



Association canadienne
pour la santé mentale
La santé mentale pour tous

CMHA'S 30 LOCAL BRANCHES ENDORSE MENTAL HEALTH AND ADDICTIONS LEADERSHIP ADVISORY COUNCIL'S SUPPORTIVE HOUSING STRATEGY

The Executive Directors and Chief Executive Officers of the 30 Canadian Mental Health Association (CMHA) branches in Ontario wish to commend the Mental Health and Addictions Leadership Advisory Council (the Council) for its well-researched Annual Report. Collectively, CMHAs provide more than 25 percent of all community mental health-funded housing units in the province. It's with that perspective in mind that we are pleased to comment on the Council's recommendations for a Supportive Housing Strategy for mental health and addictions in Ontario.

We commend the Council's goal of an additional 30,000 supportive housing units across the province over the next 10 years. As housing service providers with deep connections to our local communities, we see this target as a minimum requirement for Ontario. We envision the target as a starting point in the conversation on supportive housing rather than an end goal. We know from our experience that even with 30,000 additional supportive housing units over a decade, the demand for supportive housing will continue to exceed supply, making it highly unlikely for the province to reach its goal of eliminating homelessness within 10 years.

With respect to the implementation of the Supportive Housing Strategy, we offer the following recommendations:

1. We support a coordinated approach that will engage Local Health Integration Networks (LHINs) and the Ministry of Housing's Municipal Service Managers to work together in developing multi-year implementation plans for their communities. CMHAs across the province can provide critical insight into this local planning process as we have a proven track-record of leadership in evidence-based programming and best practices in supportive housing programs. We have developed

Investing in Supportive Housing Creates Savings

We commend the Council for its commitment to supportive housing for Ontarians with mental health and addictions needs. Investing in supportive housing creates savings across the health care, social services and justice systems. As evidenced by the *At Home/Chez Soi* national housing study led by the Mental Health Commission of Canada, every \$10 invested in supportive housing resulted in an average savings of \$21.72. These cost-offsets are primarily through reduced psychiatric hospital stays, general hospital stays, home and office visits with community-based providers, jail/prison incarcerations, police contacts, emergency room visits, and stays in crisis housing settings and in single room accommodations with support services. Investing in supportive housing and focusing on the housing first approach is the first step to recovery from mental illnesses and addictions.

extensive partnerships within our local communities and our expertise would be an integral part of the local LHINs-Service Manager planning framework.

2. Local implementation plans for supportive housing must be flexible and suit local geographic realities, especially in rural and northern communities. Local community mental health and addictions service providers need sufficient flexibility and latitude to re-purpose existing funding allocation in order to upgrade aging buildings or buy new ones. For example, CMHA branches in northern and rural communities own properties that were originally purchased as group homes. It would be preferable for LHINs to provide sufficiently flexible funding policies that



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Mental Health and Addictions Leadership Advisory Council Leads System Transformation

In 2014, the Ontario government appointed the Mental Health and Addictions Leadership Advisory Council ("the Council"), a 20-person advisory group composed of representatives from across the mental health and addictions sector, to support the implementation of *Open Minds, Healthy Minds: Ontario's Comprehensive Mental Health and Addictions Strategy*. CMHA Ontario is pleased to be a member of the Council.

A key objective of the Council is to develop mechanisms that facilitate high quality, person-centred care as articulated in the *Excellent Care for All Act (2010)*. The Council has been working to ensure that quality improvement is the foundation upon which to build the future of the mental health and addictions system in Ontario.

The Council created a number of working groups to develop cross-sectoral advice to government on how to begin to solve challenges in the system. CMHA Ontario has provided leadership for advancing the quality agenda as co-chair of the Council's System Alignment and Capacity Working Group. Under the leadership of this working group, CMHA Ontario has co-led several key initiatives: the development of core mental health and addictions services for Ontarians, including access to psychotherapy; and, development of a data and performance measurement strategy for the sector. In addition, CMHA Ontario along with other collaborators has participated in the Council's Supportive Housing Working Group.

CMHA Ontario fully supports the work of the Council and we are pleased to endorse key recommendations from the Council in our pre-budget submission.

permit quick decision-making to allow for the sale of old buildings and repurpose the funds for rent supplements and flexible supports. Our CMHA Middlesex branch has successfully implemented this approach and re-purposed existing homes for special care funding into rent supplements and flexible supports.

3. Make available more capital funds for rural and northern communities where the housing supply situation is extremely dire. The chronic lack of existing housing options in these areas leaves service providers no choice but to have purpose-built housing that requires the availability of capital funds.
4. We strongly support the inclusion of core principles in the Supportive Housing Strategy that promote ensuring security of tenure and tenant choice. In viewing the current need for supportive housing, an often-forgotten population are those who are experiencing mental health and addictions issues and who are currently precariously housed in community social housing units. For these individuals, their tenure is extremely insecure. Without adequate mental health and addictions supports, eviction is a needless outcome foreseen for many. A 2016 report on Toronto Community Housing estimates that in Toronto alone nearly 24,000 households include at least one person with a mental illness, and an estimated 9,000 tenants have a serious and persistent mental illness. Without adequate supports, many of these tenants risk losing their tenancy. Many more such tenants are living in communities across Ontario.
5. People with mental health and addictions conditions who are involved with the justice system face formidable barriers to housing. Many CMHA branches operate a number of safe beds, which is a short-term emergency shelter program for people who have had interactions with the justice system. Other CMHA branches, such as Sudbury-Manitoulin, offer longer-term support by providing rent supplements for housing units for people involved with the justice system. These types of safe beds programs and supportive housing programs for individuals involved with the justice system need expansion with additional dedicated funding.