



Commission de
la santé mentale
du Canada

**Remarks delivered to the
House of Commons Standing Committee on Finance**

**by Jennifer Vornbrock
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Good afternoon Mr. Chair and committee members. Thank you for the opportunity to speak with you today.

My name is Jennifer Vornbrock and I am the Vice-President of Knowledge and Innovation with the Mental Health Commission of Canada.

I'd like to speak with you about the work the Commission has accomplished in the last 7 years, and about our desire to move forward with a Mental Health Action Plan to improve mental health for *all* Canadians.

The Mental Health Commission of Canada was created in 2007, with the support of *all* parties in the House of Commons.

And here I would be remiss not to acknowledge the support of the late Jim Flaherty. He was a champion for mental health, and encouraged our work, both publically and privately, over a number of years.

Today, I am asking to continue our work together, to help Canadians from coast to coast to coast.

The Commission has completed all of the goals in its current mandate, three years ahead of time and on budget.

In seven short years, we have:

- Worked with stakeholders across the country to create the National Mental Health Strategy for Canada.
 - Trained over 110,000 Canadians to deliver Mental Health First Aid in 2,640 communities across Canada.
 - Launched the world's first National Standard for Psychological Health and Safety in the Workplace.
 - Led a national youth anti-stigma campaign, evaluating over 50 schools' anti-stigma programs, and working with over 20 schools to implement the most effective programs.
 - Created an internationally-recognized Knowledge Exchange Centre to help mental health professionals share research and best practices across Canada and around the world
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-Started *community*-led conversations on suicide in collaboration with Members of Parliament from all political parties. We also continue to work closely with the Government of Canada to develop a federal framework on suicide prevention.

-And finally, the Commission oversaw a major, five-city homelessness research project delivering results showing that for every ten dollars invested in Housing First, over twenty dollars were saved.

Throughout our work, the Commission has leveraged the government's investment *dollar for dollar*, through over 350 partnerships that provided funding, resources, and expertise in-kind.

I sincerely hope there will come a day when the Mental Health Commission is out of business. But today, there is still more work to be done.

The Commission's actions-to-date have drawn international acclaim for made-in-Canada practices. The Mental Health Strategy for Canada is considered one of the best in the world.

We now have a road map, created by Canadians from coast to coast to coast. A renewed mandate will allow us to put those plans into action, working with the provinces and territories, stakeholders across the country, and people living with mental illness, to implement a Mental Health Action Plan with concrete goals and measurable outcomes.

Our original mandate allowed us move the needle on workplace mental health, stigma, and homelessness. This new mandate will allow us to confront even more mental health issues Canadians care about, like suicide, PTSD, and supports for seniors, children and youth, Aboriginal and New Canadians.

I'm pleased to say that consultations for the Mental Health Action Plan are already underway.

We have been able to start this work quickly, and effectively, due to the strong relationships we have built over the last 7 years.

With the provinces and territories, the Commission has become a coordinating agent that can gather input, and build consensus, across all levels of government.

We have also collaborated extensively with the Canadian mental health community, because we know how crucial it is that mental health issues are not addressed in a manner that includes silos.

To that end, I'm pleased to say that Dave Gallson, Co-Chair of the Canadian Association for Mental Health and Mental Illness, an organization that represents over 18 national mental health care organizations, has joined me here today in support.

The Commission is already a hub of research and development, and our organization is a natural investment point to fund mental health innovation. Working with community stakeholders, we can address critical issues in mental health, and encourage collaborative efforts between mental health stakeholders, and government research bodies.

The Mental Health Commission has proven it can deliver results faster and for less money.

We have budgeted responsibly, and can continue under our current funding structure until 2017. In the next federal budget, we are looking for a signal to our stakeholders across Canada that our work will be able to continue until 2025.

Mental health issues reach into virtually every Canadian household. In any given year, one in five Canadians experiences a mental health problem, with a cost to the economy of more than 50 billion dollars.

Without action, these challenges will only intensify.

However, we believe that by working together, and investing in a concrete action plan, we have the great opportunity to improve the lives of Canadians living with mental illness, and to position Canada as a global leader on mental health innovation.

Thank you. Merci.
