



TO: Michael Kirby, Chair, Mental Health Commission of Canada
CC: Gillian Mulvale, Mental Health Commission of Canada

FROM: Ontario Healthy Schools Coalition
Registered Nurses' Association of Ontario
Community Health Nurses Initiatives Group of RNAO

DATE: May 9, 2008

SUBJECT: **Need for Mental Health to be Included in the Ontario Public Health Standards**

Background

Ontario is in the process of revising its Public Health Mandatory Health Programs and Services Guidelines (1997). The current document will be named the Ontario Public Health Standards (OPHS) and will guide Public Health practice for the next 5-10 years (see www.publichealthontario.ca "Projects and Committees"). The draft OPHS have already been approved in principle as of July 2007. The final approval by the Ministers is expected by July 2008.

This is a critical opportunity to ensure that mental health promotion and early identification, short-term counseling and referral of individuals with mental health concerns (particularly children and youth) are included within the Public Health mandate.

With the growing recognition of the extent of mental health concerns in the population and the impact of mental health on many other areas of public health importance (e.g., alcohol, tobacco and substance misuse, sexual health, injuries and suicide, healthy eating and healthy weights), it is imperative that "the whole person" be addressed. Publicly-funded Public Health should be leading the way to reducing the stigma of mental illness and promoting optimal mental health across the lifespan.

In November 2006, the Ministry of Children and Youth Services released "A Shared Responsibility: Ontario's Policy Framework for Child and Youth Mental Health" that identifies "the need for a full continuum of services, ranging from health promotion and prevention to highly intensive services" (see http://www.gov.on.ca/children/graphics/stel02_179874.pdf, p. 19). Appendix C of this document shows "public health" within the "early identification" and "early intervention" roles, however, Public Health can also contribute to "family/caregiver education and support", "intervention" (e.g. short-term counseling, skills-based school programs, parent groups, anger management groups, anti-bullying programs), "mental health promotion and illness prevention", "professional training, support and collaboration", and "public education". If mental health is not included in the Ontario Public Health

Standards, then Public Health staff will not have a clear mandate to contribute to this continuum of mental health services.

Ontario's Ministry of Education has drafted a "Foundations for a Healthy School" framework that includes Mental Health as a priority topic area to be addressed (see <http://www.edu.gov.on.ca/eng/healthyschools/foundations.pdf>). They also recently launched (Feb 2008) a "Student Support Leadership Initiative" (see <http://cal2.edu.gov.on.ca/feb2008/studentSupport.pdf> and <http://cal2.edu.gov.on.ca/feb2008/Appendix.pdf> and <http://cal2.edu.gov.on.ca/apr2008/SSLIPanningandReporting.pdf>) that is providing funding to coordinate the planning of mental health service provision amongst clusters of school boards and their local community agencies. Public Health has been identified as a potential partner in these documents. However, if mental health is not included in the Ontario Public Health Standards, then Public Health staff will not have a clear mandate to contribute to this multisectoral planning and delivery of mental health promotion and services.

Role of Public Health in Mental Health Promotion

There are a number of crucial roles for public health staff in mental health promotion, which include:

- Providing in-service staff training on recognizing signs and symptoms of mental illness, de-stigmatizing mental illness, and using appropriate intervention strategies when dealing with mental health issues. The Canadian Mental Health Association has just created a curriculum for teachers that will soon be ready for piloting. Public Health nurses/practitioners, in collaboration with school board partners, could be the means to broadly implement this curriculum.
- Assessment of the extent of mental health needs in the school and/or community.
- Raising awareness among students, parents and community members regarding mental health.
- Supporting school health committees (involving school administration, teachers, parents, students, community partners) in implementing "whole school mental health promotion" programs—fostering a safe and supportive school environment—enhancing protective factors (see Weare, Katherine (2000). *Promoting Mental, Emotional and Social Health: A Whole School Approach*. London: Routledge). In particular, Public Health practitioners are committed to engaging youth as agents of knowledge exchange, stigma reduction, and school/community action.
- Providing school-based Public Health nursing services consisting of one-on-one assessment, short-term counseling and referral of students with mental health or other health-related issues—i.e. dedicated time in schools for early identification, support and referral as needed. In secondary schools this could be in the form of a school-based health or wellness centre.
- Facilitating small group support sessions as indicated (e.g. healthy relationships, teen esteem for girls and for boys, anger management, effective communication skills, positive parenting, etc.)

Recommendations for the Ontario Public Health Standards

In the Chronic Disease Prevention Program Standard

- "mental health" be added to the lists of topics to be addressed

In the Child Health Program Standard:

- the title be amended to state "Child and Youth Health"
- "mental health" be added to the list of areas to be addressed

At the current time, both Program Standards are administered by the Ministry of Health Promotion.

Conclusion

It is recognized that this is a very late stage to bring forward the issue of adding mental health to the Ontario Public Health Standards, however, the issue has been raised by many across the province at every opportunity for input that has been possible. If mental health promotion is deemed to be a cross-cutting issue such as the promotion of resilience and protective factors, it is necessary to explicitly state that in the OPHS, as the support or guidance manuals are not legislatively binding.

Respectfully,



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cc Doris Grinspun, Executive Director, RNAO
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