



OPSEU CHILD TREATMENT SECTOR

“Advocating for Workers Who Support Children and Families”

Honourable Dwight Duncan
Minister of Finance and Chair of Treasury Board/Management Board of Cabinet
C/o Budget Secretariat
Frost Building North 3rd Floor
95 Grosvenor Street
Toronto ON M7A 1Z1

January 28, 2009

Dear Minister Duncan,

Thank you for the opportunity to provide input into the development of the 2009-10 Provincial Budget. OPSEU represents 3000 front-line workers who are committed to providing quality Children’s Mental Health services that are publicly funded in our communities across this province.

Some initial comments and context:

It has been said that perhaps the best measure of any world government is how it cares for its most vulnerable citizens, in particular those without a voice or vote: our children and youth. Among other things, the current global economic crisis has served to remind us that we are all, in a fundamental way, connected. However, when ‘fear’ and ‘uncertainty’ make their presence known at times like these, we can fall too easily into the cynical and dangerous belief system whose mantra is known to all of us: “every man/woman for his/herself”. This is a temptation we must take special care to resist.

Children’s Mental Health Services exist as an expression of the “value” of “community” and in this way, they are reliant on a government commitment to invest in this value and our Children’s future. The ‘profit/loss’ margin for our services is reliant on the level of investment (or lack thereof) even while outcomes may not be fully realized until the next generation.

Over the past 15 years, whether we have been in good or bad economic times, Children’s Mental Health services have been a lower funding priority as compared to our mandated counterparts in Child Protection, Health and Education. Our core budgets have been flat lined for 13 of the past 15 years with the only two adjustments of 3% and 5% occurring within the past 5 years, despite the 31% cost of living increase within that same timeframe. Core funding allows community based agencies to be reflexive and responsive to a community’s identified needs. While it is acknowledged that there has been targeted investment in specific areas, it has been at the ‘cost’ of our core programs. In 2003 Judith Maxwell of the Canadian Policy Research Network provided a cautionary note about targeted funding models: “The negative side of targeting is the way that boundaries – either income or symptoms of need – are set....If the targeting is based on categories or symptoms, then difficult issues of inclusion and exclusion occur.....While supports are vital for these particular children, those with other mental health challenges are unlikely to receive the same treatment.”¹ Members of OPSEU’s Children’s Treatment Sector know that children thrive when there is stability and predictability in their lives and this principle extends to how our services are funded. For our workers to be able to provide quality services in a timely manner, which are responsive to identified needs, we require the flexibility that is provided within a core/base funding structure.

In the ‘real world’ we know that a child’s mental health can be compromised in a climate of fear. We know that the challenges of poverty and a child’s mental, emotional and physical health are interconnected. We as well know that parents who are struggling with

¹ Judith Maxwell, Canadian Policy Research Network, “The Great Social Transformation: Implications for the Social Role of Government in Ontario”, September 2003, p14.

economic hardship and the resulting mental and emotional impact, rely on services such as Children's Mental Health. We are already experiencing an increase in referrals as a result of the current economic crisis and if the status quo remains, we will not be able to meet the demand.

One reason for this is our struggle to recruit and retain Social Work and Psychology staff due to our non-competitive wage rates, which are estimated to be minimally \$21,000 - \$36,000 dollars per annum less than our mandated counterparts. As a result, we are not keeping Social Workers long and can no longer hire Psychologists full time. Moreover, for the past several years, our Employers regularly request voluntary leaves of absence in an attempt to balance the budget and permanent layoffs are now becoming a sad reality. These challenges lead to further disruption in treatment and contribute to additional wait times. It is very clear to us that there are no dollars left to find in our budgets without further sacrificing programs.

Therefore, within the above provided context, are our responses to your questions:

1. During this period of global economic uncertainty and fiscal challenges, what should the Ontario government's top priorities be for the 2009 Budget?

In times of managing a crisis, there is a risk of losing sight of one's long term goals. It is noted that just one year ago, the government's economic platform envisioned an Ontario that would be "Smarter", "Stronger", "Healthier", "Greener" and a "Better Ontario for families". When designing an action plan during this period of economic crisis, these aspirations must remain as guiding principles. Governments play a vital role in restoring citizens' confidence in their collective future and can achieve this by providing a secure social infrastructure.

Children's Mental Health services are key in building a "stronger" and "healthier" society. We should all be familiar with the basic tenants of "Maslow's Hierarchy of Needs" and understand that the foundational elements of this pyramidal 'structure';

physiological, safety and psychological needs, must first be met before learning and self actualization can be realized. These ‘building blocks’ are in desperate need of repair as we are quickly heading towards collapse due to lack of maintenance. Our social infrastructure deserves the same attention as do our roads and buildings.

To keep this foundation from further deterioration and potential collapse, a minimum of a 3% annualized adjustment to Children’s Mental Health Agency budgets is required in the 2009 budget.

2. During challenging economic times, should the Ontario Government strive to achieve a balanced budget or run a deficit in order to protect priority programs and services?

Balanced budgets are possible in good economic climates. However, at times like these, when we can clearly see that a lack of investment may actually lead to more ‘costly repairs’ to ones ‘house’ in the future, we believe it is prudent to ‘borrow’ with the belief that in doing so, we will reap future dividends and re-coup any short term costs.

Many families in need of Children’s Mental Health assistance are not in a position to afford such privately and rely on publicly funded services. This reality, coupled with many families’ current fears regarding job security and loss of extended health care benefits make it highly probable that any available income will be directed towards primary needs such as housing and food, at the potential expense of addressing a child or adolescent’s mental health needs should publicly funded services not be available. In the Private Sector, Psychologists charge \$120+/hour and Social Workers \$70+ /hour for services that can be provided less expensively through publicly funded Children’s Mental Health Services.

It was recently noted in the “Roots of Violence Report” that: “We believe that in the spirit that created publicly funded education, hospitalization and medicare, it is time for

all of us to recognize that the most disadvantaged among us should have access to excellent public services”². We support this belief and consider publicly funded Children’s Mental Health services to be a “priority program” in need of protection from further erosion of our service capacity, particularly when considering that the costs of placing children and youth in the care of the state, whether through Child Protection or Youth Justice services are much higher in the long run.

3. Given the current fiscal challenges, what government programs could be delayed, phased in more slowly or eliminated?

We in Children’s Mental Health have already experienced years of delays in maintenance and investment in our services and can no longer be placed at the rear of the funding line. The Ministry of Children and Youth Services conducted an extensive consultation process in developing a policy paper on how Children’s Mental Health Services were to be delivered and released in 2005, “A Shared Responsibility – Ontario’s Policy Framework for Child and Youth Mental Health”. It is time that Children’s Mental Health Services be prioritized for investment so that the goals set out in this policy can begin to be realized.

4. What further steps can the Ontario government take to promote economic growth and job creation?

As noted earlier, retention and recruitment issues are of great concern in our Sector. We strive to provide for children, youth and families “help they can count on” and therefore believe we have an ethical responsibility to train the next generation of workers who desire a career in this field. Governments are discussing the need to build into budgets ‘retraining dollars’ to assist workers who have been impacted by the economic downturn and these discussions need to include support for workers in publicly funded social services.

² Roots of Violence Report 2008, p19

In the 1970's and 1980's, many workers who are now employed in Children's Mental Health Services or the Social Services field benefited from training opportunities through government sponsored summer work grants for college and university students, which augmented programs offered through agencies. We encourage the government to consider a re-investment in such programs.

Presently, it appears that many of the 'retraining' programs and 'stimulus' investments being considered are targeted towards jobs and professions that are traditionally held by males. The government is reminded that over 80% of the workforce in Children's Mental Health Services and Social Services in general are women. Investing in public services would ensure that there is some measure of security provided to women and their families who may already be struggling with job loss in the private sector or are head of a single income household. Financial advisors recommend 'diversification' in ones investment portfolio. The same thinking can be applied when creating a stimulus package that strikes a balance between 'priming the pump' of both the private sector and public sector to get the economy moving again. Neither can afford to 'run dry'.

5. How can the Ontario government work more effectively with other levels of government and other key partners during challenging economic times?

- On January 27th, we listened with keen attention to the 2009 Federal Budget, specifically, to hear if the Federal Government is committed, as part of its stimulus plan, to address the deficits in our "social infrastructure". We listened for evidence that there was recognition by government that financial 'stimulus', through increasing transfer payments to the Social Services Sector, is necessary and is considered to be part of a long term social and financial 'investment' strategy. This investment would ensure that the 'prosperity' of Canadian citizens includes their social, emotional and mental well-being. Since the 1995 change from the Canada Assistance Plan (CAP) funding mechanism to the Canada Health and Social Transfer (CHST) formula (now

the CHT and CST), Social Services has been a low to 'no' priority in the federal-provincial block funding transfer arrangements. The 2009 Federal budget document ("Canada's Economic Action Plan") indicated that the government was re-affirming their 2007 commitment, i.e.; that starting in 2009; "The government is keeping the commitment it made in restoring fiscal balance, to long term and growing transfer support to provinces and territories" "The Canada Social Transfer (CST) at \$10.6 billion in 2008-2009, will grow by 3% a year for a total of \$10.9 billion in 2009-2010."³ However, we could not find any additional 'stimulus' dollars specifically tied to addressing the cumulative deficit in spending on Social Service Programs as compared to expenditures that would have taken place under the CAP formula. It was estimated in 2005 that cumulatively, the Social Services sector has lost \$38.5 billion in transfer payments between 1995 and 2006.⁴

We would therefore strongly encourage the provincial government to continue discussions with the federal government as to how to ensure that Social Service Transfer payments are of equal 'weight' and importance to those made in Health (CHT) and Education and that consideration be given to completely separate out the Social Services Transfer portion to highlight its importance.

- We now have over 10 years of experience in respect to the 'outcomes' of downloading funding pressures to communities, individuals and families. The net result is families have been the most impacted as they struggle to manage while community based services continue to be reduced or disappear altogether. Instead of building community capacity, community based services now find themselves in competition for scarce resources compromising our former abilities to be collaborative and be collectively responsive in addressing community needs. Fundraising is dependent on the

³ Canada's Economic Action Plan 2009 p184

⁴ NUPGE "The Underfunding and Accountability Crisis in Canada's Community Based Social Services Sector pgs 14 &16

strength of local economies, which vary greatly across the province, even more so now with the downturn in the manufacturing sector. The provincial government does serve a critical role in ‘equalizing’ the provision of public services across the province, particularly during this time of economic crisis and is encouraged to continue to upload funding responsibilities such as Social Assistance.

- We believe there is merit in creating a tri-partite committee within MCYS with representatives from Labour, Government and Employers to review areas where cost savings can occur and where there have been increased costs as a result of change in government policy. For example, despite the government indicating that children and youth are best served by being close to home, it is understood that travel expenditures within the Child Protection Sector have exponentially increased in recent years. It is worth tracing why this is occurring – are we ‘investing’ in fuel costs or in ‘people’ who can provide services locally? One question worth further examination.

In closing, allow us to be provocative in leaving you with a picture of what Children’s Mental Health looks like in 2008. Senator Michael Kirby once famously called us the “orphans of the orphans”. This powerful metaphor reminds us of a story about orphans, who learned over time that they should not dream nor expect more from their lots in life; they accepted the status quo. But one orphan by the name of Oliver Twist changed everything when he rose to deliver the simple entreaty; “please sir, I want some more”. Today’s Oliver still believes it is possible to receive nourishment enabling him to thrive and develop into a productive member of society.

The children and youth who require mental health services are the ‘children’ of Oliver Twist. And their bellies are growling from hunger because the ‘supper’ they have been fed for 15 years has been watered down to the point of malnourishment.

We will end then with a follow-up question that must be considered when building the 2009 budget – How are the most vulnerable among us being treated? We trust that Children’s Mental Health will find a ‘nourishing’ response to that question on budget day.

Respectfully Submitted,



Deborah Gordon
Chair
OPSEU Child Treatment Sector

Cc: Honourable Deborah Mathews, Minister Children and Youth Services