



# Mental Health System Transformation Phase 1: Building Support for Goals for a Mental Health Strategy for Canada

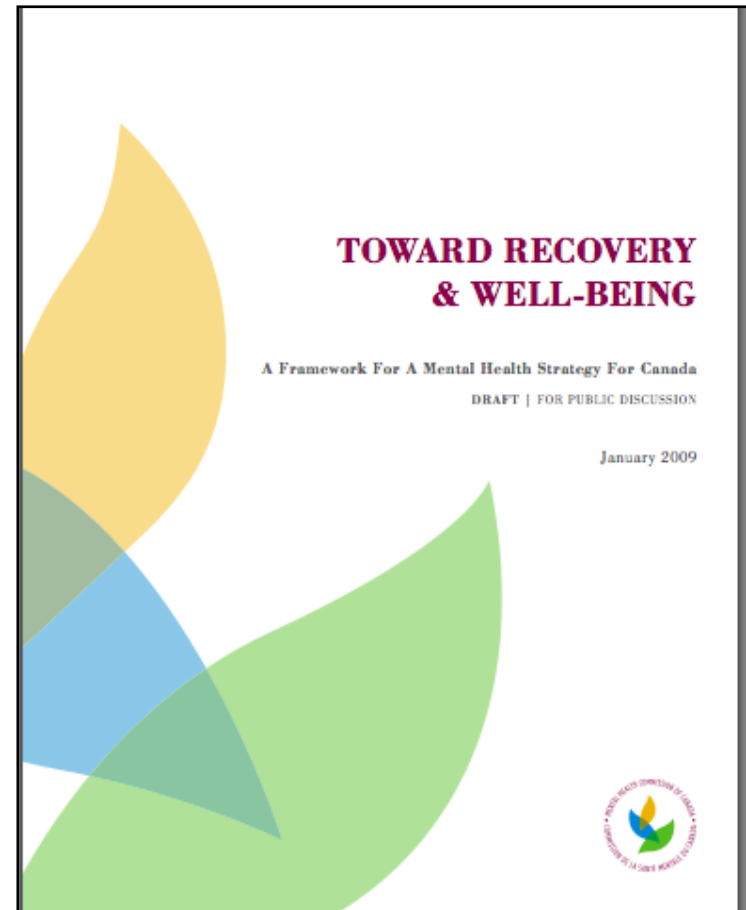
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# PRESENTATION OVERVIEW

- the context
- the 8 proposed goals
- preliminary findings from recent public and stakeholder consultations
- focus on the research goal.
- implications for mental health policy and services research.





# CONTEXT OF THE COMMISSION

- Relatively new organization, relatively small
- At arm's length from all levels of government, federal funding
- Mental health strategy for Canada is part of mandate
- MHCC cannot implement strategy and role is not to monitor and evaluate provincial performance
- A “catalyst” for mental health system transformation



# GUIDING PRINCIPLES FOR STRATEGY

- Practical
  - “Just inside the outer edge of political feasibility”
- Adaptable
  - To different regions, jurisdictions, etc.
- Inclusive and collaborative
  - MHCC will seek advice and support across a wide range of sectors and stakeholders
- Comprehensive



## COMPREHENSIVE MEANS:

- Prevention of mental illness/episodes where possible, promotion of well-being for all, recovery, treatment, care
- Address the full range of mental, physical needs holistically
- Whole system: community, primary health care, institutions, etc.
- Address diversity and be inclusive
- Across the lifespan
- All regions of the country, including Northern, remote and rural
- All policies that touch on mental health, across private and public sectors, across jurisdictions and government departments



# PHASED APPROACH TO DEVELOPMENT

- Framework is first phase:
  - Describes WHAT a transformed mental health system should look like
  - Finalized in early summer
- Second phase will look at HOW to achieve the vision:
  - a plan of action for each sector and constituency
  - measureable objectives that align with the framework goals
  - conclude work in fall 2011
- Third phase: supporting IMPLEMENTATION



# RATIONALE FOR THE CHOICE OF GOALS

- Each goal defines one key objective
- Goals are interdependent and interrelated.
- Taken together, the goals describe WHAT a transformed mental health system should look like
- Goals have relevance for all Canadians regardless of:
  - their role (e.g. provider, person living with a mental health problem or illness, family member, citizen)
  - their age, region of the country, ethno-racial background, etc.



# TOWARD RECOVERY AND WELL-BEING

1. The hope of recovery is available to all.
2. Action is taken to promote mental health and well-being and to prevent mental health problems and illnesses.
3. The mental health system is culturally-safe, and responds to the diverse needs of Canadians.
4. The importance of families in promoting recovery and well-being is recognized and their needs are supported.



## TOWARD RECOVERY AND WELL-BEING

5. People of all ages have equitable access to a system of appropriate and effective programs, services and supports that are seamlessly integrated around their needs.
6. Actions are based on appropriate evidence, outcomes are measured and research is advanced.
7. Discrimination against people living with mental health problems and illnesses is eliminated, and stigma is not tolerated.
8. A broadly-based social movement keeps mental health issues out of the shadows – forever.



## CONSULTATIONS

- Internal to MHCC: September – December 2008
  - Consumer Council,
  - 8 Advisory Committees (approx.120 members)
  - Board of Directors
- External: February – April 2009
  - 15 Regional Stakeholder Dialogues
  - Electronic: Public and Stakeholder
    - 1.Workbook and stories and ideas
  - FPT Mental Health Issues Group, Deputy Ministers of Health



# WHAT HAVE WE HEARD? – ANALYSIS TO DATE



## REGIONAL DIALOGUES

- Overall support strong excellent turn out, tremendous enthusiasm
- Strong mandate that framework is on the right track,
- Many excellent suggestions for how it can be strengthened
- Can be a unifying vision and a reference point for discussions about how to get the job done
- Contributed to growing momentum across the country,
- Chance to meet with many provincial and territorial government officials and learn about their policy initiatives



## SOME CONCERNS

### ➤ Recovery

- General support for underlying principles (hope, empowerment, choice, responsibility)
- concerns about the term itself and applicability to children/youth and seniors

### ➤ Term cultural safety

- After explaining the term, generally good support

### ➤ Social Movement

- Support for concept, strategy
- Issues concerning application: Is it a grassroots movement? Should it be exclusively a 'consumer' movement?

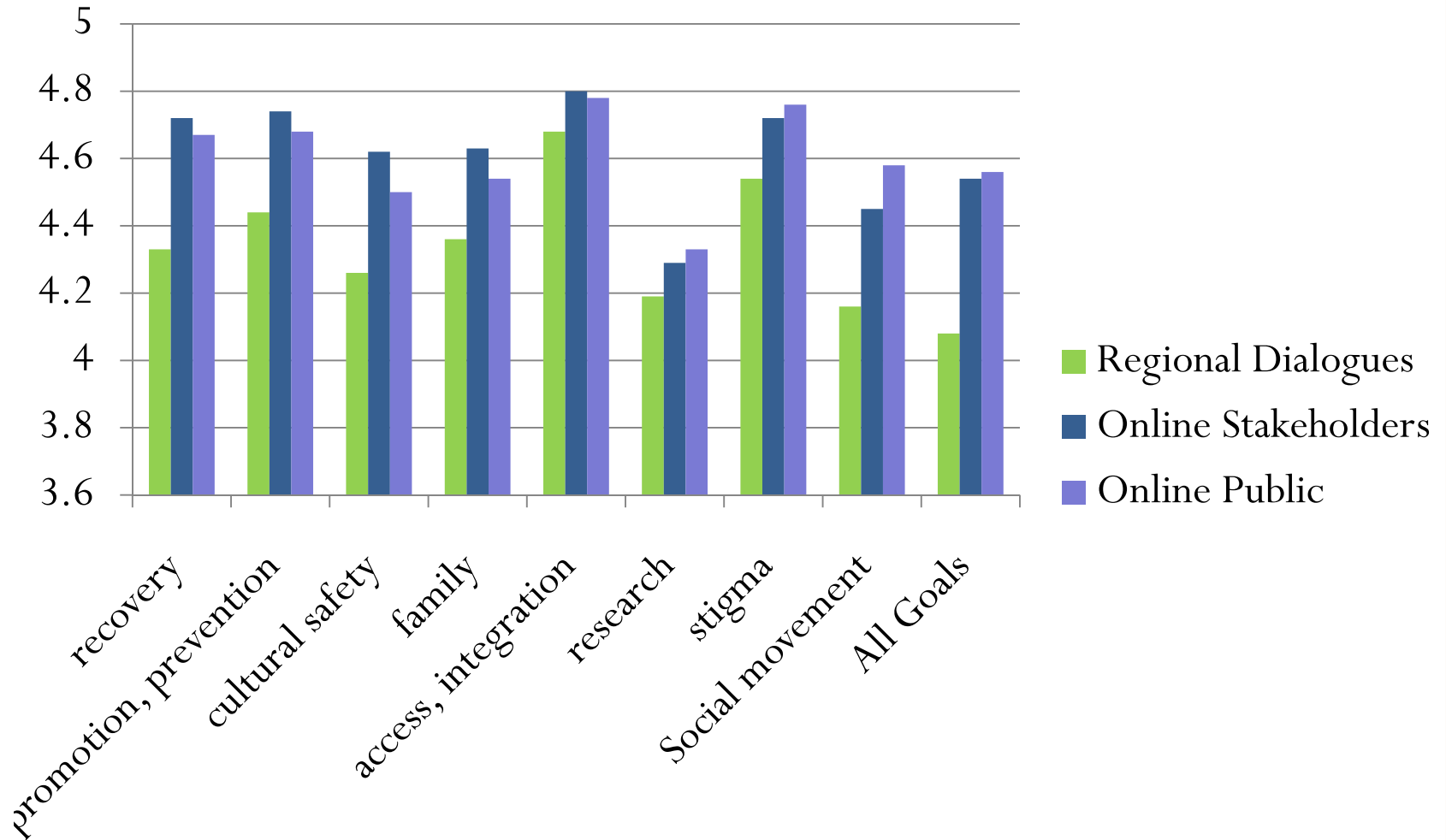


# ON-LINE CONSULTATION

- February 10<sup>th</sup> until April 19<sup>th</sup>
- Included options for:
  - individuals or stakeholder groups
  - structured workbook and/or narrative responses
- 1575 individual, 300 stakeholder responses
- Almost 390,000 words of comments in the text boxes provided.
- Excellent mix of people with lived experience, family members, service providers, and others
- Analysis at early stage



# EXTENT OF AGREEMENT WITH GOALS





## FEEDBACK ON RESEARCH GOAL- Stakeholders

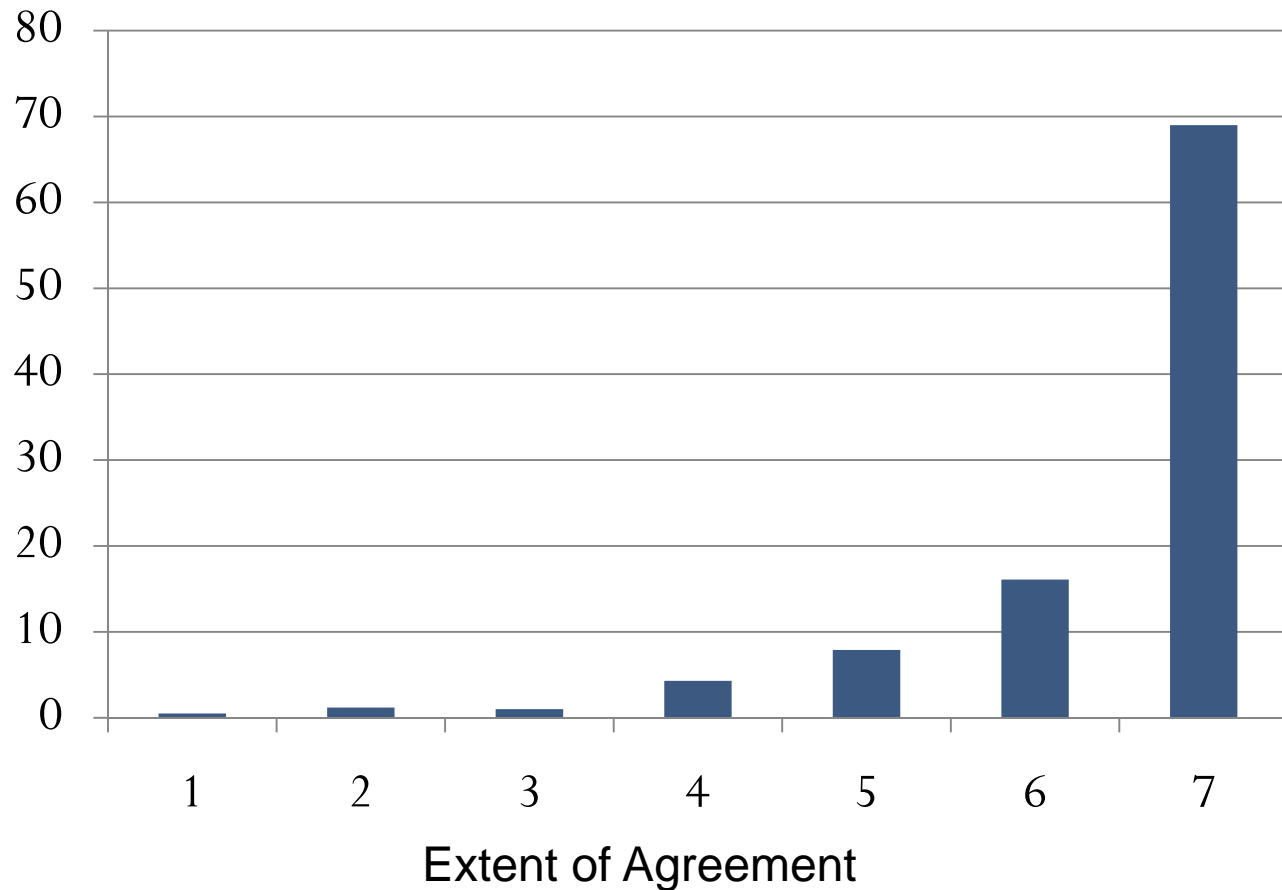
- Support for multiple types of knowledge (scientific, lived experience, indigenous science) and plea to strengthen this
- Funding to be in keeping with importance of mental health/impact of mental illness
- General frustration with how long research takes in light of urgent needs. Calls for:
  - ‘innovative thinking’, ‘out of the box solutions’, ‘paradigm shift’, ‘real innovations’



# FEEDBACK ON RESEARCH GOAL - PUBLIC

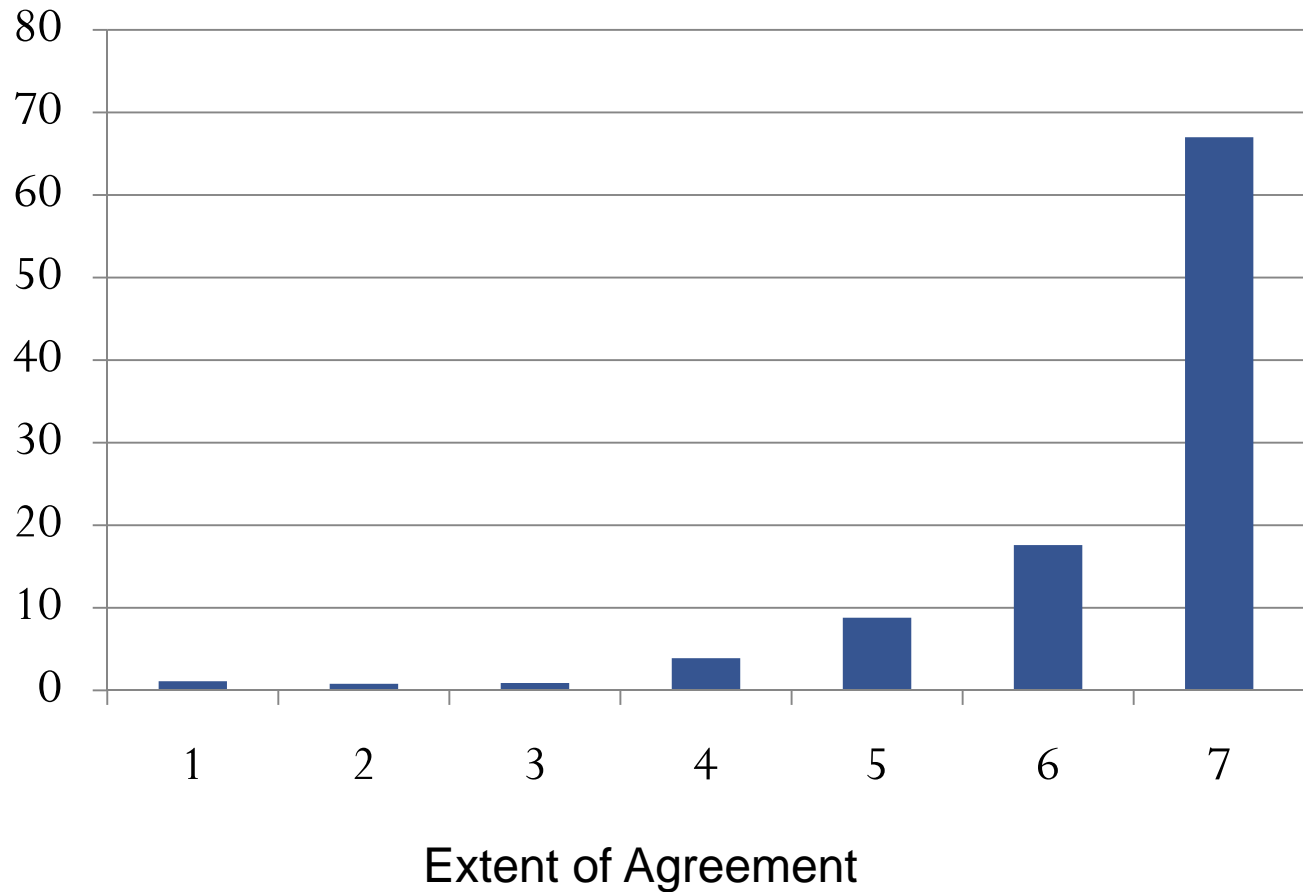


***Funding for mental health and mental illness research should be increased so that it reflects the economic and social costs of mental health problems and illnesses to society.***



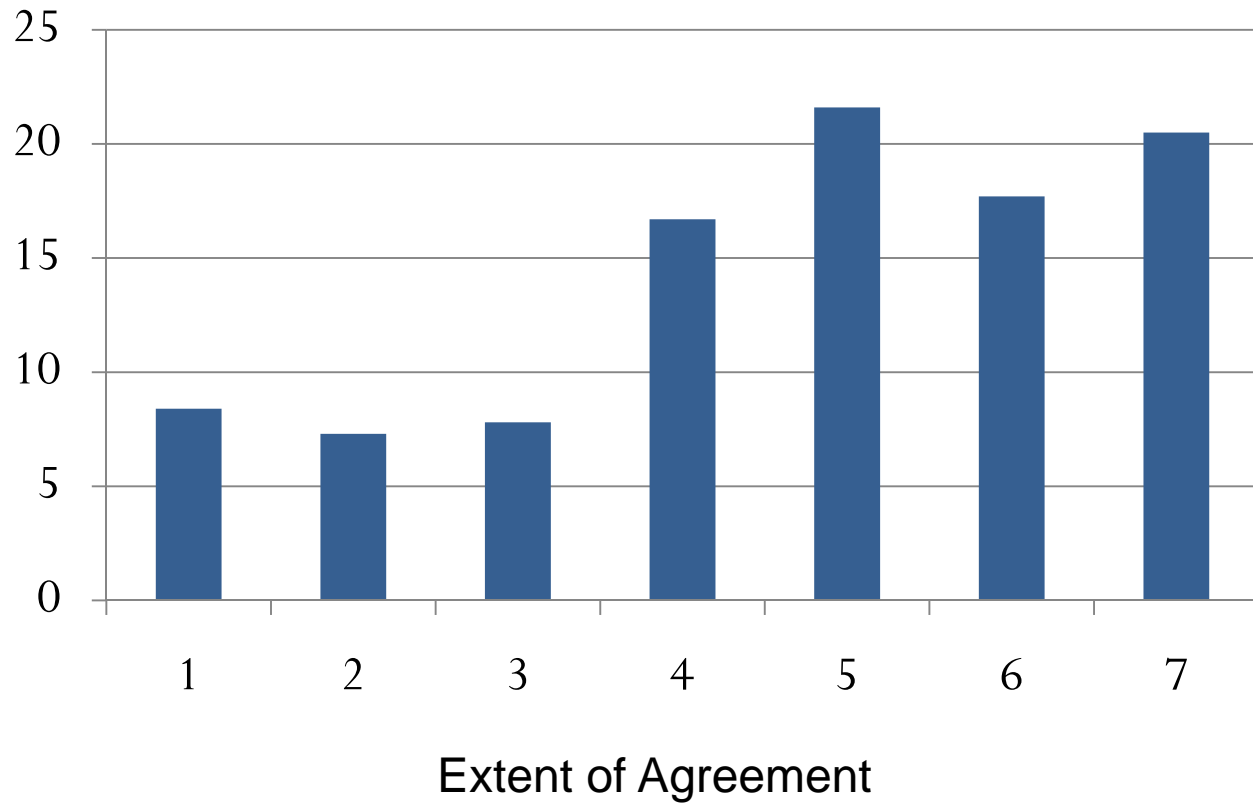


*All levels of government need to work together to develop a common way to measure the success of mental health policies and programs.*



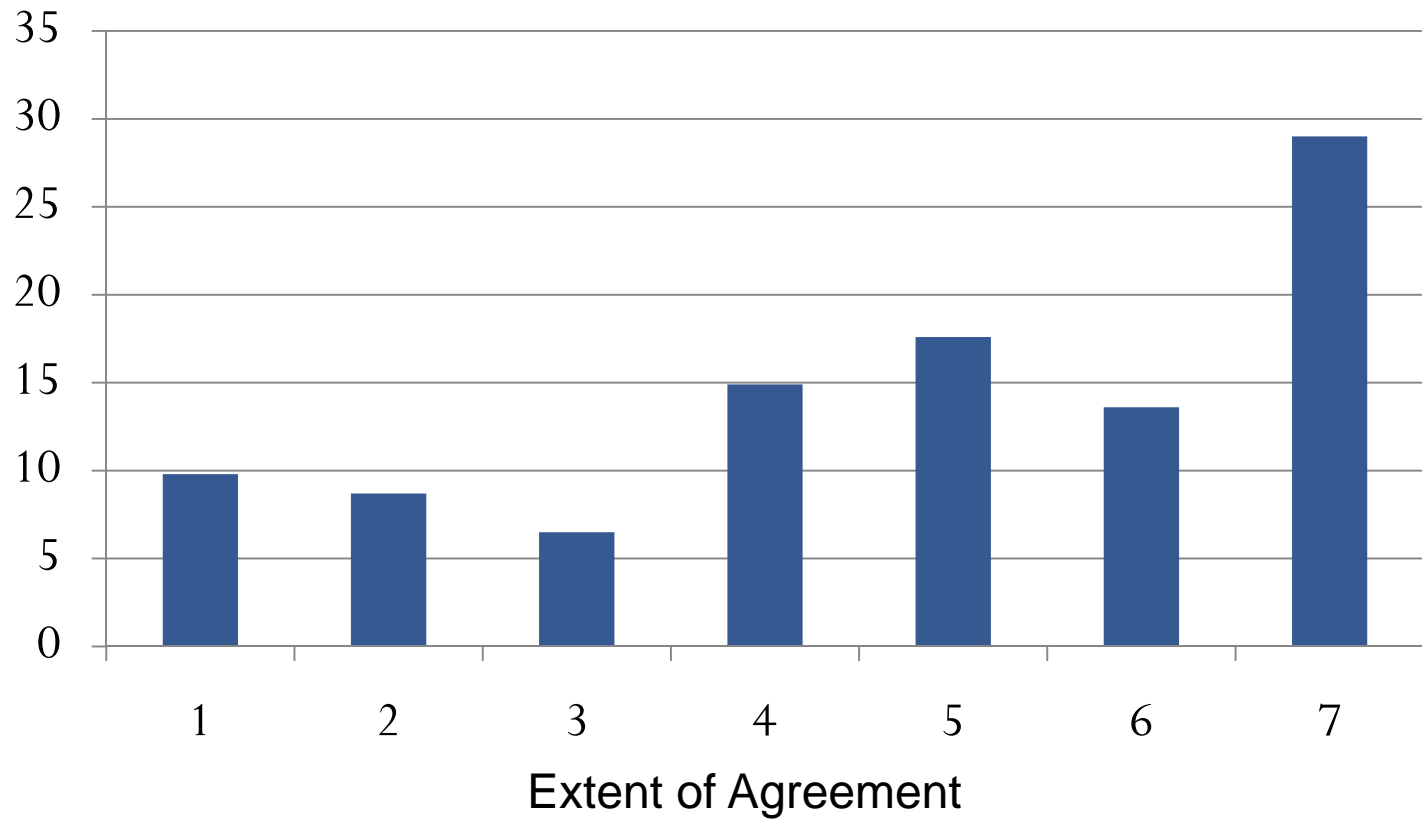


*It is important to take the extra time to prove - to a high standard of scientific evidence - that a program works before it is funded.*



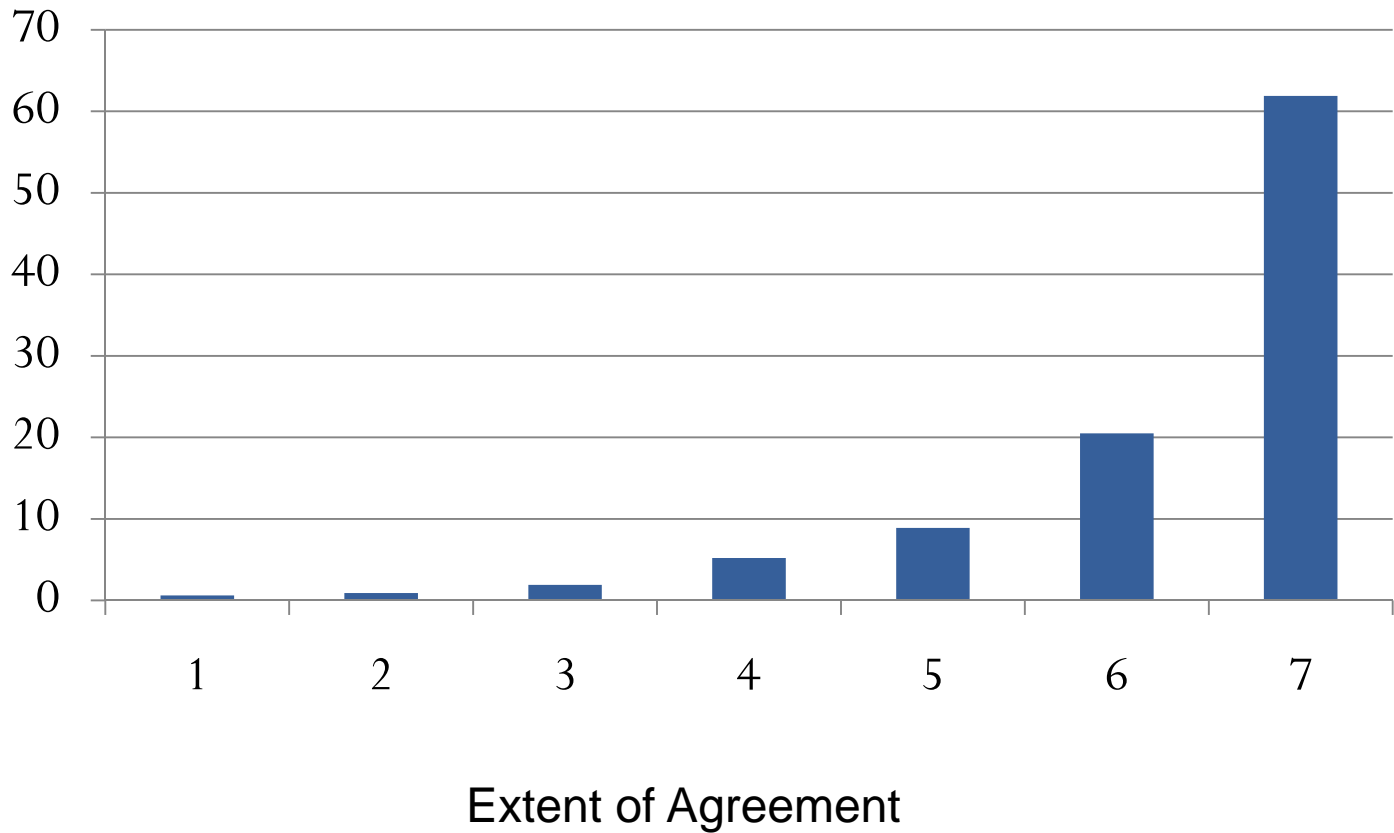


*There is too much emphasis on medical and drug research.*





*Lived experiences of mental health problems and illnesses, as well as the knowledge of traditional cultures, are valid sources for research.*





# CHALLENGES FOR HEALTH SERVICES AND POLICY RESEARCH

- Evaluation and measurement of progress toward goals for each population subgroup:
  - Recovery
  - Promotion and Prevention
  - Cultural Safety
  - Families
  - Access and Integration
  - Research
  - Stigma and Discrimination
  - Social Movement
- Databases incomplete: What can be done with existing data?
  - No mandate to judge provincial/territorial progress.



# CHALLENGES FOR HEALTH SERVICES AND POLICY RESEARCH

- Social determinants of mental health – for recovery and mental health promotion approaches
- Health human resource strategy: numbers, regulations, remuneration, training in recovery and cultural safety, collaboration, and so on.
- Integrating mental and physical health systems around people's multiple needs across the lifespan
- How to improve access to non-CHA funded treatments?
- How to make system and research more person-centred?
  - Involve consumers, family members



## DRAFT FRAMEWORK AVAILABLE FROM:

- [http://www.mentalhealthcommission.ca/SiteCollectionDocuments/Key\\_Documents/en/2009/Mental\\_Health\\_ENG.pdf](http://www.mentalhealthcommission.ca/SiteCollectionDocuments/Key_Documents/en/2009/Mental_Health_ENG.pdf)



# APPENDIX



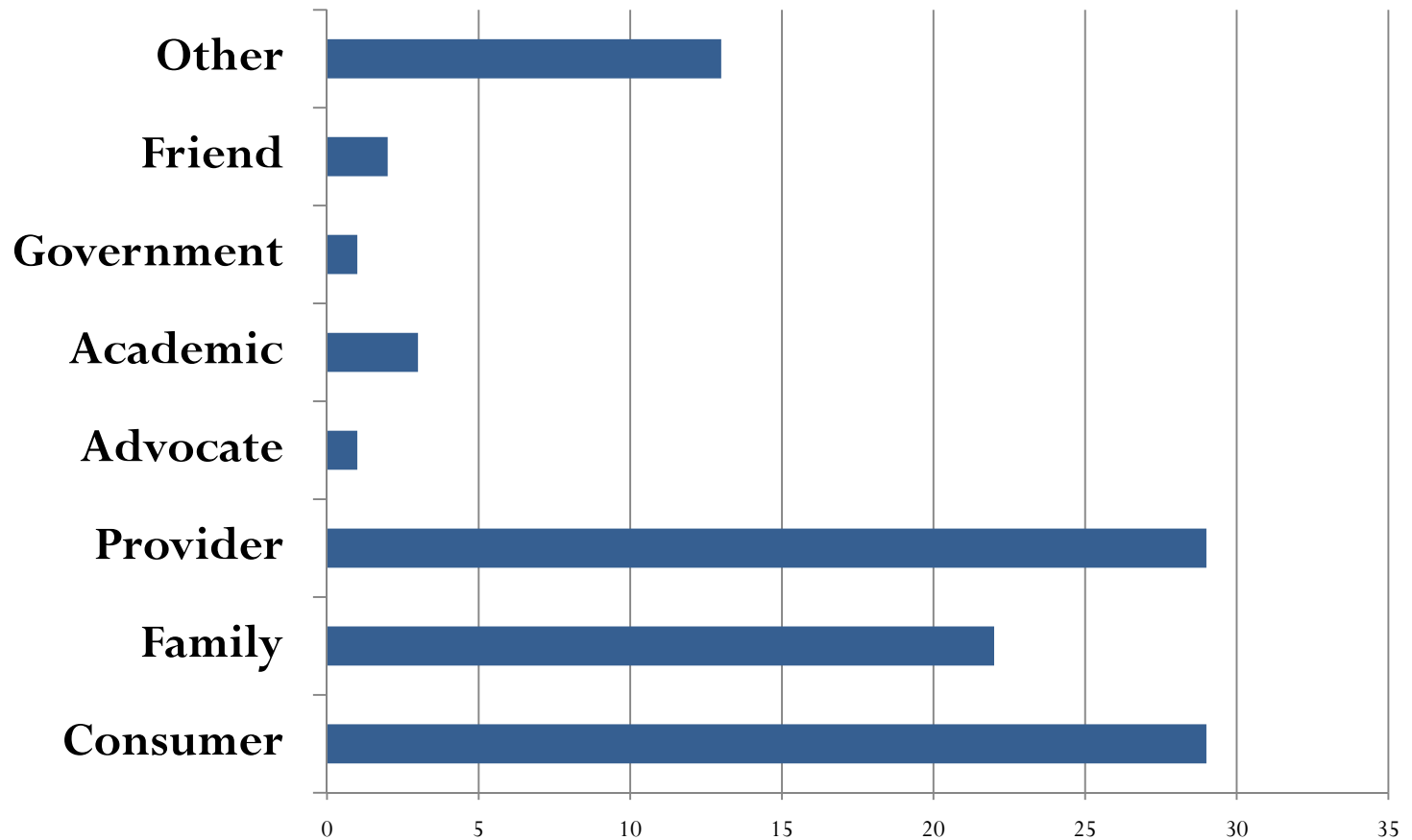
# STAKEHOLDER MEETINGS

- 15 dialogues held between February 3<sup>rd</sup> and April 8<sup>th</sup>

Feb 3	St. John's	Feb 27	Whitehorse
Feb 5	Halifax	Mar 10	Montreal
Feb 10	Ottawa (nat'l org's)	Mar 17	Iqaluit
Feb 12	Thunder Bay	Mar 24	Yellowknife
Feb 18	Toronto	Mar 26	Edmonton
Feb 20	Ottawa (fed. dept's)	Mar 31	Ottawa (Aboriginal)
Feb 24	Regina	Apr 8	Winnipeg
Feb 26	Vancouver		

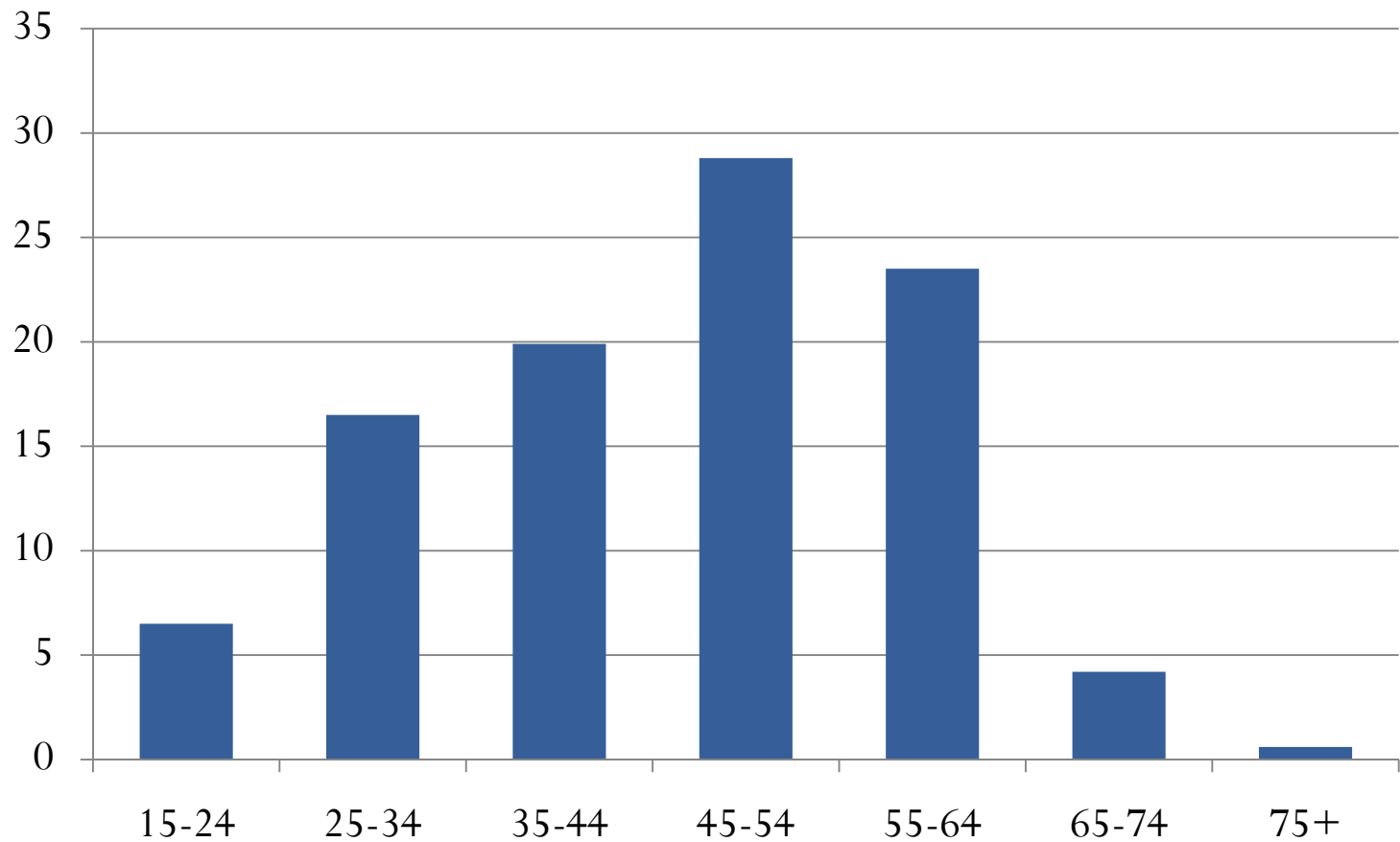


## % OF PARTICIPANTS IN ELECTRONIC CONSULTATIONS BY CATEGORY



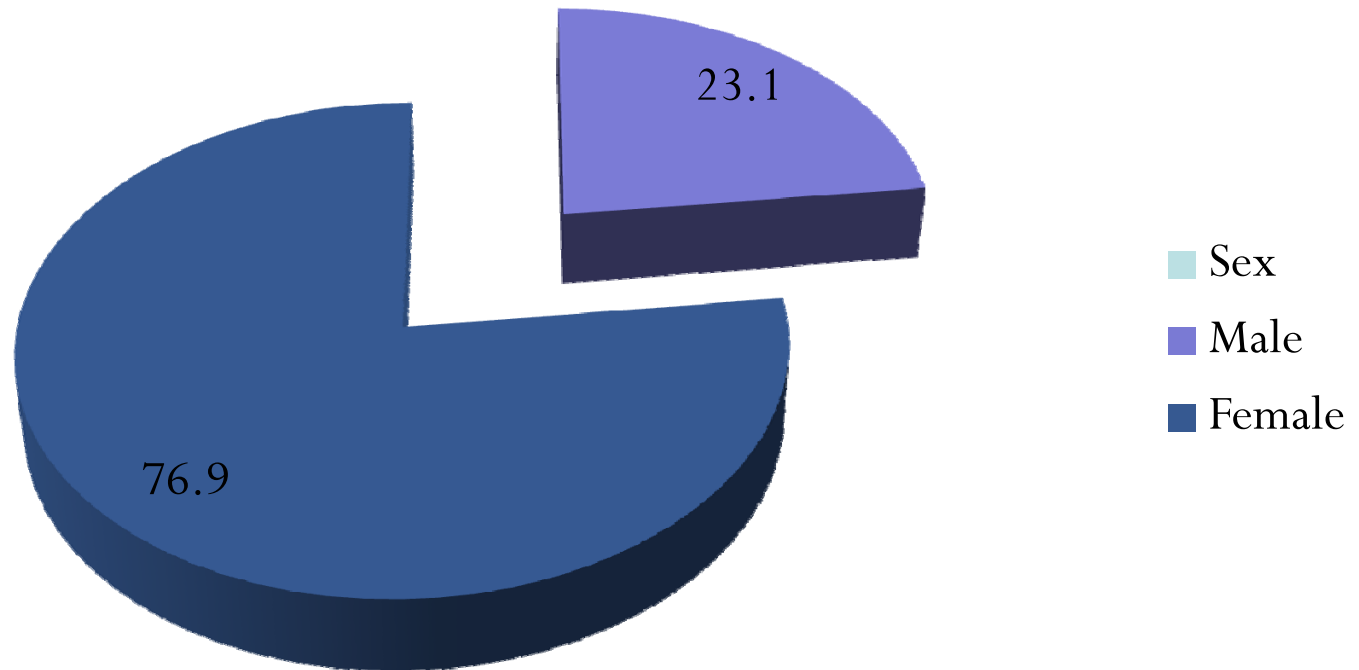


## % OF PARTICIPANTS IN ELECTRONIC CONSULTATIONS BY AGE



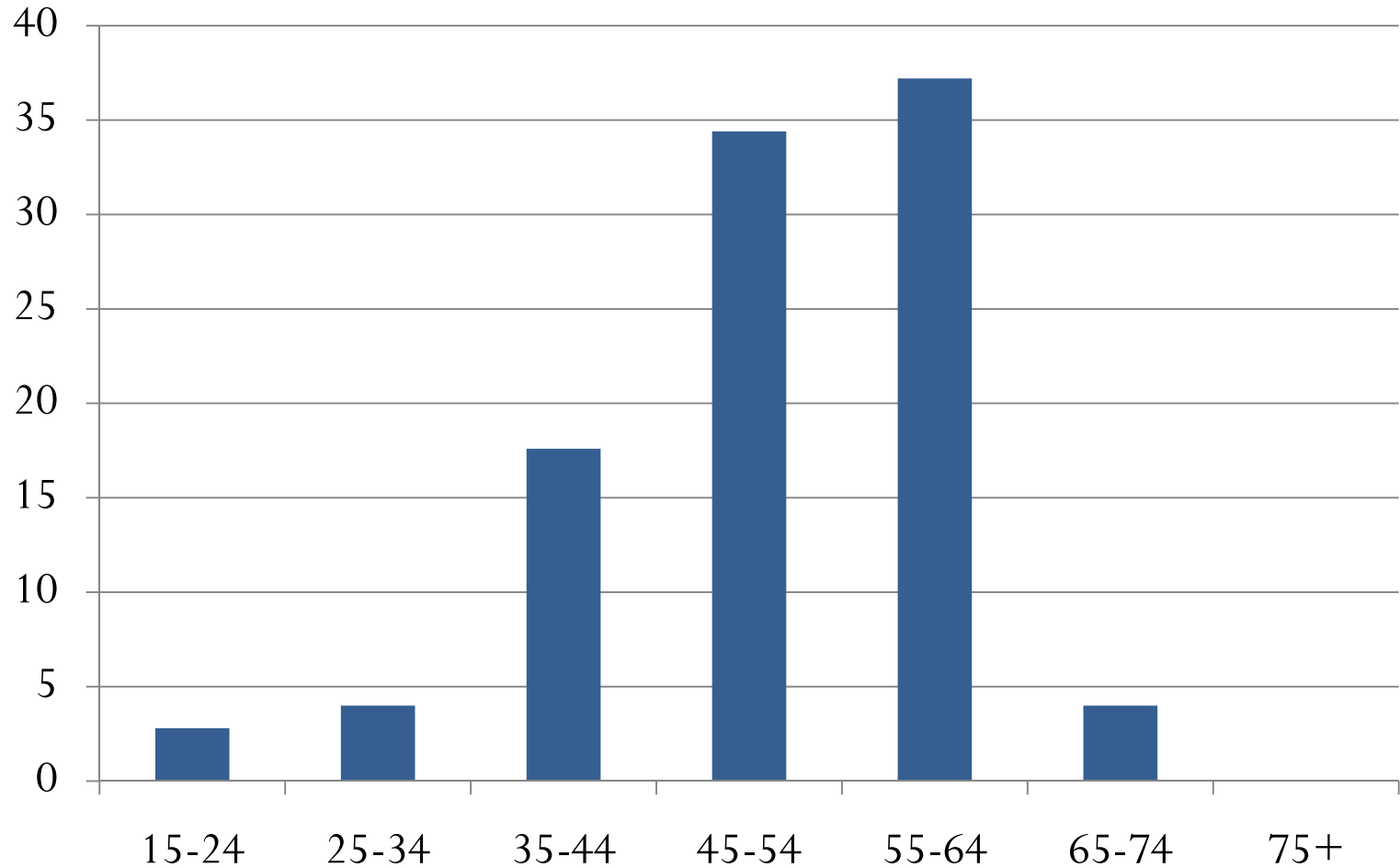


## % of PARTICIPANTS IN ELECTRONIC CONSULTATION BY SEX



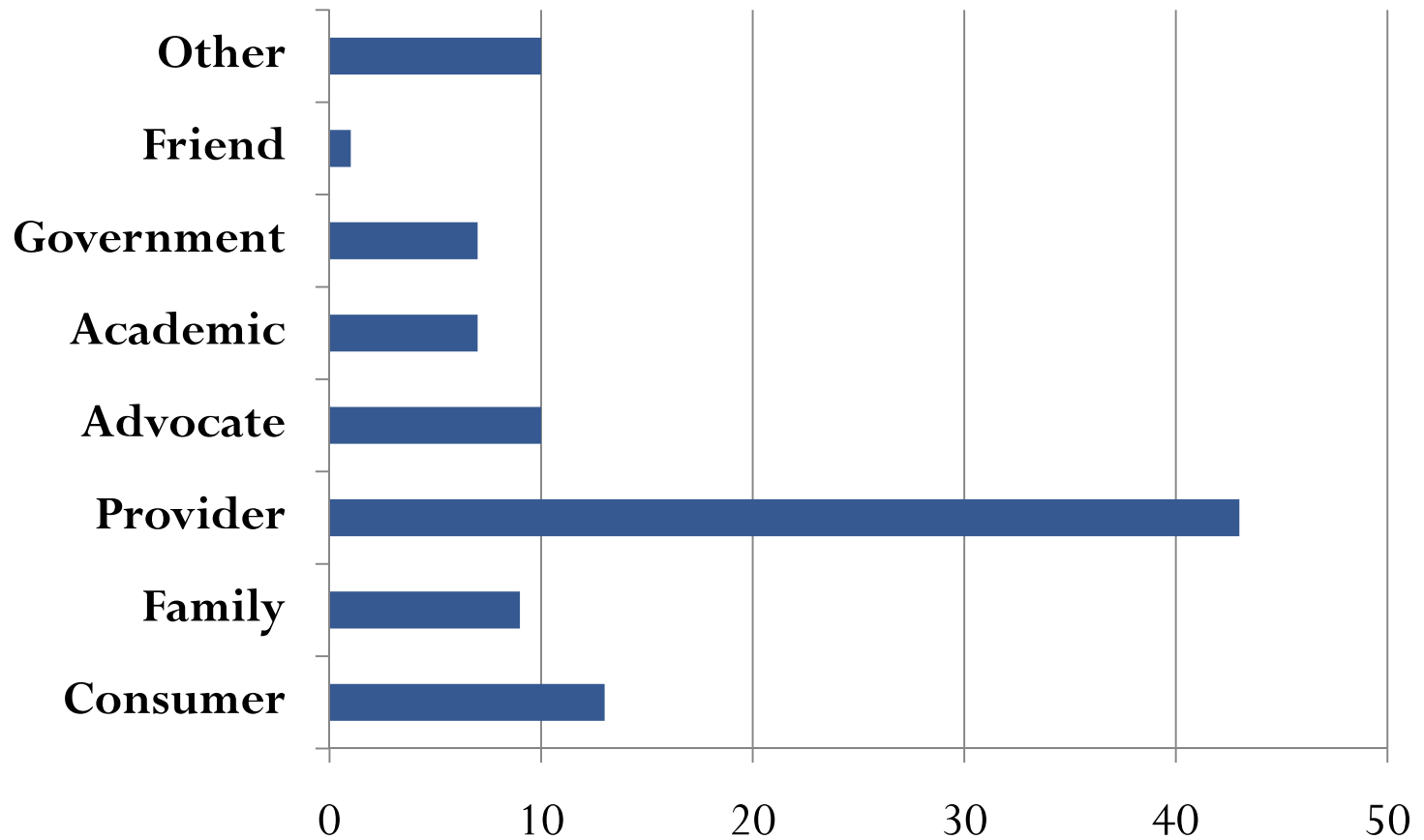


## % OF PARTICIPANTS IN REGIONAL SESSIONS BY AGE





## % OF PARTICIPANTS IN REGIONAL SESSIONS BY CATEGORY





## % OF PARTICIPANTS IN REGIONAL SESSIONS BY SEX

