**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?

Scribe: Aderonke Akande

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** |
| --- | --- |
| **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 worksHousing 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 itOrganizational Funding – what preThink 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 othersCity-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 governmentPublic 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 costsTech as a way to coordinate service providers better and building comm capacityWhat cities can do – how could we use Community Hub model – no real funding to support; also, no funding to move to shared services modelCBT DBT good model – cities could formalize MH centre and school relationship to help scale upFunding for comm groupsHow 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 leadersCreating 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 employmentICircle declaration 6 principlesUnpack diversity of Toronto Mapping of resource location in services – achieving equitable service Lifecourse approach to solnHonest 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?)*
 |  |