

**CANADIAN MENTAL
HEALTH ASSOCIATION, ONTARIO**

**ASSOCIATION CANADIENNE
POUR LA SANTÉ MENTALE, ONTARIO**

CMHA, ONTARIO | ANNUAL REPORT 2008/2009

ontario vision

Mentally healthy people in a healthy society.

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our CEO

a message from our CEO

What if one in every five Ontarians stood on the grounds of Queen's Park and demanded action from the government on a significant health issue that affected each and every one of them? What if each of those Ontarians convinced only one family member or friend to join them in their demands for government action? How would you suspect our elected officials would and should respond to 5 million – almost half this province's residents – standing side by side and making their voices heard?

If this crowd, larger than any protest group we have seen in this province, were demanding funding for a new lifesaving drug for cancer, action would be swift. If the demand were for a new treatment that reduced the incidence of stroke or heart disease, action would be almost immediate. After all, this could easily be you or me standing in the crowd.

But what if the crowd contained thousands of homeless people? What if many others were unemployed due to an invisible illness? What if others were – well – not quite like you or me? If this crowd were demanding more supportive housing for people living with mental illness and new programs to help people living with mental illness find employment? Would action be guaranteed? Would the same public outcry be forthcoming?



our CEO cont'd

We know that one in every five Ontarians will be affected by a mental illness every year. Many will never speak to their family, friends, employers or even their doctor about their illness. Mental illness may be “*Out of the Shadows*”ⁱⁱ but it is not yet out of the closet. We may have come a long way from the old asylums where we locked people up so we wouldn't have to see them. But the freedom to speak openly without fear of personal consequences is still just a dream for many.

As astounding as these numbers may be, they may in fact underestimate the scope of the impact of mental illness. A recent OECD policy brief (November 2008) noted that “*about 10% of the adult population worldwide will report having some type of mental or behavioural disorder at any point in time, WHO estimates.*” Recent studies in the U.S. and Europe noted that 26% and 27%, respectively, of adults (18+) will report having experienced some type of mental or behavioural health episode in the past 12 months.ⁱⁱ

Most people's experience with a mental illness will be episodic. But for about 3% of Ontarians, the illness will be something they live with every day for the rest of their lives. The effects on the person can be devastating: loss of their friends and family; their job; their home; their self-esteem and their sense of belonging.

Mental illness may be the diagnosed health problem but the major impact on the person is often a result of stigma and discrimination: the way that you and I think and act when we learn about someone we know that has a mental illness. It is unimaginable that we would turn our backs in this way from our family, friends and neighbours who were suffering from heart disease. But for the most part, mental illness is invisible to us, if we choose to ignore the signs. In August 2008, the Canadian Medical Association (CMA) released its 8th Annual National Report Card on Health Care entitled, “Views on Mental Health.” Spokespersons for the doctors noted that mental illness is the “*final frontier of socially acceptable discrimination.*” However, the findings make such a statement inevitable.



our CEO cont'd

The survey found that:

- Almost half of Canadians (46%) think the term mental illness is used as an excuse for poor behaviour and personal failings
- One in 10 Canadians think that people with mental illness could “*just snap out of it if they wanted*”
- Only 16% of Canadians would marry someone who has a mental illness, and 42% said they would no longer socialize with a friend diagnosed with a mental illness
- Half of respondents would not tell friends or co-workers that a family member was suffering from mental illness

Why we stigmatize and discriminate is a very complex and multi-dimensional set of factors. Stigma in relation to people with mental illness can be understood as a combination of problems of knowledge (ignorance) or attitudes (prejudice.) Maybe, it stems from religious beliefs or customs, or even last night's news cast or television show may have led us to believe that mental illness and violence go hand in hand. In fact, those living with a mental illness

are more likely to be victims of violence rather than perpetrators of violence. Discrimination is much more worrying though. While stigma is about what we think, discrimination is about what we do – our behaviours. Turning our backs on those we think are somehow less worthy or just less equal to us.

The CMA survey did have a bright light in it. Despite their generally negative attitudes, almost three quarters of respondents (72%) agreed that funding to treat mental illness should be on par with funding for physical illnesses, such as cancer.

Governments have hard choices to make when they spend our tax dollars. The Ontario Government has made substantial investments in community mental health in the past decade and our current Minister of Health, David Caplan, has made it a personal priority to develop a new 10-year strategy for mental health and addictions. These actions are laudable and much appreciated.

However, Ontario and Canada lag behind many other jurisdictions when it comes to funding needed services. Based on recent



our CEO cont'd

OECD statistics, Canada ranks well down the list on mental health spending. According to the OECDⁱⁱⁱ, in 1998, Canada spent about 5.6 of its total health care costs on mental health and behavioural disorders. That compares to 10.6% in France and 15.6% in the Netherlands. Given the overall incidence of mental illness is consistent across the globe, we in Canada and Ontario may need to think about how much of our real health needs are being addressed and if not, why not?

Addressing mental health needs is far more complex than many other health issues. The answers lie in a broad range of interventions that meet the basic needs we all expect: a place to live; support of family and friends; and employment, to make sure we can pay for basic necessities and have a sense of worth in our community.



Lorne Zon

CEO, CMHA, Ontario

ⁱOut of the Shadows at Last – Transforming Mental Health, Mental Illness and Addiction Services in Canada.

ⁱⁱOECD, Policy Brief, November 2008

ⁱⁱⁱOECD, Policy brief, November 2008



the board President

a message from the board President

At CMHA, Ontario our vision is mentally healthy people in a healthy society. In many ways, it is this vision that sets CMHA apart from other organizations in the mental health field. Although we are dedicated to bettering the lives of consumers and their families, who are experiencing a serious mental illness, we are working hard to achieve mental health for all. Every year more than 20% of adults in Ontario will experience a mental illness. Almost every one of us can think of a family member or friend who has had a time in their life in which his or her mental health was compromised in some way. “*There is no health without mental health,*” isn’t just a slogan, it is a reality.

CMHA, Ontario has been actively engaging community leaders to embrace our vision and our organization, and as a result, we are witnessing steady progress in positioning mental health as a priority in Ontario.

We are proud of our work at CMHA, Ontario over the past year. This hard work and our strategic focus have allowed us to continue to do things differently and better. We continue to make dramatic progress toward new levels of excellence in our key areas of public policy, health system development, knowledge transfer, and mental health promotion.



the board President cont'd

As always, nothing gets accomplished without the hard work and cooperation of a team. The combined efforts of the Board of Directors, staff, volunteers and donors is what makes things happen. The lives of people with mental illnesses are enriched by your contributions. CMHA, Ontario is passionate about the part it is playing in the evolving mental health sector. Just as consumer input is a priority, so is input from community partners and other stakeholders. Let us celebrate our commitment to build new partnerships, coalitions and joint ventures. Thank you to all who helped make this year a success!

Read on. See how we are making a difference right now, and helping to create a future full of inspiration, possibility and promise.



Russel DeCou
President, Board of Directors
CMHA, Ontario



Ontario values

social justice

We believe that social justice includes a commitment to a basic sense of fairness, a respect for differences among people, and that every human being deserves an equal opportunity in life.

individual and collective responsibility

We believe that both individuals and society as a whole share in the tasks of informing the public, eliminating causes of mental illness, and caring for those individuals who need or want care.

access to appropriate and adequate supports

We believe that people require friendships and other natural supports. When formal supports are needed, people should be able to choose the least intrusive option from a comprehensive range of appropriate mental health programs and services, without undue delay and as close to their home community as possible.

self-determination

We respect differences among people and the right of every individual and community to make choices and decisions based on unique individual beliefs and community norms. Basic to this right of self-determination is the need of people to be involved in decisions that affect their lives.



Ontario values cont'd

community integration

Community integration of all people is an essential prerequisite to the development of healthy communities. We are committed to removing the barriers that prevent people, especially those with mental disorders, from fully participating in the life of the community.

integrity

We believe that our day-to-day work must be true to our shared values and beliefs and dedicated to promoting public trust and a sense of confidence within the organization.

partnership

Partnership is dependent upon shared values and the cooperative efforts of all those working towards a responsive and accessible mental health system. One important partnership includes consumers, families, service providers, and the community. We are committed to sharing, and view participation and partnership as essential to realizing our goals and objectives.

excellence

We are committed to developing and maintaining the highest possible standards of management and operation to ensure that programs and services meet the needs and expectations of the community.

accountability

We are guided by our shared mission, values, goals, and objectives. As a publicly funded charitable organization we are committed to using our funds as efficiently and effectively as possible, and to being open to the highest standards of public scrutiny.

creativity

As an organization we must encourage innovative ideas and new ways of doing things that are responsive to changing attitudes and needs in the community as well as to ongoing organizational changes.



“There is much we **should** do. There is much we **can** do.
There is much we **must** do to be a valued contributor
to the continuous improvement of the mental health system in Ontario.”

Lorne Zon

CEO, CMHA, Ontario



CANADIAN MENTAL
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knowledge transfer

In 2008, we launched a new health promotion project called **Minding Our Bodies: Physical Activity for Mental Health** (www.mindingourbodies.ca). Our goal is to increase capacity within the community mental health system in Ontario to promote active living and to create new opportunities for physical activity for people with serious mental illness to support recovery. Research evidence shows that increased physical activity can have significant positive effects in preventing chronic disease, improving chronic disease outcomes and supporting recovery from mental illness. Exercise can also alleviate primary symptoms of depression and anxiety, as well as secondary symptoms such as low self-esteem and social withdrawal. Yet despite the known benefits, physical activity interventions are not commonplace or well-integrated with other services delivered by community mental health care providers in Ontario.

Our project will serve as an “*incubator*” to help mental health service providers in Ontario, together with community partners, develop and deliver evidence-based physical activity programs, improve access to



knowledge transfer cont'd

local resources, and promote social inclusion. In the year ahead, with the help of six pilot sites, we'll be evaluating the toolkit and other resources we created. The final toolkit will be launched in March 2010. *Minding Our Bodies* is an initiative of CMHA, Ontario in partnership with YMCA Ontario and York University, with support from the Ontario Ministry of Health Promotion through the Communities in Action Fund. The project is guided by an advisory committee that brings together expertise from the Canadian Diabetes Association, CMHA Champlain East Branch, Heart Health Resource Centre (Ontario Public Health Association), Heart and Stroke Foundation of Ontario, Mood Disorders Association of Ontario, Parks and Recreation Ontario, Physical Activity Resource Centre (Ontario Physical and Health Education Association), Schizophrenia Society of Ontario, YMCA of Greater Toronto and York University.

Working collaboratively with five other provincial associations, CMHA, Ontario developed and launched a new online resource in early 2009 called the **LHIN Exchange** (www.lhinexchange.ca).

The website is intended to help mental health and addiction service providers in Ontario share information about new developments in Ontario's 14 Local Health Integration Networks (LHINs.)

Our partners on this initiative include Addictions Ontario, Centre for Addiction and Mental Health, Ontario Association of Patient Councils, Ontario Federation of Community Mental Health and Addiction Programs and Ontario Peer Development Initiative.

In November 2008, CMHA, Ontario established the **Mental Health Employment Supports Network** (MHESN.) The MHESN provides a forum for sharing information on employment support issues, services and developments in Ontario that impact people with mental illnesses. It is open to all employment service providers in the province that deliver employment support services to people with mental health disabilities.

Our e-newsletter **Mental Health Notes** reaches more than 1,600 direct subscribers every two weeks, keeping them informed about public issues, new research findings, and upcoming conferences

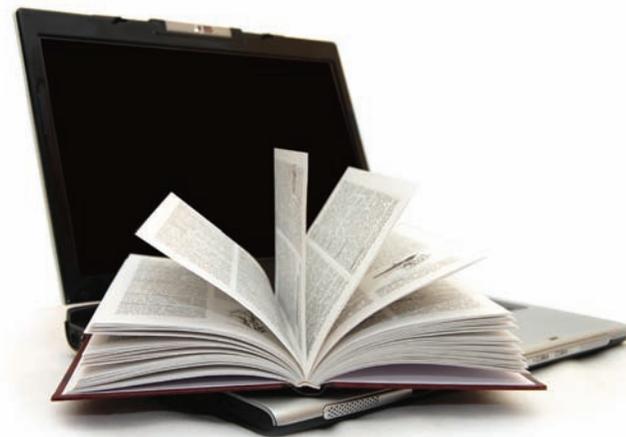


knowledge transfer cont'd

and other events. The newsletter is essential reading for anyone with a stake in this province's community mental health system. In 2008, we added a new column in Mental Health Notes devoted to news from the Ontario Mental Health and Addictions Knowledge Exchange Network (OMHAKEN), including findings from the Systems Enhancement Evaluation Initiative. SEEI is an important multi-year, multi-site research project examining the impact of recent investments in community mental health services by the government of Ontario. CMHA, Ontario is a member of the SEEI advisory committee.

SEEI research findings on court support programs were also profiled in the "*Forensic Mental Health*" (Winter 2009) issue of CMHA, Ontario's **Network** magazine. In the preceding issue, "Beyond Bricks and Mortar: Mental Health and the Built Environment" (Summer 2008), we explored the challenge of creating healthy physical environments and communities as important determinants of health.

All of these publications, as well as our policy papers, submissions and backgrounders are available on the CMHA, Ontario website (www.ontario.cmha.ca). Our high profile as a provider of credible mental health information, via our website and various publications, means that consumers and family members, mental health professionals, students, researchers, media, and others actively seek us out when they need answers. Our public education officer regularly responds, by phone and e-mail, to enquiries about mental illness and the mental health system, promoting mental health through thoughtful listening, sharing knowledge, and offering guidance to enquirers who need mental health recovery services.



policies & public issues

Mental health is a priority on the public agenda, as a result of consumers, their families, communities, providers and non-government organizations coming together to share their experiences and vision for mental health and supporting individuals with mental illnesses. This momentum has garnered the attention of policy-makers. For over 50 years, CMHA, Ontario has been at the forefront of raising awareness of strategies that promote positive mental health and advising policy-makers on recommended directions to enhance community-based mental health services and supports. We are gratified by the success these continuing and recent efforts have made in positioning mental health as a priority in Ontario.

In 2008/09 we carried out our work by addressing a wide range of public policy issues. We provided advice on developing and implementing regulatory standards to increase accessibility for people with mental health disabilities. And, we provided advice to the Ontario Standing Committee on Social Policy on recommended changes to the Personal Health Information and Protection Act.

We also recommended strategies to the Government of Ontario's Cabinet Committee to reduce poverty. Poverty is both a cause and a consequence of poor mental health. CMHA, Ontario is calling for poverty reduction



policies & public issues cont'd

strategies that increase access to economic and community supports for vulnerable populations. We are also active in supporting people with mental illness to reduce their risk of living in poverty. We do this by advocating for increases in supportive housing, effective employment support programs, and raising income support.

Mental health promotion focuses on developing healthy public policies, social structures, as well as individual resources that contribute to positive mental health. Together with four other provincial organizations, we issued a call to action, identifying options to address mental health promotion in Ontario, and offered our support to initiate this work. Our report and recommendations have been timely, given recent developments within Government.

Specifically, a select committee on Mental Health and Addictions, with representatives from all three parties in the Ontario Legislature, is commencing work to recommend ways to improve access to mental health and addiction services and to promote mental health

in Ontario. CMHA, Ontario will be actively involved in providing advice to inform decision-making.

In addition, the Ministry of Health and Long-Term Care has announced the development of a new **Mental Health and Addiction Strategy** for the province. Again, we will be integrally involved in sharing our knowledge, as well as highlighting promising practices across the province, that can promote healthy communities and inform the development of responsive and effective mental health services and supports.

health system development

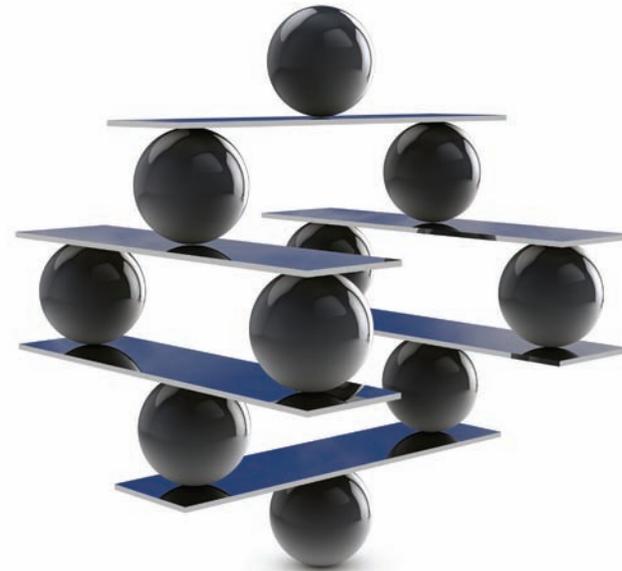
Over the past year, CMHA, Ontario identified issues and opportunities for addressing the prevention and management of co-existing mental illnesses and chronic physical conditions. Physical and mental health are fundamentally linked, yet health systems tend to address them separately. People living with a serious mental illness are at higher risk of experiencing a wide range of chronic physical conditions. Conversely, people



policies & public issues cont'd

living with chronic physical health conditions experience depression and anxiety at twice the rate of the general population. CMHA, Ontario continues to provide leadership in this area by engaging provincial organizations, primary health care providers, Local Health Integration Networks and the Ministry of Health and Long-Term Care in health system development and policy strategies that can improve Ontario's approach to chronic disease prevention and management.

We also identified in collaboration with other provincial mental health and addiction organizations a series of recommendations to improve emergency department care for people with mental health and addiction needs, reduce demand on emergency departments, and strengthen the capacity of the community sector to address mental health and addiction problems before they become acute.



fund development

It takes many caring individuals and their generous contributions to ensure that people with mental health issues and their friends and family are not forgotten. And so, we would like to extend a special thank you to the myriad of corporations and individuals who have reached out and donated this year, to ensure that Canadian Mental Health Association (CMHA), Ontario continues to be a leader in the field of mental health. These 4,169 individuals and corporate donors are essential partners in mental health by either donating for the first time or renewing their financial commitment to CMHA, Ontario.

Throughout the year, we count on the generosity of the many caring people who help us to continue our important work. CMHA, Ontario is committed to improving the lives of people with mental illness and their families, and to the promotion of mental health for all Ontarians. We can't do it without you!

For the year ended March 31, 2009, net contribution from fundraising programs, excluding bequests, totalled \$108,455. Our cost-effective direct marketing program is where we continue to focus our fundraising efforts along with participation in various community events.



fund development cont'd

In September, 2008 the Toronto Police Service Homicide Squad honoured the memory of their colleague Detective Tom Gage at their Annual Golf Tournament by raising \$4,000 for CMHA, Ontario. Tom, a 53-year-old father of two, suffered from bipolar disorder and took his own life in July 2007. *"We wanted to do something in memory of Tom and for his family,"* said organizer Detective Wayne Banks.

"The stigma is often worse than the illness, in many respects," said wife, Louise Gage. *"The fear of losing your job, your friends – to be labelled – is terrifying."* Gage explained that her husband often found refuge in his job handling case files for the Homicide

Squad and in the people he worked with for over 12 years. She also stated that raising awareness of depression is something that is very important to her family, and that the fundraiser made her and her two children Adam, 24, and Andree, 21, proud to be part of the Service family.

CMHA, Ontario was honoured to be part of this special event and to be the recipient of the generous funds raised. Thanks to all who participated in the Toronto Police Service (TPS) Homicide Squad Annual Golf Tournament. We applaud the Toronto Police Service for their efforts in helping to bring mental illness *"Out of the Shadows."*



mental health WORKS

This past year, **Mental Health Works** (MHW) has enjoyed national recognition through its collaboration with the Mental Health Commission of Canada (MHCC) and the Great-West Life Centre for Mental Health in the Workplace. The small business initiative Issues & Solutions: Managing Mental Health in the Workplace came out of this collaboration and is being offered across Canada until the end of 2009. This two-hour workshop endorsed by MHCC and supported by Great-West Life is designed to reduce stigma and increase awareness of mental health issues in the workplace.

Work has begun on **Working through it: Stories at work, off work and returning to work** project. This is a video-based resource that highlights people who have experienced mental health issues at work and recovered, speaking directly to those who are currently experiencing symptoms of depression or anxiety-related disorders.



mental health works cont'd

This past year has also included MHW representation at the MHCC Consensus Conference on Adult Depression, Canadian Human Rights Commission events, Department of National Defence, Worker's Safety and Insurance Board (WSIB) and all levels of government. We would like to welcome seven new Ontario trainers and three B.C. trainers to our MHW family. We are very proud of our MHW trainers and now have 37 trainers across Canada. In the past year, we have delivered MHW presentations and workshops in virtually every province, including the Yukon and Northwest Territories. No doubt we will get into Nunavut before long!

This year marks the third and final year of an Ontario Trillium Foundation grant received by MHW. We are grateful for the support by The Ontario Trillium Foundation which has assisted us in making MHW a strong and important player in the workplace mental health field. Our commitment is to continue to work at strengthening

the MHW program over the next year through strong leadership and continued marketing efforts. We are making gains in improving the way workplaces prevent and address mental health-related issues across Ontario and Canada. We will continue to expand our knowledge and services to meet the ever growing demands of the working population. These are tough times, but we have the tools and skills to assist, now more than ever.



treasurer's report

a message from our treasurer, Roger Miller

CMHA, Ontario's financial statements provide the reader insight into the organization's attention to sound financial management. This year's results demonstrate once again that the management and Board of Directors are determined to maintain a solid financial foundation and manage spending prudently.

CMHA, Ontario's results for the fiscal year ended March 31, 2009 have resulted in a surplus of \$314,455. This year's surplus can, once again, be directly attributable to our revenue generating efforts combined with responsible cost control. As in past years, our surplus has added to our reserves to provide the financial cushion to address opportunities as well as address unforeseen circumstances.

As noted above, this year's surplus has been primarily the result of our continued pursuit of supplementary revenue streams. **Our Mental Health Works** program generated a small surplus of \$10,273. Despite turmoil in the investment market, our reserves also generated net investment income of \$6,591 for the organization. Our work with the Ministry of Health and Long-Term Care (MOHLTC) as paymaster and CMHA, National Office generated revenues of \$175,000 and \$60,000, respectively. Finally, our fundraising efforts resulted in an increase over last year of \$247,142 in donations and bequests. Our expenditures for the year are consistent with prior years.

In closing, I am pleased to report that CMHA, Ontario is in an excellent financial position to continue pursuing its strategic objectives.



statement of revenue & expenses

Year ended March 31, 2009

	<u>2009</u>	<u>2008</u>
REVENUE		
Ministry of Health and Long-Term Care <i>Grants</i>	\$ 1,719,599	\$ 1,650,894
Ministry of Health and Long-Term Care <i>Special Projects</i>	145,140	186,160
Fundraising	302,096	297,416
Bequests	281,666	39,204
Branch membership fees	150,000	146,000
Investment income	55,779	117,409
Mental health works programs	296,079	302,254
Other	251,256	258,720
Extraordinary item	-	567,060
	<u>3,201,615</u>	<u>3,565,117</u>
EXPENSES		
Knowledge Centre	1,325,062	1,338,204
Communications and marketing	216,679	110,672
Management, operations and support services	414,548	409,558
Volunteer support	100,371	69,892
National office support	94,036	135,232
Mental health works programs	285,806	248,352
Mental health education and capacity building projects	145,140	186,160
Amortization of capital assets	36,605	31,961
Revenue Share Program	26,084	25,701
Unrealized investment losses	49,188	1,541
Fundraising	193,641	176,208
	<u>2,887,160</u>	<u>2,733,481</u>
EXCESS OF REVENUE OVER EXPENSES	<u>\$ 314,455</u>	<u>\$ 831,636</u>



statement of financial position

March 31, 2009

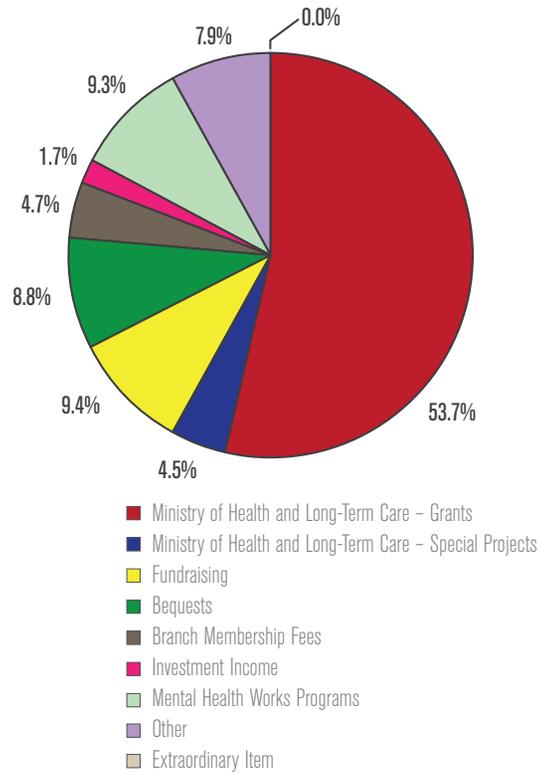
	<u>2009</u>	<u>2008</u>
ASSETS		
CURRENT		
Cash	\$ 7,090,459	\$ 5,565,424
Short-term investments	1,183,027	1,267,439
Accounts receivable	381,054	366,214
Prepaid expenses	73,339	6,548
	<u>8,727,879</u>	<u>7,205,625</u>
CAPITAL ASSETS	92,950	108,260
TOTAL ASSETS	<u>\$ 8,820,829</u>	<u>\$ 7,313,885</u>
LIABILITIES		
CURRENT		
Accounts payable and accrued charges	\$ 2,616,304	\$ 3,534,721
Amounts held on behalf of the Government of Ontario	\$ 4,075,240	\$ 1,947,733
Due to Government of Ontario	63,949	10,999
	<u>6,755,493</u>	<u>5,493,453</u>
DEFERRED CAPITAL CONTRIBUTIONS	34,997	36,444
DEFERRED CONTRIBUTIONS	86,064	154,168
TOTAL LIABILITIES	<u>6,876,554</u>	<u>5,684,065</u>
NET ASSETS		
INVESTED IN CAPITAL ASSETS	57,953	71,816
INTERNALLY RESTRICTED	784,513	784,513
UNRESTRICTED	1,101,809	773,491
TOTAL NET ASSETS	<u>1,944,275</u>	<u>1,629,820</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 8,820,829</u>	<u>\$ 7,313,885</u>

Copies of the audited financial statement for fiscal year ended March 31, 2009, are available upon request to info@ontario.cmha.ca.



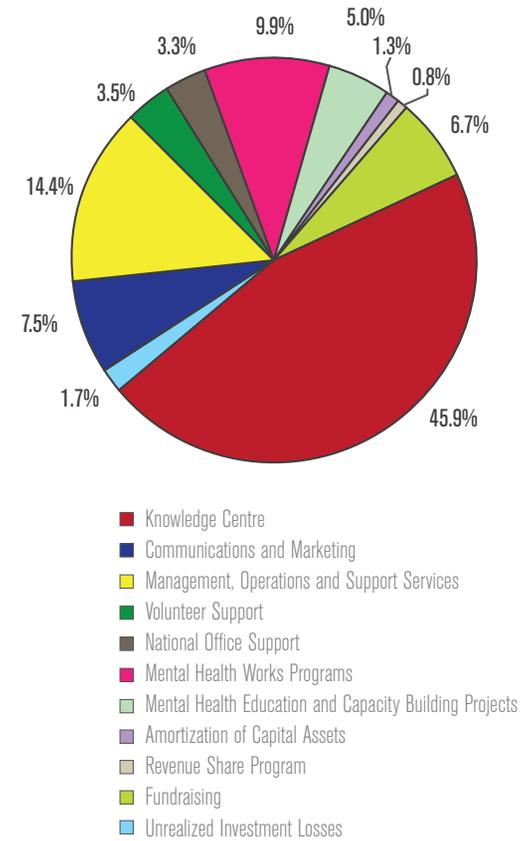
revenue by source

Fiscal 2008/09



expenditure by program

Fiscal 2008/09



strategic goals

about CMHA, Ontario

The Canadian Mental Health Association (CMHA) Ontario, is a non-profit provincial association committed to improving services and supports for people with mental illness and their families, and to the promotion of mental health in Ontario. With the 33 CMHA branches that provide community mental health services throughout the province, CMHA, Ontario achieves its mission through applied research & policy analysis, knowledge transfer, advocacy for healthy public policy, public education, and system planning.

CMHA is committed to a recovery philosophy, which focuses on the potential for people with mental illness to lead full, productive and engaged lives in the community. We work in partnership with many others who share our commitment to supporting the broad determinants of health.

CMHA, Ontario's strategic directions 2007–2010

In early 2007, the CMHA, Ontario board of directors approved four strategic directions to support its renewal process and guide its operations for the period 2007–2010.



strategic goals cont'd

advancing organizational excellence

1. CMHA, Ontario will promote and facilitate province-wide accreditation of all (eligible) CMHA branches.
2. CMHA, Ontario will enhance branch/division accountability by negotiating and implementing a new agreement with all branches.
3. CMHA, Ontario will support governance and organizational capacity building by developing e-learning, webinars and other resources in partnership with other stakeholders and experts.
4. CMHA, Ontario will work with CMHA National and CMHA divisions to implement strategies and projects that build on each other's expertise and capabilities.
5. CMHA, Ontario will adopt a model/style of governance that best supports its strategic directions and will implement the necessary recruitment, development and evaluation strategies.

fostering the integral role of consumers and families

1. CMHA, Ontario will advance the work of its **Ontario Consumer and Family Advisory Council (OCFAC)** by assisting the council in developing its policies, protocols, succession plan, orientation and ongoing education.
2. CMHA, Ontario will support the council's approved projects with appropriate staffing and other necessary resources.
3. CMHA, Ontario will develop a speakers bureau for consumers and families to communicate their stories that reinforce the positions and messages of the organization.
4. CMHA, Ontario will support the voice of consumers and families through our partnerships with other provincial stakeholders.
5. CMHA, Ontario will support the development of a provincial network of family organizations.



strategic goals cont'd

being a recognized leader in mental health in Ontario

1. CMHA, Ontario will become the go-to resource for quality information pertaining to policy and planning for Ontario's community mental health system.
2. CMHA, Ontario will develop a strategic communications plan to guide the effective dissemination of its policy development and knowledge transfer activities.
3. CMHA, Ontario will develop, in partnership with others, a complementary policy research niche that will inform the policy direction of government and LHINs.

being an influential voice in mental health promotion in Ontario

1. CMHA, Ontario will undertake a strategic assessment of its skills and capacity to contribute in new roles to the advancement of mental health promotion in Ontario.

2. CMHA, Ontario will partner with the private sector and broader public sector to enhance the leverage of Mental Health Works as a vehicle for mental health promotion.
3. CMHA, Ontario will develop a strategy to broaden investment by government and others in mental health promotion.



ninth annual CMHA, Ontario achievement awards

Once again, the Canadian Mental Health Association (CMHA), **Ontario Achievement Awards**, recognized the volunteers, consumers, staff and organizations who contribute to the ongoing work of enhancing mental health for all people in Ontario. Each year, these awards give CMHA, Ontario and its 33 branches the opportunity to recognize people within the CMHA family, and those individuals or organizations in their community, who best exemplify the spirit of CMHA.

The 2008 Achievement Award recipients were:

Jim Crichton from A-Channel News in Windsor, who received the **Media Award**, which honours a media representative who has made an outstanding contribution to the coverage of mental health issues.

Great West Life, who received the **Work and Wellbeing Award**, which identifies an organization that promotes mental health in the workplace and demonstrates exemplary co-operation between employers, employees and community agencies within the workplace.

Theresa Claxton, who received the **Consumer Participation Award** honouring a consumer who has contributed significant time and energy advocating for proper mental health services.

Debbie Watterworth from CMHA, Chatham Kent, who received the **Outstanding Staff Award**, which acknowledges the exemplary efforts of a CMHA staff person in Ontario.

Steve Oliver, a volunteer with the CMHA, Kawartha Lakes Branch, who received the **Outstanding Volunteer Service Award**, which commends a deserving volunteer who has acted with responsibility, enthusiasm, vision, and integrity in the service of CMHA.

Walter Mulkewich and **Bloomfield Bicycle Company**, who both received a **Special Recognition Award** acknowledging the special contribution of an individual or organization who exemplifies the vision and mission of CMHA.



ninth annual CMHA, Ontario achievement awards cont'd

Other evening highlights included:

- A presentation of the **Canadian Association of Occupational Therapists (CAOT) Citation Award** to CMHA, Ontario from CAOT representatives. The Citation Award acknowledges an agency, program and/or individual for their contribution/ accomplishment to the health and well-being of Canadians within each province/territory, who is not an occupational therapist.
- Heartfelt congratulations to CMHA, Ontario Board Member, **Joan Jones**, for receiving the prestigious **June Callwood Outstanding Achievement Award for Voluntarism**.

The award recognizes those who have enriched their communities through voluntary action and extraordinary leadership and creativity.

- Heartfelt congratulations to **Donald Schultz**, a CMHA volunteer, for receiving the **Governor General's Caring Canadian Award**. The award recognizes volunteers who, over a period of many years, devote their time and efforts to a cause, individuals or groups in need.



facts & figures

Based on the fiscal year April 1, 2008 – March 31, 2009

donors

Gifts	7,255
Number of donors	4,169
Amount of donations	\$583,131

information and referral

Pageviews to CMHA, Ontario website	2,658,991
Calls/email enquiries to Information and Referral Centre	829

mental health works

Pageviews to Mental Health Works website	467,390
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total pageviews to CMHA, Ontario websites	3,126,381
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board of directors & advisory council

CMHA, Ontario board of directors

president

Russel DeCou

vice-president

Tom McCarthy

branch forum chairperson

Karen Murphy

provincial directors

Jim Hunt

Donald Jones

Joan Jones

Michael Lewkin

Albert "Butch" McMillan

Gilles Myner

Joanne Purdon

Ronald Wyborn

past president

Judith Watson

treasurer

Roger Miller

director-at-large

John Clark

executive director liaison

George Kurzawa

consumer and family advisory council

chair

Joanne Purdon

council members

Laurie Albertini

Earla Dunbar

Bill Hopkins

Dr. Dennis Reid

Jean Beckett

Lisa Duncan

Pam Lahey

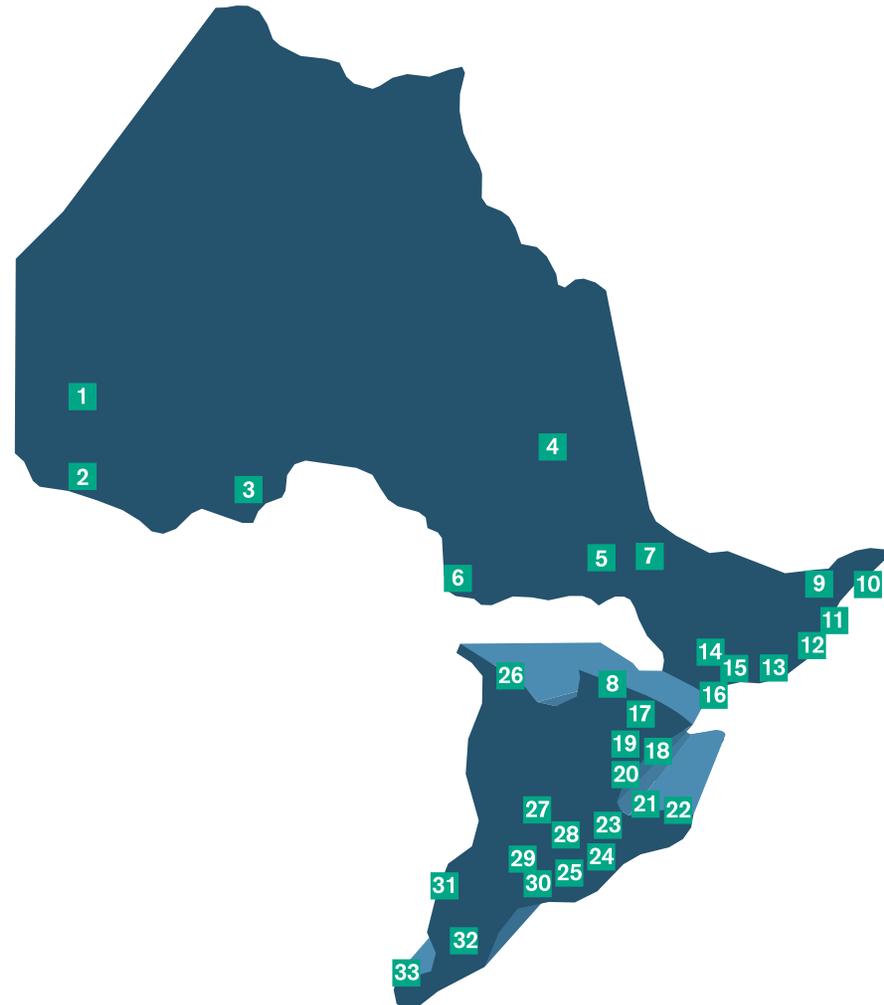
Donald Schultz



Ontario branch locations

33 locations include:

- | | |
|---------------------|--------------------|
| 1. Kenora | 17. Newmarket |
| 2. Fort Frances | 18. Toronto |
| 3. Thunder Bay | 19. Brampton |
| 4. Timmins | 20. Milton |
| 5. Sudbury | 21. Hamilton |
| 6. Sault Ste. Marie | 22. St. Catharines |
| 7. North Bay | 23. Brantford |
| 8. Barrie | 24. Simcoe |
| 9. Ottawa | 25. Guelph |
| 10. Cornwall | 26. Owen Sound |
| 11. Brockville | 27. Stratford |
| 12. Kingston | 28. Woodstock |
| 13. Belleville | 29. London |
| 14. Lindsay | 30. St. Thomas |
| 15. Peterborough | 31. Sarnia |
| 16. Oshawa | 32. Chatham |
| | 33. Windsor |



branch locations

CMHA across the province

Community Mental Health Care encompasses a wide variety of programs and services designed to meet individual and local needs. These programs are delivered by CMHA branches and include case management, crisis services, supportive housing, court diversion and employment supports.

Barrie-Simcoe County Branch

705-726-5033 (Barrie)
www.cmhasim.on.ca

Brant County Branch

519-752-2998 (Brantford)
www.cmhabrant.on.ca

Champlain East

613-933-5845 (Cornwall)
www.cmha-east.on.ca

Chatham-Kent Branch

519-436-6100 (Chatham)
www.cmhakent.com

Cochrane Timiskaming Branch

705-267-8100 (Timmins)
www.cmhact.ca

Durham Region Branch

905-436-8760 (Oshawa)
www.cmhadurham.org

Elgin County Branch

519-633-1781 (St. Thomas)
www.cmhaelgin.ca

Fort Frances Branch

807-274-2347 (Fort Frances)
www.cmhaff.ca

Grand River Branch

519-597-6650 (Guelph)
www.cmhagrb.on.ca

Grey Bruce Branch

519-371-3642 (Owen Sound)
www.cmhagb.org

Haldimand-Norfolk Branch

519-428-2380 (Simcoe)
www.cmha-hn.ca

Halton Region Branch

519-428-2380 (Milton)
www.cmha-halton.ca

Hamilton Branch

905-521-0090 (Hamilton)
www.cmhahamilton.ca

Hastings & Prince Edward Counties Branch

613-969-8874 (Belleville)
www.hastings-cmha.org

Huron-Perth Branch

519-273-1391 (Stratford)
www.cmha-hp.on.ca

Kawartha Lakes Branch

705-328-2704 (Lindsay)
www.cmhakawarthalakes.ca



branch locations cont'd

Kenora Branch

807-468-1838 (Kenora)

www.cmhak.on.ca

Kingston Branch

613-549-7027 (Kingston)

www.kingston.org/cmha

Lambton County Branch

519-337-5411 (Sarnia)

www.cmhalambton.org

Leeds-Grenville Branch

613-345-0950 (Brockville)

www.cmha-lg.ca

London-Middlesex Branch

519-434-9191 (London)

www.london.cmha.ca

Niagara Branch

905-641-5222 (St. Catharines)

www.cmhaniagara.ca

Nipissing Regional Branch

705-474-1299 (North Bay)

www.cmhanipissing.on.ca

Ottawa Branch

613-737-7791 (Ottawa)

www.cmhaottawa.ca

Oxford County Branch

519-539-8055 (Woodstock)

www.cmhaoxford.on.ca

Peel Branch

905-451-2123 (Brampton)

www.cmhapeel.ca

Peterborough Branch

705-748-6711 (Peterborough)

www.peterborough.cmha.on.ca

Sault Ste. Marie Branch

705-759-0458 (Sault Ste. Marie)

www.cmhassm.com

Sudbury-Manitoulin Branch

705-675-7252 (Sudbury)

www.cmha.sudbury.on.ca

Thunder Bay Branch

807-345-5564 (Thunder Bay)

www.cmha-tb.on.ca

Toronto Branch

416-789-7957 (Toronto)

www.toronto.cmha.ca

Windsor-Essex County Branch

519-255-7440 (Windsor)

www.cmha-wecb.on.ca

York Region Branch

905-841-3977 (Newmarket)

www.cmha-yr.on.ca



contact information

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CANADIAN MENTAL
HEALTH ASSOCIATION, ONTARIO
ASSOCIATION CANADIENNE
POUR LA SANTÉ MENTALE, ONTARIO

Fact: 90% of people who commit suicide have a diagnosable mental illness;
there are approximately 4,000 suicides in Canada each year (*CMA Report, 2008*)