

Roadmap to wellness: a plan to build Ontario's mental health and addictions system

Learn about Ontario's new plan for the mental health and addictions system.

Mental Health and Addictions – Our Vision:

A province where all Ontarians have access to high-quality, easily accessible mental health and addictions support throughout their lifetime, where and when they need it.

Letters

Letter from Doug Ford, Premier

Every year, more than one million people in Ontario experience mental health and addictions challenges. Most of us know a friend, a family member or a colleague who struggles with these challenges. Our government committed to fixing our broken and fragmented mental health care system so patients can access the quality care they need and deserve.

That's why our government is taking mental health and addictions as seriously as any health issue. We're investing \$3.8 billion over 10 years to develop and implement a comprehensive and connected mental health and addictions system for Ontarians.

Last June, I created the position of Associate Minister of Mental Health and Addictions in my Cabinet and appointed Associate Minister Michael Tibollo to advance this important work for our government. He has been working closely with our Minister of Health, Christine Elliott, to address gaps in Ontario's mental health and addictions system.

As a result of their exceptional work, I am pleased to deliver our government's new comprehensive strategy — **Roadmap to Wellness: A Plan to Build Ontario's Mental Health and Addictions System**.

This strategy was developed from consultations with hundreds of mental health and addictions organizations, frontline staff, hospitals, advocates, experts and people with lived experience. **Roadmap to Wellness: A Plan to Build Ontario's Mental Health and Addictions System** will help improve mental health services for communities across Ontario, and support patients and families living with mental health and addictions challenges.

The people of Ontario are, and always will be, our government's top priority. We are committed to creating an Ontario where everyone is fully supported in their journey toward mental wellness. We will continue to listen to the people who are impacted the most as we implement our new plan. Because mental health is health.

Doug Ford

Premier

Letter from Christine Elliott, Deputy Premier and Minister of Health

Every day, Ontarians struggle to find the help they need when experiencing a mental health or addictions challenge. Patients wait too long for urgent care. Services are unequal and inconsistent, with too many gaps.

These problems have challenged Ontario's mental health and addictions system for decades.

As part of my work on the board of directors of Durham Mental Health, I saw firsthand the gaps in care that leave people on waitlists, and the struggles Ontarians faced trying to navigate a complex system.

In 2010, I worked on the all-party Select Committee on Mental Health and Addictions. We listened to testimony from over 230 people and received more than 300 submissions. These stories led to 23 recommendations, including the creation of a central engine to design, manage and coordinate the system.

Later, as the province's first patient ombudsman, Ontarians shared with me their stories of feeling lost in a system defined by its complexity. Feeling like there was nowhere else to go, they turned to over-crowded hospital emergency departments for care.

Now, as Minister of Health, I'm hearing about the changes Ontarians expect to see in our province's mental health and addictions system. At our 19 engagement sessions, we heard that patients and families are being left to navigate a confusing system on their own as they wait too long to receive the services they need.

While they span decades, these experiences consistently make clear Ontarians' struggles with the mental health and addictions system. We can no longer accept the status quo.

With the introduction of **Roadmap to Wellness: A Plan to Build Ontario's Mental Health and Addictions System**, Ontario is turning a chapter. Built on four pillars, this roadmap lays out a clear path toward meaningful improvements to the care Ontarians receive, enabled by the historic \$3.8 billion over 10 years our government will invest to expand mental health and addictions services.

In December 2019, Ontario finally established the central engine first recommended nearly 10 years earlier with the creation of the Mental Health and Addictions Centre of Excellence within Ontario Health. This new centre will for the first time in Ontario's history drive the broad, systemic transformation necessary to enable significant improvements to the quality and availability of services. It will serve as the strong foundation on which **Roadmap to Wellness** is built.

Creating a system of mental health and addictions that Ontarians can rely on will take time. Working together, we will build a system that meets the needs of all Ontarians.

Christine Elliott

Deputy Premier and Minister of Health

Letter from Michael Tibollo, Associate Minister for Mental Health and Addictions

In Ontario, many people are affected by mental illness or addictions. Our government made a commitment to do something about it and I am pleased to have been tasked by Premier Ford to work with Minister Elliott to find solutions.

Prior to taking office, I spent nearly a decade as chair of a residential therapeutic community, where I became a certified addictions counsellor. I worked with individuals convicted as drug dealers and users, those damaged by their addiction and their families. I remember and pray for those who did not survive overdose and their loved ones.

I've seen the control drugs can have and the harm it causes. I've helped develop strategies to overcome dependence and put people on a path toward employment or education.

In emergency departments, I've seen hallway health care. I've seen overdoses, psychotic episodes, youth struggling with suicidal thoughts and others needing help being turned away until the process is repeated. I've seen police officers spend hours in emergency rooms waiting with people experiencing a crisis.

I visited remote communities where suicide is too often a tragic end to suffering.

I've seen people turn their lives around with the help of treatment services, their families' love, support of their peers and their own determination. But Ontarians know it can be hard to access critical mental health and addictions services.

Ontarians have faced these challenges for too long and want action. Last year, I started going across the province to hear from Ontarians about building better mental health and addictions services. From large cities to remote communities in the far North, I spoke with grassroots organizations, health care providers on the frontlines, experts and advocates, first responders, Indigenous leaders, as well as people with lived experience, their families and caregivers.

Roadmap to Wellness moves us in the right direction. We're fulfilling our commitment to build a connected mental health and addictions system. This plan is client-centred, data-driven, evidence-based and ensures Ontarians will be able to access high-quality services, where and when they need them.

As we implement this roadmap, we will continue listening and collaborating with our various partners to ensure this plan works for all Ontarians.

I am pleased that we embarked on this journey to give the people of Ontario a system that is accessible, high quality and can meet the demands of our communities.

Michael Tibollo

Associate Minister for Mental Health and Addictions

Introduction

Every year, more than one million Ontarians experience a mental health or addiction issue^[1]. This can have a serious impact on their quality of life and that of everyone around them. It can reduce their ability to go to school, make a living or raise a family. With 500,000 Canadians per week calling in sick because of mental health and addictions issues, there are clear consequences for the province's economic productivity^[2]. By way of reference, the economic burden of mental health issues in Canada can be upwards of \$50 billion per year^[3].

Over the course of a year of extensive consultations in communities across Ontario, the province heard that there are several key challenges facing mental health and addictions services.

These include:

- long wait times;
- little understanding of what services are available and where to find them;
- uneven service quality between providers and regions;
- fragmentation and poor coordination;
- lack of evidence-based funding; and
- absence of data, which limits effective oversight and accountability.

Currently in Ontario, services are disconnected and fragmented with significant barriers to access. This leads to confusion and difficulty navigating mental health and addictions services. The result is a system in which people looking for support often struggle to find help, often turning to emergency departments, when the fact is that more appropriate and effective care can be provided in community settings. In addition, though the province currently invests more than \$4 billion each year in mental health and addictions services and supports, the quality of service is inconsistent, and there is little understanding of what these significant investments achieve.

These challenges confirm what was reported by the 2010 Select Committee on Mental Health and Addictions (http://mdsc.ca/documents/Publications/Final%20Report_Select%20Report%20on%20Mental%20Health%20and%20Addict%20ENG%20Aug2010.pdf) . Through extensive consultations with Ontarians, the select committee learned that wait times are too long and services are disconnected and uncoordinated.

Since that time, and despite the hard work and commitment of the province's frontline providers, the province has failed to build a mental health and addictions system that connects people with comprehensive care in their communities — despite the fact that the urgency to do so has grown. As wait times get longer, care options remain disconnected and substance use issues, including and especially opioids, get worse.

All told, there is a clear and pressing case for action.

With the launch and implementation of **Roadmap to Wellness**, Ontario will develop a mental health and addictions system that makes high-quality services available for people throughout their lifetime, where and when they need them.

As the name implies, **Roadmap to Wellness** is a guide to building a comprehensive and connected mental health and addictions system that is sensitive to the needs of Ontario's diverse population. It will be a system that people find easier to navigate and where they can access the right level of care to meet their needs. Ontarians will no longer feel lost or unsupported.

To enable this plan, Ontario is investing \$3.8 billion over 10 years to expand existing programs and fill gaps in care with innovative solutions and services. This includes a \$1.9-billion investment from the province, as well as a \$1.9-billion investment from the shared priorities funding agreement with the federal government.

Roadmap to Wellness will benefit all Ontarians, including children and youth, Indigenous people, Francophones, first responders, students, individuals who are justice-involved and people experiencing homelessness. It will enable a system that can more effectively respond to everyone's needs, whether they have a mild to moderate mental health issue or are challenged by a serious and significant illness.

Implementing this roadmap will require a whole-of-government approach, with investments in services provided by partner ministries, such as Children, Community and Social Services, Municipal Affairs and Housing, Solicitor General, Education and Indigenous Affairs, among others. It will also require consistent and ongoing communication between the many mental health and addictions partners and the children, youth, adults and seniors they serve to ensure their needs are being met, today and well into the future.

Building a comprehensive and connected mental health and addictions system will take time, but it is the right thing to do. Everyone in Ontario deserves the highest standard of mental health and addictions care in Ontario. There is no health without mental health.

Listening to clients, caregivers and experts

Roadmap to Wellness is a plan built from the ground up. Over the last year, the government has had conversations with hundreds of Ontarians in communities such as Barrie, Ottawa, London, North Bay, Kitchener-Waterloo, Niagara, Windsor, Brockville, Thunder Bay, Toronto and the Greater Toronto Area. Further conversations were held in Guelph, Sarnia, Goderich, Sandy Lake and Sioux Lookout. The discussions included grassroots community organizations, health care providers on the frontline, health system leaders, experts and advocates, as well as people with lived experience of mental health and addiction issues, their families and caregivers. People with experience and expertise in Indigenous mental health and addictions, municipalities, associations and justice system representatives also provided input. Engagement with Indigenous communities and other priority groups will continue.

The discussions revealed that Ontarians are supportive of the foundational work needed to support an efficient and effective mental health and addictions system, but are also serious about the urgent need to invest in services and supports across the province. There was broad consensus on three key findings:

- **Upstream investments** in areas such as early intervention, traditionally delivered by community organizations, have one of the highest rates of return of any mental health spending and should be a significant area of focus.
- It is difficult to achieve the integration of primary and acute care, and improve client pathways, if the community sector lags in clinical and data capacity.
- Investing in community-based services is the best way to achieve success in ending hallway health care, as these investments help divert people from the hospital.

The clear takeaway from the consultations was the need to invest in community-based mental health and addictions services. Most participants also agreed that the system is too fragmented and would benefit from greater integration to improve access and ensure greater alignment with primary and acute care delivery partners. The province is committed to continuous and ongoing engagement with sector partners, clinical researchers, caregivers and people with lived experience.

System challenges

Consultations confirmed that there are several key challenges facing the system. These are:

- **Wait times:** Demand for mental health and addictions services exceeds available capacity, often resulting in long wait times for services.
- **Barriers to access:** Ontarians do not know what services exist or where and how to get help.
- **Fragmentation:** Poor coordination across the system results in inefficiencies and poor client and family experience, as people struggle to navigate between services.
- **Funding:** Some of today's funding is based on historical arrangements and is not evidence-based.
- **Uneven quality:** Consistency and quality of services vary from provider to provider, and between regions.
- **Lack of data:** Ontarians, service providers and system planners do not have access to the information they need, limiting effective oversight and accountability.

A plan to build Ontario's mental health and addictions system

The new Mental Health and Addictions Centre of Excellence within Ontario Health will serve as the foundation on which **Roadmap to Wellness** is built and will enable and drive the effective implementation of the plan's four pillars – areas of focus that, executed together, will support the delivery of the services people need, where and when they need them. These pillars are:

- improving quality;
- expanding existing services;
- implementing innovative solutions; and
- improving access.

These pillars and the foundation on which they are built are further described below.

A strong foundation: establishing the Mental Health and Addictions Centre of Excellence

As identified through extensive consultations, Ontario's mental health and addictions system is currently challenged by fragmentation with poor coordination, uneven quality between providers and regions, and a lack of data to help plan and improve accountability.

In response, the new Mental Health and Addictions Centre of Excellence within Ontario Health will serve as the foundation on which **Roadmap to Wellness** is built and will be responsible for system management, coordination of services and driving meaningful quality improvements for more consistent patient experiences across the province. To do so, and responding to recommendations made in 2010 by the Select Committee on Mental Health and Addictions (http://mdsc.ca/documents/Publications/Final%20Report_Select%20Report%20on%20Mental%20Health%20and%20Addict%20ENG%20Aug2010.pdf) , this new Mental Health and Addictions Centre of Excellence will:

- establish a central point of accountability and oversight for mental health and addictions care;
- be responsible for standardizing and monitoring the quality and delivery of evidence-based services and clinical care across the province to provide a better and more consistent patient experience;
- create common performance indicators and shared infrastructure to disseminate evidence and set service expectations; and
- provide support and resources to Ontario Health Teams as they use the core services framework to connect patients to the different types of mental health and addictions care they need and help them navigate the complex system.

As the new Mental Health and Addictions Centre of Excellence standardizes and better organizes the system, it will also be responsible for driving the effective implementation of the roadmap's four pillars.

Supporting Ontarians across the lifespan

Ontario's new mental health and addictions plan will provide better access to high-quality, evidence-based services and supports across a person's entire lifespan.



From left to right, the visual represents the 'lifespan', from young children, to adolescents, adults, and seniors.

Ontario's new mental health and addictions plan will provide better access to high-quality, evidence-based supports and services across a person's entire lifespan.

Pillar one – improving quality: enhancing services across Ontario

Core services framework

As a first step toward building a high-quality system, and in response to recommendations made by the 2010 Select Committee on Mental Health and Addictions (http://mdsc.ca/documents/Publications/Final%20Report_Select%20Report%20on%20Mental%20Health%20and%20Addict%20ENG%20Aug2010.pdf) , Ontario will develop a new core services framework. This framework will identify and define the core provincially-funded mental health and addictions services that will be made available over time to Ontarians, regardless of where they live.

Many of Ontario's community mental health and addictions services, and the provincial systems that track them, evolved organically at the local level in response to factors such as deinstitutionalization and the closing of many psychiatric hospitals and beds in the 1960s and 1970s. As a result, the system is fragmented, with more than 600 community-based mental health and addictions organizations providing services that vary in availability and quality.

Core service standards will also be developed to set expectations for providers on how each core service should be delivered so that Ontarians can be assured of a consistent experience no matter where they go. These standards will be embedded in service provider accountability agreements and will drive quality improvement activities.

The Mental Health and Addictions Centre of Excellence will work with people with lived experience, service providers and clinical researchers to validate and define the evidence-based services, such as peer support, needed to respond to the mental health and addictions needs of Ontarians. This new framework will leverage existing work on child and youth mental health core services.

Advantages of a core services framework

Clearly defined publicly funded mental health and addictions core services will make it easier for Ontarians to understand their care options and get help.

A **levels of need** approach – as set out in the provincial core services framework – makes it easier to link together providers across community, primary care and acute care settings.

Tailoring an evidence-based screening and referral tool to the core services framework will enable Ontarians to be matched to the right core service more quickly.

This framework makes it possible to target investments to meet gaps and ensure equity of access.

With service standards, providers and Ontarians will know what is expected in terms of service delivery.

Proposed core services based on mental health and addictions needs

People with **severe or complex needs may need** highly specialized, intensive services. The mental health and addictions needs of this population are the lowest in volume and have the highest service cost.

Proposed core services for this population may include:

- emergency and in-patient psychiatric services;
- forensic services;
- psychotherapy services;
- withdrawal management;
- peer support; and
- family support.

People with **moderate to severe need may need** specialized and intensive services. The mental health and addictions needs of this population are higher in volume and services are less costly than for people with severe or complex needs.

Proposed core services for this population may include:

- assertive community treatment;
- early psychosis intervention;
- child and youth intensive treatment;
- specialized consultation, assessment and treatment;
- addictions treatment;
- withdrawal management;
- case management;
- crisis response;
- court supports or diversion;
- supportive housing;
- counselling and therapy (including psychotherapy); and
- peer and family support.

People with **moderate need may need** services that are targeted to people with moderate mental health and addictions needs. The mental health and addictions needs of this population are higher in volume and services are less costly than for people with moderate to severe needs.

Proposed core services for this population may include:

- addictions treatment;
- supported employment;
- court supports or diversion;
- supportive housing;
- case management;
- withdrawal management;
- crisis response and support;
- counselling and therapy (including psychotherapy);
- peer and family support;
- brief intervention;

- specialized consultation; and
- assessment and treatment.

People with **low need may need** early intervention and self management services and supports. The mental health and addictions needs of this population are higher in volume and services are less costly than for people with moderate need.

Proposed core services for this population may include:

- peer support;
- family supports;
- counselling and therapy (including psychotherapy);
- brief intervention; and
- targeted prevention.

The **general population may need** population-based health promotion and prevention supports and services. The mental health and addictions needs of this population are the highest in volume and the least costly.

The proposed core service for this population may include prevention and promotion.

The proposed core services are provided in a range of locations, including through public health, in schools, primary care, community mental health and addictions agencies, hospitals, and some may also be provided virtually. Over time, some of these services could align with Ontario Health Teams.

Core services will be defined and validated with input and collaboration from system partners, clinical researchers, people with lived experience and families.

Driving quality improvements through the new Mental Health and Addictions Centre of Excellence

The new Mental Health and Addictions Centre of Excellence will serve as the centrepiece of Ontario's approach to driving quality and enabling accountability in the mental health and addictions system. The result will be real and significant improvements to system performance and to the quality of mental health and addictions care that Ontarians receive.

Leveraging best practice expertise from the former Cancer Care Ontario and Health Quality Ontario — including system coordination, data-driven planning and development of standards — the Mental Health and Addictions Centre of Excellence will leverage the new core services framework that will define, standardize and provide clear lines of sight into the system. As a result, the Mental Health and Addictions Centre of Excellence will be able to identify service gaps, establish performance metrics, define the link between services and outcomes, set service-level indicators, set expectations-related outcomes and identify the data and digital health needs of service providers. The Mental Health and Addictions Centre of Excellence will work closely with system design experts, service providers, people with lived experience, families and clinical researchers to translate their extensive research into practice.

This approach is designed to ensure equity in the quality and delivery of mental health and addictions services across Ontario, while also supporting evidence-based decisions and improved accountability to ensure a better and more consistent client experience.

Cancer Care Ontario: breaking down siloes to improve care

In the early 2000s, Ontario's cancer care system mirrored many of the same issues currently challenging the province's mental health and addictions system: a fragmented service system, poor client and service data and system-level information, long wait times and uneven quality. Today, having launched and successfully implemented a comprehensive overhaul of the province's cancer care system, Ontario's cancer survival rates are among the best in the world. This initiative was led and implemented by Cancer Care Ontario, a revolutionary provincial agency that is responsible for driving long-lasting quality improvements to the care Ontarians receive.

Between 2001 and 2005, Ontario responded to the issues challenging the cancer care system in two ways:

- Cancer Care Ontario and its affiliated Cancer Quality Council built a quality infrastructure, consisting of standards, quality and performance measurement and management, public reporting and quality assurance and improvement mechanisms.
- Supported by Cancer Care Ontario's system capacity planning, the province made targeted investments to fill critical service gaps.

As a result, Ontario has seen dramatic improvements in cancer services:

- **wait times have significantly decreased.** The number of patients that were treated within the target time between the day a patient elects to have cancer surgery to the date of surgery improved from 71 per cent in 2008 to 88 per cent in 2018 growing to 91 per cent between July and September 2019. (Measuring Up, 2019, Technical Supplement)
- **quality of care has significantly improved.** The number of colorectal cancer surgeries that are performed within best practice quality guidelines has improved from 74 per cent in 2005 to 94 per cent in 2017, exceeding the target of 90 per cent after an evidence-based guideline was released in 2008. (Lymph Node Sampling in Colon Cancer Surgery, CSQI, 2019)
- **more people are surviving and living with cancer.** As of 2013, the overall five-year cancer survival rate was 65 per cent, up from approximately 48 per cent in the mid-1980s. (Ontario Cancer Plan 5)

These impacts on the cancer system, and many others, were possible because of Cancer Care Ontario's quality-based approach. Critical to its success was the identification of a focused set of priorities, based on evidence and supported by a comprehensive set of metrics, strong clinical leadership and clear accountabilities with funding tied to expected outcomes. The approach also included strong system plans focused on building infrastructure, capacity and quality improvement. The success of this approach has since been successfully applied to renal care in Ontario, resulting in greater system equity and more home-based services.

Today, as the province seeks to reform the mental health and addictions system, the same strategies will be tailored to the mental health and addictions system to drive a quality agenda to achieve meaningful improvements. The Mental Health and Addictions Centre of Excellence will use Ontario Health's combined expertise, now including Cancer Care Ontario, to drive demonstratable improvements for people living with mental health and addiction conditions. Of particular importance for the Mental Health and Addictions Centre of Excellence is to understand the unique needs of Indigenous communities to address the inequities, variations and disparities experienced by Indigenous people in Ontario. The Mental Health and Addictions Centre of Excellence will use collaborative partnerships and greater integration of mental health and addictions services, all in a way that promotes health equity and improved access to high-quality services, as Cancer Care Ontario did with cancer services – recognizing the unique challenges of the mental health and addictions system.

Driving quality through data and digital

Data will play a critical role in driving both service quality and accountability. Together, the Ministry of Health and Ontario Health, through the Mental Health and Addictions Centre of Excellence, will advance a data and digital initiative for mental health and addictions to make it easier to deliver better care, report on performance and track the value of investments. The key components of this work include:

- a standard set of provincial data definitions and elements for mental health and addictions that will ensure that collection of data across the sector and lifespan is standardized;
- a mental health and addictions data repository with secure linking of data so that information can be collected and shared among service providers and between care settings;
- Real-time access to a full range of digital health records for clients and providers; and
- advanced data analytics and reporting.

As a result of these initiatives, it is expected that people will not have to repeat their story multiple times, and they will be better understood and supported as they receive mental health and addictions services. Frontline providers will have access to a complete picture of their clients' health journey. The government, and Ontario Health, including its Mental Health and Addictions Centre of Excellence, will benefit from enhanced data collection for performance measurement and accountability across the continuum of care.

As client confidentiality is paramount, privacy, security and data system integrity are a top priority. The province will ensure that all health records are secure and protected and that clients have clear opportunities to give informed consent about how they are used and shared.

Pillar two – expanding existing services: investing in priority areas

To enable **Roadmap to Wellness**, Ontario is investing \$3.8 billion over 10 years to expand existing services and create innovative solutions, including immediate investments to fill urgent service gaps.

A whole-of-government approach will be critical to the success of this roadmap. As such, the Ministry of Health and the Mental Health and Addictions Centre of Excellence will continue to work closely and collaboratively with partner ministries to support and reinforce the many entry points to the system and the populations served.

Guided by the core services framework, which provides an evidence-based approach to prioritize investments, and supported by the Mental Health and Addictions Centre of Excellence, Ontario will continue to invest in the expansion of priority programs, including in critical service gaps across the continuum of need from prevention to intensive and acute mental health and addictions services.

Child and youth mental health

Early identification and intervention lead to better health outcomes, improved school achievement, contributions to workforce and society, and cost-savings to the health care, justice and social service systems. In light of this, the province is committed to expanding frontline child and youth community mental health services for all ages and is investigating innovative approaches to health care delivery. This includes enhancing services at the 10 youth wellness hub demonstration sites currently operating in Ontario. These serve as "one-stop shops" for youth aged 12 to 25, offering mental health and addictions services, primary care, education and employment services, among others.

Mental health and justice services

People with mental health and addictions challenges are over-represented in Ontario's justice and correctional systems. By providing an integrated continuum of services and supports for mental health and justice clients, Ontario will help reduce the likelihood of individuals re-offending, lower incarcerations and hospitalizations, and promote recovery and independence in the community. Ontario will make enhancements to safe beds, including access to addictions and withdrawal management services, as the province also expands mobile crisis teams, a new model of cooperation between police and mental health experts.

Mental health supports for police and correctional staff

Through the Ministry of the Solicitor General, Ontario is investing in enhanced mental health and addictions training for both frontline correctional staff and police so that they may better identify and serve individuals with mental health and addictions issues. This includes a focus on de-escalation strategies that provide frontline police officers with options for responding to people in distress.

Work to develop this training is currently underway and is being done in partnership with academics, clinicians and mental health and addictions experts.

To reduce the impact of operational stressors, in April 2019 Ontario started to implement multiple programs to support the mental wellness of correctional staff. This includes providing mental health leadership training to over 1,000 managers across the province, as well as providing frontline staff with training through the stress management training system program and the mindfulness-based wellness and resilience program. To embed these approaches into the workplace, facilitator/teacher training programs have also been developed to allow these programs to be self-sustaining and continue over the long term.

Supporting Ontario's first responders

First responders are frontline workers who respond to 9-1-1 and other emergency calls. First responders include police, firefighters, paramedics, nurses, emergency dispatch, emergency medical attendants, correctional officers, and probation and parole officers. First responders have unique needs when it comes to mental health and addictions services due to work-related stress or trauma. Service-specific supports can be effective, given the unique culture of each occupation.

As part of an ongoing commitment to support those that support Ontarians when they need it most, In early 2019, \$18.3 million in new funding was announced in early 2019 to support those affected by mental health and addictions challenges in the justice sector. This funding included:

- direct support for corrections staff to address operational stress injuries and other mental health challenges;
- new mobile crisis teams that will help police officers and other first responders manage sensitive situations when assisting people in distress due to a mental health or addictions issue;
- de-escalation tools and training for police officers to better respond to interactions with people with mental health and addictions issues; and
- training for corrections staff to help manage stressful situations with inmates who have mental health and addictions issues.

Building on these initial investments, and guided by the core services framework, Ontario will engage with all first responders to better understand their unique needs and stressors and identify appropriate services to support their health and wellness.

Supportive housing

Supportive housing investments will help provide housing and support for formerly homeless and low- and moderate-income people living with mental health and addictions challenges. These investments in supportive housing will help to alleviate pressures on acute care settings by delivering housing and support services for people living with mental health and addictions challenges as they transition from hospital to the community.

Philippe: a supportive housing story

Philippe is a 44-year-old man living in Nepean. He moved there in the spring of 2014 to be closer to his extended family two years after an accident on the construction site where he was working left him coping with chronic back pain, limited mobility and an acquired brain injury. To cope with his pain, Philippe began to use alcohol and prescription drugs. Within 18 months of the accident, Philippe's business filed for bankruptcy and he and his wife separated shortly thereafter. In 2016, he became homeless after not paying his rent for several months. His homelessness and the degradation of his relationship with his son led to increased alcohol and drug abuse, and the loss of much of his remaining informal support network who had grown frustrated with his addictions challenges.

Philippe has participated in an addictions supportive housing program since 2017. He was connected to the program by a volunteer at a local Out of the Cold program who referred him to the intake worker. The program worker is providing him with individual support and he's participating in several peer support groups to help learn how to reduce his drug and alcohol use. His program worker has also referred him to a Francophone psychologist who is working with him to develop strategies to control his anger and improve his impulse control, which had worsened over time. Philippe has also made several decisions intended to protect his housing, putting into place the direct payment of his rent and working with a volunteer to develop a monthly budget.

Now, Philippe is working on developing a stronger relationship with his son and re-connecting with members of his family. He's also participating in a job training program to develop new skills that will enable him to return to work and to find a job that he can balance with his physical and mental health requirements.

Services for Indigenous people and communities

Ontario will continue to work collaboratively with Indigenous partners and communities to co-develop programs and services that will enable Indigenous clients to access high-quality, culturally appropriate mental health, addictions and well-being services across the continuum of care. This will result in improved mental health and wellness for Indigenous people, families and communities.

As Ontario continues to invest in expanding mental health, addictions and well-being services for Indigenous communities, there will be a focus on supporting Indigenous-led initiatives that are community-driven and use a holistic approach to address critical areas of need. These areas include the intersections of mental health with youth justice, community safety, education and child welfare.

Co-developing programs for Indigenous communities

In 2020, Ontario will continue to invest in additional resources to help expand access to services along the continuum of care, including culture-based services for Indigenous people, families and communities. There will be funding for early identification and youth life promotion initiatives that support Indigenous well-being as Ontario works with communities to expand mental health supports for Indigenous learners. Funding will also support community-based mental health services for Indigenous women and girls and specialized supports for Indigenous survivors of human trafficking. Resources will also be dedicated to enabling better service coordination for Indigenous people and families.

Services for Ontario's Francophone community

Through **Roadmap to Wellness**, Ontario will expand French-language mental health and addictions services through targeted investments in French-language services and broader investments across the province. As the province expands French-language services, it will be critical to understand and respond to the specific needs of Francophones throughout the implementation of this plan, including the development of the core services framework. Ontario will continue to engage with the Francophone community as it implements the roadmap.

Pillar three – implementing innovative solutions: filling gaps in care

Ontario recognizes that there are gaps in care that require urgent attention. In response, **Roadmap to Wellness** will implement innovative solutions that expand the availability of mental health and addictions programs and services in communities across Ontario, enabled by the \$3.8 billion that the province is investing over 10 years.

Ontario Structured Psychotherapy Program: building lifelong skills for mental wellness

In 2020, Ontario will launch the Ontario Structured Psychotherapy program, that provides access to evidence-based, cognitive behavioural therapy (CBT) for people living with depression and anxiety. CBT is recognized as an effective intervention for depression and anxiety, the most common mental health issues to impact Ontarians. It builds resilience by equipping people with the lifelong skills they need to manage their mental health and overall well-being. It can lower the number of emergency department visits and admissions in Ontario, contributing to the broader provincial objective of ending hallway health care.

The Ontario Structured Psychotherapy program will be the first of its kind in Canada in terms of its scope, scale, focus on quality and public reporting on outcomes. Funded like OHIP, there will be no out-of-pocket costs for clients who participate in the program.

The program will be offered in various forms, that best meet a client's needs, including telephone coaching and clinical counselling, psychoeducational groups, internet-based cognitive behavioural therapy and face-to-face group and individual counselling. In-person sessions are already available and will be scaled up. Enhanced telephone coaching will be available in 2020.

Ontario will scale the Ontario Structured Psychotherapy program to expand access for Ontarians to receive the right level of service at the right time in the right place. This will help ensure that higher-intensity services are available for people with greater needs as depression and anxiety will be increasingly addressed earlier in a client's journey. This scaling will make care available in more places and formats, and will ensure that training is made available to more mental health and addictions professionals, alongside strong clinical support and supervision.

A critical component of the program's success will be high-quality data collection and monitoring. Through an innovative measurement-based approach, assessment scores will be collected at every client session. This will ensure access to performance data that will monitor a client's progress for adjustments to be made where improvements are still needed.

Leveraging global best practices

This new program is based on the world-leading U.K. program that is achieving excellent patient outcomes. Psychologists, psychotherapists, social workers, occupational therapists and nurses provide care for depression and anxiety in a variety of community settings.

Ten years of success from the U.K. program indicates that treating depression and anxiety in the community makes a positive impact in many ways. Sixty-five per cent of clients experienced significant improvements in their anxiety and depression, individuals with chronic disease like diabetes saw improved condition management and health outcomes, and many individuals looking for work with anxiety and depression who had access to the service returned to work more quickly than their peers who didn't have access to a mental health service^[4].

Here in Ontario, the program will be available for children and youth aged 10 and up, adults, families and seniors. Services will be available in a variety of health and mental health locations close to home, and remotely via telephone or online. The government is expanding broadband service in Northern Ontario, which will result in more Ontarians being able to access web-based components of the program.

Social assistance and the Ontario Structured Psychotherapy program

It is important to have stronger linkages between the mental health and addictions system, the social assistance system and broader human services. Given the high prevalence of depression and anxiety among social assistance recipients, it is critical that mental health and addictions services and other programs such as employment supports will be closely aligned. Starting in 2020, this pilot program will provide direct access to publicly funded Ontario Structured Psychotherapy services to those on social assistance to support their return to work.

Dan: a CBT story

Dan is a long-haul truck driver who lives with his family in Windsor. His job takes him away from home for days at a time, which causes a lot of strain on the whole family. Dan is short-tempered and often preoccupied with worry about the stressors in his life. He worries about money, his middle son has a learning disability that Dan feels is somehow his fault and he doesn't feel like he is present enough at home. The worry is building, and he starts to be preoccupied by fears of a serious accident while driving.

Dan hears a radio ad for a free anxiety program run by an organization in Windsor-Essex, which includes an internet-based cognitive behavioural therapy (iCBT) program. This program is flexible and can be accessed remotely, which works well with his difficult work schedule. Dan calls and books a phone assessment with a therapist. He agrees that the assessment information can be shared with his family physician.

The assessing therapist emails Dan a link. He downloads the secure iCBT platform to his phone, and registers with the licence number the therapist emailed him. After completing a short questionnaire, the iCBT therapist reaches out to set up a first conversation. In that conversation they confirm what Dan's needs are and agree to hold appointments by phone to minimize phone data usage. The next time Dan logs into the iCBT platform, he sees his first module introducing him to cognitive behavioural therapy. Over the next week Dan works through the module and discusses what he has learned with his therapist during a phone appointment. In the second week Dan works through the module on negative thoughts and discusses his thought record activity with his therapist during a second appointment.

After a few months, Dan finds that he is less preoccupied and better able to manage his worries. After eight weeks he and his therapist agree that based on how he is feeling and his assessment scores, he is ready to move on from the program.

Ontario Structured Psychotherapy Program: one program, many journeys

The Ontario Structured Psychotherapy program provides services to a variety of clients with depression and anxiety, from multiple entry points, with clinically driven pathways designed to address people's individual needs to ensure outcomes and recovery.

Here are three examples of client journeys.

Sally, a 55-year-old retail associate in Renfrew, has been having trouble sleeping and is concerned it is impacting her relationship with her three kids.

Sally goes to the online Ontario mental health access portal and sees the Ontario Structured Psychotherapy program. She submits her information online and fills out a short questionnaire.

The Ontario Structured Psychotherapy hub at the Royal Ottawa Mental Health centre follows up with Sally via telephone. During the assessment she admits that she has been feeling depressed because she lost her mother a few months ago. She also doesn't feel that she has the time to attend a full course of therapy.

Sally registers for internet Cognitive Behavioural Therapy (iCBT) which provides her with therapist support, but she can do CBT on her own time.

After eight weeks of using the iCBT platform, Sally is sleeping better and is feeling confident in her parenting.

Max, a 45-year-old engineer in Whitby, is struggling with his work performance and arguing more with his partner.

Max discusses his concerns with his family physician who refers him to the Ontario Structured Psychotherapy program hub at the Ontario Shores Centre for Mental Health Sciences.

The hub calls Max and, during the discussion and assessment, suggests that he try therapy to reduce his stress and anxiety. Max reveals that he has been feeling this way for at least two years.

Max is registered for face-to-face therapy with a provider at the local community mental health agency.

After 11 sessions with a therapist, Max is feeling less anxious, performing better at work and enjoying spending time with his partner.

Priya, a grade 11 student in Toronto, has been missing class and has started smoking cannabis.

Priya's teacher becomes concerned and suggests she goes and talks to the school mental health worker.

At her appointment with the mental health worker, scheduled during her spare period at school, Priya discusses how she is nervous and apprehensive around her peers. She misses class to avoid interacting with them and has started smoking to relax.

Priya signs up for a psychoeducational group that is being run over the lunch period at her school.

Continuing to struggle with classes, Priya starts more intensive services with a counsellor that specializes in social anxiety at East Metro Youth Services (<http://emys.on.ca/>).

After 8 sessions with a therapist, Priya's class attendance is improving and her marks are up.

Supporting Ontarians with autism spectrum disorder and mental health issues

The province is developing innovative solutions for children and youth on the autism spectrum (ASD), 70% of whom also have a diagnosis of mental health challenges. This work includes providing training and professional development to both autism and mental health service providers, to build sector capacity and to facilitate the integration of mental health and autism expertise. This work will also facilitate the integration of mental health and autism services, and enhance the mental health supports available for children and youth on the autism spectrum and their families.

In response to the recommendations made by the Ontario Autism Advisory Panel (http://www.children.gov.on.ca/htdocs/English/documents/specialneeds/autism/AutismAdvisoryPanelReport_2019.pdf), the province will develop, pilot and evaluate a new service delivery framework in 2020 that integrates autism and mental health care in a complementary, collaborative and client-centred manner, at the local level in community-based settings. This new framework will provide children and youth on the autism spectrum with high-quality, evidence-based ASD-adapted cognitive behavioural therapy, while also building the capacity of autism service providers and mental health clinicians to support the mental health needs of their clients through a comprehensive training program.

This work will improve outcomes for children and youth with ASD and concurrent mental health needs through a coordinated, inter-sectoral approach to program design and implementation.

Expanding addictions services

Nearly one in five Ontarians will experience problematic substance use in their lifetime^[5], which can include drugs and alcohol. The number of Ontarians going back to the emergency department within 30 days for substance use-related visits increased by 50% between 2014-2015 and 2018-2019 (National Ambulatory Care Reporting System). Investments in addiction treatment services, from prevention to intensive treatment, will improve quality and expand availability across the province.

Ontario recognizes the ongoing severity of the opioid crisis and is committed to actively addressing the harms associated with opioid use and supporting people struggling with addiction to get the help they need. This includes implementing a comprehensive suite of policies and programs to address opioid addictions and overdose. These will be focused on:

- appropriate prescribing and pain management;
- treatment for opioid use disorder;
- harm reduction services and supports; and
- surveillance and reporting.

Treatment and withdrawal management

New investments have been made to help address gaps in access to treatment services for opioid use disorder, including new rapid access addiction medicine (RAAM) clinics, and funding for additional residential treatment and withdrawal management services across Ontario.

Consumption and treatment services

Ontario has introduced the Consumption Treatment Services (CTS) program, a new model for supervised consumption and overdose prevention programs. CTS will not only save lives by preventing overdose-related deaths, it will connect people to primary care, treatment and rehabilitation, and other health and social services.

Opening the door to cost recovery

In May 2019, the government also introduced the *Foundations for Promoting and Protecting Mental Health and Addictions Services Act* (<https://www.ontario.ca/laws/statute/s19017>). This act allows Ontario's government to sue opioid manufacturers and wholesalers for their alleged wrongdoing in order to recover past, present and future health care costs due to opioid-related disease, injury or illness. Ontario intends to invest any award from this litigation directly into frontline mental health and addictions services.

Rapid access addiction medicine clinics

Rapid access addiction medicine (RAAM) clinics help people seeking treatment for substance use issues, including opioids, alcohol and other substances. RAAMs provide immediate treatment and serve as a pathway to treatment between emergency departments and primary care. RAAM clinics, which are staffed by addictions physicians and counsellors, provide clients with short-term, comprehensive care until they are stabilized. This includes opioid agonist therapy, counselling and harm reduction education. Once patients are stabilized, RAAM clinics work to connect them to primary care and community-based programs for longer-term treatment and management.

There are new or expanded RAAM clinics in more than 30 communities across the province with 54 RAAMs currently in operation across Ontario.

Youth wellness hubs: filling a gap in the care continuum

Young people have the highest mental health and addictions needs of any age group, yet Ontario has a gap in programming that meets the needs of transition-aged youth, defined as youth aged 16-25. This is particularly true of addictions services and of services that have the capacity to treat co-occurring mental health and addictions issues.

To fill this gap, Ontario is working with leading youth mental health and addictions researchers to design a made-for-Ontario service model aimed at attracting and offering effective treatment to young people. Known as youth wellness hubs, these are youth-friendly locations offering walk-in access to primary care, mental health and addictions services, and other youth-oriented services such as school- or employment-related programs.

The province is currently evaluating the model at 10 sites. In addition to having the capacity to meet both the mental health and addictions needs of young people, these sites are introducing a system of measured care into integrated mental health and addictions support. As with the Ontario Structured Psychotherapy program, progress on client goals is measured in real time at every session, so clients and clinicians can track improvement and make adjustments to the client's care plan as required.

Pillar four – improving access: a new provincial program and approach to navigation

Ontario's extensive consultations revealed that because Ontarians do not know what services exist or where and how to get help, there are clear barriers to access. As the province improves the availability and quality of services, **Roadmap to Wellness** will make it easier for people to understand what help is available to them in their community, as well as where to find it.

Coordinated access to mental health and addictions core services

The province is taking steps to improve Ontarians' access to the right care at the right time in the right place.

Any person living in Ontario will be able to call, text or go online to learn more or get help by using:

- one easy-to-remember and toll-free phone number that all Ontarians can call, regardless of geography; and
- an easy-to-use website with an online chat function and client resources.

In addition to the single phone number and website, Ontarians will have access to in-person mental health and addictions navigation support through regional access points established across Ontario. Working with local Ontario Health Teams, these regional access points will be responsible for helping people find the mental health and addictions services they need. The priority will be to ensure that Ontarians have a streamlined and coordinated way to immediately access:

- crisis counselling;
- screening and referral to publicly-funded core services; and
- general information about mental health and addictions.

Further, a new and standard questionnaire will enable intake staff to assess a person's level of need and refer them to the appropriate core services in their region. This will result in people receiving effective care sooner, and reducing emergency department visits and the inappropriate use of acute services for those whose needs do not require

this level of care.

Fatima: an addictions treatment story

Fatima is 26 years old and seeking help for substance use issues. She saw an ad for the new provincial mental health and addictions coordinated access system and phoned the toll-free number. After a simple screening questionnaire, she was referred to a mobile detox (withdrawal management service) that had recently established itself in the county where she lives.

After receiving support for her withdrawal, Fatima was ready for addictions treatment services. Worried that addictions treatment would take her away from her responsibilities as a single mom, she was happy to learn that she could access intensive services during the day in her area. Day treatment programs offer intensive treatment, which can include counselling/therapy, as well as psychosocial skills and supports, while allowing participants to stay in their homes. Fatima was referred to the day program and was able to participate in the treatment program while maintaining her responsibilities at home.

Identifying mental health and addictions services and supports

In the future, Ontarians will be able to more easily recognize services and programs through a common quality icon.

Currently, the quality of mental health and addictions services varies within communities and across Ontario. Building on the work of organizations that already provide high-quality care, the province, through the Mental Health and Addictions Centre of Excellence, will further refine and establish a common quality framework as the Mental Health and Addictions Centre of Excellence drives a meaningful quality agenda and sets out the criteria that programs must meet through service standards and service-level indicators. This province-wide quality agenda will leverage existing service excellence and spread best practices right across Ontario.

As local programs and services meet the quality standards established by the Mental Health and Addictions Centre of Excellence, it will provide them with an icon for display. In doing so, it will be easier for Ontarians to identify and access core mental health and addictions services in their communities and have confidence in their quality. This new quality icon will be developed by the Mental Health and Addictions Centre of Excellence, in consultation with frontline service providers, and is expected to launch in spring 2022.

Ontario Health Teams

The mental health and addictions plan will be informed by Ontario's broader health system transformation, including the introduction of Ontario Health Teams across the province. These are groups of providers and organizations — including hospitals, doctors, home care providers and community-based mental health and addictions providers — that are clinically and fiscally accountable for delivering a full and coordinated continuum of care to a defined geographic population.

Ontario Health Teams will better integrate mental health and addictions supports between hospitals, primary care providers and community service providers, helping improve people's access to these important community-based services and improving navigation of the system.

Ontario has already launched the first cohort of Ontario Health Teams and will continue to approve additional teams as they are ready.

Ontario Health Teams are a new model of care that will integrate care delivery to enable patients, families, communities, providers and system leaders to work together, innovate and build on what is best in Ontario's health care system. Under this new model:

- People will experience seamless transitions across different care providers and settings.
- Primary care providers will be actively involved throughout their patients' health care journey.
- Patients' complete physical and mental health needs will be met and taken care of.
- People will not have to repeat their health history over and over or take the same test multiple times for different providers.
- People, families and caregivers will have their questions answered easily and quickly.

Measuring success

Ontario will develop a system-level approach for measuring performance of the mental health and addictions system. Currently, performance measurement is fragmented, with little consistency across the sector. In response, Ontario is working with partners to establish the necessary data standards and to build tools and infrastructure that will properly measure performance. Over the next several years, Ontario expects to be able to measure and track the system's performance across a number of key indicators. This will include the set of indicators being implemented under the federal-provincial shared health priority agreement to measure progress toward improving access to mental health and addictions services. Ontario is supporting the Canadian Institute of Health Information (CIHI) ^[6] in developing these pan-Canadian indicators, which will be phased in over 2019-2022. Results will be released and updated annually by CIHI. Indicators will measure:

- frequent emergency department visits for help with mental health and/or addictions issues;
- hospitalizations for harm caused by substance use;
- rate of self-harm, including suicide;
- wait times for community mental health counselling services;
- awareness and/or successful navigation of mental health and addictions services; and
- early identification for early intervention in youth aged 10 to 25.

Building on these indicators, Ontario will work with experts, clinicians and researchers to create a performance measurement framework. The Mental Health and Addictions Centre of Excellence will be a key partner in this. Its legislated mandate will include monitoring metrics related to the performance of the mental health and addictions system, including how well Ontario is meeting its commitments to make it easier to access services, provide better quality services and address critical service gaps. This data will guide future planning for the province and will support increased transparency and accountability.

Anticipated timeline for Ontario's mental health and addictions strategy

Ontario will invest \$3.8 billion over 10 years to enable this plan. As a result of this investment, as well as the work to improve the quality and equity of existing and new services, Ontarians can expect real and significant improvements to the mental health and addictions care available to them in their communities.

While the implementation of this plan will take time, Ontario is taking immediate steps, beginning in early 2020, toward the full and comprehensive implementation of this plan. Progress will continue in the years ahead as the Mental Health and Addictions Centre of Excellence drives quality improvements while the province's investments produce new and expanded programs across Ontario.

Winter 2020

- **More communication**

MHA plan announced, giving Ontarians a roadmap to a comprehensive and connected MHA system.

- **Higher quality**

With proclamation of the legislation, the new Mental Health and Addictions Centre of Excellence within Ontario Health will be set up.

Spring 2020

- **More services and supports**

More new MHA investments to support frontline services and enable plan.

- **More insight**

Results for three pan-Canadian MHA indicators released as part of Ontario's commitment to measure access to MHA services.

- **More support**

The Ontario Structured Psychotherapy program officially launches and includes access to additional CBT based tools and supports.

Fall 2020

- **More consistency and better planning**

Foundational work to confirm and define core MHA services across all levels of need, providing a tool for system planners to map services with a degree of clarity and precision not possible with existing data or tools.

- **More access to therapy**

Ontario expands the Ontario Structured Psychotherapy program, increasing access to therapy for those with anxiety and depression.

Winter 2021

- **More access to therapy**

Ontario Structured Psychotherapy program pilots for children and youth in select regions.

- **More evidence for decision making**

Progress towards provincial data standards across child, youth and adult community mental health services so system quality and performance can start to be measured in a reliable and consistent way.

Spring 2021

- **More services and supports, better planning**

Ministry of Health and Ontario Health funding decisions leverage core services evidence to build more equitable access to core services and address regional service needs.

- **More accountability**

A key performance indicator framework is defined, setting clear expectations for MHA service delivery across Ontario.

Going Forward

- **More access to therapy**

The Ontario Structured Psychotherapy program continues to expand.

- **Better MHA access**

Going forward, Ontarians have immediate access to crisis counselling, screening, referral to core services appropriate for their needs, and online and virtual resources. Services and supports are easily identifiable thanks to the clear display of the common quality MHA icon indicating high quality, shared service standards.

- **More action**

The CoE will use the core services framework and best practices from Cancer Care Ontario, Health Quality Ontario and clinical research to identify service gaps, establish performance metrics, define the link between services and outcomes, set expectations-related outcomes and identify the data and digital health needs of service providers.

Feedback

Roadmap to Wellness represents the next step in Ontario's efforts to build a connected and comprehensive mental health and addictions system. Every Ontarian should feel welcome in reviewing this roadmap and providing the Ministry of Health with feedback. To do so, Ontarians can:

- Write to the ministry

Ministry of Health

438 University Avenue, 8th Floor

Toronto, Ontario

M5G 2K8

- Engage with the ministry's social media accounts

Facebook (<https://www.facebook.com/ONThealth>)

Twitter (<https://twitter.com/ONThealth>)

The Ministry of Health is committed to providing accessible customer service. On request, the ministry can arrange for accessible formats and communications supports.

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Footnotes

- [1] ^ Statistics Canada. 2012. Table 13-10-0465-01 (formerly CANSIM 105-1101). Mental Health Indicators (<https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1310046501>)
- [2] ^ CAMH statistic calculated from weekly estimates for (1) disability cases due to mental and/or behavioural disorders and (2) full-time workers absent from work due to mental illness sourced from the following papers, respectively:
Dewa, Chau, and Dermer (2010). "Examining the comparative incidence and costs of physical and mental health-related disabilities in an employed population." Journal of Occupational and Environmental Medicine, 52: 758-62. Number of disability cases calculated using Statistics Canada employment data.
Institute of Health Economics (2007). Mental health economics statistics in your pocket. Edmonton: IHE.
Number of absent workers calculated using Statistics Canada work absence rates (<http://www.statcan.gc.ca/pub/71-211-x/71-211-x2011000-eng.pdf>) .
- [3] ^ Mental Health Commission of Canada. 2017. Strengthening the Case for Investing in Canada's Mental Health System: Economic Considerations (https://www.mentalhealthcommission.ca/sites/default/files/2017-03/case_for_investment_eng.pdf) .
- [4] ^ Richard Layard and David M. Clark. 2014. Thrive: The power of evidence-based psychological therapies. United Kingdom: Oxford University Press.
- [5] ^ Statistics Canada. 2012. Table 13-10-0465-01 (formerly CANSIM 105-1101) Mental Health Indicators (<https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1310046501>) .
- [6] ^ Canadian Institute for Health Information. National Ambulatory Care Reporting System (NACRS) 2013/14-2018/19 Q4, Ontario Ministry of Health SAS server, extracted June 2019