# **CCAMHR POLICY COMMITTEE STATEMENT**

Kirby - Chapter 10

**Issues:** A level playing field; due recognition; sufficient, appropriate and sustained funding; and our own accountability.

Why an Issue(s): Each of these factors has been ignored by virtually every provincial government since the inception of the consumer/survivor organization in the late 1980's and early 1990's.

**Target Audience**: All consumer organizations Canada wide; Ministries of Health in each province.

Brief Analysis: Despite mental health task forces and provincial mental health reforms; despite requests and pleas by numerous organizations for proper assistance through necessary and sufficient funding; despite requests for greater clarity of the role of c/s organization in the mental health system; a different set of factors for measuring the success of c/s organizations; our own operating manuals, benchmarks, etc; despite the cumulative evidence of the complementary nature and alternative supports successes, we have been left for the most part, howling in the wind.

**Recommendation a**: That the Coalition distribute the following recommendations in a package to as many c/s organizations as possible in order to be utilized by these groups as an advocacy tool, to help strengthen the organization, the status, the effectiveness, and the success of a pillar in the mental health system: the consumer/survivor community (movement).

**Recommendation b**: That the Coalition provide assistance in the form of pamphlets or through ccamhr.ca. access, to lists of Provincial MPPs / MLAs and Federal MPs who can be contacted locally in order to distribute this series of recommendations from the Kirby final report.

#### Recommendation 46:

That programs be put in place to develop leadership capacity among persons living with mental illness, and their families. That the Knowledge Exchange Centre (see Chapter 16) contribute to building this capacity by facilitating electronic access to information and technical assistance for people affected by mental illness and their families.

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#### **Recommendation 47:**

That funding be made available through the Mental Health Transition Fund (see Chapter 16) that is specifically targeted at:

- Increasing the number of paid peer support workers in community-based mental health service organizations;
- Providing stable funding to strengthen existing peer development initiatives, build new initiatives (including family groups), and build a network of self-help and peer support initiatives throughout the country;
- That the federal government lead by example, building on innovations such as the National Peer Support Program for current and former Canadian Forces members and support, with appropriate levels of funding, self-help and peer support programs for the client groups that fall under the jurisdiction of the federal government;

## **Recommendation 48:**

That research be undertaken to:

- quantify the benefits of self-help and peer support to participants,
- identify savings to the health care system that result from peer support initiatives, and
- That a portion of these savings be redirected to support further selfhelp and peer support initiatives.

#### Recommendation 49:

That the Canadian Institutes of Health Research (CIHR) support research into self-help and peer support, and that in determining which research projects to fund the CIHR utilize a review process that welcomes and understands the types of participatory methodologies that persons living with mental illness, and their families, prefer and find effective.

## Recommendation 50:

That accountability measures for mental health and addiction services include not just process issues such as numbers of visits, hours of counselling or dollars spent, but also address outcomes, such as respect, preservation of dignity, as well a, a focus on hope and recovery, since these figure amongst the things that persons living with mental illness, and their families, value most.

#### **Recommendation 51:**

That accountability requirements that are established for self-help and peer support groups do not impose an overly onerous burden on these groups, and that measures be taken to ensure that these groups are able to meet these requirements.

That consumer and family-led certification and accreditation processes for self-help and peer support programs be developed and funded to ensure quality, and to sustain the unique contribution of self-help and peer support initiatives.

Kirby - Chapter 10

## **Recommendation 52:**

That existing and new consumer and family organizations be funded at an annualized, sustainable level. That broad-based coalitions be funded and built among self-help and peer support organizations so that they do not continue to exist in isolation but are able to form networks with one another.

## Source:

CHAPTER 10: Self-Help and Peer Support in PART III, Service Organization and Delivery OUT OF THE SHADOWS AT LAST.

Transforming Mental Health, Mental Illness and Addiction Services in Canada, Final Report of The Standing Committee on Social Affairs, Science and Technology, the Honourable Michael J. L. Kirby, Chair and the Honourable Wilbert Joseph Keon, Deputy Chair, May 2006, pages, 227-247



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