Ontario’s child and youth mental health (CYMH) centres provide mental health services to more than 120,000 kids and their families annually. But, across the province, thousands of infants, children, and youth are waiting up to 18 months for the treatment they need. And many families have a hard time knowing where to go for help, or finding our services at all. As a system and as a province, we are failing these kids and families.

And our hospitals, schools, justice systems, colleges and universities, and economy are feeling the impact.

With $1.9 billion in new mental health funding from the provincial government and a matched federal commitment over the next decade—totaling $3.8 billion—there is finally an opportunity to address the crisis in child and youth mental health.

70% of mental health and substance use problems begin in childhood. By implementing our First Point Plan we can drive better lifelong outcomes and bring desperately needed relief to families and overcrowded hospitals.

Strategic investments of an additional $150 million a year will enable us to hire and train 1,400 front-line professionals to:

1. Ensure access to counselling and psychotherapy within 30 days
2. Expand specialized youth mental health and addictions services to ensure that children and youth get the treatment they need
3. Scale 24/7 crisis support services to ensure kids and families don’t have to go to the emergency department
TOGETHER WE CAN END THE CRISIS IN CHILD AND YOUTH MENTAL HEALTH AND BRING RELIEF TO FAMILIES AND OVERCROWDED HOSPITALS BY INVESTING AN ADDITIONAL $150 MILLION TO HIRE AND TRAIN 1400 FRONT-LINE PROFESSIONALS TO:

ENSURE ACCESS TO COUNSELLING AND PSYCHOThERAPY WITHIN 30 DAYS

The average wait for counselling and psychotherapy services in Ontario 78 days. In some parts of the province, kids and families are waiting up to 18 months. As a result, conditions often get worse, making it more difficult and costlier to provide appropriate treatment—and these children and youth often end up in hospitals when it could have been avoided.

CMHO is recommending that investments be made in CYMH services so that:

• Brief, rapid access services are available in each community for children and youth with mild issues, including some evening and weekend hours (e.g., walk-in clinics, online supports, or mobile services, depending on the community, supports for infants and young parents); and

• Longer-term psychotherapy is accessible within one month for those with more moderate or significant needs, including services for infants and young parents. Measuring clinical progress and kids and families service experience will ensure that treatment programs are effective.

By leveraging digital innovation with these investments, we can also improve efficiency, for example by expanding the use of tele-psychiatry, already common practice in parts of the province. At the same time, we will make it easier for families to navigate to the right services.

Annualized investments of an additional $58,000,000 into these services will allow the CYMH sector to meet these targets, including for transitional-aged youth, up to the age of 25.

Meet Luke. Just 6 years old and he is feeling a lot of anger and anxiety, sometimes he is even explosive. He wrecked his classroom, and has hit his teacher and friends. His parents took him to the hospital, but by the time doctors saw him, Luke had calmed down. He was referred to a community mental health agency, but the wait list is long. With nowhere else to go, Luke ends up at the hospital quite a few times while he waits for community mental health treatment.

It doesn’t need to be this way. Luke’s teachers should be able to refer him to a child and youth mental health agency that can see him right away. He would get help to manage his anxiety and his anger, and his parents would be part of the treatment. Luke wouldn't have to keep going to the hospital, only to be redirected back to the community, and hospital doctors can care for patients who have medical emergencies.
EXPAND SPECIALIZED YOUTH MENTAL HEALTH AND ADDICTIONS SERVICES TO ENSURE THAT CHILDREN AND YOUTH GET THE TREATMENT THEY NEED

Children and youth with significant and complex mental illnesses require longer term and more specialized care. For these young people, the average wait for services is 98 days. With long wait times for care, it becomes incredibly challenging for families to manage. Every day spent waiting, the risks and costs associated grow, as many kids and families turn to their hospitals because they have nowhere else to go. The number of young people being hospitalized for a mental health issue has grown by 79% in the last eleven years.

These children and youth need significant, wrap-around treatment and supports – such as in-home services, expanded day treatment, and sometimes round-the-clock support. When these services are unavailable, children and youth often end up being repeatedly hospitalized. Parents, caregivers and siblings need support as well. Caring for a child with intensive mental health needs often means both emotional and financial respite support.

CMHO is recommending an annualized investment of an additional $55,000,000 to expand intensive treatment services for kids and youth up to the age of 25 across the province at both the community and regional levels, with a special focus on building services in remote, rural, and northern parts of the province that have been particularly underserved. Measuring clinical progress and kids and families service experience will ensure that treatment programs are effective.

SCALE 24/7 CRISIS SUPPORT SERVICES TO ENSURE CHILDREN, YOUTH, AND FAMILIES DON’T HAVE TO GO TO THE EMERGENCY DEPARTMENT

Just as children and youth struggling with mental health issues exist on a continuum, their challenges also present with varying levels of urgency—sometimes youth are in crisis and need support urgently. Right now, the average wait for crisis services is 2 days, which doesn’t make sense. A kid or youth in crisis needs immediate help. Over the last eleven years, the number of young people making emergency department visits for mental health concerns has increased 72%. And 38% of young people who make an ED visit for a mental health issue do so three or more times in a year. This is despite the fact that these young people could be more appropriately and cost-effectively served in community-based settings.

As such, CMHO is recommending that investments be made to scale existing CYMH crisis services, to ensure crisis supports are available 24 hours a day, seven days a week—keeping kids and youth out of the hospital.

CMHO estimates that an annualized investment of an additional $37,000,000 sufficiently expand these services, including for transitional-aged youth, up to the age of 25.

Meet Sophie. She has been struggling with anxiety for as long as she can remember. By 13 she is depressed. She is beginning to try out street drugs to help her manage. Sometimes she doesn’t go home. Her family doctor is aware that Sophie’s father has alcohol and addiction problems; she refers them for help, but they end up on a year-long wait list. Sophie’s depression worsens, and she attempts suicide. Rushed to hospital, doctors save her life, and send her home. Wait times for the intensive treatment she needs remain long and she isn’t getting the support she needs. And then, the unthinkable. Sophie stops going to school and attempts suicide again. This time she was successful.

Imagine a mental health care system where Sophie’s family doctor refers patients to community mental health treatment with no wait times and professionals to support her dad with his alcohol problem. Sophie has an inter-professional team that supports her. A youth psychiatrist prescribes medication for depression. A psychologist has assessed her so treatment can specifically meet her needs. A therapist works with her to better manage her feelings and her whole family is supported through counselling. She is feeling better and going to school.
ENSURING SUCCESSFUL INVESTMENTS

The need for more child and youth mental health services is undeniable. As new investments significantly increase the number of kids and families we can help, it is important that at the same time we direct a portion of the investment to reinforce the system pieces needed to deliver high-quality, co-ordinated services, such as:

1. Strengthen the system foundation: by stabilizing the system with immediate investments to address wait times, at the same time as planning a more integrated and connected service experience for clients and families.
2. Capacity planning and funding model: to ensure equitable and prompt access to services all across the province.
3. Train the workforce of the future: by hiring and equipping our front-line professionals to deliver evidence-based, high-quality treatment and services.
4. Build data infrastructure: to ensure quality improvement, performance measurement and ultimately ensure better outcomes for kids and families.

Every community’s needs are somewhat different, but the good thing is that we have local planning in place that ensures that dollars invested get to what kids and families need most. Investments in these foundational pieces will ensure that kids and families across the province can rely on a high-quality, high-performing child and youth mental health system.

Children’s Mental Health Ontario (CMHO) works to identify and develop solutions to important policy issues affecting the child and youth mental health sector. We represent close to 100 accredited child and youth mental health centres that provide treatment and support to children, youth and families across Ontario.

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