

OUT OF THE SHADOWS AT LAST CWLC Executive Summary

The final report of the Standing Senate Committee on Social Affairs, Science And Technology, *Out of the Shadows At Last*, released in May 2006 highlights the need to address the mental health system and the needs of all Canadians, young and old.

The need for mental health reform is immediate. Data indicates that each year roughly 3% of the population will experience a serious mental illness and another 17% or so will experience a mild to moderate illness. Currently, services and supports are a patchwork that do not adequately meet the needs of many people living with a mental illness. The decision to move towards a more community-based mental health system was started with the closing of institutions, but the community-based services and supports were never sufficiently implemented leaving a gap in available services for those who needed them most. This crisis in mental health services led to the investigation by this Senate Committee and the final report *Out of the Shadows At Last*.

The Senate Committee based their report on the understanding that mental illness must be viewed with the same seriousness as physical illness. They stress the significance of the social determinants of health in understanding mental illness and in fostering recovery from it. Recovery, not a cure, is seen as the ideal state. For some recovery is seen as living a satisfying, hopeful and productive life even within the limitations caused by mental illness and for others it may be reducing or eliminating the symptoms related to mental illness. Further, a recovery-focused system is based upon three pillars: choice, community and integration. Every Canadian ought to be able to access a wide range of publicly-funded services and supports that benefit them most with these services and supports available in the communities and integrated across all levels of government and across both the public/private divide and the professional/non-professional dichotomy.

Two key recommendations come out of the report – the Canadian Mental Health Commission (CMHC) and the Mental Health Transition Fund (MHTF).

1. Canadian Mental Health Commission

The Canadian Mental Health Commission would complement the work being done by people and the existing structures at all levels of government. It is designed with these key principles in mind: be an independent not-for-profit organization at arms-length both from governments and all existing mental health "stakeholder organizations"; and make those living with mental illness, and their families, the central focus of its activities. It is recommended that the CMHC consist of nineteen members, with approximately one third from governments and approximately two thirds without any government affiliation or connection. The Board members must not see themselves, or be seen, as representative of any of the narrowly-focused interest groups that now constitute integral parts of the

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current mental health system. The key mission of the CMHC is: to act as a facilitator, enabler and supporter of a national approach to mental health issues; to be a catalyst for reform of mental health policies and improvements in service delivery; to educate all Canadians about mental health and increase mental health literacy among them; and to diminish the stigma and discrimination faced by Canadians living with a mental illness, and their families.

2. Mental Health Transition Fund

The purpose of the Mental Health Transition Fund (MHTF) is to allow the federal government to make a time-limited investment in mental health to cover the transition costs and to accelerate the process of developing a community-based system of mental health service delivery. The Fund is to be in place for 10 years. The amount is to be based on a per capita basis (with smaller jurisdictions having a different funding formula applied) and the provinces/territories would decide how to allocate these funds. The CMHC would maintain responsibility for administering the MHTF. The recommendations outline two main components for the Fund:

- Mental Health Housing Initiative (MHHI) to provide federal funds for the development of new affordable and appropriate housing units and for rent supplements to permit people living with mental illness, who could not otherwise afford to do so, to rent accommodation at market rates (\$2.24 billion over 10 years)
- **Basket of Community Services** (BCS) that will assist provinces to provide people living with mental illness with a range of services and supports in the community (\$2.15 billion over 10 years)

Annual costs for implementing all the Committee's recommendations are as follows:

ITEM	COST
	(\$ in millions per year)
Mental Health Commission	17.0
Mental Health Housing Initiative	224.0
Basket of Community Services	215.0
Concurrent Disorders Program	50.0
Tele-mental health	2.5
Peer support	2.5
Research	25.0
TOTAL	536.0

Children and Youth Mental Health

Chapter 6 of *Out of the Shadows At Last* is dedicated specifically to the issues related to children and youth mental health. Key areas of interest in this chapter are:

• The need to have seamless service delivery for children and youth, regardless of age. Children and youth ought to be able to access the services they need without being impeded by arbitrary criteria such as age. Where this is necessary, services need to be smooth as the youth moves from one mental health system to another.

- Interventions need to be more accessible (i.e., in schools) so that children and their families can access them. This move to a school-based setting will allow the involvement of teachers and other educational professionals in the services provided.
- Mental health and social services need to be coordinated to ensure that all the needs of children, youth and their families are met. The systems need to be coordinated to work in tandem to meet all the needs of children, youth and their families.
- Early intervention is important to ensuring that those problems that can be detected and treated early are, so as to limit the negative impacts these mental health issues can have on both the child/youth and their family.
- The education system must be better equipped to recognize and deal with mental health issues in its students. Issues around class sizes so teachers know their students better and training in mental health issues for teachers during their education were raised as potential means to achieve better understanding in the education system.

Conclusions and Next Steps

In order for the federal government to fund the investments in mental health, mental illness and addiction initiatives, the Committee recommends that the Government of Canada should raise the excise duty on alcoholic beverages by a nickel for a standard drink. This should provide enough revenue to fund the proposed initiatives.

The Committee believes it is essential to move forward quickly on the recommendations wants the CMHC established and operational by September 1, 2006. They are currently in the process of gaining support from the provinces and territories for this report and signing on to the commitments it lays out.

To view the report in full, visit:

http://www.parl.gc.ca/common/Committee_SenRep.asp?Language=E&parl=39&Ses=1&comm_id=47

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