Calgary Council for Addiction and Mental Health

Calgary Council for Addictions and Mental Health:

Rapid Response Committee to Women's Mental Health Services

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OVERVIEW

The Calgary Council for Addiction and Mental Health (CCAMH) formed in June 2015 and brought together various community leaders in both addiction and mental health to consult and investigate current collaborative efforts in the mental health and addiction sector. As of September 2015, over 30 agencies and community organizations became members of this collaboration. Committee members include non-profit organizations, government agencies, and community foundations.

The Committee aims to provide a strong and unified voice, promoting the better delivery of competent, integrated, efficient and effective person-centered mental health and addiction services and support. The recent review of the 2015 Government of Alberta document *Valuing Mental Health* and partnership with the current Associate Minister of Health, Brandy Payne, sparked the Committee to create the sub-group of the Rapid Response Committee dedicated to women's mental health and addiction services in Calgary. It is from the creation of this sub-group that this project unfolded.

This sub-committee and project seeks to investigate and make recommendations on the delivery of mental health and addiction programs specific to women and their unique and evolving needs. Recommendations will be based on where the service can fill a need not currently being served and/or current service models available that are outstanding. The project was built upon the following framework:

Meeting Time	Deliverables	Methods
June 28 2017	Introduction and Themes	Literature review and conversations with women with lived experience in the systems of mental health/addiction
July 18 2017	Gaps in Service	Environmental scan of services available and committee discussion
August 15 2017	Recommendations	Literature review of current mitigation practices and committee discussion
September 12 2017	Draft Report	CCAMH Rapid Response Committee Facilitators

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METHODS

This project was a preliminary action to identify the need for in-depth research into women's unique mental health and addiction service needs and improvement strategies for service delivery. This project utilized primary and secondary research methods: performing an environmental scan of mental health and addiction services for women (Appendix 1); literature review (Appendix 2); and interviews with women who have lived experience navigating the mental health and addiction system (Appendix 3).

Online tools used to perform the environmental scan included: 211; InformAlberta.ca; City of Calgary website.

Literature search key words included: women's mental health, community mental health, mental health education, childcare, caregiving and mental health, mental health waitlists, indigenous women's mental health, mental health stigma, mental health and culture, mental health funding, youth mental health, barriers to mental health service, mental health and poverty. The literature review was limited to articles from 2007 to 2017 and originated from Canada, the UK, and the US.

Reviewed articles of interest that were used as starting points for literature review included: *Valuing Mental Health* from the Government of Alberta, the *GAP-MAP* from the University of Alberta's School of Public Health, and the World Health Organization *Action Plan 2013 – 2020*.

We were able to speak to 12 women about their knowledge and experience in navigating the mental health system. These women were both consumers of services and caregivers. Four of the women were from cultural minorities.

These conversations were also used as a starting point for topics of the literature review. Upon completion of these conversations and an initial literature review, we met with CCAMH Rapid Response Committee members to share our findings and gain further insight into this issue and their feedback. CCAMH Rapid Response Committee meetings happened monthly during the summer.

The following agencies were represented at Committee meetings:
Alberta Health Services
Aventa Centre of Excellence for Women with Addictions
Calgary Counselling Centre
Calgary Healthy Families Collaborative
Canadian Mental Health Association – Calgary Region
Carya
Potential Place
Recovery Acres: CARE for Women
The Women's Centre

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RESULTS AND DISCUSSION

The women we spoke with provided invaluable insight into the navigation of the current mental health system, as both consumers of service and caregivers. From our initial conversations with these women several themes emerged:

- Barriers to accessing services (including cost associated with service programs (i.e. parking, services not covered by insurance, no coverage abroad); child care and support for children with mental health concerns; waitlist lengths; stigma).

- Cultural considerations (incorporating Indigenous approaches to mental health; understanding differences in community and mental health in minority cultures; options to include cultural treatment processes in recovery journey).

- Barriers to change (centralization of services; lack of funding and allocation of funding (i.e. proactive services vs. reactive services); standardization of knowledge among service providers, first responders, and education for family members).

It is from these initial themes that discussion in Committee meetings flowed and gaps in service, specific to education and systemic issues, were recognized and investigated.

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CCAMH RECOMMENDATIONS

The Rapid Response Committee developed four working recommendation statements.

1. **Adopting a systems approach that starts at prevention:**

   Adopt a working framework addressing systemic issues that influence and/or impede women's health, in particular mental health and addiction, that includes sexuality and gender, trauma, domestic violence, cultural, ethnic economic, and disability lenses to better inform the development and delivery of services that meet the needs of women.

2. **Person-centered experiential education:**

   Women from multicultural and indigenous backgrounds share why their experience of mental health and addiction services are unique with service providers and professionals and, how their experiences of gender bias has impacted their recovery from mental illness or addiction. This education style is evidenced to best get the most impact at changing the behaviours of service delivery staff.

3. **Development of policy (service provider and provincial) that focuses on encouraging the further development of protective factors for women and their mental health**

   The Alberta Family Tax Credits and the Calgary Accessible Transit Pass are just two of a number of provincial and municipal polices that have a direct impact on women's experience of mental health, addiction and poverty. Landmark polices such as these will be celebrated and marked by CCAMH while members look to how to replicate these successes with their own agency policy.

4. **Family accessibility for services delivered by CCAMH members**

   When designing and delivering services, Calgary mental health and addiction programs will have incentives to deliver together or partner with childcare services, and make a point of advertising that service sessions are child friendly. Members will be encouraged to use a trauma and gendered lens when designing services to meet the needs of women who access their services.

APPENDIX 1: ENVIRONMENTAL SCAN

This is an electronic reference document that can be delivered upon request.

APPENDIX 2: REFERENCES

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APPENDIX 3: CONVERSATION QUESTIONS

1. What are your top 3 women's mental health needs?
2. Did you feel welcome and comfortable when accessing services?
3. Have you experienced barriers to service or stigmatization of any kind?
4. Were you informed of other services that may be of interest to you when you were accessing services?
5. Do you have experience accessing services in another city/town/province/country? If so, where? How would you rate Calgary when it comes to its available services for women? Do you have any suggestions for improving women's mental health services in Calgary?
6. Has stepping away from your job, schooling, family, other responsibilities, or physical difficulties (i.e. wheelchair accessible office, on a transit route, etc.) affected your ability to access women's mental health services?
7. Did the service you were/are accessing address all of your needs? If no, are there any services that you would like to see available but are not?
8. Do you feel that an acceptable service was accessible to you in an acceptable amount of time?