**Group discussion:** Swimming Upstream:

**Mental Health & Cities Summit**

Breakout Sessions Facilitation Frame - April 9, 2018

How can we plan local services and community resources to support the mental well-being or residents?

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Introductory comments:

Rob – Cities' self-definition with citizen well-being – france, sydney ; cities having a moment – distinct role

TO should think about it as Torontonians would – each city is unique; eg.g Philadelphia using the arts ; city conveners or planners can play a role' timing is right but there is a need to engage broader community; partnership with Wellesley Inst

Kwame – Wellesley – multiple partners started a mh table to star conversation about what we want to do – 1 side -MH and Wellbeing, 2nd side - Mental Illness and City;s role in recovery

Feeling of stress and unhappiness - stats from UK – issues – pressure, social media, loneliness (single person hshds)

City's role re helping to protect us from stress and access to services

| **Discussion Stage** | **Session Outputs/Notes** |
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| **Defining the problem**  Q1 – Everyone plays a role –what can we do   * + *Outline 1-3 salient issues that most need to be addressed* | What can be done   * + - Workplace     - Affordable housing     - Supportive housing     - Place to hang – supportive public space     - Supportive ppl – MH first aid in workplace; other supportive network     - Self care - prepares you to deal     - Moving away siloed isolating service models from one person to one person to group approach     - Build resiliency in school – Cathy Short – MH assists in schools     - Fix the hospital system when ppl are not sick enough; sending ppl away until they are really sick     - Have services that are preventative, move upstream from crisis     - Service access when needed and wanted, not just 9 to 5     - Have education so that you can reduce the things that cause stress e.g. transportation ; solns that keep everyone aware and helping; small act of kindness, think of ppl around you     - Transforming work - Encouraging teleworking – reducing grid lock; supportive management     - 5 fruits a day equivalent in terms of a mental health campaign – something that creates a shared understanding     - Families on front line so provide skills to families on peer support basis     - Structures that don't force you to fit but allow for everyone to have success; instead of keeping things limited have resources to support the fix e.g. education – move beyond grades so that you have the whole child not just exam grades     - Cities work with comm orgs that are already working well but poorly funded so that these orgs can be supported in doing what they do on the front lines     - Lack of psychiatrists and those taking new patients     - Raising Social assistance rates – reduce MH issues from economic stress     - Give orgs support with data analysis & evaluation data |
| **What’s worked, what’s promising? What might we consider?**   * + *Outline some innovations you’re aware of that show promise in addressing the issues outlined.*   + *They can be solutions that have been widely or narrowly tested, or ones that have compelling evidence behind them – the key is items that show promise* | e.g. supporting families works, MH First Aid works  Housing first, supportive housing in general, COT 40 yrs experience; e.g. place based housing first in TCHC – look at what we know works in the city and scale it  Organizational Funding – what pre  Think about service delivery model – using a person centered perspective – improving timeliness (from Woodgreen Comm Srvs); everyone should consider what are we doing well, what are we not doing well and collaborate with others  City-mandate that ppl work together – CBT, DBT programs – very effective but need to scale up; facilitate one window, one number access to services   * Mandate collaborative work – e.g. RFP process and timeline that allows for joint responses; also, potentially encouraging breadth of services   Having ppl with lived experience in governance structures incl government  Public Education - to break down discrimination – intersectional approach, combatting discrimination; education could help us consider MH more like cancer   * Structure education so tht it helps   Edmonton  - Community MH Action Plan – City as convener – funded by province, City and United Way   * Suicide prevention – as a convenor * abundant communities initiative – block connectors in terms of nbhd level change – helps to bridge isolation   Technology and digital MH platforms – a way to reduce costs  Tech as a way to coordinate service providers better and building comm capacity  What cities can do – how could we use Community Hub model – no real funding to support; also, no funding to move to shared services model  CBT DBT good model – cities could formalize MH centre and school relationship to help scale up  Funding for comm groups  How is city planning involved in this issue?  How is private enterprise involved? – rep from DT Yonge BIA spoke about his role and that groups action in educating private enterprise leaders  Creating homes where ppl from a range of backgrounds and needs can living or visit this community have meaningful roles there; combats isolation, helps to give ppl purpose – from the spiritual community  Galvanize employers (public and Private) to create meaningful employment  ICircle declaration 6 principles  Unpack diversity of Toronto  Mapping of resource location in services – achieving equitable service  Lifecourse approach to soln  Honest conversation from leaders to discuss MH and impact on themselves & families |
| **Solution work – how do we move forward?**   * + *Outline 3-5 key learnings or practical solutions or considerations for Toronto/the GTA and other municipalities* |  |
| **Into Action** *(bonus round!)*   * + *What concrete steps would be needed to move forward in Toronto/the GTA and could be scaled to other municipalities?* |  |
| **Support from Other Levels of Government**   * *What actions, if any, could provincial and federal governments take to support municipalities? Policy changes, financial support etc.* |  |
| **Take-away messages from today’s discussion**   * + *Outline 2-3 key messages or take-away points (ie what should someone who missed the most need to hear?)* |  |