Fostering Mental Health in Our Community

Ottawa Public Health Strategic Direction
A Background Document
September 2016

2015-2018
Acknowledgement

The production of this report has been a collaborative effort by many Ottawa Public Health staff along with key stakeholders and content experts.

This report was prepared by:
Darcie Taing, Family Health Specialist, Ottawa Public Health
Benjamin Leikin, Supervisor, Mental Health Team, Ottawa Public Health
Linda Cove, Public Health Nurse, Mental Health Team, Ottawa Public Health

Many individuals contributed to the successful production of this report. For their support and expert contribution, we would like to thank the following:
Carole Legault, Project Officer, Mental Health Team, Ottawa Public Health
Helen Parker, Public Health Nurse, Mental Health Team, Ottawa Public Health
Lorette Dupuis, Family Health Specialist, Ottawa Public Health
Jacqueline Roy, Program Manager, Ottawa Public Health
Pascale Mantoura, Research Officer, National Collaborating Centre for Healthy Public Policy
Members of the OPH Mental Health Team
Members of the OPH Mental Health Advisory Committee
Toronto Public Health, Mental Health Promotion Program
Dr. Lewis Leikin, Ottawa Board of Health Member

General formatting and graphics design:
Kathy Lavigne, Ottawa Public Health
Monique Guilbault, Ottawa Public Health
Renée Jocelyn, Ottawa Public Health

Please use the following citation when referencing this document:

For additional copies of the report, please visit ottawa.ca/healthreports
For further information, please contact Benjamin Leikin at 613-580-6744, extension 21061 or Benjamin.leikin@ottawa.ca.
**Table of Contents**

Executive Summary

Mental Health Awareness and Stigma Reduction 4

Towards a More Resilient Community 5

   Suicide Prevention 5

Defining Mental Illness and Mental Health 6

A Public Health Issue 7

The Need for Action 8

   The Ontario Public Health Standards (OPHS) 8

Population Mental Health Promotion 9

Population Mental Health Framework for Public Health 10

Mental Health Promotion History at Ottawa Public Health 12

Current Mental Health Promotion at Ottawa Public Health 13

   Individual Interventions 13

   Family Interventions 14

   Community Interventions 14

   Societal Interventions 15

New Strategic Direction 2015-2018 Fostering Mental Health in Our Community 16

   OPH Envisions 16

   Long-Term Objectives 16

   2015-2018 Ottawa Public Health’s Short-Term Mental Health Plan 18

Conclusion 21

Appendix A: Dual Continuum of Mental Health and Mental Illness 25

Appendix B: Summary of Supporting Documents 27

Appendix C: Mental Health Promotion Ottawa Charter Strategies 29

Appendix D: Population Mental Framework for Public Health 32

Appendix E: Mental Health Promotion across the Ages and Stages 35

Appendix F: Summary of OPH’s Mental Health Plan 37
Executive Summary

The need to address poor mental health, mental illness and addictions in Ottawa is clear and supported by epidemiological data, best-practice evidence, and community and internal calls to action. Mental health promotion is critical in reducing the burden of poor mental health, mental illness and addictions, including the significant personal and economic implications. Ottawa Public Health (OPH) plays a pivotal role in mental health promotion through existing partnerships and programming.

By explicitly including mental health promotion within programs and services, OPH has the potential to enhance overall health outcomes for Ottawa’s diverse communities. OPH has supported mental health promotion for many years through programming aligned with the Ontario Public Health Standards. More recently, concerted effort on children and youth mental health promotion and older adults’ mental health occurred through the 2011-2014 Child and Youth Mental Health Promotion and Suicide Prevention Strategy and the Senior’s Healthy Aging Strategy 2011-2014. These focused activities highlight the value OPH can have working with partners to address mental health concerns in Ottawa and the importance of supporting mental health promotion throughout the lifespan.

In spring 2015, the Ottawa Board of Health set Foster Mental Health in our Community as a strategic direction for the next three years. Three focus areas were identified based on the values of health equity, protection of mental health, promotion of mental health, and early detection of poor mental health across the lifespan. The three focus areas are:

- Mental Health Awareness and Stigma Reduction
- Towards a More Resilient Community
- Suicide Prevention

These focus areas align with national and provincial recommendations, best practice research, a population mental health approach, and compliment rather than duplicate existing community efforts.

Mental Health Awareness and Stigma Reduction

Misconceptions, stigma and the lack of clarity that surround mental health and mental illness make implementing high-level, population focused mental health promotion strategies challenging. These factors, along with the belief that physical or mental health can exist in isolation, are barriers to moving mental health promotion and prevention efforts forward. As a result, OPH will work to enhance mental health awareness and literacy among internal staff and increase their capacity to incorporate a mental health lens when planning, implementing and evaluating public health programming. OPH will also work to promote positive mental health, decrease the stigma of poor mental health, mental illness and addictions, and encourage help seeking behaviour, through mental health promotion campaigns that expand on the “have THAT talk” series already in place. In addition, OPH, along with our partners, will support local surveillance and reporting of mental health indicators and the
incidence and impact of mental illness and addictions using the Public Health Agency of Canada (PHAC) positive mental health indicators.

Towards a More Resilient Community

A population mental health approach crosses all ages and stages of life with the aim of promoting mental health in the entire population. OPH will adopt the Population Mental Health Framework for Public Health that focuses on enhancing modifiable protective factors for positive mental health while addressing inequities in health that affect the development of poor mental health and mental illness. By using this approach, the whole population moves along a continuum towards positive mental health and reduces the severity and impact of mental illness. OPH will focus on increasing protective factors at the individual, family, community and societal levels across the lifespan. OPH will continue to support individual interventions and promote activities that encourage healthy coping strategies across all ages. As well, OPH will increase interventions at the community and societal levels to support healthy social norms relating to alcohol, reduce harms from prescription medications, enhance system integration through collaboration with our partners and support psychologically healthy work settings.

Suicide Prevention

OPH will continue its advocacy efforts with over 50 local organizations in the Ottawa Suicide Prevention Network and Ottawa Suicide Prevention Coalition to enhance suicide prevention policies, interventions and programs. As well, OPH will maintain and strengthen its partnerships to increase suicide prevention trainings, enhance communications around resources and the use of safe language, as well as contribute to post suicide supports in order to become a suicide safer city.

Mental health is an inseparable component of overall health, and therefore is of critical importance to population health. OPH is in a strong position to address the promotion of mental health in order to achieve overall benefits in health.
Defining Mental Illness and Mental Health

Mental illness is a medically recognized and diagnosable illness that results in significant impairment of an individual’s cognitive, affective or social abilities¹. There are many types of mental illness including addictions, which vary in degrees of severity and may result from a combination of biological, developmental, or psychological factors².

The World Health Organization (WHO 2001) defines mental health as:

“A state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her own community.”

Most definitions of mental health identify common factors such as the capacity to enjoy life, to contribute to the community, to deal with challenges and adversity, to use one’s abilities, to achieve goals, and to sustain meaningful relationships with others³. Mental health is the foundation for individual well-being and the effective functioning of a community⁴.

It is important to note that mental health and mental illness are dynamic states and not mutually exclusive. Although four out of five, or 80% of the population do not experience a mental illness or an addiction in their lifetime, they still may not experience optimal mental health⁵ (see Appendix A for a description of the Dual Continuum of Mental Health and Mental Illness).

Positive mental health protects people from the stress of everyday life, and can reduce the risk of developing poor mental health and mental illness⁶. Mental illness and mental health are interrelated concepts that can co-occur in individuals, thereby demonstrating that positive mental health is not merely the absence of disease⁷.⁸.
A Public Health Issue

Poor mental health, mental illness and addictions represent a significant societal burden through reduced life expectancy, impaired quality of life, and increased health care demand. The estimated economic burden of mental illness in Canada is $51 billion per year and $22.8 billion for problematic substance use. The personal and economic burden affects health care, law enforcement, loss of workplace and home productivity and reductions in health-related quality of life. There is a strong connection between mental illness and addictions. At a national level, 15 to 20% of patients seeking mental health services also had an addiction, and over 50% of patients seeking addiction services had a mental illness. Depression represents the single largest contributor to the burden of disease among Canadians aged 15 to 59, and compared to any other disease, depression causes the greatest number of years lost to premature death and disability. In Ontario depression accounts for more than 1.5 times the burden of all cancers, and seven times the burden of all infectious diseases.

In Ottawa, poor mental health and mental illness continue to be significant public health issues:

- Sixteen percent (n=1210) of postpartum mothers self report a mental health concern including anxiety and depression
- One in four grade 7 to 12 students reported visiting a mental health professional at least once in the previous year
- Twelve percent of grade 7 to 12 students reported they had seriously considered attempting suicide in the previous year
- Seventy percent of the students who considered suicide said there was a time in the previous year where they wanted support but did not know where to turn
- Ten percent of Ottawa residents age 19 and over report having a mood disorder and 9% report an anxiety disorder
- Almost a third of Ottawa residents exceed Canada’s low-risk alcohol drinking guidelines and 44% of adults reported binge drinking at least once in the past year
- There are at least 110 deaths related to alcohol misuse and approximately 46 drug overdose deaths annually
- On average 67 people die by suicide in Ottawa every year and over 1,300 emergency room visits were reported due to self harm among Ottawa residents

Mitigating the impact of these health issues is important to sustaining a healthy city.
The Need for Action

Over the last number of years, national and provincial reports have highlighted the importance of mental health promotion in reducing the burden of mental illness and addictions, including the significant personal and economic implications (see Appendix B). Reports emphasize the urgent need for prevention, with children and youth as a priority, and encourage mental health promotion across the lifespan. Other recommendations include: stigma and discrimination reduction; programs, services, and policies that improve access to economic resources and address inequities for vulnerable populations; and continued suicide prevention work.

The Ontario Public Health Standards (OPHS)

In Ontario, the OPHS outline the mandatory health programs carried out by the 36 public health units across the province. The standards mention mental health risk and protective factors, such as resiliency, but the promotion of mental health and prevention of mental illness is not a specific requirement in OPHS. However, six OPHS Guidance Documents explicitly discuss mental health and its determinants.

For example, both the Prevention of Injury and School Health Guidance documents note suicide as an important area for intervention and recognize mental health promotion as a key component of an inclusive suicide prevention strategy\textsuperscript{15}. The protective factors of suicide are strongly linked to the key determinants of mental health: strong family connections, supportive communities, restricted access to means of suicide, skills in problem solving, conflict resolution and non-violent handling of disputes, as well as access to quality mental and physical health care\textsuperscript{16}. Public health strategies and interventions can enhance many of these factors.
Population Mental Health Promotion

Health promotion efforts that focus on the determinants of health, strengths, resiliency, and capabilities of individuals and the community have been shown to be effective. Health promotion, defined in the Ottawa Charter as “the process of enabling people to increase control over and improve their health”17, is a key strategy in public health practice with interventions based on the idea that health and illness is the product of dynamic interactions between psychological, biological, environmental, social, economic, and political factors18 (see Appendix C). Health promotion interventions typically promote positive health, instead of addressing ill health and this is also true for mental health promotion.19 OPH sees mental health promotion as “the process of enhancing protective factors that contribute to positive mental health.”20

Public health focuses on changing peoples’ and societies attitudes and practices regarding lifestyle choices (health promotion), preventing conditions that may put health at risk (health protection), and early detection of health problems (screening). OPH is in a good position to address the promotion of mental health because of its population health focus. Mental health promotion is based on a socio-ecological approach to mental health, addressing individuals, families, communities, and the greater society in an effort to increase mental health capacity across populations21. While the concepts of prevention and promotion are closely related, mental health promotion interventions are not expected to cure or treat serious mental illness22. Mental health promotion requires a multi-level and multi-faceted approach.

As well as adopting a population mental health approach to guide future work, OPH integrated Keyes’ Dual Continua Model of Mental Health and Mental Illness into our approach. This model includes the dynamic concepts of no mental illness, mental illness, optimal mental health, and poor mental health (See appendix A). OPH staff work with people in all four quadrants of this model as they often interact with clients who may be experiencing dynamic states of poor mental health and optimal mental health, as well as mental illness or addictions. Mental health promotion can occur at any stage along the continuum and fits well with the work of OPH staff.

Harm reduction is another essential part of a comprehensive response for public health programming and helps guide OPH programming. A harm-reduction philosophy directs strategies at the whole population, as well as tailoring specific programs for vulnerable people to meet them where they are at. This philosophy tries to reduce harms while recognizing that some individuals may not be ready or able to make changes. Unlike efforts that target the symptoms and deficits caused by poor mental health, these strategies focus on improving quality of life and increasing the potential for health23.
Population Mental Health Framework for Public Health

OPH is adopting the Population Mental Health Framework for Public Health to support Ottawa Board of Health’s strategic direction to Foster Mental Health in our Community.

Figure 1: Population Mental Health Framework for Public Health

A population mental health approach crosses all ages and stages of life with the aim of promoting mental health in the entire population. The Population Mental Health Framework for Public Health focuses on modifiable protective factors for positive mental health while addressing inequities in health that affect the development of poor mental health and mental illness outcomes. By using this approach, the whole population moves along a continuum towards optimal mental health and reduces the severity and impact of mental illness.

There are three main key components of the framework:

A. Public Health Interventions

B. Determinants of Mental Health

C. Health Outcomes (mental and physical)

See Appendix D for a more detailed explanation of these three components.
The framework shows the complex interactions involved in creating conditions that contribute to positive mental health. The framework supports the need for public health interventions and policies that focus on individual, family, community and society over the course of the lifespan.
Mental Health Promotion History at Ottawa Public Health

OPH has recognized the importance of and been involved in mental health promotion for many years. For example, OPH’s family health programming supports families experiencing challenges that put their child’s development at risk including: physical health problems, parenting challenges, postpartum mood and anxiety disorders, intimate partner violence, addictions, post traumatic stress disorder, infant mental health. The Healthy Sexuality and Risk Reduction Unit provides clinical and social support for priority populations including people who use drugs, people involved in the sex industry, and high risk youth.

In May 2011, Ottawa’s Board of Health approved the three-year OPH Mental Health Promotion and Suicide Prevention Strategy for Children and Youth to respond to growing concerns about youth suicide and the lack of mental health promotion services in Ottawa. The strategy also addressed gaps that community partners and local mental health experts identified. The City of Ottawa allocated $300,000 annually to OPH to implement the strategy with a focus on three major priorities: community engagement, parental engagement and suicide prevention. With the older adult population, OPH implemented the OPH 2011-2014 Seniors Healthy Aging Strategy to address social isolation, caregiver support and fall prevention in older adults. OPH continues to work with partners on these initiatives and supports the City’s Older Adult Plan in becoming an Age-Friendly City.

Since the implementation of these strategies, OPH has integrated mental health promotion across OPH programs and services, with particular efforts to improve access to services and support for children and youth as they transition between settings and services and support for parents. Recognizing the need to integrate mental health promotion with substance misuse prevention, OPH has worked to increase awareness of and provide referrals to addiction partners and services.

Finally, OPH has been a leader in promoting mental health in Ottawa workplaces by supporting and advancing the implementation of the Mental Health Commission of Canada’s Psychological Health and Safety in the Workplace standard. In fall 2014, with the support of OPH and its partners, Ottawa City Council passed a motion to identify the importance of mental health in the workplace. Ottawa is now the first city in Canada and largest in the world to offer safeTALK suicide prevention training to all of its 17,000 employees.
Current Mental Health Promotion at Ottawa Public Health

OPH is involved in many mental health promotion activities across the lifespan that align with individual, family, community and societal interventions outlined in the Population Mental Health Framework for Public Health. The following section describes some of these. For a complete list of current interventions, see Appendix E.

Individual Interventions

OPH works with populations to promote mental health by enhancing individual protective factors to mental health such as resiliency, coping, nurturing childhood experiences, and healthy lifestyles. Examples of work include;

- Promotion of healthy lifestyle messaging across OPH programs and services through a wide variety of settings and social media such as: workplaces, community groups, partner events, Aging in Place buildings, religious and cultural centres, Sexual Health and Dental clinics, as well as the Parenting in Ottawa website and Facebook page

- Assessment of child growth and development, mental health, parenting challenges and family stresses as well as health teaching, counselling, active support, and referrals to community resources through family health programs

- Support for healthy coping through initiatives such as:
  - “Check Your Drinking” on-line self-assessment tool for Ottawa residents to assess their alcohol consumption
  - Health promotion counselling and group facilitation for parents and youth in partnership with Youth Services Bureau, CHEO and the Royal Hospital
  - “Healthy Transitions”, a universal mental health promotion program for grade 7 and 8 students that increases positive coping skills, enhances mental health knowledge and awareness of mental health services
  - Bridges program that ensures clients are linked to services that aim to create a smooth discharge for youth 15 to 24 as they transition from mental health service in the hospital to the community
  - School-based substance abuse counselling for parents and children
  - Harm reduction services for vulnerable populations including street involved youth and adults through OPH’s Site Needle and Syringe Program and the Peer Overdose Prevention Program (POPP)
Family Interventions

Protective factors at the family level relate to quality family relationships and connectedness.

OPH provides services and programs to build family resiliency and support positive care giving through the following programs:

- Growing Healthy programs that promote parent mental health, the parent-child relationship, prenatal education
- Ottawa Best Start programs that provide breastfeeding support, and referral to community programs and services
- “have THAT talk” awareness and education program to help parents talk with their children and youth about mental health issues such as depression and suicide

Community Interventions

Community mental health protective factors include community involvement, social networks, social support, school environment, workplace environment, and neighbourhood built and social environments. OPH provides services and programs to enhance social connectedness through the following programs:

- Consultations and support to workplaces to identify and address issues around physical and mental health as well as help to implement the Psychological Health and Safety in the Workplace standard
- Healthy Sexuality and Risk Reduction Unit that refers clients to social, mental health and addiction services as needed
- Community Connect information sessions that train community members how to identify at risk older adults
- Ottawa Public Health Information Line and 211 that promote services and supports for vulnerable seniors
Societal Interventions

Societal mental health protective factors relate to creating healthy social norms that reduce inequities and discrimination. OPH supports system navigation, advocates for healthy public policy and addresses social norms, through societal interventions such as:

- SafeTALK training that is available to all City of Ottawa staff to increase awareness and understanding of suicide factors and to strengthen the ability of City staff to provide timely and appropriate referral to suicide intervention assistance.

- Advocacy efforts with the Ontario Public Health Association (OPHA), the Centre for Addiction and Mental Health (CAMH), Association of Local Public Health Agencies (alPHa) and other health units to provide evidence based information to various levels of government around mental health promotion, the effects of increasing access to alcohol, and harm reduction services/treatment/overdose resources.

- Advocacy efforts with over 50 local organizations in the Ottawa Suicide Prevention Network and Ottawa Suicide Prevention Coalition to enhance suicide prevention policies, interventions and programs.
New Strategic Direction 2015-2018: Fostering Mental Health in Our Community

From December 2013 to September 2014, OPH asked the public, stakeholders, and staff for feedback on emerging or pressing public health issues. OPH heard from 120 employees, 175 community partners, four members of the Board of Health and 2,000 residents and used this information to guide OPH’s strategic directions from 2015-2018. Mental health was the health issue ranked most often in the top five by the public (42%) and community partners (45%), and was one of the top three issues identified by half of surveyed staff. Child and youth mental health was the sub-issue most frequently mentioned. Other identified issues included access to services and treatment, stress management, bullying, and body image/eating disorders. In addition, community partners (36%) identified addictions as one of the top five health issues of concern.

In spring 2015, Ottawa’s Board of Health announced Foster Mental Health in Our Community as one of its strategic directions for the term of council from 2015-2018. This new strategic direction provided OPH with the opportunity to develop a robust plan of action grounded in need, impact, capacity and partnerships. With the growing evidence that positive mental health is an essential component of overall health and well-being, as well as the community call to make mental health a priority, OPH established a clear vision and long-term objectives for mental health across the lifespan that will guide future work and leverage existing efforts.

**OPH Envisions**

A city where mental health is valued, promoted and protected. There is no health without mental health.

**Long-Term Objectives**

A population mental health approach will be the foundation of programming and services. Individual, family, community and societal factors affect a person’s mental health and overall health. Although mental health and illness outcomes are complex, public health plays a unique role in mental health promotion by enhancing protective factors for health and reducing risk factors for illness.
Based on the strategic direction from the Board of Health, evidence in the literature, an environmental scan and key provincial and national strategy documents, OPH’s Mental Health Plan has three long-term objectives:

1. Promote mental health across the lifespan to improve the well-being of the population
2. Foster supportive environments that enhance mental health where residents live, learn, play and work
3. Influence various sectors to improve the quality and accessibility of services for individuals with mental health issues and their caregivers

**Promote mental health across the lifespan to improve the well-being of the population.**
This means that:

All Ottawa residents have the opportunity to benefit from a community that promotes and protects mental health, prevents the onset or worsening of mental illness, addictions and associated harms. OPH will work with the community to promote protective factors, and reduce risk factors for poor mental health, recognizing the need to have supports for all individuals along the mental health continuum. Activities that promote healthy social and emotional development, healthy coping and enhance healthy living are critical to helping people thrive, deal with adversity and make healthy decisions. OPH will also work on suicide prevention strategies to reduce stigma, inequities and risk factors, while promoting help seeking, social support and protective factors linked to mental health.

**Foster supportive environments that enhance mental health where residents live, learn, play and work.**
This means that:

OPH will help assess community needs and strengths to take action on locally defined mental health promotion priorities. Engaging different levels of government, as well as health and non-health sectors, to consider mental health as an explicit component of health policy will lead to lasting change.

**Influence various sectors to improve the quality and accessibility of services for individuals with mental health issues and their caregivers.**
This means that:

Ottawa Public Health will play a collaborative role in mental health promotion and surveillance of trends to ensure treatments and supports are based on need and best evidence. OPH will provide surveillance and knowledge exchange with key partners to support children, youth, adults and older adults experiencing mental illness and/or addictions to have timely access to effective interventions and support.
2015-2018 Ottawa Public Health’s Short-Term Mental Health Plan

From 2015-2018 OPH will focus on three areas to enhance existing OPH programming. The initiatives are based on OPH’s values, parameters and long-term objectives within the context of acceptability, feasibility, cost, effectiveness, equity and unintended effects. OPH will also continue to respond to new and growing opportunities with key stakeholders as they arise. The three focus areas for 2015-2018 are:

1. Mental Health Awareness and Stigma Reduction

This means that OPH will:

• Adopt the Population Mental Health Framework for Public Health to focus interventions and policies
• Increase internal staff capacity to use a mental health lens when planning, implementing and evaluating public health programming
• Work to decrease stigma around mental health, mental illness and addictions and encourage help seeking behaviour, through a mental health promotion campaign titled “have THAT talk”
• Support surveillance and reporting of mental health indicators and the incidence and impact of mental illness and addictions with partners in Ottawa

Rationale:

The lack of clarity and misconceptions of mental health and mental illness make implementing high-level, population focused mental health promotion strategies challenging. This lack of clarity, combined with the belief that physical or mental health can exist in isolation, is in itself a barrier to moving mental health promotion and prevention efforts forward. There is a need for all OPH staff to use a common mental health language, and consistent mental health promotion strategies and tools. Working from a shared vision and mental health framework will ensure consistency of messaging and services.

Various national and provincial reports support the need to address stigma that continues to exist around mental health, mental illness and addiction. Efforts to reduce stigma can impact the onset and worsening of illness by reducing treatment delays, reducing isolation, and increasing social support which are protective factors for recovery and well-being. Mental health promotion and awareness activities at a population level will work towards reducing the misunderstandings and stigma of mental illness and poor mental health.

In partnership, OPH will use the surveillance technology developed by the Public Health Agency of Canada (PHAC) to monitor Ottawa’s mental health indicators and to develop a status report to inform and influence health and mental health decision makers.
2. Towards a More Resilient Community

This means that OPH will:

- Increase awareness about the Mental Health Commission of Canada’s (MHCC) Psychological Health and Safety in the Workplace standard
- Increase capacity of Ottawa workplaces to create psychologically healthy and safe environments
- Increase stakeholder engagement on local action related to prescription medications
- With support from partners, increase engagement of health care providers in screening for alcohol misuse and others addictions
- Increase community action for healthy public policy related to alcohol

Rationale:

In adulthood, the workplace represents one of the most effective distribution channels for health promotion. As mental health disability claims become the fastest growing category of disability costs in Canada and with more than half a million people in the Ottawa work force, workplace mental health promotion initiatives take on very real significance\(^{28}\). OPH will continue to support workplaces to implement the MHCC’s Psychological Health and Safety in the Workplace standard to promote and protect mental health in the workplace.

Reducing harms related to opioid use is a local priority because prescription opioid pain relievers are misused more than most illegal drugs in Ottawa. The annual number of drug overdose deaths is approximately 46 (2010 – 2014). Over half (56%) of all drug-related overdose deaths are due to opioid toxicity. OPH will continue to work with key partners to increase awareness of and decrease harms associated with the misuse of prescription medications.

Alcohol misuse is more prevalent than the misuse of illegal drugs or prescription opioid pain relievers among Ottawa residents, and alcohol causes a greater burden of illness and deaths than these drugs\(^{29}\). Almost 1 in 3 Canadian adults said that in the past year they had experienced one or more types of harms resulting from others’ drinking\(^{30}\). With community support and stakeholder engagement, OPH will build a plan for alcohol community action rather than focus on individual change. To achieve community change, interventions need to match the readiness stage of the community. The project will look to gain high acceptability for community action and identify stakeholders who need to be involved to implement local action.
3. Suicide prevention

This means that OPH will work to:

- Increase actions to become a suicide safer city
- Continue its advocacy efforts with over 50 local organizations in the Ottawa Suicide Prevention Network and Ottawa Suicide Prevention Coalition to enhance suicide prevention policies, interventions and programs
- Maintain and strengthen its partnerships to increase suicide prevention trainings, enhance communications around resources and the use of safe language, as well as contribute to post suicide supports in order to become a suicide safer city.

Rationale:

Mental health promotion and suicide prevention are connected. Both of these require strategies to reduce stigma, inequities and risk factors, while promoting help seeking, social support and protective factors. OPH’s role on the Ottawa Suicide Prevention Coalition, the Post Suicide Support team and the Community Suicide Prevention Network, will help to increase suicide prevention awareness, policies, programming and training at the City, in the community and in workplaces.

OPH is committed to preventing deaths by suicide and future harms related to suicide through awareness activities, policy development, and training.

See Appendix F for a summary of OPH’s Mental Health Plan
Conclusion

With key partnerships in place, strong momentum, and political support, OPH can have a significant and positive impact on mental health promotion in Ottawa. Through a variety of strategies aimed at meeting the BOH’s strategic direction of Fostering Mental Health in the Community, OPH will continue to build on previous success and work with our many partners to address the growing needs of our population. Using a population health approach and framework as a guide, OPH will increase internal capacity of staff to meet client needs within diverse communities and develop initiatives to enhance the mental health of all Ottawa residents. OPH is prepared to work diligently to meet our vision of a city where mental health is valued, promoted and protected.
References


Appendix A: Dual Continuum of Mental Health and Mental Illness

Figure 2 Dual Continuum of Mental Health and Mental Illness

Adapted from Health & Welfare Canada (1988), Keyes (2002) and Toronto Public Health (2013). Reference for photo: MacKean, 2011. Adapted from: The Health Communication Unit at the Dalla Lana School of Public Health at the University of Toronto and Canadian Mental Health Association, Ontario; based on the conceptual work of Corey Keyes.

Mental illness occurs on a continuum from showing no symptoms and not having a diagnosis to being diagnosed with a serious mental illness (e.g., anxiety, depression, personality disorder, schizophrenia).

Mental health also occurs on a continuum. A person can have optimal mental health, poor mental health, or be somewhere in between. Optimal mental health is characterized by positive emotions, satisfaction with life, and positive psychological and social functioning (e.g. self-acceptance, positive relationships, personal growth).

According to this dual-continuum model, it is possible to have a mental illness and also be in a state of positive mental health. This is likely to occur when the individual is coping effectively, responding well to treatment, and is experiencing fewer symptoms.

At the same time, it is possible for someone who does not have a mental health diagnosis to be in a state of poor mental health. Perhaps the individual is under a great deal of stress, which has had a negative effect on their mood, thinking patterns, and personal relationships.
While not everyone has a mental illness, we all have mental health. It is important to remember that mental health is not static; one's position on the continuum can fluctuate.

When working with people with good mental health and no diagnosed mental illness, OPH’s role is to support the positive mental health that is already occurring by encouraging the maintenance of health promoting behaviours that support overall physical and mental health.

When working with people who have good mental health and a diagnosed mental illness. OPH has a role in supporting the maintenance of mental health promoting behaviours, such as meaningful employment, education, social inclusion, and community engagement and promoting mental health literacy through the programs and services they provide.

When working with people who have a mental illness and are experiencing poor mental health OPH staff have a responsibility to provide the client with the appropriate public health service and help them connect to other services, including appropriate mental health or addiction services.

When working with people who do not have a mental illness but have poor mental health, OPH staff have a role in supporting these clients to engage in mental health promoting behaviors, such as connecting with community supports, community services, or participating in OPH programs and services that foster positive mental health.
## Appendix B: Summary of Supporting Documents

### Table 1 Summary of Supporting Documents

<table>
<thead>
<tr>
<th>Report</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centre for Addiction and Mental Health Pathways to Promoting Mental</td>
<td>1. Establish a common understanding of Mental Health Promotion (MHP)</td>
</tr>
<tr>
<td></td>
<td>in public health and support the public health workforce to implement MHP at</td>
</tr>
<tr>
<td></td>
<td>the public health unit (PHU) level, across the public health sector and other</td>
</tr>
<tr>
<td></td>
<td>sectors</td>
</tr>
<tr>
<td></td>
<td>3. Align current and new MHP activities with the existing Ontario Public Health</td>
</tr>
<tr>
<td></td>
<td>Standards to/and promote health equity and mental health, 2008 or as current</td>
</tr>
<tr>
<td></td>
<td>4. Continue to leverage partnerships to strengthen MHP in the public health</td>
</tr>
<tr>
<td></td>
<td>system and the mental health and addictions system</td>
</tr>
<tr>
<td></td>
<td>5. Continue to improve and promote the sustainability of effective MHP</td>
</tr>
<tr>
<td></td>
<td>programming with performance measurement and evaluation strategies</td>
</tr>
<tr>
<td>Mental Health Commission of Canada - Changing Directions, Changing</td>
<td>1. Promote mental health across the lifespan in homes, schools, and workplaces,</td>
</tr>
<tr>
<td></td>
<td>2. Foster recovery and well-being for people of all ages living with mental</td>
</tr>
<tr>
<td></td>
<td>health problems and illnesses, and uphold their rights</td>
</tr>
<tr>
<td></td>
<td>3. Provide access to the right combination of services, treatments and</td>
</tr>
<tr>
<td></td>
<td>supports, when and where people need them</td>
</tr>
<tr>
<td></td>
<td>4. Reduce disparities in risk factors and access to mental health services,</td>
</tr>
<tr>
<td></td>
<td>and strengthen the response to the needs of diverse communities and</td>
</tr>
<tr>
<td></td>
<td>Northerners</td>
</tr>
<tr>
<td></td>
<td>5. Work with First Nations, Inuit, and Métis to address their distinct mental</td>
</tr>
<tr>
<td></td>
<td>health needs and acknowledging their unique circumstances, rights, and</td>
</tr>
<tr>
<td></td>
<td>cultures</td>
</tr>
<tr>
<td></td>
<td>6. Mobilize leadership, improve knowledge, and foster collaboration at all</td>
</tr>
<tr>
<td></td>
<td>levels</td>
</tr>
<tr>
<td>Report</td>
<td>Recommendations</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Open Minds, Healthy Minds: Ontario’s Comprehensive Mental Health and Addictions Ten Year Strategy (2014) | 1. Promoting Mental Health and well-being  
2. Ensuring early identification and intervention  
3. Expanding housing, employment supports and diversion and transitions from the justice system  
4. Providing the right care, at the right time, in the right place  
5. Funding based on need and quality |
| Supporting Ontario’s youngest minds: Investing in the mental health of children under 6 (2014) | Effective infant and early childhood mental health policy that includes:  
1. universal promotion to reduce risk factors and promote protective factors  
2. early identification and intervention  
3. evidence-informed mental health programs and practices  
4. recognizing caregivers and families as key in developing a system of care |
Appendix C: Mental Health Promotion Ottawa Charter Strategies (adapted from Toronto Public Health 2013)

Creating Supportive Environments

Creating communities and spaces where people feel supported, included and connected is imperative to experiencing positive mental health. Supportive communities move beyond a focus on individuals and consider interactions between the economic, social, cultural and physical environments\(^1\). While applying a mental health focus to the creation of supportive environments, one major factor that affects the well-being of individuals and the community is the stigma associated with mental health problems and mental illness. Stigma interacts with other determinants of health, such as access to housing, education, employment and social support, which can produce further inequities in health and exacerbate mental health problems.

Community and organizational health promotion efforts that target stereotypes and create safe, inclusive spaces for talking about mental health can reduce stigma. Dialogue on mental health and illness in the workplace, home, school, and community settings is crucial for promoting and fostering positive mental health\(^2,3\).

Strengthening Community Action

Mental health promotion involves empowering communities in active engagement, priority setting and decision-making, as well as the planning and implementing of strategies to achieve better mental health. Advocacy work empowers community members to take action on issues related to health and mental health inequities. It is the process of empowerment, and skills gained in the advocacy process, that fosters positive mental health in individuals and communities\(^4\). Facilitating connections within the networks of community partners and resources strengthens community action for positive mental health.

Reorienting Health Services

Reorienting health services requires an approach that integrates health promotion and mental illness prevention into existing treatment and rehabilitation services. This requires a health care system that promotes mental health as a fundamental component of overall health and wellness. Further, this action area requires that public health ensures services are provided in the context of key social determinants of health that have a serious impact on the mental health trajectories and outcomes for individuals and communities\(^5\). This may include working with partners to reach out to the most vulnerable to maintain their overall well-being.
Building Healthy Public Policy

Applying the mental health promotion lens to policy decisions can facilitate change toward positive mental health at the systemic level. Incorporating the mental health lens into decision-making ensures that policy makers look at how their decisions will affect the mental wellbeing of entire systems. Healthy public policy has the potential to put mental health on the agenda for decision makers, and highlights the need to take an integrative and action-oriented approach to improve mental health through health, social and economic policies. Investment in social policy, implementing legislation and regulations, partnership building and organizational change are some of the varied approaches to building healthy public policy supportive of mental health. This area of work highlights the importance of recognizing the influence of policies beyond the health sector and their influence on the determinants of mental health.

Developing Personal Skills

A person’s ability to deal with the social world through skills such as participation, tolerance and mutual responsibility that enhance mental well-being is linked to the development of personal skills. Healthy early attachment, positive early bonding, communication and relationship building all contribute to positive mental health. Further, the ability to learn, cope with adversity, manage conflict and physical health issues, as well as maintain positive sense self-esteem are important personal skills and noted determinants of mental well-being. This action area highlights the need to improve mental health literacy by enhancing knowledge and understanding of positive mental health and its importance in overall health and wellbeing.
References


Appendix D: Population Mental Health Framework for Public Health

Figure 3 Population Mental Health Framework for Public Health

There are three main key components in the population mental health framework for public health:

1. **Public Health Interventions**
   - Public health interventions can be directed to individuals, families, communities or society. Individual interventions are directed towards the individual activities that enhance healthy social emotional development (social competency), healthy coping mechanisms and lifestyles that protect and enhance mental health. These interventions may include promoting healthy eating and active living behaviours, self-esteem and problem solving skills.

2. **Determinants of Mental Health**
   - Determinants of mental health include both modifiable and unmodifiable factors:
     - **Modifiable**:
       - Age
       - Genitalia
       - Sexual Orientation
       - Migrant Status
       - Genetics
     - **Unmodifiable**:
       - Gender
       - Ethnicity
     - Community
     - Societal

3. **Health Outcomes (mental and physical)**
   - **Mental Health Outcomes**:
     - Mental Illness
     - Mental Health
   - **Physical Health Outcomes**

And the components interact and have an effect on each other.

Adapted with permission from Mantoura et al., 2014
family members and within communities. Enhancing positive care giving can play a role in promoting attachment, supporting parent-child relationships and encouraging social connectedness later in life.

Community interventions are focused on increasing connectedness as connecting to others and having social ties within a community promotes positive mental health by fostering feelings of attachment, self-esteem and companionship. Connectedness can mediate stress by providing support, coping mechanisms, and both formal and informal resources, such as financial assets or information. Social connectedness helps create healthy settings where people live, learn, work and play.

Societal interventions aim to support healthy social norms and enhance system integration. Societal interventions may include advocacy work and supporting policies that reduce inequities, discrimination and increases access to services and supports.

2. Determinants of Mental Health

There are modifiable and non-modifiable determinants of mental health that affect mental health across the lifespan.

Un-modifiable factors are age, gender, ethnicity, sexual orientation, migrant status and genetics. It is important to consider these non-modifiable determinants of mental health when planning programs as tailored interventions may be required.

3. Health Outcomes

There are two types of health outcomes

• Mental health outcomes
• Physical health outcomes

It is important to adopt a holistic approach to mental health that recognizes that physical health and mental health are inseparable. There are many examples of an individual’s physical health affecting their mental health. Research supports that individuals living with conditions like cancer, diabetes and heart disease have an increased probability of poor mental health and depression. Conversely, individuals affected by depression live with an increased risk of heart disease and other chronic physical health conditions. Poor mental health is associated with risk behaviours at all stages of life. Examples include tobacco use, substance misuse, unsafe sex and other risk taking behaviours.

Public health has an important role to play in mental health promotion, given that mental health is often a key mediator in the pathway between social determinants of health and various physical health outcomes. The adoption of behaviours to improve physical health is firmly rooted in the well-being and mental health of individuals. Positive mental health is a protective factor against chronic physical conditions while poor mental health reduces people’s ability to engage in healthy behaviours.
References


Appendix E: Mental Health Promotion across the Ages and Stages

Prenatal:
• In-person Prenatal Classes
• Pregnancy Circles
• Online Prenatal Program
• Healthy Babies Healthy Children (0-6)
• Parenting Portal (0-18)

Babies and Early Childhood:
• Screening Clinics Parenting in Ottawa Drop ins, Growing Health (0-6)
• Childcare Intermediary Training
• Healthy Babies Healthy Children (0-6)
• Parenting Portal (0-18)

School Age:
• Curriculum/School Support
• Liaison with four school boards
• Parenting Portal (0-18)
• Healthy Transitions (Mental Health Promotion Program)

Youth:
• Healthy Transitions (Mental Health Promotion Program)
• Bridges Program (13-18)
• Sexual Health Drop-ins
• School Based Substance Abuse Counselling
• Parenting Portal (0-18)
• safeTALK Suicide Prevention Training
• Dave Smith Youth Treatment Centre Outreach
• Harm Reduction Drop-in
• Site Needle and Syringe Program
• Daisy’s Drop-in
• Spectrum Drop-in
• Tobacco Prevention and Control
Young Adult:
• Tobacco Prevention and Control
• safeTALK Suicide Prevention Training
• Sexual Health Drop-ins
• Bath House Outreach
• Peer Overdose Prevention Program
• Daisy’s Drop-ins
• Site Needle and Syringe Program
• Spectrum Drop-in
• Harm Reduction Drop-in
• Check your Drinking
• Workplace Health Outreach
• Psychological Health and Safety in the Workplace

Adult:
• Workplace Health Outreach
• Psychological Health and Safety in the Workplace
• Check your Drinking
• Caregiver Support
• safeTALK Suicide Prevention Training
• Bath House Outreach
• Site Needle and Syringe Program
• Tobacco Prevention and Control
• English as a Second Language Mental Health Lesson Plans
• Peer Overdose Prevention Program
• Daisy’s Drop-in

Older Adult:
• Age Friendly Ottawa Support
• Caregiver Support
• Elder Abuse Prevention
• Access to Fall Prevention Exercises
• Aging in Place Community Housing
• safeTALK Suicide Prevention Training
• Site Needle and Syringe Program
• Tobacco Prevention and Control
• Peer Overdose Prevention Program
Appendix F: Summary of OPH’s Mental Health Plan

Vision:
A city where mental health is valued, promoted and protected.

Long term Objectives:
• To improve mental health and well-being of the population
• To create supportive environments that values mental health where residents live, learn, play and work
• To improve quality and accessibility of services for people who experience a mental illness and poor mental health and their caregivers.

2015-2018 OPH areas of focus:
• Mental health awareness and stigma reduction
• Towards a more resilient community
• Suicide prevention

Strategic Initiatives:
• Have THAT Talk optimal mental health and stigma reduction campaign
• Mental health epidemiological report
• Mentally healthy workplace
• Reducing the harms of prescription opioids
• Culture of alcohol moderation
• Suicide safer Ottawa