
For Information

REPORT TITLE: Advocacy to Support Investment in Peel’s Community Mental Health and Addictions System

FROM: Nancy Polsinelli, Commissioner of Health Services

OBJECTIVE

To outline ongoing efforts to strengthen the Region of Peel’s mental health and addictions advocacy strategy focused on achieving a funding formula that considers Peel’s population size and needs, and targets specific and sustainable investments to address growing waitlists for services and crisis levels exacerbated by COVID-19.

REPORT HIGHLIGHTS

- Only one in three Peel residents is expected to receive mental health or addictions treatment or services when they need it, which leaves an estimated 184,000 Peel residents (including just over 60,000 children and youth) without the necessary interventions that they need.
 - A review of transfer payments allocated to Health Service Providers (HSPs) for mental health and addictions services in 2021 by Central West and Mississauga Halton Local Health Integration Networks (LHINs) shows an average per capita funding of \$51.35 and \$35.94 respectively, compared to Ontario at \$88.10.
 - Similarly, Peel’s child and youth population (ages 0-17) received 6 per cent of funding from child and youth mental health transfer payments from the province despite making up almost 12 per cent of the province’s child and youth population.
 - Prior to the onset of COVID-19, Peel was already facing a mental health and substance use crisis. Despite ongoing advocacy by the Region of Peel and local community mental health and addictions system partners, there continues to be an inequity in provincial funding for mental health and addictions services in the Peel service area.
 - The Region of Peel, in collaboration with community partners, is focused on strengthening advocacy to the province to (1) immediately commit and implement a funding formula that considers population and demographic factors, community needs and accounts for additional systems pressures due to the impacts of COVID-19 in Peel and (2) ensure that targeted, specific and sustainable investments are made to Peel’s community-based MHA services to address growing waitlists and crisis levels exacerbated by COVID-19.
 - The immediate implementation of a sustainable funding formula that responds to population needs will enable Peel’s community mental health and addictions system providers to reduce wait times and waitlists, improve care options, and reduce the burden on the acute care system (e.g., emergency departments).
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DISCUSSION

1. Background

Without adequate funding and sufficient availability of mental health and addictions services, only one in three Peel residents is expected to receive the treatment or services that they need which leaves an estimated 184,000 Peel residents (including just over 60,000 children and youth) without necessary supports. This gap in services suggests that many residents in Peel lack access to appropriate community supports and services at the right place, at the right time.

Prior to the onset of COVID-19, Peel was already facing a mental health and substance use crisis (i.e., overdose and deaths related to opioid and non-opioid substances with higher drug toxicity). Although many indicators of opioid use and harms are lower in Peel than elsewhere in Ontario, there has been a rising trend in opioid-related morbidity and mortality over the last three years. In response, Peel Public Health continues to implement the Peel Opioid Strategy, endorsed by Regional Council on December 12, 2019, with a focus on the Harm Reduction Pillar as detailed in the May 26, 2022 report to council titled “Peel Opioid Strategy Update”.

The pandemic has highlighted how upstream measures such as mental health promotion, harm reduction, and recovery care are instrumental to an individual and community well-being. Furthermore, social supports including housing, income supports, and other services were also identified as critical supports for residents navigating mental health and/or substance use issues. However, 2021 transfer payments to Health Service Providers (HSPs) indicate that Central West¹ and Mississauga Halton² LHINs allocated an average \$42.51³ per capita funding for community mental health and addictions services compared to Ontario at \$88.10.

In response to lower per-capita funding for mental health and addictions supports in Peel, Regional Council approved a recommendation report on June 25, 2020 titled, “Responding to the Mental Health and Addictions Needs in Peel,” (Resolution Number 2020-507) that endorsed a renewed advocacy strategy focused on population-based funding and implementation of a targeted awareness and advocacy campaign highlighting challenges with the mental health and addictions system in Peel. As part of the campaign and broader advocacy efforts, the Mental Health and Addictions Action Table under Peel’s Community Safety and Well-Being Plan has played an integral role in supporting the Region’s ongoing advocacy through the input and involvement of community mental health and addictions service partners.

Despite ongoing advocacy, COVID-19 and its impacts from various response measures have continued to amplify existing disparities for those facing mental health or addictions challenges. The rates of depression, anxiety, substance related harms, and opioid related

¹ Deloitte LLP. Financial Statements of Central West Local Health Integration Network. Retrieved from: Microsoft Word - 28111 28111 CW LHIN Financial Statements Notes 2021 V2.docx (healthcareathome.ca)

² Deloitte LLP. Financial Statements of Mississauga Halton Local Health integration Network. Retrieved from: healthcareathome.ca/mh/en/performance/Documents/Mississauga Halton Local Health Integration Network 03312021 Final FS (1).PDF

³ Uses Ontario Ministry of Finance (2017). Population Projections for Ontario's 14 Local Health Integration Networks (LHINs) by Age and Sex, 2017-2041. Distributed by Ministry of Health and Long-Term Care, IntelliHEALTH Ontario.

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deaths in Peel have increased. These challenges impacted Peel’s pandemic experience and response and emphasize the urgency and need for sustainable funding.

2. Funding Challenges for Peel’s Community Mental Health and Addictions System

While the provincial and federal governments have announced several key investments and policy changes in the last year (Appendix I), Peel does not receive adequate funding that keeps pace with its rapid population growth. As Peel’s population continues to grow, the prevalence of mental health and addictions challenges continues to increase with an estimated one in five Peel residents (estimated over 290,000 residents) impacted by at least one mental health illness and/or substance use disorder in 2021. This means that ongoing funding disparities continue to compound the effect of longstanding, historical funding inequities, which impact Peel residents already struggling to access available supports in a timely manner (Appendix II).

As an example, in 2021, EveryMind reported that, while Peel has approximately 12 per cent of the province’s child and youth population (ages 0-17), local providers have received only 6 per cent of the share of child and youth mental health transfer payments from the province (as per 2019-20 funding data). While the average per capita funding for child and youth mental health in Ontario is \$152.48, Peel’s average per capita funding for child and youth mental health is lower at \$76.38. These disparities are also echoed in adult services where lower per capita funding has been allocated to mental health and addictions services for adults (aged 15-64 years). In 2021, the average per capita transfer payments to community mental health and addictions services HSPs in Central West and Mississauga Halton LHINs was \$51.35 and \$35.94, respectively. These amounts are lower in comparison to Ontario’s average of \$88.10 per capita for community mental health and addictions services.

The chronic underfunding of Peel’s mental health and addictions services, along with other social supports, illustrates the need to apply a population-based funding approach that considers funding needs based on population size, demographics and need, with adjustments for socio-economic factors and rurality. A population-based funding approach would not only correct longstanding funding disparities, but also to consider additional service pressures that come with a population facing other socioeconomic risk factors, as seen in Peel.

3. Update on Advocacy and Key Opportunities

Throughout the COVID-19 pandemic, the Region of Peel has continued to work in collaboration with community mental health and addictions system partners, advocating for the provincial and federal governments to address funding inequities and system integration challenges within and across ministries.

a) Advocacy and Awareness Campaign

On July 19, 2021, the Region officially launched a mental health and addictions advocacy social media campaign ahead of the Association of Municipalities Ontario (AMO) Conference, which was held from August 15-18, 2021. In partnership with Canadian Mental Health Association (CMHA) Peel Dufferin and EveryMind, the objective of this campaign was to raise awareness of these issues and, in turn, empower residents and their caregivers to share how underfunding of the system impacts their experiences navigating or accessing mental health and addictions services. The overall goal of the

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campaign was to prompt the need for increased funding and create additional resources in Peel to ensure there are supports for those in need.

The campaign generated 84,882 impressions and reached over 8,428 individuals across all social media platforms (including Instagram, Facebook, LinkedIn and Twitter). In addition to public engagement and interest from local members of Council, the campaign was also shared by community mental health and addictions system partners and other service providers through their own platforms. The campaign was particularly useful in serving as a primer on the mental health and addictions challenges in Peel and in supporting the Region's advocacy efforts to the provincial government leading up to and during the AMO conference. Learnings from the campaign will inform ongoing and future advocacy efforts.

b) 2022 Provincial Pre-Budget Submission

In February 2022, the Region submitted its provincial pre-budget recommendations in response to the consultations by the Ontario Government leading up to the spring 2022 budget. In the pre-budget submission, the Region urged the provincial government to enhance resources for the mental health and addictions sector in Peel by implementing a new flexible funding formula that considers population and demographic factors, community need, and accounts for additional systems pressures due to the impacts of COVID-19. Additional resources to health system partners across Peel will help to close the significant chronic underinvestment gap where Peel's population (ages 15-64) received nearly 40 per cent less per capita funding for mental health services and nearly 50 per cent less per capita funding for addictions services compared to the rest of Ontario.

c) Pre-Election Advocacy

In preparation for the upcoming spring 2022 provincial election, the Region continues to push for a population needs-based funding model as well as targeted and sustainable investments for mental health and addictions services in Peel within the Region's Provincial Election Strategy. As staff monitor the release of provincial party platforms, the focus remains on supporting internal and external communications of our advocacy positions, key messages supporting Regional advocacy priorities positions, and the development of proposed policy options as part of the Region's pre-election and longer-term advocacy efforts with the provincial government.

d) Annual AMO 2022 Conference

In preparation for the 2022 AMO Conference, members of Regional Council and staff will request an opportunity to meet with the Associate Minister of Mental Health and Addictions to highlight key challenges in Peel including under funding, wait times, and the need for increased services and supports to close existing gaps in Peel. Advocacy priorities will expand on the priorities highlighted during the AMO 2021 Conference and build on the specific asks shared previously with the Minister at the 2019 Peel Community Mental Health and Addictions Roundtable.

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e) Central Region Mental Health and Addictions Advisory Table

In 2021, Ontario Health Central Region established a Mental Health and Addictions Advisory Table to provide community mental health and addictions system partners with an opportunity to collaborate, problem solve, and recommend innovative solutions to region-wide emerging issues in the sector with an initial focus on supporting health service providers to deliver services during the COVID 19 pandemic. Peel membership includes Canadian Mental Health Association (CMHA) Peel Dufferin, Peel Addiction Assessment and Referral Centre (PAARC), and Punjabi Community Health Services (PCHS). The Region continues to explore opportunities to leverage the participation of Peel representatives at the advisory table to support ongoing advocacy by this table, especially as it relates to shared objectives such as improving service quality and access, improving service integration, expanding services, identifying emerging issues in Peel, and funding.

4. Strengthening Peel’s Advocacy Response

Current advocacy by Peel’s community mental health and addictions system partners has called on the provincial government to commit and implement a new funding allocation formula that will incrementally correct the longstanding funding disparity between slower and faster growing communities in Ontario. While community partners, including EveryMind and CMHA Peel Dufferin, have provided input to the province on the development of a new funding model, a revised model for child and youth or adults services has not been implemented to date. However, the need for such a model has not disappeared and the COVID-19 pandemic has highlighted several gaps in Peel’s system.

Through the immediate implementation of sustainable funding formulas that respond to population needs, Peel’s community mental health and addictions system will be able to reduce wait times and waitlists, improve care options, and reduce the burden on the acute care system (emergency departments). Examples of immediate opportunities for investment, include:

- Investing in existing partnerships that facilitate 24/7 crisis walk-in services for Peel residents, including youth and adults who currently face a gap in the continuum of crisis services. Access to walk-in crisis services will minimize emergency department visits, mitigate imminent client safety risks, and enable direct connection and referral to appropriate ongoing community-level supports.
- Adding Mobile Crisis Rapid Response Teams (MCRRTs) in proportion to the size of Peel’s population to help reduce apprehensions under the *Mental Health Act* and thereby reduce the burden on both police and emergency departments.
- Securing provincial and federal government support to fund harm reduction programs and services, including supervised consumption services as outlined in the May 26th, 2022 report to council titled “Peel Opioid Strategy Update”.
- Providing increased choice-based housing with customized supports that include mental health and addictions supports. Increasing capacity of supportive housing not only increases housing stability but also reduces emergency department visits and re-hospitalizations and provides a safe alternative for individuals with co-occurring complex mental health issues who are struggling to remain housed.

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By working with Peel's community mental health and addictions system partners and leadership from the Community Safety Well Being (CSWB) plan steering committee, Regional staff will work to align and advance key advocacy priorities around funding, integration, and other shared priorities. As outlined in the May 26, 2022 report to council titled “Community Safety and Well-being 2021 Update”, the CSWB Mental Health and Addictions Action Table has led important work to improve system integration by collaborating with community partners to co-design improvements to mental health care for young adults, their family/friends and service providers in diverse communities in Peel and has supported seed funding to support the evaluation of the Peel Situation Table. These examples have illustrated the important role of the CSWB Mental Health Action Table and the ways in which the Region will continue to work with community partners to strengthen collaboration, identify specific funding and policy needs, and work to collectively advocate to Ontario Health and the provincial government to:

- Immediately commit and implement a funding formula that considers population and demographic factors, community needs (including culturally-specific needs), high growth communities (such as Peel), and accounts for additional systems pressures due to the impacts of COVID-19 in Peel.
- Ensure that targeted specific and sustainable investments are made to Peel’s community-based MHA services to address growing waitlists and crisis levels exacerbated by COVID-19. Such investments will need to go beyond one-time funding to address COVID-19 specific response and ensure operational funding will match ongoing needs and demands for services.

CONCLUSION

As the mental health and addictions system continues to evolve, the Region of Peel is well positioned to work with community partners to support enhancing Peel’s community mental health and addictions services through public policy and advocacy, as well as system collaboration and data coordination.

As an invested partner in the delivery of health services for our community, the Region of Peel will continue to address funding inequities and system integration challenges within and across ministries as an imperative to ensure Peel residents have access to services in their time of need and to support a Community for Life.

APPENDICES

Appendix I - Federal and Provincial Commitments (Investments and COVID-19 Response)
Appendix II - Region of Peel Mental Health Profile

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