

Ontario Legislature Select Committee on Mental Health and Addictions	
Date:	June 17, 2009
Prepared by:	Alan Cudmore, Program Consultant, Hamilton, PEHP
Web site:	http://www.ontla.on.ca/web/committee-proceedings/committees_detail.do?locale=en&ID=7790
Presenter: Frances Jewell, Mental Health Rights Coalition	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the role and function of Consumer Survivor Initiatives ▪ Read quotes from the membership of the MHRC to the committee ▪ Quotes indicated the need to: address stigma, provide more resources, and promote peer support. <p>Questions: Committee members asked clarifying questions about the nature of peer support, francophone services, concurrent disorders, and what could be done at MHRC with more \$.</p>
Presenter: Barbara LaFleshe, R.O.C.K. – Raising our Children’s Kids	<p>Summary:</p> <ul style="list-style-type: none"> ▪ A group of four grandmothers from the program presented on the issues involved in raising the children of their own children who have addiction and mental health concerns. ▪ Issues raised included the need for parental rights, financial support, and support for children with disabilities.
Presenter: Kris and Madhuri Ramakrishnan, private citizen	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Discussed issues involved in finding treatment for their son who is living with schizophrenia. ▪ Issues raised included varying levels of care in different hospitals, lack of information, medication side effects, no respite care for families, too many agencies, no teeth in CTO’s. ▪ Provided an endorsement of CAMH’s First Episode program as a model for the province. ▪ Recommended: (a) respite care for families, (b) increased school/university supports, (c) centralized agency for help/knowledge, (d) increased rights for parents
Presenter: Susan Jewett, Burlington Counselling and Family Services	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Discussed issues related to mental health and addictions in a Family Counselling service ▪ Issues raised included: funding silos, stigma, funding inequities, and access to services ▪ Funding needs to be more flexible to meet the needs of the client.

	<p>Questions: The committee asked questions about the provision of peer support within family services and if there should be one Ministry who is in charge of all funding.</p>
<p>Presenter:</p> <p>Judy Tyson, private citizen</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the story of her son’s struggle with schizophrenia ▪ Recommended: no wrong door access, benchmarks for care/policy, e-health strategy, improved assessments, the development of care paths, physician training, wait time strategy.
<p>Presenter:</p> <p>Jean Wiebe, private citizen</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the story of her son’s struggle with schizophrenia and substance abuse ▪ Recommended: education, prevention, clubhouses, reduction in stigma, increased employment
<p>Presenter:</p> <p>Mary Ellen Frederick, private citizen</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the story of her son’s struggle with schizophrenia ▪ Recommended: accurate diagnosis/treatment, early intervention, stigma reduction, professional education, more outreach, family involvement, revisions to privacy act, respite care for families, more programs for concurrent disorders, more research <p>Questions: The committee asked questions about programming available to children of consumers, the barriers to getting a diagnosis, work and social supports for consumers.</p>
<p>Presenter:</p> <p>Judith Fink, private citizen</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the story of her son’s struggle with schizophrenia and substance abuse ▪ Recommended: increased education, increased services, shorter wait times, reduction in stigma, early identification, more psychologists, more support programs, promotion of recovery model <p>Questions: The committee asked questions about concurrent disorders treatment at Georgianwood, and how to balance the rights of the individual for privacy with the rights of the family to be provided with information.</p>
<p>Presenter:</p> <p>Susan Roach, Haldimand-Norfolk Resource Centre</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ A description of the function and activities of the Resource Centre was provided (CSI initiative) ▪ Comments to the committee from the membership of the

	<p>Resource Centre were shared</p> <ul style="list-style-type: none"> ▪ Issues that were identified included: transportation for meaningful activities, addressing stigma, embracing recovery, seamless and coordinated system, and underfunding.
<p>Presenter:</p> <p>Lorraine Chapman, (Director of Mental Health Programs, Good Shepherd Non-profit Homes) and Dr Lori Regenstreif (Shelter Health Network), Hamilton Addiction and Mental Health Collaborative</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the membership, values and function of the HAMHC ▪ Provided the committee with a brief on key points to be considered ▪ Focused presentation on primary care initiatives (Shelter Health Network), housing initiatives, and crisis/ER diversions, and integration between MH and Addictions <p>Questions: The committee asked questions about specifics on ER diversion, and transitional care for youth moving from children's to adult services.</p> <p>*MPP Mike Colle asked this delegation for a 1-2 page brief for the Minister of Health on the ER diversion initiatives in Hamilton that could be implemented elsewhere in the province.</p>
<p>Presenter:</p> <p>Robert Bond - The Canadian Association for Pastoral Practice and Education</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the Canadian Association for Pastoral Practice and Education ▪ This group is working on developing training spiritual care providers in MH and Addictions. ▪ Spiritual care providers should have the same competencies as other counselling professionals <p>Questions: The committee asked questions regarding chaplaincy services in hospitals and working with clients on treatment adherence.</p>
<p>Presenter:</p> <p>Maureen Westfall, private citizen</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Considers the MH system to be a system of abuse ▪ Had numerous experiences with breaches of confidentiality, withholding of services and discrimination ▪ Feels that the MH system has colluded with the shelter system to deny her service as well.
<p>Presenter:</p> <p>Lorraine McGrattan, private citizen</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described a family member's struggle with schizophrenia ▪ Recommendations: family consultation should be mandated, the system should become easier to navigate, need early

	<p>diagnosis and intervention, families should be more involved in treatment</p> <p>Questions: The committee asked about the balance between confidentiality/family involvement and the difference in information sharing in other healthcare settings.</p>
<p>Presenter:</p> <p>Peter Szatmari, Director, Offord Centre for Child Studies</p>	<p>Summary:</p> <ul style="list-style-type: none"> ▪ Described the work of the Offord Centre ▪ Most MH problems are identified before age 15 ▪ Needs: new epidemiological estimate of MH problems in children, earlier identification, collaboration w/ adult system, and more resources for chronic conditions in childhood <p>Questions: The committee asked about screening tools in schools, the needs for transitional aged youth, prevention programming across province and improving MH/A knowledge in teachers.</p>