

The Vital Role of Community Criminal Justice Organizations in Ontario's Mental Health Strategy

Community Criminal Justice Organizations (CCJOs)?

Criminal justice organization all over Ontario, such as the John Howard Society of Thunder Bay (JHS-TB), provide services to those who have become, or are at risk becoming, involved in the criminal justice system. They provide programs that aim to prevent criminal behaviour, whether it be for youth who have behavioural concerns but no charges thus far, or for people leaving prisons and needing support to prevent recidivism.

The services provided take a variety of forms, depending on the agency. Most involve comprehensive assessment, intervention plans, follow-up care and referrals. All are delivered by highly trained staff who understand the criminal justice system and the social and health issues that underlie criminal behaviour.

The JHS-TB in particular delivers a range of essential services, including thorough and timely assessments, early identification and case management. We also run a 48 unit supportive housing facility. Staff are all professional social workers or social service workers with training in mental health and addictions. Every year, thousands of men, women and youth come through our doors seeking support.

Staff at JHS-TB have the qualifications and experience that would allow them to work at any community health agency in the province. And the services provided at JHS-TB are as high quality and professional as those delivered by equivalent staff at any

health agency.

There is as much meaningful, evidence-based, professional mental health and addictions service being delivered at CCJOs, like JHS-TB, as in any traditional mental health setting.

CCJOs include the 18 John Howard Society Affiliates throughout the province, Elizabeth Fry Societies, St Leonard's Society agencies and a host of other local agencies.

Why are CCJOs involved in mental health service provision?

Simply put, clients with mental health concerns who have criminal justice system involvement more often walk through our doors first.

They come to us because we are known to provide services that are accessible, welcoming, safe and knowledgeable for those who have experience with the criminal justice system. We know more about the language, experiences and challenges of this group because we specialize in this area. Our staff have credibility with this client group and have developed unique and creative skills to ensure that they are best meeting their clients' needs.

Where people who become easily aggressive and agitated may end up being 'banned' at many shelters and traditional services, CCJOs like JHS-TB are often still able to provide services safely and professionally.

Our door is the way to effective support for thousands of Thunder Bay residents.

The overlap between the criminal justice system and mental health field

The incidence of mental health concerns and addictions in those involved in the criminal justice system is massive. At JHS-TB, we estimate that 70% of our clients have a current or past alcohol or drug addiction and 40-50% have experienced mental health concerns.

The statistics that are available in this area are slim and mainly from the prison system. At admission, 18% of prisoners were taking a prescribed psychiatric medication and 14% reported having had recent psychiatric or psychological treatment. Mental health concerns, suicide attempts and fetal alcohol syndrome are all vastly over-represented in the prison population.

The rates of addiction are even more concerning: 56% of prisoners in five federal and provincial correctional facilities reported the use of illicit drugs and 28% reported injection drug use during the previous year.

The challenge facing CCJOs

There are virtually no sources of health funding for CCJOs to provide many essential services to our clients with mental health concerns. Without

health numbers, we are ineligible for funding from the Ministry of Health.

When the province began allocating money in 2006 to services for people with mental health concerns and in conflict with the law, we were severely disappointed to find that none directed to CCJOs. This despite the fact that we continue serve some of the highest-risk and highest-need clients in the social service system.

The lack of awareness of our work and the separate stream of services, isolated and disconnected from existing community based service, creates an overlap of service at the ground level. It also creates a failure to address the huge gaps in service support experienced by our clients.

An example occurred during a recent reporting forum in Thunder Bay. A mental health discharge worker addressed the group, claiming to have found housing for her client. In fact, that housing was the JHS-TB supportive housing facility, and the person she was discussing was a client of ours who had never been seen by this mental health worker outside of the institution. JHS-TB provided this client with shelter, food, clothing and supportive programming, all pre and post discharge.

None of these services was funded by

the Ministry of Health. And all of them are services that target the social determinates of health and prevent health crises. Without funding, we cannot continue to provide these essential services.

A significant part of this challenge is the lack of collaboration that occurs when one agency or sector is funded to the exclusion of others who work just as closely with the client group.

To be successful in meeting the sometimes complex needs of Ontarians with mental health concerns and addictions, CCJOs must be included in the equation.

Our Recommendations

- Ensure that resources and recognition for CCJOs are included in Ontario's 10-year Mental Health strategy;
- Include CCJOs, like local John Howard Societies, in consultations and roundtables on mental health and addictions policy;
- Reject the provincial HSJCC submission arguing that all funding in the strategy should be flowed through the health system. Resources should flow to whatever door the client opens, be it an emergency shelter, a hospital or CCJO.

A man named John is released from a provincial prison. He spent time in Thunder Bay as a child and decides to try to make a fresh start there. All his stays in other Ontario communities have led to trouble and conflicts, ending in arrests. Hospitalization. Rehab. Jail. In and out and back in again.

Here's what usually happens: things start out alright. But it's hard to find a job with a criminal record and when his behaviour marks him as being different. Then comes an argument with that guy at the library who's out to get him, John's sure of it. Next, an argument with a landlord about his unit being a mess. Hassle from his worker who wants him to come to appointments at an office building across town. And pills that he doesn't take because the side effects are so unpleasant. Then a night of too many beers, and a fight. And another. The police come and the story starts again.

How do most traditional mental health service providers perceive John? As a non-compliant, aggressive client who resists treatment and fails to take advantage of existing services.

Traditional health service are not the best equipped case managers for every client with mental health concerns. For many, community criminal justice organizations have the unique expertise, experience and services that will best meet their needs.

