



Psychiatric Patient Advocate Office

*Eradicating Poverty:
Restoring Hope, Opportunity and Well-being*

July 2008

Psychiatric Patient Advocate Office
55 St. Clair Avenue West
Suite 802, Box 28
Toronto, ON, M4V 2Y7
Telephone: (416) 327-7000
Toll Free: 1-800-578-2343
www.ppao.gov.on.ca

RIGHTS – EMPOWERMENT – RECOVERY



Psychiatric Patient Advocate Office

Bureau de l'intervention en faveur des patients des établissements psychiatriques

July 31, 2008

Deb Matthews M.P.P.
Chair
Growing Stronger Together
Whitney Block, Room 4620
99 Wellesley Street West
Toronto, Ontario, M7A 1A1

Dear Ms. Matthews:

Thank you for the opportunity to participate in the consultation process on Ontario's Poverty Reduction Plan. We applaud the government's commitment to eradicating poverty in Ontario. We believe that this commitment demands monumental social change to make it a reality.

Too many Ontarians are living life below the poverty line. Those living with mental illness are among our most vulnerable citizens and poverty profoundly impacts their physical and mental health and ultimately the quality of their lives and well-being. Poverty has become a barrier that they cannot overcome and a trap that they cannot escape.

We believe a concerted effort must be made to ensure that all Ontarians, especially our most vulnerable citizens have the supports necessary to achieve an acceptable standard of living and to realize their full participation and inclusion in society. As Premier Dalton McGuinty has stated, "tackling poverty is all about showing that we care about one another, we look out for one another and we want everyone moving forward together." We couldn't agree more and this must become our call to action.

Every effort must be made to ensure that all Ontarians have the necessary resources to satisfy their basic needs and to achieve a satisfactory and sustainable quality of life.

Please contact me at (416) 327-7007 or David Simpson, Program Manager at (416) 327-7004, should you need additional information regarding this submission, or if we may be of further assistance in this critical undertaking.

Sincerely,

Vahe Kehyayan
Director

SUMMARY OF RECOMMENDATIONS

ISSUES

Adequate Income

Recommendation:

- The PPAO recommends that the Ontario government significantly increase Ontario Disability Support Program benefits to cover the real costs of living which would allow individuals to secure safe and decent housing, as well as to be able to purchase food and other necessities of life.

Safe, Affordable and Decent Housing

Recommendations:

- The PPAO recommends that the government of Ontario increase investments in housing to ensure that every Ontarian who wants a home has a place to call home.
- The PPAO recommends that individuals be provided with adequate income support so that they can access housing across a continuum from supported housing to independent living.

Education and Employment

Recommendations:

- The PPAO recommends that the government of Ontario make an immediate investment in employment and skill training programs, employment support and mentoring services and job retention programs for individuals with disabilities.
- The PPAO recommends that the government of Ontario address the staggering unemployment rate for individuals with a disability as an urgent priority and as a way to eradicate poverty.

Review of Government Policies and Provincial Legislation

Recommendations:

- The PPAO recommends that the government of Ontario review every law, regulation, policy and program to ensure that government practices don't perpetuate poverty and continue to disadvantage those who are most vulnerable and economically disadvantaged.

- The PPAO recommends that the government of Ontario establish an independent cross-sectoral and inter-ministerial advisory committee to conduct the above review and to report to the people of Ontario their findings and recommendations with respect to removing barriers in government law, policy and practice.
- The PPAO recommends that the government of Ontario develop a comprehensive poverty reduction strategy, in consultation with its citizens, and that there be a legislated requirement that a report be put before the Legislative Assembly of Ontario on an annual basis.

Removal of Barriers to Access and Inclusion

Recommendations:

- The PPAO recommends that the government of Ontario address and prohibit the practice of police services across Ontario releasing non-criminal contact with police, pursuant to the Mental Health Act, as part of a police records check. This will allow individuals with a mental illness to pursue volunteer, educational and employment opportunities and to achieve their dreams and aspirations. This would go a long way in combating the stigma and discrimination faced by individuals with a mental illness.
- The PPAO recommends that the government of Ontario provide free public transportation to all individuals who are in receipt of government benefits, as a way to help individual participate fully in their community, achieve their full potential and break the cycle of poverty and dis-empowerment.
- The PPAO recommends that the government of Ontario institute a universal “pharma-care” plan as a way to ensure that all Ontarians have access to the medications that help them be well and remain well.
- The PPAO recommends that the government of Ontario ensure that all Ontarians have access to primary health care services and access to the medical services and supports that help them remain well across the lifespan.
- The PPAO recommends that the government of Ontario institute a universal dental and vision care plan that addresses the needs of all Ontarians.
- The PPAO recommends that the government of Ontario institute a universal home care plan for individuals with a mental illness as a way to support people to remain in their own home for as long as possible or return from hospital to their home upon discharge. This will support independence and allow the individual to remain part of their chosen community which will break down the sense of isolation and disconnect from the community at large.

- The PPAO recommends that the government of Ontario review the scope and level of insurance coverage that is currently available to Ontarians with disabilities, including those with mental illness to ensure that they have equity of access to all insurance products currently sold by the industry.
- The PPAO recommends that the government of Ontario institute a universal child care program that will be viewed as an early learning program that gives children a strong start in life. This will be key to helping parents balance the demands of work and family.
- The PPAO recommends that the government of Ontario provide a full range of mental health services and supports to newcomers that are culturally appropriate and available in their first language.

Submission of the Psychiatric Patient Advocate Office Eradicating Poverty: Restoring Hope, Opportunity and Well-being

Introduction

The Psychiatric Patient Advocate Office (PPAO) was established in 1983 as an arm's length program of the Ministry of Health and Long-Term Care to protect the legal and civil rights of inpatients in the current and divested provincial psychiatric hospitals. The PPAO now also provides rights advice services to individuals living in the community and being considered for the issuance or renewal of a community treatment order (CTO), and their substitute decision-maker, if any, and to patients in Schedule 1 hospitals where the PPAO has been designated as "rights adviser."

The PPAO provides independent and confidential advocacy (instructed, non-instructed and systemic), rights advice and education. Using information, education, and referrals, we support self-advocacy and promote self-determination by working to empower mental health consumers to make informed decisions. Our vision is that persons with mental illness in Ontario will be treated with dignity and respect, that their legislated rights and entitlements are upheld at all times, and that they are actively involved in decisions affecting their life, care, and treatment. In 2007, the PPAO addressed 4,140 individual advocacy issues; these included 1,250 therapeutic issues, 842 social issues and 2,048 legal issues. In 2007, the PPAO also received 6884 requests for rights advice in nine tertiary care psychiatric facilities and one remaining provincial psychiatric hospital. The PPAO's Community Rights Advice Service received 16,254 requests for rights advice in 2007. The PPAO provided service in 45 languages. This year the PPAO celebrated the 25th anniversary of service provision to the people of Ontario.

Poverty across the Lifespan

Ontario is changing and so are its people. Our population is aging, more children are growing up in lone parent families, immigration is on the rise and our social service and health care systems are facing ever increasing demands and higher expectations from the people they are intended to serve. At the same time, many of our citizens are just one pay cheque away from not being able to provide for their families and from ending up living life below the poverty line. Life circumstances can change and often when they do this results in individuals and families being plunged into crisis and finding themselves in a trap from which they cannot escape – poverty.

For individuals with disabilities, including those with a mental illness, living life on Ontario's social assistance benefits is a life of government imposed poverty and hardship. Benefit rates are calculated so that individuals with disabilities can "exist" but nothing more. Benefit rates are predicated on the old Victorian mantra, "survive not thrive" and that everyone should "pull themselves up by their bootstraps." This is outdated thinking and not reflective of the values, ethics or social responsibility to create a caring, inclusive and supportive community. We all have a role to play in the eradication of poverty.

We must examine poverty through many lenses and from many and varied perspectives. We must see poverty through the lens of disability, diversity, vulnerability, inclusiveness, social

responsibility, family composition, culture, race and ethnicity if we are to make changes. Each lens brings to bear a different and unique perspective and each must be examined as it has an impact on the strategies for overcoming poverty and its dis-empowering consequences.

The government of Ontario must examine poverty and its impact across the lifespan, from cradle to grave. A child raised in poverty is more likely to replicate the cycle of dis-empowerment and poverty and as such an array of services and supports must be put in place to support families living in poverty in raising their children. It has been said that it takes a village to raise a child and services and supports aimed at eliminating childhood poverty are essential. Programs and services like the Best Start Program and the Ontario Child Benefit are small steps towards supporting children in achieving their full potential. However, as individuals progress along the life span they can also be confronted with things that are beyond their control or life events which change the course of their life forever and have an immediate impact on their socio-economic status. Things such as a catastrophic illness, development of a disability, a brain injury, a workplace accident, a divorce or breakdown of a marriage, being a sole support parent, having an age related illness or other sentinel event can plunge the person into poverty.

The government must closely examine the stages of the lifecycle and proactively identify and target areas where it is anticipated that people are likely to struggle and need assistance. For example, moving from childhood to adolescence; from young adulthood to adulthood; and again when entering the later stages of life. From being employed to unemployed or under-employed, from being well to having a physical or mental illness or even when there are changes to family composition created through divorce, separation or sole parenting can have an impact on the financial and emotional health of a family unit, often resulting in a loss of income and potentially slipping below the poverty line.

Poverty impacts all stages of the lifespan and at each stage the needs are both different and unique. For example, a senior who loses their life partner may experience a reduction in their household income which could impact on their ability to stay in their own home and retain their independence. It can impact on their ability to pay bills, to have a decent income or even provide the necessities of life. By examining the lifespan and the various phases, this proactive approach will ensure that the necessary services and supports are in place at each of the critical stages to ensure the individual moves seamlessly from one life stage to the next. If requiring support then the social safety net must be there to assist and support the individual in their time of need and to help them gain a sense of stability and equilibrium as soon as possible. The goal would be to help people retain their independence, to lift them out of poverty and to support them to realize their full potential and contribute to the community to the extent that they are able and willing to do so.

A. Issues

Adequate Income

It is an unfortunate and undeniable fact that many people with mental illness live in poverty. Many of these individuals are not only poor but they live below the poverty line and have a very meagre income on which to support themselves and their families.

Poverty is a formidable and fundamental barrier to inclusion and full participation in society and it often robs individuals of their ability to make a strong and meaningful contribution to their community. For some it robs them of their potential and leads to feelings of hopelessness, disempowerment and despair. The *Accessibility for Ontarians with Disabilities Act, 2005* defines a barrier to “mean anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including...a policy or practice.” The government of Ontario has the power to eradicate poverty by extending a helping hand to those who are most in need and, in so doing, honours and fulfills its obligations under the law.

Government policy has forced people with disabilities living on limited incomes to make difficult financial choices in order to support themselves and their families. In some circumstances individuals have to choose between paying the rent and buying food or other necessities of life. Food security is a real concern for most individuals living in poverty and poor diet and nutrition can lead to other health related problems or reduced life expectancy. Reliance on social supports, such as food banks, church and charitable groups is a way of life for those who are forced to live on the subsistence incomes provided by social assistance and disability pensions.

These forced choices negatively impact on physical and emotional health, eroding self-confidence and personal effectiveness and result in a loss of dignity, respect within the family unit, self-respect and respect within society. For those with a mental illness, the stressors engendered by poverty can trigger a relapse of symptoms and an exacerbation of illness. Having an adequate income and being able to provide for oneself and family are essential to recovery and wellness.

Having an adequate income and being able to provide the necessities of life for one’s self and family is perhaps one of the first steps toward wellness and recovery and the eradication of poverty. Constantly worrying about not being able to provide their families with food, shelter and clothing takes its toll on the mental health and well-being of individuals. For some, it will result in hospitalization, while others will simply become immobilized by stress, thus impacting their physical and mental health. If the government is serious about supporting its citizens, a significant investment will need to be made to provide people with a hand up and the resources necessary to achieve recovery. This will require many Ministries to work together to combat poverty, address the physical, mental and basic needs of its citizens and have a plan in place to support people to move forward. The increase in the minimum wage in Ontario was a positive step but it also means that for many this is not a living wage nor is it likely to lift them out of poverty.

A number of increases are needed, including: a significant increase in social assistance benefits, restoring the 21.6% that was clawed back by previous governments and, the development of a realistic calculation of both the basic needs and the shelter allowance portions of Ontario Works and the Ontario Disability Support Program that reflects the actual cost of living in communities across Ontario.

For those who are gainfully employed, the minimum wage should be raised immediately to \$10.25 per hour as a way to lift the working poor above the poverty line. For both groups, access to an adequate income would have an immediate impact on their quality of life and ability to provide for both themselves and their families.

Recommendation:

- The PPAO recommends that the Ontario government significantly increase Ontario Disability Support Program benefits to cover the real costs of living which would allow individuals to secure safe and decent housing, as well as to be able to purchase food and other necessities of life.

Safe, Affordable and Decent Housing

Having a place to call home is integral to all of our lives and is an essential ingredient of recovery. Access to safe, decent and affordable housings is fundamental to personal and social stability. For individuals living in poverty they are never sure when their struggle to survive financially will overwhelm them and they will lose their housing. For many it only takes one unanticipated event for things to come unravelled. It could be a car repair, a large utility bill, a class trip for their children, buying groceries or unexpected medical expenses that tip the scales and starts the downward trend towards financial hardship and instability for the family unit. For the children in the family this can be very de-stabilizing as they move frequently severing social relationship in their community, attending different schools and fracturing their sense of stability and security. They never know when they will become homeless and this leads to an overwhelming sense of insecurity and instability.

For individuals with mental illness the consequences can be just as devastating. For many they continually revolve through the cycle of being housed, hospitalized homeless and then potentially re-housed on discharge from hospital. Government policies perpetuate this cycle as often after a lengthy period of hospitalization ODSP shelter rates cease, resulting in the individual losing their home and often all of their possession. For many this means starting over every time they become ill and hospitalized. Such policies require review and abolishment if we are to support people in their individual quest for wellness, recovery and seeking the care and treatment when they need it. For many, having to sacrifice your home and your belongings is a high price to pay for gaining access to the care and treatment that you may want and require. Such a cycle ensures that individuals with mental illness will remain trapped in a cycle of homelessness and poverty.

As individuals progress through the different stages of recovery, they may require different types of housing, with varying levels of support and assistance, ranging from supported housing and staged housing to independent living. Thus, it is essential that a full spectrum of affordable housing be available to meet the varying needs of each individual. When people are ready, they should have access to the income necessary to pay market rents so that they can be fully integrated as community members. Current shelter allowances under both the Ontario Works and the Ontario Disability Support Program are inadequate in most communities for individuals to access safe, decent and affordable housing. The government, as a strategy to eradicate poverty should consider implementing a comprehensive rent supplement program for individuals that are in receipt of government benefits or are low income but not earning a working wage. These supplements would need to be immediate so that individuals would not fall behind in their rent, thus facing eviction or be at risk of becoming homeless. Only when affordable housing becomes available will some individuals be able to be lifted out of poverty.

As the governments own Strategy states “housing is more than shelter – it provides stability, security and dignity. It creates a strong base from which to find a job, raise a family and contribute to a community.” We couldn’t agree more but we also need to see more action and commitment because sadly this isn’t the experience of a lot of people in Ontario. The government should require landlords to maintain certain housing standards so that clients can have safe, affordable and decent housing stock from which to choose. Too often individuals who are poor must choose between the “best of the worse” because that is all they can afford. Landlords know this; they prey on these clients and fail to make the investments necessary to raise the calibre and quality of available housing stock in Ontario. The government should inspect, approve and certify all rental accommodation in Ontario on an annual basis, including social housing, to ensure that it meets current standards and that it meets all safety codes. We must strive for more than “minimum standard” housing in Ontario if we are to ensure that people can have a safe, decent and affordable place to call home.

Recommendations:

- The PPAO recommends that the government of Ontario increase investments in housing to ensure that every Ontarian who wants a home has a place to call home.
- The PPAO recommends that individuals be provided with adequate income support so that they can access housing across a continuum from supported housing to independent living.

Education and Employment

For most Ontarians, employment and financial security are of the utmost importance. There is little doubt that having meaningful employment is important to all of us, but it is particularly important to those recovering from mental illness insofar as it promotes self-esteem and supports community membership and inclusion. Accordingly, having a job is an important part of recovery, reintegration into the community and in breaking the cycle of poverty.

Unfortunately, for individuals with disabilities in Ontario, including those with mental illness, there is a staggering unemployment rate but few supports for finding and maintaining employment. For those people with jobs, the work is often of a menial nature or they are paid only a minimum wage. Moreover, if individuals with disabilities are employed, they risk losing access to some ODSP benefits. These disincentives must be eliminated by the government as they represent a barrier to inclusion for people with disabilities.

A labour market environment that is inclusive, responsive and welcoming of employees with disabilities must be fostered and supported by the government. This can be achieved via vocational rehabilitation supports combined with educational opportunities, job coaching, mentoring programs, job shadowing programs and support services. Further education of employees and employers regarding the Accessibility for Ontarians with Disabilities Act is also important.

Recommendations:

- The PPAO recommends that the government of Ontario make an immediate investment in employment and skill training programs, employment support and mentoring services and job retention programs for individuals with disabilities.
- The PPAO recommends that the government of Ontario address the staggering unemployment rate for individuals with a disability as an urgent priority and as a way to eradicate poverty.

Review of Government Policies and Provincial Legislation

Many government policies continue to disadvantage individuals with disabilities and perpetuate poverty. For example, an individual in receipt of ODSP and living with family, receives less shelter allowance than someone living with non-family. This inequity and a government belief that family “should” support someone with a disability seems unfair and is a barrier to inclusion. For individuals that are hospitalized in a tertiary care facility it often means that their ODSP benefits are either cut or terminated after a period of hospitalization and then they have no ability to pay for their housing in the community. An individual should never lose their home simply because they needed or wanted to access medical care and treatment.

Other examples of policies that disadvantage those living in poverty are the clawback of the Child Tax Benefit, deducting child support payments from government benefits, reducing access to the special diet allowance, and deducting earnings or reducing benefits if someone on ODSP has earnings. The government needs to develop a new “mindset” and philosophy in their approach to creating new strategies and innovative ways to combat poverty.

We would recommend that the government review every law, regulation, policy and program to ensure that government practices don’t perpetuate poverty and continue to disadvantage those who are most vulnerable and economically disadvantaged. Further, we would recommend that

an independent cross-sectoral and inter-ministerial advisory committee be established to conduct this review in a timely manner and to report back to government on their findings and recommendations. To increase accountability and transparency it would also be advisable to hold public hearings so that as many citizens of Ontario could engage in the process as possible.

Last of all, the government of Ontario should consider the development of a comprehensive poverty reduction plan with achievable goals and targets and that they report annually on the progress of the plan to the provincial legislature. This will increase accountability and create public awareness by the people of Ontario. It would also be prudent for the government to have a “poverty czar” that had broad powers and authority to work across Ministries to bring about substantial change and implement strategies that would achieve the eradication of poverty in short order.

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- The PPAO recommends that the government of Ontario establish an independent cross-sectoral and inter-ministerial advisory committee to conduct the above review and to report to the people of Ontario their findings and recommendations with respect to removing barriers in government law, policy and practice.
- The PPAO recommends that the government of Ontario develop a comprehensive poverty reduction strategy, in consultation with its citizens, and that there be a legislated requirement that a report be put before the Legislative Assembly of Ontario on an annual basis.

Removal of Barriers to Access and Inclusion

There are many barriers to inclusion that confront individuals with mental illness that are perhaps unique to them and which serve to dis-empower them as they strive for wellness and recovery, to achieve their full potential and participate in the community. Each serves as a barrier, a disincentive and is part of their economic dis-empowerment. Following are a few examples of some of the barriers and obstacles faced by individuals with mental illness, the working poor and those who are unemployed or under-employed:

a. Police Records

When an individual has non-criminal contact with the police pursuant to the *Mental Health Act* it generates a “contact with police” notation on the police record of the individual. The fact that police are releasing this information as “information of

concern” it often results in the individual wrongly losing the volunteer or employment position that they were seeking. Many people think that this information is personal health information, related to mental health care and that it should be protected under the law and banned from disclosure by police services. The fact that police release this information as part of a record check reinforces the stigma, discrimination and fear associated with mental illness. In recent years the trend towards criminalizing individuals with a mental illness has resulted in this practice impacting countless Ontarians.

The Mental Health Police Records Check Coalition and the Ontario Human Rights Commission both believe that this practice is discriminatory as it is the only time that non-criminal contact information is released by police. The Coalition and the Commission are seeking to make systemic change as the current practice is having a devastating impact on individuals with mental illness and other Ontarians as they embark on their journey of recovery.

b. Transportation

The cost of public transportation is often prohibitive and without the ability to move freely around the community many opportunities are lost. Most often individuals with mental illness don't have the money to travel on public transportation to medical appointments, social or recreational activities or to even be able to contribute to the community as a volunteer, to attend school or be actively employed or engage in support programs and services that help them maintain their wellness and recovery. Many are trapped in low paying jobs where they do not earn a living wage and as a result, transportation is unaffordable for them. Others receive only ODSP or Ontario Works benefits and often a bus pass is an elusive “perk” for them. The government of Ontario must consider transportation costs as a barrier to inclusion and a contributing factor to the poverty trap.

c. Access to Medications

Wellness and recovery also requires that individuals with mental illness have access to a broad range of treatment modalities, including access to the newest and most effective medications. Unfortunately, some of these medications are costly, unavailable and out of reach for those who are poor or only in receipt of government assistance. Individuals with a mental illness should have access to a full range of medications and treatment modalities which are covered by a publicly funded health care system. “Cost” should not be an issue; instead, it should be about what would work best for the individual to promote his or her recovery and continued wellness. If the individual is able to maintain their wellness then the insidious impact of poverty will be lessened as they will be able to reach their full potential and contribute to the community. Perhaps now is the time for Ontario to consider a “pharma-care plan” for all its citizens as a way to ensure access, free of charge, to the medications that support wellness and recovery.

d. Access to Medical Services

Many individuals with mental illness or living in poverty do not have great access to medical services and supports and many find themselves without a family physician to provide them with continuity of care. This results in obtaining medical services through emergency departments at local hospitals or by attending at walk-in clinics. This lack of regular medical attention and continuity of care can impact the level, quality and access to medical services which can have an impact on their physical and mental well-being. For individuals living in poverty, access to medical care, support and services must be a cornerstone of any poverty reduction plan.

Some individuals with mental illness do not have access to primary health care services because they have been labelled as a “difficult client” by the medical profession and because of their disability and high need for support they have become “undesirable” patients in the system. Often they are “orphaned” by the very system that is to provide them with medical care and treatment. The government of Ontario should address the specific needs of this population to ensure that they always have access to services when and where they need them.

e. Dental and Vision Plan

Most people living in poverty do not have access to dental or vision plans and often when medical intervention is required the intervention is more extreme than necessary only because of a lack of preventative care. The government of Ontario through its policies will pay for example for a “relief of pain” procedure such as pulling an impacted tooth but then they will not pay for restorative work to be done. This is a disadvantage for those who are poor and it make it difficult for them to have proper dental hygiene or vision care which serves to disadvantage them over the long-term as it has an impact on their physical health. A poverty strategy devoid of these services and supports will not adequately meet the needs of Ontarians.

At the same time the government must address access to footwear and hearing devices so that those living in poverty can access the assistive devices required to meet their needs and participate fully in the community.

f. Home care

Individuals with mental illness are often sent to hospital and kept there for longer periods of time due to a lack of community services that could support them upon discharge. For example, individuals with mental illness have a very difficult time accessing home care and support services and all too often it is because of the fear and stigma associated with mental illness. Access to home care services and supports would ensure that individuals with mental illness could return home from hospital sooner or perhaps even keep them from having to go to hospital in the first place. The government of Ontario needs to make a significant investment in home care services and supports to ensure that individuals with disabilities have an opportunity to get well, to stay well and be able to achieve their full potential while remaining in their own home for as long as possible. Having a place to call home is important as it

provides stability, security and dignity and gives the person a strong base from which to find a job, raise a family and contribute to the community.

g. Insurance Coverage

Insurance coverage is often a problem for individuals with a disability. If there is a “pre-existing” condition, such as a physical or mental disability or even a suicide attempt, this can have an impact on eligibility for disability insurance for income protection purposes, insurance on bank loans, life insurance, short or long-term disability insurance and even the ability to get mortgage insurance on your home. For individuals with disabilities, providing the security of an insurance policy is only an elusive dream and one which they are so often denied. It can impact home ownership, access to life insurance policies and income replacement should they be injured at work.

This contributes to their continued enrolment in the poverty trap and it often means that if they have a catastrophic illness, pre-mature death or other catastrophic life event that they have no coverage. This could potentially put them at financial risk, create undue hardship and even contribute to the financial ruin of the family. It is unfair that in many circumstances insurance coverage is denied simply because the person has a mental illness, a perceived mental illness or a pre-existing condition that excludes them from having insurance coverage that would help them look after themselves and their families, should something unforeseen happen in the course of their daily life as a provider.

h. Child care

The escalating cost of child care has become prohibitive for many families and this can have an impact on their options for child care and the future of the child if they do not have access to a stimulating environment that supports learning, personal growth and development. For some families it means depending on extended family for the provision of child care services, on neighbours and in other cases it means leaving the child with whoever is available and can “watch” the child. In that circumstance it is unlikely that the child is in a learning environment where childhood growth and development is considered.

The government of Ontario should adopt a universal child care program that provides child care services for little or no cost to the family. This would illustrate their commitment to giving every child an opportunity to achieve their full potential and would be a key cornerstone in ending child poverty in Ontario. Access to high quality child care must be considered a priority.

i. Mental Health Services and Supports for Newcomers

Ontario welcomes 130,000 newcomers to the province each year and they provide a range of settlement programs to help newcomers settle quickly and find work. Adapting to life in a new country or province can be stressful and often this takes its toll on the physical and mental well-being of individuals who are new to this country,

especially those who have come from war-torn or police states. However, access to culturally appropriate mental health services and supports in the person's first language are often not available to assist the person during their settlement and adaptation to life in Ontario. In larger urban centres these services may be available but for individuals that settle elsewhere in the province they are often left to fend for themselves without access to professional services and supports. It is for this reason that the PPAO would recommend that the province of Ontario review existing mental health services available to newcomers and address this issue as a priority.

j. Access to Mental Health Services and Supports – Hospital and Community-Based

The government must ensure that all Ontarians have access to a full range of mental health services and supports (these include assessment, referral, treatment, counselling, crisis-intervention services, and case-management supports, access to independent advocacy and rights protection services) that they require across the lifespan. Access to children's mental health care, adolescent psychiatry, and mental health care and treatment in long-term care homes must become a minimum standard for all. Other special populations such as clients with a developmental disability, a brain injury, inmates, individuals with an addiction, or even seniors must be able to have their mental health needs addressed by qualified and caring health care professionals. There is also some concern that access to "bed-based" mental health care in Ontario is becoming more difficult to access and there are fewer beds available to meet the needs of the community. Since there will always be a need for "bed-based" hospital care, it is imperative that the government not reduce access to unacceptable levels thus putting individuals and families at risk. Although the government of Ontario has made significant investments in community mental health services, there are some that believe additional investments must be made to ensure equitable access to mental health care and treatment for all Ontarians.

Recommendations:

- The PPAO recommends that the government of Ontario address and prohibit the practice of police services across Ontario releasing non-criminal contact with police, pursuant to the Mental Health Act, as part of a police records check. This will allow individuals with a mental illness to pursue volunteer, educational and employment opportunities and to achieve their dreams and aspirations. This would go a long way in combating the stigma and discrimination faced by individuals with a mental illness.
- The PPAO recommends that the government of Ontario provide free public transportation to all individuals who are in receipt of government benefits, as a way to help individual participate fully in their community, achieve their full potential and break the cycle of poverty and disempowerment.

- The PPAO recommends that the government of Ontario institute a universal “pharma-care” plan as a way to ensure that all Ontarians have access to the medications that help them be well and remain well.
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- The PPAO recommends that the government of Ontario institute a universal home care plan for individuals with a mental illness as a way to support people to remain in their own home for as long as possible or return from hospital to their home upon discharge. This will support independence and allow the individual to remain part of their chosen community which will break down the sense of isolation and disconnect from the community at large.
- The PPAO recommends that the government of Ontario review the scope and level of insurance coverage that is currently available to Ontarians with disabilities, including those with mental illness to ensure that they have equity of access to all insurance products currently sold by the industry.
- The PPAO recommends that the government of Ontario institute a universal child care program that will be viewed as an early learning program that gives children a strong start in life. This will be key to helping parents balance the demands of work and family.
- The PPAO recommends that the government of Ontario provide a full range of mental health services and supports to newcomers that are culturally appropriate and available in their first language.

B. Strategies for Addressing and Reducing Poverty in Ontario

Comprehensive Definition of Poverty

In order for progress to be made in the eradication of poverty, there must be a common and understood definition of poverty instead of the multiplicity of measures that are currently utilized such as the Low Income Cut-Off, Low Income Measure and the Market Basket Measure. The Market Basket Measure (MBM) takes into account basic needs such as food, clothing, shelter and shelter-related costs, as well as other items that are deemed necessary for social inclusion such as transportation costs, access to a telephone, recreational activities and other items. The MBM is a specified basket of goods and services that a family requires for a decent standard of living and is reflective of actual cost of goods and services in their specific community. Although not a perfect definition of poverty, it is closer to the realities faced by those living in poverty and it may be a good starting place in setting outcome measures and achievable targets.

The definition of poverty must be comprehensive, broad and encompassing and reflect the realities of those living in poverty. It is recommended that stakeholder consultations be held across various sectors when developing the definition of poverty so that the unique and special needs of vulnerable populations are considered and included in the definition. Once there is an agreed upon definition of poverty then the real work can begin, its elimination.

Identifiable, Measurable and Achievable Outcome Measures

In order to eradicate poverty there must be identifiable, measurable and achievable outcome measures defined coupled with target dates for achievement. Only when everyone “measures poverty” and its insidious impact in the same way, will we be able to make progress in its elimination. There must be evidence-based decision making that objectively shows the connection between the strategy, the progress made and the outcomes achieved. All research and data collection should be done by an independent party that does not have a vested or financial interest in the outcome of the research or findings. This will increase confidence in the findings, create transparency and people will have more confidence in the reliability of the data and the recommendations and next steps gleaned from the research. It is hoped that a “made in Ontario” solution for the eradication of poverty can be achieved through active participation of all stakeholders and the people of Ontario.

Co-ordination of Programs, Services and Supports

In developing and implementing a strategy to combat poverty and its impact on the people of Ontario it is essential that there be a co-ordination of programs, services and supports so that individual experiencing the impact of poverty know where to turn to for help and support. Currently too many programs operate in “silos” or eligibility requirements or geographical boundaries keep people from getting the help that they need. Such barriers to services and supports must be erased and a seamless, co-ordinated approach must be adopted. There should never be an individual that “falls through the cracks” or is unable to access services simply

because there is a gap or hole in the social safety net. If poverty is viewed across the lifespan then the government should be able to anticipate the milestones or transitions where the greatest needs are likely to occur and move quickly to address these needs. In adopting a “cradle to grave” approach it is more likely that the government will be able to appropriately respond to the needs of all Ontarians, whether young, middle age or elderly.

It is imperative that all levels of government work together to ensure that all programs, services and supports are co-ordinated, that there is not a duplication of services and that people have timely access to the services and supports that they require. Collaboration amongst all levels of government will be key in eradicating poverty and meeting the needs of all Ontarians. A strong, healthy, educated, informed and vibrant community benefits everyone.

Protecting and Promoting Human Rights and Ensuring Access to Justice

All too often those who are vulnerable and poor are taken advantage of by those who unscrupulous or out to protect their own interest. Ontario needs to not only protect the rights of all its citizens, it also needs to promote those rights. All too often those who are poor and vulnerable are taken advantage of and not protected by labour laws, disability rights legislation, human rights legislation, landlord and tenant legislation (including care homes and homes for special care) and consumer protection laws. Many individuals who live in poverty are not able to protect their own rights and the services and supports in place to protect them all too often fail to do so.

For individuals with a mental illness, advocacy and rights protection services all too often end at the hospital door and on discharge. There has been a failure by the Ontario government to provide independent advocacy and rights protection services to those individuals that receive their care and treatment in the community. However, the government could extend the mandate and services provided by the Psychiatric Patient Advocate Office to all individuals with a mental illness, regardless of where or from whom they receive their care and treatment and this would require only a minimal investment for the Ministry of Health and Long-Term Care. In protecting the legal and civil rights of this vulnerable population the impact of poverty and dis-empowerment could be reduced through the provision of independent advocacy and rights protection services.

The government should also make a significant investment in Legal Aid Ontario to ensure that all Ontarians can not only pursue and protect their legal rights but also realize those rights, should they require legal representation before the Courts. All too often individuals that are poor and vulnerable are overwhelmed by a legalistic and complicated process that they may not full understand. For many the law and legal processes are confusing and complicated. Having a lawyer to assist them in navigating the criminal, civil, or family law justice system would ensure that they could not only defend themselves but ensure that they would have access to justice, access to information and the ability to make informed decisions while defending and realizing their rights.

Many of our clients are disadvantaged and vulnerable, often times a consultation with a lawyer and the provision of summary advice would be of benefit in protecting their rights and privileges. However, many of our clients have literacy issues, find the law difficult to understand or have challenges in communication thus making it difficult for many clients to access legal services. Legal representation is not available to many. In most cases it is a matter of financial eligibility, in other instances it is a matter of a client relinquishing what little financial resources they may have available to them in order to access justice. These are very difficult choices for people who may benefit from access to legal counsel.

Ontario needs to make a concerted effort to extend human rights and other rights protection mechanisms to the people of Ontario as part of its poverty eradication strategy.

Repairing and Strengthening the Social Safety Net

Downturns in the economy, government ideology and budget cuts to social services over the past decade have not only eroded the social safety net but have left it in tatters. Ontarians have always assumed that if they needed help from their government that they would be there to extend a helping and compassionate hand. Sadly, people have learned from experience that this isn't always the case and that they are often left to their own devices, the goodwill of family and friends or the charity of church and community groups just to be able to provide for themselves and their families.

Food banks have become an accepted part of our communities allowing governments to shirk from taking responsibility for providing for its most vulnerable citizens. They are devoid of social responsibility and feel no obligation to provide for the basic needs of those who require assistance. All of this at a time when the Ministry of Health Promotion addresses the benefits of eating healthy and engaging in healthy lifestyle choices. Unfortunately, their silence on the plight of those living in poverty is both telling and remarkable. That Ministry could have played a leadership role in ensuring that all Ontarians, including those in receipt of government assistance had adequate funds to be able to eat healthy, make healthy lifestyle choices and have enough money to put food on their tables, instead of relying on food banks to satisfy their basic needs.

If poverty is to be eradicated in Ontario, the government will need to make significant investments in repairing and strengthening the social safety net, if it is going to be there to catch those who fall and require support. Only then will we be able to say we are a compassionate and caring community of hope and recovery that looks after all its members.

Public Education

All too often individuals with mental illness are also poor and living in poverty and so they face discrimination on two counts. Individuals with both visible and invisible disabilities are often subjected to intolerance and discrimination, thereby impeding their recovery and reintegration into the community. If we are to be an inclusive, accepting and understanding community that

supports individuals with mental illness, we must have zero tolerance for discrimination. Discrimination may be subtle or overt but the impact for persons with mental illness is the same – it injures and diminishes a person’s sense of self. An anti-discrimination campaign targeted at all sectors of society would educate people about the demoralizing impact of discrimination. The public must understand the scope and depth of poverty in our society and that we all have a role to play in its elimination from our communities. A broad based public education campaign would educate the population and enlist their support in coming up with solution focused strategies for addressing the problem. The campaign would help people to be sensitive to the insidious impact of poverty on our fellow human beings and the daily struggles that they face to survive.

C. Conclusion

In conclusion, the Psychiatric Patient Advocate Office supports the government’s vision of eradicating poverty in Ontario and views this consultation process as a first of many steps in a long process. We have, as an organization, advocated for equitable treatment for our clients and see the elimination of poverty as a step towards achieving equity and access and as a support to full participation in society as individuals with mental illness embark on their personal journey towards recovery. Some have advocated for a twenty-five percent reduction in poverty in five years, but there are others that think progress and the eradication of poverty could be achieved much more quickly, to the benefit of all Ontarians.

We support the guiding principles established by the government of shared responsibility, community action, wrap-around services, evidence-based decision making and social innovation and entrepreneurship but we believe that community engagement, citizen participation, consultation and feedback mechanisms should all be added as guiding principles to inform the development of the strategy.

The PPAO believes that in creating an inclusive and accepting society for individuals with disabilities, including those with mental illness, there is much to be done but that as a society we can rise to meet this challenge and to exceed all expectations. It will take much effort on the part of all sectors, but with a strong commitment to the eradication of poverty, investment of resources by the government of Ontario, a change in social policy, recognition by the people of Ontario of the magnitude of the problem and consumer participation and involvement, the vision can become a reality.