

All Party Committee on Mental Health, Substance Use, and Addictions Meeting Minutes

Date: July 17, 2024

Time: 10:30 a.m. – 11:45 a.m.

Attendees:

Committee Members: John Hogan, Sherry Gambin-Walsh, Paul Pike, Joedy Wall, Jim McKenna

Officials: John McGrath, Gillian Sweeney, Niki Legge, Tara Power, David Coffin

1. Minutes approved from June 10, 2024.
2. Presentation – Kristi Allen highlighted her ongoing advocacy work to make long term mental health care more accessible, with her current weekly demonstration/quiet protest in front of Confederation Building in its 190th week. She indicated that it is important for Government officials to understand the difference between mental wellness and mental illness, especially when talking in the media. She explained that every person has mental wellness, which can be impacted by circumstances such as shelter, access to food, financial stability, and employment, etc. On the other hand, mental illness is a chronic health condition.

Areas of improvement included: Doorways to provide short term mental health care to individuals; Bridge the Gapp as an accessible resource for family members; the new mental health hospital providing a clean, modern facility; and Strongest Families.

Challenges included: Individuals with mental illness are not easily treated with a few counselling sessions and their condition can deteriorate without access; and, for some people the services they need are only available out of province.

Areas for improvement included:

- Adding additional mental health navigators to the public health system. When someone is not doing well, they often want to be able to talk with a person quickly and directly without having to navigate confusing telephone/online menus. Kristi commended the current Navigator as compassionate and an excellent resource but feels there should be more than one. She also notes that some women or people in the LGBTQ+ community may not feel comfortable talking with a male. There should also be more promotion of how the navigator can provide assistance and direction.
- It is important to reach out to and listen to people with lived experience and engage them in a way that feels safe for them to share.
- The FACT (Flexible Assertive Community Treatment) and ACT (Assertive Community Treatment) teams are excellent but need to be expanded and promoted. Also, the descriptions are vague and need more detailed information on the service. Their role should also be further expanded, such as follow up with clients to ensure they are taking medication.
- Publicly commit to dedicate 9% of the health care budget to mental health.

- Government should invest in programs that are currently working and have built up infrastructure and people, such as the Jacob Puddister Foundation.
- Education regarding availability of mental health services is key and Government should improve communications to youth and other groups by using different platforms (including social media and potentially billboards). Government should be creative in getting information out to the province and meet people where they are.
- In addition to these more short-term potential improvements described above, Government should work on creating shorter wait times, providing free medication and therapy, increase the programs available, and increase the number of psychiatrists in the province.

3. Presentation – Mental Health Foundation of Canada. Glenn Roil, Sarah Furlong, and Pam Pardy provided an overview of their lived experiences as mental health advocates and their new organization, the Mental Health Foundation of Canada. They highlighted how the social determinants of health are important factors in influencing a person's mental well-being.

Areas of Improvement included: Doorways providing same day or next day service as well as phone or virtual appointments; province-wide expansion of this program; mobile crisis response teams and expansion outside metro area, along with longer operating hours; availability of telephone supports, including Lifewise, crisis text line, and Mental Health and Addiction Systems Navigator; and availability of online supports, including Bridge the Gapp.

Areas for improvement include:

- Make Doorways available in non-clinical settings such as shopping malls, other businesses, and libraries, in an effort to make their services less stigmatizing; providing clerical staff at places such as Doorways with your personal health information can be stigmatizing and people may feel uncomfortable with sharing; members of the public have expressed concerns with having different counsellors and not always being able to access same day services;
- Mobile crisis response needs to be improved with more ACT teams, available 24/7 to respond to trauma.
- There should be additional patient navigators to provide a more readily available/streamlined patient navigation process; online supports can be difficult to navigate and wait times can be long. for virtual care options, not everyone may have reliable, high speed internet access or access to a smart phone or computer;
- The Foundation outlined the importance of developing curriculum in schools to promote mental health and wellness education, awareness, and help reduce stigma. Peer Support Specialists should be placed in schools and there should be an increase in the number of guidance counsellors. Guest speakers from community-based organizations can help create awareness. The Foundation recommended that all NL Schools have staff trained in crisis intervention prevention, trauma, peer support, and mental health first aid. The Foundation also provided feedback and recommendations related to CSSD/Child Protection and Justice and Public Safety.

4. Action Items

- Secretariat to provide a copy of the presentation to members.