



# Roundtable on Children and Youth Mental Health and Addictions in Peel: Summary Report

With the Associate Minister of Mental Health and Addictions, Michael Tibollo

January 2024

## Roundtable on Children and Youth Mental Health and Addictions in Peel: Summary Report

### Executive Summary

This report is in follow-up to the November 6, 2023, Mental Health and Addictions (MHA) Roundtable with the Associate Minister of Mental Health and Addictions and Peel community partners within the children and youth mental health and addictions sector, including service providers from community agencies, acute care, law enforcement, and school boards. Community members with lived and living experiences also participated in the Roundtable and shared their reflections on navigating the MHA sector as youth and caregivers. These perspectives and knowledge provided valuable context for the discussion.

The Roundtable was a result of Minister Tibollo's delegation in April 2023 to Peel Regional Council, whereby a commitment to a future Roundtable discussion on children and youth mental health and addictions services was made to better understand the local landscape. During opening remarks, Minister Tibollo highlighted MHA as a priority for the Province and acknowledged current sector challenges with accessing services. Minister Tibollo also reinforced the need to refocus efforts on prevention through upstream interventions that address the social determinants of health in tandem with current acute, hospital-focused solutions.

This report reflects the discussion by community partners at Peel's MHA Roundtable. It includes a summary of the unique needs and challenges in Peel and opportunities for collaboration and system innovation to enhance MHA services available to children and youth in Peel.

Challenges in the Peel community include:

- Increasing demand for services contributing to significant wait times;
- Need for targeted programming for complex and diverse clients;
- Inaccessibility of MHA services in Peel's rural communities and lack of services across the continuum of care; and
- Chronic provincial underinvestment that has impacted MHA system capacity in Peel; resulting in funding and staffing inequities.

Opportunities for improvements in MHA service delivery include:

- Implementing equitable funding based on population size, social determinants of health and MHA needs in Peel to help address growing waitlists and increasing client complexity and acuity. This funding needs to be received in a timely way to support effective planning and implementation;
- Stabilizing the MHA workforce, through community-based health human resources (HHR) investments and policies that support HHR capacity challenges; and
- Supporting cross-sectoral partnerships and integrated service delivery to reduce the reliance on acute care services and support youth and adults who currently face gaps in the continuum of MHA services.

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- Implementing community and hospital MHA counselling services for transitional aged youth to support continuous care as they age out of the Child and Youth Mental Health sector.

Peel Region is committed to working with local partners, the Peel Community Safety and Well-being Mental Health and Addictions Action Table, and the Province to address the MHA needs of Peel residents and advancing the priorities within the provincial Roadmap to Wellness.

### Key Themes from the Roundtable Discussion

#### Challenges

The Roundtable was an opportunity for clients, caregivers and key organizations within the children and youth mental health and addictions sector to provide their perspectives, insights, and experiences. The key challenges identified during the discussion are summarized below.

***“If you can’t get through the front door to access public mental health services because of waitlists or inadequate services, then you have to seek help elsewhere out of pocket. What do families without financial resources do? They drown. The mental health narrative needs to change to long-term, sustainable funding and resources; otherwise, we will never shift things for the better”,***  
*Co-Chair, EveryMind Family Engagement Advisory Committee*

#### Service demands

**Waitlists to access MHA services are too long, especially for counselling and therapy. These waitlists are the longest in history for Peel’s Child and Youth Mental Health (CYMH) sector.** Currently, there are approximately 184,000 Peel residents, including 60,000 children and youth without necessary supports.<sup>1</sup> In January 2023, Peel’s CYMH sector had more than 1,650 children and youth on waitlists for core services, including 1,279 waiting for counselling/therapy<sup>2</sup>. It is detrimental to the needs of clients when wait times are 737 days (over 2 years) to access child and youth mental health services in Peel.<sup>3</sup> Youth needs can become more acute and complex while they wait for much needed care, making it more challenging for service providers when they eventually see their clients. All of these factors increase the risk of individuals potentially interacting with law enforcement or having to access

<sup>1</sup> Offord Child Health Studies. (2019). Ontario Child Health Study.

Hamilton Health Sciences. (2019). Hamilton researchers find one in five children have a mental health disorder.

<sup>2</sup> EveryMind Mental Health Services. (2023). Data retrieved January 2023.

<sup>3</sup> Children’s Mental Health Ontario, Kids Can’t Wait: 2020 Report on Wait Lists and Wait Times for Child and Youth Mental Health Care in Ontario (2020).

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the emergency department for urgent mental health care instead of receiving the right care at the right time in the right setting.

***“Children and youth aren’t going to wait, if services are not available when needed, these children might disappear”***,  
*Director, Malton Neighbourhood Services and  
Malton Youth Wellness Hub*

**Given current multi-year wait times, youth are ‘aging out’ before they are able to access services.** Currently, there is a gap in availability of ongoing counselling support for transitional-aged youth. In addition to investments to fill this gap, there is a need for improved system navigation and integration to support youth accessing adult MHA services. The MHA system can be fragmented, in up to 60% of known cases, poor transitions from youth to adult mental health services have led to individuals disengaging from care.

As Peel’s population grows, demand for services continues to increase. **There is a critical need for more services that are targeted towards complex clients and across the continuum of needs.** Peel’s Children’s Aid Society indicated that approximately 94% of children within their extended care have complex needs and noted that suicidal ideation has increased since the pandemic. School boards also spoke to an increase in the complexity of needs among their students and noted that mental health distress and diagnosable conditions were more recognizable in young students, including those with other diagnosed disabilities, such as autism and intellectual and developmental disabilities. Furthermore, children and youth require MHA resources to be enhanced across the entire continuum of care, including upstream mental health promotion and prevention efforts to support resiliency-building and early identification of needs, increased engagement of primary care and more options for treatment

### Identified gaps in programs and services

Throughout the Roundtable discussion examples of gaps in programs and services were acknowledged. The **lack of MHA services available in Peel’s rural communities** was identified as a challenge by Headwaters Health Care, with the challenges associated with referring to nearby psychiatry services specifically noted. The Conseil Scolaire Catholique MonAvenir, indicated there were **insufficient resources and training offered in French**, and overall, Peel school boards felt they needed to be better equipped to support children with MHA needs. Long waitlists in Peel and lack of MHA services for children and youth increase pressure on school systems to respond to MHA needs of students and fill in gaps for programs and services. Schools have a mandate in mental health promotion and prevention and are not resourced to address serious and complex mental health needs.

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Peel continues to experience rapid population growth and increasing diversity, with more than 69% of the population being racialized.<sup>4</sup> Given these unique needs, MHA programs must align with our population needs, **service provision needs to be more culturally diverse and culturally appropriate and account for the impact that systemic racism has on mental health of children and youth.**

### Funding and staffing inequities

Provincial MHA investments have been welcomed, but without efforts to correct historical underfunding, Peel will be unable to meet crisis level demand and fall further behind. **Service providers in Peel receive significantly less funding per capita compared to the provincial average, which has amplified existing disparities for those seeking MHA supports.**

COVID-19 has amplified the impact of chronic underinvestment on MHA system capacity in Peel. Services were already overstretched before the pandemic, and providers continue to be challenged to provide access to services with growing community need.

**In 2020, Peel's average per capita funding for child and youth mental health was \$76.38, this is approximately half the average per capital funding in Ontario (\$152.48)<sup>5</sup>.**

**Mental health and addictions service providers in Peel continue to be concerned about health human resources (HHR) challenges.** Due to lower compensation and a high demand/stress environment, community organizations often lose trained staff to other sectors offering more competitive wages. This presents ongoing hiring and retention challenges, and is disruptive to service operations, especially when staff have formed personal connections with children and youth.

### Opportunities for Improvements

Supporting increased and equitable funding, addressing health and human resource challenges and facilitating cross-sectoral partnerships are imperative for addressing system integration challenges within and across ministries and alleviating system pressures. Discussion at the Roundtable provided insight for system improvements and enhancements, as summarized below.

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<sup>4</sup> Statistics Canada Census. (2021). Ethnic Diversity and Religion. Regional Municipality of Peel.

<sup>5</sup> Ontario Ministry of Finance. (2019-20). Child and Youth Mental Health total transfer payments in 2019-20. Ontario Public Accounts.

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Support increased and equitable funding

**Timely delivery of funding, informed by reporting and data, will support CYMH service providers to strategically plan and effectively use provincial program funding.** Implementation of a population needs-based funding model for CYMH services in Peel will help address gaps in services, growing waitlists and increasing client complexity and acuity. Community service providers advocated for recurring investments to sustainably address the crisis-level demand in Peel, including rural areas.

**Diversity of choice is essential for children and youth in need of MHA services.** Counselling is not a one-size-fits-all approach. Group and family therapy can be an effective intervention for diverse communities or those not able to access individual therapy. Being able to provide options for MHA services allows clients to determine the best supports for their unique situation.

*“When initial programs/services were not effective, we had discussions and meetings with the care team to try new and different therapy approaches until we found success”, Youth Advisor, EveryMind Youth Engagement Group*

**Recognition of the unique cultural and diverse needs within Peel** was expressed by many service providers. Expansion of more culturally appropriate and diverse programs, including service provision in different languages, to support children and youth with MHA challenges were highlighted.

**Investments in updated MHA programming within schools**, through curriculum planning, online resources and implementation of specialists to provide timely access to MHA services onsite. These were highlighted as opportunities for improvements by youth with lived experiences. The provision of resources, lessons, activities, and implementation guidance should consider the full range of identities and abilities of students and include targeted MHA resources for students accessing fully alternative curriculum, such as those with developmental and intellectual disabilities. Further, improved mental health literacy for both students and school staff would support prevention focused interventions and early identification of needs across the continuum of care.

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### **Successful Initiatives: Youth and Family Peer Support Programs**

EveryMind had success with their youth peer support pilot project in 2021. Youth and adult peer support models can improve system navigation, engage 'difficult to reach individuals', help families cope while waiting for care and offer additional support post-treatment. System leaders should explore innovative strategies to engage youth with lived experience and knowledge of the MHA system<sup>6</sup>.

### [Stabilize and support the CYMH sector workforce](#)

Mental health and addictions service providers in Peel region continue to be concerned about health human resources (HHR) challenges. Community service providers advocated to stabilize the MHA workforce, through an aligned provincial strategy. **Community-based HHR investments and policies that support HHR capacity are needed to allow the CYMH sector to increase services and meet demands.** Investments to increase salary grids for community-based MHA providers are essential to attract and retain talent in Peel and to meet service demands and support continuity of care for those accessing services.

**Community providers supported innovative use of staffing across sectors to transform how MHA services could be delivered to children and youth.** Effectively leveraging skills of nurse practitioners, placing crisis workers in more settings, and supporting programs offered by youth peers were examples highlighted during the Roundtable. Provincial investments to increase community-based MHA staffing will support staffing innovation and help address the gaps in the CYMH service system.

### **Successful Initiatives: Implementation of Crisis Supports within the Community**

Headwaters Health Care have implemented a crisis worker in their emergency department to support clients with MHA needs who enter the hospital. Additionally, the local Ontario Health Team (Hills of Headwaters) supports a Community Crisis Integrated Team. This multidisciplinary team consists of health and social service providers who respond to crises within the community, including MHA needs for children and youth.

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<sup>6</sup> EveryMind. (2022). Youth Peer Support Pilot Project, Executive Summary of the Legacy Report.

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Facilitate cross-sectoral partnerships to support integrated MHA service delivery

**Roundtable participants highlighted opportunities to improve system integration within the children and youth MHA sector and across ministries.** Through Peel Region, the Community Safety and Well-being MHA Action Table has led important work to improve system integration by collaborating with community partners to co-design improvements to accessing mental health care for youth and their families/caregivers. Increased provincial investments for integrated service delivery, such as 24/7 MHA crisis clinics and youth wellness hubs, will support partnerships across the CYMH, adult MHA, child welfare, police, primary care, hospital and education sectors.

Cross-sectoral partnerships strengthen pathways to care and blend capacities and expertise across service providers. Opportunities for the government to fund innovative partnerships that combine MHA services and systems together will reduce the reliance on acute care services and support youth and adults who currently face gaps in the continuum of MHA services.

### **Successful Initiatives: A Few Examples of Cross-Sector Collaborations in Peel**

- Applying the Community Safety and Well-being framework has enabled Peel Regional Police to re-engineer their service model to better assess and refer cases to mental health and social service providers when appropriate.
- EveryMind has begun to engage and collaborate with Black Mental Health Canada to support capacity-building among clinicians to provide culturally safe and appropriate mental health counselling.
- Peel Newcomer Strategy Group (PNSG) coordinates services across health and social sectors to improve outcomes for newcomers, immigrants and refugees.

## Conclusion and Next Steps

Peel Region, in collaboration with the Community Safety and Well-being Mental Health and Addictions Action Table, are committed to collectively addressing MHA priorities for Peel residents and advocating for solutions. Support from the provincial government to address persistent funding challenges and implement initiatives to address system demands are integral to meeting the needs of Peel residents and advancing the priorities within the Roadmap to Wellness.

Peel Region continues to support system integration at a local level and welcomes the opportunity to work with the Province as it begins to undertake various MHA initiatives, including modernization of the *Mental Health Act* in Ontario, supporting collection and analysis



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of MHA performance indicators, and strategic planning and coordination of MHA funding across ministries.

### **Thank you to our community Mental Health and Addictions partners that attended the Roundtable and supported the development of this summary report:**

- Associated Youth Services of Peel
- Canadian Mental Health Association Peel Dufferin
- Conseil scolaire Viamonde, French Language School Board
- Dufferin Peel Catholic District School Board
- EveryMind Mental Health Services
- EveryMind Mental Health Service Youth Engagement Group
- EveryMind Mental Health Services Family Engagement Advisory Committee
- Headwaters Health Care Centre
- Hills of Headwaters Collaborative Ontario Health Team
- Malton Neighbourhood Services and Malton Youth Wellness Hub
- Mississauga Ontario Health Team
- MonAvenir, French Language Catholic School Board
- Ontario Provincial Police (Caledon Detachment)
- Peel Children's Aid Society
- Peel District School Board
- Peel Newcomer Strategy Group
- Peel Regional Police
- Region of Peel
- Trillium Health Partners

### **Thank you to the members of Peel Regional Council that supported and participated in the Roundtable discussion with Minister Tibollo:**

- Peel Regional Chair Iannicca
- Peel Region Health System Integration Committee Chair Fonseca