

A Mental Health Plan for our City



Toronto's first multi-sector mental health plan focusing on **mental wellness and psychological health.**

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Executive Summary

“Mental health is everyone’s business.”

Mental health is important to us all. It affects how we think, act, feel, handle stress and work. It impacts our communities, our economy and how resilient we are to challenges.

We all benefit from improved mental health. We all lose when mental health deteriorates.

Changes in our city, in wider society and threats such as COVID-19 and climate change have made our lives more stressful. The negative psychological impacts have been recognized by all levels of government and by civil society. Everyone agrees there is an urgent need to improve mental health.

But unfortunately, much of the discussion has focused only on part of the problem: on diagnosable mental illnesses that need treatment and not on mental wellness and other aspects of psychological health.

The focus on the minority of people who have a mental illness is understandable, but it is a mistake to neglect the mental wellness and psychological health needs of the majority. We will not reap the benefits of improved mental health unless we broaden our focus from mental illnesses and include mental wellness and psychological health.

There are many hospital, community and third-sector organizations focused on mental illness. And there are expert organizations tasked with co-ordinating and expanding services. In addition, the federal government has made new funding available to support treatment. Our current services are far from perfect, they are underfunded, they do not meet the needs of Toronto and they do not offer equitable access or outcomes for our diverse population. But there is at least a plan and dedicated people working on improvement.

The same cannot be said about mental wellness and psychological health. There is no agreed plan, no co-ordinated effort and little new money.

Focusing on mental wellness and psychological health will help us consider the factors that help us thrive and that make our city a better place in which to live and work. A multi-sector plan to improve mental wellness and psychological health would balance our current focus on mental illness and ensure we have a full

response to Toronto’s mental health emergency. It will help us build a thriving, more resilient Toronto. It will improve the economy. It will decrease rates of mental illness, the need for mental illness services and the costs associated with them.

Context:

Mental health is a continuum that encompasses mental wellness and psychological health to mental illness. This report focuses on the importance of wellness as a significant component of mental health that is often overlooked and under-resourced.¹

Since its launch in 2017, the Thrive Toronto partnership has effectively facilitated dialogue between the main groups active in mental health. Thrive Toronto partners include CAMH, City of Toronto, CMHA Toronto, Family Services Toronto, Ontario Health Toronto, Strides Toronto, Toronto Public Health, United Way Greater Toronto, Wellesley Institute and the YMCA of Greater Toronto.

The partners have developed a mental health plan for Toronto which will build our capacity to promote mental wellness and psychological health. It will also promote equity by helping ensure existing treatment and social supports for mental illness equitably meet the city's diverse needs.

A Mental Health Plan for Toronto

Thrive Toronto's Mental Health Plan was built by local leaders from a range of services and sectors.

As a cross-sector organization focused on mental health in the city, Thrive Toronto is well placed to raise awareness of how to improve mental wellness, convene key partners and organizations that work in mental wellness and psychological health in Toronto, identify new resources which could scale up effective initiatives, and build the capacity of the community, health sector, education and work environments to promote mental wellness and prevent mental illness.

There is much to do, and it will take a multi-year effort. Thrive Toronto has agreed on five key initial actions to improve mental wellness and psychological health. The actions are based on our assessment of what Toronto needs, what Thrive Toronto is uniquely able to do, and where Thrive Toronto can add value to existing initiatives.



Five initial actions:



1. Thrive Toronto will create a **report card** on mental wellness, psychological health and the factors that promote mental health to highlight needs and promote actions that can be taken to address them.



2. Thrive Toronto will build momentum to decrease the impact of climate change on mental health by convening key players in climate change and facilitating the development of a Toronto **climate change and mental health strategy**.



3. Thrive Toronto will help decrease the impacts of the social environment on health by focusing on housing and supporting the **implementation of actions from the Supportive Housing Growth Plan**.



4. Thrive Toronto will improve workplace mental health by working with employers and extended health benefits providers (EHBs) to create a **resource on what constitutes EHBs that effectively address mental wellness**.



5. Thrive Toronto will build capacity for individuals, communities and organizations to improve mental wellness and psychological health by creating a **learning centre** with tools and training that increases mental health literacy, improves mental health skills and promotes positive mental health.

Introduction

“There is more to mental health than diagnosable mental illnesses that need treatment.”

Mental health is important to us all. It affects how we think, act, feel, handle stress and work. It impacts our communities, our economy and our resiliency in the face of challenges.

Discussions about mental health often focus on mental illness. Mental illnesses can have a significant impact on individuals and families. They are also the most common reason for time off work and time at work being non-productive. Conservative estimates are that mental illness costs the Canadian economy \$51 billion annually.² Some of this is the cost of funding services, but the majority is linked to the social impacts of mental illnesses on individuals, families and society and the economy.

But there is more to mental health than diagnosable mental illnesses that need treatment. Our mental wellness and psychological health are also important to how we function.

The Importance of Mental Wellness

Higher levels of mental wellness are good for our communities. A higher level of mental wellness is linked to happiness, life satisfaction, good family functioning, safer and more productive societies and less need for health and social services. Lower levels of mental wellness undermine society, families and the economy and are linked to increased rates of mental health problems and mental illness.

Increasing mental wellness while decreasing the negative impacts of mental illness are both critical for improving mental health in Toronto and ensuring that residents can thrive.



Mental Health in Toronto

Toronto is considered one of the best places in the world to live. Toronto's amenities, diversity, rich cultural life, jobs, city services, and world-class, evidence-based mental health services and community-based services offer an environment which can help people flourish. These services also offer support to people who find they have mental health problems.

The standard of living in Toronto is exceptional for the wealthy, but at least 50% of households do not have sufficient income to live a healthy life.³ As inequality in Toronto increases and new challenges arise, there will be greater strain on mental wellness and psychological health in Toronto's population.

While cities have much to offer, some aspects of living in a city can be stressful and can impact mental wellness. The Toronto Foundation's Vital Signs Report 2021 outlined city-specific social issues which could impact rates of wellness including disparities in the areas of income and wealth, work, housing, the environment, transportation, learning, civic engagement and belonging, safety and health and wellness.⁴ Negative impacts in all these areas are greater for those with lower incomes and among equity-deserving groups such as Indigenous, Black and other racialized groups, newcomers and 2SLGBTQ+ groups. They lead to higher rates of stress and lower mental wellness in these groups.



Downstream Versus Upstream Focused Services

Inequalities in mental wellness are exacerbated by funding focused on hospital-based treatment services and by chronic underfunding of community-based services and social supports.⁵

“Mental health inequities have widened.”

Inequalities in mental wellness are not decreased by treatment. They are decreased by prevention. Preferential funding for treatment services turns the focus away from wellness. It produces a situation where we allow mental health problems to occur and then try to fix them. Because treatment is not perfect, many people end up with life-long mental health problems. In this way, our

current approach may lead to more people with chronic mental health problems than need be. And because equity-deserving groups may have higher risks of mental health problems, this approach widens mental health disparities.²

Underfunding of services further exacerbates inequalities. It leads to competition for the available resources and poorer access to mental health promotion, mental illness prevention and social care supports and services for equity-deserving populations.

A New Urgency

Our current mental health crisis has been with us for many years. The COVID-19 pandemic has merely exacerbated the problems while shining a light on the inequities in access to services and supports in Toronto.⁶ There have been increased rates of some adult mental illnesses, but this has been dwarfed by decreases in mental wellness, increased rates of staff burnout, a substance use and overdose crisis, and significant increases in psychological issues among children and youth.

Mental health inequities have widened. This is in part because our pandemic response was inequitable, but also because of a failure to adequately deal with social drivers of mental health problems such as income inequality, financial insecurity, poverty,⁷ poor working conditions, the housing crisis, systemic discrimination, racism and more profoundly, anti-Black and anti-Indigenous racism.

The impact of social factors and social policy on mental wellness and mental illness has been amplified by the gap between the need for mental health support and what is being supplied. Inequities in access to mental illness services and supports for Black, Indigenous, racialized and 2SLGBTQ+ groups mean they are more at risk but get less access to the help they need.⁸

One of the few upsides is that these problems have led to a growing awareness in the community and government about the importance of social policy for mental health and about the importance of population-level mental health in developing a sustainable recovery. But even this has a downside, which is that much of the discussion has focused on only part of the problem: on diagnosable mental illnesses that need treatment and not on mental wellness and other aspects of psychological health.

The focus on the minority of people who have a mental illness is understandable, but it is a mistake to neglect the mental wellness and psychological health needs of the majority. We will not reap the benefits of improved mental health unless we broaden our focus from mental illnesses and look upstream to systematically address mental wellness and psychological health.

There are many hospital, community and third-sector organizations focused on mental illness. The federal government has announced a mental health transfer for treatment services and a new disability benefit. The community sector has been more active in offering mental health supports, the City of Toronto has been articulating the service needs of the Downtown East, and there are expert organizations tasked with coordinating and expanding services.

There have been some notable upstream efforts, including city initiatives such as SafeTO, the re-invigoration of the city's drug strategy with a focus on decriminalization, alternatives to police involvement in mental health crises and

the development of a strategy to decrease the impacts of gun violence. There have also been some developments in equity. Community Health Centres and community services emerged as a vital force for equity and there are calls to hardwire and better support their recovery efforts.

But the focus of most initiatives and funding has been on downstream, mental illness treatment, rather than on upstream efforts to promote mental health.

“There has been no strategy focused on improving mental wellness.”

Toronto's mental health system remains disjointed and less than what the sum of its parts could be. Those involved in mental wellness and psychological health from different sectors are not well co-ordinated.

Until now, there has been no strategy focused on improving mental wellness in Toronto.

Multi-Sector Approach

A multi-sector approach is needed to deal with the pre-existing mental health crisis and the exacerbation linked to COVID-19 and its subsequent social challenges.⁹ There is existing planning and organization focused on mental illness treatment and services. Thrive Toronto aims to balance this and ensure a comprehensive approach to mental health by focusing its plan on mental wellness and psychological health.

Thrive Toronto partners span government, governance and policy, the service sector and the community sector, offering a diversity of perspectives and links to sectors with an interest in Toronto's mental health.

Thrive Toronto was formed in 2017 to improve mental wellness and mental illness. From 2017-2022, the Thrive Toronto table convened regularly and provided support to a number of initiatives in Toronto including the Mayor's Toronto Mental Health Summit; delegations to International Initiative for Mental Health Leadership (IIMHL)

cities and a mental health meeting in Stockholm; joint IIMHL cities-Thrive Toronto meeting held in Toronto; development of mental health literacy resources for Toronto; the mental health and justice system housing strategy report; the Supportive Housing Growth Plan; the development of training for city staff during COVID-19 through the Mental Health Commission of Canada; and other city initiatives including the Downtown East Plan, A Roadmap to a Trauma-Informed City, and the Toronto Community Crisis Service, providing an alternative to police involvement in non-emergency crisis calls and wellness checks.

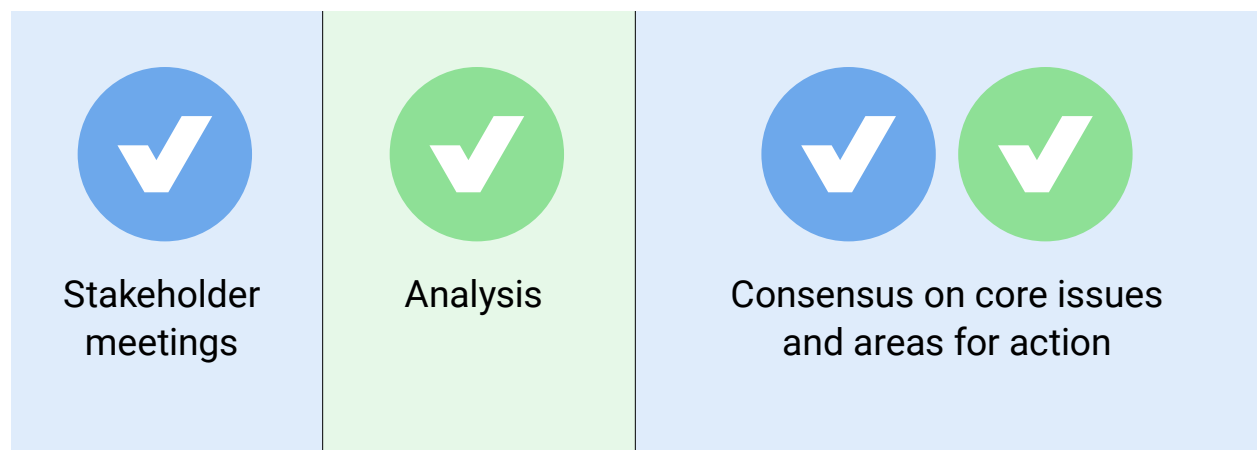
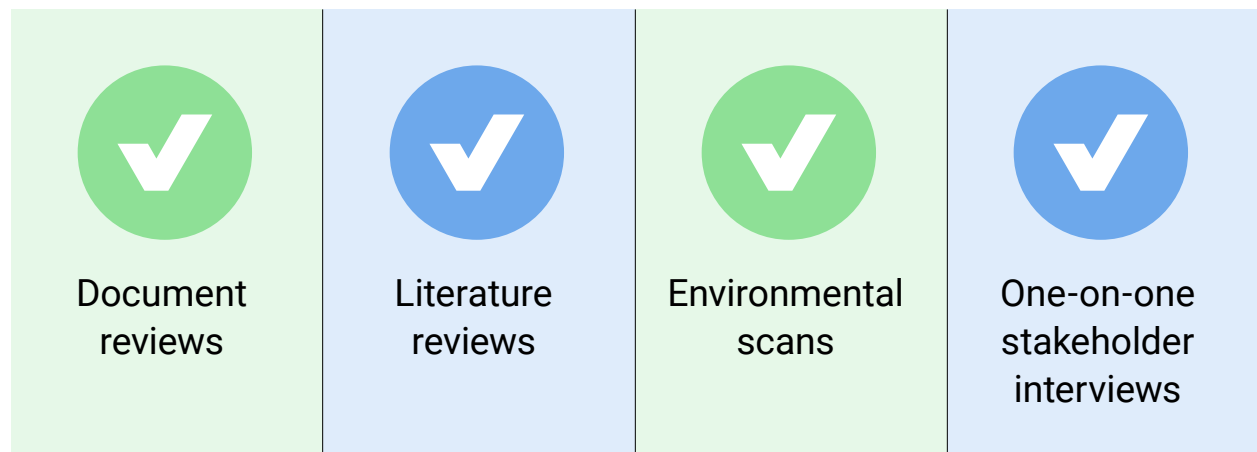
Mental health is everyone's business. The Thrive Toronto Mental Health Plan was developed between May 2022 and April 2023 with the goal of improving mental wellness in Toronto, but we also recognize the need for more equitable services and supports for people with mental illness.



Building a Plan to Improve Mental Wellness in Toronto

The development of the mental health plan used a multiple-methods approach including document reviews, reviews of academic and grey literature, environmental scans, one-on-one stakeholder interviews and analysis. The scans were intended to provide a high-level snapshot of the current mental services, policies, gaps and needs in Toronto. Interviews and meetings with the Thrive Toronto Advisory Committee helped gain consensus on the core issues and identify directions and areas where greater investment could support future action. A detailed description of the methods can be found in Appendix A.

Developing the plan



Why Do We Need a Plan?

Our analysis found two main challenges that need to be addressed to improve mental wellness and psychological health in Toronto:

1. Social factors that increase the risk of mental illness and decrease mental wellness; and
2. Challenges with existing services and supports in the social sector including in health, policing, work and education.

Social Determinants of Health

The social factors that increase the risk of mental health problems and decrease mental wellness include income and employment, food insecurity, housing, racism, climate change and adverse childhood experiences. These social determinants of health emerge as a prominent theme across the literature and discussions on mental health and wellness for Torontonians.

Toronto is seeing increases in the number of people spending more than 30 per cent of their income on housing, along with rising food insecurity and precarious employment. Toronto was known as the child poverty capital of Canada and now, added to that, poverty rates in general are rising and rising specifically quickly for racialized groups. All these issues have direct links to the risk of mental health problems and they undermine psychological health and mental wellness.

Gender-based discrimination, discrimination against 2SLGBTQ+ groups, anti-Black, anti-Indigenous and other forms of racism, ableism and other forms of discrimination have all been linked to both decreased mental wellness and increased problems accessing services and supports.

Climate change was also identified as a determinant of mental health and wellness, particularly for marginalized communities. For instance, flooding has been linked to significant increases in depression and anxiety and there is no current plan to mitigate the impact of climate change on mental health.



The social determinants of health are also interconnected to adverse childhood experiences (ACEs) such as neglect, abuse, parental substance abuse and parental incarceration, which are well documented as having negative impacts on mental health. Addressing the social determinants of health as well as ACEs will be important for improving mental health in Toronto.

It is possible to decrease the impacts of the social determinants of health on mental wellness through better and more equitable social policy but also through the development of more resilient communities, better social support and the development of community, work, institutional, family and individual abilities to understand and respond to stress. How we set up our communities is key to both how stressful our lives are and the resources we have to counter stress.



Challenges in Existing Services and Support

The public mental health system in Canada is nuanced and complex. It involves interdisciplinary actors across government, health, community and private sectors who altogether aim to address and support the mental health of populations. The system is fragmented and services are siloed, which is an ongoing systemic barrier to improving access and providing effective services.

The mental health systems in Canada, generally, fall under municipal, provincial or territorial, and federal jurisdictions. Each jurisdiction can include 1) policies, strategies and funding, and 2) programs and services. While provincial and territorial governments are primarily responsible for the governance, funding and delivery of mental health services in Canada, several policies and programs exist at the municipal and federal levels that address, support and fund mental health.

Generally, mental health is embedded across mandates of different provincial and federal ministries. In Ontario, mental health is addressed not only in the Ministry of Health and Long-Term Care but in the Ministries of Education, Colleges and Universities, Labour, Immigration, Training and Skills Development, Children, Community and Social Services, and the Solicitor General. At the federal level, mental health is addressed through Indigenous Services Canada, Immigration, Refugees and

Citizenship Canada, Veteran Affairs Canada, Public Safety Canada, National Defence, and Correctional Services Canada. These mandates generally focus on increasing access to care and creating mental health supports for the respective populations the ministries serve.



Mental health is embedded across different plans and strategies. The provincial government, particularly through Ontario Health's Mental Health and Addictions Centre of Excellence, develops a strategy for improving mental health. At the City of Toronto, mental health is included in strategies that address social determinants of health including community safety and well-being, poverty reduction, housing, substance use and addictions and anti-Black racism. Similarly, there are federal strategies and legislation that addresses mental health, including those that focus on housing, substance use and suicide prevention.

Different sectors have diverse approaches to delivering mental health programs and support. Across jurisdictions, information and navigation services are in place to connect and refer people to mental health supports. Crisis response is generally delivered locally through city programs such as the Community Crisis Response Program, Toronto Police Service and Toronto Paramedic Services, while provincial and federal supports focus on self-directed resources that support one's general well-being. Employers may be federally or provincially regulated. Early childhood education is primarily provincial, although with federal and municipal involvement. And mental health in schools, colleges and universities is funded by the province but delivered by school boards or the institutions themselves.

Although there is overlap, provincially funded hospital-based services focus more on treatment and acute interventions, while community-based supports are typically a range of services that support general wellness.

Overall, no single entity works to support and promote mental health in the city. Rather, different jurisdictions and sectors develop and deliver strategies and programs aimed at improving mental health and wellness. In addition to the health

“Increasing mental wellness is critical for improving mental health in Toronto.”

sector's mental health services, there is a complex network of non-profits, charitable organizations and foundations that provide mental health and wellness programs. Programs and services across sectors may or may not be connected, and difficulties in navigating this broad array of supports are understandable.

Ontario Health Teams, hospitals, community mental health services, primary care and other community-based services can provide support for people with mental health problems. Services focus on those with mental illnesses and, at a system level, no single support system has the power or responsibility to address mental wellness and psychological health for Torontonians.

When services are siloed and disconnected, individuals seeking support or individuals in need can fall through the cracks, leading to a system of care that relies on crisis responses. Groups who are not meaningfully engaged or supported by systems of support were identified as being at an elevated risk of mental health issues. There is a lack of linguistically and culturally appropriate services as well as inequities in access to support to address the needs of Indigenous, Black and other racialized and 2SLGBTQ+ populations. There is also a lack of a standard for mental health literacy.

Thrive Toronto's research showed Torontonians experience challenges knowing where and how to access appropriate mental health services. They also have challenges knowing where to get support for mental wellness and psychological health.

“There is a need for early intervention and prevention.”

People often attend primary care, or in crisis situations seek support for mental health issues from hospital emergency departments. Both are better at dealing with mental illness. Thrive Toronto's research suggests primary care and other frontline health providers need to become better at building mental wellness in their patients and clients. This could include becoming

more knowledgeable about the mental health supports provided by, for example, staff of municipal services, charities, religious institutions, schools, workplaces and employee benefit plans. A focus on treatment and the use of crisis services is linked to less system emphasis on prevention and early recognition and intervention.

Thrive Toronto's research also reported a mismatch between service needs and the availability of support. For example, the services offering support for family mental health were not geographically located in communities of greatest need. The gap between available supports and unmet needs has worsened since the COVID-19 pandemic hit.

What Should We Do?

The Thrive Toronto table was in clear agreement that there is a need for upstream approaches, with an eye towards early intervention and prevention.

As problems with mental wellness and psychological health can begin in childhood, addressing mental health across the lifespan is crucial. Early childhood and family mental health services play a key part.

Effectively addressing mental health challenges and promoting wellness will require a clear commitment to addressing the social determinants of health. Thrive Toronto members emphasized the need to address poverty and homelessness, enhance

income and disability supports and promote early childhood mental health supports. Peer support and supportive employment programs were seen as important evidence-based initiatives that could be scaled up.

Raising awareness about mental health, including the impact of poverty and other social determinants of health, was seen as an important activity for Thrive Toronto given the breadth of its partners and their positions in the mental health system. Thrive Toronto's unique and varied collaborative partners also present a good opportunity to convene people from different sectors to support other actions in this mental health plan. The Thrive Toronto collaborative can leverage its network and expertise from across sectors to move initiatives forward and to secure resources to implement the plan. Finally, capacity building will be a key activity to help people, families, communities, institutions, government, businesses and third-sector organizations in Toronto to learn more about mental wellness and psychological health and what they can do to promote it.

Thrive Toronto aimed to focus on mental wellness and psychological health, but members wanted to ensure that the need for equity in the treatment and supports available for mental illness are not overlooked. The work being done by so many to improve the mental illness system may need monitoring and feedback so that it equitably meets the needs of people in our diverse city.

How Can Thrive Toronto Promote Change?

Thrive Toronto created a theory of change to represent the mechanisms through which it could improve mental health. The theory was informed by collective and individual discussions throughout the development of the plan and has been built from two foundational documents: a scan of existing policies, services and supports, and an exploratory scan of mental health gaps and needs in Toronto.

The theory of change informed the development of the actions for the mental health plan. While the Thrive Toronto Advisory Committee identified a range of actions and opportunities, these reflect a starting point for a plan to improve mental health and equity in mental health in Toronto.

The detailed theory of change can be found in Appendix C. But in brief, as a cross-sector organization focused on mental health in the city, Thrive Toronto was considered to be well placed to engage in four core types of activities:

1. raise awareness of how to improve mental wellness,
2. convene key partners and organizations that work in mental wellness and psychological health in Toronto,
3. identify new resources which could scale up effective initiatives, and
4. build the capacity of the community, health sector, education and work environments to promote mental wellness and prevent mental illness.



A Plan to Improve Mental Health in Toronto

Improving mental health in Toronto will require a long-term, multi-sector approach with adequate resources to fill the gaps, address system challenges and needs and increase resilience.

The solutions put forward by the Thrive Toronto Advisory Committee in this phase of development constitute initial actions that will help create the foundation for further actions that will improve mental wellness and psychological health as well as increase system equity and effectiveness.

“Five key, initial actions.”

Toronto’s first mental health plan will promote mental wellness and psychological health by increasing the evidence we have at our fingertips about Toronto’s mental health, the challenges, and how effective our service sector is at reaching the diverse community. Empowering individuals and civil society with knowledge and data helps build social efficacy and mental wellness.

Climate change is an important and under-recognized threat to the city’s mental health going forward. In places that have been impacted by climate change, community-driven approaches that build resilience have been considered effective ways forward. Thrive Toronto will help build the capacity of Toronto to combat the mental wellness impacts of climate change.

Social factors exacerbate mental health problems, but it can be unclear where to start. Thrive Toronto members will collectively support efforts to decrease the negative impacts of social factors on mental wellness. Its cross-sector voice will offer a renewed compelling support to initiatives.

Mental health is everyone’s business, but many plans focus only on the public sector. The mental health plan that Thrive Toronto has produced recognizes this and makes sure that employers can play their part. Working with employers to see how they can maximize the mental wellness impacts of their employee assistance programs could help build healthier workplaces, staff and families.

Lastly, Thrive Toronto recognized that there is a plethora of information available to individuals, families, institutions and organizations about improving mental wellness. In fact, there is so much that many do not know which information, training or supports would suit their needs.

As a group with widespread and deep knowledge of mental wellness, Thrive Toronto believes a simple but effective way to improve mental wellness would be to help individuals, families and organizations help themselves by making information-finding easier.



The Thrive Toronto Advisory Committee prioritized five key actions that will be the initial focus for the Thrive Toronto Mental Health Plan:



1. Community Mental Health Report Card

Thrive Toronto will improve mental health by developing a mental wellness and psychological health report card. This will include agreed key indicators on mental wellness, mental health, equity and social determinants of health across the lifespan (including adverse childhood experiences).

The report card will help to highlight trajectories in mental health and what can be done about them.

The report card will be used as a tool to mobilize resources for mental well-being and psychological health. It will also help identify inequities. It could help those who want to advocate for mental health spending as part of the health and social care budgets, improved equity of access and equity in outcome for equity-deserving populations, and mental health spending based on Toronto's needs.

The report card will be informed by lived experience and will measure changes in factors that impact community mental health that all Thrive Toronto partners can use to communicate within their respective sectors. The report card will not only describe the state of mental health in Toronto but will also be an action-oriented document that identifies where strategy, action and investments are required.

The tool will identify where systems are disconnected. A community mental health champions network could help to amplify and action the report card.



2. Climate Change and Mental Health Strategy

Thrive Toronto will build the city's capacity and momentum to decrease the impact of climate change on mental health by convening key players in climate change and facilitating the development of a Toronto climate change and mental health strategy. The YMCA of Greater Toronto and CAMH have already been working on this issue and could form a smaller group to begin to implement this action.



3. Support Actions from Supportive Housing Growth Plan

To ensure the social determinants of mental well-being are top of mind, Thrive Toronto will help to drive progress on housing. Thrive Toronto will leverage its thought leadership and identify ways to reinforce actions from the Supportive Housing Growth Plan, a cross-sector agreed-upon strategy built by experts in homelessness.



4. Effective Employee Mental Health Benefits and Workplaces

Thrive Toronto will improve workplace mental health by leveraging its network to work with industry to identify what constitutes a good extended health benefit plan (EHB) and to see how they can be better used to promote and improve mental wellness for employees.



5. Learning Centre with Tools and Training to Promote Mental Wellness

Thrive Toronto will build people's capacity to improve mental wellness by developing or adapting a suite of tools, training and other resources for use by individuals, families, city staff, employers and other interested organizations.

Conclusion

“This Mental Health Plan will improve mental wellness and psychological health in Toronto.”

Thrive Toronto’s Mental Health Plan for Toronto aims to rebalance our mental health response by focusing on mental wellness and upstream factors and policies that promote wellness. It focuses on prevention and the social determinants of health and supports that increase the chances of recovery, and, it advocates for better and more equitable services.

Inequalities in our social and economic systems lead to increased risks to mental wellness in marginalized populations including women, Indigenous, Black and other racialized groups, 2SLGBTQ+ groups, those with disabilities and low-income groups. They also increase the risk of mental health problems and mental illness. For those who develop mental health problems or mental illnesses, our support and treatment systems offer inequitable access, which leaves equity-deserving populations underserved and with poorer outcomes. Our systems also focus on supporting and treating mental illness rather than preventing mental health problems, promoting mental wellness and recovery. They do not do enough to decrease the risks to wellness and the rates of mental health problems in equity-deserving groups.

The research and consultations have highlighted the existing programs and policies as well as gaps and needs in addressing mental health in Toronto. This work enabled Thrive Toronto to identify a role for a cross-sector group of community-based groups to raise awareness, moving forward, of how to improve mental wellness, convening key partners and stakeholders, identifying and leveraging new resources to support the work, and building capacity within the sector to promote wellness and prevent mental illness. The advisory committee is prioritizing five key action items for its initial work: the creation of a community mental health report card, building momentum for the development of a climate change and mental health strategy, implementation of actions from the Supportive House Growth Plan, the creation of resources to support workplace mental health, and the creation of a learning centre with tools and trainings that support mental wellness. There are opportunities that

can be pursued to fund the implementation of these actions including several federal options, charitable foundations and contributions from the Thrive Toronto Advisory Committee member organizations. Successfully accessing these resources will require pulling levers that exist within Thrive Toronto’s membership.

There is no group that has developed a plan for the multi-sector effort needed to improve mental health in Toronto. The Thrive Toronto Mental Health Plan will fill this void and work to improve the equity of services and supports for people with mental illness.



Appendices

Appendix A:

Methods

Research

Environmental Scan

An environmental scan of policies, services and supports sets the context for understanding the scope of resources currently dedicated to supporting mental health care in Toronto and Ontario.¹⁰ The environmental scan was performed from May to July 2022 to identify the municipal, provincial and federal policies, services and supports aimed at improving mental health in Toronto.

Gap and Needs Analysis

A second scan was conducted on existing mental health resources, gaps and needs in Toronto. This scan focused on the quantification of the mental health needs of Toronto's populations using local, provincial and national data. Other grey and academic literature on addressing mental health was also reviewed. The grey literature search included a combination of broad searches through Google, Google Scholar, Scholars Portal, and focused searches of materials through a list of international agencies and organizations. This data, along with initial interview and meeting notes, was examined together to demonstrate the evidence for the system gaps and unmet needs in Toronto. The gaps were then organized thematically, starting with the most overarching theme of the social determinants of health.

Theory of Change

The theory of change describes how and why change will occur through the implementation of the Thrive Toronto Mental Health Plan. Information gathered from the interviews and meetings with the Thrive Toronto Advisory Committee informed the development of Thrive Toronto's vision and aims. The discussions about the actions that Thrive Toronto could take to improve mental health and wellness in Toronto was analyzed to identify four key types of activities across five environments that could effect change.

Interviews and Meetings

Consultation interviews and regular meetings were held with the members of the Thrive Toronto Advisory Committee throughout the course of the data collection phase. Together, the summary transcripts from the individual consultations and group discussions were analyzed using a thematic analysis approach.

The Thrive Toronto Advisory Committee is made up of senior leaders from nine organizations in Toronto that represent municipal government (Social Development, Finance and Administration at the City of Toronto); health (Ontario Health Toronto); mental health (Canadian Mental Health Association Toronto and the Centre for Addiction and Mental Health); public health (Toronto Public Health); and community (United Way Greater Toronto, YMCA of Greater Toronto, Strides Toronto, and Family Services Toronto).

Stakeholder Interviews

Thrive Toronto project staff met with each of the advisory committee members individually for 30-60 minutes from May to July 2022 to gather their insights about key considerations for a mental health plan for Toronto. Detailed notes were taken for each of the individual interviews and summary transcripts were produced for analysis. The interviews were semi-structured and focused on four key questions: What is you/your organization's involvement in addressing mental health and wellness in Toronto? What are the issues impacting mental health in Toronto? What needs to be done to improve mental health and wellness in Toronto? What could Thrive Toronto do to address the issues?

Individual meetings with the advisory committee also took place in March and April 2023 to explore each member's organizational capacity to contribute staff resources to the actions, as well as to identify other sources of funding for the plan.

Monthly Advisory Committee Meetings

Monthly group discussions with the Thrive Toronto Advisory Committee were conducted online over the course of a year (May 2022 to April 2023). Detailed notes were taken as part of these discussions. Notes from the consultation interviews and group meeting discussions were reviewed and analyzed using a thematic analysis.^{11,12} As the initial ideas for the plan were documented, they were sent to the committee for review and discussion at the meetings.

The initial meetings identified five high-level action areas. Subsequent meetings focused on reaching agreement on the action areas and core issues. The document produced from these meetings was the basis for a discussion about the ideas, opportunities, levers and strategies for the plan. This led to a discussion of all the potential key initiatives to address mental health in Toronto and helped to build the theory of change.

Appendix B:

Gap and Needs Analysis

Mental health in Toronto needs to be addressed. People are struggling daily, with almost a quarter (22%) of Toronto adults reporting that most of their days are “quite a bit stressful” or “extremely stressful.” One quarter rate their ability to handle unexpected and difficult problems or the day-to-day demands of life as ‘fair’ or ‘poor’.¹³ Toronto Public Health data shows on average nine suicide deaths per 100,000 persons per year.¹³ The health care system deals with a lot of the impact of mental health with 98,407 emergency department visits and 11,671 hospital admissions related to mental health and addictions in Toronto.¹³ Six in 100 Torontonians are visiting their physicians about mental health and addictions issues.¹⁴

Social relationships are an important factor in mental health and one in 12 Torontonians (8%) reports having no close family members they can call for help or talk to about what’s on their mind. A similar proportion say they have no close friends. This represents more than 400,000 people in the city who lack this form of social support.¹⁵ The proportion of Torontonians reporting having no close relatives, no close friends or no other friends is higher than average among certain groups, including those who have a disability that limits their daily activity, those who have very low incomes, those who are unemployed and those who report poor mental health. This data highlights the opportunity to invest in social supports to address the need.



Gap	Evidence (Needs Analysis)
<p>Worsened or ongoing inequitable impacts of social determinants of health</p>	<p>It is estimated that 50% of problems with health are linked to social determinants of health (10% to the environment and 25% to the structure of and access to health services).¹⁶</p>
	<p>Income and Employment</p> <p>Almost half of GTA workers have temporary, contract or part-time jobs with variable hours, little stability and no benefits, and almost one in four college graduates are working low-wage jobs.¹⁷</p> <p>Almost 50% of families in the GTA do not have enough money to live a healthy life.³</p> <p>More than 125,000 children (26.3%) live in low-income families.¹⁸</p> <p>11.5% of youth (ages 16-29) were not in employment, education or training (NEET), (approximately 142,800 people).¹⁹</p>
	<p>Food Insecurity</p> <p>There were 1.45 million visits to Toronto food banks in 2020, the highest number of visits ever recorded in Toronto (a 47% increase) and a 61% increase in new clients compared to the year prior.²⁰</p>
	<p>Housing</p> <p>84,749 households in Toronto are on the social housing wait list.¹⁷</p> <p>Over 13,000 people are on the waitlist for mental health and addictions supportive housing and 16,000 people used shelters in Toronto (2014).²¹</p>
	<p>Racism</p> <p>2/3 of Black residents in GTA said they frequently or occasionally experienced discrimination because they are Black.²²</p> <p>Racially targeted hate crimes reported to police increased by 80% between 2019 and 2020 and hate crimes against East and Southeast Asians increased by 301%. Hate crimes targeting Black populations remain the most common type of health crime.²³</p>
	<p>Climate Change</p> <p>Increased depression, anxiety and post-traumatic stress disorder have resulted from extreme events such as flooding and wildfire exposures in Ontario.²⁴</p> <p>In Toronto, the 2014 heat wave was linked to a 29% increase in emergency room visits for mood and behavioural disorders.²⁵</p> <p>Climate change has also been linked to psychosocial impacts, including increased financial stress and substance use related to loss of livelihoods or employment from climate-related events.²⁴</p>
	<p>Adverse Childhood Experiences</p> <p>Adverse childhood experiences (ACEs) such as physical or sexual violence, trauma related to war and parental substance abuse are linked to poorer health outcomes, including mental ill health, compared to those with no ACE history.²⁶</p> <p>A history of ACEs can impact health service use with people being twice as likely to attend their general practice repeatedly, compared with those with no ACE history.²⁷</p>

Gap	Evidence (Needs Analysis)
<p>Policing and mental health crises</p>	<p>Police were called to approximately 20,000 situations due to mental illness in Toronto in 2015.²⁸</p> <p>40% of people with mental illness have been arrested in their lifetime, with a small proportion being a result of criminal activity.²⁹</p> <p>70% of Canadians killed in police encounters between 2000 and 2017 had mental health or substance use issues.³⁰</p>
<p>Lack of linguistically and culturally appropriate services</p>	<p>Based on a 2018 survey of 328 Black Canadian residents, 60% said they would be more willing to use mental health services if the mental health professional were Black.³¹</p>
<p>Siloed services and lack of system co-ordination</p>	<p>Mental health supportive housing relies on both the provincial health and municipal housing systems. The City of Toronto’s Housing TO Action Plan 2020-2030 encourages collaboration across governments on supportive housing. However, there is limited connectivity or formal collaborative structures between system-level and service delivery.³²</p>
<p>Lack of mental health literacy</p>	<p>Strengthening primary care’s capacity is one of the most effective approaches for meeting the population-level need for mental health care and health equity.³³</p> <p>The number one priority area identified for provincial focus by survey respondents on School Mental Health Ontario’s provincial 2021 survey was to enhance mental health literacy amongst Ontario educators.³⁴</p>
<p>Lack of strategies in schools to promote mental wellness</p>	<p>95% of schools in Ontario report needing some or more support for students’ mental health and well-being, 52% of GTA schools have regular access to a child and youth worker, 71% to a social worker, and 46% to a psychologist.³⁵</p> <p>Three in four students in Canada reported experiencing negative mental health during their studies. More than one in four report their mental health as poor.³⁶</p> <p>Students reported that a deeper focus on equity is needed. They highlighted the importance of strength-based, identity-affirming mental health learning and the need for accessible and culturally responsive promotion and prevention programming at school. For example, there is a need for more supports and services for students who identify as Black, Indigenous, 2SLGBTQ+, immigrants and newcomers with refugee backgrounds.³⁴</p> <p>Black youth say having open discussions about their mental health, learning new coping strategies, and peer support would be supportive facilitators to accessing mental health care.³⁷</p>
<p>Inadequate mental health workplace supports</p>	<p>A study by Mental Health Research Canada found that 35% of all employed Canadians indicate they are burned out, only 4% of Canadians have workplace policies that have adapted with new COVID-19 mental health supports, 35% of employees have access to programs to prevent burnout and 40% of employees have help from employer coping with workplace stress.³⁸</p> <p>The most prevalent primary disability among Ontario Disability Support Program recipients is mental illness at 39% of cases (psychoses 21%, neuroses 18%).³⁹</p>

Gap	Evidence (Needs Analysis)
<p>Underfunding of mental health services</p>	<p>1/3 of adults and ¾ of children can't get the mental health care they need because the services aren't available.⁴⁰</p> <p>CMHA advocates for the creation of a permanent Canada Mental Health Transfer valued at 12% of provincial and territorial health spending (\$5.3 billion per year), with 50% dedicated for community-based care.⁴¹</p>
<p>Lack of awareness of services</p>	<p>Of Canadians facing barriers, 78.2% said they didn't know where to get help or reported not being able to afford to pay as a reason.⁴²</p>
<p>Inequities in access to services and supports for Black, Indigenous, racialized and 2SLGBTQ+ populations</p>	<p>Frequent emergency department visits indicate that people are not getting access to the services or supports they need in community.⁴³</p> <p>There were 98,407 emergency department visits and 11,671 hospital admissions related to mental health and addictions in Toronto in 2019.¹³</p> <p>38.3% of Black Canadian residents with poor or fair self-reported mental health used mental health services compared with 50.8% White Canadian residents (between 2001 and 2014).⁴⁴</p> <p>Among Black-Caribbean populations, wait times for mental health care averaged 16 months, more than twice those for Whites (which averaged seven months). Despite the higher prevalence of mental illness found in low-income areas (where Black populations disproportionately reside), these communities often have fewer mental health programs and services.⁴⁵</p> <p>Only 13.7% of Chinese people in Ontario with poor or fair self-reported mental health used mental health services compared with 50.8% White Ontarians. Other racialized groups (38.3% Black and 35.8% South Asian people) are also less likely than White Ontarians to use mental health services.⁴⁴</p>
<p>COVID Recovery</p>	<p>During COVID, the monthly rate of mental health and addiction-related outpatient visits to any physician was six per 100 population in Toronto (up from five per 100 pre-COVID). In the first year of the pandemic, one in four youth experienced increased depressive symptoms and one in five experienced elevated anxiety, a 32% increase in experiences of worry and stress.¹⁴</p> <p>Emergency department visits related to self-harm among children and youth in Toronto increased from 467 visits in the 15 months before the pandemic to 606 in the following 15 months.⁴⁶</p> <p>Long COVID patients are presenting with anxiety, depression, sleep disorders⁴⁷ and reduced quality of life.^{22, 48}</p>

Appendix C:

Theory of Change

The **vision** of the Thrive Toronto Mental Health Plan is a Toronto where there is equity in mental wellness across the population and equity of outcomes for people with mental health problems. The vision is a Toronto where mental wellness has been optimized, risks for and rates of mental illness and problematic substance use have been minimized and there is appropriate access to high-quality treatment and supports.

The **aim** of the Thrive Toronto Mental Health Plan is to improve mental health and equity of mental health of people in Toronto. More specifically, it aims to:

- identify opportunities for improving the equity, effectiveness and efficiency of existing policies and services,
- identify the new resources that are available to improve mental health and equity of mental health in Toronto, and
- develop strategies and facilitate the implementation of initiatives that lead to increased system equity, effectiveness and new resource acquisition for mental health and mental health equity in Toronto.

The importance and impacts of mental health across many different facets of our lives has led many different parts of society to develop responses. For instance, families and communities, religious institutions, the City of Toronto, social care providers, charities, housing providers, schools, colleges, universities, employers and emergency services all offer mental health supports in addition to our health services. If the Thrive Toronto Mental Health Plan is to meet its goals, we need to identify how it can best enhance and complement the plethora of existing mental health initiatives. The theory of change offers the basis for Thrive Toronto Advisory Committee members to decide how best to structure and position the Thrive Toronto Mental Health Plan for success.

A Plan to Address the Causes of Mental Health Issues and Promote Mental Wellness

There are many different ways in which mental health can be improved. In general, interventions can include:

- enhancing and increasing the impact of factors that promote mental well-being, preventing mental illness and promoting recovery,
- decreasing the presence and impact of factors that negatively impact mental well-being and increase the risk of and persistence of mental health problems, and
- supporting the development of social environments, social care systems and health care systems that deliver equitable mental health outcomes.

From the foundational documents and meetings, a clear approach to the Thrive Toronto Mental Health Plan has emerged.

Theory of Change

There are four main ways in which Thrive Toronto can have impact through the Thrive Toronto Mental Health Plan:

1. **raise awareness** of how to improve mental wellness,
2. **convene** key partners and organizations through networks, meetings and events to improve their impact on mental wellness,
3. **leverage** assets to attract new resources to expand / scale up effective initiatives, and
4. **build capacity** to promote mental wellness and prevent mental illness.

There are five areas in which actions should be focused for optimal outcomes:

1. **childhood**, because building resilience is best started in childhood and because most mental health problems begin in childhood,
2. the **social environment**, because of the importance of the social determinants of health on mental wellness and mental illness,
3. the **work environment**, because working conditions that protect and promote psychological health are vital to population mental wellness,
4. the **health and social care sector**, because of their major role in mental illness, and
5. the **economic environment**, because of the evidence of the role of financial insecurity and income inequality in promoting problems with mental wellness and mental health, and mental illness, as well as the importance of mental health to the economy.

These four different types of initiatives and five areas offer 20 impact focuses for the Thrive Toronto Mental Health Plan. Examples of actions that could be considered for each of these areas are offered. These are not specific actions that the plan needs to endorse. Rather, they are examples of the types of action that could have impact given the theory of change.

	Early Childhood Environment	Social/Community Environment <small>(Individual- and community-level as well as past, present and future, across the life course)</small>	Business/Work Environment	Health Environment	Economic Environment
Raise awareness	Raise awareness of adverse Childhood Experiences (ACEs) – communicate/ disseminate the importance of ACEs to mental wellness.	Increase awareness of mental health/ wellness/ social determinants of mental health and things that impact participation in mental wellness activities – ageism, racism, homophobia.	Make all employers aware of mental health standards of good workplace developed by the Mental Health Commission of Canada, including equity standards. Make individuals aware of what a good job is – produce a concise piece of work that people can understand when they’re considering jobs with a focus on sectors that have precarious employment.	Raise awareness of the importance of mental wellness, mental health and wider aspects that influence it to highlight trajectories in mental health and what can be done about them.	Raise awareness of the links between poverty, income and income inequality on mental health. Raise awareness of the possible impacts of a <i>Thriving</i> income on mental health, mental illness and recovery.
Convene key leaders and organizations	Convene people and organizations across sector groups that impact on the childhood environment to improve understanding of the impacts of their work on mental health and to share best practices.	Convene stakeholders working in the social and community environment to share knowledge and build relationships and shared understanding of roles and responsibilities between sectors and services and across different communities (age groups, culture groups, etc.)	Convene industry and people who have leverage on industry to improve the work environment and employee mental health.	Convene health partners (Ontario Health, Family Health Teams, Community Health Centres, and particularly those that serve diverse populations) to develop/ ensure shared understanding of roles and responsibilities.	Convene stakeholders who can have an impact on the economic environment to identify ways in which it could be changed to promote mental health.

	Early Childhood Environment	Social/Community Environment <small>(Individual- and community-level as well as past, present and future, across the life course)</small>	Business/Work Environment	Health Environment	Economic Environment
Leverage Thrive Toronto's main area of leverage will be through existing and possibly new partners.	Leverage existing stakeholders and groups working specifically in childhood mental health and support them in finding new resources to expand their work.	Identify ways to leverage existing resources that aim to improve social and community environment.	Leverage Thrive Toronto's position to improve workplace mental health by influencing the business/work environment.	Thrive Toronto partners in the health sector could leverage public health and primary care to promote mental health by developing resources, such as policies, tools and training. Leverage Thrive Toronto table to increase resources that elevate access to culturally relevant mental health and wellness services.	Leverage Thrive Toronto's position to advocate for changes in housing (such as municipal rent banks and emergency housing supports), food security initiatives, poverty reduction and income support.
Build capacity	Build capacity to move from awareness of ACEs to interventions to decrease the prevalence and impact of ACEs. Identify the issues and better understand how we can support Toronto to build capacity to decrease ACEs.	Develop a suite of tools and skills for promoting mental health, such as how to create safe spaces, how to prevent violence, mental health literacy. Empower neighbourhoods to determine what they need for mental wellness.	Increase businesses/ city capacity to ensure psychologically safe workplaces.	Build the capacity of health-care sector workers to identify mental health issues and promote mental wellness across the sector from community to inpatient to long-term care.	Work with organizations that aim to improve the economic environment to help them to understand the impacts of the economy on mental health and encourage them to include mental health as part of their consideration of economic policy and the economic environment.

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