



**Addictions Ontario
Canadian Mental Health Association, Ontario
Centre for Addiction and Mental Health
Ontario Federation of Community Mental Health and Addictions Programs**

**Joint Written Submission to
The Standing Committee on Finance and Economic Affairs
on the
2007 Ontario Budget**

January 2007

**JOINT SUBMISSION TO THE LEGISLATIVE ASSEMBLY OF ONTARIO
STANDING COMMITTEE ON FINANCE AND ECONOMIC AFFAIRS
2007 PRE-BUDGET CONSULTATIONS**

Introduction

By way of introduction, we represent the Ontario Federation of Community Mental Health and Addiction Programs, the Canadian Mental Health Association Ontario, Addictions Ontario, and the Centre for Addiction and Mental Health. Together, our organizations and our respective branches, members and satellite offices provide services and supports across Ontario for thousands of individuals and families living with mental illness and addiction.

The Need for Action

Let us begin by indicating that we are encouraged by the leadership role the Ontario government has taken in moving forward in the necessary reform of the mental health and addiction systems. If we consider the statistics:

Prevalence:

- One in five Canadians will experience a significant mental health episode at some point during their lifetime
- One in every eight Canadians will be hospitalized for mental illness at least once in their life – more than are hospitalized for cancer and heart disease.
- One in every 10 Canadians aged 15 and over reported symptoms indicating alcohol or illicit drug dependence in 2002-03; and
- 30 percent of people diagnosed with a mental health disorder also have a substance abuse problem (known as concurrent disorders). This rate is even higher for people already in contact with the mental health and addictions treatment system: in Ontario, concurrent disorders are believed to range from 15 to 45 percent among those receiving mental health services, and 75 to 100 percent among those receiving substance use services

Cost:

- In 2000, the total economic cost attributable to mental disorders and substance abuse in Ontario was \$33.9 billion dollars.
- The total direct costs of mental disorders and substance abuse were \$2.1 and \$3.0 billion respectively
- The long-term productivity losses associated with mood disorders alone was \$11.7 billion dollars

Given that the Government of Ontario is currently “transforming” Ontario’s health care delivery system, there is a growing imperative for the Government of Ontario and the Members of the Legislative Assembly of Ontario to become more actively engaged in ensuring that Ontario is positioned to participate fully in the development of that plan and that the growing population of Ontarians requiring mental health and addiction services can access the services and supports it needs.

2007-08 Budget – Moving Forward

Mental health has long been marginalized within the health care system. This government has recognized the need to improve supports and services for people with mental illness, and has moved forward with the necessary reform of the mental health system. In the 2004-05 budget, your government committed to increasing investments in community mental health services to a total of \$583 million in 2007-08. We urge you to follow through on this commitment by continuing your investments through the 2007-2008 budget.

Funding for mental health and addictions services

Our sector still faces the challenge of sufficient funding to provide service to the people who need it. A key result of funding shortfalls is the inability of community-based agencies to pay the salaries that allow them to attract and retain staff and a shortage of base funding to support administration. The existing commitment of a two percent annual increase to the mental health sector is only a start. This must be extended to community addiction services, where increased funding is urgently required. Funding in this sector has failed to keep pace with inflation, population increases and increased service demand. A recent survey of Canadian addictions agencies found Ontario addictions executives extremely concerned about their ability to retain staff and offer competitive salaries. A recent survey of addictions agencies in Ontario documented alarming gaps in two areas of staffing, with only 18.8% of respondents reporting adequate numbers of direct service staff, and only 6.2% reporting adequate Information Technology/Information Management staff¹. We would urge that you recognize the importance of ensuring that funding is provided for services and supports for people with addictions as well as with mental health problems.

Support for consumers and families

People with mental illness and their families are also a key support for each other. We urge you to build upon the financial support provided to consumer peer support groups to recognize the importance of also supporting their family members. Families are better able to cope and to support their loved ones when they receive support from each other and from professionals. Currently the few family peer support groups that do exist manage on a shoe string. Even a small increase of funding for family peer support would go a long way in helping these families. They would also benefit greatly from professional support, however there are currently very few programs run by professionals in place for family members.

Continue to build concurrent disorder services

The mental health and addiction systems have worked to overcome the divisions that traditionally led to people with both mental health and addiction problems falling through the cracks between services. Among people diagnosed with a mental illness, 30 percent will have a substance use disorder at some point in their lives. Similarly, 37 percent people with an alcohol disorder will also have a mental health disorder in their lifetime.

¹ Canadian Centre on Substance Abuse: “Optimizing Canada’s Addiction Treatment Workforce: Results of a national survey of service providers.” 2005.

Determinants of health: housing, income, employment

Health involves more than health care. For people with mental illness and addictions and their families, investments in housing, income support programs and employment are all necessary for recovery. Increased access to these social determinants of health has been demonstrated to improve clinical status, reduce hospitalization, and enable people with mental illness to stay in their homes and communities. As such, we support collaboration between the relevant ministries and with the federal government as a means to achieving these goals.

A body of experience and evidence has demonstrated that a diverse population of people with psychiatric disabilities can succeed in housing if appropriate supports are available. This includes affordable housing, rent supplements, and supports for people with serious mental illness to stay housed. We are pleased that the Ontario government committed in its 2006 budget to the creation of 15,000 new units of affordable housing, including supportive housing for people with mental illness, and 5,000 housing allowances. The Minister of Municipal Affairs and Housing has said recently that he anticipates only 9,000 of those 15,000 promised units will be occupied or under construction by March 2007.² We urge you to continue your commitment to the Canada-Ontario Affordable Housing Program Agreement which involves a total of \$301 million from the Ontario government for affordable housing.

Income is also key to recovery from addiction and mental health problems. Unfortunately, many government income programs provide benefits that are too low, create barriers to employment, and are not flexible enough to respond to the episodic nature of mental illness. In addition, disability is often defined too narrowly for many people with mental illness or addictions to qualify. We urge the government to continue to expand on its positive record and increase the rates for the Ontario Disability Support Program (ODSP) by at least 10 percent, with a commitment over the coming years to raise the rate to reflect the real cost of living and to adjust it annually for inflation.

Like housing and income, access to employment is a key determinant of health. Unfortunately, many people with mental illnesses and addiction face barriers to employment. People living with these issues have been shown to succeed in employment if flexible supports are available. Supported employment and consumer-run alternative businesses can make a dramatic difference in lives of people with mental illness and/or addiction by providing them with the opportunity to earn an income and improve their quality of life.

In addition, there are many working people who are experiencing mental illnesses. Greater emphasis must be placed on ensuring that people with mental health problems are meaningfully accommodated in the workplace. Funding is required to educate employers and employees about the Accessibility for Ontarians with Disabilities Act, which was brought into law by your government, and their rights and responsibilities under it. Measures to support employers to create healthier workplaces will also serve to reduce the burden of disability-related costs to Ontario's economy, two-thirds of which are related to mental illness. Education and supports for employees to recognize the signs and symptoms of mental

² Estimates Committee, Government of Ontario, October 11, 2006

illness and to know their rights in the workplace would enable employees living with mental illness to be proactive, enabling them to stay in the work force and stay healthy.

Conclusion

We appreciate that, as you prepare your recommendations for the Minister of Finance, you will be faced with difficult decisions. We would ask that you recognize the importance of our recommendations to the lives of the individuals and families in our communities – communities you represent -- struggling with the challenges of mental health and addiction. We urge that you identify investment in mental health and addiction as a priority and recommend that the Minister of Finance continue to address the increasing need of Ontarians to access a continuum of quality care and supports for mental health and addiction in their communities. We applaud the Government's commitment to Ontarians with mental illness and addiction demonstrated to date, and we ask for continued support.

We thank you for your consideration.

If you have any questions about this submission, please feel free to contact Barney Savage or Barbara Neuwelt:

Barney Savage
Director of Public Policy
Centre for Addiction and Mental Health
(416) 535-8501 x2132
barney_savage@camh.net

Barbara Neuwelt
Policy Analyst
Canadian Mental Health Association, Ontario
(416) 977-5580 x4140
bneuwelt@ontario.cmha.ca