hamilton.ca/city-council/plans-strategies/strategies/community-safety-and-well-being-plan.

City of Hamilton Suicide Prevention Strategy

In September of 2010, the Suicide Prevention Community Council of Hamilton (SPCCH) issued Hamilton's first and only suicide prevention strategy.

Through collaborative efforts with the city, other mental health organizations, community members, professionals, and more, the SPCCH led the development of this strategy intended to set the groundwork to address the issue of suicide prevention in our community.

In 2021, YMHM Canada, an organization that Joshua started and operated between 2020 and 2024, issued a Recommendation Report for a New Suicide Prevention Strategy for Hamilton.

This recommendation report was received by the city, the Public Health Officer for Hamilton, and the Suicide Prevention Community Council of Hamilton. The report continues to provide key insights into the needs of a renewed strategy for youth within our city.

For more information on the YMHM Canada-issued report, visit joshuamjbell.ca/advocacy/ymhmcanda.

For more information on the Suicide Prevention Strategy of Hamilton, visit spcch.org/suicide-prevention-strategy.

City of Hamilton Youth Strategy

In 2022, the City of Hamilton launched the City of Hamilton Youth Strategy.

Created in partnership with youth between the ages of 14-29 from across our city, community members, organizations, and city staff, the Youth Strategy aims to address issues that are related to our city's next generation.

The Youth Strategy identifies five priority themes for the city to address for our youth that include:

1. Accessing Mental Health and Addictions Supports
2. Accessing Employment and Training

3. Access to Safe and Affordable Housing
4. Enhancing Safety and Sense of Inclusion
5. Enhancing Youth Engagement and Leadership Opportunities

Youth remain a key part of this strategy and continue to provide key input into the city through the Hamilton Youth Steering Committee (HamOnt Youth) and ensuring that youth issues, like the above five, are tackled in a collaborative and continuing manner.

The current strategy is in place from 2022-2027.

For more information on the City of Hamilton Youth Strategy, visit hamilton.ca/city-council/plans-strategies/strategies/youth-strategy.

RECOMMENDATIONS FOR IMPROVEMENT

City of Hamilton Focused

The current City of Hamilton staff and Council have taken note of the rising need for mental health support and services in our community, and have taken some action to renew key strategies that support well-being, community safety, and the mental health of members in our community.

Likewise, community councils and organizations like the Suicide Prevention Community Council of Hamilton (SPCCH) and the Canadian Mental Health Association, Hamilton Branch (CMHA Hamilton) have also taken key steps to ensure a renewed Suicide Prevention Strategy for our city, increased public knowledge campaigns and support groups/programs, and much more.

While action is being taken, more needs to be done to ensure the safety, well-being, and mental health of those living in and those visiting our city, including for our most vulnerable populations and rural Hamilton.

By renewing a municipal suicide prevention strategy, prioritizing youth mental health, expanding community-based care, strengthening prevention and postvention efforts, and establishing measurable public outcomes, Hamilton can position itself as a provincial leader in community mental health.



The following recommendations (not limited to) are being made to candidates in the 2026 City of Hamilton Municipal election to ensure that individuals in our city are supported in their mental health and well-being.

Recommendation 1: The City of Hamilton invests in cross-jurisdiction collaboration with both the federal and provincial governments to ensure the delivery of increased community-based mental health supports.

The City of Hamilton can strengthen cross-jurisdictional collaboration by working closely with the Government of Ontario and the Government of Canada to secure sustainable funding and expand access to community-based mental health services. This could include advocating for increased investments in local mental health programs, participating in provincial and federal mental health initiatives, and collaborating on shared priorities such as youth mental health, addiction services, and crisis response. By aligning municipal efforts with provincial and federal strategies, Hamilton can improve service coordination, reduce gaps in care, and ensure residents have timely access to the supports they need.

Recommendation 2: The City of Hamilton works more closely with its community partners and city/regional wide mental health networks, including the SPCCH, to ensure comprehensive mental health strategies, lived-experience input, and resources.

The City of Hamilton can build stronger partnerships with local organizations, healthcare providers, school boards, and city-wide mental health networks, including the Social Planning and Research Council of Hamilton (SPRC), to develop a more coordinated approach to mental health within our city. This collaboration should prioritize the inclusion of individuals with lived experience in planning and decision-making, ensuring policies and programs reflect community needs. Regular information sharing, joint planning, and coordinated service delivery would help improve access to resources, reduce duplication, and strengthen Hamilton's overall mental health system.

Recommendation 3: The City of Hamilton, in partnership with Hamilton Public Health and other community-based care organizations as needed, increase public education campaigns on mental health resources, suicide prevention resources, and knowledge about where to access these resources.

The City of Hamilton, in partnership with Hamilton Public Health and community-based organizations, can expand public education campaigns that raise awareness of mental health, reduce stigma, and promote available supports.



Campaigns could use social media, public transit advertisements, community events, schools, libraries, and recreation centres to share information about local mental health services, crisis supports, and suicide prevention resources. Providing accessible, multilingual, and culturally responsive information would help ensure all residents know where and how to seek support before reaching a crisis.

Recommendation 4: The City of Hamilton takes a closer look at the mental health and well-being needs of those in our city through the creation of targets for measurable outcomes for mental health resources and supports to ensure a reduction in wait times, youth wellness hubs expansions, reducing emergency visits, and more.

The City of Hamilton can improve mental health outcomes by establishing measurable targets and regularly monitoring progress through partnerships with Hamilton Public Health and community organizations. Performance indicators could include reducing wait times for counselling and psychiatric services, expanding Youth Wellness Hubs, decreasing avoidable emergency department visits related to mental health crises, and increasing access to early intervention programs. Tracking these outcomes through annual reporting would enable the City to identify service gaps, allocate resources more effectively, and ensure continuous improvement in mental health supports.

Recommendation 5: The City of Hamilton undertake, or expand existing programs, to ensure members of our city are active and have accessible third-spaces to visit friends, be outside, and be active.

The City of Hamilton can expand and enhance programs that encourage residents to stay active, socially connected, and engaged within their communities by investing in accessible parks, trails, recreation centres, libraries, and community hubs. Increasing free or low-cost recreational programming, improving access to green spaces, supporting community events, and creating welcoming third spaces where people can gather outside of home and work would help reduce social isolation and promote mental well-being. Ensuring these spaces are inclusive, accessible, and available across all neighbourhoods would further strengthen community connectedness and support positive mental health for residents of all ages.

Wider Sector Focus

While there is room for improvement within our city, there is also room for improvement within the mental health sector and ensuring that people have access to the resources and support that they need right across our province and country.



Additional information on wider sector recommendations of the federal and provincial governments can be found at joshuamjbell.ca/advocacy/calls-of-action.

Federal Calls of Action

The following recommendations (not limited to) continue to be made to the Government of Canada to ensure that youth and Canadians are supported in their mental health and well-being.

Recommendation 1: The federal government invest and immediately implement the Canada Mental Health Transfer in the amount of \$5.2 billion over 5 years.

Recommendation 2: The federal government invests in a community mental health fund to support community-based care, including for marginalized and LGBTQ youth, to the amount of \$2.34 billion over 5 years.

Recommendation 3: The federal government provides funding to Health Canada to continue to develop and implement a strategic framework for youth mental health and well-being.

Recommendation 4: The federal government continues to invest in the National 988 to prevent suicide and provide support in the amount as needed to sustain and expand services.

Provincial Calls of Action

The following high-level recommendations (not limited to) continue to be made to the Government of Ontario to ensure that youth and residents of Ontario are supported in their mental health and well-being.

Recommendation 1: Increased Efforts for Mental Health Education

Recommendation 2: Support for Student and Campus Mental Health

Recommendation 3: Investments in Community-Based Care

Recommendation 4: Increased Support for Rural and Northern Communities

Recommendation 5: Universal Mental Health Care Coverage



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